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Urban Congolese Refugees in Kenya: The Contingencies of Coping and Resilience in a Context Marked by Structural Vulnerability

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Abstract

The global increase in refugee migration to urban areas creates challenges pertaining to the promotion of refugee health, broadly conceived. Despite considerable attention to trauma and forced migration, there is relatively little focus on how refugees cope with stressful situations, and on the determinants that facilitate and undermine resilience. This article examines how urban Congolese refugees in Kenya promote psychosocial well-being in the context of structural vulnerability. This article is based on interviews (N = 55) and ethnographic participant observation with Congolese refugees over a period of 8 months in Nairobi in 2014. Primary stressors related to scarcity of material resources, political and personal insecurity, and emotional stress. Congolese refugees mitigated stressors by (a) relying on faith in God’s plan and trust in religious community, (b) establishing borrowing networks, and (c) compartmentalizing the past and present. This research has broader implications for the promotion of urban refugees’ psychosocial health and resilience in countries of first asylum.

Keywords: Africa, sub-Saharan; coping and adaptation; psychosocial issues; refugees; research, qualitative; in-depth interviews; ethnographic participant observation; resilience; social support; Congolese refugees; urban refugees; Kenya; structural vulnerability

Introduction

In the context of the current “global refugee crisis”(UNHCR, 2016b), promoting the health and well-being of forcibly displaced persons requires attention from public health practitioners and researchers. Refugees are particularly vulnerable to poor mental health outcomes as a result of exposure to physical and political violence(Miller & Rasmussen, 2010; Porter & Haslam, 2005), separation from families and loss of social and emotional support (Goodman, 2004; Kirmayer et al., 2011), and post-migration stressors such as employment insecurity, loss of meaningful social roles (Peisker & Walker, 2003), uncertainty about immigration status (Kirmayer et al.,2011; Miller & Rasmussen, 2010; Porter & Haslam, 2005), and social isolation (Mollica et al., 2001). Eighty-

six percent of refugees are hosted in developing countries (UNHCR, 2015b), and 58% of refugees globally migrate to urban centers (Urban Refugees, 2015), which offer more livelihood opportunities than refugee camps (UNHCR, n.d.). Despite the advantages of migration to urban areas, refugees residing in cities are particularly vulnerable to harassment, police extortion and arrest, and social exclusion (Grabska, 2006; UNHCR, n.d.).

Despite high risk of poor mental health outcomes among those migrating to urban centers, some refugees do successfully mitigate social, emotional, and environmental stressors and exhibit positive psychosocial health in the face of great adversity (Crea, Calvo, & Loughry, 2015). This study describes the range of coping mechanisms used by a sample of urban Congolese refugees (N = 55) to navigate and negotiate personal, social, and environmental resources to promote psychosocial well-being.

Overview of Urban Refugees in Nairobi, Kenya

The East and Horn of Africa is the third largest refugee-hosting region globally, and Kenya plays a significant role in receiving refugees from neighboring countries, hosting nearly 600,000 (UNHCR, 2016a). Although Kenya has generally followed a model of keeping displaced persons in refugee camps, implementing the encampment policy has not been rigorous in practice and is often applied ad hoc (Lambo, 2012). Following a global trend of refugee movement to urban environments, many refugees in Kenya have sought livelihoods within the city of Nairobi, which is currently home to at least 63,000 registered refugees (UNHCR, 2015a); however, the exact number of refugees in Nairobi is unknown, and has been estimated to be nearer to 100,000 (Pavanello, Elhawary, & Pantuliano, 2010). According to the United Nations Refugee Agency (UNHCR, 2013), approximately 7,000 Congolese refugees reside in Nairobi, making those from the Democratic Republic of the Congo (DRC) the third largest refugee group in Nairobi (10%), behind Somalis (43%) and Ethiopians (26%), respectively (UNHCR, 2013). Smaller refugee groups in Nairobi come from Eritrea, South Sudan, Uganda, Rwanda, and Burundi (UNHCR, 2013).

On March 26, 2014, the Government of Kenya issued a directive stating that all refugees living outside of an encampment area must relocate to one of the country's refugee camps. Urban refugees and their families, including many Congolese, were pushed deeper into the peripheral cracks of Nairobi (UNHCR, 2014). The months following this directive were characterized by human rights abuses against refugees and police raids in sections of the city with large numbers of immigrants and refugees (Amnesty International, 2014a, 2014b). Deportations and forced relocation to camps resulted in the fragmentation of families and disruption of social support, overwhelming neighbors and community members who struggled to garner resources to care for children and elders who were separated from their families and left to fend for themselves (IRIN, 2014).

Theoretical Framing: Moving From Vulnerability to Resilience

Structural Vulnerability and the Psychosocial Well-Being of Congolese Refugees

Violence unravels and fragments communities. The lens of structural violence—which broadly refers to the systematical distribution of power and resources resulting in a gradient of inequity (Farmer, 2004; Zwi & Ugalde, 1991)—has been applied to examine the pre-migration (e.g., Le Billon, 2001), migration (e.g., Morreira, 2010), and post-migration (e.g., Casta.eda et al., 2015) experiences of forcibly displaced groups and individuals.

More recently, the concept of structural vulnerability has emerged to provide a nuanced understanding of the health outcomes of migration-affected groups (Cartwright & Manderson, 2011; Quesada, Hart, & Bourgois, 2011; Valdez, Valdez, & Sabo, 2015). Quesada and colleagues (2011) define structural vulnerability as “a positionality that imposes physical/emotional suffering on

specific population groups and individuals in patterned ways” (p.339). The positionality of urban refugees in Kenya has, at varying points in time, been described as “invisible”(Campbell, Kakusu, & Musyemi, 2006), “marginalized”(Jaji, 2009), and “hidden” (Pavanello et al., 2010). Refugees reside in a quasi-legal and highly liminal space; an encounter with a police officer or Kenyan neighbor could result in extortion, harassment, or violence, regardless of possession of legal refugee documentation (UNHCR, 2014). For the Congolese living in Nairobi, forced relocation to a refugee camp, involuntary return to country of origin, and splintering of post-migration social support simultaneously represent immediate and distant possibilities. The government directive additionally exacerbated work-place challenges (e.g., unfair wages, inability to become employed, workplace harassment) and social exclusion experienced by urban refugees, a group now relegated to a lower caste vis-vis the promotion of ethno-racial profiling, including coaxing Kenyan citizens to report refugees to police and government authorities (Yarnell, 2014). This state sanctioned, socio-political violence against urban refugees created an atmosphere in which abuses were normalized and possibly even “deserved.”

