A STUDY OF THE EMOTIONAL AND PSYCHOLOGICAL WELLBEING OF

REFUGEES IN KAKUMA REFUGEE CAMP, KENYA

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ABSTRACT

This study explores the emotional problems affecting refugees in Kakuma refugee camp
(northern Kenya). The freelisting technique was used to interview 52 community members
and 32 'key informants'. Freelisting was found to be useful in this setting, and provided
information which could assist with advocacy, programme planning, and programme
evaluation.

The emotional problems most frequently identified were hopelessness, fear, sadness, anger/
aggression, and worry. Both current stressors and previous losses were said to impact on
emotional wellbeing. Therefore, whilst psychosocial interventions are important,
programmes addressing refugees' practical needs (particularly safety and material needs) will
have a positive impact on psychosocial wellbeing. These findings also suggest that some
anti-social behaviours which contribute to problems within and between communities in
Kakuma are due in part to emotional problems; if so, addressing emotional problems would
be a worthwhile use of resources.

INTRODUCTION

Conflict, displacement and other emergencies are now generally acknowledged to have a
significant impact on the psychosocial wellbeing of those caught up in such situations. The
Psychosocial Working Group (2003) have proposed a helpful model of psychosocial
wellbeing, which incorporates three central resource domains: human capacity, social ecology
and culture and values.

Figure 1. <u>Model of psychosocial wellbeing</u> (Psychosocial Working Group, 2003)
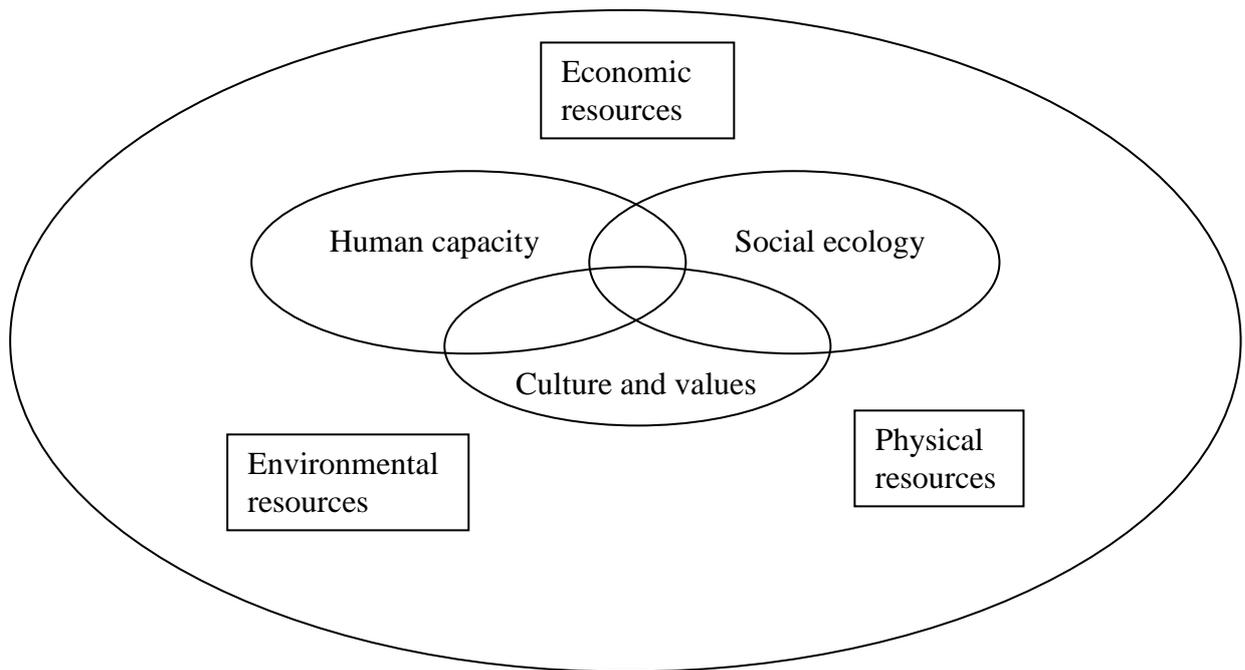
This framework is essentially a 'model of resource' (Boothby et al., 2006), as opposed to a model of needs or losses. Its focus is on the quality and quantity of the resources available to an individual, family or community in each of the domains. These three domains are seen as central to psychosocial wellbeing, but the PWG acknowledge the importance of other aspects of life, such as material/ economic factors, infrastructure and the environment. Some (Galappatti, 2003; Williamson & Robinson, 2006) have argued for shifts in emphasis in the model, such as a more central role for material/ economic factors, the physical environment, or biological and spiritual factors. Whilst, therefore, this model should not be seen as definitive in all situations, it provides a valuable starting point for developing an understanding of the resources available to a displaced community, and of the areas in which they may experience losses.

