

CHARACTERISTICS OF THE STREET CHILDREN OF COLOMBIA

Abstract-Psychological characteristics of 56 Colombian male street children, aged 7 to 16, were examined from participant observations and results of three psychological tests given the children. The Kohs Block Design measured their intelligence; and the Human Figure Drawing and the Bender Gestalt measured emotional and neurological functioning. The test data showed the sample to be relatively healthy, intelligent, and emotionally intact. The children's relatively good scores on the tests may be understood by placing their abandonment in a cultural perspective, which includes the children's strong peer support system, their access to adult benefactors, and the fact that the children were developing in an orderly fashion from matrifocal families. The premise is made that by understanding the children more accurately more appropriate help may be given.

INTRODUCTION

Estimating that the crowded and busy streets of Latin American cities are home to 40 million children, UNICEF recently warned of a looming tragedy about to befall these children who are apparently living without parental authority and surviving however they are able (Tacon, 1981, 1983). Being perceived by several international organizations as abandoned by their families, an inevitable consequence of cruelty or poverty, the children were characterized as pitiful. On other occasions these street children were also portrayed pejoratively. Samper (1984), a well known Colombian journalist, referred to them in the leading Bogota daily as a "plague" threatening the fabric of traditional family discipline.

Other perceptions toward the children also exist. Many researchers describe the children as having a free and easy way of life. For example, Granados (1976, p. 66) wrote that "they make their bed when they want and they sleep when they are tired." Those who have this perception see the children' living only for the moment, as if they are immersed in continual play.

As a consequence of these varied perceptions, several myths about the children exist which lead toward a misunderstanding of who the children are and what they do. Obviously without an accurate description of the street children, it is impossible to create a sound policy for them.

In 1984 under the auspices of the Fulbright Commission, the author worked with 12 Colombian university students for the better part of a year to attempt to understand the true characteristics of the children. This study looked at boys only. Although girls do appear in the streets and there are programs for them, such girls are defined by the general population as "prostitutes" and not as street children. The most common programs for girls are private homes which are run under the direction of nuns, applying the rubric of Christianity to change the girls from being wayward to less frivolous about their bodies.

These program on the girls' character while programs for boys are more vocational. Institutions for the boys make themselves visible to the public and seek media attention to compete for funds; while places that serve girls operate more like monasteries, are difficult to find, and rarely seek public attention, usually avoiding it. Of note, in the United States more than half of the runaways are female (Brennan & Huizinga, 1978). These differences illustrate that the allocation of rights and limitations by society to different genders influence the care street children receive more than the actual personalities of the children.

In Colombia there is a division of race and class, which traditionally has put social classes and racial groups at odds with each other. Colombian society is composed of two different family structures, which mirror this division. The upper class families are of Spanish origin and patrifocal. They keep close supervision over their children who are not allowed to be in the streets. Men are the central figures of authority, and they demand obedience from their children. The lower social classes are composed of matrifocal families with African traditions. The street children are raised in matrifocal families (Villota, 1979). The nucleus of this type of family is the mother and her children. Even the man in the matrifocal family who fathers a child is not considered a permanent part of the family. In the matrifocal family the woman's role as mother, rather than wife, is of primary if not sole importance (Mintz, 1984). The child rearing the street children receive stresses self-assurance and early independence which is appropriate for raising them to function in the existing urban subculture of poverty. At an early age the children have many experiences of responsibility such as sibling caretaking and income-producing activities. Several authors (Fromm & Maccoby, 1970; Mead, 1968; Weisner & Gallimore, 1977; Whiting & Whiting, 1975) have observed that in Third World countries these factors not only promote mental health, but hasten the psychosocial development of children. Many of the street children were developing in an orderly fashion that was simply more accelerated than what the culturally dominant group deemed legitimate.

Our data shows the study sample to be relatively healthy, intelligent, and emotionally intact; and the paper suggests reasons why this unexpected data was obtained. We suggest that before we can create a sound policy to help children, we must have an accurate appraisal of their skills.

