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## Metropolitan Observatory for Street Children and Youngsters: A Chilean Experience of an Innovative Model

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## Metropolitan Observatory for Street Children and Youngsters: A Chilean Experience of an Innovative Model

### Acknowledgements

National Corporation for Narcotics Control, currently called SENDA Ex Ministry of Planning, and current Ministry of Social Development The Red Sename (Sename Network) is the set of projects implemented by the different SENAME's Accredited Collaborating Organisations, which have been acknowledged as such through an administrative act of the same Service, and which have funding for the development of their activities aimed at providing care for children and teenagers, as well as the centres which are run directly (National Minors Service. Department of Planning and Management Control, 2012).<sup>13</sup> Metropolitan Observatory for Street Children and Youngsters San Carlos de Maipo Foundation Don Bosco Foundation Peace and Justice Service (SERPAJ) Chilean Association pro-United Nations (ACHNU) Mall Plaza Social Integration Program Hogar de Cristo Foundation

## Introduction

The children and youngsters who live on the street are the evidence of various forms of social exclusion. It starts with their own families, followed by their schools, institutions, peer groups, social networks and the government. This is a highly vulnerable population made up of individuals who abandon their homes, driven by poverty and urban decay, domestic violence, drug use, street socialization and parental negligence, among other factors.<sup>1</sup>

According to UNICEF, there are dozens of millions of street children and youngsters worldwide, and 40 million of which are in Latin America, a figure that will probably feature a sustained increase as the world's population and urbanization grows.<sup>2</sup>

Chile has a population of 17,402,630 inhabitants, of which 5,211,297 (30%) are under 18 years old.<sup>3</sup> In 2003, the National Child Service of Chile (SENAME) estimated a total of 1,039 street children, of which 330 are from the Metropolitan Region.<sup>4</sup> Additionally, the recent survey of homeless people conducted by the government in 2011, estimated a total of 12,255 homeless people, of which nearly 725 were under 18 years old.<sup>5</sup>

In comparison with figures in other Latin American countries, a lower occurrence can be observed in Chile.<sup>6</sup> However, the magnitude of the problem does not reduce its complexity. On the contrary, the problem of street children is one of the most difficult to tackle, because of its multiple dimensions and the high cost and the amount of time involved in interventions. Thus, the data from our country suggest that now is the crucial time to address this problem, mainly for two reasons: its magnitude is still manageable, and then the urgency to be tackled.<sup>7</sup>

Along these lines, the Metropolitan Observatory for Street Children and Youngsters, created by the San Carlos de Maipo Foundation, began to work in 2007, gathering knowledge and developing courses of action aimed at this population.

Historically, in Chile "street children" have been thought of as completely detached from their families, linked with groups usually loitering in large urban centers like public squares, bridges and shopping centers. They have been regarded as a homogeneous phenomenon without particularities and associated with a permanent situation. The present reality is different; it is a dynamic and dispersed group of children, who spend the night in different spaces: in slums and low-income housing estates, drug-use houses, shopping centers, or sporadically with their families. This classification includes not only those "street children", but also those with "street socialization" who haven't settled in public spaces,

or cut off relations with their families. This modern profile of a homeless child is more complex, as many of these children have become invisible to society. This causes great difficulties in accessing, detecting and identifying this group.<sup>1</sup>

The Metropolitan Observatory for Street Children and Youngsters confirms the evolution in the understanding of the profile of this population. Several years of research have uncovered a new understanding of this population. The layers of damage are several: [damaged] family relations, life in differentiated spaces (slums, drug use houses or shopping centers), income generation, and participation in delinquent gangs or school dropout/expulsion. Nevertheless, they all feature street socialization.

Public policy has so far perceived the plight of street children to be equal to that of homeless adults, when this is in fact not the case. These policies overlook the differences between the two realities, which in turn contribute to the street children's invisibility.

Chile has signed international agreements –one of which was the ratification of the Convention on Child's Rights-, in which it has agreed to comply with the due protection of these children and youths' rights, regarding them as subjects with rights, and guaranteeing the exercise of these rights.<sup>8</sup> In this sense, the demands for compliance of these commitments into public policies are crucial. The Observatory, an organization for analysis and coordination between the various actors working in the system, aims to contribute to the understanding of the problem, with all of its complexities, in order to have an impact on national public policies.

The objective of this paper is to introduce the Chilean experience in the design and implementation of a Regional Observatory for Street Children and Youngsters. To do this, we will first explain the Observatory's work model, providing details of its main goals and its development over time. Then, we will present descriptive data on street children who are currently receiving specialized care in the Metropolitan Region. Finally, we will aim to explain how the Metropolitan Observatory is an innovative initiative that makes it possible to follow this extremely vulnerable group, becoming a pioneer in this subject, thanks to the participation and cooperation of various institutions.

### **Methodology**

The data on street children and youngsters were taken from the Metropolitan Observatory's Information Registry System. This is a monthly monitoring system that has more than 70 different variables, such as school attendance, use of alcohol and drugs, mental health background, housing conditions, and social networks.

