

# Effects of Humanitarian Interventions on the Psychological and Mental Health Status of Refugees in Rwanda, a Case of Kiziba Refugee Camp

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**Abstract.** This research explored the effects of humanitarian interventions on the refugees' Psychological and mental health status in the Kiziba refugee camp. It has been guided by three specific objectives:To examine the basic humanitarian interventions offered to the refugees at the Kiziba refugee camp; To assess the effect of therapeutic intervention on the psychological and mental health status of refugees in Rwanda and to investigate the effect of medical interventions on the psychological and mental health status of refugees in Rwanda. The sample size was equal to 100 obtained using slovin's formula from the target population of 7853 refugees living in the Kiziba camp aged more than 18 years old. The researcher used both simple random and purpose sampling technique to select respondents. The study gathered data through the use of questionnaire and interview guide. The researcher used a descriptive and a correlational research designs to establish and manage data for specific research objectives. Descriptive statistics and inferential statistics were used for quantitative analysis, whereas content analysis through themes and sub themes were used for qualitative analysis. Statistical software such as SPSS was used for these analyses. The findings for the basic humanitarian intervention the overall mean showed a satisfaction rating across all statements is 4.53 out of 5, indicating a high level of satisfaction among residents regarding the basic humanitarian interventions at Kiziba camp. For the Food Assistance provided, the mean rating for food assistance is 4.48. While there is strong agreement (over 48% strongly agreeing), the absence of negative responses suggests that respondents feel positively about their dietary needs being met, which is critical for their well-being. For the Shelter:The highest mean rating at 4.60 indicates that respondents view the shelter as both safe and adequate. For the effects of therapeutic interventions, results showed the overall mean score of 4.55 suggests that refugees at Kiziba camp are highly satisfied with the therapeutic interventions available to them. The mean scores for individual statements are consistently above 4, indicating strong positive



perceptions of the services. For the Group Therapy services ;The sessions have the highest mean rating of 4.75, with 75.5% of respondents strongly agreeing that these sessions have helped manage their stress and anxiety. For the effects of medical interventions on psychological and mental health status, results confirmed overall satisfaction shows the mean score of 4.55 indicating that refugees at Kiziba camp generally report a high level of satisfaction with the medical interventions they receive, especially in relation to mental health services. All individual mean scores are also high (all above 4), suggesting that the interventions are seen as effective in addressing mental health needs. The study concluded that there are positive effects of humanitarian interventions on the psychological and mental health status of refugees. However, some concerns about dependency and the effectiveness of certain aid forms highlight the need for a balanced approach that includes education and self-reliance initiatives. The researcher recommended to policy makers to train staff across all sectors (education, shelter, livelihoods, etc.) to recognize and address mental health challenges, enabling early intervention and a more coordinated response to psychological distress.it is also recommended to address dependency concerns and promote self-reliance initiatives. This research suggested that further research should explore the long-term psychological resilience of refugees who have received psychosocial support over extended periods.

Index Terms- Mental health and psychosocial support, Qualitative, Refugees

# I. Introduction

Globally, the international community has been deeply concerned about the problem of providing humanitarian aid to refugees. Over 84 million individuals have been forcibly displaced globally, of which over 26 million are refugees (UNHCR, 2021). These people have had to leave their homes because of persecution, conflict, natural disasters, or other emergencies. It has been tough to provide these vulnerable communities with effective humanitarian assistance. To solve this issue, governments, (NGOs), and international organizations must work together (Sphere Association, 2018).

In the African region, the refugee crisis has been particularly acute, with several countries hosting large numbers of displaced individuals. Located in the Great Lakes region of Africa, Rwanda has welcomed many refugees, particularly those from nearby nations like Burundi and DRC (UNHCR, 2022). The Kiziba refugee camp, located in western Rwanda, is among the biggest camps for refugees in the country, housing over 17,000 refugees, primarily from the DRC (UNHCR, 2022). The civil war in Sierra Leone, characterized by brutal violence and the widespread use of child soldiers, resulted in significant mental health issues.

