The Psychological Well-Being of Refugees: A Case Study in Kampala, Uganda

A Research Proposal

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Abstract

This document presents a research proposal to explore the question of the relationship between the factors unique to refugee camps which have a causal relationship to an increase in mental health illnesses and disorders. Background research presents data which highlights a correlation between these factors and the presence of poor psychological well-being of refugees, but presents such data in high volumes only in Western host countries. In order to present data from a non-Western host country, this proposal seeks to conduct a case study in the refugee camp in Kampala, Uganda. The proposal includes a basic narrative comprised of an introduction, background information, definitions, methods, expected results, budget, and related references.

Introduction

There is a thread of mental disorders and illnesses persisting among refugees in placement camps. Refugee camps in general share a few common characteristics, with those located in Africa sharing more characteristics among one another. I seek to identify these prevalent traits and analyze them within one refugee camp in Uganda. Kampala refugee camp houses refugees mainly from South Sudan, the Democratic Republic of the Congo, and Somalia. In this case study, my research will focus on identifying the specific characteristics that contribute to the mental illnesses and disorders existing among refugees with the aim of formulating a new model of camp environment that better nurtures and rehabilitates psychological well-being. This case study is needed because the vast majority of research done on the psychological state of refugees has been conducted in the Western world, neglecting the remainder of the world’s countries who are hosting refugees. The research pertaining to non-Western nations is not easily related to the
Western data and is often much more sporadically studied, therefore much less comprehensive results are found. This research must be conducted as not only do over 67% of refugees worldwide remain in “prolonged exile in poor developing regions where host states and communities often have scarce resources,” (Milner and Loescher) but also pressing is the fact that “with the declining financial commitment of the international donor society, it has become clear that UNHCR is unable to ensure essential needs for all prolonged refugee populations” (Jamal).

**Key Terms Defined**

A **refugee**, as decided by the United Nations Geneva Convention after WWII, is “anyone who, owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable, or, owing to such fear, is unwilling to avail himself of the protection of that country” (Tempany).

A **refugee camp** is a non-permanent living accommodation for those persons who have left their violent or persecuting home countries and are either seeking asylum or are official refugees. These spaces often contain makeshift shelters for immediacy, but not the prolonged need for shelter of refugees today. Camps attempt to provide necessities such as food, water, medicine, etc. (UNHCR).

The definitions of **mental Illnesses and disorders** are wide-ranged and not readily agreed upon. For the purposes of this study, “mental illness is the term that refers collectively to all diagnosable mental disorders. Mental disorders are health conditions that are characterized by
alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning” (U.S Department of Health and Human Services).

The term of conditions involves the living conditions (shelter, nutrition, hygiene) and purpose indicators (employment opportunities, education, political engagement) that are present within a refugee camp.

Quality of Life (QOL) Indicators are nuanced, based upon one research group’s evaluations, and have not been thoroughly tested. However, quality of life can be defined as a person's perception of position in life contextualized in culture and value systems surrounding and held within an individual. It is a broad-ranging concept which can be affected by physical health, mental state, level of independence, social relationships, and relationship to salient features of the environment (WHOQOL). These indicators are determined through questionnaires and can include: nutrition, amount of sleep, sexual activity, grief, mourning, Survivor’s guilt, hopelessness, crowding, impaired memory, impaired concentration, loss of purpose, shame, uncertainty, illness, suicidal ideations, loneliness, and aggression. It is important to note that social indicators have not been well researched and are therefore not heavily included in such questionnaires. Ways in which these indicators are specifically measured, and will be for the purposes of this project, are the Hopkins Symptom Checklist-25 (HSCL-25), which specifically looks at anxiety, depression, and somatic symptoms, and the Harvard Trauma Questionnaire (HTQ), which was developed to measure torture events, trauma, and trauma-related symptoms combining refugee and culture specific symptoms with presumably universal PTSD symptom criteria.
The characteristics of which I hope to identify within Kampala refugee camp include the adequacy of physiological needs, safety and security needs, social/sense of belonging needs, individual/esteem needs, and transcendence needs being met (De Vries and Van Heck).