METHOD

Initially participant observational techniques were used to collect data. In order to observe the children in a representative sample of their natural habitat, we collected information over a period of nine months in three different locations: the streets, a private storefront program which serves the children, and a state diagnostic center.

Street Children

The term street children when it was routinely used by the public and even by most professionals implied that the children had been abruptly left by their families, and indeed they were often referred to as abandoned. Both terms implied that they had no other place to live but on the streets, and that their families were remiss.

Although it was assumed that the street children were abandoned by their families and that the children had little knowledge of their parents, the information about the family situation of the children in the test

sample indicated that only 9 of the 56 children (16%) had no known family to contact. Five children (8%) were under the care of at least one grandparent. The remaining 42 children (75%) had at least one parent that could be contacted. Felsman (1981) reported that when the children left home, nearly three-quarters of them did not have the biological father in the home but that 84% had their biological mother at home. The Granados (1976) data illustrated that 15.4% of his sample in Bogota had no known family, which was nearly identical to Felsman's sample and to ours. In all three samples the family situations were comparable. The children as a rule knew their parents, but if they lived at home, it was most often with their mothers who were separated from their biological fathers. Only a very small percentage of the children did not know any family member.

It was also assumed that the children were on the streets because they were poor. Although the children in our sample were from poor families, poverty alone could not explain their presence on the streets. There was plenty of poverty in these children's culture. Ochoa (1979) conducted a study for the national governmental health organization and claimed that 63% of Colombian children were suffering some form of malnutrition. According to de Galan (1981, p. 67), "Colombia registers the highest rates of infant mortality in the world with 97 in one thousand." Yet the children's street life could also be seen in relation to what they left behind. When compared with their siblings and neighbors who remained at home, Pardo and Vergara (1964) noted that the street children's physical and emotional health were superior. In reviewing the literature on this topic, Cortes, (1969, p. 43) also noted a "significant difference in the average weight which favors the street children when comparing them with their siblings at home, which the authors attribute to better nutrition."

Many of the children in our study apparently made a measured choice to leave their homes. While it was true that a few of them were abandoned, most were growing up in a way which helped them gain an early independence. We might hypothesize that the most resilient children in any given family, rather than starving at home and putting additional financial strain on the family income, actually left or did the abandoning.

The image of them being abruptly abandoned as small children is not valid, since they left home at a developmental period that made their measured forays into the streets less pernicious and because they often returned to their families while getting accustomed to street life, receiving the support and care that they needed.

More than half of our sample began street life after 12 years of age. The usual course of events was for the children to leave their homes for a short period of time, then slowly, in intervals as if testing the waters, increasing the amount of time spent away from home. While establishing themselves as independent from their families, the children would come into contact with a program for street children where they would receive food, companionship, and instruction through informal channels about life on the streets. During this initial period of time, they often returned home, left again, and moved in and out of programs that served them. Most of the street children did not attend school regularly. However, since many of the programs for them required some type of school attendance, almost all of the children had spent time in school, and more than half of our sample could read.

Although two-thirds of the children in the sample had been on the streets less than two years, we found difficulty in determining how long children had been living without support because in addition to their

continual movement between home and a variety of programs, these children also found private benefactors.

Case example. Alarico.

Alarico was a typical benefactor. He was a street child before being taken in by a family who helped him find work. Word got around and many street children knew that Alarico could be persuaded to come to their aid by offering them something to eat and a place to sleep. The relationship between street children and benefactors is firmly established in Latin American cultures, and it indicates not only an important source of help that is often overlooked by people who try to serve them but also suggests why many children who appear abandoned are not without contacts and assistance or means to secure some income.