Given Rwanda's past experiences, particularly the 1994 genocide against the Tutsi, humanitarian aid frequently has great historical and cultural value from the



country's perspective. Humanitarian help is often seen through multiple prisms by Rwandans. The genocide had a long-lasting effect on Rwandans' views of foreign aid.

Due to the ineffectiveness of international action during the genocide, attitudes toward outside assistance are cautious but hopeful. In addition to appreciating the help, the Rwandan government and a large portion of the populace are concerned about making sure that aid is efficient and does not prolong reliance. (T. Longman ,2014).

Recent researches tried to understand the effects of humanitarian assistance on the well-being, livelihoods, and integration of refugees in the Kiziba camp. Investigating how humanitarian aid affects refugees in the Kiziba camp is the goal of this study (UNHCR, 2022; Refugee Studies Centre, 2018; Amnesty International, 2020). Specific topics of interest include food security, access to healthcare, education, and employment prospects. This study did not examine how receiving humanitarian relief affected people's mental health.

Nevertheless, a growing body of studies (Smith, A., & Johnson, B., 2019) on the influence of humanitarian aid on refugees' mental health status found that the psychological effects of aid and the general well-being of refugees are becoming more widely acknowledged. Research is still necessary, though, to determine how humanitarian aid affects refugees' mental health. To make sure that help is in line with national interests and development plans, the Rwandan government actively works with NGOs and foreign organizations. Through this relationship, activities are better coordinated and aid is more efficiently tailored to the needs of the nation. It is intended that humanitarian aid will honor and incorporate Rwandan cultural norms and values. Aid initiatives that take into account cultural differences and include local customs are typically more well-received and successful. T. Longman (2014). The Kiziba refugee camp in Rwanda has been the focus of various humanitarian assistance efforts, both from the Rwandan government and international organizations. The camp provides shelter, food, healthcare, and other essential services to refugees (UNHCR, 2022). However, the effectiveness of these interventions and their impact on well-being caused much ongoing research and assessment. Understanding the local context, the specific challenges faced by the refugees, and the effectiveness of the humanitarian assistance provided is crucial for improving the overall support and outcomes for the displaced population (Ager et al., 2015). Despite positive outcomes of humanitarian aid, Silove et al. (2017) note the temporary nature of many humanitarian interventions, which can lead to gaps in care and inconsistent mental health results, the influence of humanitarian assistance on mental health status of refugees is still unclear. The research suggested that future research should focus on testing how tailored humanitarian interventions affect the mental health status of refugees.

This research has been guide guided by three specific objectives:

- To examine the basic humanitarian interventions offered to the refugees at the Kiziba refugee camp
- To assess the effect of therapeutic intervention on the psychological and mental health status of refugees in Rwanda



 To investigate the effect of medical interventions on the psychological and mental health status of refugees in Rwanda

# II. Methods

The techniques that combine correlational and descriptive analysis have been used. This method enables a thorough analysis of the current psychological and mental health of refugees and the connection between the types of humanitarian help and the mental health standing of refugees. The descriptive method has been used to give a thorough summary of the refugees' mental health conditions at the Kiziba camp. Using this method, data about the traits and circumstances of the research population has been gathered without the use of any variables. The descriptive phase's goals was to: describe the demographics of the refugee population, including age, gender, duration of stay in the camp. To obtain qualitative insights into the experiences of participants' mental health and the perceived influence of humanitarian aid, data has been gathered via structured questionnaires and in-depth interviews. Sample selection: To guarantee representation from a variety of demographic groups inside the camp, a random sampling technique has been employed. The correlational approach will look at the connection between refugee mental health outcomes and humanitarian aid. Correlation calculation has been employed to determining whether the kind and volume of aid received and the refugees' mental health status are related, within this approach, different variables will be manipulated: Independent Variables: Humanitarian assistance (e.g., medical care, psychological support, food aid, educational programs) and Dependent Variable: Psychological and Mental health status.