Although current definitions of structural vulnerability have been useful in understanding the suffering and poor health outcomes of migrant groups in the United States (e.g., Organista et al., 2013; Valdez et al., 2015), there is a need for a conceptual re-molding to fit the experiences of urban refugees in an ever-shifting landscape. The involuntary exclusion of migrants from health-promoting resources has been described as a hierarchical and networked phenomenon in the context of structural vulnerability (e.g., Holmes, 2011; Quesada, 2012). I seek to expand this understanding of structural vulnerability to capture the dynamism of refugees’ positionality. Such as a colored square in a continuously played Rubik’s Cube, the pivoting of any piece or section of the puzzle results in a new positionality. In the sociopolitical context of Kenya, in which urban refugees have become abruptly illegalized and peripheral, psychosocial well-being is contingent on navigating and negotiating health-promoting resources in a limited and ever-changing landscape. The exertion of violence against urban refugees in Kenya is indeed patterned; however, violence is enacted within a fluid environment: everything, from the enforcement of laws to the stability and composition of the household unit, is subject to change. The only certainty is uncertainty, and this precariousness is the crux of structural vulnerability.

The Strategies and Contingencies of Refugee Resilience

Similar to many urban refugees across the globe, the Congolese who make their homes in Nairobi live, work, play, and start and raise families within a state of liminality, firmly situated at the intersections of vulnerability and resilience. To counterbalance vulnerability to poor psychosocial health outcomes, Congolese refugees negotiate and attempt to establish meaningful lives. Resilience is vulnerability’s paradigmatic parallel, focusing on the positive adaptation and well-being of individuals, families, and communities despite adversity (Masten & Powell, 2003). Restructuring one’s life to create order and meaning in the wake of significant trauma requires the creativity and perseverance of what Nordstrom (1998) has termed world building. World building refers to the act of constructing livable lives, and may range from reestablishing social support, healing past traumas, and promoting well-being through the “unmaking” of violence (Nordstrom, 1998). Framing resilience in post-conflict, post-migration contexts as the act of creating and structuring one’s world draws attention to the imagination and determination necessary to survive.

In the health and social sciences, the concept of resilience adds further theoretical structure to encompass the notions of positive social development associated with world building. Ungar (2011) posits that nuanced understanding of social ecological resilience requires insight into not only the coping behaviors used by at-risk persons or groups but also into the environmental structures, access to and availability of well-being-promoting resources, and the meaning given to these resources.

Building on Ungar's (2008) framing of resilience that focuses on the capacity of individuals and groups to navigate and negotiate health-promoting resources, this new focus "draws us away from an understanding of resilience as embedded inside individuals. Resilience is instead successful development that exploits environmental contexts as they change over time" (Ungar, 2011, p. 12).

Drawing on this framework of social ecological resilience, I posit that the interplay between (a) the ability to navigate and negotiate resources (strategies) and (b) the accessibility and availability of social, political, and environmental resources (contingencies) may either foster or diminish psychosocial health/resilience. Broadly stated, psychosocial well-being hinges on the successful interaction of strategies and environmentally and socially contingent resources. In this research, I focus on the trajectory of resilience among a sample of urban Congolese refugees in Nairobi, Kenya, illustrating that indicators such as "getting by" and "doing better than expected" may, in fact, be viewed as resilience along a larger continuum of well-being.

Method

This qualitative study is part of a larger multi-methods project that was conducted between January and August 2014. Human subjects' approval for this research was granted by the University of Arizona Institutional Review Board, where I was a doctoral student at the time this study was conducted. I also obtained a research permit through the Kenyan Ministry of Education. This research presents the findings from in-depth semi-structured interviews (N = 55) and ethnographic participant observation with urban Congolese refugees living in different neighborhoods in Nairobi, Kenya.

A qualitative case study approach to refugee psychosocial health and resilience contributes nuanced understandings of well-being not typically observed in public health studies. This research took place during a period of extreme structural, political, and sometimes physical violence against refugees living in Nairobi (Human Rights Watch, 2015; Kushkush, 2014; U.S. Department of State, 2014), a time when few external witnesses were present to observe the everyday and extraordinary events experienced by urban refugees. The information gleaned from this research is part of a circumstantial ethnography (Lock & Nichter, 2002), which provides valuable information pertaining to how individuals, families, and communities responded to threats to well-being within a particular context.

Table 1. Interview Guide.

Thematic Area	Interview Question
Life in Nairobi <i>Challenges, resources</i>	Can you tell us about your life in Nairobi?
Coping Strategies <i>Overcoming adversity</i>	Can you tell us about a time in your life that was difficult or painful for you, but that you are also proud of because of how you handled it or how you overcame it?
Defining Well-Being and Resilience <i>Values (e.g., cultural, social, religious)</i>	Imagine that a new Congolese family arrived to Nairobi and came to you for advice. What suggestions would you give them? What do families need to "do well" or "get by" in Nairobi?
Hopes <i>Narrative voice (i.e., attainable expectations, dreams)</i>	What do you hope for or wish for in life?

Participants

I chose to work with Congolese refugees because of an overwhelming perception by refugee service providers that this group fares better than other refugee populations in situations of adversity. For example, one intergovernmental agency employee described newcomer Congolese refugees as being "already advantaged," referring to similar physical appearance and potentially shared language (Kiswahili) with Kenyan nationals.

