PSYCHOLOGICAL WELLBEING OF FEMALE REFUGEES AT TONGOGARA REFUGEE CAMP

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A dissertation submitted to the faculty of social sciences in partial fulfillment of the requirements for the Master of Science in Community Psychology Degree

GWERU, ZIMBABWE
OCTOBER, 2019

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DEDICATION

To my family and the future of Community Psychology.
ABSTRACT

Female refugees have been presented by many scholars as vulnerable to psychosocial problems during their journey to exile and upon resettlement where they would have sought sanctuary. The researcher is intrigued to employ a different perspective by researching on positive aspects of female refugees optimal functioning and their coping strategies amidst risk and protective factors to their psychological wellbeing. Psychological wellbeing will take an eclectic and ecological perspective in researching about refugees as a minority group. More so, the construct to be measured and assessed will borrow concepts and aspects of different fields of psychology. The researcher used a case study of randomly stratified sample of sixty (60) female refugees and purposively sampled thirty (30) female refugees at Tongogara Refugee Camp in Zimbabwe. The transformative paradigm is used to quantify the nature of female refugees’ psychological wellbeing using Ryff’s 42-version psychological wellbeing scale whilst a semi-structured interview qualifies the risk factors, protective factors and coping mechanisms of female refugees in the camp. Collected data is presented using charts and graphs while descriptive statistical and thematic analysis are employed. The results from the participants reveal that female refugees at Tongogara Refugee Camp have poor psychological wellbeing. Protective factors to the psychological wellbeing of female refugees in the camp included, social capital, social support systems, vocational training, and entrepreneurship. The risk factors that women face in the camp were financial and environmental insecurities, patriarchy, sexual and gender based violence (SGBV), poverty, stigma and discrimination, lack of legal recommendation and documentation, re-traumatization and pessimism. The researcher recommends participatory approaches to interventions given to refugees, legal recognition, educate them using their vernacular language as the language of instruction, empower women through protection from competent law enforcement agencies and for researchers to carry out studies on male refugees and employees working with female refugees. Most importantly researcher recommends the camp administrator to work with professional boards of psychology such that psychological services given to female refugees and employees working directly with them will not be done by paraprofessionals but with competent psychologists.
ACKNOWLEDGEMENTS

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Majoni Annie Faith

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## ACRONYMS/ABBREVIATIONS

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<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>DRC</td>
<td>Democratic Republic of Congo</td>
</tr>
<tr>
<td>JRS</td>
<td>Jesuit Refugee Service Zimbabwe</td>
</tr>
<tr>
<td>PWB</td>
<td>Psychological Wellbeing</td>
</tr>
<tr>
<td>SGBV</td>
<td>Sexual and Gender Based Violence</td>
</tr>
<tr>
<td>TRC</td>
<td>Tongogara Refugee Camp</td>
</tr>
<tr>
<td>UNHRC</td>
<td>United Nations High Commissioner for Refugees</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
<tr>
<td>ZRCS</td>
<td>Zimbabwe Red Cross Society</td>
</tr>
</tbody>
</table>
CHAPTER 1: INTRODUCTION

1.1 INTRODUCTION
Chapter one gives a brief exposition of the background of the research is highlighted in this chapter. The chapter communicates the preliminaries of the research that is; its background, problem statement, its purpose, defining key terms, importance of carrying out the study, guiding questions, researcher assumptions, limitations and delimitations of the study.

1.2 BACKGROUND OF THE STUDY
Psychological wellbeing is an umbrella phrase which has become an ‘elusive concept’ that explains human aspects of positive functioning which buffer psychological distress (Moe, 2012). A two-dimensional understanding of psychological well-being explains the phrase as either eudaimonic or hedonic (Ryff, 1989; Ryff & Keyes, 1995). This perspective ascribe optimum positive functioning of a human being as living to one’s potential and ‘demonstrated by the feeling of happiness or life satisfaction’ (Glass 2014, p.20). Psychological wellbeing in this study is researched using the six dimensions by Ryff (1989) which consists of self-acceptance, personal growth, purpose or meaning in life, environmental mastery, autonomy and having positive relations with others. This means that psychological well-being encompasses individual aspects like resilience, self-esteem, happiness, social competence, self-esteem, and self-efficacy.