Research has shown some of the ways in which conflict and displacement can impact on each of these domains.

Culture and values

Wessells and Monteiro (2004) describe how war shatters peace and trust within a society, creates divisions amongst its members, and establishes a societal norm of violence. These changes can result in an increase in hostility and suspicion amongst families and other groups, and a normalisation of violence as a way of resolving conflict, along with an acceptance of violence as a routine occurrence (Martin Baro, 1989). The maintenance of traditional culture and practices might be particularly important to forcibly displaced populations, as ways of maintaining some continuity and giving meaning to life in a situation characterised by loss and disruption of family support, social networks and community structures (Carlson, 2005).

Social Ecology

The experience of displacement affects almost every aspect of social and economic life. Poverty is amplified, and there are often limited opportunities to generate income. Economic stresses, and a lack of access to resources that could improve one's economic situation, have been identified as sources of ongoing frustration for refugees (Miller & Rasco, 2004).

A loss of social role and status is a common consequence of displacement, as people lose their jobs, access to land for farming, and their roles within their communities (Miller & Rasco, 2004; Payne, 1998; Wessells & Monteiro, 2004). Such losses contribute to emotional problems amongst refugees (Omidian, 1996; Payne, 1998).

This loss of role and status may be particularly problematic for males. Female refugees are often able to maintain their traditional roles and responsibilities while they are in camps, and so maintain their gender identity, whilst men are more likely to lose their central roles, especially that of protector and provider, which makes it difficult to maintain their sense of themselves as men in the community and family (Payne, 1998; Schrijvers, 1997) (for an exception to this, see Turner 1999). Female Sudanese refugees in Uganda were found to spend much of their time carrying out traditional tasks such as fetching water and cooking,

whilst men had lost most of their previous activities, and were only active for around four hours a day (Ondeko & Purdin, 2004).

Displacement frequently involves separation from one's community, and even family members, and the resulting isolation and loss of social support have been consistently found to be one of the most salient displacement-related stressors affecting refugees (Miller & Rasco, 2004). Whilst refugee camps are often crowded places, people may know few others, have relatively little social support, or be intermixed with other ethnic groups they find it hard to relate to (Andrade et al., 2001).

Loss of social support is exacerbated by the destabilisation of communities that typically accompanies displacement (Turner, 1999). Community groups that provide not only social support, but also activities that give meaning and continuity to life (e.g. women's, church and youth groups), tend not to survive displacement (e.g. Payne, 1998). Wessells and Monteiro (2004) point out that even when entire communities are relocated together, they may no longer function together as a community: 'There may be no community meetings, little collective planning and action, disruption of leadership and organisation, and a pervasive sense of uncertainty and hopelessness' (p76).

For refugees, whose familiar social networks have often been decimated by conflict, the family is the main source of support (Weine et al., 2004). However, conflict also disrupts family structures, with family members becoming separated, injured or killed. Even when families remain together, parents are often too overwhelmed by their traumatic experiences and current difficulties to effectively care for and support their children (Wessells & Monteiro, 2004). The refugee family, with its losses and instabilities, may be dysfunctional in various ways (Walter, 2001; Weine et al., 2004).

Human capacity

The 'human capacity' domain includes knowledge, skills and education, as well as physical and mental health. Clearly, conflict and displacement can take a toll in all these areas. The likelihood of physical injury to those caught up in a conflict situation is high, and this has consequences for their ability to work, contribute to the family and participate in community life, all of which impact on their psychosocial wellbeing. Children in conflict situations commonly miss out on educational opportunities (Boothby et al., 2006; Farr, 2001; Wessells & Monteiro, 2004), and even those living in refugee camps may not be able to access education. Skilled refugees often have difficulty in using their skills to generate income, especially those who are living in camps (Schmidt, 2003).