I conducted in-depth interviews with 55 Congolese refugees. Twenty-eight participants were females and 27 were males. The oldest participant was 70 years old, and the youngest was 18 years old; the mean age of participants was 38. Fourteen ethnic groups were represented in interviews, with the highest numbers from N and e ($n = 16$), Banyamulenge ($n = 11$), and Bembe ($n = 9$). It was suggested by several individuals working with nongovernmental organizations (NGOs) that due to past atrocities in the DRC and post-migration settlements, 3 ethnic Banyamulenge Congolese use unique coping strategies, often self-segregating from other ethnic groups from the DRC and relying extensively on intra-ethnic group support. I begin to explore some of these coping differences in this work. The vast majority of participants identified as Christian ($n = 51$), while the remainder identified as Muslim ($n = 4$).

Informal conversations and interviews were conducted in Kiswahili ($n = 50$) or English ($n = 5$) with a Congolese research assistant and interpreter. The average interview length was 90 minutes; the longest interview was 3 hours and the shortest was 45 minutes.

Research Setting

Kenya is an important host country for refugees from Central, East, and the Horn of Africa sub-regions and is home to the UNHCR Regional Support Hub as well as a range of agencies serving refugees. Research took place in low-income, peri-urban settlements (often informally referred to as “slums” by Congolese participants) in the eastern regions of the city as well as in low-income housing complexes in Nairobi’s central business district (CBD).

Data Collection and Sampling

Due to the state of insecurity in Nairobi during the time of research and the desire to make refugee participants feel as safe as possible, respondents were recruited using purposive sampling. Congolese refugees were contacted by research assistants, who were themselves members of ethnic and geographic communities, and asked whether they would like to participate in a research project. In total, five research assistants (two females and three males) were hired to be part of the project’s research team based on bilingual skills (Kiswahili and English) and familiarity with specific geographic areas and communities within Nairobi. Participant observation and in-depth interviews were conducted in the homes of Congolese refugees, refugee-run businesses (often home-based), refugee community leader meetings hosted by a local NGO, and churches.

Eligibility criteria included any individual at least 18 years old who spoke Kiswahili or English fluently. Informed written consent was obtained from participants following written documentation and a verbal explanation of the study aims and procedures. Participants were asked to provide a signature or a thumbprint, the latter approach having been used with refugees in previous research (Ssenyonga, Owens, & Olema, 2012). Participants were informed of data confidentiality, and told they could refuse to participate or withdraw from the study at any time.

Maximum variance in sampling was achieved by taking into account sex, age, refugee status, length of time in Nairobi, residence, and household composition (see also Shamai & Amir, 2015). Given the emphasis on resilience, participants were also asked after each interview if they knew anyone who was “doing well” or “doing better than expected” and would like to participate in this research. However, “not doing well” was not used as exclusion criteria. Participants were given food in the equivalency of 500 Kenyan shillings (approximately US\$5).

Demographic information pertaining to age, sex, education, work, number of household members (including ages, relationships, and any “usual travel” by household members), province/village of origin, ethnicity, religion, length of time in Nairobi, refugee status, and languages spoken (including main languages spoken inside and outside of the home) was collected prior to in-depth interviews. Interview questions were purposefully broad (Table 1) to extract a range of age, sex, and

culturally specific challenges and coping strategies. In addition, questions probed local, culturally sensitive perceptions of resilience, and ways to promote psychosocial well-being as a corrective to a Eurocentric bias in resilience research (see Ungar, 2003, 2008).

As a foreigner in Kenya, it is possible that some Congolese refugees viewed me similarly to NGO workers, and therefore as having influence on decisions related to resource distribution or refugee resettlement. However, the fact that I was not affiliated with any specific organization often granted me privileged access into the ordinary spaces and routines of Congolese families and communities. In addition, although I relied on research assistants to provide interpretation for interviews and transcriptions, my proficiency in Kiswahili helped me to build relationships and gain trust with many participants who spoke this language. To protect the identity of participants, names used in this article are pseudonyms, and specific geographic locations and organizations are unnamed.

Data Analysis

During participant observation, I paid close attention to interactions among refugees as well as exchanges that took place with non-refugees in Nairobi. I was also able to speak with participants at different points of time, which contributed to a richer understanding of both individual and group experiences. I took extensive notes, audio recording with permission at some community meetings. Select notes were transcribed and transferred these into MAXQDA version 11 (VERBI GmbH, 2015). In-depth interviews with Congolese participants were transcribed, de-identified, translated verbatim, and coded and reviewed for emerging themes by myself and three research assistants during fortnightly team meetings. Analysis of both participant observation and interviews was iterative; categories created around the concept of resilience were organic, with specific attention paid to salient understandings and ways of achieving “doing better than expected.” Transcripts were additionally transferred into MAXQDA to ensure thematic consistency.

Personal narratives were examined for theoretical positionality using the five domains identified by Langellier (1989): (a) story-text, (b) storytelling performance, (c) conversational interaction, (d) social process, and (e) political praxis. Understanding which domain(s) the speaker is engaging and crossing during interviews is crucial to eliciting insight into everyday and extraordinary experiences, as well as into values held by interviewees and groups. As stated by Langellier (2001), “Embedded in the lives of the ordinary, the marginalized, and the muted, personal narrative responds to the disintegration of master narratives as people make sense of experience, claim identities, and ‘get a life’ by telling and writing their stories” (p. 700).

Results

Stressors, Coping, and Resilience

Although there was a common perception among refugee service providers that Congolese refugees fare better than refugees from other countries, Congolese respondents generally disagreed with this assessment, citing a wide range of stressors. When asked generally to talk about their lives in Nairobi, many answered that life as an urban refugee is *shida tu* (only problems) or that they often felt *wasi wasi* (worry, anxiety). After the March 2014 directive mandating urban refugees relocate to a refugee camp, these statements intensified. Findings from participant observation resulted in three overarching realms related to lived experiences of stress: material resources (e.g., housing, food, school fees), political and personal insecurity (e.g., police extortion, harassment; arrests; deportations), and emotional stress (e.g., sadness, anxiety, loss of social support). The ways participants were able to mitigate stress to promote resilience varied but could be categorized into three broad realms: (a) faith in God’s plan and trust in religious community, (b) establishing borrowing networks, and (c) compartmentalizing the past and present.