From antiquity, the human conundrum toils under the burden that we are not immune to challenges and often we find our lives blighted by calamitous events like war, conflict, persecution etcetera (Sylvester, 2011). This plague on humanity leads to untold physical and psychological suffering on women as ‘the effects of belligerent actions upon mental health are even more devastating than the sequels left behind by natural and man-made disasters’ (Melgosa 2014, p284). Exhibiting good psychological wellbeing in these circumstances is like pursuing a pearl of high value as women embark on arduous journeys to exile embedded with complete despair, contempt for the value of life, housing problems, and poverty among others. The researcher has observed that ameliorative interventions instigated so far have become a rigid shibboleth which has outlived its usefulness as
promoting positive aspects of human potential or the psychological wellbeing of female refugees transcends philanthropic courtesy to their physiological needs.

The issue of refugees is an astounding enigma world over because of the need to accommodate, advocate, mitigate and not segregate, facilitate their copying mechanisms among others. Statistics published by World Health Organization [WHO] (2018, p.5) which compared the mental health status of the refugee population (RP) with the general population (GP), had the following results:

**Prevalence of mental disorders**

<table>
<thead>
<tr>
<th>Dimension</th>
<th>RP Range</th>
<th>GP Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depression</td>
<td>5% - 44%</td>
<td>8% - 12%</td>
</tr>
<tr>
<td>Anxiety disorders</td>
<td>4% - 40%</td>
<td>5% - 44%</td>
</tr>
<tr>
<td>PTSD</td>
<td>9% - 36%</td>
<td>1% - 2%</td>
</tr>
</tbody>
</table>

This report by WHO (2018) explains that there is an ‘association between high prevalence of mental disorder with lack of social integration of refugees’ in host communities. It also acknowledges a variance in refugee psychological wellbeing or mental health statistics because refugee populations experience different traumatic experiences and adapt to different host communities with diverse atmospheres. More so, the Australian Psychological Society (2010) has proposed a mandate for psychologists to advocate for female refugees justice, engage both the host community and the refugees in law and policy making procedures, and do public awareness campaigns. These proposed actions and strategies were to unleash refugee capacity or integrate their potential to be productive in the Australian community life. These would curtail unconscious enacted social attitudes like exploitation, stigma and discrimination of female refugees by the host community. Close to home, the African Union Summit held in Ethiopia 2019 has made African state leaders to discuss durable solutions to the plight of refugees since their common commonality is that Sub-Saharan Africa hosts 26% of the world’s 25.4 million refugees (Mohamed, 2019). With this in mind, risk and protective factors can be the forecasters of individual, communal and relational psychological wellbeing of female refugees. Thus, with the aid of different scholarly
views, this research will envisage how different variables can be risk or protective factors drawing close attention to their influence to female refugee’s psychological wellbeing.

Eighteen countries across the globe, according to The Human Rights Watch (2019) either infringe upon or respect refugee and asylum seekers human rights. Rohingya refugees in Bangladesh, refugees in Quatar and Central African Republic live in overcrowded camps where there is restriction of movement and difficulties in accessing humanitarian and public services (work, education and healthcare). Unlawful deportation or repatriation, denied refugees status, detention, violence and abuse of refugees despite being recognised by UNHRC (United Nations High Commissioner for Refugees) and UN (United Nations) as refugees has happened in Cameroon (Nigerian refugees), Tanzania (Burundian refugees), China (North-Korean refugees), Israel (Eritrean refugees), Turkey, Egypt (Sudanese refugees), Japan (Asian refugees), Papua New Guinea (refugees attacks by Lorengau community members), Jordan and Lebanon (Syrian refugees). Sadly, in Thailand, refugees are treated as illegal immigrants and they are arrested despite recognition by UN and for that same reason, it is sad that in 2018, Venezuelan refugees in Ecuador faced xenophobia attacks from locals of the host community. Contrary to all the above, Peru’s treatment of Venezuelan refugees and Morocco or Western Sahara’s treatment of sub-Saharan African refugees is commendable because they offer refugees a legal one-year permit which allows them enjoy public services like work, access healthcare and educational services. Henceforth, it is against this background that the researcher was intrigued to research on how female refugees cope with these life situations and what are the risk and protective factors to their psychological wellbeing.

The conceptualizations of home and mental well-being among Sudanese refugees in Canada have proved to play a significant role in ‘promoting resilience and positive mental health for resettled refugees (Simich, Este, & Hamilton 2010, p200). The researcher seconds their position as most refugees share a common denominator of loss, and this could be material of emotion. Simich, Este, & Hamilton (ibid: 203) adroitly puts it that, ‘immigrant family transformations frequently involve loss, which affects the capacity for resilience.’ In addition, Kopec, (2006) claims that a home provides fundamental human comfort needs such as nostalgia, intimacy, domesticity, commodity, delight, ease, light, air, efficiency, style, substance, austerity, comfort and well-being. Thus, the
reciprocal interactive relationship of home conceptualization and mental well-being is not bolstered by compensation of a built-in environment but home is where these refugees get psychosocial support which enhances protective aspects to mental wellbeing.

