



Study on street children stress and coping style between 09 and 17 years in Mali

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Abstract:

This article is taken from our research thesis conducted in 2016 at the Beijing Forestry University (China). The study explores the experiences of street children who are exposed to multiple stressors from an early age in two communes of Bamako, Mali. These children face daily challenges such as hunger, humiliation, violence, and illness, which compel them to develop various coping strategies for survival.

The research was conducted in two communes Commune II and Commune V where the majority of the street children are found. Data were collected through semi-structured interviews with a sample of 120 children (60 from each commune), aged between 8 and 17 years.

Findings reveal that children from both communes face similar types of difficulties, including hunger, illness, abuse, and social rejection. However, differences were observed in the coping strategies they employed. Children in Commune II used a wider range of coping strategies.

Keywords: coping strategies; street children; stress.

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1 Introduction

The phenomenon of street children has become one of the most visible consequences of rapid urbanization. As nearly half of the global population now lives in cities (Cohen, 2006), this process has exacerbated inequalities and intensified the marginalization of vulnerable groups, particularly children (Gracey, 2002). According to UNICEF (2012), millions of children coexist within the same urban spaces as political and economic elites, yet struggle daily to survive through informal or hazardous activities such as scavenging or manual labor. Deprived of shelter, protection, and social recognition, they are often victims of violence, exploitation, and exclusion from decisions affecting their own lives.

Street children, like all children, require food, shelter, education, and healthcare. However, these basic needs are often met only through the intervention of non-governmental organizations or individuals acting out of solidarity. Most of these children come from impoverished, broken, or violent families, or have fled school systems perceived

as repressive or unsupportive. Their lives are characterized by insecurity, fear, and social isolation conditions that, as UNESCO (1995) observed, are incompatible with healthy child development. Frequently stigmatized as delinquents or deviants (Samuel, 2014), they embody both the failures of social systems and the resilience of human adaptation.

While poverty remains a major driver of street life in Africa (Mella, 2012), it cannot alone explain this complex phenomenon. Benítez (2007) notes that millions of poor children do not end up on the streets, suggesting the interplay of additional factors such as family disintegration, abuse, and community violence. The decision to leave home rarely results from a single event but reflects a gradual deterioration of the child's living conditions and emotional security. Once on the streets, children face heightened exposure to health risks, violence, and exploitation, further entrenching their vulnerability and exclusion.

In Mali, Article 60 of the Child Protection Code (CADBE, 2007) defines street children as minors under 18 who earn their living on the streets and have limited or no contact with their families. The "street" includes informal and unsafe areas markets, bus stations, abandoned buildings, and public spaces where these children live and work. Despite the existence of protective legal frameworks, implementation remains weak, and many children continue to survive under precarious and dangerous conditions in urban centers such as Bamako.

Living under such circumstances inevitably generates significant stress. Stress, according to Lazarus and Folkman (1984), results from a dynamic relationship between the individual and their environment, when perceived demands exceed available coping resources. Hans Selye (1974) conceptualized stress as a general adaptation syndrome involving three stages alarm, resistance, and exhaustion highlighting both its adaptive and destructive dimensions. Stress can arise from major life events or from the accumulation of daily hassles, which, although often underestimated, may have profound psychological effects.

Coping refers to the cognitive and behavioral efforts individuals deploy to manage internal or external demands perceived as taxing or exceeding their resources (Lazarus & Folkman, 1984). These strategies may be problem-focused aimed at managing the source of stress or emotion-focused intended to regulate emotional distress (Bruchon-Schweitzer, 2001). Frydenberg and Lewis (1993a) further distinguish three coping styles: productive (problem-solving and optimism), non-productive (avoidance and self-blame), and reference to others (seeking social or spiritual support). These diverse strategies illustrate how individuals, even in extreme situations such as street life, mobilize cognitive and social resources to confront adversity and maintain psychological balance.

2 Research aims and objective

Street children are among the most vulnerable populations in all societies. They are disproportionately exposed to the negative effects of poverty, violence, and inequality. While living conditions in urban areas are often better than those in rural regions, many children leave rural communities in search of improved opportunities and quality of life in the cities. However, urban environments also present significant risks. In cities, street children have easier access to alcohol and illicit drugs, which are often used as coping mechanisms to deal with the stress caused by frustration, cold weather, violence, unemployment, illness, and other adversities.