Faith in God's plan and trust in religious community.

Faith in God's plan, which was spoken of as inextricable from support from one's religious community, was listed the principal mediator of stress among participants, regardless of age, sex, ethnicity, religion, or socio economic status. Christian Congolese refugees often had specific reasons for selecting faith communities: Those who attended services with Congolese parishioners reported high levels of cohesion with other Congolese refugees, while those who went to Kenyan churches reported higher levels of overall security and occasionally spoke of opportunities available to them through Kenyans. Regardless of where they worshipped, the majority of respondents connected their faith to a belief that God wanted them to endure a "challenge" or "test" and that their future circumstances would improve with patience. A 22-year-old male said he would give the following advice to new comer Congolese refugees: "They need to have patience. I would tell them that this is a hard life and they need to be patient. God will [eventually] provide."

Reflecting on her experience of being raped repeatedly and being separated from her family during violence in DRC, Motema, a 30-year-old female, discussed how she coped with emotional stress through her Christian faith and religious community:

Even now I do not know how I deal with memories. It is very hard, even now. I can say it is very hard. I do not know how to get through that. Every time I think about that time, it is horrible. I don't know how to get through that. But in my [Congolese] church I can survive and I can walk. It is my church that helps me. When I hear the Word of God, this I can see.

Seko, a 31-year-old male, stated that his belief in God helped him cope with the daily hardships and liminality associated with living as an urban refugee in Nairobi:

The Kenyan people, as you can see, are not that helpful. They'll see that you don't have bread, and still they help no one, especially if you are a foreigner. If they can't help each other, what about me who is a foreigner? So I do not have another formula than just praying to God. That's all I do. That's all I do. That's all I do. That's all I do. Every day when I wake up in the morning, I pray. And in the evening when I get home, I just say, "Thank you, God. Thank you, God." Because at least I have finished this day. When you start another day, you do not know what will happen to you.

While faith in God was shown to alleviate emotional stress, communities of worship could be leveraged for material and social support, as well as to enhance feelings of security. The ability to access supportive resources was viewed as being part of God's plan (e.g., one participant's view that she "came to worship [at a Pentecostal Christian church in CBD] because of God's plan for [her]"). Jean, who is now 29, fled with his younger sister to Nairobi from South Kivu province, DRC, when he was 23 years old. In Jean's words,

When we have people who helped us, that was something that I can say was just a plan of God. We did not know how we could find someone to help us. We did not have any money. I didn't go for any help directly for UNHCR, but the way I got help was just from God. [Who are the people who helped you?] I found a Kenyan church. This was the first thing because they were the ones who took us. And I started being in this church as a singer [in the choir] and then the parishioners helped us for a time. The church helped us first to get our house. When we first got to Nairobi, we just came to that church and talked to the pastors. We said we didn't have any place to sleep. So we were

just sleeping in the church, I think one week. We stayed there for a week and then they found us a house in [an informal settlement north of the central business district]. The church paid 2,000shillings [~\$20] every month. It was so helpful for me.

Jean's story was not uncommon to urban Congolese refugees. It is notable that although many people believed that Kenyans were "not that helpful," several participants received material and social support through Kenyan churches. A female participant laughed when recounting how she met her current employer: "I met my [Kenyan]boss in church. She came to me after prayers to tell me that she liked my dress, and when I told her I made it myself and she learned that I could sew, she hired me." Others relied on charity in the form of financial assistance from Kenyans in their church communities, which ranged from help with housing fees to providing a few hundred shillings during difficult times. After being asked why she preferred a Kenyan church to the many churches for Congolese parishioners, a 45-year-old female interviewee responded, "we Congolese are not in a position to give," revealing one way Congolese refugees embedded themselves into the religious life of the mainstream population to increase the chances of securing resources for well-being.

Religion also offered opportunities to create and recreate important rituals that normalize otherwise precarious and liminal lives. Women, who are responsible for the emotional work of the community, gather in hallways over small cookers to prepare traditional meals to be enjoyed at weddings. A young Muslim widow, Khadija, who unexpectedly lost her husband when he was killed in a car accident 2 weeks before giving birth to their third child, talked about the importance of ritual in both mourning and how it affects health: "I thought all of the stress [of my husband's death] would make the baby sick. I am only okay because of my [Muslim] sisters and brothers. It is because of them that we can mourn in the proper way." The woman's neighbor, Ziada, with whom she now stays, explained that Khadija will reside with the family during the entire iddah, a period of 4 months and 10 days in Islam, during which widowed women observe the death of their husbands and may not remarry. Ziada stated that Khadija and her children were welcome to stay longer but that this period could be especially difficult for women who were unable to sustain themselves financially in the absence of a provider.

Baptiste is a 27-year-old ethnic Banyamulenge male respondent who was arrested during a police raid during a church service in Nairobi on May 4, 2014, and sent to a refugee camp (Dadaab) with nearly 150 others from his congregation (see also Migiros, 12 May 2014). During his interview, he focused on how the group created a place of worship in the camp. He has since returned to Nairobi:

The UN came again on a Sunday and moved us [to another district of Dadaab refugee camp]. When we arrived, jua nisingi, njaa ni mingi [sic] (the sun was so much, the hunger was so much). We were bitten by scorpions! Oh, tulipigakilele! (We screamed!) [Laughs] We were treated by [doctors in the camp]. We started to pray slowly because if you pray, you have strength as a group. We were so afraid because our community died in the camps in Burundi [during the Gatumba massacre], and we fear to live in the camp [in Kenya]. We whispered our prayers to God.

