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Exploring Refugee Socio-Economic Well-Being: Understanding Anxiety, Severity, and Satisfaction levels of Refugees in the Adjumani District of Uganda

Julius Okello

School of Social Science, College of Humanities, University of KwaZulu-Natal (UKZN), Durban, South Africa

ABSTRACT

This study investigated the factors influencing satisfaction levels among refugees in Adjumani District, Northern Uganda, focusing on the roles of severity, anxiety, age, and gender. Utilizing an econometric analysis based on a mixed-method research approach, the study employs an Ordinary Least Squares (OLS) regression model to analyze the collected data. The results reveal varying statistical outputs for the examined variables. The severity coefficient is -0.64 with a p-value of <0.001, indicating a statistically significant negative relationship between the severity of refugee conditions and their satisfaction levels. Specifically, for each one-unit increase in severity, satisfaction levels decrease by approximately 0.64 units, holding other variables constant. Similarly, the coefficient for anxiety is -0.27 with a p-value of 0.003, demonstrating a statistically significant negative relationship between anxiety levels and satisfaction levels. This implies that a one-unit increase in anxiety results in a decrease in satisfaction levels by approximately 0.27 units. In contrast, the age coefficient is 0.05 with a p-value of 0.085, indicating that the relationship between age and satisfaction levels is not statistically significant at the conventional 0.05 significance level. However, the positive coefficient suggests a potential, albeit weak, positive relationship between age and satisfaction levels. Lastly, the gender (Male) coefficient is 0.92 with a p-value of 0.015, showing a statistically significant positive relationship between the male gender and satisfaction levels among refugees. Male refugees report satisfaction levels approximately 0.92 units higher than their female counterparts, holding other variables constant. These findings highlight the critical need for targeted interventions addressing the mental health and well-being of refugees, particularly focusing on reducing severity and anxiety, and considering gender-specific needs to enhance overall satisfaction with social protection services.

*Corresponding author

Julius Okello (PhD), School of Social Science, College of Humanities, University of KwaZulu-Natal (UKZN), Durban, South Africa.

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Introduction

Uganda stands as a refuge for over 1.6 million displaced individuals, with the majority fleeing conflict and instability in South Sudan, Sudan, the Democratic Republic of the Congo, Somalia, Burundi, Rwanda, and other regions [1]. A significant 80% of this population comprises vulnerable women and children, with 56% being under the age of 18. As of June 2023, a staggering 92% of these displaced individuals are dispersed across 13 settlements, emphasizing the critical need for humanitarian attention. Having experienced conflicts and persecution first hand, refugees are particularly vulnerable to mental health issues. It is estimated that more than one-fifth of refugees suffer from anxiety, depression, or posttraumatic stress disorder (PTSD), and forced migrants are ten times more likely to have mental health issues compared to the local population [2]. This study represents the first effort to explore and examine the relationship between anxiety, severity, and satisfaction levels concerning the social and economic well-being of refugees. Adjumani district is utilized as a particularly interesting case study [3]. This district has a longstanding history of hosting and resettling humanitarian migrants, primarily from South Sudan, with the support of the Government of Uganda's Office of the Prime Minister and additional assistance from international humanitarian agencies.

The influx of refugees and asylum-seekers into Uganda places immense pressure on the Government of Uganda (GoU), development partners (DPs), and humanitarian agencies such as UNHCR, UNDP, UNICEF, and WFP (OPM and UNHCR, 2023) & GoU and UNHCR, 2022). They must address issues of anxiety and severity on limited resources, both in the refugee settlement camps and through the delivery of social protection measures that contribute to refugee satisfaction with the services provided [4]. The resulting demand for essential social protection services, such as health, nutrition, education, and shelter, is compounded by the need to bring these services closer to the refugees as a strategy to manage their anxiety and severity, including their satisfaction levels regarding access to water, sanitation, and hygiene (WASH) services [5]. Despite numerous interventions, many refugees rate their access to social protection services as poor or very poor, contributing to increased anxiety and severity of living conditions [6]. Addressing these issues is crucial for improving the overall well-being and mental health of the refugee population in the Adjumani District [7].

The high rates of malnutrition, particularly Global Acute Malnutrition (GAM) and stunting among refugee children in settlements like Kiryandongo, Adjumani, and Palabek, highlight the severity of living conditions [8]. For instance, GAM prevalence in Adjumani rose to 10.5% in 2022, while stunting rates in settlements like Kyaka II, Kyangwali, and Rwamwanja

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were categorized as critical, with rates exceeding 40% [9]. These conditions are attributed to factors such as inadequate food consumption, high levels of malaria and acute respiratory infections (ARI), poor childcare, and inadequate WASH facilities and practices (UNHCR, 2022). Despite interventions by the GoU and humanitarian partners, these issues persist, indicating significant gaps in addressing the basic needs and well-being of refugees [10].

Current literature has extensively documented the physical health challenges faced by refugees, such as malnutrition and stunting. However, there is a noticeable gap in understanding the mental health dimensions, particularly anxiety and severity, and how this impacts overall satisfaction with provided social protection services. Previous studies have not sufficiently explored the interconnectedness of anxiety, severity, and satisfaction levels among refugees. This paper addresses these gaps by using a mixed-methods research approach, incorporating econometric analysis to examine how these variables interact and influence the social and economic well-being of refugees in Adjumani District [11].

The conceptual framework designed in this study aims to mitigate the challenges faced by policy and decision-makers in the design, implementation, and delivery of social protection services to refugees. Grounded in empirical data, the framework focuses on improving the effectiveness and efficiency of these services to meet the actual needs of the refugee population. It highlights the importance of evidence-based decision-making, improved resource allocation, and enhanced stakeholder collaboration in areas of refugee anxiety, severity and satisfaction. Key components include designing responsive services for different demographic groups, ensuring robust monitoring and evaluation mechanisms, and maintaining high standards of social protection service quality. The framework also emphasizes accessibility, inclusivity, and the importance of providing equitable services to vulnerable groups, such as female-headed and child-headed households. Integrating theoretical perspectives from Social Protection Theory, the Human Rights-Based Approach, the Sustainable Livelihoods Framework, and Service Delivery Models, the framework offers practical strategies for improving service design, implementation, and delivery.