The Syrian war has made 2.7 million Syrians to seek a safe haven in Turkey and 55% of these refugees are women, 25% of the children received educational opportunities (escalating child marriages) and only 10% of this population has received humanitarian services if they reside in Turkish government-run camps (Eisinberg, 2017). The sequels of risk factors like sexual violence in the form of GBV (gender-based violence) and IPV (intimate partner violence), infringed rights and living in limbo or as ‘guests’ without a status has made half of the 55% population of female refugees to be in need of psychological help and most of these women reported PTSD, depression, anxiety amongst other factors affecting their psychological wellbeing. Eisinberg (2017) adds on to state that though the Turkish government issued a work permit for legal integration of refugees in the workforce, it paid little attention to refugee women living with disabilities, people who identify themselves with a diverse sexual orientation (LGBTIQ) and not gender sensitive to the plight of refugee women. This suggests that overcoming these gender-based disparities is a major political arena with a dire need of transformative interventions which necessitates collective voice, time and excellent strategies.

Statistics on the prevalence of the influx of refugees in different countries are having a variation across the globe. However, there is a notable increase of refugees seeking sanctuary in Zimbabwe as illustrated by the diagram below.
Prevalence of refugees at Tongogara Refugee Camp (TRC) (March to August 2018)

Fig 1.1: Prevalence of refugees at Tongogara Refugee Camp
Source: UNHRC Zimbabwe Factsheet (March 2018 and August 2018).

The line graph above shows the increase of refugees at Tongogara Refugee Camp (TRC). This 4% increase in a space of four months is a cause for concern to how this population copes with leaving their countries seeking safe haven in other counties. In addition, Zinyange and Wachiaya (2019) state that over 2000 Tongogara refugee houses were completely or partially damaged by Cyclone Idai recently, leaving them with profoundly upsetting feelings of terror, shame, helplessness and powerlessness. In the report, Deborah Kibangu, a 44 year old Congolese female refugee in the camp reports that her living conditions before the cyclone were hard but were worsened by the destruction caused by the cyclone. Her statement was pregnant with pessimism, negative thinking, sadness, low self-esteem and a whole lot of negative emotions. Mashaya (2018) figuratively states that the of the living conditions at Tongogara Refugee Camp as "typifying hell" and this issue has raised concern to the government of Zimbabwe (Magugunyeki, 2019). This has left the researcher to question the levels of female refugee psychological wellbeing in the camp where support and opportunities for growth are probably limited.
Solutions applied to evils faced by ostracised minority groups in communities has been reductionist, too idiosyncratic, too punitive, too narrow-minded, and slackening of an ecological and systemic approach (Orford, 1992). Most ameliorative interventions paid attention to the basic physiological needs of refugees where they are provided mostly with lower level deficit needs while neglecting or providing few growth needs that have an impact on the psychological wellbeing of an individual. It is against this background that the researcher is thrilled to have an ecological analysis of risk and protective factors to the psychological wellbeing of refugees which takes a comprehensive conceptualization to the individual and collective needs female refugees aspire to be addressed for them to be resilient, happy and socially competent, have positive thinking, self-esteem, and self-efficacy.

1.3 STATEMENT OF THE PROBLEM
UNHCR (2016) states that refugee and asylum seeking has reached alarming statistics with 65 million people displaced from their countries of origin because of violence, conflict and in fear of persecution in 2016. This diverse group should be celebrated and enjoy their right to procedural and distributive justice. On the contrary, they have long been an ostracized group facing multifaceted problems like acculturation, coping with trauma, carrying with them physical, emotional and mental scars. However there are very few previous research publications in Zimbabwe which have focused on the female refugees’ psychological wellbeing in part or as a whole. Thus, by researching on their psychological well-being, it would give a clear picture of refugee reciprocal interaction with the environment, how they find meaning and a reason to go on with life, and how some psychosocial factor can either be risk or protective factors to their psychological wellbeing.

1.4 SIGNIFICANCE OF THE STUDY
This thesis is important as takes a systemic approach to both the risk factors and protective factors to one’s psychological wellbeing and it explains most of the aspects that contributes to one’s psychological wellbeing. The strength of this socially sensitive research is that it explores areas that are commonly not spoken about (Magwa and Magwa, 2017, p.237). This research is of paramount importance to different stakeholders as it attempts to address the following questions:
What are the implications of doing this research?
The consequences of doing this research might conscientise the readers, policy makers and other interested parties about what constitutes the psychological wellbeing of refugees and highlights the risks and protective factors. Gaining knowledge about what constitutes one’s psychological wellbeing might enhance community mental health through fostering aspects like positive thinking, happiness, resilience, self-efficacy and a sense of worthiness propagated by psychological sense of belonging in that refugee community.