**Background Information**

In a study conducted by De Vries and Van Heck, the key conditions that will need to be assessed for in Kampala refugee camp include: adequate quantity of food, variety/quality of food, proximity to resources, access to health resources, safety from assault, security of possessions and property, clothing, shelter, proximity to family, friendships, absence of discrimination, sources of income, activity availability, access to education, sense of personal freedom, and confidence in one’s future. There is a significance in the concept that the psychological well-being of refugees may already be quite impacted however by the experiences they had in home country, many “regimes from which refugees flee may perpetrate violence, killings, rape, assaults, ‘disappearances’, deliberate food shortages, prohibition of traditional practices and other human rights violations” (Ehntholt & Yule, 2006; Last, 2000). Additionally, their psyches are often impacted by the journey undergone to travel from the home country to the host country. After arrival, refugees are more prone to be at critically high rates of malnutrition and highly susceptible to disease When looking at this phenomena in Kampala, Uganda Refugee Camp, it can be seen that new arrivals specifically in this country are at risk for Cholera, Rift Valley Fever, and Malaria which often contributes to “feelings of helplessness and uncertainty” in addition the physical effects they may be feeling as well (OCHA). Research nonetheless shows that Kampala refugee camp has shown progress with respect to the refugees becoming self-employed and even having registered work with the capital. While there are some refugees
who have been formally employed as teachers, car mechanics and language instructors, the majority of the refugees in Kampala are self-employed. Conversely, there also exists a large number of refugees that are making only sporadic income through petty trading, begging, and provision of services such as hair-dressing and translation (InterAid 2011: 18). Through the surveys, interviews, and questionnaires, this study seeks to identify which condition is numerically more present in this refugee camp, as employment has a large impact on the psychological state of an individual- especially one who may be more at risk of helplessness and hopelessness. Similarly, previous research presents mixed findings about the relationship between refugees and the Ugandan people in Kampala. Whereas many acknowledge the existence of xenophobia towards refugees in host communities, the levels of discrimination differ from mild to acute (Macchiavello 2003; Sandik 2011; Women’s Refugee Commission 2011). My proposed research aims to diminish these wide discrepancies among the research, specifically within Kampala.

**Expected Results**

I anticipate that the compiled research will demonstrate that the loss of autonomy and opportunities combined with a changed or lacking sense of purpose which accompanies the living conditions of a refugee camp will positively correlate to the number of mental illnesses and disorders of that such camp. In Kampala however, the high rates of self-employed refugees will show a decrease in the amounts of refugees with mental illnesses and disorders in relation to the indicators of confidence in one’s future and source of personal income.
Research Design and Methods

I will conduct a systematic literature review of conditions that contribute to poor psychological health, conditions held across refugee camps, conditions held across refugee camps in Africa, and conditions within Kampala refugee camp, Uganda. I will then begin a case study in Kampala Refugee Camp, Uganda using the HTQ and HSCL-25 questionnaires alongside personal interviews and surveys. These interviews must be conducted very carefully however, as there are ethical concerns that asking such personal questions could cause the individuals to relive trauma, feel a sense of being used without compensation, or simply just the concern that they may not want their own information being published and analyzed, especially by foreign researchers, institutions, and audiences. In light of this, I will rely heavily on previously completed studies which have successfully employed similar methods without inflicting harm on the interviewees. After the study in the field, I will create a compilation of information from the interviews, surveys, HTQ, and HSCL-25, and literature review to create a comprehensive data set. Using this data set I will run regressions holding many of the influencing factors constant. I will test for the specific factors I have identified in Kampala to be highly influential on the psychological well-being of the refugees as the independent variables and the amount of mental illnesses and disorders present by types as the dependent variables in an attempt to show causation.
## Proposed Budget

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research Assistant 1</td>
<td>$12,000</td>
<td>Required help in completing the project based on the amount of literature to be sifted through and analyzed, therefore two small salaries and covering travel costs for research assistants.</td>
</tr>
<tr>
<td>Research Assistant 2</td>
<td>$12,000</td>
<td></td>
</tr>
<tr>
<td>Camera crew (4 members)</td>
<td>$200,000</td>
<td>Camera crew with me for interviewing refugees, therefore this cost will cover the crew’s salaries for 2 months as well as travel and living fees.</td>
</tr>
<tr>
<td>Living Accommodations</td>
<td>$1,700</td>
<td>Living space for 6 people to stay in while in Kampala, Uganda for 2 months.</td>
</tr>
<tr>
<td>Office Space</td>
<td>$400</td>
<td>Dedicated space to meet and work. Office spaces in Kampala, Uganda range from $5-10/day, my fund accounts for 2 months rent.</td>
</tr>
<tr>
<td>Equipment/Technology</td>
<td>$60,000</td>
<td>Computers, hard drives, camera equipment.</td>
</tr>
<tr>
<td>Journals</td>
<td>$5,000</td>
<td>Subscriptions to academic journals of which the studies are published in order to conduct an in-depth systematic literature review.</td>
</tr>
<tr>
<td>Travel Fees</td>
<td>$3,000</td>
<td>Covers travel expenses to, from, and within Uganda.</td>
</tr>
<tr>
<td>Time Worked</td>
<td>$350,000</td>
<td>Time spent working on research instead of as a full-time employee.</td>
</tr>
<tr>
<td>Reserve Fund</td>
<td>$25,000</td>
<td>Reserved for emergencies and unforeseen expenses</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$669,100</strong></td>
<td></td>
</tr>
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References


and Minority Health 18, no. 4 (December 2016): 819–27.


InterAid (2011) Socio-economic baseline survey for urban refugees in and around Kampala, Kampala, InteraAid.


Kakissis, Joanna. “Refugees Struggle With Mental Illness, Suicide Attempts Increase.” NPR. NPR, June 20, 2017.


Squires, Nick. “Children as Young as 10 'Attempting Suicide' in Notorious Greek Refugee Camp.” The Telegraph. Telegraph Media Group, August 28, 2018.


https://www.unrefugees.org/refugee-facts/camps/.


https://doi.org/10.1093/med/9780199557226.003.0014.