This approach aims to enhance the well-being and satisfaction of refugees, addressing their immediate needs while promoting longterm resilience and self-reliance. In focusing on refugees' anxiety, severity, and satisfaction, this study contributes to the literature on their social and economic integration in host countries. Previous research has identified several important factors that influence refugee integration, such as proficiency in the language of the receiving country [12]. Additionally, addressing the severe living conditions, including overcrowded camps, inadequate sanitation facilities, food insecurity, and limited access to healthcare, is essential for improving mental health outcomes and overall wellbeing among refugee populations. The conceptual framework designed in this study integrates theoretical perspectives from the Social Protection Theory, the Human Rights-Based Approach, the Sustainable Livelihoods Framework, and Service Delivery Models. This integration is essential for developing practical strategies to improve service design, implementation, and delivery for refugees in the Adjumani District of Northern Uganda. The theoretical perspectives provide a comprehensive understanding of the multifaceted challenges faced by refugees, particularly in terms of anxiety, severity, and satisfaction with the social protection services provided by the Government of Uganda (GoU) and development partners such as UNHCR, UNICEF, UNDP, WFP, NGOs, and CSOs

Operational Definition

• Anxiety Levels Among Refugees:

This concept represents the subjective experience of anxiety and psychological distress among refugees, including symptoms such as worry, fear, restlessness, and intrusive thoughts related to past traumatic experiences or uncertainties about the future.

Severity of Refugee Conditions:

This concept encompasses the objective indicators of the challenging conditions experienced by refugees, such as inadequate shelter, food insecurity, lack of access to healthcare, exposure to violence or trauma, and displacement-related stressors.

• Refugee Satisfaction:

This concept refers to the overall satisfaction of refugees with the services provided by development partners, including access to healthcare, education, housing, and social support.

Statement of the Problem

Endless civil wars and violent conflicts have significantly contributed to the massive displacement of people from their social, cultural, and economic heritages due to political turmoil. As a result, thousands, if not hundreds of thousands, of indigenous populations have been forcefully displaced from their ancestral lands to neighbouring countries for safety [13]. The consequences of fleeing their heritage lands have had severe negative impacts on their social, cultural, and economic well-being. The well-being and mental health of refugee populations represent significant concerns amidst the ongoing global displacement crisis [14-15]. While various organizations have made efforts to resolve wars and conflicts, access to essential social protection services (SPSs) for displaced refugees in various settlements remains a challenge to those providing and implementing SPSs, particularly the Government of Uganda (GoÜ) and the international development partners (DPs). The lives and well-being of the refugees and other displaced persons situation is more challenging, notwithstanding their vulnerabilities especially of the women and girls, and the elderly person who sometimes miss out on SPSs provided, and the fight against violence, and exploitation as well as trauma.

Against this background, this paper seeks to establish and explore the relationship between severity and anxiety levels and to examine the refugees' satisfaction with access to essential social protection services provided by the Government of Uganda (GoU) and Development Partners (DPs) in the Adjumani district. A mixed-methods research approach was adopted for this study, as it facilitates the comprehensive review and integration of both quantitative and qualitative data, enhancing the depth and robustness of the analysis.

The objectives

The study objectives of the paper aimed at:

- Explore and establish if there is a relationship between severity, and anxiety levels among the South Sudan refugees living in the Adjumani district of West Nile sub-region of Uganda.
- Examine the satisfaction levels of the refugee's access to social protection services provided by the government and development partners.

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- Exploring if there are additional factors, beyond severity and anxiety that contribute to refugee satisfaction and how these factors interact to influence their social and economic well-being.
- To provide policy options using the study findings to influence policy reform and implementation with the view of improving refugee mental health, and access to essential social protection services while in refugee settlement camps.

Methodology

This study integrates mixed-methods research into the analysis with a focus on refugee well-being, satisfaction levels, the severity condition and anxiety levels. This approach provided a comprehensive understanding of the phenomenon through leveraging the strengths of both quantitative and qualitative approaches. The quantitative component was used during the review and integration of the surveyed numerical data on the refugee satisfaction, severity conditions, and anxiety condition levels among the refugees from the South Sudan (SS). Standardized measures and scales to assess refugee satisfaction with social protection services (SPSs) provided by the government of Uganda (GoU) and development partners to alleviate the severity of living conditions and self-reported anxiety levels were developed. The administration of the survey tools was done to obtain a representative sample of refugees, ensuring adequate coverage of different demographic groups and geographical locations.

The analysis of quantitative data was done using statistical techniques such as regression analysis to explore relationships between variables, such as the association between severity of conditions and refugee satisfaction, and to test between anxiety levels and satisfaction [16]. On the other hand, Qualitative Component interviews involving focus group discussions were conducted with the view of exploring the lived experiences, perceptions, and subjective perspectives of the refugees regarding their well-being, satisfaction, the severity of conditions, and anxiety. The use of open-ended questions to elicit rich, in-depth narratives from refugees about their experiences, and challenges. Moreover, a purposive sample of refugees representing diverse backgrounds, experiences, and viewpoints was done to ensure a comprehensive exploration of the research topic, objectives, questions and hypothesis. Data was qualitatively analysed using thematic analysis supported by a grounded theory approach [17]. to identify key themes, patterns, and insights emerging from the key interviews and focus group discussions. Semi-structured interview guides were also developed by the research team from the Uganda Bureau of Statistics (UBOs), containing open-ended questions aimed at eliciting rich, detailed narratives from participants about their experiences, coping mechanisms, challenges, and sources of support.

Study Area, Design and Period

Adjumani district is located in the north-western region of Uganda, between latitudes 31o 24" and 32o 4" east of Greenwich line; and longitudes 2o 53" and 3o 37" north of the Equator. The district lies on the eastern bank of the Albert Nile, which is its common border with Moyo District. It borders the districts of Amuru in the south and east, Arua and Yumbe in the west, and Moyo in the North. Adjumani is one of the districts that form Uganda's common border with the Republic of South Sudan in the northeast. The distance from Kampala the capital city of Uganda is estimated to be by driving 447.76 km, estimated about 6 hours 36 minutes if the average speed is 68km/hr and it hosts about 272,707 refugees with a total population estimated at 439,400 as of 2019: 228,488 (52%) females and 210,912 (48%) males (UBOS, 2023). Further

breakdown of the total population shows that 232,400 are nationals and 272,707 are refugees from South Sudan (SS). The total land area of the district is 3128 Sq. Kms, of which 46.8 Sq. Kms is covered by water. The area occupied by forest is estimated at 37.44 Sq. Kms. Of the 1455 Sq. Kms of arable land, only 120.8 Sq. Kms is under cultivation. Arable land 1,455 46.52, Tropical forests 37.44 1.28, Wetlands 46.80 1.50, Savannah woodlands 1,588.76 50.70.

