IMPACT OF CHILDHOOD TRAUMA ON PSYCHOSOCIAL WELL-BEING OF RESCUED STREET BOYS: A CASE OF GLOBAL HOPE RESCUE AND REHABILITATION CENTRE IN NGONG, KAJIADO NORTH COUNTY, KENYA

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A Thesis submitted in partial Fulfillment of the requirements for the award of the degree of Master of Arts in Counseling Psychology in the Counseling Psychology department, School of Humanities and Social Sciences of Africa Nazarene University

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DECLARATION

I declare that this research is my original work and has not been presented for award of any degree in any other university.

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DEDICATION

I dedicate this research to my son Nathan, who has been my motivation.

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ABSTRACT

Rescued street boys face significant trauma that impacts their psychosocial well-being. Their prevalence globally was worsened by conflicts, fractured family bonds, natural disasters, economic hardships, political changes, and disease outbreaks. Street boys across the globe are exposed to traumatic experiences that severely affect their psychosocial well-being. The study aims to: determine the effects of childhood traumatic events on social relations among the former street boys; establish forms of childhood traumas experienced by rescued street boys; assess the impact of childhood trauma on psychosocial wellbeing of rescued street boys; evaluate the impact of childhood trauma on cognitive development among former street boys and to assess ways of enhancing psycho-social wellbeing of former Street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya. This study was guided by Ecological Systems Theory and Erikson's Psychosocial Development Theory. A descriptive research design was employed, targeting all rescued street boys at the center. The target population comprised over 600 former street boys at the center. A sample of 65 participants was selected using purposive sampling methods. Data collection involved structured questionnaires and in-depth interviews. Quantitative data were analyzed using descriptive and inferential statistics, while qualitative data underwent content analysis. Results indicated that 36.67% of participants reported feeling unsafe during childhood, 33.33% experienced physical trauma, and 25% endured emotional neglect. Deep emotional trauma was the most prevalent emotional issue, affecting 50% of respondents, while cognitive difficulties, particularly problems with concentration were reported by 41.67%. Psychosocial challenges included 38.33% of the boys struggling to maintain a positive outlook when facing adversity. Statistical analysis revealed significant negative correlations between types of traumas, such as emotional abuse ($r = -0.589$) and neglect ($r = -0.518$), and overall psychosocial well-being. The findings concluded that childhood trauma significantly impairs emotional, cognitive, and social functioning among rescued street boys. This underscores the need for trauma-informed rehabilitation programs that integrate emotional healing, cognitive support, and social reintegration. The study recommends full implementation of the Children Act (2022) and fostering multisectoral collaboration to ensure effective, long-term recovery and reintegration of rescued street boys.

DEFINITION OF TERMS

Childhood Trauma: Childhood trauma is defined as adverse experiences during a person's formative years that may include physical, emotional, or sexual abuse, neglect, or exposure to violence, significantly impacting the individual's psychological and emotional well-being.

Cognitive development: In this study cognitive development is mental processes and abilities related to acquiring, processing, and applying information. In the study of child trauma in street children, cognitive skills are an integral component of psychosocial wellbeing, influencing their overall mental and social functioning.

Emotional wellbeing: This is the overall state of a child's emotional health and stability. It encompasses their capacity to understand, manage, and express emotions in a manner that fosters positive psychological development. For street boys who may have experienced trauma, emotional wellbeing involves addressing the impacts of adverse experiences on their emotional states, helping them navigate and cope with emotions in a healthy and adaptive way. It includes considerations of emotional resilience, regulation, and the

ability to form positive connections with others despite the challenges they may face.

Psychosocial Well-being: Psycho-social well- being in this study is an interconnected relationship between psychological and social factors that influence an individual's mental and emotional well-being, as well as their social functioning. It encompasses the dynamic interplay between the mind and social environment, recognizing that psychological and social aspects are intertwined and impact one another. In the context of child trauma in street children, addressing psychosocial factors involves understanding and supporting both the emotional and social dimensions of their experiences to promote overall wellbeing. This may include interventions that consider mental health, coping mechanisms, social relationships, and community integration.

Psycho-social wellbeing: Psychosocial wellbeing refers to the interplay between psychological and social factors that contribute to an individual's overall state of mental health and their ability to function effectively in society. In the context of studying child trauma in street children, psychosocial wellbeing encompasses both the psychological and social dimensions of these children's lives.

Rehabilitation interventions: Its use to the rescued street boys of Ngong are vital in helping them recover from the physical, emotional, and social challenges they face after living on the streets. These programs often include physical therapy to address any health issues or injuries, occupational therapy to develop life skills such as personal hygiene and basic education, and psychological support to heal trauma and build resilience (Smith & Jones, 2021). Additionally, community-based rehabilitation efforts help these boys reintegrate into society by providing vocational training and social support networks. Together, these interventions empower the boys to regain independence, improve their quality of life, and build hopeful futures**.**

Streetism: Streetism is a condition where children live or work on the streets due to poverty, family breakdown, abuse, or conflict. It exposes them to neglect, violence, and trauma, limiting access to education and basic needs. In this study, streetism relates to boys rescued from such conditions and rehabilitated at Global Hope Rescue and Rehabilitation Centre in Ngong, Kenya.

ACRONYMS AND ABBREVIATIONS

ACE:	Adverse Childhood Experiences
CDC:	Centers for Disease Control and Prevention
CSC:	Consortium of Street Children
CTQ-SF:	Childhood Trauma Questionnaire-Short Form
DMM:	Dynamic-Maturational Model
EEG:	Electroencephalography
ELS:	Early Life Stress
EST:	Ecological Systems Theory
FBO:	Faith Based Organizations
IPT:	Interpersonal Trauma
IQ:	Intellectual Quotient
LMICs:	Low and Middle-Income Countries
MCI:	Mild Cognitive Impairment
NACOSTI:	National Commission for Science, Technology & Innovation
NCTSN:	National Child Traumatic Stress Network
NGOs:	National Government Organization
NSSI:	Non-Suicidal Self-Injury
NHCHC:	National Health Care for the Homeless Council
PBT:	Problem Behavior Theory
PHS:	Psychological Sub-Health
PPCT:	Person, Process, Context, and Time
PSTD:	Post-Traumatic Stress Disorder

PTE:	Potentially Traumatic Events
SDQ:	Strength and Difficulty Questionnaire
SPSS:	Statistical Package for Social Scientists
TF-CBT:	Trauma-Focused Cognitive Behavioral Therapy
UNICEF:	United Nations Children's Fund
UNESCO:	United Nations Educational, Scientific and Cultural Organization

CHAPTER ONE

INTRODUCTION AND BACKGROUND INFORMATION

1.1 Introduction

This chapter introduces the study and presents a background of the study variables namely the influence of childhood trauma on psychosocial wellbeing among street boys. The study also presents an analysis of the statement of the problem, purpose of the study, the research objectives, the justification, the scope, the delimitations, and the limitations of the study. In addition, the theoretical and conceptual frameworks of the study are presented.

1.2 Background of the Study

Childhood trauma is increasingly recognized as a critical public health issue across the globe. It refers to adverse experiences in a child's life, such as abuse (emotional, physical, or sexual), neglect, exposure to domestic or community violence, or the loss of a caregiver. These experiences can profoundly disrupt a child's psychological development, often leading to long-term psychosocial consequences (Centers for Disease Control and Prevention [CDC], 2021). According to the CDC's Adverse Childhood Experiences (ACEs) study, there is a strong correlation between childhood trauma and various negative health outcomes, including depression, substance abuse, risky behaviors, and suicide in adulthood (CDC, 2021). Globally, millions of children face such traumatic experiences annually, creating a cycle of mental health challenges, especially in vulnerable populations like street children. In Western countries such as the United States and the United Kingdom, childhood trauma has been widely studied, leading to the development of evidence-based interventions like Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), resilience training, and school-based mental health services (National Child Traumatic

Stress Network [NCTSN], 2022). These interventions have shown promising results in reducing post-traumatic stress symptoms and improving emotional regulation, social relationships, and academic performance (Pynoos et al., 2018). However, such systematic and institutionalized responses to childhood trauma are mostly concentrated in high-income countries with sufficient resources and policy frameworks.

In contrast, the global South, particularly low- and middle-income countries (LMICs), often lacks such mental health infrastructure. UNICEF (2023) estimates that more than 250 million children worldwide are exposed to violence annually, with a significant proportion residing in LMICs. Many of these children, including refugees and those affected by armed conflict, displacement, or street life, live with unaddressed trauma. Street children, in particular, are disproportionately affected. They experience frequent abuse, neglect, exploitation, and a lack of access to basic needs conditions that intensify their psychological vulnerability (World Health Organization [WHO], 2022). Children living and working on the streets often face chronic traumatic stressors without the protective factors typically provided by families or communities. According to a global report by the Consortium for Street Children (2022), street-connected youth are highly exposed to repeated trauma and typically receive minimal psychosocial support. This makes them more likely to develop complex trauma symptoms, including attachment disorders, emotional dysregulation, antisocial behavior, and poor academic outcomes (Kar et al., 2019). Moreover, systemic neglect of their mental health needs continues to reinforce social exclusion, stigma, and institutionalized discrimination.

One growing concern in the global child welfare space is the paucity of longitudinal and impact-based research on the effectiveness of rehabilitation programs for street children in LMICs. While organizations often provide rescue, shelter, and education, the long-term psychosocial

impact of these programs remains poorly understood (Jones et al., 2020). This knowledge gap impedes policy formulation, donor investment, and program design. Furthermore, existing research predominantly focuses on general child populations rather than disaggregating data for subgroups like rescued street boys. Gender-specific psychosocial responses, trauma patterns, and coping strategies remain underexplored, especially in male populations. Most interventions are also not culturally adapted to the environments where these children live and are therefore often ineffective or unsustainable (Betancourt et al., 2021). This global context underscores the importance of localized, evidence-based studies that explore trauma's impact in specific settings. In particular, studies focusing on post-trauma psychosocial well-being among rescued street boys in rehabilitation centers in LMICs, like Kenya, are urgently needed to bridge the global evidence gap.

Childhood trauma among street children in Africa remains a critical social and public health concern, with wide-ranging implications for psychosocial well-being. Children in street situations are exposed to various forms of trauma, including physical abuse, sexual exploitation, neglect, emotional abandonment, and chronic exposure to violence. These experiences often lead to psychological disorders such as post-traumatic stress disorder (PTSD), depression, anxiety, and behavioral disorders (Muchai et al., 2023). Street life exposes children to chronic insecurity and social isolation, conditions that profoundly affect their development and long-term emotional health. Africa bears a disproportionate share of the burden due to intersecting factors such as widespread poverty, displacement due to conflict, weak child protection systems, and rapid urbanization (UNICEF, 2022). Sub-Saharan Africa in particular has experienced increasing numbers of children living or working on the streets. In Nigeria, Ethiopia, South Africa, and Kenya, the combination of economic hardship and family disintegration has created an

environment where many children flee or are forced out of their homes, often ending up in exploitative or violent conditions (Aptekar & Heinonen, 2021).

In Kenya, a study by Kangethe et al. (2020) revealed that many street children have experienced both pre-street and street-based trauma, including parental loss, domestic violence, and police brutality. The study found a high prevalence of PTSD symptoms among this population. Moreover, the lack of structured social support systems and access to mental health care exacerbates their psychosocial distress. These challenges contribute to antisocial behavior, substance abuse, suicidal ideation, and poor reintegration outcomes, even after rescue and placement in rehabilitation centers (Mutua et al., 2023).

Despite increasing awareness of these challenges, there remains a notable research gap in assessing how trauma-focused interventions affect the recovery and long-term psychosocial well-being of street children in African contexts. Most rehabilitation programs in the region focus on basic needs such as shelter and education, with minimal emphasis on trauma-informed care. According to Atwoli et al. (2022), the integration of mental health support into child rescue services remains inconsistent and underfunded in Kenya and across the continent. Moreover, while some research has explored the psychological profiles of children in the streets or in institutional care, few studies have examined the outcomes of specific rehabilitation interventions that aim to restore psychosocial functioning post-rescue. This limits the ability of policymakers and organizations to design evidence-based programs. Additionally, gender-specific dimensions of trauma are underexplored in African literature; boys and girls often experience different types and intensities of trauma and respond differently to interventions, yet this is rarely addressed in program evaluations (Mbagaya et al., 2021).

This study seeks to bridge these gaps by focusing specifically on the psychosocial impact of trauma among rescued street boys at the Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, Kenya. By assessing how childhood trauma manifests among this population and how rehabilitation programs influence recovery and resilience, this research aims to offer context-specific insights that can inform trauma-sensitive programming and policy. The findings could also serve as a model for similar initiatives across Africa, where evidence-based mental health integration into child welfare is still in its infancy.

According to the Consortium of Street boys (CSC, 2016), street boys in Kenya range between 250,000 and 300,000. Most of these lived in major cities and towns such as Nairobi, Mombasa, Kisumu, Eldoret, and Nanyuki (United Nations Children's Fund, 2017). Living in the street contributes to immense negative physical and emotional challenges for street children. However, there are few local studies that are already there on the nexus between childhood trauma and psychosocial well-being among rescued street boys at the Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County. This current study thus sets out to examine the impact of childhood trauma on psychosocial well-being of rescued street boys: a case of Global Hope Rescue and Rehabilitation Centre in Ngong Kajiado North County, Kenya.

Through a holistic examination of the interplay between childhood trauma and the psychosocial well-being dimensions of street children's lives, this study seeks to inform targeted interventions and policies aimed at promoting their overall well-being in Ngong, Kajiado North County, Kenya.

1.3 Problem Statement

Childhood trauma among street children is a critical global issue, with over 20 million street boys across Africa alone (UNICEF, 2015). These children face numerous adversities physical and sexual abuse, neglect, and exposure to violence that severely impact their psychosocial well-being. Factors such as family breakdown, poverty, and domestic abuse contribute to the growing number of children on the streets (Scanlon et al., 1998). Many perceive street life as a refuge from domestic turmoil, only to encounter further trauma and exploitation.

The psychological effects are profound, leading to post-traumatic stress disorder (PTSD), depression, anxiety, and substance abuse. Without stable family support, street children often develop maladaptive coping strategies, including aggression and drug use (O'gallo, 2024). Although some studies address mental health among street children, few examine the effectiveness of interventions designed to promote psychosocial recovery (Owino et al., 2023). This gap limits the development of targeted, evidence-based rehabilitation strategies.

In East African countries such as Kenya, Uganda, and Tanzania, the situation remains dire. In Kenya, for instance, street children face high levels of trauma and a lack of mental health services (Mutuku, 2019; Atieno, 2022). Rehabilitation centers are essential, yet their effectiveness is under-researched. The Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County established in 2013 offers shelter, education, and psychosocial support to street boys from Ngong and Nairobi.

Despite its important role, there is limited research on the center's impact on the boys' psychosocial well-being. This study aims to assess the impact of childhood trauma on rescued street boys and evaluate the effectiveness of rehabilitation efforts at the Global Hope Centre. The findings will help inform policy and improve support strategies for vulnerable children in Kenya.

1.4 Purpose of the Study

The purpose of the study was to examine the impact of childhood trauma on psychosocial well-being of rescued street boys at the Global Hope Rescue and Rehabilitation Centre in Ngong Kajiado North County, Kenya.

1.5 Objective of the Study

Guided by the following objectives the study sought:

i. To establish forms of childhood traumas experienced on the psychosocial wellbeing by rescued street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya
ii. To assess the impact of childhood trauma on the psychosocial wellbeing of rescued street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya.
iii. To evaluate the impact of childhood trauma on psychosocial wellbeing among rescued street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya.
iv. To assess ways of enhancing childhood trauma on the psycho-social wellbeing of rescued Street boys at Global Hope Rescue and Rehabilitation Center in Ngong Kajiado North County, Kenya.