Data analysis has been conducted using Statistical analysis to examine the linkages between different types of humanitarian assistance and mental health status. Correlation coefficients has been calculated to determine the strength and direction of associations. Multiple regression analysis was used to control for potential confounding variables, such as age, gender, cultural factors, availability of mental health services, socioeconomic factors, social support factors, coping mechanisms, and previous trauma exposure. Multiple regression analysis was also used to identify the most significant predictors of mental health status.

Data have been collected through structured questionnaires and in-depth interviews. In addition, to identify whether there is an association between the type and extent of assistance received and the mental health status of the refugees. Different variables have been manipulated: Independent Variables: Humanitarian assistance (e.g., medical care, psychological support, food aid, educational programs) and Dependent Variable: Mental health status (measured through the questionnaires and interviews). Both items from questionnaires and structured interviews have been uploaded digitally on the computer via the Kobo collect tool. Specific research objectives will guide the development of research tools. A Likert scale was used in the development of a questionnaire. The researcher will use a five-point Likert scale,



it will determine the degree of agreement. 1 = Strongly Disagree, 2 = disagree, 3 = not sure, 4 = Agree, 5 = Strongly Agree

To gather both quantitative and qualitative data, a structured and semi-structured questionnaire was used; before completing the questionnaire, respondents were briefed on the purpose of the study and how to provide answers. An interview guide has been developed using open questions to provide deep information to support the validity and reliability of the information given. Bryman (2016) contends that questionnaires must have items emanating from research objectives and utilize Likert scale responses. Respondents will tick responses that adequately describe their perceptions of the "effects of humanitarian aid on mental health status". The structured questionnaire was used due to its ability to facilitate the researcher to gather specific and relevant information.

### **Procedures of Data Collection**

The researcher obtained consent from the sample population by providing the ultimate goal of the study and informing them that the data provided are confidentially kept. The questionnaire and interviews have been administered. Policies and regulations of Mount Kenya University has been also put into consideration. The researcher administered the questionnaires to refugee participants, and an interview protocol was conducted with the selected participants.

For quantitative data, the questionnaires has been administered to participants electronic format. Trained research assistants were in place and have assisted in distributing research questionnaires. The (Kob toolbox) has been used for electronic data. Participants were asked to respond to a series of structured questions related to their mental health symptoms and experiences with humanitarian assistance programs.

The responses were recorded quantitatively for subsequent analysis. For qualitative data, Structured interviews were complementing the survey data by providing additional qualitative insights into participants' perceptions of the effectiveness and accessibility of humanitarian assistance programs. A set of structured interview questions has been administrated to gather specific information about the types of aid received, satisfaction levels, perceived benefits, and challenges faced in accessing assistance.

## III. Results

The analysis was based on the specific objectives of the study; To examine the basic humanitarian interventions offered to the refugees at the Kiziba refugee camp; To assess the effect of therapeutic intervention on the psychological and mental health status of refugees in Rwanda and to investigate the effect of medical interventions on the psychological and mental health status of refugees in Rwanda.



Analyze the basic humanitarian interventions offered to the refugees at the Kiziba refugee camp

The first objective of this study is to To examine the basic humanitarian interventions offered to the refugees at the Kiziba refugee camp. The results are given and interpreted as follow:

|  | Str    | ongly | Г  | isagr | N    | lot |        |          | S        | trongl |    |          |          |
|--|--------|-------|----|-------|------|-----|--------|----------|----------|--------|----|----------|----------|
|  | Disagı | ee    | ee |       | sure |     | Α      | gree     | у Ад     | ree    | To | otal     |          |
| Statement  | N      | %     | N  | %     | N    | %   | N      | %        | N        | %      | N  | Me<br>an | S<br>d   |
| The food assistance provided at Kiziba camp meets my dietary needs.                      | 0      | 0     | 0  | 0     | 0    | 0   | 4<br>6 | 46.<br>0 | . 5<br>4 |        |    | 4.4<br>8 | .5<br>02 |
| The shelter provided at Kiziba camp is safe and adequate.                                | 0      | 0     | 0  | 0     | 0    | 0   | 3      | 0 43.    | . 5<br>7 |        |    | 4.6<br>0 | .4<br>92 |
| The educational programs offered effectively provide valuable knowledge and skills.      | 0      | 0     | 0  | 0     | 0    | 0   | 6<br>7 | 67.<br>0 | . 3<br>6 |        |    | 4.3<br>8 | .4<br>88 |
| The livelihood<br>support programs have<br>helped me to become<br>more self-reliant      | 0      | 0     | 0  | 0     | 0    | 0   | 5<br>3 | 53.<br>0 |          |        | 00 | 4.5      | .5<br>02 |
| The psychosocial<br>services provided have<br>been beneficial to my<br>mental well-being | 0      | 0     | 0  | 0     | 0    | 0   | 3<br>9 | 39.<br>0 |          |        |    | 4.6<br>4 | .4<br>83 |
| Overall Mean   |        |       |    |       |      |     |        |          |          |        |    | 4.53     |          |

Continuum: Strongly Disagree=1, Disagree=2, Not sure =3, Agree=4, Strongly Agree=5

The results of the first objective of this study of examining the basic humanitarian interventions offered at Kiziba refugee camp in Karongi District. The analyzed reflects the perceptions of individuals at Kiziba camp regarding various basic humanitarian interventions, such as food assistance, shelter, education, livelihood support, and psychosocial services. The analysis is systematically focusing on the means, standard deviations, and the overall satisfaction levels expressed by the respondents. According to the general satisfaction, The overall mean satisfaction rating across all statements is 4.53 out of 5, indicating a high level of satisfaction among residents regarding the basic humanitarian interventions at Kiziba camp.

For the Food Assistance provided, the mean rating for food assistance is 4.48. While there is strong agreement (over 48% strongly agreeing), the absence of



negative responses suggests that respondents feel positively about their dietary needs being met, which is critical for their well-being. For the Shelter: The highest mean rating at 4.60 indicates that respondents view the shelter as both safe and adequate. The fact that 60.2% strongly agree suggests a strong confidence in the safety and adequacy of shelter provisions, which is vital for the camp environment. According to the Education: With a mean of 4.38, educational programs are viewed favorably, with 62% agreeing that these programs provide valuable knowledge and skills. This highlights the importance of education in enhancing the capacity and future prospects of the camp's residents. For Livelihood Support: The mean rating for livelihood support is 4.51, indicating that just over half of the respondents feel that these programs have effectively contributed to their self-reliance. This is an essential component of humanitarian interventions, as it promotes long-term sustainability.

# Effect of Therapeutic Intervention on the Psychological and Mental Health Status of Refugees in Rwanda

The second objective of this research assessed the effect of therapeutic intervention on the psychological and mental health status of refugees in Rwanda.

Table 2: effect of therapeutic intervention on the psychological and mental health status of refugees in Rwanda

| status of fefugees in Kwanua   |                 |        |   |   |      |          |   |          |        |      |    |          |          |
|--|-----------------|--------|---|---|------|----------|---|----------|--------|------|----|----------|----------|
|  | Strongl Disagre |        |   |   | Agre | U        |   |          |        |      |    |          |          |
|  | y Dı            | sagree | e |   | sur  | e        | e | 1        | y Ag   | gree | T  | otal     |          |
|  |                 |        |   |   |      |          |   |          |        |      |    | Me       | S        |
| Statement  | N               | %      | N | % |      | %        |   | %        | N      | %    | N  | an       | d        |
| I have access to individual counseling services at Kiziba camp.  | C               | 0      | 0 | 0 | 1    | 1<br>1.0 | 7 | 5<br>7.0 | 2      |      |    | 4.2      | .6<br>42 |
| Group therapy<br>sessions have helped<br>manage my stress and<br>anxiety.  | C               | 0      | 0 | 0 |      | 0        | 9 | 9.0<br>2 | 7<br>1 |      |    | 4.7<br>5 | .4<br>35 |
| Cognitive Behavioral Therapy (CBT) has significantly improved my mental health                                       | C               | 0      | 0 | 0 |      | 0        | 2 | 4 2      | 5<br>8 |      | 00 | 4.6<br>1 | .4<br>90 |
| Narrative Exposure<br>Therapy (NET) has<br>helped me process<br>traumatic experiences                                | C               | 0      | 0 | 0 |      | 0        | 7 | 4<br>7   | 5<br>3 |      |    | 4.5<br>6 | .4<br>98 |
| The integrated Mental Health and Psycho-social Support (MHPSS) program effectively addresses my psychological needs. | C               | 0      | 0 | 0 |      | 0        | 4 | 4<br>4.0 | 5<br>6 |      | 00 | 4.5<br>0 | .5<br>02 |
| Overall Mean   |                 |        |   |   |      |          |   |          |        |      |    | 4.55     |          |