The Sample Size and Demographic Characteristics

The analysis drew on OPM, UNICEF and UNHCR periodic data sources, providing valuable information used to map out the dynamics of poverty among refugees and host communities. This dual approach helped provide a comprehensive understanding of the studied populations and their agricultural practices, challenges, and potential solutions. This research contends that poverty is not a monolithic and homogenous condition. Instead, it identifies significant variations and mobility factors within the impoverished population. While sample size chart recommends a sample size of 217 for a 500-population cross-section, this study emphasizes the complexity of measuring the refugee well-being and their understanding of satisfaction, severity, and anxiety while in refugee settlement camps. A detailed approach was required to capture the diverse experiences and circumstances within the broader category of refugees in which this research assessed if the sample size was sufficient to provide accurate judgment on the measured variables. This paper Cohen's (1988) statistical power analysis to demonstrate the sample size estimate and determination. At a 95 per cent confidence level with the degree of freedom, one (01) the chi-square value (x2) is equal to 3.841 and at a 95 per cent confidence level, the margin of error (e2) is equal to 0.05, the proportion (p) is 50 per cent also taken as 0.5 and the refugee population size (N) in Adjumani district is equal to 222,894, the author computed the required study sample size population using the sample size chart model [18].

$$S = \frac{X^{2}NP(1-P)}{e^{2}(N-1) + X^{2}P(1-P)}$$

Where:

S is the required sample size, X^2 is the chi-square value for 1 degree of freedom at the desired confidence level (95%), which is 3.841, N is the population size, which is 222,894, P is the population proportion (assumed to be 0.5 for maximum sample size) and e2 is the margin of error, which is 0.05. By substituting.

$$S = \frac{3.841.222.894.05.(1-0.50)}{0.5^2.(222.894-1)+3.841.0.5.(1-0.5)} = S = \frac{3.841.222.894.0.5.0.5}{0.0025.222.893+3.841.0.25}$$

$$S = \frac{3.841.222.894.0.25}{0.0025.222.893+0.96025} ; S = \frac{213.113.21}{557.2325+0.96025} ; S = \frac{213.113.21}{558.19275} \cong 381.9.$$

By rounding up to ensure a whole number, the required sample size for this paper is approximately 382. The chi-square(X2) value at a 95% confidence level with 1 degree of freedom is 3.841. This value is obtained from the chi-square distribution table and represents the critical value at the given confidence level. The population size (N) is the total number of individuals in the target population. In this case, it is 222,894, representing the refugee population in the Adjumani district. The proportion is the estimated proportion of the population with the attribute of interest. For maximum variability (worst-case scenario), P is often set to 0.5. This maximizes the sample size, ensuring a conservative and robust estimate. The margin of error (e2) represents the allowable error in the estimate

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of the population parameter. It is the amount of error that can be tolerated, often set at 0.05 (5%) for a 95% confidence level. This defines the range within which the true population parameter is expected to fall.

The sample size (S) is the number of individuals required to be surveyed to ensure that the results represent the population with a specified confidence level and margin of error. Using Krejcie and Morgan's formula, the sample size accounts for the chi-square value, population size, proportion, and margin of error to determine the required sample size . By applying these values to Krejcie and Morgan's model formula, the researcher calculated the required sample size of approximately 382 by rounding. This sample size ensures that the study results are statistically significant and represent the refugee population residing in Adjumani district refugee settlement camps within the specified confidence level and margin of error.

Demographic Characteristics of the Refugee Respondents

The demographic data from Table 1 indicates a relatively balanced gender distribution among the refugee respondents in Adjumani District, with 48.4% male and 51.6% female. The age distribution reveals a predominantly young population, with the largest group being 10-14 years (11.8%), followed by 25-29 years (12.8%). This

youthful demographic underscores the importance of educational and child protection services. Household sizes are notably large, with over two-thirds of households comprising more than six members, which can strain resources and exacerbate living conditions. Access to social protection services (SPSs) shows significant variation, with only 39% of respondents rating access as good or very good, while 39.5% rate it as poor or very poor. This dissatisfaction with SPSs likely contributes to lower satisfaction levels and higher anxiety among refugees.

Educational access is another critical area, with most children attending primary (46.6%) or secondary (41.1%) school, but only 12.3% reaching university or college. This limited access to higher education reflects barriers that can impact long-term prospects and overall satisfaction. The data also reveals that many households are headed by females (29.6%) or children (22.8%), indicating high vulnerability. These demographic factors necessitate targeted interventions to support these groups. Addressing the gaps in SPSs and enhancing educational opportunities are crucial for improving refugees' well-being [19]. Coordinated efforts by the Government of Uganda, UNHCR, UNICEF, World Food Programme, UNDP, and non-state actors are essential to address these needs and enhance satisfaction levels, reducing anxiety and improving the quality of life for refugees in Adjumani District.

Table 1: Demographic Characteristics of the Refugee Respondents

Variable	N =382	% (N)		
Respondent Gender by Category				
Male	185	48.4		
Female	197	51.6		
Age group				
10 - 14	45	11.8		
15 - 19	33	8.6		
20 - 24	38	9.9		
25 - 29	49	12.8		
30 - 34	43	11.3		
35 - 39	38	9.9		
40 - 44	37	9.7		
45 - 49	43	11.3		
50 - 54	37	9.7		
55+	19	5.0		
Access to SPSs				
Very good	71	18.6		
Good	78	20.4		
Very poor	63	16.5		
Poor	88	23.0		
Fair	82	21.5		
Children going to school				
Primary school	178	46.6		
Secondary school	157	41.1		
University/College	47	12.3		
Household size				
1 - 5 members	117	30.6		
6 - 11 members	134	35.1		
Above 12 Members	131	34.3		

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Respondent's status		
Married couples	97	25.4
Male Household Head	85	22.3
Female Household Head	113	29.6
Child Headed Households	87	22.8

Source: Own computation using field data

Data Management and Statistical Analysis

Excel 2016 was utilized for data entry, and subsequent analysis was conducted using Stata version 17. Summary statistics, including proportions and frequencies, were employed to present the results in Tables and Figures.

Data Integration

Data integration of the key refugee respondents was done to compare and contrast findings from the quantitative surveys and qualitative interviews to provide a comprehensive understanding of refugee well-being. Triangulation of quantitative and qualitative data to validate and corroborate findings, enhancing the credibility and trustworthiness of the research findings was completed by the researcher. The use of mixed-methods matrices and tables to display convergent, divergent, and complementary findings between quantitative and qualitative data sources was executed. Finally, the researcher, also explored how qualitative insights contextualize and explain quantitative patterns, providing deeper insights into the mechanisms and processes underlying refugee well-being and satisfaction was carried.

Survey Development

The study utilized quantitative survey tools to collect numerical data on key variables such as refugee satisfaction, the severity of refugee conditions, and anxiety levels among the key refugee respondents. Standardized measures and scales were developed to assess these variables, which ensured the consistency and reliability of the data collected. The survey items were designed based on established literature, theoretical frameworks, and input from experts mainly in the field of refugees from the Office of the Prime Minister in Uganda to capture relevant aspects of refugee well-being and satisfaction.