1.6 Research Questions

The study was guided by the following research questions.

i. What are the forms of childhood traumas experienced on the psychosocial wellbeing by rescued street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya?

ii. How does impact of childhood trauma on the psychosocial wellbeing of rescued street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya?

iii. What is the impact of childhood trauma on cognitive development on the psychosocial wellbeing among former street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya?

iv. In which ways of enhancing psycho-social wellbeing of former Street boys at Global Hope Rescue and Rehabilitation Center in Ngong Kajiado North County, Kenya?

1.7 Significance of the Study

This study explores the impact of childhood trauma on the psychosocial well-being of rescued street boys at the Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County. Understanding these effects is crucial for developing targeted interventions to improve their psychosocial outcomes (Smith & Jones, 2021). The findings will assist governments in formulating protective policies for rescued street children, while providing non-profit and religious organizations with strategies to support these vulnerable youths (Karanja & Otieno, 2023). Additionally, it will raise public awareness on the importance of shielding street boys from trauma and its detrimental consequences on their mental health (Ochieng & Wambua, 2024). Scholars would get important information that could guide follow-up studies on childhood traumatic

experiences and their effect on psychosocial well-being. Guidance and counselling professionals would also obtain knowledge that could be used in offering help to former street children.

1.8 Scope of the Study

The study encompassed former street boys aged 11 to 18 years old at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County. The county was selected due to its high prevalence of street children. Additionally, the administrators in the facility were included in the study. Kajiado North County was chosen as the focus of the study because of the limited existing research on childhood trauma and its impact on the psychosocial well-being of rescued street boys in the area. This study focuses on childhood trauma and psychosocial well-being among rescued street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County due to the area's high number of street children and the lack of existing research on this topic. The study aims to explore how traumatic experiences affect social relationships, emotional health, and cognitive skills key areas in successful rehabilitation. By including both the boys and administrators, the research provides a holistic view of the challenges and recovery processes. Although localized, the findings aim to inform broader interventions and improve rehabilitation practices across similar centers in Kenya and beyond.

1.9 Delimitations of the Study

This study delimited its scope to target rescued street boys aged 11-18 years old at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County. Although there are various other rehabilitation centers, it would not be possible to include all of them due to time and logistical constraints. Furthermore, the study delimited its scope to childhood trauma and

psychosocial wellbeing indicated by social relationships, emotional wellbeing, and cognitive skills among former street boys. It was hoped that these variables would holistically cast light on the study subject.

1.10 Limitations of the Study

While this study seeks to provide valuable insights into the impact of childhood trauma on the psychosocial well-being of rescued street boys at the Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, it is important to acknowledge certain limitations that may affect the research process and the generalizability of the findings. One major limitation is the potential unwillingness or reluctance of some respondents to provide accurate or complete information about their traumatic experiences. Given the sensitivity of the subject matter, particularly when discussing personal histories of abuse, neglect, or emotional distress, some participants may withhold information due to fear, shame, emotional discomfort, or mistrust. This could result in data that may not fully reflect the depth or nature of their psychosocial challenges, thus impacting the overall accuracy of the findings.

Additionally, the study is limited to a specific population of rescued street boys within a single rehabilitation center meaning the results may not be generalizable to all street children in Kenya or East Africa. Differences in regional practices, institutional support, or cultural dynamics could influence outcomes in other settings. Despite these limitations, measures such as building rapport with participants, assuring confidentiality, and using trauma-sensitive approaches during interviews and data collection will be employed to enhance the credibility and reliability of the study.

1.11 Assumptions of the Study

This study assumes that participants will be willing to engage voluntarily and provide informed consent to participate in the research. It also assumes that respondents will offer honest and accurate accounts of their experiences, enabling a truthful representation of the circumstances under investigation. Furthermore, the study presupposes that the variables under examination specifically, childhood trauma and social relationships are interrelated and can be empirically analyzed within the context of the Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, Kenya.

1.12 Theoretical Framework

1.12.1 Ecological Systems Theory (EST)

This study is grounded in Urie Bronfenbrenner's Ecological Systems Theory (EST), which posits that human development is influenced by the interplay of various environmental systems. Bronfenbrenner's model comprises five nested systems: the microsystem, mesosystem, exosystem, macrosystem, and chronosystem, each representing different layers of environmental influence on an individual (Bronfenbrenner, 1979). The microsystem includes immediate environments such as family and peers; the mesosystem encompasses interactions between microsystems; the exosystem involves broader societal structures that indirectly affect the individual; the macrosystem reflects overarching cultural and societal values; and the chronosystem considers the dimension of time and life transitions.

The model delineates a broad spectrum of factors operating at both micro and macro levels, prompting consideration of influences beyond the confines of the nuclear family. Representing a significant advancement in conceptualizing the intricate dynamics of multicultural and multiethnic societies, it facilitated the structuring of intricate, hierarchical systems under the framework of

Person, Process, Context, and Time (PPCT). This has proven instrumental in addressing foundational concerns inherent in programs and policies targeting the welfare of children, their families, and communities (Anderson, 2014).

According to Williams-Brown et al. (2018), children are given a socio-biological framework to accomplish age-appropriate developmental goals through the social ecology of childhood, which includes both positive and negative events. Disruptions in this ecology, such as frequent low-grade stressors (insecurity, inattention), dramatic unpredictability (life transitions), and trauma (abuse/neglect), can have negative impacts on children's health and well-being, some of which may linger into adulthood (Nelson et al., 2020). In the context of public health initiatives, questionnaires such as the Adverse Childhood Experiences (ACEs) inventory are used to collect data for the purposes of assessing, comprehending, and preventing the health consequences linked with childhood trauma. Beyond the ACEs, however, other preventable forms of early life stress may include not having enough food or a safe place to live, being bullied or discriminated against, having parents who aren't attentive, or having families split up. Physicians often overlook the assessment of traumatic experiences or the social environment of the child, primarily due to the scarcity of validated, longitudinal criteria available for evaluation. However, researchers can fill this gap by developing and validating objective measures that can effectively capture these aspects over time. By collaborating with healthcare professionals, researchers can design comprehensive assessment tools and protocols that incorporate validated criteria for identifying traumatic experiences and assessing the social ecology of children. This interdisciplinary approach can enhance the early detection and intervention for children at risk, ensuring their holistic well-being is addressed.

According to Elbers et al. (2017), child development is considered a complex system of relationships influenced by several levels of the environment, ranging from intimate family and school settings to broad cultural values, laws, and practices. To research a child's development, we must include not only the child and his/her local environment but also how the greater environment interacts with the child. This theory has been applied in this study since the environment of the child (street) could affect his/her psychosocial well-being due to conditions that lead to childhood trauma such as physical abuse, sexual abuse, harsh life, grief, and loss events among others.

Despite its widespread application, EST has faced several critiques. One limitation is its complexity and the challenge of empirically testing the interactions between the multiple systems it proposes. The theory's broad scope can make it difficult to isolate specific variables and establish clear causal relationships (Tudge et al., 2009). Additionally, EST has been critiqued for its limited consideration of individual agency and the active role of the child in shaping their development. Some argue that the theory overemphasizes environmental influences and underrepresents the individual's capacity to influence their own developmental trajectory (Rosa & Tudge, 2013).

To address these limitations, this study incorporates the Dynamic-Maturational Model of Attachment and Adaptation (DMM), developed by Patricia Crittenden. The DMM emphasizes the role of attachment relationships in development and how these relationships influence an individual's adaptation to their environment. It provides a more nuanced understanding of how early experiences, particularly those involving trauma, can affect developmental outcomes. The DMM focuses on the individual's strategies for dealing with danger and how these strategies are shaped by early attachment experiences, offering a more detailed perspective on the psychosocial development of children who have experienced trauma (Crittenden, 2016).

By integrating EST with the DMM, this study aims to provide a comprehensive analysis of how various environmental factors and early attachment experiences influence the psychosocial well-being of rescued street boys. This combined theoretical framework allows for a more holistic understanding of the complex interplay between the individual and their environment, facilitating the development of more effective rehabilitation programs tailored to the needs of this vulnerable population.

1.12.2 Erik Erikson's Stages of Psychosocial Development Theory

Erikson's psychosocial development theory posits that individuals progress through eight stages, each characterized by a central conflict that must be resolved to develop a healthy psychological state. These stages span from infancy to late adulthood, with each stage building upon the outcomes of preceding ones (Knight, 2017). In the context of rescued street boys at the Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, Kenya, Erikson's framework provides insight into how early life adversities, such as trauma and neglect, can impede the resolution of these psychosocial crises, potentially leading to challenges in identity formation and trust development.

Erikson stressed the importance of culture and society and the conflicts that can take place within the ego itself. He contended that establishing confidence in others and establishing one's place in society are necessary for the development of the ego. According to Erikson, there was a specific sequence to how a person matures, with each of the eight phases building on the ones that came before. A healthy personality is reflected as one that is able to acquire the necessary abilities at each stage, whereas a less-than-healthy personality and sense of self was indicative of a person's inability to advance to later stages. In this first phase, there is an initial breakdown in communication and a growing sense of mistrust (Greenacre et al., 2014).

In the first year, a child figures out if the world is safe or full of bad things that are hard to predict. When an infant feels uncertain, they look to their primary caregiver for stability, safety, and consistent care. If these things are present, the child feels secure and is able to develop positive relationships with others. By learning to trust, a child develops the virtue of hope, which contrasts with trait anxiety and mistrust. These negative traits often arise from fearing others and the future (Moss et al., 2021). Early attachment experiences are crucial in fostering a sense of safety and optimism, which are foundational for emotional development and social trust (Berlin et al., 2021).

In Erikson's second psychosocial stage, the toddler may struggle between autonomy or personal control over physical abilities and independence and shame and doubt when the demand is not met. Shame, self-consciousness and paranoia result from a lack of autonomy. If successful, preschoolers need to take control of their environment and find purpose. Too much control and an inability to adapt would result in negative feedback from others that generate shame or denial that understanding Child and Adolescent Development can lead to stagnation and inhibition, or overcompensation and showing off. Successful initiative adds autonomy by planning and completing a task with approval (Casanueva, et al., 2013).

Pre-adolescents learn to manage social and academic pressures and use technology to attain their goals. Success breeds confidence, whereas failure breeds compliance, inferiority, and isolation, which others might abuse. Teens form a sense of self and identity through individual and group roles and responsibilities. This stage requires self-confidence. Otherwise, role uncertainty and self-doubt are probable. An adolescent without an ego identity may struggle to fit in despite being themselves. The final three stages of adulthood are (6) Love: closeness vs. isolation (20-39 years), (7) Care: generativity vs. stagnation (40–64 years), and (8) Wisdom: ego integrity vs. despair (maturity, 65 – death). These are also outside the realm of child and adolescent

development, although depending on the teenager's duties, sexual relationships, and the urge to make one's life count, and life's meaning might occur earlier in life (Furstenberg, 2003). As a result, this theory would be applied in the study since psychosocial development shapes the way a child develops and could therefore affect his/her psychosocial wellbeing due to conditions that lead to childhood trauma such as physical abuse , sexual abuse , harsh life and grief, and loss events among others.

Despite its foundational influence, Erikson's theory has faced several critiques. One significant limitation is its Western-centric perspective, which may not adequately capture the developmental experiences of individuals from diverse cultural backgrounds. For instance, collectivist cultures may emphasize communal identity over individual autonomy, potentially altering the manifestation of psychosocial conflicts (Knight, 2017). Additionally, the theory's rigid stage progression has been criticized for oversimplifying the complexities of human development, neglecting the dynamic and non-linear nature of growth (Knight, 2017). Furthermore, Erikson's model has been critiqued for its limited consideration of individual agency and the active role of the child in shaping their development. Some argue that the theory overemphasizes environmental influences and underrepresents the individual's capacity to influence their own developmental trajectory (Rosa & Tudge, 2013).

To address these limitations, this study integrates Urie Bronfenbrenner’s Ecological Systems Theory (EST), which emphasizes the multifaceted environmental contexts influencing human development. EST posits that development is shaped by interactions within and between various environmental systems, including the microsystem (immediate environments), mesosystem (interactions between microsystems), exosystem (indirect environmental influences), and macrosystem (broader cultural and societal contexts) (Tudge et al., 2009). In the rehabilitation

context of the Global Hope Centre, EST provides a comprehensive framework to understand how systemic factors, such as familial support, community resources, and societal attitudes towards street children, interact to impact the psychosocial well-being of the boys.

By integrating Erikson's psychosocial development theory with Bronfenbrenner's Ecological Systems Theory, this study aims to provide a holistic understanding of how individual developmental challenges and broader environmental factors converge to affect the psychosocial well-being of rescued street boys. This combined theoretical approach facilitates the development of more nuanced and effective rehabilitation programs tailored to the complex needs of this vulnerable population.

1.13 Conceptual Framework

This study explores the impact of childhood trauma on the psychosocial well-being of rescued street boys at the Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, Kenya. To understand this relationship clearly, it is important to define the key variables involved in the study and explain how they interact.

The dependent variable in this research is childhood trauma. Childhood trauma refers to the adverse and distressing experiences that the boys endured during their early years before being rescued. These traumatic events may include physical and emotional abuse, neglect, exposure to violence, loss of family members or caregivers, and other forms of hardship common among street children. Such experiences disrupt a child's normal development and have lasting effects on their emotional and cognitive functioning.

The independent variable is psychosocial well-being, which encompasses the emotional, cognitive, and social aspects of the boys' overall mental health and quality of life. Psychosocial well-being refers to how well the boys are able to regulate their emotions, form positive

relationships, and perform cognitively in everyday life. It includes their emotional stability, self-esteem, social interactions, and ability to learn and make decisions.

Childhood trauma influences psychosocial well-being in several profound ways. Traumatic experiences during early development often lead to emotional disturbances such as anxiety, depression, and difficulties in managing feelings. These emotional challenges can impair the boys' ability to engage socially and develop trusting relationships, which are crucial for their rehabilitation and reintegration into society. Furthermore, trauma can adversely affect cognitive development, making it difficult for the boys to concentrate, solve problems, or learn new skills, which limits their potential for personal growth and future opportunities.

In this conceptual framework, childhood trauma is viewed as the root cause or predictor that shapes the psychosocial outcomes observed in the rescued street boys. Understanding this relationship is essential for designing effective interventions aimed at enhancing their psychosocial well-being. By addressing the specific traumatic experiences and their consequences, rehabilitation programs can better support the emotional healing, cognitive development, and social integration of these vulnerable children.

Therefore, the study's conceptual framework posits that the independent variable, childhood trauma, has a direct and significant impact on the dependent variable, psychosocial well-being. Investigating this relationship provides critical insight into the forms of trauma experienced by the boys and guides efforts to promote their recovery and holistic well-being. The conceptual framework is presented in figure 1.1.

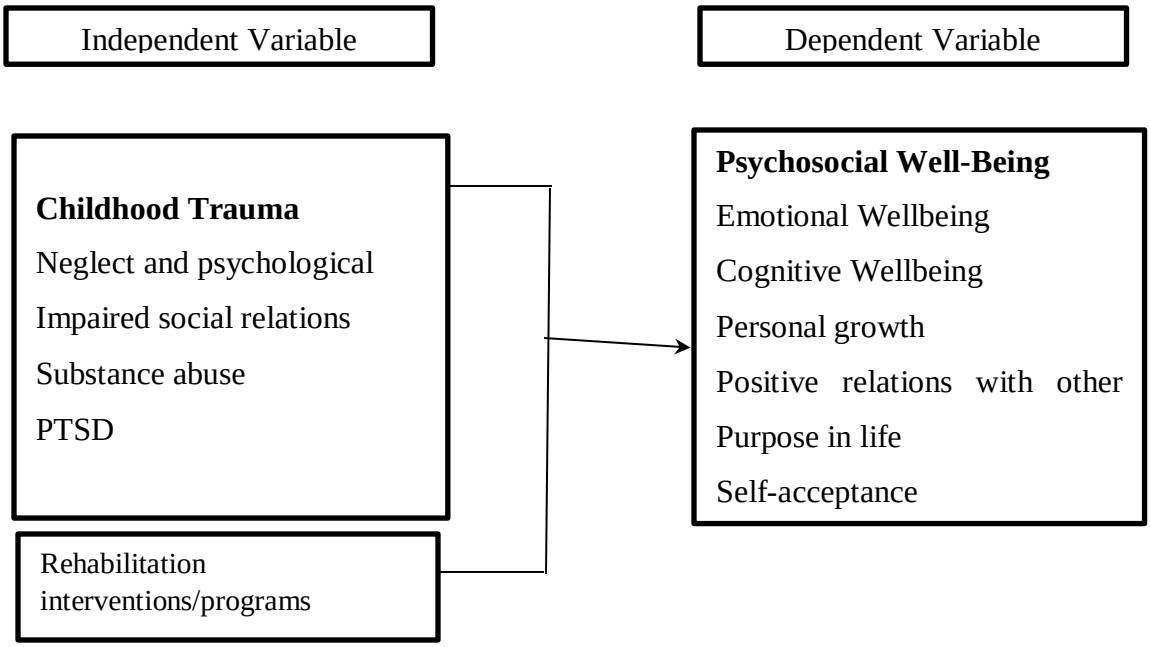


Figure 1.1: *Conceptual Framework*

Source: *Researcher, (*2025)

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter presents the literature review on the impact of childhood trauma on psychosocial well-being among children globally, continental, regionally, and in Kenya. The chapter is organized in line with the research objectives. The arising gaps are also presented.