Information and data was provided by street children programs specialized in their protection and rehabilitation. These programs belonging to institutions run by ACHNU (Chilean Association pro-United Nations), Don Bosco Foundation, Hogar de Cristo Foundation and SERPAJ (Peace and Justice Service). The data were taken from the registry system in April 2012. The sample consisted of 303 cases, which is the total population of street children receiving care in the Metropolitan Region.

### **Results**

#### **Work Model of the Metropolitan Observatory**

The Metropolitan Observatory for Street Children is an organization that coordinates the efforts of various institutions that work with this population, and aims to contribute to the interruption of this damage by improving the quality of care for this group and follow up their behavior.

This organization features the participation of actors from the public sector, including the National Minors Service (SENAME), and the Ministry for Social Development, as well as from non-governmental organizations (NGOs), who work directly in providing care for children and youngsters. These include the Hogar de Cristo Foundation, Don Bosco Foundation, SERPAJ, ACHNU, and Mall Plaza Social Integration Program. Academic institutions focusing on public policies (Catholic University's Center for Public Policies) and institutions in charge of funding and working in childhood issues (San Carlos de Maipo Foundation) also participated.

The Observatory's specific objectives are:

1. To keep updating the System for Early Registry and Detection of street children and youngsters population in the Metropolitan Region.
2. To establish the size, dynamics of permanence and main characteristics of the population of street children and youngsters in the Metropolitan Region.
3. To coordinate actions with the following aims: stopping the occurrence of new cases; minimizing the time spent by the child on the streets, and promoting an increase in the quality of care and social rehabilitation of street children and youngsters.

4. To develop and support research projects that contribute to the Observatory's overall objective, as well as to systematize existing experiences of intervention with street children and youngsters.
5. To propose public policy interventions to actors and institutions that work with street children and youngsters.

Currently, the Metropolitan Observatory has a Council, made up by different participants who meet every month in order to analyze and discuss issues related to street children and youngsters.

This Council has an Information System (web platform), that makes it possible to follow-up and monitor the children and youngsters who are currently benefitting by street children programs.

### **The beginnings**

The Metropolitan Observatory for Street Children was founded in 2007, as a continuation of the cross-sectorial round table for street children and youngsters, led by SENAME. This first stage featured the participation of members of the San Carlos de Maipo Foundation, Don Bosco Foundation, National Corporation for Narcotics Control, Ministry of Planning, Hogar de Cristo Foundation and ACHNU. One year later, the San Carlos de Maipo Foundation brought together the same members of the round table, plus the Pontifical Catholic University's Center for Public Policies, which was given the role of an external administrator, and together developed an information recording system.<sup>9</sup> At first this system registered and gave data solely related to identification, care status and place of residence of street children. Since then, the work of the Observatory has pursued many other courses of action, including monthly monitoring of information of the street children's population and providing support for research. It has also become an active participant of debate and discussion.

Because of limitations in the platform, a new information system was implemented in 2010. This new system has the capacity to store numerous previously unknown variables, such as: drug and alcohol use, mistreatment records, mental health problems, school attendance, family background, and participation in other social programs. Likewise, the platform includes a report section, whose objective is to analyze raw data and turn this information in tables and graphs, which are then provided for these street children programs.

The Metropolitan Observatory has been growing, incorporating other institutions, such as SERPAJ, ACHNU, the Ministry of Social Development and Mall Plaza.

Between 2010 and 2011 the Metropolitan Observatory for Street Children and Youngsters began to achieve greater visibility and public presence. With the purpose of having an impact on public policies, it submitted the document “Elements to take into account in Public Policies for street children and youngsters” to the government. Since then, it has actively participated in the Registry of Homeless People, led by the Ministry of Social Development, contributing to a greater understanding of the reality.

### **Data from the Metropolitan Observatory**

There are different definitions of street children and youngsters. The definition formulated by Inter-NGO in 1983 defines street children as boys and girls aged under eighteen years old, for whom “the street” has become home and/or their source of livelihood, and who are inadequately protected, led or supervised by responsible adults”.<sup>10</sup> This definition considers the “street” in widest sense of the word; that is, it includes wasteland and unoccupied dwellings.

In contrast, UNICEF differentiates “children of the street” from “children on the street.” A “child of the street” is one who sleeps on the street and has no family support at all, while a “child on the street” is one who wanders around the streets, usually works during the day and goes home to sleep.<sup>8 10 11 12</sup>

Consideration of the vulnerability of the children living this situation cannot be limited solely to the physical space where they live. The concept has been expanded, taking into account that it is a much more complex and dynamic phenomenon. Along these lines, the Metropolitan Observatory defines a child or adolescent who lives on the street as one who spends the night on the street at least four times per month.<sup>1</sup> This definition encompasses children who live on the street all the time, as well as those in the street socialization category.