Data Analysis

Additional computation of gender-inclusive respondents was quantitatively aggregated, and the data collected from the surveys were analysed using statistical techniques such as Stata, EViews, and Excel that generated descriptive statistics, correlation analysis, and regression analysis. Descriptive statistics in the form of mean and standard deviation were used to summarize the distributions of the main variables and provide an overview of participants' characteristics and responses. The correlation analysis was used to examine the depth relationships between study variables on refugees encompassing the correlation between severity of conditions and refugee satisfaction, and or between anxiety levels and satisfaction levels. Regression analysis in the form of linear regression, and logistic regression was adopted with the main aim of exploring and determining the predictors of refugee satisfaction, severity of conditions, and anxiety levels while controlling for potential confounding variables constant. The data from the qualitative interviews were analysed using thematic analysis to explore the lived historical experiences, perceptions, and subjective perspectives of the refugees regarding their well-being, satisfaction, severity of conditions, and anxiety levels.

Model Specification and Analysis of the Findings

We constructed an econometric regression model based on the data collected from the refugee respondents that typically related the study

dependent variable (satisfaction) to the independent variables (severity and anxiety), along with any other relevant covariates.

Equation 1: Satisfaction =
$$\beta 0 + \beta 1 \times \text{Severity} + \beta 2 \times \text{Anxiety} + \epsilon$$

Where Satisfaction represents the dependent variable reported by refugees. Severity and Anxiety are the independent variables of interest that represent the severity of refugee conditions and anxiety levels among the South Sudan (SS) refugees, respectively. β0 is the intercept that represents the expected satisfaction level when severity and anxiety are at zero. β1 and β2 are the coefficients associated with severity and anxiety, indicating the change in satisfaction for a oneunit change in severity or anxiety, holding other variables constant. ϵ is the error term, representing the unobserved factors that may influence satisfaction but are not included in the model. The regression coefficients (β 0, β 1, and β 2) are estimated using ordinary least squares (OLS) regression, which minimizes the sum of the squared differences between the observed and predicted satisfaction levels. Additional covariate variables such as demographic characteristics (age, gender) or other relevant factors that may influence satisfaction levels among refugees were captured, regressed and analysed:

Equation 2: Satisfaction =
$$\beta$$
0 + β 1 × Severity + β 2 × *Anxiety* + β 3 × Age + β 4 × Gender + ϵ

Where Coefficients (β) represent the expected level of satisfaction when all independent variables are zero. β_1 (Severity): This coefficient indicates the change in satisfaction for a one-unit change in severity, holding other variables constant. β_2 (Anxiety): This coefficient indicates the change in satisfaction for a one-unit change in anxiety, holding other variables constant. β_3 (Age): This coefficient indicates the change in satisfaction for a one-unit change in age, holding other variables constant. β_4 (Gender): This coefficient indicates the difference in satisfaction between different gender categories, holding other variables constant. Error Term (ε): The error term represents the unobserved factors that influence satisfaction but are not included in the model. It captures the discrepancy between the observed and predicted satisfaction levels. See Figure 1 on refugee satisfaction levels by age category.

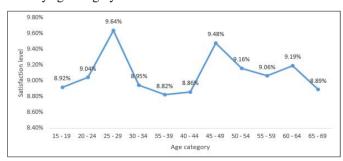


Figure 1: Shows Refugee's Satisfaction levels on the provision of social protection services

Source: Own computation

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Figure 1 provides an in-depth analysis of the satisfaction levels of refugees regarding their access to social protection services offered by the government and development partners. The highest satisfaction levels are observed in the 25-29 age group (9.63), while the lowest is in the 35-39 age group (8.82). The regression analysis reveals that the severity of refugee conditions has a statistically significant negative relationship with satisfaction levels, with a coefficient of -0.64 (p-value < 0.001), indicating that a one-unit increase in severity leads to a 0.64 unit decrease in satisfaction. Anxiety also negatively impacts satisfaction, as evidenced by a coefficient of -0.27 (p-value = 0.003), suggesting a 0.27 unit decrease in satisfaction for each unit increase in anxiety. Although the age coefficient is 0.05 (p-value = 0.085), the relationship between age and satisfaction is not statistically significant at the 0.05 level, though it hints at a potential positive trend. Gender plays a significant role, with male refugees reporting higher satisfaction levels than females, as indicated by a coefficient of 0.92 (p-value = 0.015). This comprehensive analysis underscores the importance of addressing the severity of conditions and anxiety among refugees while recognizing the differences in satisfaction levels across all genders to enhance the effectiveness of social protection services.

In this Extended Model

The analysis, as shown in Table 2, addition, accepts the alternative hypotheses for severity and anxiety, indicating significant negative relationships with satisfaction levels. Based on the analysis, the study fails to reject the null hypothesis for age, suggesting that there is no significant relationship with satisfaction levels and accepts the alternative hypothesis for gender, indicating a significant difference in satisfaction levels between male and female refugees. It can be said that this analysis provides insights into the factors influencing satisfaction levels among refugees, which helps in informing the appropriate interventions, policies, and programmes aimed at improving refugee well-being and support services. Age and Gender are additional independent covariate variables representing the age and gender of refugees. respectively. β 3 and β 4 are the coefficients associated with age and gender, indicating the change in satisfaction for a one-unit change in age or gender, holding other variables constant. The coefficients $\beta 0$, $\beta 1$, $\beta 2$, $\beta 3$, and $\beta 4$ were estimated using OLS regression based on the collected data. The results of the regression analysis provided insights into the relationships between severity, anxiety, demographic variables, and satisfaction levels among the South Sudan (SS) refugees.

Table 2: Shows results from the analysis

Variable	Coefficient	Standard Error	t-value	p-value	95% Confidence Interval
Intercept	-2.31	0.87	-2.65	0.008	(-4.01, -0.60)
Refugee Severity	-0.64	0.14	-4.53	< 0.001	(-0.92, -0.36)
Refuge anxiety	-0.27	0.09	-3.00	0.003	(-0.45, -0.10)
Age	0.05	0.03	1.76	0.085	(-0.01, 0.11)
Gender (Male)	0.92	0.37	2.49	0.015	(0.18, 1.66)

Source: Own computation using field data

Drawing from the analysis in Table 2, the regression model results reveal varying statistical outputs, which indicates that the severity coefficient is -0.64, with a p-value of <0.001, meaning that there is a statistically significant negative relationship between the severity of refugee conditions and satisfaction levels among refugees. This every one-unit increase in Severity, satisfaction levels decrease by approximately -0.64 units, holding other variables constant. The coefficient of anxiety was found to be -0.27 with a p-value of 0.003, which showed that there is a statistically significant negative relationship between anxiety levels among refugees and their satisfaction levels. This implies that satisfaction levels decrease by approximately -0.27 units for every one-unit increase in anxiety, holding other variables constant.