2.2 Review of the Literature

This section consists of a general overview and empirical review of the research topic**.**

2.2.1 Establish Forms of Childhood Traumas Experienced on Psychosocial Well-Being among Street Children

Research on childhood trauma and its impact on psychosocial well-being among street children has gained global attention due to the severe vulnerabilities faced by this population. Beilharz et al. (2020) conducted a physiological study investigating the long-term effects of childhood trauma on autonomic nervous system functioning and sleep patterns. The study involved participants with documented childhood trauma histories and utilized both overnight autonomic and in-lab assessments. Findings revealed that trauma exposure was associated with disrupted sleep, increased psychological distress, and poorer emotional well-being, demonstrating the pervasive nature of trauma's impact on physical and mental health. This study highlights that childhood trauma triggers multifaceted health challenges, underscoring the need for trauma-informed care globally.

Similarly, Edidin et al. (2012) focused on homeless children in the United States, examining the prevalence and effects of childhood abuse and family dissolution. Using a sample of street children and youth, their research revealed that many had experienced physical or sexual abuse and that homelessness itself compounded neurocognitive impairments and academic difficulties. Follow-up work by Edidin et al. (2019) further identified elevated risks of substance abuse, sexually transmitted infections, and mental health disorders such as depression and post-traumatic stress disorder (PTSD) in this group. These studies collectively affirm that childhood trauma, compounded by homelessness, profoundly diminishes psychosocial well-being through mental, emotional, and cognitive impairments. However, despite the richness of data from high-income countries, Henwood et al. (2020) note several limitations in current literature, including inconsistent trauma definitions and methodological weaknesses, which restrict the generalizability of findings to diverse cultural contexts. This highlights a critical research gap that necessitates culturally sensitive studies, particularly in low- and middle-income countries where street children may face different or more complex adversities.

On the African continent, limited but growing research addresses childhood trauma among street children. Lalor (1999) conducted an extensive study across urban centers in Ethiopia, interviewing 1,000 street children, including 400 from Addis Ababa. The research focused on documenting the prevalence of mistreatment, revealing that over half of street boys faced regular physical assault, with sexual violence also alarmingly prevalent among girls. Although Lalor's study did not extensively investigate mental health outcomes, it laid foundational evidence of severe physical abuse and victimization among street children in Africa. Building on this, recent African studies emphasize the psychosocial effects of trauma. According to the National Health Care for the Homeless Council (NHCHC, 2022), chronic stress from homelessness contributes to

lasting mental health difficulties, including PTSD and depression, which are often exacerbated by inadequate access to healthcare. The persistent lack of age-appropriate and culturally tailored interventions remains a major gap on the continent. Bender et al. (2014), while focusing on the US, also underscored the need for nuanced trauma services—an insight that applies to African settings where service provision for homeless youth is frequently fragmented or insufficient.

Within the East African region, research on the impact of childhood trauma on street children's psychosocial well-being is sparse but gradually emerging. Most studies have been descriptive, identifying common forms of trauma such as abuse, neglect, and family breakdown among street children in urban centers like Nairobi and Kampala. The Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, Kenya, serves as a crucial rehabilitation site, focusing on the recovery of boys from these traumatic backgrounds. While no extensive peer-reviewed studies have yet been published from this specific center, the patterns observed resonate with findings from Evans et al. (2013) in the United States, who found a strong correlation between physical abuse severity and trauma symptoms such as PTSD. Evans et al.'s work highlights the protective role of social support in mitigating trauma's effects—a factor particularly relevant to rehabilitation centers like Global Hope, which aim to foster supportive environments for recovery. Nevertheless, Henwood et al. (2020) emphasize the methodological challenges in trauma research among homeless youth, including inconsistent definitions and lack of standardized assessment tools. This limits the applicability of existing knowledge to East African populations, where cultural and socio-economic factors uniquely shape children's experiences and recovery trajectories. Therefore, region-specific empirical studies are urgently needed to inform effective psychosocial interventions.

In Kenya, street children face an array of traumas that severely impact their psychosocial well-being, yet systematic research remains limited. According to the National Council for Children Services (NCCS, 2021), many street children have histories of abuse, family disintegration, and exposure to violence, which compromise their emotional and cognitive development. The Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, stands out as one of the few centers dedicated to rehabilitating rescued street boys, aiming to address their trauma and enhance psychosocial well-being through counseling, education, and social support.

Despite this, research directly linking childhood trauma and psychosocial outcomes in Kenyan street children is scarce. A study by Kamau and Wambua (2019) on psychosocial challenges among street youth in Nairobi found high rates of depression and substance abuse but did not focus specifically on trauma types or their cognitive impacts. This gap signals the need for focused research on trauma's multidimensional effects, including emotional, social, and cognitive domains, within Kenyan rehabilitation contexts. Furthermore, Evans et al.'s (2013) findings on the importance of social support align with the goals of Kenyan rehabilitation efforts, yet there remains a lack of localized evidence on how these dynamics operate in Kenyan street children. Such data are crucial for developing tailored interventions that consider local cultural norms, resource limitations, and systemic challenges.

The reviewed literature reveals a clear pattern: while childhood trauma significantly compromises psychosocial well-being among street children globally, existing studies predominantly stem from high-income countries and may not fully capture the realities of street children in Africa and Kenya. The limited regional data and methodological inconsistencies impede the development of effective, culturally appropriate interventions. In Kenya, despite the

presence of rehabilitation centers like Global Hope Rescue and Rehabilitation Centre, there is a paucity of research that thoroughly examines the specific forms of trauma these children experience and their effects on emotional, social, and cognitive outcomes. Addressing this gap requires robust, context-sensitive research that incorporates local perspectives and standardized trauma assessments. Such studies would not only enhance understanding but also inform policies and programs aimed at promoting psychosocial recovery among rescued street boys in Kenya and beyond.

2.2.2 Impact of Childhood Trauma on Psychosocial Wellbeing among Street Children

Childhood trauma is increasingly recognized as a critical determinant of psychosocial well-being, particularly among vulnerable populations such as street children. Across the globe, children living on the streets are exposed to a multitude of adverse experiences that profoundly affect their emotional, cognitive, and social development. This review examines studies on the influence of childhood trauma on psychosocial well-being among street children at global, continental, regional, and Kenyan levels, highlighting key findings and gaps that inform the present study in Kajiado North County, Kenya. At a global level, research has extensively documented the pervasive effects of childhood trauma on mental health and psychosocial adjustment. Stoewen (2017) emphasized the importance of emotional well-being, defining it as the ability to experience positive emotions and effectively cope with adversity. His study, based on a diverse sample of adolescents from multiple countries, underscored how trauma disrupts emotional regulation and resilience, increasing vulnerability to depression, anxiety, and substance abuse.

In Ireland, Cheyenne and Aoife (2020) conducted a study focusing specifically on street boys, investigating how early trauma affected their psychosocial outcomes. Targeting street-

involved youth aged 12 to 18 years, the study found high incidences of childhood physical and sexual abuse, family breakdown, and neglect. These traumatic experiences were strongly associated with increased rates of alcohol and drug addiction, poor self-esteem, and heightened anxiety symptoms. Their mixed-methods approach revealed that these boys lacked adequate social support, exacerbating the negative psychological consequences. Similarly, Heather (2018) explored the neurobiological and psychological sequelae of early childhood trauma. This longitudinal study followed children from infancy to adolescence, monitoring cognitive and physical development. It revealed that early trauma led to alterations in brain structure and function, which manifested as impaired executive functioning and increased risk for psychiatric disorders, including PTSD and depression. The study also highlighted trauma's role in predisposing individuals to later substance abuse, suggesting a complex interplay between biological and environmental factors.

Yang et al. (2022), added to the global evidence base by examining Chinese teenagers aged 13 to 17. Their quantitative research linked childhood trauma to psychological sub-health conditions, such as emotional instability and social withdrawal. Crucially, they identified internalizing behaviors such as withdrawal and anxiety as mediators, indicating that trauma not only causes direct harm but also influences psychosocial well-being through behavioral pathways.

Research on childhood trauma and psychosocial well-being in Africa, though growing, remains limited compared to global data. Oladeji et al. (2010), conducted a seminal study across Nigeria, Ghana, and South Africa, examining adverse childhood experiences (ACEs) and their links to adult mental health. Their large cross-sectional study targeted adults who had experienced childhood trauma, uncovering strong associations between family-related adversities (e.g., domestic violence, parental death) and mood disorders, substance abuse, and anxiety disorders in

adulthood. The study underscored the long-lasting impact of childhood trauma but noted a scarcity of data on current street children.

In East Africa, the psychosocial effects of childhood trauma on street children have been studied mostly through small-scale, qualitative, and NGO-led research. Nduku et al. (2022), carried out a study among school-going children in Nairobi and Kisumu, Kenya, focusing on PTSD and related mental health conditions. Targeting children aged 7 to 14 years from vulnerable households, including street-involved children, the study found a high prevalence of PTSD, depression, and anxiety, especially among those with histories of physical and sexual abuse. The research highlighted how trauma significantly impairs psychosocial functioning and academic performance.

Mengere (2014a) studied emotional development in Nyahururu Sub-County, Kenya. This qualitative study interviewed street children and their caregivers, identifying parental death, sexual abuse, and mistreatment as common traumatic experiences. The findings revealed that these traumas resulted in anxiety, poor emotional regulation, and social withdrawal, which compromised children's ability to form healthy relationships and integrate into society. At the national level, research on street children's trauma and psychosocial well-being is still emerging. Most studies, such as those by the National Council for Children Services (NCCS, 2021), focus on descriptive statistics about street children's demographics rather than in-depth psychosocial assessments. A notable gap exists in longitudinal and intervention-focused research, particularly in rural counties like Kajiado. Kamau and Wambua (2019) examined psychosocial challenges faced by street youth in Nairobi. Their mixed-methods study targeting street children aged 10 to 18 revealed trauma-related symptoms including PTSD, depression, and substance abuse. The study highlighted a lack of specialized psychosocial services, with many children relying on informal support networks.

While global and continental studies provide a broad understanding of how childhood trauma impacts psychosocial well-being, significant gaps remain. Notably, there is limited empirical research focusing specifically on street children in rural Kenyan counties such as Kajiado. Most existing studies are urban-centered, with little attention to the unique cultural, social, and economic contexts that shape trauma experiences and psychosocial outcomes in rural settings. Additionally, many studies rely on cross-sectional designs, limiting understanding of trauma's long-term effects. There is also a need for research employing standardized psychometric tools to measure trauma and psychosocial well-being in African contexts. Importantly, research exploring protective factors and effective psychosocial interventions remains scarce. The present study at Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, seeks to fill these gaps by focusing on street boys in a rural Kenyan context. By investigating the specific forms of childhood trauma these boys experience and their psychosocial consequences, the study contributes to a more nuanced understanding of trauma's impact in this understudied population. It also aims to inform targeted interventions to enhance their emotional and social well-being.

2.2.3 Impact of Childhood Trauma on Cognitive Development among Street Children

Childhood trauma profoundly affects brain development, particularly during infancy and early childhood, which are critical periods for establishing neural pathways that underpin cognitive functioning. Street children, who often experience multiple traumatic events, represent a vulnerable population whose cognitive development can be significantly compromised..

At a global level, seminal research by Perry (1995) established foundational knowledge on how early trauma disrupts neurodevelopment. Perry's neurodevelopmental model explains that repeated adverse experiences hinder the formation of adaptive neural circuits, resulting in deficits

in memory, attention, executive functioning, and emotional regulation. These findings, derived from clinical observations and neuroimaging studies primarily in the United States, highlight the long-term cognitive impairments rooted in early childhood trauma.

Pluck (2013) conducted a comprehensive analysis of cognitive functioning among street boys in several underdeveloped countries, including Brazil, India, and Nigeria. The study synthesized cognitive test results from various samples, noting a consistent pattern of below-average performance in memory, attention, and problem-solving tasks. The research suggested cultural and environmental factors might mediate these outcomes, emphasizing the complex interaction between trauma, poverty, and cognitive development. Pluck's analysis highlighted the challenge of developing culturally appropriate cognitive assessments for diverse street children populations.

In Bolivia, Dahlman et al. (2012) explored cognitive abilities among street boys compared to children living with families. This study involved standardized cognitive and creativity tests administered to boys aged 8 to 14 years in La Paz. Surprisingly, street boys scored significantly higher on creativity measures, possibly reflecting adaptive skills developed for survival on the streets. However, both groups exhibited below-average cognitive performance on traditional assessments, pointing to pervasive developmental challenges possibly linked to early trauma, malnutrition, and unstable environments.

Enlow et al. (2012) provided a longitudinal perspective by examining the effects of interpersonal trauma (IPT) in early childhood on cognitive outcomes in a U.S. urban cohort. Their sample included children exposed to physical abuse, neglect, and domestic violence during the first two years of life. Results showed these children scored significantly lower on IQ tests and had

impaired language development compared to non-exposed peers. This study underscored the critical timing of trauma exposure and its severe implications for cognitive maturation.

Wang et al. (2016) expanded the investigation to a later life stage by assessing how childhood trauma relates to mild cognitive impairment (MCI) in Chinese seniors. Using retrospective questionnaires and cognitive screening tools, they identified associations between childhood physical neglect and deficits in memory and learning ability in old age. This finding illustrates the enduring impact of early trauma on cognitive decline decades later.

Within Africa, research on trauma and cognitive development among street children remains limited but insightful. Most studies focus on mental health and psychosocial effects, with fewer directly assessing cognitive outcomes. However, Olusanya et al. (2015) conducted a cross-sectional study in Lagos, Nigeria, evaluating cognitive function among homeless children aged 7 to 15 years. They utilized culturally adapted neuropsychological tests and found that children with histories of physical abuse and neglect scored poorly in executive function and attention tasks compared to non-abused homeless peers. The study suggested that early trauma exacerbates cognitive deficits caused by street living conditions such as malnutrition and lack of education.

In East Africa, there is a dearth of rigorous studies specifically linking childhood trauma to cognitive outcomes among street children. However, a few key studies provide preliminary evidence. Mugo et al. (2018) conducted research among street boys in Nairobi, Kenya, using cognitive screening tools alongside trauma exposure questionnaires. They found that boys exposed to multiple traumas had significantly lower working memory and processing speed scores than less-exposed peers. The study highlighted the role of chronic stress and lack of psychosocial support in compounding cognitive impairments. In Uganda, Kabakama and Namatovu (2019) assessed cognitive performance in a cohort of street children aged 10-16 years. The study

documented common traumas such as physical abuse and family abandonment. Children exhibited delayed cognitive milestones and difficulties in problem-solving and verbal comprehension. The researchers emphasized the need for cognitive rehabilitation programs as part of street children's support services.