Those who have experienced conflict, and have been forcibly displaced, are likely to experience emotional and psychological distress, although many will recover over time (Inter-Agency Standing Committee (IASC), 2007). There has been a tendency to focus primarily on the psychological impact of traumatic experiences pre-flight, but the impact of displacement-related stressors on refugees' coping abilities should not be underestimated. There is much evidence to support the claim that displacement-related stressors have at least as much impact as prior trauma on refugees' psychosocial wellbeing (see Boothby, Wessells & Strang, 2006; Miller & Rasco, 2004). Individual psychological resilience is severely tested by the refugee experience, perhaps particularly for those living in camps. Wessells and Monteiro (2004) describe the psychologically debilitating effect that living in a refugee camp – typically a desperate, isolating and boring life - can have. Even when their basic needs are met, people report feeling despondent, helpless and apathetic. The enforced idleness of life in a refugee camp has been reported to be particularly stressful (Kassam & Nanji, 2006).

The negative psychosocial effects of living in a refugee camp are exaggerated further when the stay in the camp is protracted. Not only do refugees in protracted displacement situations

have to cope with prolonged exposure to the stresses of life in a refugee camp, but also the ongoing uncertainty about their future (Feyissa & Horn, 2008).

Context Of Current Study

Kakuma Refugee Camp is located in north western Kenya, 100km from the Sudanese border. The camp was originally established for 12,000 Sudanese minors who arrived in 1992, and since that time they have been joined by refugees from other nationalities, as well as thousands more Sudanese. The camp now includes refugees from Somalia, Ethiopia, Congo, Burundi, Rwanda and Uganda. Some have been resettled to third countries, such as the US, Australia and Canada, but many have been living in Kakuma for more than ten years. Those who came as children have been educated and have grown to adulthood in Kakuma; many children have been born in the camp and have never seen their 'home' countries. At the time this study was conducted, around 96,000 refugees were living in Kakuma.

The opportunities for refugees in Kakuma to improve their lives are limited. Kenyan government policy dictates that refugees are not allowed to live freely, but must stay in one of two camps (Kakuma or Dadaab). In Kakuma, refugees are not allowed to keep animals, since this is likely to increase conflict between the refugees and the local Turkana people. The semi-arid environment is not conducive to growing crops. It is possible for refugees to start small businesses, if the capital is available (either through a loan from a non-governmental organisation [NGO] or money sent by family abroad). However, the market is finite because Kakuma is in a very isolated area and the majority of customers are other refugees, a small number of national and international staff working in the camp, and local Kenyans. All agencies in the camp "employ" refugees, but due to Kenyan laws prohibiting employment of refugees, they are engaged on a voluntary basis and then paid an 'incentive,' which is far lower than a wage would be for a Kenyan in an equivalent job.

The aim of the current study was to identify and understand more about the emotional problems experienced by refugees in Kakuma, who not only live in extremely challenging circumstances but in many cases have been displaced for more than ten years[1].

METHOD

Two qualitative interviewing methods (freelisting and key informant interviewing) were used (Bolton, 2001). The interviewers were 26 refugee staff of a community counselling programme with knowledge of psychological and emotional problems, and experience of conducting interviews. Two half-day training sessions were carried out for the interviewing team.

Kakuma refugee camp is divided into zones and groups, and each community counsellor is allocated certain groups within a zone to work in. The research was carried out in the zones and groups in which the 26 interviewers normally worked. All interviews were conducted in the language of the interviewer and interviewee, and the interviewer was required to translate the respondents' answers and record them in English on the survey form.

Freelisting

The 'freelisting' methodology involves people from a target community generating lists in response to one or more standardised questions. In the current study, respondents were asked 'What are the main psychological or emotional problems that affect people in Kakuma?'. They were prompted by the interviewer to list as many problems as possible, and to give a brief description of each. They were also asked to identify individuals in their community who are commonly consulted by people who are struggling to cope with their emotional or psychological problems. Their names and locations in the camp were recorded for use in the next stage of the study.

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[1] The study reported here was the first stage of a larger project, which aimed to develop an assessment instrument to monitor the progress of clients of a community counselling programme in Kakuma, and to facilitate the management of the counselling programme (Horn, 2008).

During analysis, the data from the free lists were collapsed to provide a composite list of problems in order of the frequency they were mentioned. This gives the names and descriptions of the major problems in that community (from the community members' perspective) and how highly people prioritised them.