Study Subjects

In addition to observing hundreds of street children, we studied a nonrandom sample of 56 male children aged 7 to 16. To be included in the sample, the children had to have been known to the investigators in the storefront program for three months during which time the children had not been visited by a family member or guardian or had not returned to their families or guardians at night. The children also had to be among those incarcerated in the state diagnostic center. The first set of criteria was necessary to ascertain that the sample was in fact composed of street children, because in appearance and in what they did during the day street children were not much different than *trabajadores jóvenes* (child workers), who are children that begin to work at young ages but who return to their families at night. Because the same children moved from living on the streets to the variety of private programs that served them and in and out of the diagnostic center, testing the children in the diagnostic center did not bias the sample. The second criterion, the children being in the diagnostic center, was used to gather another source of data about the children. Getting accurate information from the children was difficult as they lived by their wits and developed an extraordinary capacity to present themselves in ways that served their needs. The state diagnostic center had details about the children's place of birth, ages, families, and other demographic information.

The ages of the children in this study ranged from 7 to 16 with an average age of 11.6 years. Of this sample, 12.5% were below the age of 9; 30% were between 9 and 11; 46% were between 12 and 14; and 10.8% were above 14. This sample is comparable in age with that of Felsman (1981 a & 1981 b). He showed 28% of children were below 9, 40% between 9 and 12, and 24% between 13 and 16.

In this sample 66% of the children were born in the State of Cauca where Cali is the capital. Only 18% of the children had migrated from distant regions of the country. In Felsman's (1981 a) study in Cali, he reported that 56% of his core sample were from Cali. Granados (1976), who conducted his study in Bogota, reported that 41% were born in Bogota and another 25% in adjacent states. Thus it appears that the majority of street children were born, lived, and were served regionally in spite of the fact that they often traveled a great deal for diversion to other parts of the country. The data also indicated that street children lived in the largest cities. When we compared the data from the several studies mentioned above as well as the national study of the children (Pineda, de Munoz, Pineda, Echeverry, & Arias, 1978) conducted by the Instituto Nacional Bienestar Familiar (The National Institute of the Family),

there was no evidence to suggest that the characteristics of the children in one city were significantly different from those of children in other cities.

Inasmuch as the term street children was applied to many children who had a variety of different circumstances and characteristics, it tended to erroneously block them all together into a single mass of children who shared a series of common histories and problems, while it failed to take into account their differences. This posed some difficulty in ascertaining the characteristics of the street children.

Procedure

From the test sample of the 56 male children, we gathered quantitative data by applying 3 standardized tests: The Kohs Block Designs were used to assess intelligence; the Bender-Gestalt and the Human Figure Drawings measured emotional and neurological functioning.

These three tests were used since they have been shown to be the most valid, given the particular characteristics of our sample, the cross-cultural setting of the work, and the variables being explored (Anastasi, 1982). All of the tests were administered in Spanish by two members of the Colombian research team.

To measure the children's intelligence the Kohs Block Design was chosen because of the lack of written material in it and because it was designed for cross-cultural use. One "special value of the block design test lies in the fact that valid results may be obtained independently of the language factor" (Kohs, 1923, p. 235). The correlation between the Kohs test and the Stanford Binet was reported by Kohs to be .84. Budoff and Corman (1974) have reported that the Kohs scores were significantly correlated with WISC verbal and performance scores in a group of minority North American adolescents.

The directions for the test were presented to the children in words which were comparable to the standard procedure in English. We assumed that the perceptions of the presented stimuli, the blocks in the test, were comparable to the normative sample in the United States. This assumption has been tested in several cross-cultural contexts (Deregowski, 1972; Jahoda, 1956).

The Bender-Gestalt (BG) was employed to measure the overall emotional health, or ego strength, of the children. The BG was chosen because it has proved to be a valuable tool in cross-cultural personality research (Hutt, 1985; Tolar & Brannigan, 1980). The test was presented in the standard format. Although research cautions against the use of the test as a means to make individual diagnosis (a caution the study adhered to), the Bender-Gestalt does have value in separating group differences (Tolar & Brannigan, 1980). Many scoring systems have been used for the Bender-Gestalt, but the study chose the Pascal-Suttell (1951) method. One reason was that the measure of interjudge reliability is strong, ranging from .90 (Pascall & Suttell, 1951) to .99 (Story, 1960).