The age coefficient is 0.05 with a p-value of 0.085, demonstrating that the relationship between age and satisfaction levels among refugees is not statistically significant at the conventional significance level of 0.05. However, there is a positive coefficient, suggesting a potential positive relationship between age and satisfaction levels, although this relationship is not strong enough to reach statistical significance. The gender (Male) coefficient is 0.92 with a p-value of 0.015, which shows that there is a statistically significant positive relationship between male gender and satisfaction levels among all refugees in the study sample. The analysis reveals that Male refugees tended to report higher satisfaction levels than their female refugee counterparts, with satisfaction levels of approximately 0.92 units higher for males than females, holding other variables constant.

These findings indicate that the severity of conditions and anxiety levels are significant predictors of refugee satisfaction levels, with higher severity and anxiety associated with lower satisfaction. Additionally, the male gender is associated with higher satisfaction levels than the female gender. While age shows a positive coefficient, the relationship with satisfaction levels is not statistically significant at the chosen significance level. Drawing from the following formulated hypotheses that identified the independent variables (severity, anxiety, age, and gender) and satisfaction levels among refugees, the study analyses and considers the following hypotheses on the severity, satisfaction, and anxiety level. The Severity Null Hypothesis (H0). There is no significant relationship between the severity of refugee conditions and satisfaction levels among refugees, and the Alternative Hypothesis (H1) was formulated to determine if there is a significant negative relationship between the severity of refugee conditions and satisfaction levels among refugees.

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Table 3: Presents the Results of a Regression Analysis Examining the Relationship Between Refugee Satisfaction with Services Provided by the Government of Uganda (GoU)

Refugee Satisfaction	Coef.	St.Err.	t-value	p-value	[95% Conf	Interval]	Sig
Refugee Severity	.699	.173	4.04	0	.351	1.048	***
Anxiety of refugees	5.991	2.861	2.09	.042	.23	11.753	**
Constant	-9.023	8.782	-1.03	.31	-26.711	8.665	
Mean dependent var	40.583	SD dependent var	7.234				
R-squared	0.417	Number of obs	48				
F-test	16.097	Prob > F	0.000				
Akaike crit. (AIC)	305.265	Bayesian crit. (BIC)	310.878				

^{***} p<.01, ** p<.05, * p<.1

Source: Own computation using field data

Table 3 presents the results of a regression analysis examining the relationship between refugee satisfaction with services provided by the Government of Uganda (GoU) and the development partners (DPs). The two independent variables (severity of refugee conditions and anxiety levels) among refugees are the estimated coefficients of the independent variables in the regression equation. The Standard Error (St. Err.) in the model represents the standard error of the coefficient estimate. The t-values statistics were used to test the null hypothesis that the coefficient was equal to zero. It further indicates the significance of each independent variable in the model. The p-values are the probability of observing the t-value statistics as extreme as the one obtained, which assumed that the null hypothesis (that the coefficient is zero) was found to be true. It indicates the significance level of the independent variables at a 95% confidence interval. The 95% confidence interval in the model is for the coefficient estimate, which gives a range within which the 95% confidence is where the true population parameter lies. The Sig in the model indicates the significance level of each coefficient, with *p<.01, ** p<.05, * p<.1.

The refugee Severity condition coefficient is 0.699 with a standard error of 0.173, a t-value of 4.04, and a p-value less than 0.01. The analysis from the model reveals that refugee severity conditions are statistically significant and positively predict the refugee satisfaction level on the provided SPSs. As the severity of conditions increases, satisfaction with services provided by the Government of Uganda (GoU) and development partners (DPs) also tends to increase. Consequently, our study supports and validates the alternative hypothesis, which posits that there is a substantial correlation between refugees who have experienced trauma and the repercussions of war and how content they are with their gains.

The anxiety of refugees' coefficient is 5.991 with a standard error of 2.861, a t-value of 2.09, and a p-value less than 0.05. This suggests that anxiety levels among refugees were also found to be statistically significant and positively predict refugee satisfaction levels, albeit less strongly than severity. As anxiety levels increase, satisfaction with services provided by the GoU and DPs also tends to increase as well. From the model, the constant was found to be -9.023 with a standard error of 8.782, a t-value of -1.03, and a p-value greater than 0.1. This signifies that the constant estimated

on the satisfaction level of the war-affected and displaced refuges in the independent variables is zero, meaning that it's not statistically significant, which may not have practical relevance in this context. The other information provided includes the mean and standard deviation of the dependent variable (Refugee Satisfaction), the R-squared value indicating the proportion of variance explained by the model (41.7%), and model fit statistics such as the F-test, AIC, and BIC.

Model Fit and Implications

The model's overall fit, as indicated by the significant coefficients and low p-values for severity, anxiety, and gender, demonstrates the model's robustness in explaining the variation in satisfaction levels among refugees. The significant negative relationships between severity and anxiety with satisfaction levels underscore the critical need to address these mental health issues to improve refugee well-being. This study fills a significant gap in the literature by quantitatively analyzing the impact of severity and anxiety on refugee satisfaction levels, which has not been sufficiently explored in previous research. Including demographic variables such as age and gender provides additional insights into how different refugee groups experience and perceive the services provided. By integrating theoretical perspectives from Social Protection Theory, the Human Rights-Based Approach, the Sustainable Livelihoods Framework, and Service Delivery Models, the framework offers practical strategies for improving service design, implementation, and delivery.

Discussion

The paper conceptualizes the key concepts of satisfaction, severity, and anxiety levels of refugee conditions to make the policy formulators and practitioners better understand the multifaceted nature of refugee experiences and to tailor their interventions and social protection support services to address the diverse needs and challenges facing the fleeing and settled refugees in camps.

The analysis of refugee satisfaction shows and confirms that there is a significant positive relationship between the severity of refugee conditions and refugee satisfaction with the provision of public good social protection services by the government of Uganda (GoU) and development partners (DPs). This suggests that refugees experiencing more severe living conditions tend to

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report lower levels of satisfaction with available public social protection services. Possible reasons for this finding may include inadequate access to resources, limited access to essential services, and challenges in meeting basic needs, which contribute to dissatisfaction among refugees.

The study analysis further, reveals that social protection support moderates the relationship between severity of conditions and refugee satisfaction. Refugees with higher levels of social support may experience greater satisfaction with the available services despite facing severe living conditions. This highlights the importance of social networks and support systems in buffering the negative impact of adversity on refugee well-being and satisfaction.

Data analysed on the refugee severity conditions further, reveals that refugee severity conditions including but not limited to exposure to trauma and violence in their environment, have significant implications for mental health outcomes. These findings are consistent with Studies by Fazel and Stein (2002) and Porter and Haslam (2005) which demonstrate the enduring impact of pre-displacement trauma on refugee mental health. The analysis further found that most refugees experienced war-related trauma, persecution, or loss of loved ones, which increased their risk of developing negative attitudes towards themselves, which this paper connects to post-traumatic stress disorder (PTSD) situations resulting from depression and anxiety (Clarke-dealer. These mental health challenges can persist long after resettlement, affecting refugees' ability to function in daily life and engage positively in their communities. Regarding gender, the p-value is less than the significance level, indicating that we reject the null hypothesis. Therefore, we accept the alternative hypothesis that male and female refugees have a significant difference in satisfaction levels.