This population moves around different parts of the city, shifting continuously and lacking a fixed residence. The Observatory, regards the street in a very wide sense. It does not only consider a problem the number of nights spent on the street, but it also considers the fragility of the living spaces. Thus, the identification of “the street” in literal terms has been modified over time, reaching other public or private spaces, including streets, bridges, squares, sport fields, wastelands, unoccupied dwellings, commercial concentration spaces, and inter-district connectivity areas.<sup>1</sup>

A study conducted in 2009 identified the major motives that trigger a child to move to the street. Among them are emotional and economic deprivation, absence of a caregiver, discrimination in the family,

occurrence of a traumatic family incident, or a process of identification with peer drug users.<sup>7</sup> In this sense, for many boys and girls, going to the street is a way out, some kind of escape from their realities.

The sample of street children and youngsters registered by the Metropolitan Observatory has increased substantially. In April 2012, 303 from a total of 505 cases were receiving care from street children programs. In order to obtain a current overview of this group, the Observatory analyses the group of children and youngsters who are currently being cared for by the programs and projects run by the Observatory (see appendix).

Below are the main characteristics of street children registered by the Metropolitan Observatory during April 2012. Out of the total number of cases treated by the Metropolitan Observatory, 67% are males (203 cases). Ages range between one and nineteen years old, being fifteen the average age. The majority are between 14 and 17 years old (62%).

**Table 1.** Who identified the child's street condition?

		Total	Percentage
Who detected?	Own program	162	53.5
	Sename Network	30	9.9
	Others	28	9.2
	Education: school or high school	25	8.3
	Other children and youngsters	19	6.3
	A relative	12	4.0
	Municipality	7	2.3
	Local courts	7	3.3
	No information	10	1.3
	Police officers	2	0.7
	Health: Hospital, first-aid center	1	0.3
<b>Total</b>		<b>303</b>	<b>100.0</b>

The programs that keep track of street children are usually the same programs that take care of them. Don Bosco, Hogar de Cristo, SERPAJ and ACHNU represent 54% of the sample. In turn, the SENAME Network<sup>c</sup> and others have identified nearly 10% of cases, respectively. The latter refers mainly to community organizations such as neighbourhood associations, youth groups, women's groups and vendors.

Especially noteworthy is the low percentage of the remaining categories, namely relatives, local courts, municipalities and police officers and health centers, where none of them is higher than 4% of the total sample. This could be related to the scarce information they have on the subject. Furthermore, in Chile there aren't any prevention programs focusing on street children.

### **School attendance**

School dropout, as a form of exclusion from the educational system, is one of the main characteristics of this group. However, it would be neither appropriate nor fair to simply use the term "school dropout", since this concept implies a voluntary act of abandoning an institution when in fact in this particular group, dropping out of school responds more to consequences of social exclusion, where many more factors come into play than the mere will of the child or adolescent.<sup>12</sup> Therefore, it would be more accurate to use the term "school dropout and/or expulsion", which includes an institutional behaviour when facing these kind of students.

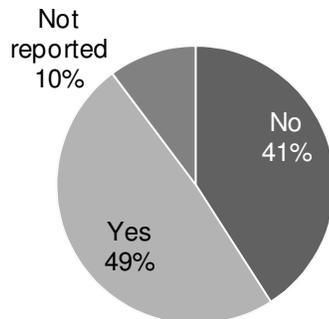
According to the data from the Metropolitan Observatory, currently 60% of the children and youth who live on the street have dropped out of school. The reasons behind this are numerous, and include parental negligence, underperformance and having to repeat the school year, behavioral problems, problematic drug use, and expulsion.

70% of children attending an educational institution go to a traditional education. The others study under alternative arrangements, such as back-to-school programs, special schools, preparation for exams and adult education.

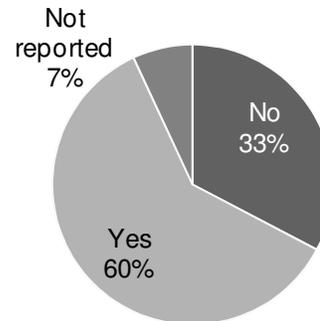
### **High-risk behaviors**

Children who live on the street are more vulnerable to high-risk situations, such as drug abuse, problems with the law, and commercial sexual exploitation, which are practices that represent some of the only means for coping with life on the street.<sup>8</sup> According to the Observatory's data, a total of 148 children and youngsters drink alcohol (49% of the sample), and 183 of them use drugs (60%). According to street children programs, the drugs most frequently used are cannabis, crack and cocaine.