The Human Figure Drawing (HFD), with the standard format, was selected to assess the children's emotional and neurological functioning for several attractive reasons: drawings are not mediated by language, the test is easy to administer, and drawing is nearly universally interesting for children. Mead considered drawings as "an efficient device for the cross-cultural study of children's personality" (Lindzey, 1961, p. 93).

Koppitz (1984), whose system was used to score the drawings, reviewed the literature concerning the effects of culture on the HFD, and he concluded there are both cross-cultural differences and similarities. Although several studies indicate that drawings are reflective of the cultural differences of the drawers (Dennis, 1966; Gardiner, 1974; Harris, 1963; Laosa, Swartz, & Diaz-buerrero, 1974), the studies taken as a whole are difficult to interpret because they are often assessing different variables and using different scoring systems. In reviewing these problems, Holtzman (1980, p. 269) suggested that the "Draw-a-Person Test is also likely to have a fairly wide range of cross-cultural equivalence, and Koppitz's scale of emotional stability looks promising as a quantitative score." Thus, we used the Koppitz scoring system and, following Swenson (1968) and Roback (1968), who pointed out that only global and not individual items are reliable, we used the test only to define group differences.

The scoring of the Bender-Gestalt and the Human Figure Drawing (HFD) tests was done by two independent Colombian psychologists with experience in scoring projective test data for children. The tests were rated separately, and the scorers did not know which tests belonged to whom. Neither of the psychologists knew the children or were informed about the study. They worked together scoring sample protocols not in the study to establish reliability between their ratings. When there were differences in the rater's scores, the text on scoring the Bender Gestalt was consulted to determine the rating in the text. From this process a decision was made as to the proper score.

Table 1. Means and Standard Deviations on All Variables for All Children

Variable	N	X	SD
Age	56	11.60	2.37
Bender	56	60.42	34.17
Kohs IQ'	55	88.38	12.6
HFD-Ela.b	55	2.70	1.7
HFD-NI'	56	2.91	1.8

One of the 56 children did not do a human figure drawing. b HFD is the Goodenough-Harris Drawing Test. El is the emotional indicator. 'HFD is the Goodenough-Harris Drawing Test. NI is the neurological indicator.

RESULTS AND DISCUSSION

Table I illustrates the means and standard deviations for all the variables for the entire sample. It is given here to provide the descriptive statistics for the whole sample.

IQ Scores

The range of IQs for the sample was from 40 to 115 with a mean of 88.38 and a standard deviation (SD) of 12.6. Only 25% of the sample scored below 85, which is considered the low average cut off point, and just 7% scored in the mentally retarded range. However, half of these children had IQs of 69;

thus 7% is a high figure. Excluding these children whose scores were within the margin of error, only 3.6% of the 56 children were in the retarded range.

These results are remarkably better than those reported by Cortes (1969). He reported that of a sample of 263 children who were administered the usual intelligence tests, 26% of the children were mentally retarded and only 22.06% of average or above average intelligence. Why our sample scored higher than the Cortes group is difficult to determine, since he gives no data about the tests he used or how the children were tested.

There are many reasons why our sample should have scored low. The presence of many siblings, non-intact or one-parent families, and low socioeconomic status were characteristics of our sample which are also associated with low academic aptitude (Anastasi, 1982). In addition, Granados (1976) reported in his sample of street children that less than one-half of the fathers and about one-third of the mothers were literate, and on the average these literate parents had only three years of schooling. Pineda and colleagues (1978, p. 170) reported that in the cities of Bogota, Medellin, and Cartagena almost 100% of the mothers of children whom they labeled as street children were illiterate. They also estimated that in their sample of children nearly 80% were without schooling.

Street life, rather than taking away from cognitive growth, may actually add to it. Nerlove and colleagues (1975) mention in their work with Guatemalan children that there are many complex tasks that the poor children of their study performed daily that increased cognitive development. Such tasks involved the degree of self-managed, non-supervised activities, their abilities to initiate and complete tasks, their social awareness of people, and their knowledge of their natural environments which included their ability to move around at considerable distances away from home and their neighborhood. These tasks were also common characteristics of the study sample. They illustrate that the children were perhaps acting even more intelligently than their test scores revealed, even though these scores were remarkably high, given their circumstances.