Key informant interviews

These interviews were conducted with the persons named in the freelisting study as those who are commonly consulted about emotional and psychological problems. The purpose was to confirm the descriptions of problems that emerged from the free lists, and to obtain more detailed information about the emotional problems experienced by refugees in Kakuma. Key informants were asked:

When people come to you to talk about their psychological or emotional problems:

- What are the main bad feelings they are having?

- How do they behave?

- What are the most common causes of their bad feelings?

RESULTS

Fifty-two people were interviewed for the freelisting study; 25 men and 27 women. Respondents had lived in Kakuma for between one and 14 years (mean=7.74, standard deviation=4.12), and were aged between 19 and 49 (mean=32.41, standard deviation=6.82). The nationalities of respondents were: Sudanese (30); Somali (7); Rwandese (3); Ugandan (2); Burundi (2); Congolese (3); and Ethiopian (4).

Thirty-two key informants were interviewed; 26 men and 6 women. Key informants had lived in the camp for between one and 14 years (mean=8.73, standard deviation=4.03), and were aged between 19 and 59 (mean=37.63, standard deviation=11.31). The nationalities of key informants were: Sudanese (22); Somali (3); Ugandan (2); Burundi (2); Congolese (2); Ethiopian (1).

The problems identified by the freelisting respondents and key informants are shown in Table 1.

Table 1. Results of the free lists and key informant interviews on emotional and psychological problems affecting refugees in Kakuma

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Problem	N freelisting responses	Freelisting Ranking	N key informant responses	Key informant Ranking
Hopelessness	30	1	28	1
Fear	20	2	19	5
Anger/ aggression	15	3	21	3
Worry	14	4	20	4
Thinking too much	14	4	-	-
Sadness/ sorrow	13	6	27	2
Loneliness	13	6	12	8
Frustration	9	8	17	6
Disappointment	7	9	11	10
Stressed	7	9	4	16
Confusion	5	11	12	8
Jealousy	5	11	6	14
Avoiding people/ withdrawal	5	11	3	19
Suspicion	4	14	7	11
Talking to self	3	15	-	-
Restlessness	3	15	7	11
Insomnia	3	15	-	-

Alcoholism/ drug abuse	3	15	-	-
Helplessness	3	15	3	19
Shame/ humiliation	3	15	6	14
Traumatised	3	15	4	16
Bad memories	2	22	-	-
Discouraged/ little joy	2	22	14	7
Feel worthless	2	22	4	16
Poor concentration	-	-	7	11
Lack energy	-	-	3	19
Guilt	-	-	3	19

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NB. Problems stated by a single person are not included

Both freelisting respondents and key informants were asked to give brief descriptions or explanations of the emotional problems they identified. A summary of these descriptions is given below, in most cases using the words recorded by interviewers.

Hopelessness: 'Hopelessness' was described as lacking any expectation that things will improve, and feeling unable to change the situation. It was described as being 'defeated', lacking motivation to do anything (e.g. work) and considering one's life as 'useless'. People who felt hopeless were said to think very negatively, to spend time regretting their decisions and actions, and blaming themselves and others for their situation: 'without hope, without encouragement, they are half-dead psychologically and emotionally.' Those who felt hopeless were said to neglect themselves, and even to attempt suicide.

A number of reasons were given for people feeling hopeless. Some said that when people fled their countries they expected to find a better life in Kakuma, but were disappointed. The conditions of life in Kakuma are very harsh, and the community support they had at

home is lacking: 'When we were in our country, and brothers and sisters, there we were helping each other, but now as we are here in our community, the same nationality but nobody who can help us; everybody is looking after his needs.' Many refugees are struggling economically, particularly those who are without relatives in the camp. Isolation and a lack of support were said to contribute to hopelessness. Another important reason for hopelessness was said to be the length of time many refugees have stayed in Kakuma, without any hope of either returning home or being resettled abroad. Specific events and situations were also said to contribute. Women and girls who are raped and infected with HIV were said to often experience hopelessness, as were those who were sexually exploited, and girls abandoned by their boyfriends after becoming pregnant. Those neglected by family members, and those who lose a loved one and are not supported, were also said to lose hope.

Fear: Fear was described as terror, worry, panic, feeling insecure or feeling afraid or threatened. The causes of fear mentioned include:

- After escaping from 'the difficulties of guns, even this refugee camp is surrounded by the people who are always holding guns, always we have fear that they will kill us with these guns. When we hear the shout of the guns we say the war starts'. People fear insecurity in the camp: 'A noise at night makes me panic; when I remember the fighting between Turkanas and refugees in 2003 I cannot sleep alone, or go out at night'; 'To go and collect firewood is frightening'. People also fear attack from fellow-refugees, especially since locally brewed alcohol is so easily available.