**Graph 1. Do you drink alcohol?**



**Graph 2. Do you use drugs?**

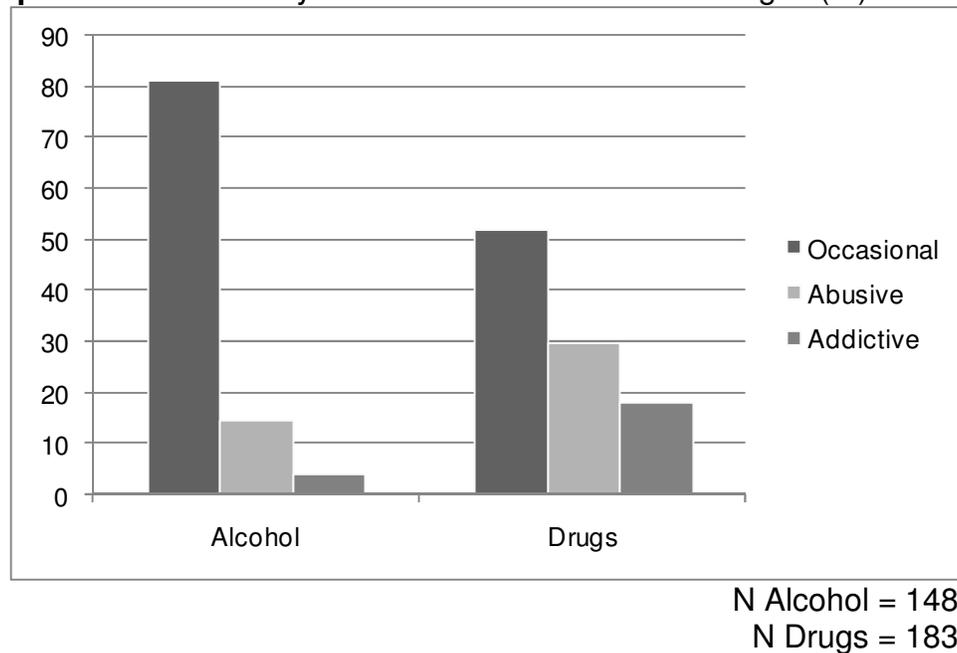


N = 303

As for the total of cases that feature substance use, 81% of those who drink alcohol do so sporadically, while in the case of drugs, 52% of them do so intermittently. This implies that abusive and addictive consumption in the case of drugs is considerably high (30% and 18% respectively).

Street children programs agree on the fact that drug and alcohol use are a stumbling block that inhibits receiving care. This is so because the effects of consumption are extremely strong and interfere with all aspects of children's lives, such as street socialization, relationship with families, school attendance, criminal behavior, and residence. Alcohol and drug treatment offered for children and youngsters are scarce and the entry requirements are very strict.

**Graph 3.** How often do you drink alcohol and/or take drugs? (%)

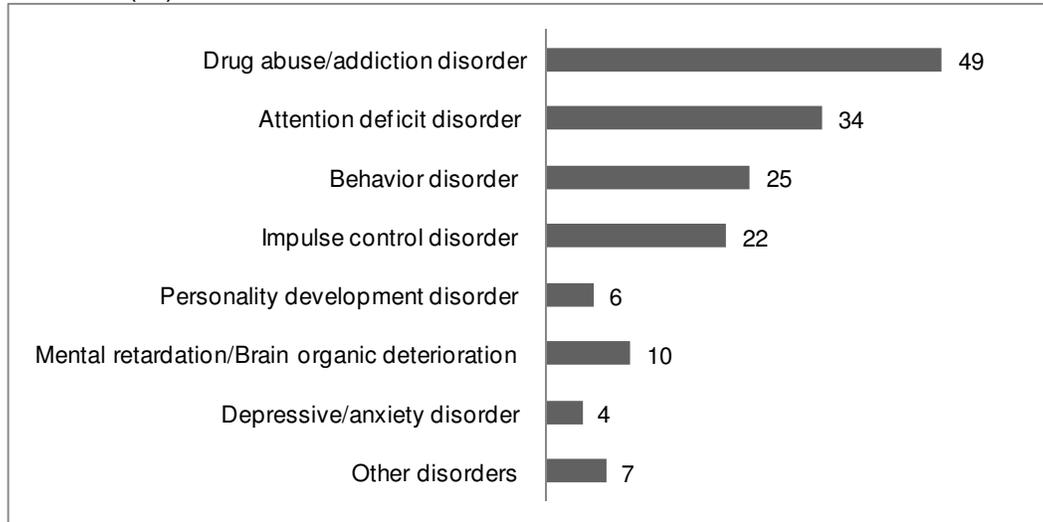


On the other hand, 53% of children and youth who live on the street feature delinquent behavior or law transgression, without necessarily being sentenced by local courts.

### **Mental Health**

Mental health problems had been diagnosed by a psychiatrist in 22% of street children and youngsters; among them, drug abuse or addiction is the most frequent disorder (49%), followed by attention deficit hyperactivity disorder and behavioural problems. Cases of developing personality disorders, mental retardation/organic brain disorder and anxiety/depression disorders are less frequent.