The rituals associated with religion, whether Christianity or Islam, offer a space for Congolese to come together to share both positive and negative experiences, entangling them within a supportive community. Although this integration is shown to offset stress among several participants, being isolated from a religious community can have an inverse relationship with resilience,

resulting in decreased psychosocial well-being. One participant in her mid-20s, Jolie, spoke of her family's alienation from religious support when they first moved to Nairobi:

When we first came here, we lived in [a Muslim-majority section of Nairobi] and life there was a bit hard . . . we were another religion and most people are Muslims. [As Christians] we found that mingling with them was a bit hard.

After several months, Jolie and her family moved to an apartment closer to other Congolese refugees in the CBD. She and her mother began participating in an evangelical Christian church service that was widely attended by the Congolese. She confided during her first interview that although her mother enjoyed attending these services, Jolie found congregants to be gossipy and not accepting of new comers. She continued to feel isolated, despite proximity to a geographically bound religious community. Several months later during a follow-up interview, Jolie wore conservative clothing coupled with a hijab, in stark contrast with her earlier style of dress. She stated that she had recently converted to Islam because no matter how often she frequented church services, she felt she was never accepted by the Congolese Christians. Therefore, it is likely that one reason Jolie switched religions was to find emotional comfort and to increase her social networks. Unlike other participants, however, Jolie emphasized religion over faith. She performed the ritual activities associated with both Christianity and Islam: During the initial interview, she talked about attending church services; in follow-up interviews, she focused on attending mosque on Fridays and how she prays five times each day. However, Jolie was the sole participant not to mention God or having faith (or finding solace) in God's plan or in religious community members. Although Jolie has faltered in building resilience, she is aware of the potential to secure resources from religious communities and performs rituals accordingly. Although the performance of religious rituals further embedded many Congolese participants into a socially supportive system, Jolie's contrasting experiences reveal that performance and proximity to a religious community alone do not guarantee access to resources.

1. Establishing borrowing networks

The majority of study participants faced severe economic hardship and experienced stress related to material resources. This was especially true of participants with dependents and in a caregiving role. Aline is a 50-year-old single mother of six. Four of her children are grown and married, but two young children live with her in a one-bedroom apartment. On the days her two young children are in school, Aline travels 2 hours by bus to reach the outskirts of the city, where she sells cassava leaves, a popular staple in Congolese cuisine. Aline was identified by friends and neighbors as someone in the community who was "doing well." Although she stated that no Congolese refugees in Nairobi are doing well, by her own account, she fares better than many other Congolese refugee women in her situation, in large part, she believes, because she has built extensive networks of trust, providing opportunity structures through friends, neighbors, and acquaintances.

Aline supplements her income through a network of borrowing and reciprocity to ensure her family's survival in Nairobi. Aline mentions a female Kenyan acquaintance who will occasionally lend her 50 or 100 shillings (approximately US\$0.50–US\$1), and she also relies heavily on informal relationships established with shop keepers over time:

Life in Nairobi is good but not very good. There are times you have problems, but you can go to someone to borrow money . . . to borrow and borrow. People in Nairobi are good. . . . When I do not have food, we go to the duka (store) just down the street to borrow. Then if I get money, I go to repay. There are two [Kenyan] store-owners who

let me do this. But if you borrow, you cannot be late to repay the money. These Kenyans let me take food and things only because they know I will come back to pay them later.

Fred, a 28-year-old male supporting his sister and her child, relies on borrowing to enhance resources. Although he works as an outreach worker at a nonprofit agency, his salary often falls short of covering household necessities:

To find people to help you with [finances] is very hard. We usually get a loan when we have that problem. There is a guy just here in town, he is a Kenyan. When you need a loan, if you want 8,000 shillings, he can lend you that 8,000, but you will need to return with interest. Sometimes, when I find myself having so many expenses, like the end of the month, I need to pay rent, I need to pay food, to pay school fees for the kids. When I see my salary is not enough, I have to go there and ask for a loan. I've been there three times [in the past 12 months].

Even though borrowing with interest is not an ideal situation, Fred has managed to navigate the mainstream society of Kenya to access resources contingent on the lender's trust that he will repay his loans. The quasi-formal moneylending systems that Fred describes were more commonly utilized by male participants, whereas Aline's example was exemplary of females' utilization of informal, relationship-based networks.

Congolese participants who were identified as doing better than expected in the community were recognized as resilient primarily due to an economic standing that did not necessitate dependence on NGO assistance or borrowing networks. Those who were "doing well" frequently found themselves on the other end of the borrowing relationship, as lenders of food, money, and other needs that may arise. Lulu and Fabrice live in a two bedroom apartment in Nairobi's business district with three of their children as well as two Congolese girls whose parents were killed in DRC. Lulu has a home-based business, preparing traditional Congolese foods. Lulu believes much of her success as an informal restaurateur in Nairobi is due to her years of experience as a restaurant owner in DRC, as well as to the fact that "the Congolese pay for these foods because they remind them of home." Fabrice works with a local company as a driver and occasionally as a mechanic, his former profession in DRC, to supplement the family's income. In this particular situation, the family's capacity to attain resources is contingent on existing resources, including skills in cooking, business, and mechanics. Because the family has been identified in the community as having resources, Lulu and Fabrice are often called on for assistance, whether that means caring for unaccompanied children, donating food for weddings or funerals, or lending money.

Lulu and Fabrice offer reversed insight into the success of borrowing systems: For a trust network to succeed, borrowers must have the capacity to return goods or to provide goods or services of equal value, lest the relationship become strained. During this interview, both Lulu and Fabrice spoke of the stress of balancing their desire to help vulnerable people within the community with their own limited resources. Another woman reveals the importance of having the capacity to support oneself in the context of living in a community: "The community cannot support newcomers. The community is there to support people with a mandate [refugee status], they need to know you are a refugee. [Can you tell me why this is?] There are no resources. People are scared [of doing without]. Just this." Here, it is demonstrated that it is burdensome for individuals and households who are themselves economically vulnerable to support more vulnerable refugees.