- People are affected by past fears: fear of the things they saw, things that happened to them, and things they did. For example, the sight of a police officer with a gun can trigger intense fear.

- Fears for the future also affect some. They fear that UNHCR will force them to return home, and how things would be if that happened. Some people fear that their relatives will find out where they are and force them to go home; these people spend their lives in Kakuma hiding and are unable to work or walk freely.

- Some women live in fear of their husbands.

Anger/ aggression: There are people who become angry easily because they are always feeling bad: 'any small thing makes someone boil like water on fire.' These people are hostile, verbally abusive and violent towards others. There is an underlying level of anger and annoyance, which is easily triggered. Insults are readily perceived, and people are quick to quarrel and retaliate. Anger was said to contribute to people fighting or attacking others, drinking too much, attempting suicide, or just staying alone and crying.

In some cases anger was said to be due to ongoing frustrations; in others it is due to perceived injustice or lack, or restricted movement and lack of opportunities in the camp; and in others there is a lot of bitterness about past events, especially amongst those who lost their families during the war in their country. The lifestyle in Kakuma, especially a lack of resources, was also said to contribute to anger (e.g. conflict at the water tap when people are perceived to push into the queue or take more water than they should).

Worry: People were said to worry about a whole range of things, including:

- Their current situation in Kakuma, especially how to provide for the family and what kind of future their children will have. Also about difficult relationships in the community, or being rejected, and problems with their relatives (e.g. relatives forcing them to get married).

- The situation outside Kakuma, such as the wellbeing of relatives they left at home, and the situation at home.

- Their own personal future, and the future of their countries (e.g. whether peace will be maintained in Sudan).

Thinking too much[2]: Thinking over and over again, day and night, about one or two issues, such as:

- The past: especially about people they have lost, and about bad events they experienced.

- The current situation: missing one's relatives and wondering where they are and what has happened to them; fearing for ones life in the camp; thinking about lack of money and how to provide for one's family. Endlessly comparing their past and current life situations - the free movement they used to have, the difference in their homes, property, lifestyle, relationships.

- The future: how to solve their problems, whether this life situation will change or not, about resettlement, about improvement. They think of things 'that are impossible too much and they can't achieve'.

Thinking about past events can become 'an addiction'. A person who is thinking too much was said to stay alone doing nothing, does not want to eat, sleep or talk to others. It affects their work, they become isolated and unable to concentrate, and can even become mad.

Sadness/ sorrow: People were said to feel sadness and sorrow when they remembered what they had lost, especially the people they loved who were killed, and the bad things that happened to them and the people they loved: 'We saw our sisters raped and can't forget it'. People were said to feel sad when they remembered the property they have lost, and the life they had at home compared with their life as refugees. Sometimes sadness was said to come without any clear trigger, 'we face so many difficulties every day, sometimes we feel

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[2] 'Thinking too much' has many similarities with 'worry'. However, it was described in a way that suggests it has more of an obsessive quality. 'Worry' appears to be something that is seen as normal in these circumstances, whereas 'thinking too much' was described as more of a psychological problem.

sad without reason.' Other times, it is triggered by bad news, such as the death of a friend or a relative. Thoughts of the future can also bring sadness; staying in Kakuma seems unbearable but 'going back to our country is another hell, we can't take it'. When plans to improve their lives fail, it makes people sad. Sadness was said to show itself in people keeping quiet, not talking with anyone.

Loneliness: This includes:

- People who are left alone (e.g. children whose parents have been killed; women whose husbands have died) and who miss the support of their loved ones. They lack not only social and emotional support, but the material assistance which would make their lives easier.

- People who are rejected by their communities, and so not only feel isolated but are unable to benefit from community assistance or services.

- People who choose to stay alone, either because it is too painful for them to associate with others, or they have no interest in associating. 'Whenever a person who lost their parent and sees another one who are with their parent really feels so destroyed because remembering, and they don't feel like sleeping or staying with people, just feel like staying alone and walking alone.'

Frustration: People are frustrated by:

- The poor situation they and their children live in, and their inability to improve their lives. 'Disappointment, helplessness and frustration at not being able to do something good for themselves or families'.

- Their inability to solve their problems (e.g. insecurity).