**Graph 4.** Mental health disorders diagnosed by a specialist in street children (%)



N with mental health problems=67  
Lost= 236

In this regard, two serious problems are evident:

1. Lack of diagnosis: several cases have not been diagnosed and therefore it is not possible to identify the prevalence of pathologies. According to street children programs, many children actually have mental health problems, but they have not had access to a psychiatric diagnosis that enables their identification.
2. Lack of specialized care for the population of children with mental health problems diagnosed by specialists. At present only 36% of those who have been diagnosed are being regularly treated. The offer is scarce, the requirements to enter a rehabilitation center are extremely strict and many children and youngsters are left outside of the health system. The disorder with the greatest lack of care is drug abuse or addiction.

### **Frequency of family contact**

The contact between children and youth and their original families is frequent. It is surprising to see that 50% of the children who live on the street have contact with their families on a daily basis, and only 9% have occasional contact or no contact at all.

This is surprising, as these are street children who abandon their families, and therefore the relationship with their families could be deteriorated, thus showing a much lesser frequency. However, the relationship is weak and not protective. This is directly related to the children's age, thus, as they grow older the frequency of contact with their families decreases.

### **Social networks**

Homelessness does not only imply being outside the family circle, but also outside a whole system that includes access to a number of services, which would guarantee their wholesome development, such as education, street children programs, health care centers and municipal services.

Metropolitan Observatory illustrate the scarce social networks they have: 41% have a link with a health center, while another 40% have ties with the school. Likewise, the proportion that is related to municipalities, other social programs, and the church is less than 10% combined.

### **Place of residence**

Street children are characterized by not having a fixed residence. They are used to wandering around different places, depending on their needs and their own experiences. In this sense, it is often difficult to establish the exact place where they slept during the last month.

The data from April 2012 illustrate the following points:

- 51% of the sample lived in more than one place, alternating between different spaces, such as their original home, the street, a host family and unoccupied dwellings.
- 74% lived for at least one day in the month in their original homes.
- 26 of children and youngsters spent most of the time on the street (more than 15 days during the last month).
- 8% lived with a host family and only 1% in a hostel or shelter.

The data above usually change, since the huge scope and diversity of expressions of the phenomenon strongly depend on the specific characteristics of each of the territories in where street children inhabit (shanties in highly urbanized sectors, drug use houses in areas of utter urban decay and even their own family house in poor housing estates). In the same way, weather factors that favor the children's abandonment of

the street towards other alternatives in order to take shelter from cold, such as guest houses, drug use houses, unoccupied dwellings or their original families' homes. This reflects again the huge change in the children's profile.

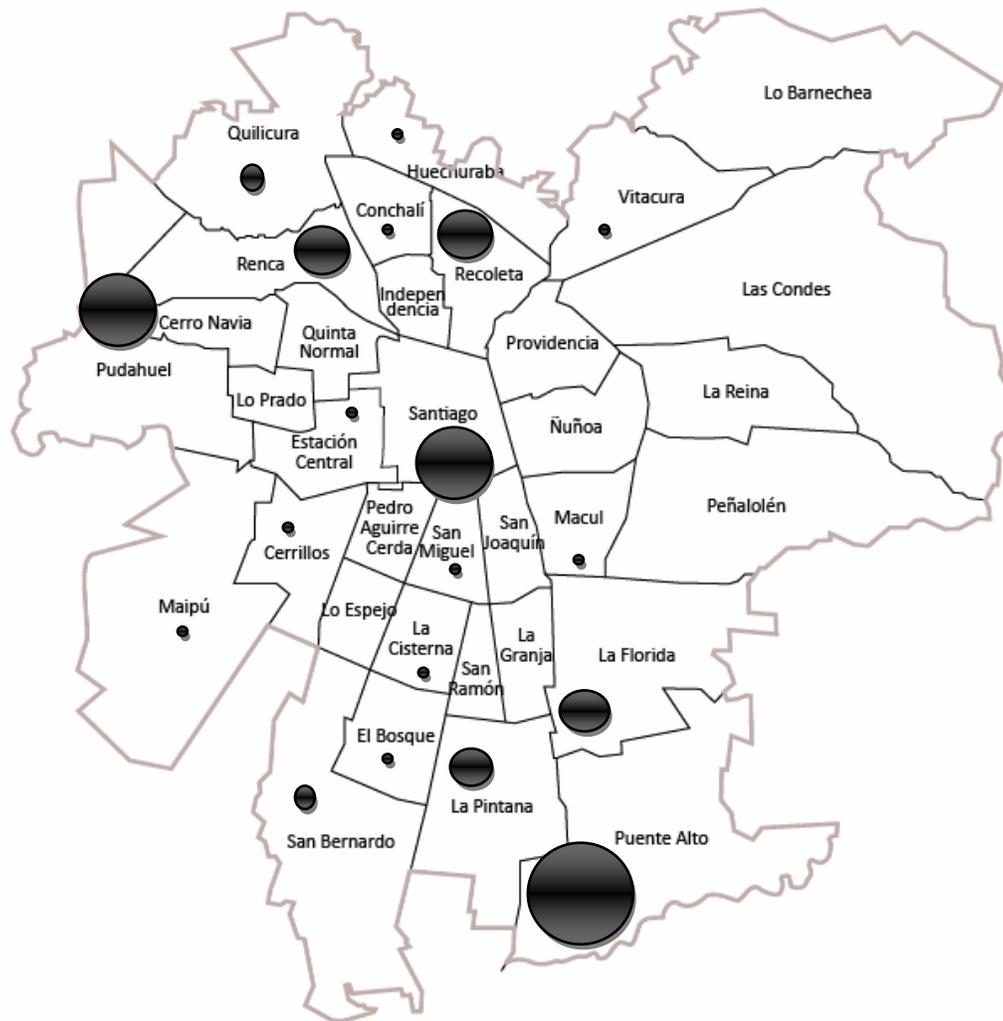
### **District where children and youngsters spend the night on the street**