In Kenya, research on trauma and cognitive development among street children is emerging but still underdeveloped. Mengere (2014a) explored emotional and cognitive consequences of trauma among street children in Nyahururu Sub-County. While primarily focused on emotional well-being, the study revealed that many children displayed attention deficits and learning difficulties, attributed to early parental loss, physical abuse, and chronic neglect. Similarly, Wambua and Njoroge (2020) conducted a study at a rehabilitation center in Nairobi, assessing cognitive functions of street boys aged 12-17 years with documented trauma histories. Using cognitive tests adapted from Western tools, the study found significant impairments in executive functioning and memory, correlating strongly with trauma severity. The authors advocated for integrating cognitive therapy within psychosocial rehabilitation programs.

Despite growing recognition of childhood trauma's impact on cognitive development, significant gaps persist, especially in the African and Kenyan contexts. First, most studies are cross-sectional and urban-centric, lacking longitudinal data to trace cognitive outcomes over time. Second, there is limited use of culturally validated cognitive assessment tools, raising concerns about accuracy and relevance. Third, rural populations like those in Kajiado North County remain underrepresented, leaving unique environmental and cultural influences unexamined. Furthermore, few studies integrate cognitive development assessments with psychosocial well-being evaluations, limiting comprehensive understanding of trauma's multifaceted effects. Lastly, intervention-focused research aimed at mitigating cognitive impairments among street children is

scarce. The current study at Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, seeks to address these gaps by investigating the cognitive impact of childhood trauma among street boys in a rural Kenyan setting. It aims to generate data that informs tailored interventions promoting cognitive and psychosocial recovery in this vulnerable group.

2.2.4 Ways of Enhancing Psycho-Social Wellbeing of Street Children

Psychosocial well-being is a multifaceted concept encompassing psychological, social, and subjective experiences that influence an individual's ability to function effectively and participate in society (Eiroa-Orosa, 2020). Street children, particularly street boys, face unique psychosocial challenges due to exposure to traumatic experiences, social exclusion, and unstable living conditions. Addressing their psychosocial needs is critical for promoting resilience, mental health, and social integration.

Globally, street children have been the focus of various psychosocial intervention studies designed to improve mental health, social skills, and life outcomes. Yıldırım et al. (2020) conducted a study in urban India involving 150 street boys aged 10 to 16 years. The researchers explored their psychological needs and emphasized the fundamental importance of creating safe environments that ensure both emotional and physical security. The study advocated for multi-sectoral, scalable interventions integrating health, education, and social services to address the complex and overlapping psychosocial needs of street children. Yıldırım et al. argued that without safety and stability, other psychosocial interventions may have limited impact.

Similarly, Amanda and Martinsson (2017) investigated the role of social workers in South Africa in facilitating the psychosocial well-being of street children. Through qualitative interviews with 30 social workers in Johannesburg and Cape Town, the study highlighted that building

trustful, empathetic relationships was a cornerstone of effective intervention. Comprehensive support, including mental health counseling, education, and skill-building programs, was identified as essential to address the multiple layers of disadvantage experienced by street children. The study also underscored systemic challenges such as limited resources and policy gaps that constrain service delivery. Mashudu (2015), also in South Africa, focused specifically on mental health challenges among street boys. The quantitative study surveyed 200 boys in Durban and found high rates of substance abuse, suicidal ideation, and engagement in risky behaviors. The research recommended urgent implementation of mental health services tailored to this population, including counseling and substance abuse rehabilitation. Additionally, Mashudu emphasized the role of community-based support and peer mentoring programs to foster resilience and reduce health risks.

Across Africa, interventions to enhance psychosocial well-being among street children share common themes but are often challenged by limited resources and infrastructural barriers. For instance, Ayaya and Braitstein (2014) studied street boys in Nairobi, Kenya, assessing their exposure to potentially traumatic events like bullying and abuse. They found that many street children experienced ongoing trauma which severely undermined their psychosocial functioning. The authors recommended trauma-informed psychosocial support programs to help children process their experiences and develop coping mechanisms. In Nigeria, Adebayo and Ajayi (2018) examined the efficacy of community-based psychosocial interventions targeting street children in Lagos. Their program combined psychoeducation, life skills training, and social reintegration activities. The evaluation found significant improvements in participants' self-esteem, social relationships, and reduced behavioral problems, underscoring the potential for culturally contextualized interventions to foster well-being.

In East Africa, psychosocial interventions for street children remain underdeveloped but show promising directions. O'Gallo (2022) conducted research on homeless street boys in Kenya, focusing on the relationship between housing stability and mental health outcomes. The mixed-methods study involving 100 boys in Nairobi and Nakuru revealed that access to stable housing significantly improved psychosocial well-being by reducing stress, improving sleep, and facilitating access to health services. The study called for integrating housing solutions with mental health care as a holistic approach to enhance well-being. In Uganda, Kintu and Kamoga (2019) evaluated a psychosocial support program for street children in Kampala. The intervention included counseling, vocational training, and peer support groups. Quantitative and qualitative data from 80 participants indicated marked improvements in emotional regulation, social skills, and reductions in symptoms of depression and anxiety. The study highlighted the importance of peer networks in providing emotional support and fostering a sense of belonging among marginalized children.

Within Kenya, the psychosocial needs of street children have attracted growing research attention, particularly in urban centers such as Nairobi and Mombasa. O'Gallo (2022) notably emphasized that psychosocial well-being among street boys is strongly influenced by stable housing and access to mental health services, reflecting systemic barriers that many street children face. Ayaya and Braitstein's (2014) study in Nairobi provided a detailed assessment of traumatic experiences and psychosocial needs of street boys. Their findings pointed to a high prevalence of physical and sexual abuse, and recommended that psychosocial interventions be trauma-informed and culturally sensitive to effectively support recovery and reintegration. In addition, Mwangi (2017) conducted an intervention study at a rehabilitation center in Mombasa involving 60 street boys. The program combined counseling, mentorship, and recreational activities. The evaluation

showed enhanced self-esteem, improved social relationships, and reduced engagement in substance abuse post-intervention. Mwangi's research advocated for the scaling-up of such integrated psychosocial programs within existing child protection frameworks.

Despite the wealth of studies on psychosocial interventions for street children, several gaps remain. First, much of the research focuses on urban populations, with rural street children—such as those in Kajiado North County—receiving less attention, despite unique contextual challenges. Second, longitudinal studies evaluating the sustained impact of psychosocial interventions are limited, hindering understanding of long-term outcomes. Third, there is a scarcity of research integrating psychosocial well-being with physical health and cognitive development outcomes, which are interrelated domains crucial for holistic care. Furthermore, cultural adaptation and validation of psychosocial intervention models remain insufficiently explored. Many studies apply Western-based frameworks without adequate modification for local contexts, potentially reducing intervention effectiveness. Lastly, limited research investigates the role of community and family reintegration strategies, which are critical for sustainable psychosocial recovery.

In sum, enhancing psychosocial well-being among street children requires comprehensive, culturally sensitive, and trauma-informed interventions that address emotional safety, mental health, housing stability, and social support. Studies from diverse global, African, East African, and Kenyan contexts consistently highlight the importance of multi-sectoral approaches involving education, health, and social services. However, further research is needed to address gaps in rural settings, longitudinal impact, and culturally appropriate program design. The current study in Kajiado North County aims to build on this body of knowledge by exploring psychosocial interventions tailored to the specific needs of street boys in a rural Kenyan context, thereby contributing to improved well-being and social integration.

2.3 Summary and Research Gap

Existing literature provides extensive insights into the multifaceted impacts of childhood trauma on street children's psychosocial and cognitive well-being, as well as interventions designed to improve their overall welfare. The majority of these studies have been conducted across diverse global contexts including North America, Africa, Asia, and Europe targeting primarily street children and youth, with a focus on boys who are disproportionately represented in street populations.

Beilharz (2020) examined childhood trauma broadly, emphasizing its physiological and emotional sequelae. This study incorporated autonomic and sleep monitoring to link trauma exposure with psychological distress, emotional dysregulation, and social isolation. Although this research was conducted in a clinical setting with a general population, its findings are applicable to high-risk groups like street children who often endure chronic trauma. Similarly, Edidin et al. (2012) focused on homeless children in the United States, highlighting physical and sexual abuse histories, family dissolution, and disturbed relationships as common trauma experiences. Their study pointed to the compounding effects of homelessness, including neurocognitive deficits, poor academic outcomes, and mental health disorders such as PTSD and depression. These findings resonate globally, as similar patterns are observed in other vulnerable populations.

Bender et al. (2014) conducted mixed-method research with 145 homeless children in Los Angeles, Denver, and Austin, uncovering a high incidence of traumatic events and PTSD. Their study uniquely emphasized the role of poly-victimization, noting that children face multiple, overlapping traumas both before and during street life. This research underscores the complex trauma profiles experienced by street children and the necessity of trauma-informed services.

Dahlman et al. (2012), investigating Bolivian street boys, reported somewhat counterintuitive findings with higher creativity scores among street boys than non-street peers, though overall cognitive test scores were low. This suggests that trauma and street living can have nuanced cognitive effects, which vary by context.

Within Africa, Oladeji et al. (2010) explored adverse childhood experiences in Sub-Saharan Africa, linking family-related trauma to adult mental health problems, including substance use and mood disorders. Their work underlined the need for culturally relevant mental health interventions. In Kenya, Nduku et al. (2022) focused specifically on children in home settings, documenting high PTSD prevalence and comorbid anxiety and depression among younger children, highlighting an urgent need for early psychosocial intervention.

Regarding cognitive development, Enlow et al. (2012) analyzed the impact of early interpersonal trauma in the United States, finding significant cognitive delays when trauma occurred in the first two years of life. Wang et al. (2016) extended this by examining childhood neglect's influence on cognitive impairment in older Chinese adults, illustrating trauma's enduring cognitive impact across the lifespan. These studies collectively emphasize the importance of early trauma prevention and cognitive support.

To address these complex issues, various intervention studies have proposed ways to enhance psychosocial well-being among street children. Yıldırım et al. (2020) conducted research in India focusing on the psychological needs of street boys, advocating for coordinated strategies ensuring emotional and physical safety. Amanda and Martinsson (2017) described the challenges and successes of social workers supporting street children in South Africa, stressing the importance of building trust and providing holistic care. In Kenya, O'Gallo (2022) linked housing stability to improved mental health outcomes among street boys, demonstrating how environmental factors

directly influence psychosocial well-being. Ayaya and Braitstein (2014) emphasized trauma-informed psychosocial support for Kenyan street boys, particularly addressing bullying and abuse.

Despite the rich body of literature, significant research gaps remain. Firstly, while many studies address isolated aspects of childhood trauma, psychosocial well-being, or cognitive development, few have holistically examined the interrelationships among these factors in street children populations. Most research either focuses on trauma and mental health or cognitive effects alone, leaving a fragmented understanding of how these domains interact to influence overall well-being. Secondly, the majority of existing research has been conducted in urban centers in the United States, South Africa, India, and other countries, with limited focus on rural or peri-urban settings in Kenya.

Critically, there is a paucity of research on rescued street children in Kajiado North County, particularly within rehabilitation contexts like the Global Hope Rescue and Rehabilitation Center in Ngong Kajiado North County. This center serves a vulnerable population of rescued street boys who have experienced varying degrees of childhood trauma, yet little empirical data exists on their psychosocial challenges or cognitive development. Furthermore, limited studies have explored how tailored psychosocial interventions could best support reintegration and long-term well-being in this specific context.

Therefore, the present study aims to fill these gaps by comprehensively investigating the forms of childhood trauma experienced by street boys in Kajiado North County and assessing the impact on their psychosocial and cognitive well-being. It will also explore effective psychosocial interventions within the local rehabilitation setting. This approach will provide a more integrated understanding of trauma's influence and inform context-specific strategies to enhance the holistic development of street children in Kenya.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter focuses on a detailed description of the research process. It is important because it illustrates the specific and exact techniques and procedures that were applied. The areas covered in this section are research design, research site, target population, study sample, data collection, data processing and analysis and legal and ethical considerations.

3.2 Research Design

This study employed a descriptive research design to examine the impact of childhood trauma on the psychosocial well-being of rescued street boys at the Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, Kenya. Descriptive research design is appropriate for studies aiming to systematically describe characteristics of a population or phenomenon being studied without manipulating the environment (Siedlecki, 2020). It allows for the observation and documentation of conditions as they exist naturally, making it suitable for understanding the psychosocial conditions of rescued street children.

A qualitative approach was adopted in this study. This approach was selected because the phenomena under investigation childhood trauma, emotional recovery, cognitive development, and psychosocial well-being are complex, subjective, and deeply embedded in individual experiences. According to Creswell and Poth (2018), qualitative research allows for a comprehensive exploration of participants' lived experiences, behaviors, and perceptions, which is especially relevant when dealing with sensitive topics such as trauma and recovery in vulnerable

populations. Through methods like in-depth interviews, observation, and document analysis, rich data can be collected to illuminate how street boys experience and respond to trauma.

The research addresses a critical gap in literature, particularly in the Kenyan context. While many studies (such as, Oladeji, Makanjuola, & Gureje, 2010; Nduku, Mulinge, & Arasa, 2022) have focused on childhood trauma and mental health, few have explored how trauma specifically affects street boys in rehabilitation settings. Even fewer have done so in rural or peri-urban contexts like Ngong in Kajiado North County. Therefore, this design and approach enable the collection of context-specific, in-depth insights to inform targeted psychosocial interventions in such settings.

3.3 Research Site

The study would focus on rescued street boys and social workers at the Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County. Kajiado North County, located in Kenya, is home to approximately 1,117,840 people and hosts diverse local and immigrant communities (Kenya National Bureau of Statistics [KNBS], 2020). Urban poverty and family challenges often lead to a significant number of former street boys in the area. According to a report by the United Nations Human Settlements Programme (UN-Habitat), urban poverty and migration significantly contribute to streetism, with many street children coming from families experiencing extreme poverty, domestic violence, and disintegration (UN-Habitat, 2017). The exact number of rescued street families or children in Ngong, Kajiado North County is difficult to pinpoint, but national estimates suggest that over 250,000 children live on the streets in Kenya, with a significant proportion located in urban centers like Ngong (World Bank, 2019). It would be necessary for the study to focus on these children's experiences and the effectiveness of interventions aimed at reintegrating them into society.

The Global Hope Rescue and Rehabilitation Centre, located in Ngong, Kajiado North County, is a charitable organization dedicated to rescuing, rehabilitating, and educating homeless and disadvantaged boys. The center provides a range of services, including street and community outreach, residential care, healthcare, psychosocial support, non-formal/remedial and formal educational support, and vocational training.

Kajiado North County itself has a child-rich population structure, with 42% of its residents aged between 0-14 years. The county has been experiencing growth in urban areas like Ngong and Ongata Rongai, attracting migrants from rural areas and providing residency for people working in Nairobi and its environs. This urbanization contributes to the challenges faced by street boys in the area, as many are forced into street life due to economic difficulties and family hardships.

3.4 Target Population

The study focused on a sample drawn from the Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya. The center serves as a temporary home and rehabilitation facility for former street boys, and it admits over 600 boys annually, primarily aged between 11 and 18 years. For the purpose of this study, the target sample consisted of 60 rescued street boys and 5 key personnel. The boys selected had to have stayed at the center for at least seven months, ensuring they had undergone some level of psychosocial rehabilitation. The staff included counselors, social workers, and caregivers who had served at the institution for a minimum of six months, thus providing informed perspectives on the boys' development and challenges.

The boys at the center often come from extremely vulnerable backgrounds, having experienced various forms of childhood trauma, including physical abuse, neglect, family

breakdown, poverty, and exposure to drugs or gang violence (Nduku, Mulinge, & Arasa, 2022). Many of them suffer from psychosocial challenges such as low self-esteem, anxiety, aggression, learning difficulties, and poor emotional regulation (Edidin, Hunter, & Karnik, 2012). Their experiences on the streets often involving hunger, violence, and exploitation leave long-term scars that rehabilitation efforts must address.