- Being exploited and treated badly. For example, 'orphan girls who have been exploited and impregnated by men, then are rejected by the community'.

- Failed attempts to get resettlement. 'People feel rejected when they get rejects from embassies and this frustrates them a lot.'

<u>Disappointment</u>: There is disappointment with the situation they find themselves in and the way their lives have changed: 'Born in a rich family and now a refugee taking food from UNHCR'. People are disappointed because they don't get the assistance they expected from UNHCR, other NGOs or community leaders.

There are also specific disappointments; for example, people hope for resettlement and become disappointed when they are unsuccessful; young men are disappointed because they are unable to get the dowry to enable them to marry.

<u>Stressed</u>: Stress was described as being nervous, forgetting easily and becoming confused; accumulated tension in the body and physical complaints. It was said to lead to people becoming defensive and anxious, taking too much alcohol, or abusing drugs

Factors said to lead to stress include failing to achieve one's goals or to see anything positive in the future; marital conflict; the hostile environment in Kakuma; lack of employment, income or resources; poor health facilities; insecurity.

<u>Confusion</u>: People's minds were said to be 'mixed up' due to things that happened to them, and lack of family and community structures that would previously have given them direction. Those who would have given advice and direction (e.g. family or community elders) are either not around, or have lost direction themselves. People's past experiences and current disappointments and difficulties make it hard for them to think clearly and make decisions.

<u>Jealousy</u>: Jealous of others who get something that they want (e.g. resettlement, work, scholarships), and a feeling that 'some people are given chance and another one is denied when all are in the same situation'. Jealousy leads to anger and conflict, and sleeplessness as the person thinks about the thing they want and cannot have.

Avoiding people: People fear coming into contact with others; they stay alone and 'hide themselves'. This involves not moving around the camp, not going to school, avoiding the line to collect water. This is sometimes because they suspect people of trying to harm them. In other cases they believe that if they stay alone they will avoid a problem and hide their secret.

Suspicion: People being mistrustful and suspicious of others. They believe that a person within their community could 'make something happen', or bring them harm, and feel that everybody hates them and want them to suffer. There is also a suspicion that the home government or a political group may send some people to kill them, and nobody would prevent this from happening.

Restlessness: Agitation, unable to relax. Starting many things at the same time, but unable to finish any of them. Unable to stay at home, constantly moving from one place to another.

Insomnia: People are unable to sleep because they fear being attacked at night, or because they are thinking too much about past, present or future difficulties.

Alcohol/ drugs: People drink or take drugs to forget their problems, but when addicted it leads to poor health, economic problems, domestic violence and problems in interpersonal relationships. It also leads to aggressive behaviour and despair, where people do not think of the future.

Helplessness: Feel unable to make progress or make decisions. 'People surrender their rights and suffer because nowhere to claim.' Some people in the community feel more helpless and dependent than others: 'As long as you are a woman, you have to follow what the husband says, whether it's wrong or not. From UNHCR food distribution, we cannot say that you want to eat these, but you get what they give you'.

Shame: Older people who are dependent on assistance from agencies and unable to work feel ashamed that they cannot provide for themselves. People feel shame at their lack of

education, at bad experiences they have had (e.g. rape), and at becoming infected by the

HIV virus. They may also be shamed and humiliated in the community by people

gossiping and spreading rumours about them.

Traumatised: A severe shock or unpleasant experience. People in Kakuma fled their

homeland due to political persecution, many witnessed the death of their loved ones, or

mass killing. Memories of these events can lead to physical complaints, or problematic

behaviours such as aggression, drug and alcohol abuse.

Bad memories: Frequent memories of unpleasant events. People may have been involved in

committing violent acts, and/ or experienced violence against themselves or their families.

Thoughts of these events continue to come to mind.

Discouraged: People become tired of trying; constant failure and the lack of control over their

situation makes them apathetic. 'People are discouraged to continue struggling for

survival'. Conflict and problems within communities also discourages people. For

example, people gossiping about each other, being hostile and jealous of those who have

some good fortune.

Feel worthless: Feeling 'useless' or without value. Examples given were people who are

without relatives in Kakuma, and girls who are forced into marriages against their will to

men able to pay a large dowry.

Key informants were also asked about the behaviours associated with emotional problems,

along with common causes. Their responses to these questions are summarised in Tables 2

and 3.