Continuum: Strongly Disagree=1, Disagree=2, Not sure=3, Agree=4, Strongly Agree=5

The results of the second objective of this study of assessing the effect of therapeutic intervention on the psychological and mental health status of refugees in Rwanda. The analysis was done for the data collected for objective two on 100 participants and has specifically assessed the therapeutic interventions offered, specifically focusing on counseling, group therapy, and different therapeutic modalities (CBT, NET, and MHPSS).

The overall mean score of 4.55 suggests that refugees at Kiziba camp are highly satisfied with the therapeutic interventions available to them. The mean scores for individual statements are consistently above 4, indicating strong positive perceptions of the services.

For the Group Therapy services: The sessions have the highest mean rating of 4.75, with 75.5% of respondents strongly agreeing that these sessions have helped manage their stress and anxiety.

This strongly suggests that group therapy is viewed as an especially effective intervention for addressing common psychological challenges such as stress and anxiety, which are prevalent among refugees. When it cames to Cognitive Behavioral Therapy (CBT); CBT has a high mean of 4.61, with 61.1% strongly agreeing that it has significantly improved their mental health. CBT, as a structured, evidence-based treatment, seems to be well-received and effective in addressing mental health issues among the refugee population.

# The Effect of Medical Interventions on the Psychological and Mental Health Status of Refugees In Rwanda

The third objective investigated the effect of medical interventions on the psychological and mental health status of refugees in Rwanda. The results are as the following:

Table 3 Effect of medical intervention on Psychological and mental health status of

refugees Strongly Strongly Not Agre Disagree Disagree Total sure gree Mea Statement % N % N % N Sd Psychiatric 5 3 1 .64 0 0 30 services are 0 4.21 at Kiziba camp The medication provided has been effective in 0 0 0 0 81 4.75 00 managing my health mental symptoms



| Mental health<br>screenings are<br>regularly<br>conducted as part<br>of my medical care                                       | 0 | 0 | 0 | 0 | ( | 2 | 3<br>4 | 3<br>4 | 6<br>6 | 66 | 1<br>00 | 4.61 | .49<br>0 |
|---|---|---|---|---|---|---|--------|--------|--------|----|---------|------|----------|
| Integrating mental health services into primary care has improved my overall health   | 0 | 0 | 0 | 0 | ( | ] | 8      | 8      | 6<br>2 | 62 | 1 00    | 4.56 | .49<br>8 |
| There is an adequate collaboration between mental health services and other humanitarian aid organizations at the Kiziba camp | 0 | 0 | 0 | 0 | ( | ( | 4      | 4<br>4 | 5<br>6 | 56 | 1 00    | 4.50 | .50<br>2 |
| Overall Mean  |   |   |   |   |   |   |        |        |        |    |         | 4.55 |          |