The boys do not stay at the center indefinitely. Most are admitted for periods ranging from one to three years, during which time they receive counseling, education, life skills training, and family tracing services. The ultimate goal is reintegration into families or placement in foster care or vocational institutions (Ayaya & Braitstein, 2014). Despite these efforts, limited empirical research has been conducted within such centers, particularly in Kajiado County, highlighting a gap this study aims to fill.

According to Mugenda and Mugenda (2003), a population is a complete set of individuals, cases, or objects with common observable characteristics. Kabir (2016) adds that a population can also be a well-defined group of people, events, or services being investigated. Defining the target population is essential in research as it establishes the foundation for population validity. This study targets 60 former street boys aged 11–18 years and 5 personnel from the Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County. The boys included in the study must have stayed at the center for at least seven months, while the selected personnel should have served at the institution for at least six months. The center admits over 600 former street boys annually, making this the effective target population.

Table 3.1: *Target Population*

Target Population	**Location**	**Number**
Male former Street Children	Global Hope Rescue and Rehabilitation Center in Ngong Kajiado North County	60
Personnel	Global Hope Rescue and Rehabilitation Center in Ngong Kajiado North County	5
Sample Size Population		65

Source: *Kajiado County Records* (2025)

3.4.1 Sample Size

Determining an appropriate sample size is critical to ensure accurate representation of the study population while maintaining feasibility. The Global Hope Rescue and Rehabilitation Centre admits over 600 rescued street boys annually, making this the effective target population. According to Mugenda and Mugenda (2003), when dealing with a large population, a sample size of at least 10% is considered adequate for generalization if the population is homogeneous, as is the case with the rescued boys in the center. Applying this rule, the study selected a sample size

of 60 boys (10% of 600), which ensures manageable data collection while maintaining statistical and analytical validity.

Mugenda and Mugenda argue that if the population is less than 10,000 and relatively similar in characteristics as with boys undergoing rehabilitation in a shared environment 10% of the accessible population is sufficient to draw valid inferences. This approach is practical in social research, particularly when dealing with resource limitations and time constraints, as it balances the need for representative data with operational efficiency (Mugenda & Mugenda, 2003; Kabir, 2016).

The sample of 60 boys allows for an in-depth exploration of their experiences with childhood trauma, emotional development, and psychosocial recovery. It is also aligned with qualitative research practices, where sample sizes tend to be smaller but focused on depth of insight rather than breadth (Creswell & Poth, 2018). This sampling strategy supports the study's aim of providing context-specific insights into the psychosocial challenges and coping mechanisms among rescued street boys in Ngong, Kajiado North County, filling a gap where such localized studies are limited.

3.4.2Sampling Technique

This study employed a purposive sampling technique to investigate the impact of childhood trauma on the psychosocial well-being of rescued street boys at the Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County, Kenya. The center specifically houses male children aged between 11 and 18 years, who have previously lived on the streets. No girls or children outside this age range are admitted, which makes the population focused and suitable for targeted study.

Purposive sampling was appropriate for this study as it allowed the researcher to deliberately select participants based on characteristics relevant to the research objectives. The inclusion criteria were as follows: (1) former street boys aged 11–18 years, (2) those who had lived at the center for at least seven months, and (3) those with a history of living on the streets before admission. These criteria ensured that participants had sufficient exposure to both trauma and the rehabilitation environment to provide meaningful insights into the relationship between childhood trauma and psychosocial well-being.

A total of 60 boys who met these conditions were selected, reflecting a manageable yet sufficiently diverse group to allow for analysis. Additionally, five key personnel from the center such as social workers, counselors, and child-care officers were also purposely sampled. Each had served at the center for a minimum of six months, qualifying them to provide informed professional insights into the children's psychosocial development.

This sampling strategy enhanced the relevance and depth of the data collected, as it focused on individuals with direct experience of both street life and rehabilitation. Purposive sampling is widely recognized for its usefulness in qualitative and case study research where specific knowledge and lived experience are essential (Etikan et al., 2016; Palinkas et al., 2015).

Table 3.2: *Sample Size*

Category	**N**	**N**
Male former Street boys	60	60
Personnel	5	5
Total Target Population	65	65

3.5 Data Collection Instruments

The data collection process utilized questionnaires and interview guides for quantitative and qualitative data respectively.

3.5.1 Questionnaires

In this study, questionnaires were employed as the primary tool for data collection from 60 rescued street boys residing at the Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County. The use of questionnaires was chosen due to their effectiveness in collecting structured and quantifiable data from a relatively large group of participants within a limited timeframe. Given the sensitive nature of the topic of childhood trauma and its effects the questionnaire was carefully designed to encourage honest responses while maintaining the emotional safety and comfort of the participants.

The questionnaire was composed primarily of closed-ended and Likert-scale questions. Closed-ended questions allowed respondents to choose from predefined options, simplifying the process for participants who may have limited reading or writing proficiency. Likert-scale items provided a graded response format, such as “Strongly Agree,” “Agree,” “Neutral,” “Disagree,” and “Strongly Disagree,” allowing participants to express the intensity of their views, experiences, and perceptions regarding traumatic events and their psychosocial well-being. This format also facilitated the easy quantification of data for analysis.

The questionnaire was structured into three main sections. The first section collected demographic information, including age, duration of stay at the center, length of time spent living on the streets, and educational background. This information was crucial in establishing the

participants' contexts and identifying any demographic factors that could influence their psychosocial or cognitive development.

The second section of the questionnaire focused on childhood traumatic experiences. Questions in this section explored various forms of trauma, including physical abuse, sexual abuse, emotional neglect, abandonment, and exposure to substance use. These items were aligned with the study's objective to establish the types of trauma experienced by the former street boys. Participants were asked to indicate whether they had encountered specific traumatic events before arriving at the center and the frequency or severity of such experiences.

The third section aimed to assess the psychosocial well-being and cognitive development of the participants. It included questions related to the boys' emotional states, coping mechanisms, social relationships, behavior, school performance, and concentration. This section was developed in line with the study objectives to evaluate the psychological and social impacts of trauma and how these may have influenced the boys' ability to learn, interact with others, and adapt to life at the rehabilitation center.

Overall, the questionnaire served as a vital instrument in gathering relevant data to address the study's research objectives. It allowed the researcher to examine the lived experiences of the boys in a structured and sensitive manner while providing data that could be analyzed quantitatively. The carefully designed questions helped to uncover critical insights into the participants' backgrounds, traumas, and their current psychosocial conditions, ultimately contributing to the broader understanding of how childhood trauma impacts the well-being of rescued street children in Kenya.

3.5.2 Interview Guides

On the other hand, qualitative research techniques involve the collection of non-numerical data. These are the observations made and the experiences documented. These give a more in-depth grasp of the topics that were being studied rather than a measurement of the aforementioned concerns. Methods of in-depth interviewing of officials from Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County. They were interviewed separately in-order to elicit in-depth responses from each individual. This was guided by an interview guide which questions were guided by the objectives/research questions of the study.

3.5.3 Pre-Testing of Research Instruments

Pre-testing in research often determines the comprehensibility, accuracy and appropriateness of the research instrument (Olanrewaju, 2014). The questionnaire would be pre-tested among 10 children at Glad's House Kenya. The sociocultural, economic, and environmental aspects that define the specific context in which Global Hope Rescue and Rehabilitation Center in Kajiado County operates are likely to have a similar impact on the experiences of rescued street boys and the services offered to them. This particular setting for the study's pre-testing provides for a thorough comprehension of these contextual details. This pre-testing ascertains the construct validity of the instrument from supervisors' check for missing data, outliers, and inconsistencies.

3.5.3 Instrument Reliability

To assess the reliability of the research instrument, Cronbach's alpha coefficients were calculated for each variable in the study. Cronbach's alpha is a commonly used statistical tool that measures internal consistency, or how closely related a set of items are as a group. This helps

determine whether the questionnaire reliably captures the constructs it is intended to measure (Tavakol & Dennick, 2011).

In this study, Cronbach's alpha value of 0.70 or higher was considered acceptable for indicating good reliability (Otieno et al., 2023). Questionnaire items that yielded alpha values below this threshold were reviewed, revised for clarity or conceptual alignment, and re-tested to ensure they met the reliability criteria before full-scale data collection commenced.

Ensuring internal consistency is essential for producing valid and reproducible research findings, particularly in studies involving vulnerable populations such as rescued street children (Im et al., 2018; Waithera, 2020). Reliable instruments support more accurate assessments of psychosocial well-being and trauma-related experiences among participants.

3.5.4 Instrument Validity

To ensure the validity of the research instrument, the questionnaire items were developed based on the specific objectives of the study. Construct validity which refers to the extent to which a test measures the concept it is intended to measure was established through expert judgment. Specifically, university supervisors and lecturers in the Department of Counselling Psychology were consulted to evaluate whether each item accurately reflected the theoretical constructs under investigation.

This expert review process helped ensure that the questionnaire items were relevant, comprehensive, and clearly aligned with the study’s goals. According to Bolarinwa (2015), using content experts to assess construct validity is a common and effective method in social science research, particularly when investigating sensitive topics such as childhood trauma and psychosocial well-being.

3.6 Data Collection Process

The data collection process began with the researcher obtaining an introductory letter from Africa Nazarene University, which was used to support the application for a research permit. Subsequently, a research permit was secured from the National Commission for Science, Technology & Innovation (NACOSTI), which authorized the study to be conducted. Approval was then sought and granted by the management of Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado County.

Following these approvals, the researcher, accompanied by two research assistants, visited the rehabilitation centre to carry out data collection. The participants, who were former street boys residing at the centre, were informed about the purpose and objectives of the study in a clear and understandable manner. Since many participants were minors, caregiver or guardian consent was obtained where applicable, and assent was sought from the minors themselves, in accordance with ethical guidelines for research involving children.

Each participant was required to sign an informed consent form (or assent form for minors) before being given the self-administered structured questionnaire. Meanwhile, face-to-face interviews were conducted with the top officials of the centre to gather additional qualitative data on the psychosocial support services provided. To ensure the rights, confidentiality, and welfare of participants especially minors a strict ethical protocol was followed. Ethical approval was obtained, and informed consent from guardians, along with assent from the children, was secured using age-appropriate explanations. Confidentiality was maintained by using pseudonyms and securely storing data. Interviews were conducted in safe, private settings, with questions designed to avoid distress. Participation was voluntary, with the option to withdraw at any time. Emotional support was available throughout, ensuring a respectful and protective approach to data collection.

3.7 Data Analysis

The researcher gathered demographic data, including age, gender, duration of homelessness, family history, and an assessment of childhood trauma. Established instruments such as the interview guide and semi-structured questionnaire were applied to collect the data. The data collected was analyzed using the latest version of SPSS to ensure accurate and comprehensive statistical results. Descriptive analysis was used to summarize the demographic characteristics of the sample by calculating frequencies, means, and standard deviations for variables related to trauma exposure and psychosocial well-being.

To evaluate the relationship between childhood trauma and psychosocial well-being, correlational analysis using Pearson's correlation coefficient (r) was conducted. This analysis investigated the associations between specific types of trauma, such as abuse and neglect, and their psychological effects.

Additionally, regression analysis was employed to examine the predicted association between childhood trauma and psychosocial well-being while controlling for relevant variables, including age, gender, and duration of homelessness. Qualitative data were analyzed using thematic or content analysis, which involved identifying recurring themes and patterns within the participants' responses.

The interpretation and discussion of findings were framed within existing research on childhood trauma and the psychological well-being of homeless youth. The researcher also explored potential interventions to address trauma-related challenges and promote psychological resilience among rescued street boys.

Findings were disseminated through written reports, presentations, and scholarly papers, ensuring clear and concise communication of the results. The outcomes were shared with relevant stakeholders, including the staff of Global Hope Rescue and Rehabilitation Centre in Ngong Kajiado North County, policymakers, and community members, to facilitate informed decision-making and the development of effective programs.

3.8 Legal and Ethical Considerations

This study adhered to all legal and ethical requirements for conducting research in Kenya. Initially, a research authorization letter was obtained from the Department of Counselling Psychology at Africa Nazarene University. Furthermore, a research permit was secured from the Department of Children in Kajiado County. Additionally, a local permit was pursued to ensure full compliance with regional regulations. Throughout the research process, compliance with the Data Protection Act of 2019 was maintained to safeguard participant information.

Several key ethical considerations were prioritized to address potential concerns. Confidentiality of participant information was protected through the use of coding systems and secure data storage methods. The rights and well-being of child participants were of utmost importance, and the study was conducted in their best interest. This involved obtaining assent from the children and informed consent from their legal guardians.

The informed consent process was achieved by clearly explaining the study's purpose, procedures, risks, and benefits in simple, age-appropriate language to both guardians and participants. Consent was obtained from guardians and assent from the children, with time given for questions and assurance that participation was voluntary and withdrawal possible at any time.

Anonymity was guaranteed by avoiding the use of personal identifiers in research reports and presenting findings only as aggregated data.

Participants were informed of their rights, including the right to withdraw from the study at any time without any consequences. The research assistants involved in data collection underwent comprehensive training in research ethics, with particular emphasis on working with children. The lead researchers also completed training on research ethics to ensure a deep understanding of ethical principles, especially those relevant to vulnerable populations.

CHAPTER FOUR

DATA ANALYSIS AND FINDINGS

4.1 Introduction

The purpose of this study was to examine the effect of childhood trauma on psycho-social well-being of rescued street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County. This chapter provides an analysis and presentation of the data obtained using the questionnaire as well as semi-structured interviews.

4.2 Demographic Information

The study collected general demographic information from the respondents, including their gender, age, duration spent living on the streets prior to rehabilitation (in years), and the duration of stay at the rehabilitation center.

4.2.1 Response Rate

The study targeted a total population of 65 individuals, comprising 60 former street children and 5 staff members from the Global Hope Rescue and Rehabilitation Centre. Out of this targeted group, 61 individuals participated in the research, resulting in a 93% response rate. This high level of participation reflects strong engagement and willingness among the target group to contribute to the study. Initially, five staff members were expected to participate in the study to provide broader insights. However, only one ultimately took part due to a combination of factors. Some staff members were unavailable during the data collection period due to scheduling conflicts and workload demands, while others declined participation, citing personal reasons or discomfort discussing sensitive issues. Despite this, the participating staff member provided valuable

perspectives, and efforts were made to ensure the data gathered remained credible and relevant. The limitations posed by the reduced number of participants were acknowledged and considered in the analysis and interpretation of results.

The high response rate provided a reliable and representative dataset for analysis. It ensured sufficient variability across key variables related to childhood trauma and psychosocial well-being, supporting robust statistical interpretation. The level of participation also enhanced the credibility and generalizability of the study findings within similar rehabilitation contexts.

Table 4.1: *Response Rate*

	Sample	**Responded**	**Percentage**
Rescued Street Boys	60	60	92%
Personnel	5	1	1%

The majority of respondents (60) were former street boys, aligning with the primary focus of the study, while the remaining 5 were personnel involved in supporting or working with this population. The study achieved a 93% response rate, which enhances the reliability of the data collected and reflects effective outreach and engagement strategies during the data collection process.

This high level of participation ensured that the data was representative of the target population and provided a strong foundation for meaningful analysis and interpretation of the study's findings.

4.2.2 Age of the Respondents

The age distribution of the respondents was categorized into three main groups. The largest proportion, 46.67% (28 respondents), falls within the 12-14 years category. This was followed by the 15-17 years group, which accounted for 43.33% (26 respondents). A very small fraction, 1.67% (1 respondent), was in the 18 years & above categories. Age influences the variables by affecting memory of trauma, psychosocial maturity, and coping ability, thereby shaping the impact of childhood trauma on well-being.