Emotional Functioning

Two procedures were used to measure the children's emotional functioning. The BenderGestalt (BG) was used to assess the children's current ego strength, a term which was devised by Pascal and Suttell (1951), who gave cut-off scores for different ego functioning abilities. They suggested that children below 50 were free of pathology and those above 70 were in the pathological group. Between 50 and 70 was a transitional area. This guideline was followed in grouping the sample, and 48% of the sample scored in the healthy range; 25% were in the transitional category; and 27% scored in the pathological range.

The Human Figure Drawing Test (HFD) was used to obtain the second measure of the children's emotional functioning. Following the Koppitz procedure (1968), the children were asked to draw one whole person. Koppitz devised the scoring of emotional indicators (EIs) to "reflect the child's attitudes and concerns of the given moment" (1968, p. 4). Thus, this measure of emotional functioning is an assessment of the child's current emotional condition, whereas the BG yields a long-standing psychological profile.

In differentiating between children with and without emotional problems on the HFD tests, there are potentially 30 emotional indicators. A score without any or one EI is indicative of good mental health. Two EIs are suggestive of psychopathology, and three or more EIs are indicative of emotional problems and unsatisfactory interpersonal relationships (Koppitz, 1984). The average number of emotional indicators on the HFD was 2.7 (SD = 1.7); the median was 2.0; 27% (15) of the children had 0 or 1 EI; 23% (13) had 2 EIs; and 49% (27) had 3 or more EIs.

Using Kendall's tau, we obtained the correlation between the immediate emotional status as judged by the HFD with the more permanent emotional health or ego-strength derived from the score on the BG to see if we had two measures of the children's emotional functioning. They were not significantly correlated (N = 55, tau = .1130, p = .128), accounting for less than 2% of the variance. We can assume that the two tests were measuring two different types of emotional functioning as they were devised to do, the BG more of a trait test, and the HFD more of a state test.

There were more emotional signs of distress on the HFD than on the BG. Only 27% of the children's scores were in the nonpathological range on the HFD while nearly 50% were in the similar category on the BG. The poorer HFD scores might have been an artifact of the testing situation since the children were tested while they were in the diagnostic center. Being both incarcerated and waiting to see where they might be sent increased their anxiety, which was more likely to be reflected on the HFD since it assessed immediate emotional conditions. The BG, on the other hand, is a test of more permanent ego strength. Also, since the children drew many pictures of very masculine, aggressive males as the result of their self-perceived relationship to the guerrillas, their pictures were perhaps inaccurately scored as emotional indicators.

There is only one other study of street children (Felsman, 1981a) that studied the emotional functioning of street children. From his observations Felsman notes that he "witnessed no cases of overt psychotic behavior within the population" (p. 94). As was the case with IQ scores, the Bender-Gestalt and the Human Figure Drawings scores were better than was expected even though there was ample reason why the sample children should have shown more psychopathology on their scores. Nevertheless, half of the children on the BG and three quarters of the children on the HFD were in the nonpathological range.

The large percentage of children with scores indicating emotional problems should be put into the perspective of the high-risk environment from which the children came and lived in. The children's scores, particularly on the HFD, also have to be seen in relation to normal children's scores and in relation to scores of children from other cultures. Of children in regular classrooms, 11% to 30% had EIs on the HFD (Koppitz, 1984). Nonpathological environmentally deprived children had more signs of emotional pathology on their HFI's than did healthy middle class children. Koppitz and Moreau (1968) and Koppitz and Castillo (1983) also illustrated that Mexican and Argentinean children between the ages of 5 and 12 had significantly more EIs than North American children.

Thus, there are many reasons to suggest that the percentage of our sample which scored in the pathological range could be artificially high. By being able to develop strong peer relations on the streets, due to the fact that the children needed to join together to earn a living and because their child rearing fostered such relations, the children were able to learn many coping mechanisms. They also had

a strong network of peer support as well as the help of adult benefactors that contributed to their relatively good scores.