Continuum:Strongly Disagree=1, Disagree=2, Not sure=3, Agree=4, Strongly Agree=5

The results of the third objective of this study of examining the effect of medical interventions on psychological and mental health status of refugees, particularly focusing on psychiatric services, medication for mental health, mental health screenings, the integration of mental health services into primary care, and collaboration between mental health services and other humanitarian services. The Overall Satisfaction shows the mean score of 4.55 indicating that refugees at Kiziba camp generally report a high level of satisfaction with the medical a interventions they receive, especially in relation to mental health services. All individual mean scores are also high (all above 4), suggesting that the interventions are seen as effective in addressing mental health needs. The Effectiveness of Medication: The highest mean score (4.75) is for the statement "The medication provided has been effective in managing my mental health symptoms." With 81% of respondents strongly agreeing, it is clear that the majority of refugees believe that medication is highly effective in managing their mental health. The low standard deviation (0.435) suggests a high level of agreement among participants, indicating that medication is seen as consistently effective. health services into primary care, suggesting that these areas are particularly valued by refugees.

# Relationship between Humanitarian Interventions and Psychological and Mental Health Status of Refugees

This section analyzed the relationship between the two main variables, the humanitarian interventions as a an independent variable and the Psychological and mental health status of refugees as a dependent variable. The results are as the following:



### Correlations

|  |                        | Corre                      | ations                      |                      |                           |
|--|------------------------|----------------------------|-----------------------------|----------------------|---------------------------|
|  |                        | Corr                       | elations                    |                      |                           |
|  |                        | Role of basic              | Influence<br>of             | Impact of<br>Medical | Psychologi cal and Mental |
|  |                        | humanitarian interventions | Therapeutic<br>Intervention | intervention         | health status of refugees |
| Role of                                | Pearson<br>Correlation | 1                          |                             |                      | Torugous                  |
| basic<br>humanitarian<br>interventions | Sig. (2-tailed)        |                            |                             |                      |                           |
| interventions                          | N                      | 100                        |                             |                      |                           |
| Influence                              | Pearson<br>Correlation | .908**                     | 1                           |                      |                           |
| of Therapeutic<br>Intervention         | Sig. (2-tailed)        | .000                       |                             |                      |                           |
|  | N                      | 100                        | 100                         |                      |                           |
| Impact of                              | Pearson<br>Correlation | .785**                     | .920**                      | 1                    |                           |
| Medical intervention                   | Sig. (2-tailed)        | .000                       | .000                        |                      |                           |
|  | N                      | 100                        | 100                         | 100                  |                           |
| Psychologi<br>cal and Mental           | Pearson<br>Correlation | .641**                     | .810**                      | .939**               | 1                         |
| health status of                       | Sig. (2-tailed)        | .000                       | .000                        | .000                 |                           |
| refugees                               | N                      | 100                        | 100                         | 100                  | 100                       |
| **. Correlation                        | on is significar       | nt at the 0.01 lev         | el (2-tailed).              |                      | ·                         |

Table 9 presents the relationship between the humanitarian interventions and Psychological and mental health status of refugees in Rwanda, this study taken a case of kiziba Refugee camp in karongi district. The analysis considered three aspecta as well:Role of basic humanitarian interventions ,the Influence of Therapeutic Intervention and the Impact of Medical intervention. The Statistical Package for Social Sciences (SPSS) software version 26.0 was used to calculate the pearson coefficients. The pearson coefficients of relationship are between -1 to 1 whereby -1 to 0 points negative relationship and 0 to 1 points positive relationship. From -1 to -0.5 shows high negative & from -0.5 to 0 shows low negative relationship, and from 0 to 0.5 indicates low positive & from 0.5 to 1 indicates high positive relationship. The data analysis showed that the relationship between (Role of basic humanitarian interventions ,the Influence of Therapeutic Intervention and the Impact of Medical intervention) and Psychological and Mental health status of refugees was .641\*\*, .810\*\* and .939\*\* respectively. It was confirmed that there was a statistically significant relationship between the humanitarian interventions and Psychological and mental health status of refugees in Kiziba refugee camp.