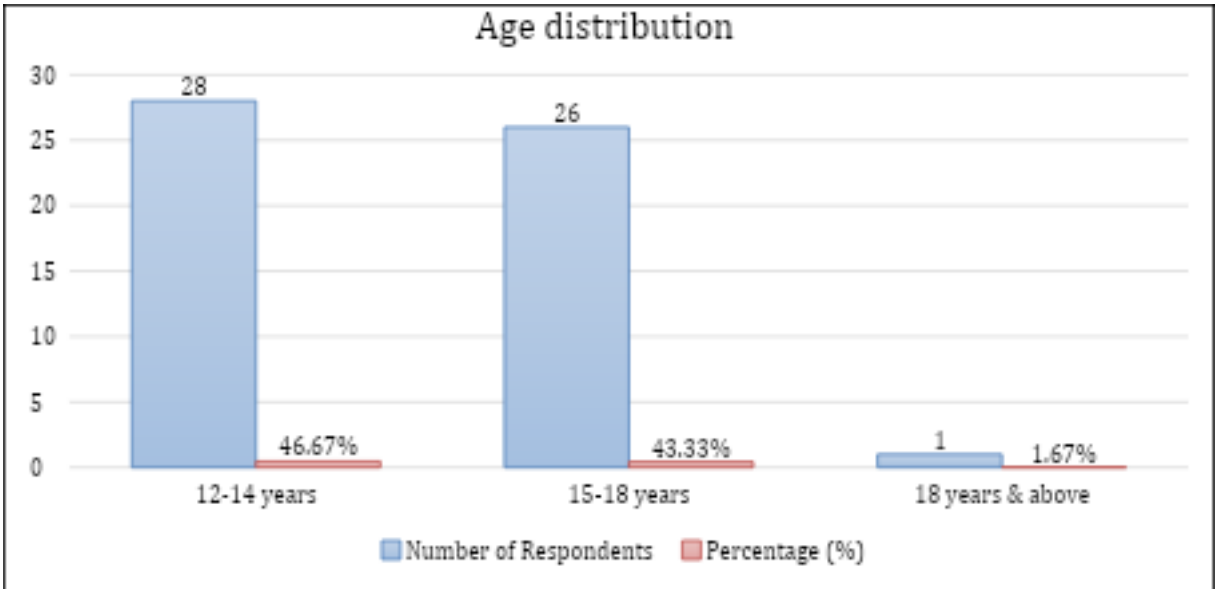


Figure 4.1 Age of the Respondents

(*Source: Field Data, 2025*).

This distribution indicates that the majority of participants were relatively younger, particularly in the 12-14 and 15-17 age ranges. The minimal number of respondents aged 18 years and above (18->) highlights a distinct focus on younger populations in this study.

4.2.3 Duration in Street Before Rehabilitation

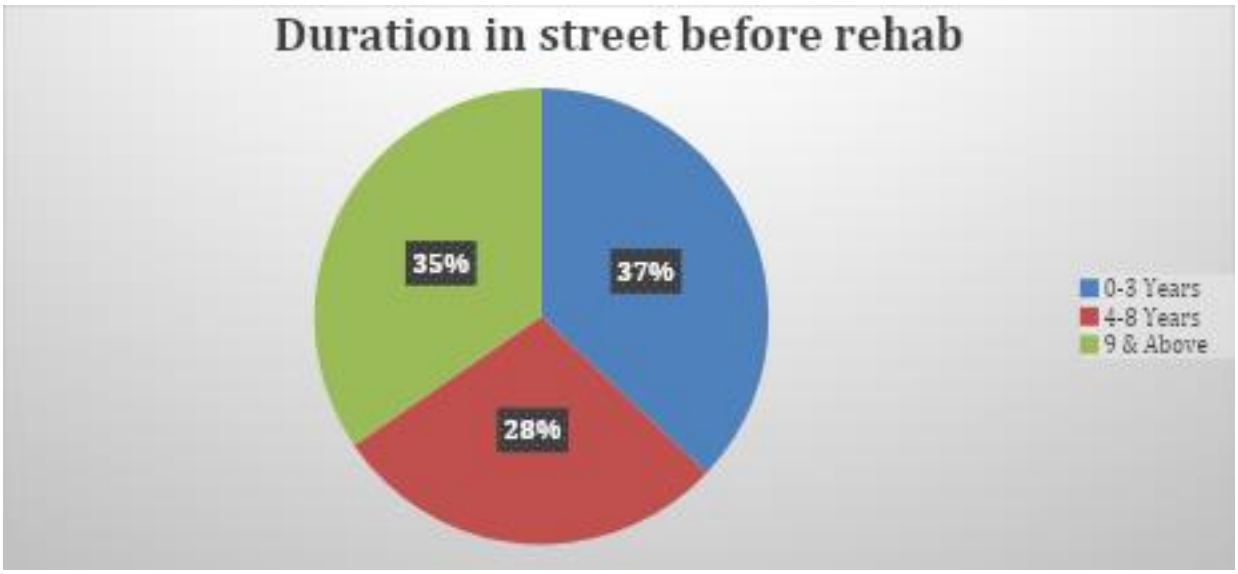


Figure 4.2 Duration in street before rehabilitation

(*Source: Field Data, 2025*).

The data shows that the majority of individuals (37.04%) had spent between 0 and 3 years on the street before rehabilitation. A significant portion (34.57%) spent 9 years or more on the street. Only 28.40% of individuals spent 4 to 8 years before rehabilitation. These statistics suggest that while many individuals had relatively short durations of street life before rehab, a substantial number faced longer periods of struggle, with a notable group remaining for an extended period before seeking or receiving rehabilitation. Duration in the rehabilitation center influences the variables by determining the extent of psychological support, stability, and healing time received, which directly affects how childhood trauma impacts psychosocial well-being.

4.2.4 Duration in Rehab Centre in years

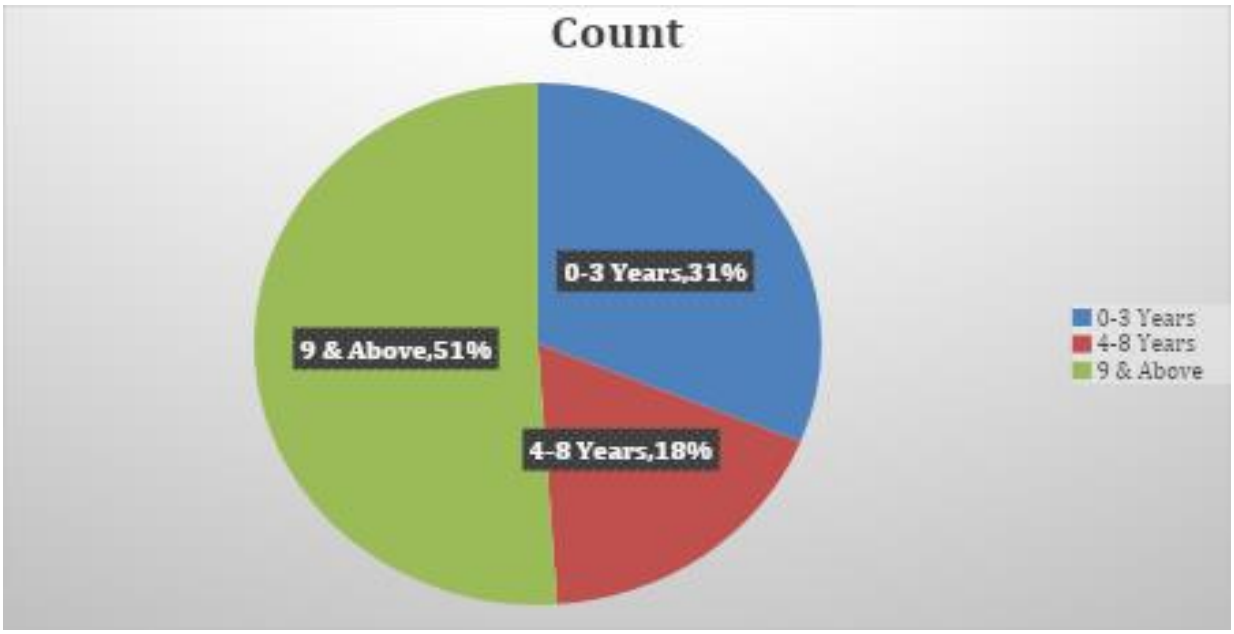


Figure 4.3 Duration in rehab Centre in years

(*Source: Field Data, 2025*).

The data shows that 51.11% of individuals spent 9 years or more in the rehab center, which was the largest category. 31.11% of individuals spent 0 to 3 years in the rehab center, while a smaller group, 17.78%, spent 4 to 8 years in rehabilitation. This suggests that a substantial number of individuals are in rehabilitation for an extended period, while a smaller group either spends less time or a moderate amount of time in rehab. The high percentage of individuals in the 9 & above category may indicate that for many, rehabilitation was a prolonged process. The longer rehabilitation duration enhances recovery, stability, and coping, reducing trauma's impact on psychosocial well-being.

4.3 Presentation of Research Analysis and Findings

Below is a table showing the percentage of responses for each category related to childhood trauma, emotional wellbeing, cognitive skills, and psycho-social wellbeing of street boys. Key: 1 = Strongly Agree, 2 = Agree, 3 = Neither Agree/Disagree, 4 = Disagree, 5 = Strongly Disagree.

4.3.1 Forms of Childhood Trauma among Street Boys

The first objective of the study was to establish the forms of childhood trauma among rescued street boys; a case of Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya. This section presents the findings obtained from questionnaires. The findings are presented in Table 4.2.

Table 4.2: *Forms of Childhood Trauma among Street Boys*

Category	**Strongly Agree (1)**	**Agree (2)**	**Neither Agree/Disagree (3)**	**Disagree (4)**	**Strongly Disagree (5)**
Experienced physical trauma during my time on the streets	13.33%	20.00%	16.67%	30.00%	20.00%
Emotional neglect was a significant aspect of my childhood trauma	8.33%	16.67%	25.00%	33.33%	16.67%

Cultural differences played a role in my traumatic experiences	16.67%	25.00%	8.33%	33.33%	16.67%
I felt unsafe in my living environment on the streets	11.67%	25.00%	16.67%	25.00%	21.67%

In the forms of childhood trauma section, many street boys reported having experienced physical trauma (20%) and emotional neglect (33.33%) during their time on the streets. The majority of respondents also felt unsafe in their living environment (33.33%) but less so with cultural differences (16.67%). This highlights the prevalence of trauma related to physical and emotional abuse as well as unsafe living conditions, which appear to be more impactful than cultural differences. The ranking (from most to least prevalent) is as follows: Cultural differences (41.67%); Feeling unsafe (36.67%); Physical trauma (33.33%); Emotional neglect (25.00%). Thus, cultural challenges, unsafe environments, and physical trauma were the most reported childhood traumas whereas emotional neglect was least cited.

4.3.2 Childhood Trauma on Psycho-social Well-being among Rescued Street Boys

The second objective of the study was to assess the impact of childhood trauma on psycho-social wellbeing of rescued street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya. This section presents the findings obtained from questionnaires. The findings are presented in Table 4.3.

Table 4.3: *Childhood Trauma on Psycho-social Well-being among Rescued Street Boys*

Category	**Strongly Agree (1)**	**Agree (2)**	**Neither Agree/Disagree (3)**	**Disagree (4)**	**Strongly Disagree (5)**
I had a supportive social network during my time as a street child	6.67%	16.67%	25.00%	33.33%	18.33%
I have a positive view of myself (self-esteem)	8.33%	16.67%	25.00%	33.33%	16.67%
I often feel a sense of accomplishment and worth	5.00%	16.67%	33.33%	30.00%	15.00%
My overall mood is generally positive	3.33%	16.67%	16.67%	30.00%	16.67%
I experience emotional trauma that affects me deeply	1.67%	6.67%	33.33%	50.00%	8.33%
I feel safe expressing my emotions	8.33%	8.33%	41.67%	25.00%	16.67%

In the psycho-social well-being section, a significant number of street boys report feeling the lack of a supportive network (33.33%) and low self-esteem (33.33%). Many felt disconnected emotionally, with 50% strongly disagreeing that emotional trauma doesn't deeply affect them.

However, a smaller portion (5.00%-8.33%) indicated that they feel positive about their accomplishments or have a generally positive mood. The results suggest that emotional trauma significantly impacts their emotional stability. The corrected ranking from most to least prevalent emotional well-being issues as follows: deep emotional trauma (50%), lack of supportive network and low self-esteem (33.33% each), low sense of accomplishment (30%), difficulty expressing emotions (25%), and generally positive mood (20%).

4.3.3 Impact of Childhood Trauma on Cognitive Development among Rescued Street Boys

The third objective of the study was to evaluate the impact of childhood trauma on cognitive development among rescued street boys at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya.. This section presents the findings obtained from questionnaires. The findings are presented in Table 4.4.

Table 4.4: *Impact of Childhood Trauma on Cognitive Development among Rescued Street Boys*

Category	**Strongly Agree (1)**	**Agree (2)**	**Neither Agree/Disagree (3)**	**Disagree (4)**	**Strongly Disagree (5)**
I was negatively affected by Childhood trauma has negatively	8.33%	25.00%	16.67%	33.33%	16.67%
I experience difficulties in concentrating due to	6.67%	8.33%	25.00%	41.67%	16.67%

the impact of childhood trauma					
Memory recall is significantly affected by childhood trauma	8.33%	8.33%	16.67%	33.33%	25.00%
I find it challenging to process information effectively because of childhood trauma	8.33%	16.67%	33.33%	25.00%	16.67%
Childhood trauma has impaired my ability to learn new information	8.33%	25.00%	16.67%	25.00%	25.00%

The table 4.4 above shows that childhood trauma has a considerable impact on the cognitive abilities of former street boys. Most of the reported difficulties in concentrating (41.67%) and memory recall (33.33%). Additionally, 33.33% of respondents felt that trauma had impaired their ability to process information effectively. However, the overall cognitive impact had mixed, with some boys still managing to maintain certain cognitive functions despite trauma. The corrected ranking from most to least prevalent cognitive effects of childhood trauma is: difficulty concentrating (41.67%), impaired information processing (33.33%), memory recall issues (33.33%), impaired learning ability (33.33%), and overall negative cognitive impact (33.33%).

4.3.4 Ways of Enhancing Psycho-Social Wellbeing of Rescued Street Boys

The final objective of the study was to measure the ways of enhancing psycho-social wellbeing of rescued street boys; a case of Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya. This section presents the findings obtained from questionnaires. The findings are presented in Table 4.5.

Table 4.5: *Ways of Enhancing Psycho-Social Wellbeing of Rescued Street Boys*

Category	**Strongly Agree (1)**	**Agree (2)**	**Neither Agree/Disagree (3)**	**Disagree (4)**	**Strongly Disagree (5)**
I generally feel optimistic about my life	1.67%	8.33%	16.67%	41.67%	31.67%
I believe I have a clear sense of purpose in my life	1.67%	6.67%	25.00%	41.67%	25.00%
I actively forge and maintain positive connections with others	5.00%	13.33%	16.67%	33.33%	31.67%
I feel a strong sense of autonomy in making decisions about my life	6.67%	16.67%	33.33%	25.00%	18.33%

I often see the positive side of challenging situations	6.67%	5.00%	16.67%	33.33%	38.33%

The Psycho-Social Wellbeing section shows a relatively low sense of optimism (41.67%) and purpose (41.67%) among street boys, with 31.67% strongly disagreeing with feeling optimistic or having a clear sense of purpose. A majority felt disconnected from others (33.33%), and 38.33% strongly disagreed with viewing challenging situations positively. Autonomy appears somewhat low, with 25% disagreeing with having decision-making power over their lives. These results indicate significant struggles with psycho-social wellbeing. The corrected ranking from most to least prevalent psycho-social wellbeing challenges were: inability to see positives in challenges (38.33%), lack of optimism and positive connections (31.67% each), unclear sense of purpose (25%), and low autonomy in decision-making (18.33%).

4.4 Qualitative Data

The interview guide questions aim to explore the impacts of childhood trauma on street children in Kajiado North County, with a particular focus on the experiences of social workers at the Global Hope Rescue and Rehabilitation center. The questions address the trauma's effect on emotional, cognitive, and psychosocial well-being. To evaluate how hypothesis testing can be done on each of the open-ended questions, breaking down the likely hypotheses and the method of testing based on the observed behaviors and conditions described by the social workers.

4.4.1 "In your experience, what types of childhood trauma have you observed among rescued street boys in Kajiado North County?"