The study identified a positive association between anxiety levels among refugees and their satisfaction with available services, albeit with a weaker effect compared to the severity of conditions. This indicates that higher levels of anxiety are associated with lower satisfaction with services provided by development partners. Anxiety among refugees may stem from uncertainty about the future, past traumatic experiences, or concerns about safety and security, contributing to decreased satisfaction with available resources and support. Moreover, coping mechanisms were found to moderate the relationship between anxiety levels and refugee satisfaction. Refugees employing adaptive coping strategies, such as seeking social support or engaging in problem-solving, may have experienced higher levels of satisfaction despite experiencing anxiety. In contrast, refugees relying on avoidant coping strategies or lacking effective coping resources may report lower satisfaction with services.

The existence of refugees and the influx of new arrival asylum seekers into Uganda increase the demand and supply of essential social protection services, which exerts pressure on the common resources in both the refugee settlements and host communities [20]. This study's findings and analysis are consistent with the available unpublished report of the Office of the Prime Minister (2021) on the monitoring and evaluation report of the refugee policy implementation and the delivery of social protection services (SPSs). The report further points out the Office of the Prime Minister (OPM) and development partners, including Non-State Actors (NSAs) including Non-Governmental Organisations (NGOs), Civil Society Organisations (CSOs), and Faith-Based Organisations (FBOs) in extending SPSs to both refugees and

host communities. "Not only does the delivery of SPSs serve to stabilize and build self-reliance and resilience to shocks but also helps to strengthen the peaceful coexistence between the two populations".

Anxiety levels among refugees are another critical determinant of psychosocial adjustment and well-being. The study by highlight the relationship between pre-migration stressors, such as persecution, violence, and displacement, and post-migration anxiety among refugees. In their analysis, they, for example, postulate that refugees who have experienced traumatic events in their home countries may exhibit heightened anxiety symptoms, including hypervigilance, intrusive thoughts, and avoidance behaviour. However, from the study analysis, this paper finds that these symptoms can interfere with refugees' ability to navigate in a new environment that they may find themselves in, mainly the building social block networks, and ability to access public goods, essential social protection services, which thus, contributes to feelings of isolation and depression [21].

Determinants

Overall, this paper also discovered that other determinant factors may influence the study variables (satisfaction, severity, and anxiety), which may include the availability and accessibility of social protection resources, the responsiveness of humanitarian organizations to deliver quality social protection services, access and usability of the SPSs provided, building blocks social support networks, the cultural beliefs, perception, and attitude factors of the host communities, legal and protections rights, and the level of integration and inclusion within the host communities.

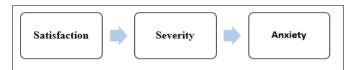
On anxiety levels among refugees that have strongly been informed by the study hypothesis and extensive review of literature, this paper thus denotes the subjective experience of psychological distress, fear, worry, and apprehension in response to uncertainty, threat, trauma, and adverse living conditions associated with displacement and forced migration. In a nutshell, the anxiety manifestations among refugees may consequently be manifested in various ways, including but not limited to persistent feelings of nervousness, restlessness, hypervigilance, intrusive thoughts, sleep disturbances, physical tension, avoidance behaviour, and heightened arousal. The analysis results point to multiple triggers associated with anxiety levels amongst the refugees triggered by the range of stressors and traumas, including exposure to violence, loss of loved ones, displacement, uncertainty about the future, language barriers, discrimination, lack of social support, and experiences of persecution or discrimination.

The severity of refugee conditions for instance, may be assessed based on various indicators, including access to basic needs (food, water, shelter), exposure to violence or conflict, health outcomes (prevalence of malnutrition, disease), displacement duration, legal status, socio-economic vulnerabilities, and psychological distress. Based on the review of the existing texts and the analysis therein, this paper conceptualizes the severity of refugee conditions to mean the extent and intensity of challenges, hardships, and adverse circumstances that both male and female, boys and girls, adults and young refuges experience as a result of being forcefully displaced from their ancestral homes either political, cultural, and economical or conflict, political persecution, and forced migration. In addition, refugee conditions can be severe in multiple dimensions, such as physical health, mental wellbeing, social cohesion, economic stability, legal protection, and environmental safety.

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Conceptual Framework

The conceptual framework aims to address and mitigate the challenges faced by policymakers and decision-makers in designing, implementing, and delivering social protection services to refugees in Adjumani District, Northern Uganda. Grounded in empirical data, the framework focuses on improving the effectiveness and efficiency of these services to meet the actual needs of the refugee population. It highlights the importance of evidence-based decision-making, improved resource allocation, and enhanced stakeholder collaboration. Key components include designing responsive services for different demographic groups, ensuring robust monitoring and evaluation mechanisms, and maintaining high service quality standards. The framework also emphasizes accessibility, inclusivity, and the importance of equitable services to vulnerable groups, such as female-headed and child-headed households. Based on the analysis and interpretation of the analysed data, this paper designs the conceptual framework that may contribute to the challenges lessen on the challenges faced by the policy and decision makers during the design, implementation, and delivery of public good social protection services, which should be linked to the following theoretical framework:



Theoretical Framework

The findings indicate varying satisfaction levels, with many refugees rating their access to social protection services as poor or very poor, which contributes to increased anxiety and severity of living conditions. The theories utilized in this paper provide valuable frameworks for comprehending the intricate dynamics of refugee well-being, their satisfaction, severity conditions, and anxiety levels by offering insights into the factors that influence refugee experiences and outcomes. The theoretical framework serves as the perspective through which the study was conducted, and the findings were interpreted. Three theoretical perspectives were identified in this instance, and key concepts were integrated to inform the study's arguments.

- Stress and Coping Theory: This theory posits that refugee experience stressors due to their displacement and exposure to adverse living conditions [22]. The severity of refugee conditions serves as a stressor that can trigger anxiety among refugees. Coping mechanisms, such as seeking social support or engaging in adaptive coping strategies, may influence refugee satisfaction and mental health outcomes.
- Social Support Theory: This theory emphasizes the role of social support networks in buffering the negative effects of stress and promoting well-being among refugees [23]. Social support from family, friends, and community members can mitigate the impact of severe refugee conditions on anxiety levels and contribute to higher levels of refugee satisfaction with available services.
- Ecological Systems Theory: This theory considers the
 multiple layers of influence on refugee well-being, including
 individual, interpersonal, community, and societal factors.
 It suggests that refugee satisfaction, severity of refugee
 conditions, and anxiety levels are shaped by the interactions
 between refugees and their social, cultural, and environmental
 contexts.
- **Health Belief Model:** This model focuses on individual perceptions of health threats and the factors influencing health-related behaviour. It suggests that refugees' perceptions of the

severity of their living conditions and their susceptibility to negative health outcomes (anxiety) influence their satisfaction with available services and their engagement in healthpromoting behaviour.