In Mali, several institutions and organizations are dedicated to supporting street children. However, despite the efforts of these structures, many children continue to live and survive on the streets.

This study, the first of its kind in this context, aims to:

Identify the different types of stressful events experienced by street children;

Explore the coping styles they adopt in response to these stressors.

3 Method

Two communes in Bamako were selected for this study: Commune II and Commune V, as these areas host a significant number of street children.

3.1 Sample Population

A total sample of 120 street children, aged between 9 and 17 years, was selected, with 60 children from each of the two communes. The sample included both boys and girls, although boys were more represented.

3.2 Procedure and Measures

In Commune II, 53 boys and 7 girls participated in the study. The same gender distribution was observed in Commune V. The children responded to a semi-structured interview designed to elicit the stressful events they experience on the streets and the coping strategies they employ in response to these challenges. The coping strategies narrated by the children were noted and analyzed to understand how they deal with adversity. Notably, the coping mechanisms varied between children from different communes.

3.3 Data Collection

The interviews were conducted individually in semi-structured format with all 120 children. Given that most of the street children in Bamako are illiterate, all questions were translated and interpreted into the national languages spoken by the participants.

Before starting the interviews, the investigators explained that they were students conducting academic research, not journalists or authorities, and that participation was voluntary. Some children agreed to participate, while others declined. Those who participated were free to speak in their own words and in the order they preferred. When the discussion strayed from the topic, the interviewers gently guided the respondents back to the relevant questions. Each child chose the location of their interview to ensure comfort and privacy. Only children between the ages of 9 and 17 were interviewed. Audio recordings and photographs were taken during the interviews, with consent. To support the data collection, four research assistants were recruited. The entire data collection process spanned 105 days. At the end of each interview, participants who agreed to take part were thanked for their valuable contribution.

4 Results

4.1 Age and gender of children

As shown in Table 1, there is no significant difference in age and gender distribution between the two communes studied. However, the majority of street children are boys (88.33%), compared to girls (11.67%), indicating a strong male predominance among street children. Furthermore, a notable distinction emerges in terms of age at which children begin life on the streets: while boys are observed on the streets from as young as 9 years old, girls generally do not appear on the streets at such an early age. In fact, none of the girls interviewed reported coming to the streets before the age of 13.

Table 1. Age and gender of children into two Communes.

Interview	Boy		Girl		Total
	Age	Number (%)	Age	Number (%)	
Commune II	9-17	53 (83.33)	13-17	7 (11.67)	100
Commune V	9-17	53 (83.33)	13-17	7 (11.67)	100

4.2 Stressful events experienced by children according to their area of residence

Table 2. (Covering both Commune II and Commune V) highlights the extremely difficult living conditions faced by street children. These children are exposed to a range of stressors, including hunger, humiliation, physical violence, and illness. In Commune II, the most frequently reported stressor was hunger (45%), followed by illness (22%), humiliation (20%), and physical abuse (13%). Similarly, in Commune V, hunger remains the most reported hardship at 37%, followed by illness (32%), humiliation (18%), and physical abuse (13%).

Although the nature of the stressors is consistent across both communes, the prevalence rates vary. Children in Commune II reported higher levels of hunger and humiliation, while those in Commune V reported greater incidence of illness. The rate of physical abuse remains identical (13%) in both communes.

A gender-based comparison further reveals that fewer girls reported hunger, yet they appeared to experience more persistent health problems. In contrast, boys in both communes are more affected by hunger. These findings underscore the harsh realities of street life in Mali, with hunger emerging as the most pervasive stressor faced by street children.

Table 2. Presents the stressful events experienced by children, categorized according to their area of residence.
Commune II

Stressful events	Commune II – Boys (n / %)	Commune II – Girls (n / %)	Commune II – Total (%)	Commune V – Boys (n / %)	Commune V – Girls (n / %)	Commune V – Total (%)
Hungry	25 / 41.67	2 / 3.33	45.00	21 / 35.00	1 / 1.67	37.00
Humiliation	11 / 18.33	1 / 1.67	20.00	9 / 15.00	2 / 3.33	18.00
Illness	10 / 16.67	3 / 5.00	22.00	15 / 25.00	4 / 6.67	32.00
Physical abuse	7 / 11.67	1 / 1.67	13.00	8 / 13.33	0 / 0.00	13.00
Total	53 / 88.33	7 / 11.67	100.00	53 / 88.33	7 / 11.67	100.00

4.3 Styles and coping strategies used by children according to area of residence

Table 3. Presents the coping strategies employed by street children in both Commune II and Commune V. The results indicate that children in Commune II predominantly use strategies associated with the productive coping style. These include: problem-solving (33.33%), relaxation/entertainment (26.67%), and focusing on the positive (8.33%). Strategies associated with the non-productive coping style, such as tension reduction (13.33%) and avoidance or doing nothing (8.33%), follow. The least used strategies in Commune II are those related to reference to others, including seeking social support (5%) and investing in a close friend (5%).