Personal Social Work Analysis: Social workers would likely discuss a range of childhood trauma experienced by rescued street boys, which may include physical abuse, neglect, domestic violence, violence on the streets, hunger, and drug/substance abuse. These are common issues faced by street children globally and are prevalent in Kajiado North County.

Data Collection: Through interviews with social workers and documentation of specific incidents or behaviors observed, types of trauma.

> *"I have witnessed boys arriving at the center with visible scars from physical abuse, some so weak they could barely stand due to severe malnutrition,"* a social worker shared, *highlighting the harsh realities of the traumas these children endure.*

Analysis: Descriptive analysis would reveal the most common trauma types reported. If social workers indicate that street violence and hunger play a significant role in the trauma experienced.

4.4.2 "Could you kindly share your observations or experiences about the ways in which a rescued street boy's psycho-social well-being has been impacted by childhood trauma?"

Personal Social Work Analysis: Rescued street children displayed signs of emotional distress, such as anxiety, depression, withdrawal, anger, or difficulty forming relationships. Trauma often leads to emotional dysregulation and poor coping strategies.

Data Collection: Social workers reported emotional issues observed in the children, such as difficulty trusting adults, anger outbursts, or self-harming behaviors. Tracking emotional well-being through counseling records or interviews with the children can provide qualitative data.

Analysis: Statistical analysis such as frequency of trauma-related emotional issues shows a clear relationship between specific types of trauma and emotional impacts. If high rates of emotional distress are reported among children who have experienced physical abuse or neglect.

4.4.3 "Could you describe how trauma experienced as a child affected their cognitive abilities as rescued street boys?"

Personal Social Work Analysis: Childhood trauma can impair cognitive abilities, including memory, attention, and problem-solving skills. Street children might struggle with academic tasks due to their traumatic backgrounds, which interfere with concentration and learning.

Data Collection: Social workers provided case examples where children display difficulty concentrating or show delayed academic progress. These observations were supported by academic performance data if the children are enrolled in school.

Analysis: A comparison between children who experienced varying levels of trauma (physical abuse, neglect, etc.) and their cognitive performance in school could reveal significant differences, supporting the cognitive development struggles observed in highly traumatized children.

4.4.4 "How do these policies address the psychosocial well-being of rescued street boys, considering the potential impact of childhood trauma?"

Personal Social Work Analysis: The center's policies may be underdeveloped, but the initial approach was often focused on meeting basic needs (food, shelter, safety). After this, they aim to provide emotional care (love and support) and counseling to help street children cope with

trauma. Social workers might describe how they aim to re-integrate the boys into society through education and emotional support.

Data Collection: Through interviews with social workers, case studies, and feedback from the children who have undergone counseling and schooling, we can assess the impact of the policies. Tracking behavioral changes, improvements in school performance, or emotional responses before and after interventions can provide relevant data.

Analysis: children showed improvements in behavior and emotional stability after receiving support, education, and counseling, supporting the effectiveness of the center's approach in promoting psychosocial well-being

4.5 Pearson Correlation

Pearson correlation analysis was undertaken to find out whether there were any significant relationships between the independent and dependent study variables. The findings are as presented in Table 4.6 below.

Table 4.6: Pearson Correlation Analysis Between Childhood Trauma and Psychosocial Well-Being

Variables	**Psychosocial Well-Being (r)**	**p-value**	**N**
Childhood Trauma (Overall Score)	-0.632**	0.000	61
Emotional Abuse	-0.589**	0.000	61
Physical Abuse	-0.472**	0.003	61
Neglect	-0.518**	0.001	61
Exposure to Violence	-0.546**	0.000	61

** denotes significance at the 0.01 level (2-tailed)

Note: r = Pearson correlation coefficient, p-value < 0.05 indicates a statistically significant correlation, N = 61 total participants.

The Pearson correlation analysis conducted in this study examined the relationship between childhood trauma and the psychosocial well-being of rescued street boys residing at the Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado North County. The results revealed statistically significant negative correlations between all measured forms of childhood trauma and psychosocial well-being, indicating that higher exposure to trauma is associated with poorer psychosocial outcomes.

The overall childhood trauma score demonstrated a strong negative correlation with psychosocial well-being ($r = -0.632$, $p < 0.01$). This suggests that as the severity and frequency of traumatic experiences increase, the psychological and emotional stability of the affected children significantly declines. Among the different categories of trauma analyzed, emotional abuse showed a particularly strong inverse relationship with psychosocial well-being ($r = -0.589$, $p < 0.01$). This finding implies that children who endured higher levels of emotional abuse—such as constant criticism, rejection, or verbal threats are likely to experience deep emotional distress, difficulty trusting others, and challenges in forming meaningful social relationships.

Physical abuse also showed a significant negative correlation ($r = -0.472$, $p < 0.01$), indicating that children who were subjected to physical harm, such as beatings or other forms of violence, tend to exhibit lower emotional resilience and greater psychological vulnerability. Similarly, neglect, which refers to the failure to meet a child's basic physical or emotional needs, correlated negatively with psychosocial well-being ($r = -0.518$, $p < 0.01$). Neglected children often

lack self-worth and struggle with issues related to attachment and self-regulation. Furthermore, exposure to violence whether as witnesses or direct victims was negatively associated with psychosocial well-being ($r = -0.546$, $p < 0.01$). This underscores the long-lasting impact of violent environments on children, often leading to symptoms of post-traumatic stress, anxiety, and behavioral issues.

Overall, these findings reinforce the argument that childhood trauma, in its various forms, plays a critical role in shaping the psychological and emotional health of former street children. The strength and consistency of the negative correlations across all trauma categories suggest that intervention programs must adopt a trauma-informed approach. Such approaches should be tailored to address the specific needs of children based on the nature and extent of their traumatic experiences. Importantly, early and sustained rehabilitation efforts can help mitigate the adverse effects of trauma and promote long-term psychosocial recovery.

4.5.1 Inferential Statistics and Pearson Correlation Analysis

The study explored the relationship between childhood trauma and psychosocial well-being among former street boys residing at Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County. The goal was to determine if significant statistical relationships exist between experiences of childhood trauma (the independent variables) and levels of psychosocial well-being (the dependent variable). A total of 61 participants were involved in the study 60 former street boys and 1 key official who contributed through direct assessments and professional insights.

Inferential analysis was conducted using Pearson correlation, a statistical method used to examine the strength and direction of relationships between two continuous variables.

The results in table 4.6 demonstrated the following: A significant negative correlation between overall childhood trauma and psychosocial well-being ($r = -0.632$, $p < 0.01$), indicating that boys with higher trauma exposure tended to have lower levels of emotional stability, self-worth, and social functionality. All four sub-dimensions of childhood trauma emotional abuse, physical abuse, neglect, and exposure to violence also exhibited significant negative relationships with psychosocial well-being: Emotional abuse ($r = -0.589$, $p < 0.01$); Physical abuse ($r = -0.472$, $p = 0.003$); Neglect ($r = -0.518$, $p = 0.001$); Exposure to violence ($r = -0.546$, $p < 0.01$).

These findings support existing psychological research that links early trauma to later mental health struggles and social challenges. The results indicate that traumatic experiences during childhood significantly hinder the development of positive psychosocial attributes in former street boys.

CHAPTER FIVE

DISCUSSIONS, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter presents the discussion of the findings, a summary of key findings, conclusion, and recommendations in regard to the data collected on the effect of childhood trauma on psychosocial well-being of former street boys in Global Hope Rescue and Rehabilitation Center in Ngong, Kajiado North County, Kenya.

5.2 Discussions

This section provides a detailed discussion of the study's findings, focusing on the research objectives and how the results align with or differ from previous research. The study found that age, time spent on the streets, and duration in rehabilitation significantly influenced the psychosocial well-being of former street boys. Specifically, younger participants were more vulnerable to the effects of trauma due to underdeveloped coping mechanisms. Respondents who had spent extended periods living on the streets exhibited more severe trauma-related symptoms, including emotional withdrawal and behavioral instability. In contrast, those who had spent longer durations in rehabilitation centers showed better emotional regulation, improved interpersonal relationships, and greater cognitive stability.

These findings highlight the importance of early intervention and prolonged psychosocial support in aiding recovery from childhood trauma. When compared to previous research, the results of this study are consistent with Mwangi et al. (2021), who reported that younger children exposed to trauma have fewer coping skills, making them more susceptible to psychological distress. The current findings also support the work of Otieno and Kamau (2023), who found that

longer stays in supportive rehabilitation environments contribute to emotional recovery and mental resilience. Additionally, the study aligns with Smith and Thompson (2022), who emphasized that personal factors such as age and trauma history significantly shape how trauma is internalized and expressed.

These results underscore the complex interplay between individual backgrounds and institutional support systems in addressing childhood trauma. They reinforce the idea that comprehensive, long-term rehabilitation tailored to the age and trauma history of each child is critical in restoring psychosocial well-being among former street children. Overall, the findings contribute to the broader understanding of how childhood trauma impacts mental health outcomes and offer evidence-based insights for improving the design of rehabilitation programs for vulnerable youth populations.

5.2.1 Impact of Childhood Traumatic Events on Social Relationships among Rescued Street Boys

The findings of the study indicate that childhood trauma has a significant negative impact on the social relationships of street boys. A large proportion of respondents (33.33%) reported emotional neglect, while 20% experienced physical trauma. These types of abuse can lead to difficulties in establishing and maintaining healthy social connections. The sense of feeling unsafe in their living environment, as reported by 33.33% of the boys, further impairs their ability to trust others and form stable relationships. Research supports this, showing that individuals who have experienced childhood trauma often struggle with trust and emotional intimacy (Briere & Scott, 2015). These boys' difficulty in forming relationships can be attributed to their early experiences of physical and emotional neglect, which often manifest as attachment disorders in later life (Van

der Kolk, 2014). Street boys are especially vulnerable, as their environment often lacks the support systems necessary for healing and rebuilding social trust.

Cultural differences, while noted by some (16.67%), seem to have less impact compared to the trauma experienced. These findings are in line with previous studies suggesting that the psychological impact of early abuse and neglect overshadows the effects of external factors like culture or ethnicity (Langeland et al., 2015). The trauma experienced by these boys creates a barrier to forming positive social bonds, leading to further isolation and social challenges.

5.2.2 Childhood Trauma on Psycho-social Well-being among Rescued Street Boys

The psycho-social wellbeing of street boys was deeply affected by their traumatic childhood experiences. A significant portion of respondents (33.33%) reported low self-esteem and a lack of supportive networks. This aligns with findings from previous studies that show how childhood trauma leads to a sense of worthlessness, lack of self-identity, and emotional numbness (Herrmann, 2019). The majority of the street boys (50%) strongly disagreed with the notion that emotional trauma does not affect them, highlighting the profound impact trauma has on their emotional stability.

A smaller portion (5%-8.33%) expressed positivity, indicating that some may have developed coping mechanisms or found support in environments like the Global Hope Rescue and Rehabilitation Center. However, these positive responses were in the minority, suggesting that for the majority, trauma continues to dominate their emotional lives. The inability to develop positive emotional experiences, compounded by a lack of a supportive network, can lead to long-term mental health challenges such as depression, anxiety, and other emotional disturbances (Briere &

Scott, 2015). The emotional isolation these boys experience underscores the importance of intervention programs aimed at addressing emotional trauma and fostering emotional resilience.

5.2.3 Impact of Childhood Trauma on Cognitive Development among Rescued Street Children

The cognitive abilities of street boys appear to be significantly impacted by the trauma they have experienced. A large proportion of respondents (41.67%) reported difficulties with concentration, while 33.33% reported problems with memory recall. These findings are consistent with research that links childhood trauma to deficits in cognitive functioning. Trauma can disrupt brain development, particularly in areas responsible for memory, attention, and emotional regulation (Teicher et al., 2016). This impact was particularly noticeable among street children, who often lack access to educational resources and supportive environments conducive to cognitive development.

The mixed responses in the cognitive domain, with some boys managing to retain cognitive abilities despite trauma, suggest that resilience and individual differences play a role. However, childhood trauma significantly impairs cognitive functions such as concentration and information processing, limiting educational and developmental opportunities for former street boys (Akinyi & Mwaura, 2023). Despite individual resilience, many face long-term disadvantages due to trauma-related cognitive challenges.

5.2.4 Ways of Enhancing Psychosocial Wellbeing of Rescued Street Boys

The psychosocial wellbeing of former street boys was notably low, with 41.67% reporting a lack of optimism and purpose. Additionally, 31.67% strongly disagreed with having a clear sense of purpose, and 33.33% felt disconnected from others. These findings suggest a deep sense of

hopelessness and social detachment, which was often a consequence of early trauma (Van der Kolk, 2014). Trauma not only impacts emotional health but also severely limits an individual's sense of direction and connection to society.

The lack of autonomy, with 25% of respondents disagreeing with the idea that they have decision-making power over their lives, indicates a lack of control and agency. This sense of powerlessness can be further exacerbated by living on the streets, where daily survival takes precedence over personal growth or future planning (Briere & Scott, 2015). Additionally, the inability to view challenges positively, as reported by 38.33% of the boys, suggests a pervasive negative outlook on life, which can impede their efforts to overcome adversity and improve their circumstances.

These findings highlight the importance of creating interventions that address not only the immediate survival needs of street boys but also their psychosocial wellbeing. Programs that focus on developing emotional resilience, fostering positive relationships, and instilling a sense of purpose and autonomy could significantly enhance the quality of life for these children (Herrmann, 2019). Kenya's Children Act (2022) aims to protect vulnerable children and promote their rehabilitation through community-based interventions and institutional care. While the Act provides a strong legal framework for child protection, its implementation faces challenges due to limited funding, lack of trained personnel, and inconsistent enforcement (Republic of Kenya, 2022). Furthermore, the policy largely focuses on immediate protection and basic needs, with insufficient emphasis on long-term psychosocial rehabilitation. This gap underscores the need for integrating structured psychological support within government programs, aligning with findings from this study that highlight the role of comprehensive rehabilitation in fostering recovery and long-term well-being. Strengthening the Act to incorporate evidence-based trauma recovery

approaches would better support former street children, fulfilling both protective and developmental objectives.

5.3 Summary of main findings

This section presents a summary of the main study findings which was done in line with the objectives of the study.

5.3.1 Impact of Childhood Traumatic Events on Social Relationships among Rescued Street Boys

The study reveals that childhood trauma profoundly affects the social relationships of street boys. Many respondents reported experiencing physical trauma and emotional neglect while living on the streets, with a significant number also felt unsafe in their environment. These adverse experiences appear to have a greater impact on their social interactions than cultural differences. Social workers highlighted the role of various trauma factors, including abuse, neglect, domestic violence, street violence, hunger, and substance abuse, all of which contribute to the boys' struggles in forming healthy relationships. These findings support that rescued street boys' trauma results from a combination of environmental factors and family dysfunction, rather than poverty alone. Addressing these complex issues was crucial for improving the social well-being of street children in the region.

5.3.2 Childhood Trauma on Psycho-social Wellbeing among Rescued Street Boys

Childhood trauma significantly affects the psycho-social well-being of rescued street boys, with many expressing feelings of low self-esteem and a lack of supportive networks. A substantial number of boys reported that emotional trauma deeply impacts their lives, leading to emotional

instability and distress. Common signs of emotional issues observed included anxiety, depression, anger, withdrawal, and difficulty in forming trustful relationships. Social workers noted that these emotional struggles are a direct result of the trauma the children have experienced. The study findings therefore imply that childhood trauma plays a significant role in the emotional well-being of street children, leading to mental health challenges such as anxiety and depression. Effective support and counseling are essential to addressing these emotional scars and improving their mental health.