Finally, considering all the children and youngsters who spent the night on the street at least one day during the month of April (157 cases), the main areas where they spend the night in the Metropolitan Region are the districts of Puente Alto, Santiago, Cerro Navia and Recoleta. All of them coincide with the spatial location of the street children programs, which provide care for this population.

**Table 2.** Districts where children and youngsters spend the night in April 2012

District	Total
Puente Alto	35
Santiago	24
Cerro Navia	21
Recoleta	16
Renca	14
La Florida	10
La Pintana	7
Quilicura	5
San Bernardo	4
Conchalí	3
Huechuraba	3
San Miguel	3
Estación Central	2
Maipú	2
Cerrillos	1
El Bosque	1
La Cisterna	1
Lampa	1
Macul	1
Vitacura	1
Not reported	2
Lost	146
<b>Total</b>	<b>303</b>

**Figure 1.** Districts where children and youngsters spend the night on the street



### **Findings of the Observatory as Innovative Project**

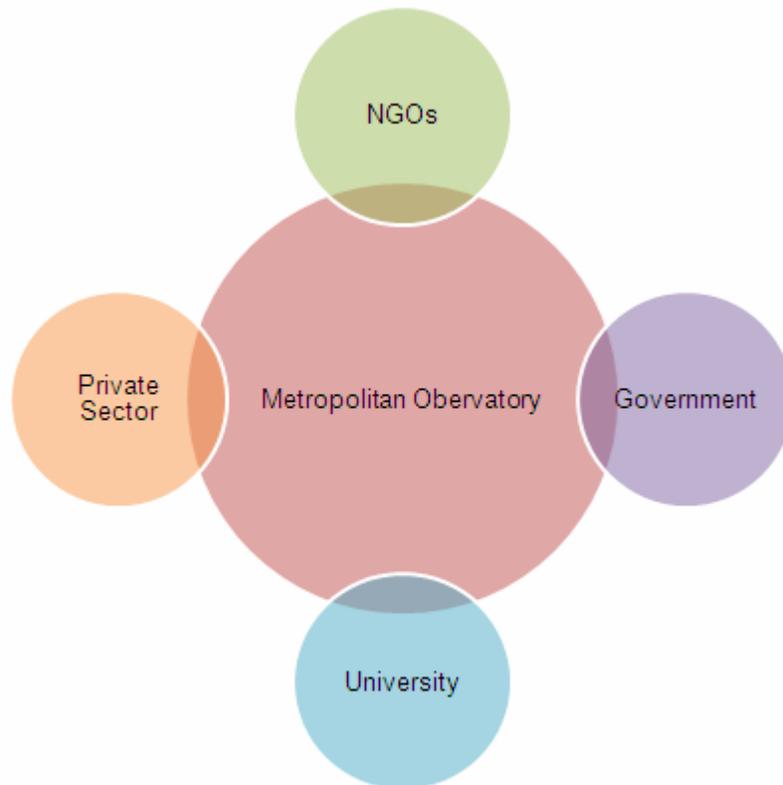
Street children are excluded from society, isolated from all political, economic, cultural and social participation. These children live in deprivation contexts. They do not go to school, do not have access to health services, and do not have social networks. Furthermore, multiple problems arise from this condition: alcohol and drug use, behavioral problems and mental health problems, which are exacerbated by the strong stigmatization and discrimination against them from the rest of society.

These are the conditions that the Observatory aims to tackle, contributing to generate knowledge and courses of action to improve their situation. The most important strength of the design and implementation of the Observatory is its participatory multi-sector nature, operated through consensus and focusing on the children and youth, viewed as subjects with rights who have both weaknesses and strengths.