In contrast to the success of Lulu and Fabrice, Mansa, a 44-year-old widower raising three young children, has been largely unsuccessful in gaining access to a system of reciprocity due to his inability to produce material capital. He came to Nairobi hiding in the back of a commercial truck

with his wife and children in 2010, after his small shop was repeatedly targeted by rebel groups in the DRC. The family rented one room in the CBD, where he and his three children have shared a mattress since his wife died of HIV/AIDS-related complications 3 years ago. Mansa explained that his spouse was infected with HIV after being raped when in the DRC, but he was unsure whether the men were in the military or a rebel group.

As the sole provider for his family, Mansa relies on hourly or daily wages from *vibarua* (casual jobs) to provide for his family, informal work such as cleaning side walks or cutting grass outside of the Catholic church his family attends on Sundays. However, after the Government of Kenya issued a directive mandating urban refugees relocate to camps, Mansa stopped working because he has been afraid to leave the house. This immobility further perpetuates a lack of access to opportunity structures to sustain himself and his family. To ameliorate his inability to access resources, Mansa has been forced to rely on his children to bring food into the house. His daughter, who studies in primary school, is given rice or small amounts of money at times by her classmates; the family's access to nourishment has become contingent on the schoolgirl's social ties. On occasion, the daughter stays with the family of a Kenyan school friend for several days at a time to ease the burden on the household. Mansa said the stress of being separated from her family has resulted in poor grades in school, although he thanked God to know she was eating [outside of the house]. His adolescent son occasionally begs for food on the streets to help the family, but Mansa reported that this strategy has not been successful, as there is never enough food for everyone. As such, Mansa is viewed as unsuccessful by other Congolese, and while members of the community feel pity for his situation, the depth of his poverty creates challenges for those without extra resources to spare. After leaving the interview with Mansa, a research assistant whose own family lives only blocks away, lamented, "It is hard, you see. His burden is the burden of all of us. And what do we have?"

The "pay to play" aspect of borrowing networks requires trust that the borrower will eventually pay for the item or provide a similar item of equal or greater value to the original lender. Those who are unable to show evidence of ability to repay an initial debt may be given one chance to join a network, or may be barred entirely from a network, as demonstrated in the example of Mansa.

2. Compartmentalizing the past and present.

A principal mediator of everyday and emotional stress was the ability to manage past memories and immediate stressors to make sense of the present. Memories had the potential to evoke sadness (e.g., death of a spouse, separation from a child) or frustration (e.g., comparative wealth in DRC as opposed to Nairobi). Participants who were identified by community members as "doing better than expected" were able to compartmentalize and manage memories, creating specific spaces and times in which to remember.

Several Congolese refugees lamented the loss of comparative material wealth in this post-migration setting, describing how ownership of homes and cars were tied to a higher social status when in the DRC. A Congolese woman in her 30s summarized this when she said, "The problem with those who used to have good lives, they cannot cooperate with this life. This is why they die a lot, because of the stress." This quote shows how compartmentalizing past memories can be a tool to facilitate acceptance of one's current situation. A 40-year-old female participant, Yvette, described her struggle living in poverty when she first moved to Nairobi with her husband and two children. In DRC, the family owned a successful business, and she spoke of great material wealth, which she and her husband lost when they fled rebel attacks in their village:

When I was at my lowest [in Nairobi], I was in town and I stood near a dustbin. Things were low at that point and we had so little. So one day I was by this dustbin and I once

took bread from this dustbin. [Eyes tear up.] I will never forget that day. Never. Whenever people throw food in the garbage, I learned that there is someone else waiting for it. God protected me, though, and I am here. We went to pray at Uhuru Park [at a Congolese church] right after I ate that bread from the dustbin, and I prayed, “God I want to forget everything I used to have.” I told God that I forgive all people who organized to evict us and destroy our property [in DRC]. And until today I have forgotten! Now I am just so happy, I love to be with people.

All of this? Now this is history. I’ve forgotten now. That day [in Uhuru Park] I cried until my tears and snot and saliva gathered together. People suffer—even if in Congo they were good, they come to suffer here.

In this context, forgetting is akin to accepting life in the present. Moving forward from the past helped Yvette cope with her life in Kenya.

In addition to forgetting the past, another strategy used by participants was to manage present-day perceptions of stressful past events through humor or story telling. Amid the chaos narratives that were frequently told in response to police raids and general insecurity, older women sometimes used humor and laughter to confront haunting or frightening past experiences. When telling how she was separated from her adult children, who were relocated to a refugee camp in a police raid at her church, Kitoko, in her mid-70s, animatedly shared the following story:

When the police came, I was in church, but I told them: “Why do you want to arrest me? Have you seen my age!?” [Takes out her identification card during the interview and waves it around.] I showed them my alien ID and I made them look at how old I am on my ID! [Pulls back her head scarf to reveal gray hair and laughs: “See?!”] When the police saw my age, they told me, “Okay, you go.”

In her retelling and reimagining of a traumatic experience, Kitoko not only used humor to mitigate the feelings of fear and extreme sadness related to being forcibly separated from her family but also gave her story-self the power to control events over which she had no control in her daily life.

In stark contrast to the active forgetting used by some participants, other Congolese, notably ethnic Banyamulenge, chose to engage in remembering past atrocities. In some narratives, the church served as a political and social space of simultaneously planning for the future and remembering the past. One community held services to honor fellow ethnic Banyamulenge Congolese who were killed during massacre in a Burundian refugee camp (see also Human Rights Watch, 2004; UNHCR, 2005). Several in this community in the eastern outskirts of Nairobi are among the survivors of this 2004 slaughter, still bearing the physical and emotional scars more than a decade after the attack.