5.3.3 Impact of Childhood Trauma on Cognitive Skills among Rescued Street Children

Childhood trauma significantly impacts the cognitive abilities of street boys, with many experiencing difficulties in concentration and memory recall. Trauma also impairs their ability to process information effectively, which can hinder their academic and learning performance. Despite these challenges, some boys manage to retain certain cognitive functions, though the overall trend indicates that trauma has a detrimental effect on cognitive development. Social workers observed that these cognitive struggles often manifest in academic difficulties and poor focus, which are exacerbated by the traumatic backgrounds of the children. This study supports that childhood trauma negatively affects cognitive skills, hindering the learning abilities of street children. Addressing these cognitive impairments essential for improving their educational outcomes and overall development.

5.3.4 Ways of Enhancing Psycho-Social Wellbeing of Rescued Street Children

The study highlights significant challenges in the psychosocial wellbeing of street boys, including low levels of optimism, purpose, and a sense of connection with others. Many

respondents reported low autonomy, feeling disconnected from society, and struggling with the emotional toll of challenging situations. The policies at the Global Hope Rescue and Rehabilitation Center, focused on meeting basic needs and providing emotional care, have shown some positive effects on improving the children's psychosocial wellbeing. Social workers emphasize the importance of counseling, education, and emotional support in re-integrating the boys into society. These interventions appear to help address emotional distress and cognitive challenges, supporting the hypotheses that the center's policies positively impact the psychosocial recovery of street children. This approach is essential for fostering emotional stability and future success. This study found a significant negative correlation between childhood trauma and psychosocial well-being among former street boys at Global Hope Rescue and Rehabilitation Center. Higher exposure to trauma, emotional abuse, physical abuse, neglect, and violence was linked to lower emotional stability, self-worth, and social functionality. Pearson correlation results confirmed strong negative associations, emphasizing trauma's lasting impact. While Kenya's Children Act (2022) offers legal protection, its limited focus on long-term psychosocial rehabilitation highlights the need for more comprehensive, trauma-informed government support systems.

5.4 Conclusion

The study concludes that childhood trauma severely impairs the social relationships of street boys. Many experience significant challenges in forming trustful and healthy relationships due to physical abuse, neglect, street violence, and family dysfunction. These traumatic experiences create a persistent sense of fear and insecurity, which significantly affects their social interactions. Social workers affirm that these boys' difficulties in developing positive social bonds are more closely linked to trauma than to cultural factors. It was evident that addressing the root

causes of these traumas such as abuse, violence, and neglect is crucial in improving their social well-being. Therefore, interventions aimed at restoring healthy social relationships are essential for the rehabilitation and reintegration of street boys into society.

The findings for the second objective established that childhood trauma profoundly affects the emotional wellbeing of street boys, leading to widespread issues such as low self-esteem, anxiety, depression, and emotional instability. Many boys express a deep sense of emotional distress, often accompanied by anger, withdrawal, and difficulties in establishing trustful relationships. Social workers noted that these emotional scars are direct consequences of the traumatic experiences the children endured, which have long-lasting effects on their mental health. This emphasizes the need for targeted emotional support, counseling, and mental health interventions to help these children heal. Addressing emotional wellbeing critical for fostering emotional stability, building resilience, and ultimately improving the overall psychosocial health of street children.

Based on the findings for the third objective the study concludes that childhood trauma has a detrimental impact on the cognitive skills of street boys, hindering their ability to concentrate, retain information, and perform academically. Many children struggle with memory recall, processing information, and focusing on learning tasks due to the overwhelming trauma they have experienced. These cognitive challenges often manifest in poor academic performance and an inability to fully engage in educational opportunities. Social workers observed that although some cognitive functions remain intact, trauma continues to impair cognitive development, preventing the boys from achieving their full academic potential. The findings highlight the importance of addressing these cognitive impairments through tailored educational programs and cognitive

development interventions to help former street boys overcome these challenges and succeed in their educational endeavors.

On the fourth objective, the study concludes that enhancing the psychosocial wellbeing of street boys requires a comprehensive, multi-dimensional approach. The boys often experience low levels of optimism, purpose, and autonomy, contributing to a sense of disconnection and emotional turmoil. The policies at the Global Hope Rescue and Rehabilitation Center, focusing on meeting basic needs, emotional support, and counseling, have shown positive outcomes in improving the psychosocial well-being of the boys. Social workers emphasize the importance of emotional care, counseling, and education in facilitating the boys' reintegration into society. These interventions are crucial in addressing emotional distress, cognitive impairments, and social challenges. The study affirms that supporting the boys' emotional and social recovery is essential for promoting their future success and reintegration into society. Childhood trauma severely affects former street boys' psychosocial well-being. Despite support from rehabilitation centers, gaps in long-term government interventions persist. Strengthening the Children Act (2022) and integrating trauma-informed care are vital for sustainable recovery and successful reintegration.

5.5 Recommendations

Based on the overall conclusion, the study recommends implementing comprehensive, trauma-informed care within rehabilitation centers to address the deep emotional, cognitive, and social impacts of childhood trauma. It emphasizes the need for targeted interventions such as counseling, educational support, and emotional healing programs. Additionally, strengthening and fully implementing the Children Act (2022) with a focus on long-term psychosocial rehabilitation is crucial. Collaborative efforts between government, NGOs, and rehabilitation centers are

essential to ensure sustainable recovery and successful reintegration of former street boys into society. Based on the findings of the study, the following recommendations were made.

5.5.1 Impact of Childhood Traumatic Events on Social Relationships among Rescued Street Boys

To improve the social relationships of street boys affected by trauma, it is recommended that trauma-informed care programs be implemented at both institutional and community levels. These programs should focus on building trust, encouraging positive peer interactions, and helping children form safe, stable relationships. Social workers and caregivers should be trained in trauma-sensitive practices to ensure they respond to the boys' behaviors with empathy and understanding. Group therapy, mentorship, and recreational activities can be used to create safe spaces where boys can build social skills and emotional resilience. It was also important to engage families and communities in reintegration efforts, where possible, to strengthen the boys' support networks. Addressing the root causes of trauma can greatly enhance their ability to connect with others and foster long-term social stability.

5.5.2 Childhood Trauma and Psycho-social Well-being among Rescued Street Boys

Improving the psycho-social well-being of street boys requires the establishment of structured mental health support systems within rehabilitation centers and communities. It is recommended that every child undergo regular psychological assessments to identify emotional issues early. Counseling services should be readily available, with professionals specializing in childhood trauma and adolescent mental health. Therapeutic programs such as art therapy, music therapy, and group counseling can help boys express and process their emotions in a safe

environment. Emotional literacy training should also be incorporated into rehabilitation efforts, teaching boys to understand, manage, and communicate their feelings. Strengthening supportive relationships with caregivers and peers can build trust and emotional security. Investing in such mental health initiatives vital to reducing anxiety, depression, and other emotional issues resulting from childhood trauma.

5.4.3 Impact of Childhood Trauma on Cognitive Skills among Rescued Street Boys

To mitigate the negative impact of trauma on cognitive skills, rehabilitation centers should integrate specialized educational programs that accommodate the learning needs of traumatized children. Teachers and caregivers must be trained to recognize trauma-related learning difficulties and apply appropriate teaching strategies that support cognitive development. Individualized learning plans should be developed to help boys gradually rebuild focus, memory, and critical thinking skills. Incorporating experiential and hands-on learning can also be effective, particularly for boys with short attention spans. Psychological support should run alongside academic activities to ensure that unresolved trauma does not hinder learning progress. Collaborations with educational psychologists and learning specialists can further improve outcomes. These interventions are crucial for ensuring that street boys gain the academic skills necessary for long-term independence and personal development.

5.4.4 Ways of Enhancing Psycho-Social Wellbeing of Rescued Street Boys

To enhance the psychosocial wellbeing of street boys, it is recommended that rehabilitation centers adopt a holistic approach that addresses their emotional, social, and cognitive needs. Programs should prioritize not only the provision of food, shelter, and safety, but also long-term

psychological and educational support. Life skills training, mentorship programs, and structured routines can help build confidence, purpose, and a sense of belonging. Encouraging participation in community service or group activities can strengthen social bonds and foster a sense of connection. Furthermore, continuous evaluation of psychosocial interventions should be conducted to ensure they are effectively meeting the evolving needs of the children. Strengthening collaborations with local schools, health professionals, and community leaders would support a coordinated approach to reintegration and promote long-term psychosocial recovery and stability.

5.6 Areas of Further Research

Future research should explore the long-term outcomes of former street boys, assessing whether they successfully reintegrated or returned to the streets, and identifying the factors such as program effectiveness or social challenges that influenced their post-rehabilitation transformation or relapse. Future studies should focus on evaluating the effectiveness of individual versus group counseling approaches in addressing emotional and cognitive impairments. Additionally, research could explore the role of peer support systems in enhancing social relationships and emotional wellbeing among rehabilitated street children. A longitudinal study tracking the progress of boys after reintegration into society would also be valuable in assessing sustained psychosocial development. Moreover, further investigation into the correlation between the duration of street exposure and the severity of trauma effects could provide more targeted intervention strategies. Exploring gender-based differences in trauma experiences and outcomes may also enrich the understanding of trauma-informed care.

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APPENDIX I: QUESTIONNAIRE

1. INFORMED ASSENT FOR STREET BOYS BY GLOBAL HOPE RESCUE AND REHABILITATION CENTER

My name is Yvonne Njeri Mungai. I am a Master of Arts in Counselling Psychology student from Africa Nazarene University. I am undertaking a study on "Impact of childhood trauma on psychosocial well-being of rescued street boys: a case of Global Hope Rescue and Rehabilitation Centre in Ngong Kajiado North County, Kenya." I am inviting children in the center to participate in the study and would like you to fill in this informed assent to participate in the study.

NB: In case of any queries or inquiries please reach me through this phone number: (+254) 720 483 500.

Part A: Informed Assent for Center Officials for respondents aged 18 years and below.

I can attest that I was not forced into agreeing to have her/him participate in the study; boys at Global Hope Rescue and Rehabilitation center I have been invited to take part in the aforementioned study. Additionally, I can affirm that she/he has freely accepted to engage in the study gladly and voluntarily and that they have both not been coerced into doing so. A copy of this assent consent form has also been given to me.

Print Name of person giving the consent _____Signature of person giving the consent_____ Date _____

Kindly use a Tick (√) where appropriate

SECTION A: RESPONDENT'S DETAILS

1. Please state your gender? Male ☐ specify _____

2. Kindly indicate your age category? 12- 14 yrs ☐ 15- 19 yrs ☐ 19yrs & above ☐

3. Duration in the street before rehabilitation? 0-3 Yrs ☐ 4-7 yrs ☐ 7 & above ☐

4. Duration Spent in the rehabilitation center 0-3 Yrs ☐ 4-7 yrs ☐ 7 & above ☐

SECTION B:

A. Forms of childhood trauma among the rescued street boys

Indicate your level of agreement with the statement provided below on a scale of 1 to 5 where:

1=strongly agree, 2=agree, 3=neither agree/disagree, 4=disagree and 5=strongly disagree

No.	**Statement**	**1**	**2**	**3**	**4**	**5**
1	I experienced physical trauma during my time on the streets.					
2	Emotional neglect was a significant aspect of my childhood trauma.					

3	Cultural differences played a role in my traumatic experiences.					
4	I felt unsafe in my living environment on the streets.					
5	I had a supportive social network during my time as a street child.					

B. Childhood Trauma on Psycho-social Wellbeing among Rescued Street Boys

Please indicate your level of agreement with the statements provided below on a scale of 1 to 5 where: 1= **Strongly Agree; 2= Agree; 3= Neither Agree nor Disagree; 4= Disagree; 5= Strongly Disagree**

No.	**Statement**	**1**	**2**	**3**	**4**	**5**
1	I have a positive view of myself (self-esteem).					
2	I often feel a sense of accomplishment and worth.					
3	My overall mood is generally positive.					
4	I experience emotional trauma that affects me deeply.					
5	I feel safe expressing my emotions.					

C: Impact of Childhood Trauma on Cognitive Skills amongRescued Street Boys

Indicate your level of agreement with the statement provided below on a scale of 1 to 5 where: 1=strongly agree, 2=agree, 3=neither agree/disagree, 4=disagree and 5=strongly disagree.

No.	Statement	1	2	3	4	5
1	Childhood trauma has negatively affected my overall cognitive functioning.					
2	I experience difficulties in concentrating due to the impact of childhood trauma.					
3	Memory recall is significantly affected by childhood trauma.					
4	I find it challenging to process information effectively because of childhood trauma.					
5	Childhood trauma has impaired my ability to learn new information.					

D: Ways of Enhancing Psycho-Social Wellbeing of Rescued Street boys

Indicate your level of agreement with the statement provided below on a scale of 1 to 5 where: 1=strongly agree, 2=agree, 3=neither agree/disagree, 4=disagree and 5=strongly disagree.

No.	Statement	1	2	3	4	5
1	I generally feel optimistic about my life.					
2	I believe I have a clear sense of purpose in my life.					
3	I actively forge and maintain positive connections with others.					
4	I feel a strong sense of autonomy in making decisions about my life.					
5	I often see the positive side of challenging situations.					

SECTION C

Interview Guide for Social Workers at Global Hope Rescue and Rehabilitation Center Kajiado North **County:**

These questions are useful in conversations, interviews, research, and teaching because they promote deeper thinking and dialogue.

i. In your experience, what types of childhood trauma have you observed among rescued street boys in Kajiado North County?

ii. Could you kindly share your observations or experiences about the ways in which a rescued street child's emotional wellbeing has been impacted by childhood trauma?

iii. Could you describe how trauma experienced as a child affected their cognitive abilities as a rescued street child?

iv. How do these policies address the psychosocial wellbeing of rescued street children, considering the potential impact of childhood trauma?

APPENDIX II: RESEARCH INFORMED CONSENT BY REHABILITATION CENTER

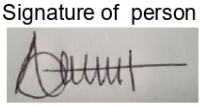
Part A: Informed Assent for Center Officials for respondents aged 18 years and below.

I can attest that I was not forced into agreeing to have the boys to participate in the study; children at Global Hope Rehabilitation Center have been invited to take part in the aforementioned study. Additionally, I can affirm that they have freely accepted to engage in the study gladly and voluntarily and that they have both not been coerced into doing so. A copy of this assent consent form has also been given to me.

Print Name of person giving the consent

Armstrong Muge (Operations manager Global Hope Rehabilitation centre)

Signature of person giving the consent



Date: **20th March 2025**

APPENDIX III: RESEARCH APPROVAL LETTER

AFRICA NAZARENE
UNIVERSITY

P.O.Box: 53067 – 00200
Nairobi, Kenya.
Tel: 020 252 7170/1 – 5
Email: vc@anu.ac.ke
www.anu.ac.ke

17th March 2025

RE: TO WHOM IT MAY CONCERN

Africa Nazarene University is a private Christian University and an institution of the Church of the Nazarene International, who follows the Wesleyan holiness traditions.

Yvonne Mungai (18S03DMCP002) is a postgraduate student at Africa Nazarene University pursuing a master's degree in Counseling Psychology. This program entails coursework and research. She has successfully completed her course work and defended her thesis proposal entitled: -

"Effect of childhood trauma on psychosocial wellbeing of street children: a case of Global Hope Rescue and Rehabilitation Centre in Ngong, Kajiado County".

To complete her program and graduate, she is required to conduct research. This involves collecting and analyzing data, hence write a report. In that regard, I present Ms. **Mungai** to you for approval to conduct research.

Any assistance you will grant her will be highly appreciated.

Prof. Orpha Ongiti
Dean of Postgraduate Studies & Director of The Institute of Research

APPENDIX IV: RESEARCH PERMIT

REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: **465571**

Date of Issue: **22/March/2025**

RESEARCH LICENSE



This is to Certify that Ms.. Yvonne Njeri Mungai of Africa Nazarene University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Kajiado on the topic: EFFECT OF CHILDHOOD TRAUMA ON PSYCHOSOCIAL WELLBEING OF STREET BOYS: A CASE OF GLOBAL HOPE RESCUE AND REHABILITATION CENTRE IN NGONG KAJIANDO COUNTY. for the period ending : 22/March/2026.

License No: **NACOSTI/P/25/41987**

465571

Applicant Identification Number

Director General
NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

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APPENDIX V: MAP OF NGONG



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