We ascertained by the use of the Human Figure Drawing Test (HFD), which was used to assess the children's neurological functioning, the degree to which the children were neurologically damaged due to their alleged drug abuse and poor nutrition. Zero or one neurological indicator (NI) implies that the child has no neurological impairment. A child needs three or more NIs to be classified in the impaired category. Of the sample 25% (14) had 0 or 1 NI; 14% (8) had 2 NIs; and 60% (34) had 3 or more NIs. The mean was 2.9, ($SD = 1.8$), and the median was 3. The NIs indicated the most pathology of all the test measures. However, there is reason to suggest that we should temper these results.

Since it is not possible to separate emotional problems from neurological **indicators on the HFD** and therefore make a differential diagnosis between emotional and neurological problems based solely on the HFD, a high score on one will elevate the score on the other. Indeed, the Kendall's tau correlation indicates that the EI and the NI were significantly correlated ($N = 55$, $\tau = .1869$, $p = .038$), and accounts for 35% of the variance. Thus it is difficult to distinguish between the two assessments. We have already said that there is evidence to assume that the EIs were inflated due to the children's drawings of the guerrillas, and the fact that environmentally deprived and Latin American children had more EIs, and we have described the artifact of the testing situation. These factors contribute to higher NIs.

Table 2 shows the results of the data after dividing the sample into three age groups. This information allowed us to ascertain how time on the streets effected the children. Since our data, as well as data of other authors (Felsman, 1981a; de Galan, 1981; Gloria, 1983; Granados, 1976; de Mantilla, 1980; Munoz & Pachon, 1980) revealed that the children left home at approximately the same ages, we could use the younger children as a control group for the older ones as long as we could assume that the characteristics of the children in both groups when they left home were comparable. Given this assumption, we had two matched samples with time on the streets being the independent variable. The two significant differences (Bender, NI), the direction of the two nonsignificant tendencies (IQ, EI), and the stability of the IQ, support our conclusion that there is no evidence for the hypotheses that time on the streets adversely affected the children.

The results of this study indicate that the children most often had a home with an adult whom they knew; that they were often in contact with their families (i.e., their mothers which was appropriate to their matrifocal traditions), and rather than being children of the streets or abandoned children, they could, moving from place to place, be more appropriately called child vagabonds or *ninos vagos*.

Table 2. Age Differences On All Variables

	Pre-Puberty (N ~ 24)		Transitional (N ~ 24)		Post Puberty (N = 21)	
Variables	Mean	SD	Mean	SD	Mean	SD
Age	9.37	1.35	12.0	0	13.95	1.24

IQ	89.56	13.84	93.18	6.27	84.57	13.21
Bender,	78.04	39.65	49.18	12.75	46.19	25.84
No. EI	3.12	2.05	2.54	1.69	2.30	1.38
No. NIb	3.70	1.83	2.72	1.95	2.0	.351

Results of the ANOVA ($N = 56$, $df = 2$, 53 , F ratio = 6.78, F prob. = .002) and the Tukey HSD procedure indicate that the pre-puberty sample significantly differs from the transitional and post puberty samples on their Bender scores: $p < .05$.

b Results of the Kruskal-Wallis test ($N = 56$, $df = 2$, $H' = 8.28$) indicate that the samples significantly differ on their NI scores: $p < .05$.

For most of the children, being on the streets was not a permanent life style, nor necessarily a pernicious one. Only a small group of older children were on the streets for long periods of time without getting assistance from some family member or benefactor. If these children were using an excessive amount of drugs, were suffering from additional nutritional problems, or if their general emotional health was deteriorating with time on the streets, then the test results (see Table 2) would have shown that these children had more pathology than the younger children. Indeed, according to our results and contrary to expectation, age and time on the streets seemed to mediate their problems.

There are several reasons for this. First, most of the children were not actively abandoned, but were growing up in an orderly fashion that allowed them to take their place in the existing subculture of urban poverty. When they were on the streets, their daily lives necessitated an initiation and completion of tasks without adult supervision which helped them to develop a social awareness of people and an increased cognitive capacity. With the social support they received from their peers and benefactors, they quickly grew toward an emotional independence that was typical of much older children.