Table 2. Behaviours identified by key informants as being associated with emotional and

psychological problems in Kakuma

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N	Behaviour	Explanation/ description
29	Aggressive quarrelsome.	Unable to control angry feelings. Verbally abusive and Physically violent, including frequent fighting, throwing stones, violence towards partner and children.
12	Cry easily	
11	Passive and silent	Do not talk to others (e.g. greeting, participating in discussions). Lack energy and motivation, submissive, do not stand up for their rights, 'voiceless'.
9	Withdraw from others	Unwilling to be around other people, even briefly.
9	Withdraw from activities	Stay at home, do not participate in community activities or attend events, some children stop going to school.
9	Attempt/ commit suicide	
9	Disruptive behaviour	Do not want to listen to others, or to discuss anything, very quick to argue and take offence. Become a troublemaker in the community,
8	Drug & alcohol use	Addicted to drugs and/ or alcohol, they focus only on this and 'are known as the useless people in the community' because they neglect everything, including their own families.
8	Talking to selves	
6	Bizarre behaviour	Acts in a strange way, such as 'singing bad songs at night', running naked, shouting and rolling on the ground.
5	Short tempered	Quick to become annoyed, easily irritated by small things.
5	Restless	Poor concentration, agitation and inability to stick at something,

	trying to do many things at the same time. Always very nervous, walking long distances around the camp every day, and even at night. Keep moving from place to place, even leaving the camp to go to Nairobi, then to Sudan, then back to the camp.
4	Criminal activity	Such as robbery and theft.
4	Loss of appetite	
3	Poor self-care and hygiene	
3	Sleeping difficulties	Unable to sleep, sleeping all the time, or sleeping during the day.
3	Try to run away	Leaving their families to stay elsewhere in the camp.
2	Blame others for events	
2	Confused speech	Try to talk to people but 'are out of the topic'; answering questions with irrelevant answer.
2	Impulsive	Quick, impulsive decisions, do not think about the outcome of their actions.
2	Talk a lot	

NB. Behaviours stated by a single person are not included

Table 3. <u>Causes of emotional and psychological problems in Kakuma, as identified by key informants</u>.

N	Causes	Explanation/ Description

20	Loss of loved ones	Death of loved ones, either in home country or in camp
18	Poverty	
16	Chronic illness	
11	Lack of food	Ration finishes before next is due, leaving people hungry
11	War experience	
10	Insecurity in Kakuma	Attacks from the host community (armed robberies) and insecurity from home countries (e.g. people coming from Sudan to abduct women/ girls in the camp)
10	Lack of opportunities to improve economic situation	
9	Loss of property	
8	Unemployment/ idleness	Lack of any activity can lead to drinking.
8	Drug or alcohol use	
8	Hostile physical environment	Very hot dry weather in Kakuma, frequent dust storms.
7	Conflict	In family or community. E.g. marital problems, bad relationships with neighbours.
7	Loss of job	Being dismissed from a job, or losing work opportunity.
7	Separation from family	Thinking a great deal about relatives left at home.
6	Lack of assistance	UNHCR and implementing agencies not listening to their problems or providing the assistance they want. Community leaders not listening to them or advocating for them to receive assistance.
5	Discrimination	E.g. by the community due to HIV status, lack of education or poverty.

5	Mistreatment by agencies	Not receiving good services from agencies (e.g. being referred to local Kakuma hospital for treatment instead of being taken to Nairobi hospital)
5	Rejection for resettlement	People who had placed all their hope on being resettled abroad, but see no progress with their case, or receive a rejection letter.
5	Shelter/ water problems	Unable to repair house or obtain enough water.
4	Divorce/ separation	
4	Expectations not met	When they left their home countries they expected a better life in Kakuma, and have been disappointed. Unachieved goals, failure of plans, unsatisfied desires.
4	Unsupportive family	Rejection or neglect from family. Women whose husbands spend the family's money on alcohol.
4	Prolonged stay in Kakuma	Contributes to hopelessness and conflict in families.
3	Living alone	Loneliness, living without relatives in the camp.
3	Lack of free movement	
3	Physical abuse	From teachers or husband.
3	Poor school performance	Failure at school discourages young people who see education as the key to a good future.
3	Pressure of work	Overworking.
3	Thinking about the future	Uncertainty about their future and the future of their children, especially for those who have stayed in Kakuma for many years.