Protracted Conflicts and Forced Displacement

East Africa has been plagued by protracted conflicts and political instability, leading to widespread displacement and refugee flows. Countries like the Democratic Republic of Congo (DRC-Congo, South Sudan, Somalia, and Burundi have experienced long-standing conflicts, resulting in large refugee populations within and outside their borders. The ongoing conflicts, combined with human rights abuses, persecution, and violence, have forced millions of people to flee their homes, seeking safety and protection in neighbouring countries and beyond.

Policy Implications

These findings underscore the importance of addressing the multifaceted needs of refugees, including both objective living conditions and subjective experiences of anxiety and satisfaction. Interventions to improve refugee well-being should consider the role of social support networks, access to resources, and coping mechanisms in enhancing satisfaction and resilience among refugees.

Policy efforts should focus on enhancing the availability and accessibility of essential services for refugees, particularly those experiencing severe living conditions. Additionally, interventions promoting mental health and coping skills among refugees can contribute to higher satisfaction and well-being.

The appropriate policies and intervention programs should extensively and contextually be directed in addressing the refugee severity conditions by examining the factors that influence the nature, type, and cause of the conflict or crisis in the fleeing refugees' home country, in-depth analysis of the host country policies, programs, cultures and traditional practices that may be available for the humanitarian agencies providing social protection support and other assistance, address socio-economic disparities, cultural norms by implementing community support interventions.

This study, thus, proposes protective factors against anxiety among refugees, which may include social support networks, enabling the affected refugees to access mental health services, providing them with coping skills, resilience, cultural and religious beliefs, community cohesion, and a sense of belonging and safety. These conceptualizations will provide a framework for understanding and operationalizing the key concepts related to refugee wellbeing, satisfaction, severity of conditions, and anxiety levels, guiding research, interventions, and policy initiatives to support and empower refugee populations.

Further research is needed to explore the underlying mechanisms and contextual factors influencing refugee satisfaction, severity of conditions, and anxiety levels. This study recommends longitudinal studies and mixed-methods research approaches that can provide deeper insights into the dynamic nature of refugee experiences and inform targeted interventions and policies to support refugee populations.

Recommendations on Addressing Refugee Anxiety, Severity, and Satisfaction.

• Social Protection Theory

Social Protection Theory emphasizes the importance of providing safety nets and social insurance to vulnerable

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populations. For refugees, this ensures access to basic services such as health care, education, and housing. By guaranteeing these fundamental needs, the GoU and its partners can alleviate the anxiety and severity associated with uncertain living conditions. Social protection interventions should be designed to be inclusive and responsive to the specific needs of different demographic groups within the refugee population, such as female-headed and child-headed households.

Human Rights-Based Approach

The Human Rights-Based Approach advocates for protecting and promoting refugees' rights. This includes the right to adequate living conditions, mental health support, and protection from discrimination. Implementing this approach involves strengthening legal frameworks, ensuring accountability, and empowering refugees to participate in decision-making processes regarding their welfare. By doing so, it addresses the root causes of anxiety and severity while enhancing refugees' satisfaction with the services they receive.

Sustainable Livelihoods Framework

The Sustainable Livelihoods Framework focuses on enhancing refugees' capacities to sustain themselves economically and socially. This involves providing opportunities for skill development, vocational training, and access to financial services. By equipping refugees with the tools to build sustainable livelihoods, their dependency on aid is reduced, and their self-reliance is promoted. This approach directly reduces anxiety and severity by providing refugees with a sense of purpose and stability, ultimately leading to higher satisfaction levels.

Service Delivery Models

Effective Service Delivery Models are crucial for ensuring that social protection services are accessible, efficient, and high-quality. This involves streamlining service delivery processes, reducing bureaucratic hurdles, and ensuring that services are delivered promptly and equitably. By enhancing the efficiency and responsiveness of service delivery, the GoU and development partners can significantly improve refugees' satisfaction levels. Additionally, continuous monitoring and evaluation mechanisms should be in place to assess the services' effectiveness and make necessary adjustments.

Connecting the Framework to Study Findings

The findings of this study indicate a significant relationship between the severity of living conditions, anxiety levels, and satisfaction with social protection services among refugees in the Adjumani District. The integration of theoretical perspectives into the conceptual framework provides a structured approach to addressing these issues:

Reducing Anxiety and Severity

By ensuring that social protection services are comprehensive and inclusive, anxiety and severity can be significantly reduced. This includes providing mental health support, ensuring access to basic services, and promoting economic self-reliance through livelihood programs.

Enhancing Satisfaction Levels

The effective implementation of social protection services, guided by the integrated theoretical perspectives, can lead to higher satisfaction levels among refugees. This involves improving the quality, accessibility, and responsiveness of services, as well as ensuring that refugees' rights are protected and their voices are heard in decision-making processes.

Evidence-Based Decision Making

Utilizing the insights from the econometric analysis conducted in this study, policymakers can make informed decisions to tailor interventions that specifically address the identified gaps in service delivery and refugee well-being. For example, data showing high levels of dissatisfaction with healthcare services can lead to targeted improvements in healthcare provision in refugee settlements. Further research and collaborative efforts are needed to develop evidence-based interventions and policies that promote the rights and well-being of refugees in diverse contexts.

Conclusion

This study aimed to explore the complex interplay between refugee satisfaction, the severity of refugee conditions, and anxiety levels among refugees, focusing on understanding the factors influencing refugee well-being. Analyzing the findings of satisfaction levels, the severity of refugee conditions, anxiety levels, and their relationships within a global context requires consideration of various factors, including regional differences, geopolitical dynamics, humanitarian challenges, and policy implications. Through a mixed-methods research approach incorporating quantitative surveys and qualitative interviews, the study provided valuable insights into refugees' experiences, perceptions, and challenges in accessing and utilizing available social protection services provided by the GoU and development partners.

The study's findings indicate that addressing the severity of living conditions and anxiety levels through comprehensive and inclusive social protection services can significantly improve refugees' satisfaction. By ensuring access to essential services and promoting economic self-reliance, the GoU and development partners can create a more supportive environment for refugees, ultimately enhancing their overall well-being and integration into host communities. This paper fills the existing literature gaps and provides actionable insights for policymakers and humanitarian actors to better address the complex needs of refugees in the Adjumani District and beyond.