The social class and cultural differences of the two different family groups have historically been in conflict, and this was exacerbated by the presence of street children. Street children were perceived by the dominant patriarchal family as symbolic images of youth not beholden to adult demands, and thus they were viewed as threatening the "rights" of such parents to demand obedience from their own children. The children were reacted to beyond their mere presence; they became examples of possible, if not probable, disorder to the established order of family and social class control. This is why in good part the children's abilities to cope and to fend for themselves were ignored while their lack of respect for authorities and their petty delinquency were exaggerated. The children had unwittingly been put into a larger struggle between the disparate familial, cultural, and economic elements of their country.

This study challenges the commonly accepted notion that the street children are delinquents or psychotic, or perhaps even more troubled than their counterparts in the poor neighborhoods. We have no doubt that the children experienced their share of misery, and therefore are not, as some have claimed, leading a carefree life. It is certainly true that a sizable portion of them were not adequately coping with their lives. Yet, many of the street children demonstrated that children have a remarkable ability to make life happy and meaningful in the worst of circumstances. One of the major shortcomings in understanding and supplying services to street children is that these children who are most resilient have not been studied to see how they have managed so well.

Recognizing the values that many street children have, rather than seeing them as delinquent, pitiful, or carefree, would certainly contribute to seeing them more accurately. This in turn would contribute to directing help to them more intelligently.

REFERENCES

- Anastasi, A. (1982). *Psychological testing* (5th ed.). New York: Macmillan.
- Brennan, T., & Huizinga, D. (1978). *The social psychology of runaways*. Lexington: Lexington Books.
- Budoff, M., & Corman, L. (1974). Demographic and psychometric factors related to improved performance on the Kohs Learning-Potential Procedure. *American Journal of Mental Deficiency*, 78, 578-585.
- Cortes, L. M. (1969). Temas Colombianas: La metamorfosis del chino de la calle [Colombian Themes: The Metamorphosis of the Street Children]. *Editextos*, Bogota.
- Dennis, W. (1966). *Group values through children's drawings*. New York: Wiley.
- Deregowski, J. B. (1972). Reproduction of orientation of Kohs-Type Figures: A cross-cultural study. *British Journal of Psychology*, 63, 283-296.
- Felsman, K. J. (1981 a). *Invulnerability: On risk, resiliency and adaptation in childhood*. Unpublished doctoral dissertation. Harvard University, Cambridge.
- Felsman, K. J. (1981b, April). Street urchins of Colombia. *Natural Histories* (pp. 41-48). New York: American Museum of Natural History.
- Fromm, E., & Maccoby, M. (1970). *Social character in a Mexican village*. New Jersey: Prentice Hall.
- de Galan, G. P. (1981). Se acaba la familia [The End of the family] (Editorial). *Pluma*, Bogota.
- Gardiner, H. (1974). Human figure drawings as indicators of value development among Thai children. *Journal of Cross-Cultural Psychology*, 5(1), 124-130.
- Gloria, M. (1983, November 12). Los hijos de la calle [The children of the street]. *El Pais*, p. 7.
- Granados, M. F. (1976). Gamines (Editorial). *Temis*, Bogota.
- Harris, D. B. (1963). *Children's drawings as measures of intellectual maturity*. New York: Harcourt Brace & World.