### **Multisectorial nature**

One of the most distinctive components of the Metropolitan Observatory is the multisectorial nature of the actors involved. As previously mentioned, they come from the government (SENAME, Ministry of Social Development), from NGOs specializing in street children and youngsters, the private sector (Mall Plaza Social Integration Program and San Carlos de Maipo Foundation) and the academic world (Catholic University' Center for Public Policies). All of them have specific and differentiated roles (Figure 2). Street children programs, such as the Mall Plaza Social Inclusion Program, are responsible for the monthly entry of information about the children and youngsters they look after, while at the same time they contribute with their direct experience with the children. The government, in turn, contributes by bringing in the state's viewpoint and information on the available care and reparation provision for this vulnerable group. The San Carlos de Maipo Foundation, apart from funding the program and promoting its design, is concerned with the correct performance of the registry system, as well as organizing and actively participating in all of the Observatory's activities. The Catholic University's Center for Public Policies, in its role of administrator, organizes monthly meetings, analyzes the information from the Registry Service and complements it with the board's discussions, and ensures the fulfillment of the Observatory's objectives. The fact that the Catholic University is the project coordinator is of great benefit, as it represents a neutral entity that allows coordination and cooperation among all participants.<sup>9</sup>

**Figure 2.** Metropolitan Observatory's Multisectorial Articulation



### **Participative learning process**

The Metropolitan Observatory is the only organization in which different actors gather to interact and reflect on the theory and practice of the homelessness reality. Along these lines, it is considered as an innovative project that coordinates actors from all areas related to the subject of street children, making it possible to approach the issue in a comprehensive and thorough manner. This has enabled the understanding of the various realities and to envision common goals. The program's main benefits include networking, the exchange of information and experience, and continuous learning.<sup>9</sup>

The Observatory has been strongly characterized by participatory work processes conducted through consensus. An example of this is the construction of the profile of street children and the search for consensus in relation to a group characterized by its dynamism, mobility and diversity.

One of the most crucial stages for the Observatory is the construction of the registry system. This is a complex undertaking, since street children programs work with different intervention models based on

their own vision and experience. Therefore, creating a collective consensus, which goes beyond individual aspirations, is an important task. The registry system has considered the elaboration of a user manual, with common definitions and registrate data agreed between the different parties.<sup>15</sup>

Currently the system gathers information using more than 70 variables, which allows for a complete characterization of street children considering elements of education, consumption, training, mental health, crime, family, and social networks.

The definition of the Observatory's objectives, as well as the construction of the profile of street children and the information registry system, reflect the great feedback work and consensus that the different members of the Council have reached. This meant working for common goals rather than the individual goals of the institutional members of the Observatory.

### **Incorporation of the child's perspective**

The concept of "street children" was equated to that of the adult, without taking into account the differences between them. The Observatory represents a pioneering initiative in approaching the problem as differentiated, which is regarded as crucial for making an intervention in this population, as well as in detecting lines of action aimed at prevention.

Thanks to the coordination and management work of the Metropolitan Observatory, as well as the Localization Study<sup>14</sup> the 2011 Registry of homeless people conducted by the Ministry of Social Development incorporated for the first time a differentiated methodology in order to establish the magnitude of the problem of street children.

The registry considered a longer period of time for surveys to be conducted at a national level. Specialized staff from different programs working with street children, as well as other workers from SENAME's Regional Headquarters and from network programs at a national level were considered for applying the survey.

### **View from the children` strengths**

As the profile of street children and youngsters becomes increasingly complex, it becomes more difficult to address through public policy. The problems of alcohol and drug use, mental health, school expulsion or drop out, as well as other factors such as criminal behavior or commercial sexual exploitation, provide a very discouraging outlook.

The Metropolitan Observatory, all through its entire work has highlighted the children's main needs and problems, while at the same

time acknowledge their strengths and weaknesses. These include the ability to overcome problems and their resilience, physical abilities, agility and boldness and sense of humor, among others. This aims mainly to set children and youngsters free from the multiple prejudices and stigmas they face.

### **Impact on public policies**

Children and youngsters constantly change, which forces those who participate in the Observatory to identify, visualize and assess such changes. The aim is to influence the design and implementation of public policies that considering children and youngsters particularities and requirements.

### **Conclusion**

In this article, we discussed the Chilean experience in the design and implementation of a Regional Observatory for Street Children and Youngsters. This innovative work model brings together several programs and organizations for a common cause. Their combined efforts have resulted in analysis of the plight of street children, a consensus on the necessities and strengths of existing programs, and an emphasis on the importance of identifying the condition in children at an early age. From there the Observatory seeks to promote the design, development, and management of public policies to benefit the afflicted population.

As the profile of street children changes, it is critical for public policy that an organization like the Observatory continues its work, to gather data and act to combat the present situation.

The data from the Observatory provide an overview of the situation of street children. This is a largely masculine and adolescent group that is difficult to make visible or detect, as they are used to moving permanently between their original home, the street, or other places. Most children have frequent contact with their original families, but there are cases in which they have lost contact with them. The main problems they have are school drop-out, problematic alcohol and drug use, criminal behavior, mental health problems and lack of social networks.

Although important progress has been made in making this population group visible, there is still a lot to be done. The Observatory makes it possible to have updated and reliable information on the children who are now being looked after, but it is not yet possible to reach those who are not receiving attention. In the same way, it has yet to achieve greater coverage, extend the discussion towards other sectors, such as

municipalities, educational institutions, law enforcement and health centers, among others.