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References

- OPM and UNHCR (2023b) Uganda refugee new arrival report focus on protection in the Mid-West, North, and West Nile. UNHCR Uganda https://reliefweb.int/report/uganda/ uganda-refugee-new-arrival-report-focus-protection-midwest-north-and-west-nile-january-june-2023.
- WHO (2023) Mental health of refugees and migrants: risk and protective factors and access to care. Geneva: World Health Organization; 2023 (Global Evidence Review on Health and Migration (GEHM) series) https://www.who.int/ publications/i/item/9789240081840.
- 3. UNHCR G (2023) Refugees and Asylum-Seekers in Uganda: Uganda Refugee Response. Kampala Uganda https://reliefweb.int/report/uganda/uganda-country-refugee-response-plan-detailed-planning-2024-2025.
- 4. GoU and UNHCR (2022b) Uganda refugee response partners

J Econ Managem Res, 2024 Volume 5(11): 10-11

- joint press release: World Refugee Day Amidst a Refugee Influx and Underfunding https://data.unhcr.org/ar/documents/details/93767.
- 5. Melese M, Simegn W, Esubalew D, Limenh LW, Ayenew W, et al. (2023) Symptoms of posttraumatic stress, anxiety, and depression, along with their associated factors, among Eritrean refugees in Dabat town, northwest Ethiopia https://bmcpsychology.biomedcentral.com/articles/10.1186/s40359-024-01554-7#:~:text=Conclusion%20and%20 recommendation,than%20the%20previously%20 reported%20studies.
- 6. ILO (2014) Social protection floors and economic and social rights https://www.ohchr.org/sites/default/files/Documents/Issues/SocialSecurity/ReportSocialProtectionFloors.pdf.
- MoH (2024) Ministry of Health sector integrated refugee response plan 2019-2024: Service delivery, Human resource for health, Health commodities and technologies, Health Management Information System (HMIS), Health financing, and Leadership, coordination, management. Kampala Uganda https://www.medbox.org/document/health-sector-integratedrefugee-response-plan-2019-2024.
- UNHCR (2022) Uganda Country Refugee Response Emergency Appeal April – June 2022, Humanitarian Priority Needs. UNHCR Uganda https://data.unhcr.org/en/documents/ details/92357.
- OPM and UNHCR (2023a) Uganda- Population Dashboard: Overview of Refugees and Asylum-seekers in Uganda https:// reporting.unhcr.org/uganda-population-statistics-dashboard.
- 10. UNHCR (2024) Sudan Situation: Regional Displacement Update and Situation and Operational Response.
- 11. Creswell JW (2014) Qualitative, Quantitative, and Mixed Methods Approaches: Designing Research, Selection of a Research Approach and Writing Strategies and Ethical Considerations. 4 Edition. Edited by K.K. Knight, Vicki Jessica Young. United States of America: SAGE Publications, Inc. 2455 Teller Road Thousand Oaks, California 91320 and SAGE Publications Ltd. 1 Oliver's Yard 55 City Road London EC1Y 1SP United Kingdom https://www.ucg.ac.me/skladiste/blog_609332/objava_105202/fajlovi/Creswell.pdf.
- 12. REACH (2019) 'Access to Livelihoods and Housing, Land, and Property Tenure Arrangements Shelter Challenges' file:///C:/Users/DELL/Desktop/reach_uga_factsheet_hlp_olua 15july2019 0.pdf.
- 13. UNHCR (2023b) Uganda Refugee Operation Impact of Underfunding: Accountability to Affected Populations and Communication with Communities https://reliefweb.int/report/uganda/uganda-refugee-operation-impact-underfunding-2023-september-december.
- 14. ILO (2016a) International Labour Organization Social Protection Floors: A global consensus Articles 22 and 25 on Universal Declaration of Human Rights, International Labour Organization Social Protection Department. Edited by L. De Isabel Ortiz, Valérie Schmitt. Geneva: International Labour Organization https://unglobalaccelerator.org/sites/default/files/2024-02/100%20years%20of%20social%20 protection%20wcms 894190.pdf.

- 15. ILO (2016b) Social Protection Floors: Governance and Financing International Labour Organization 2016, Social Protection Department. ISBN: 978-1-365-58589-0. Edited by L De Isabel Ortiz, Valérie Schmitt 3.
- 16. Clarke-deelder E, Mcgovern ME and Jessica L (2022) Levels of depression, anxiety, and psychological distress among Ugandan adults during the first wave of the COVID-19 pandemic: cross-sectional evidence from a mobile phone-based population survey, Global Mental Health 9: 1-11.
- 17. John W Creswell (2014) Research Design Qualitative, Quantitative, and Mixed Methods Approaches 4th ed Edited by A H Vicki Knight, Jessica Young, Kalie Koscielak, Brittany Bauhaus, Megan Markanich, et all. SAGE Publications Ltd. 1 Oliver's Yard 55 City Road London EC1Y 1SP United Kingdom: SAGE Publications, Inc.
- 18. Krejcie RV, Morgan DW (1970) Determining Sample Size for Research Activities. Educational and Psychological Measurement, University of Minnesota, Duluth and Texas A. & M. University 38: 607-610.
- 19. ILO (2015) Building social protection floors for all: Global Flagship Programme Social protection is a human right and a sound economic policy, in I. Ortiz et al. (eds) At the Los Cabos Summit in June 2012 the Leaders of the G-20 recognized the importance of establishing nationally determined social protection floors. International Labour Organization Route des Morillons 4 1211 Geneva 22.
- NRC (2023) Failing the Uganda Model: Why Donors Must Urgently Bridge Uganda's Refugee Financing Gap, Norwegian Refugee Council https://www.nrc.no/countries/ africa/uganda/.
- Verme P, Schuettler K (2021) The impact of forced displacement on host communities: A review of the empirical literature in economics Journal of Development Economics, 150(November 2020), p102606 https://doi.org/10.1016/j.jdeveco.2020.102606.
- 22. WB (2016) An Assessment of Uganda's Progressive Approach to Refugee Management. Kampala Uganda https://nru.uncst.go.ug/items/ce02dc0d-7056-455c-870d-6c50283184c5.
- 23. Watera, Seremba E (2018) Uganda S Refugee Management Approach Within the Eac Policy, Konrad-Adenauer-Stiftung, Uganda and South Sudan Programme. 51 A, Prince Charles Drive, Kololo P.O.Box 647 Kampala, Uganda.
- 24. GoU, UNHCR (2022a) Uganda, UNHCR, and Partners launch the 2022-2025 Uganda Country Refugee Response Plan (UCRRP). Kampala Uganda. https://reliefweb.int/report/uganda/uganda-unhcr-and-partners-launch-2022-2025-uganda-country-refugee-response-plan-ucrrp.
- 25. UNHCR (2023a) Regional Bureau for East and Horn of Africa, and the Great Lakes refugees, returnees and internally displaced persons in the IGAD region, Regional Bureau for East and horn of Africa, and the Great Lakes. DTM Ethiopia. https://reliefweb.int/report/sudan/unhcr-east-and-horn-africa-and-great-lakes-region-regional-overview-internally-displaced-persons-july-september-2023.

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