- Holtzman, W. (1980). Projective techniques. In H. Triandis & J. Berry (Eds.), *Handbook of cross-cultural methodology* (Vol. 2). New York: Allyn and Bacon.
- Hutt, M. (1985). *The Hutt adaptation of the Bender-Gestalt Test* (4th ed.). New York: Grune and Stratton.
- Jahoda, S. (1956). Assessment of abstract behavior in a non-western culture. *Journal of Abnormal Social Psychology*, 53, 237-243.
- Kohs, S. C. (1923). *Intelligence measurement: A psychological and statistical study based upon the Block-Design Tests*. New York: Macmillan.
- Koppitz, E. (1968). *Psychological evaluation of children's human figure drawings*. New York: Grune & Stratton.
- Koppitz, E. (1984). *Psychological evaluation of human figure drawings by middle school pupils*. New York: Grune & Stratton.
- Koppitz, E., & Casullo, M. (1983). Exploring cultural influences on the human figure drawings of young adolescents. *Perceptual Motor Skills*, 57, 479-483.
- Koppitz, E., & de Moreau, M. (1968). A comparison of emotional indicators on human figure drawings of children from Mexico and from the United States. *Revista Interamericana de Psicología*, 2, 41-48.
- Laosa, L., Swartz, J., & Diaz-Guerrero, R. (1974). Perceptual-cognitive and personality development of Mexican and Anglo-American children as measured by human figure drawings. *Developmental Psychology*, 10(1), 131-139.
- Lindzey, G. (1961). *Projective techniques and cross-cultural research*. New York: Appleton-Century-Crofts.
- de Mantilla, N. (1980). El gamin: Problema social de la cultura urbana. [The Gamin: A social problem of the urban culture]. *Revista Javeriana*, 94, 457-464.
- Mead, M. (1968). *Growing up in New Guinea*. New York: Dell.
- Mintz, S. (1984). *Caribbean transformations*. Baltimore: John Hopkins University Press.
- Mufioz, C., & Pachon, X. C. (1980). Gamines testimonios, [Gamines' Testimonies] (Editorial). *Valencia*, Bogota.
- Nerlove, S., Roberts, J., Klein, R., Yarborough, C., & Habicht, J. (1975). Natural indicators of cognitive development: An observational study of rural Guatemalan children. *Ethos*, 3, 265-295.

- Ochoa, M. (1979). *Consumo suboptimo de alimentos en países subdesarrollados: Un modelo microeconomico* [Suboptimal consumption of food in underdeveloped countries: A microeconomic model]. Ithaca, NY: Cornell University Press.
- Pardo, A., & Vergara, E. (1964). Estudio medico-social de la vagrancia infantil de Bogota [Social and medical study of childhood vagrancy in Bogota]. *Revista Colombiana de Psiquiatria*, 1, 37-67.
- Pascal, G., & Suttell, B. (1951). *The Bender-Gestalt Test*. New York: Grune & Stratton.
- Pineda, V., de Munoz, E., Pineda, P., Echeverry, Y., & Arias, J. (1978). *El gamin su albergue social y su familia* (The gamins's social home and family) (Vol. 1). Colombia: Instituto Colombiano de Bienestar Familiar.
- Roback, H. B. (1968). Human figure drawings: Their utility in the clinical psychologist's armamentarium for personality assessment. *Psychological Bulletin*, 70(1), 1-19.
- Samper, L. N. (1984, September 13). Ressurge el "gaminismo" [The resurgence of gaminism]. Bogota: *El Tiempo*, p. 42.
- Story, R. I. (1960). The revised Bender-Gestalt test and male alcoholics. *Journal of Projective Techniques*, 24, 186-193.
- Swenson, C. H. (1968). Empirical evaluation of human figure drawings: 1957-1966. *Psychological Bulletin*, 70, 2044.
- Tacon, P. (1981). *My child now: An action plan on behalf of children without families*. New York: UNICEF document. Tacon, P. (1983). *Regional program for Latin America and the Caribbean*. New York: UNICEF document.
- Tolar, A., & Brannigan, G. (1980). *Research and clinical applications of the Bender-Gestalt Test*. Springfield, IL: Charles C. Thomas.
- Villota, R. (1979). Problemática de la niñez de la calle [The problem of the children in the streets]. *Revista Javeriana*, 91(455), 473-477.
- Weisner, T., & Gallimore, R. (1977). My brother's keeper: Child and sibling caretaking. *Current Anthropology*, 18(2), 169-190.
- Whiting, J., & Whiting, B. (1975). *Children in six cultures*. Cambridge: Harvard University Press.