# **IV. Conclusion**

In conclusion, the research demonstrated that basic humanitarian interventions, at Kiziba Refugee Camp play a significant role in improving the



psychological and mental health status of refugees. The overall high satisfaction levels with essential services such as food, shelter, education, and livelihood support indicate that the organizations' efforts to address basic needs are largely successful. These services contribute not only to the physical well-being of the camp's residents but also to their emotional and psychological resilience, which is essential in a challenging and traumatic environment.

The evaluation of therapeutic interventions revealed a similarly positive response, with services such as group therapy, cognitive behavioral therapy (CBT), and narrative exposure therapy (NET) receiving high satisfaction scores. Group therapy, in particular, stood out for its effectiveness in alleviating stress and anxiety. While the MHPSS program and individual counseling services were also rated positively, the latter's slightly lower score points to areas where accessibility and service delivery could be improved.

Medical interventions, especially psychiatric services and medication, were also viewed favorably, with medication receiving the highest satisfaction rating. The integration of mental health care into primary health services proved effective, further highlighting the importance of comprehensive care. However, the study found that psychiatric services were less accessible and effective than other interventions, signaling a need for improvement in this area. The strong positive correlations between all three intervention types and mental health outcomes confirm the significant role these services play in improving the psychological well-being of refugees at Kiziba Camp. Overall, the analysis reveals a strong consensus on the positive impact of humanitarian assistance on mental health, with many residents emphasizing the necessity of comprehensive support. However, some concerns about dependency and the effectiveness of certain aid forms highlight the need for a balanced approach that includes education and self-reliance initiatives. This insight can guide future humanitarian efforts to enhance psychological support and foster autonomy among camp residents.

Based on the findings of this study, researcher suggested the following recommendations: To the service providers; Provide additional training for primary health care workers on recognizing and addressing psychiatric symptoms, which could help bridge the gap in psychiatric care. Expand and Diversify Therapeutic Interventions; Group therapy, Cognitive Behavioral Therapy (CBT), and Narrative Exposure Therapy (NET) were well-received and showed positive impacts on mental health outcomes. However, there may be an opportunity to diversify therapeutic interventions and tailor them to specific groups. Recommendations include:Offer more individualized therapies alongside group sessions, particularly for those with severe trauma histories or complex mental health needs.Increase awareness of therapy services to ensure all residents are aware of their availability and can access them when needed.

Strengthen Integration of Mental Health and Psychosocial Support (MHPSS) Services with Other Humanitarian Interventions. Ensure mental health services are fully integrated with basic humanitarian services, such as food, shelter, and education, so that they are perceived as a seamless part of the support system. To policy makers



or overall coordinators of the camp (MINEMA and UNHCR): Train staff across all sectors (education, shelter, livelihoods, etc.) to recognize and address mental health challenges, enabling early intervention and a more coordinated response to psychological distress. Address Dependency Concerns and Promote Self-Reliance. While many residents expressed satisfaction with the services provided, some concerns about dependency on aid were noted.

It is crucial to balance aid with initiatives that foster long-term resilience and autonomy: Enhance livelihood programs that provide refugees with skills, resources, and opportunities for income generation. This will reduce dependency on external aid and enhance psychological well-being by fostering a sense of purpose and achievement. Implement educational initiatives aimed at increasing knowledge and self-sufficiency, including language skills, vocational training, and financial literacy programs. Promote community-based projects that encourage refugees to take active roles in the rebuilding of their community, thus fostering a sense of agency and reducing reliance on external assistance.

Based on the findings, here are the suggested areas for further researches:

Long-term impact of psychosocial support on refugee resilience while short-term improvements in mental health outcomes are evident, further research should explore the long-term psychological resilience of refugees who have received psychosocial support over extended periods. Effectiveness of individual counseling vs. group therapy given the reported lower satisfaction with individual counseling, further research could compare the effectiveness of individual counseling with group therapy

Evaluation of livelihood programs on mental health the integration of livelihood support with mental health interventions could have a powerful impact on both psychological well-being and social stability. Sustainability of mental health programs in long-term refugee settings as many refugees are likely to stay in camps for extended periods, it's essential to investigate the sustainability of mental health programs.

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