In contrast, children in Commune V primarily resort to non-productive coping strategies. These include: tension reduction (33.33%), not coping (20%), and ignoring the problem (11.67%). Productive coping strategies such as problem-solving (13.33%) and relaxation/entertainment (15%) are less frequently used. The reference to others coping style is the least utilized, with only 6.67% of children reporting investing in close friendships as a coping mechanism.

A comparative analysis between the two communes reveals that children in Commune II make broader use of coping strategies. They report higher frequencies across all three coping styles: productive, non-productive, and reference to others. On the other hand, children in Commune V exhibit a narrower coping repertoire, relying more heavily on non-productive strategies and using fewer productive and social coping strategies.

These findings suggest that street children in Mali possess a limited repertoire of coping mechanisms. However, their coping responses span across all three major styles: productive, non-productive, and reference to others. The variation between the two communes highlights the influence of contextual or community factors on the adoption and accessibility of coping strategies.

Table 3. Styles and coping strategies used by children according to area of residence

Coping styles & strategies	Commune II – Boys (%)	Commune II – Girls (%)	Commune II – Total (%)	Commune V – Boys (%)	Commune V – Girls (%)	Commune V – Total (%)
Productive style						
Solve the problem	33.33	0.00	33.33	13.33	0.00	13.33
Relaxing/Entertaining	26.67	0.00	26.67	11.67	3.33	15.00
Focus on the positive	8.33	0.00	8.33	–	–	–
Non-productive style						
Reduce tension	13.33	0.00	13.33	33.33	0.00	33.33
Not cope	5.00	3.33	8.33	20.00	0.00	20.00
Ignore the problem	–	–	–	10.00	1.67	11.67
Reference to others						
Social support	0.00	5.00	5.00	–	–	–
Invest in close friends	1.67	3.33	5.00	0.00	6.67	6.67
Total	88.33	11.67	100.00	88.33	11.67	100.00

4.4 Percentage of users by order of coping styles according to gender and residence

Overall, children in Commune II are distinguished by a more constructive and proactive approach to stressful situations, while those in Commune V tend to adopt more unproductive behaviors, reflecting greater vulnerability in stress management. The use of social support (referral to others) remains low in both communes, although slightly more marked among girls.

Table 4. Percentage of users by order of coping styles according to gender and residence

Coping styles	Commune II – Boys (%)	Commune II – Girls (%)	Commune II – Total (%)	Commune V – Boys (%)	Commune V – Girls (%)	Commune V – Total (%)
Productive style	68.33	–	68.33	25.00	3.33	28.33
Nonproductive style	18.33	3.33	21.67	63.33	1.67	65.00
References to others	1.67	8.33	10.00	–	6.67	6.67
Total	88.33	11.67	100.00	88.33	11.67	100.00

5 Discussion

This study explored the stressors and coping styles of street children in Mali. Using semi-structured interviews, we asked 120 street children from two different communes to recount the difficulties they face on the streets and the strategies they use to cope with these problems. The coping strategies narrated by the children were classified into three categories: productive, non-productive, and reference to others. Our findings revealed notable differences in coping styles between children in the two communes, as well as between genders.

The results showed that boys in Commune II exhibited a wider repertoire of coping strategies, with a strong preference for productive styles, whereas boys in Commune V showed limited coping mechanisms, relying primarily on non-productive styles. These findings are consistent with those of Filion (1999), who found that school-based boys employed a greater number of productive coping strategies compared to those in rehabilitation centers, who relied more on non-productive strategies. In our study, at least 63.33% of boys in Commune V reported using non-productive strategies.

Gender-based differences were also observed, echoing the findings of Frydenberg and Lewis (1997), who noted that girls are more likely to seek social support, while boys tend to use avoidant strategies such as distraction or keeping to themselves. In our sample, 13.33% of boys in Commune II and 33.33% of boys in Commune V reported using tension-reduction strategies, which involved the use of illicit substances like cannabis (locally known as *juun*, *fatokeni*, or *berebla*). While these substances may provide temporary psychological relief, they do not address the underlying issues and can lead to long-term mental health problems.