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DISCUSSION

In this study, a population affected by prolonged displacement and extremely challenging living conditions describe the emotional and psychological problems that affect them. The emotional problems said to have the greatest impact on refugees in Kakuma were hopelessness, fear, sadness/ sorrow, anger/ aggression, and worry/ thinking about problems. It is of interest that these problems relate mainly to stressors in the camp, rather than past experiences. The exception is sadness and sorrow, which was related to losses and experiences prior to displacement. 'Loss of loved ones' was the cause of emotional problems mentioned most frequently by key informants; experiences of loss seem to play a large role in the emotional problems of refugees in Kakuma.

However, factors relating to their current living situation were also said to contribute to emotional problems, particularly poverty and lack of opportunities to improve their economic situation; lack of food; insecurity; idleness; and Kakuma's harsh physical environment. This suggests that whilst Kakuma refugees may benefit from psychosocial interventions to help them cope with the losses they have experienced, it would be equally important to address their current concerns regarding safety, lack of resources, and lack of constructive activity. Key informants described the types of behaviours associated with emotional problems in Kakuma. The most commonly mentioned was aggression, indicating that emotional problems contribute to social problems in Kakuma, perhaps including conflict within families and communities, and between communities. Other behaviours which would have a negative impact on others (e.g. disruptive behaviours, drug and alcohol use, short-temperedness and criminal activity) were described. If these anti-social behaviours are related to emotional problems, then it would be worthwhile investing resources in addressing the underlying issues, since this would have a positive impact not only on individuals but also on the wider community.

A number of 'withdrawal' behaviours were also frequently described. This suggests that many of those affected by emotional problems will not be visible or readily accessed by those unfamiliar with their communities. The strategy used by community service agencies in Kakuma, which involves refugees being employed as social workers and counsellors within their own communities, may be an effective response to this difficulty.

The participants in this study are not representative of refugees in Kakuma, and we have small numbers relative to the camp population. This does not invalidate our findings, but we cannot say to what extent the issues identified by participants affect refugees in Kakuma. This study should be seen as a starting point; it identifies issues worth further exploration and clarification. The current findings could lead in a number of directions, in terms of future research. For example, if one were interested in the emotional impact of long stays in refugee camps the next step might be to do some kind of comparison with self-settled, resettled or internally displaced populations to identify similarities and differences, and perhaps begin to separate out the impact of prior traumatic experiences from the impact of post-displacement experiences (e.g. refugee camp factors). If one were more interested in using these findings to plan interventions in Kakuma, the next step might be to design an instrument to enable one to carry out a prevalence study, to find out which problems have the greatest impact in Kakuma, and which type of people tend to be most affected.

The findings of this study are specific to Kakuma and not generalisable to other settings. Rather than being seen as a weakness, this is a strength; in the Kakuma context, these findings are meaningful and can be used in practical and useful ways. For example:

- Advocacy – our findings suggest that the protracted displacement situation is having a negative impact on the psychosocial wellbeing of refugees in Kakuma. This information can be used to advocate for alternative solutions.

- Programme planning – although more work would need to be done to assess the prevalence of the problems identified, and the types of people who are most affected, this information provides a starting point for effective service provision.

- Evaluating the effectiveness of interventions - the information can be used to develop a locally-meaningful assessment instrument to measure the effectiveness of interventions designed to address the issues raised in this study. This is, in fact, what happened in Kakuma; the development of the assessment tool, and its evaluation, is described elsewhere (Horn, 2008).

This study shows the efficacy of the freelisting methodology in this context. Freelisting has a number of advantages as a way of gathering information about the issues affected a displaced community: it is quick; can be used by interviewers with little formal education and with minimal training; it is easy to analyse; it identifies issues of concern to a population; and it provides practical information that can be used in a variety of ways.

CONCLUSION

Freelisting is a useful and quick way to identify problems affecting a community. It can be used to obtain information for use in advocacy, programme planning, and in developing instruments to assess the prevalence of problems salient to that population, and the impact of interventions.

In Kakuma, a study using this technique found that both current stressors and previous losses impact on the emotional wellbeing of refugees. Whilst psychosocial interventions are important, programmes addressing refugees' practical needs (particularly safety and material needs) are likely to also have an important impact on their psychosocial wellbeing, as suggested by the model of psychosocial wellbeing described earlier (PWG, 2003). Our findings also suggest that some anti-social behaviours which contribute to problems within

and between communities in Kakuma are due in part to emotional problems; if so, then addressing these problems would be a worthwhile use of resources.

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