Although this emphasis on past injustice has in many ways created a cohesive group identity built on past experiences, ethnic Banyamulenge Congolese have been less successful leveraging resources outside of this group. Some Congolese from other ethnic groups have described the Banyamulenge as being “pushy” or “demanding.” Without prompting, an international NGO employee shared how a different, local organization preferred not to work with the Banyamulenge “because of problems with behavior,” further explaining that some NGO workers believe members of this ethnic group to feel “entitled” to services. What is perceived as entitlement by outsiders may in fact be the promotion of what the Banyamulenge believe to be social justice, or at least the deservingness of a better life after decades of exclusion and suffering, both in DRC and in Kenya. As one Banyamulenge pastor emphasized during a meeting with fellow church elders, the Banyamulenge have suffered and finally deserve peace.

Participants who were doing better than expected demonstrated the capacity to compartmentalize the past to serve the needs of the present. When this works to leverage resources, the past is manipulated in a way that garners social support and health-promoting resources (e.g., in the case of Yvette who prayed to forget the past so that she could adapt to her present circumstances and seek assistance from others). In the case of the Banyamulenge, leveraging the past as political has worked to create a cohesive group identity and internal support but has shown to alienate outsiders who do not share their history. In the latter instance, the Banyamulenge are able to navigate in-group resources but are less successful in negotiating these resources from the external environment.

Discussion

This research furthers the knowledge pertaining to how urban Congolese refugees attain psychosocial health-promoting resources in the context of structural vulnerability. The combination of participant observation and open-ended interviewing techniques created a comfortable research space in which participants themselves defined what it meant to “do well” or “do better than expected,” and to collect evidence on the diverse range of strategies used to promote well-being. Congolese refugees promoted psychosocial well-being within three overarching areas: (a) faith in God’s plan and trust in religious community, (b) establishing borrowing networks, and (c) compartmentalizing the past and present.

The primary resource mentioned by Congolese refugees was faith in God’s plan, which was inextricably linked to their ability to integrate into a religious community (e.g., “I am at this church because God planned it”). Most participants stated using prayer to mitigate stress and negative emotions, which has been identified as a central coping mechanism in studies with refugees from sub-Saharan Africa (Halcn et al., 2004; Khawaja, White, Schweitzer, & Greenslade, 2008; Pavlish, 2005; Schweitzer, Greenslade, & Kagee, 2007). Those with a strong faith in God’s plan were also able to situate their present suffering as temporary, while hoping for a better future. This “enduring” coping style is also demonstrated by African refugees in Peisker and Tilbury’s (2003) research. Also consistent with research on spiritual-religious styles of coping (Khawaja et al., 2008; Schweitzer et al., 2007) is the finding that Congolese who were embedded in religious communities had better access to resources, including money, housing, and employment. This study diverges from past research by connecting congregation type (e.g., primarily Kenyan vs. primarily Congolese) to specific resilience-promoting resources, as well as demonstrating a trajectory of spiritual-religious coping, in which not everyone has equal access to the means to do well.

In addition to social and material support, findings from this study bridge the literature on coping with the research in transcultural psychiatry by demonstrating the importance of religious ritual in healing past trauma and maintaining constancy in one’s post-migration life. The familiar aspects of performing liturgical song and dance is exemplary of Woodcock’s (1995) assertion that “throughout history, communities in exile have created healing rituals in order to ameliorate the damaging aspects of exile and to provide for the continuity of their beliefs and traditions” (p. 397). The importance of ritual was also seen in example of Khadija, the young Muslim widow: She and her children were enfolded in the emotional and material support of her Muslim neighbors during the traditional 4-month mourning period, creating a space for her to grieve in a familiar way, without the additional stress of providing for her children.

The material support garnered vis-à-vis borrowing networks⁴ exists in the in-between space between charity handouts and consumption items. Borrowing networks differ from the previously discussed religious charity support in two ways: First, unlike the findings on religious communities, borrowing networks exist in a “pay to play” arena. Second, as Oka (2014) points out, refugees, as recipients of charity, “have to constantly negotiate the categories of ‘deserving’ and ‘undeserving’

in the judgment of the charity givers” (p. 26). Borrowing networks provide a value-neutral space in which to obtain resources.

Within the former, “pay to play” point, strategies to attain the material resources necessary to promote well being were stratified along gendered lines. Male respondents more frequently cited the use of quasi-formal borrowing systems, such as moneylenders who distribute money at high interest rates. Females reported higher utilization of looser, more informal networks, including local shopkeepers and Kenyan acquaintances, and equally borrowed money and food within these networks.

Borrowing among refugees has been identified as an area of concern due to the potential to increase refugees’ debt and vulnerability (Jacobsen, Ayoub, & Johnson, 2014); however, successful borrowing-and-return systems were viewed by participants as freeing them from dependency on NGOs while increasing their comfort in the local host community. Although Congolese participants identified financial security as an indicator of “doing well,” in the context of sociopolitical exploitation and violence against refugees, most respondents were unable to think of even one person who had achieved this feat. As such, borrowing networks have become derigueur, lowering the barometer for success from fiscal independence to returning or paying back resources fully and within a short time period.

Finally, promoting resilience involves the specific work of managing the past and present to restructure the self in the context of both past hardships and prosperity (no matter how relative) and recent adversity. In this creative act of world and resilience building, Congolese strive to craft meaningful lives in the present. According to Walsh (2007), “meaning making and recovery involve a struggle to understand what has been shattered, how to build new lives, and how to prevent future tragedy” (p. 247). Meaning making, and the understanding and manipulation of temporality, may involve celebrations, mourning, or silence about past loss and heartbreak; it is important to view these demonstrations as a range of coping strategies, and not to pathologize acts of resilience that promote psychosocial well-being.

Congolese refugees walked a thin tightrope between forgetting and remembering to create a viable present. Some participants focused on forgetting the positive aspects of their past lives in DRC to adapt to the adverse circumstances of the present (i.e., to stop comparing the past and present). Forgetting is consistent with the conscious suppression of troublesome memories that has been identified as a potentially adaptive and resilience-promoting coping strategy in studies with war-affected Africans (Tankink, 2004), including refugees (Goodman, 2004; Tschudin, 2015). However, Congolese participants’ focus on forgetting-as-processual extends beyond suppression to disremembering, recalling similar strategies such as “active forgetting” (Summerfield, 1999, 2000) and “chose namnesia” (Buckley-Zistel, 2006) as normative coping mechanisms in non-Western cultural contexts. Goodman(2004) raises a crucial point that it is unclear whether emotional avoidance is useful as a temporary or long-term coping strategy.