Girls in our study were found to rely more on reference to others coping styles, such as seeking social support and building close friendships. This aligns with prior research, including studies by Dwyer and Cummings (2001), Sigmon, Stanton, and Snyder (1995), Lengua and Stormshak (2000), and Hobfoll et al. (1994), all of which highlight girls' greater tendency to seek interpersonal support, while boys tend toward avoidant or substance-based coping methods.

Interestingly, the types of stressors and coping styles reported in our study differ from those reported in other populations. For example, Sreeramareddy et al. (2007) found that Nepalese students responded to academic and environmental stressors through strategies such as positive reframing, planning, and emotional support. Similarly, Yakushko (2010) reported that international students used a combination of strategies relaxation and entertainment (productive), substance use (non-productive), and seeking help (reference to others) to cope with cultural and academic pressures.

In our context, the stressors reported such as hunger, illness, humiliation, and physical abuse are specific to the precarious conditions of street life. Despite the differences in situational context, our findings support the idea that individuals employ coping mechanisms that are accessible and culturally meaningful within their specific environment.

Lastly, our data confirm that non-productive styles are more frequently used by boys than girls. In Commune II, 18.33% of boys and 3.33% of girls used non-productive styles, compared to 63.33% of boys and 1.67% of girls in Commune V. This observation aligns with Gattino, Rollero, and Piccoli (2014), who found that boys are more likely than girls to adopt non-productive strategies. Conversely, our results differ from those of Spirito, Williams, and Guevremont (1989), who observed boys relying on magical thinking as a coping mechanism a strategy not reported by our participants.

In sum, the findings of this study underscore both the diversity and limitations of coping strategies used by street children in Mali. They highlight the urgent need for psychological and social interventions tailored to their environmental and emotional realities.

6 Suggestions

Governmental Commitment

Adopt comprehensive child protection policies.

Establish safety nets and emergency services tailored to street children.

Support Programs

Launch a national program providing daily meals, clothing, safe shelters, and healthcare.

Rehabilitation Services

Set up specialized centers for children with drug and alcohol addictions to aid recovery and reintegration.

Healthcare Access

Guarantee free and accessible medical care, with preventive and continuous follow-up.

NGO and Partner Engagement

Strengthen collaboration with NGOs and mobilize international partners for technical and financial support.

Psychosocial Support

Train and deploy psychologists and social workers to address trauma, stress, and mental health challenges.

Poverty Reduction and Awareness

Scale up anti-poverty programs and conduct awareness campaigns targeting families and communities.

Right to Education

Ensure inclusive education for all children, including those living on the streets, promoting holistic development.

7 Conclusion and Perspectives

This study aimed to identify the types of stressful events experienced by street children and to analyze the coping strategies they employ. The findings reveal that these children face a range of severe stressors: hunger, illness, humiliation, and physical abuse, and rely on a limited set of coping mechanisms, categorized into three main styles: productive, non-productive, and reference to others.

Notably, girls were more inclined to seek social support, a strategy that proved effective in mitigating the negative effects of stress and promoting psychological resilience. This result is consistent with previous research emphasizing the crucial role of social support in enhancing mental health outcomes. Data collected through semi-structured interviews provided valuable insights, allowing the children's voices to be heard directly. Despite their harsh living conditions, their narratives reflect both the complexity of their daily struggles and the adaptive strategies they mobilize to survive.

Addressing the plight of street children in Mali requires a multisectoral and coordinated approach, combining government policies, community involvement, and international cooperation. These children deserve protection, care, and the opportunity to build a future grounded in dignity and hope.

From a forward-looking perspective, the implementation of longitudinal studies is essential to monitor the evolution of stress and coping strategies over time, thereby deepening our understanding of adaptation dynamics among street children. Moreover, comparative analyses by gender and age group would provide valuable insights into possible differences in coping mechanisms, depending on exposure to specific risk factors.

In terms of public policy and social intervention, it is imperative to establish reintegration centers that offer safe spaces for learning, psychosocial support, and recreational activities. Finally, special attention should be given to strengthening and improving the psychological well-being of these children as an indispensable condition for their personal development and sustainable social reintegration.

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