Finally, in order to rehabilitate these children, we must give priority to the most critical aspects of the problem. We believe it is crucial to allocate funds to attend street children with a problematic use of alcohol and drugs. The programs offered in this field are scarce and the entry requirements in specialized centers are highly strict. It is therefore necessary to urgently insist as a priority on the problem of drug abuse through effective detoxification and rehabilitation programs for street children and youngsters.

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## APPENDIX

For the analysis of data, the following variables are considered:

Variable	Definition	Sources of Information
Identification of street children	It is understood as every action performed by an actor, institution, center, establishment or individual, which initially revealed the child's street condition. These could be: other children and teenagers, police officers, law courts, a relative, the school, hospitals, the SENAME network, local country, and "others".	Metropolitan Observatory for Street Children and Youngsters, 2012. <sup>15</sup>
School attendance	A child is regarded as attending an educational center when his/her attendance is higher than 50% as required by the rules and regulations of each school modality. These modalities are: school or high-school, special school; exam preparation; back-to-school programs and adult education.	Metropolitan Observatory for Street Children and Youngsters, 2012. <sup>15</sup>
Use of alcohol and drugs	<p>For both variables we use three frequencies of use:</p> <p>Occasional use: is the intermittent use of the substance(s), without a fixed regularity and with long periods of withdrawal. Consumption is aimed at facilitating communication, relaxing, the search for pleasure and breaking the rules, among others. There is no habit and, generally, they do not buy the substance; substance is also shared.</p> <p>Abusive use: Understood by the DSM IV as a maladjustment pattern of substance use which entails a significant clinical deterioration or malaise. The individual needs the substance and all his/her life moves around it, despite the complications it may cause.</p> <p>Addicted use: a set of behaviors and reactions which include the impulse and</p>	National Service for Drug and Alcohol Use Prevention and Rehabilitation (SENDA), 2008. <sup>16</sup>

	desperate need of taking the substance permanently or regularly, either to feel its effects or to avoid withdrawal symptoms. This implies a physiological condition where the user has developed an adaptation or tolerance to drug use.	
Criminal behavior	Any action or behavior of street children and youngsters which breaks the law.	Metropolitan Observatory for Street Children and Youngsters, 2012. <sup>15</sup>
Mental health	<p>This is related to whether a street child has mental health problems diagnosed by a psychiatrist (not a psychologist). The types of disorder identified by the Observatory are:</p> <p>Drug abuse/addiction disorders: disorders related to abuse and/or addiction to alcohol, hallucinogens, amphetamines, caffeine, cocaine, solvents, tranquilizers, nicotine, or others.</p> <p>Anxiety/depressive disorder: Depressive disorder, bipolar disorder, mood disorder, dysthymic disorder, anxiety disorder, post-traumatic stress disorder, anxiety attacks, reactive attachment disorder, obsessive-compulsive disorder, separation anxiety disorder, phobias, stress disorder.</p> <p>Mental retardation/Brain organic deterioration: Mental retardation, brain organic deterioration and organic psychogenic disorder.</p> <p>Personality development disorder: borderline personality development disorder and other personality development disorders.</p> <p>Behavior disorder: Antisocial behavior disorder, oppositional defiant disorder and other behavior disorders.</p> <p>Attention deficit disorder: with and without</p>	<p>DSM-IV Diagnostic and Statistical Manual of Mental Disorders.<sup>17</sup></p> <p>San Carlos de Maipo Foundation, 2009.<sup>18</sup></p>

	<p>hyperactivity.</p> <p>Impulse control disorder: Intermittent explosive disorder, kleptomania, pyromania, ludomania, trichotillomania and unspecified impulse control disorders.</p> <p>Other disorders: Schizophrenia, sexual identity disorders, eating disorders, elimination disorders, sleeping disorders, somatoform disorder, pervasive developmental disorder, and others.</p>	
Frequency of family contact	The level of attachment between street children and their original families, which can range from everyday, some days of the week, some days in a month, a few times a year, very occasional or no attachment at all.	Metropolitan Observatory for Street Children and Youngsters, 2012. <sup>15</sup>
Social networks	This has to do with whether the child has access to a social network, and uses it when necessary. These networks can be: Health center, school, local council, church, Puente Program, other Semane Programs, others.	Metropolitan Observatory for Street Children and Youngsters, 2012. <sup>15</sup>
Housing location	This is related to the place where the child has slept in the last 30 days. These places include: original family home, specialized housing, abandoned house of apartment, shelters, host families, the street, and others.	Metropolitan Observatory for Street Children and Youngsters, 2012. <sup>15</sup>
Street overnight-stay district	District in Chile's Metropolitan Region where the child has stayed overnight on the street.	Metropolitan Observatory for Street Children and Youngsters, 2012. <sup>15</sup>