Within the forgetting–remembering continuum, there construction of traumatic experiences emerged through storytelling, both during interviews and in participant observation activities, as a way for people to gain control in a chaotic environment. The reimagining and reconstruction of self through narrative has been identified as a self-situating coping mechanism to deal with past trauma in studies with war-affected populations (Gemignani, 2011). Although Congolese participants mentioned their past lives, much of their memory work necessitated a repositioning of self in the context of current adversities, re-crafting recent events that hold the threat of recurrence (e.g., police raids, forced relocation to a refugee camp). Central to these narratives is the redistribution of power to the storyteller-self. In the retelling of stressful life events, the central aggressor (e.g., police officer) often became the object of amusement, while the story-teller was situated as the power-holder. By re-positioning oneself in stories, it is possible that this mitigates some of the perceived threat.

In contrast to active forgetting is the engaged, collective remembering used by some Congolese

refugees. This study identified only one ethnic group (Banyamulenge Congolese) that engaged in active remembering, but this strategy may be more widespread among conflict-affected Congolese. While acts of memorializing past socio-political atrocities were positively associated with cohesion among the Banyamulenge, transporting the past into the present to garner social, material, and political resources did not work as a strategy outside of this ethnic group. Participants' experiences and statements highlighted the necessity to adapt strategies to successfully leverage opportunities in various contexts.

There were significant limitations to this study. The first was my presence as a foreigner in a limited-resource environment with a population that, to varying degrees, relies on external assistance by international NGOs and intergovernmental agencies. It is possible that particular stories were emphasized with the hopes of securing resources from an individual potentially perceived to be associated with a humanitarian aid organization. It is difficult to know what salient stories would emerge more naturally without my being present. In addition, the snowball sampling method may have limited access to individuals, families, and groups that use different coping mechanisms to promote resilience and psychosocial health.

Conclusion

This article describes nested contexts to reveal how urban Congolese refugees in Nairobi “do better than expected” in a situation of personal and political insecurity. To my knowledge, this is the first attempt to detail social ecological resilience in an urban refugee group using long-term ethnographic and in-depth interview methods in a country of first asylum. There is an unprecedented number of refugees moving to cities in low- and middle income countries across the globe. Many of these individuals and groups are met with xenophobia in host countries, and it is critical to identify strategies and resources that promote well-being in the context of extreme adversity. Furthermore, this article situates resilience as a dynamic phenomenon, occurring along a trajectory. This framing remains attentive to the very real suffering experienced by urban refugees. Resilience should not be viewed a panacea to address structural and political violence against displaced groups, but rather one lens that provides some insight into how some individuals and groups fare better than expected.

In addition, this article emphasizes socio-culturally salient understandings of what it means to do better than expected in two ways. First, demonstrating resilience along a continuum allows exploration into coping mechanisms that are not traditionally viewed as “resilient.” The use of borrowing networks has generally been shown to diminish refugees' well-being; however, the emphasis by participants on attempting to use borrowing systems to become self-reliant—or at least not dependent on NGOs—gives insight into some values held by Congolese refugees: pride and determination. Social and economic interventions that develop employable skills relevant to the host community—thereby reducing the reliance on borrowing systems and increasing economic standing—may also enhance overall health and well-being. Second, this article shows that coping strategies and cultural values vary across ethnic groups. The majority of research pertaining to refugee health focuses on countries of origin, neglecting to differentiate by ethnicity. Such findings have important implications not only for future research but also for practitioners who work with refugees, as this demonstrates that there should not be a “one size fits all” approach to interventions. Regardless of ethnicity, religious support emerged as the primary resource for emotional, social, and material support, suggesting that future research with this population should explore the role of religious structures in the promotion of refugees' psychosocial well-being.

The central finding of this research was the “contingence” of resilience, pointing to psychosocial health as hinged on the fortuitous alignment of cognitive and embodied coping strategies in tandem with the resources available to individuals and groups to promote well being. As such, this study

provides further evidence to support Ungar's (2008, 2011) model of social ecological resilience, and begins to unpack the interplay between individual/group behaviors and internal/external resources. There is a need for continued documentation of the ways urban refugees promote resilience and well-being in countries of first migration to inform policy and programmatic efforts aimed at promoting psychosocial well-being among urban refugee populations. Although resilience should not be viewed a substitute for the improvement of sociopolitical structures to address refugee well-being, it is a crucial step in carving niches for health promotion.

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Notes

1. At the time of this writing, the Government of Kenya has announced its intention to close Dadaab refugee camp (UNHCR, 2016c). The future of Kenya as a refugee-hosting country is therefore uncertain.
2. The Rubik's Cube is a popular 3D combination puzzle in which players pivot sections to align colors.
3. Several refugee service providers stated that ethnic Banyamulenge not only self-segregate geographically but are also perceived to be more "demanding" of organizations. Congolese participants from different ethnic groups echoed this statement, many saying that the ethnic Banyamulenge create challenges in the community and are unable to integrate with the Congolese as a whole. Socio-historically, ethnic Banyamulenge Congolese were involved in inter-ethnic group violence in the Democratic Republic of the Congo, and were the targets of a massacre in a Burundian refugee camp (HRW, 2004; UNHCR, 2005). This is explored later in the text, and provides early context for examining coping mechanisms within and among ethnic groups.
4. Although there were encounters of Congolese refugees who exchanged specific services (e.g., sex work, housekeeping) for material capital during research, this study focuses solely on the exchange and borrowing of material goods (primarily cash), as this was a common coping strategy that was available to a wider array of participants.

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