How does it link with other bodies of knowledge?
The potential insights of studying positive aspects of functioning of humans in face of adversity will help students communicating and disseminating behavioural science knowledge. The study cuts across disciplines like Social work (influence of humanitarian aid to positive functioning), Sociology (positive functioning = decreased crime and deviance), Technical graphics (influence of home environmental design on human behaviour) and Medicine (positive psychological wellbeing = good immune functioning). Community risk and protective factors are both prerequisites for and indicators of the psychological wellbeing of female refugees at an individual, relational and collective level.

How will this research influence policy?
This research might influence policy making and implementation because what continues to hamper the government’s and organizational ameliorative and transformative interventions to the psychological wellbeing of refugees, their persistence with a framework that has long outlived its usefulness but not its popularity that refugees are in dire need of physiological needs neglects their psychosocial needs. The contribution of this research is to envisage current knowledge around the psychological wellbeing of refugees and the impact on their psychological wellbeing.

Which stakeholders will benefit and how?

i. Non-governmental organizations – they can have a deeper understanding how help transcends the physical outlook and need which will enable them to leverage their capacity in ameliorating and transforming the lives of refugees.
ii. The Government (Ministry of Labour and Social Welfare) – to make policies that pays attention to the psychological wellbeing of ostracised diverse groups.

iii. Professional Boards of Psychology – if this thesis is published and recognized, it will put community psychology as a branch of psychology on the map and increase awareness of the influence of psychology on minority segregated groups.

1.5 RESEARCH OBJECTIVES
The researcher aims to explore and explain aspects to psychological wellbeing of female refugees. The following objectives will contribute in achieving the aim.

- To explain the nature of psychological wellbeing amongst female refugees at Tongogara Refugee Camp.

- To establish the risk factors to the psychological wellbeing of female refugees at Tongogara Refugee Camp.

- To establish and protective factors to the psychological wellbeing of female refugees at Tongogara Refugee Camp.

- To explain copying mechanisms used by the female refugees at Tongogara Refugee Camp.

1.6 RESEARCH QUESTIONS
The following research questions will guide this research:

- What is the nature of psychological wellbeing amongst female refugees at Tongogara Refugee Camp?

- What are the risks factors to the psychological wellbeing of female refugees at Tongogara Refugee Camp?

- What are the protective factors to the psychological wellbeing of female refugees Tongogara Refugee Camp?

- What are the copying mechanisms used by female refugees at Tongogara Refugee Camp?
1.7 PURPOSE OF THE STUDY

This research is purported to ascertain the nature of psychological wellbeing amongst female refugees, examine the psychosocial risk and protective factors to their psychological wellbeing, and assess their coping mechanisms.

1.8 ASSUMPTIONS

➢ The ecological and developmental factors of the female refugees affect their psychological wellbeing.

➢ Female refugees face an inordinate burden by virtue of being survivors of traumatic experiences and this research provides a collaborative participatory approach which will enable them to tell their stories.

➢ Refugees are survivors of traumatic experiences but interventions put in place are mostly physiological which leaves an extreme burden on the psychological wellbeing of female survivors who reside in the refugee camp.

➢ TRC is a multicultural community which has diverse cultures and traditions which affect female refugee’s social competencies; bridging and bonding social capital; and social support networks which results in adverse effect on their positive functioning.

1.9 DELIMITATIONS OF THE STUDY

Demographic

The research is delimited to female refugees at Tongogara Refugee Camp. It is located 420 kilometres in the arid regions southeast of Harare the capital city of Zimbabwe and approximately 80 kilometres West of Chipinge town.

Conceptual

The research focuses on primarily community mental health of refugees.

1.10 LIMITATIONS OF THE STUDY

➢ There might be language barriers hence the researcher will make use of an interpreter. The research instruments may be translated to their native language so that their reports will not lose meaning and the psychological wellbeing rating scales would be effective and accurate.
Differences in how people of different ethnicities construct meaning and psychological wellbeing might make data collection vulnerable to response biases like social desirability. Respondents might attempt to exaggerate their psychological problems when using psychological wellbeing scale and can have clear consequences for the accuracy, reliability, judgements and decisions that are based on the compromised measures. Thus, the researcher will use questionnaires, psychological wellbeing scale and unstructured short interviews for each tool to complement the flaws of the other to curb response biases.

1.11 DEFINITION OF TERMS

Female – in this study, it refers to any woman above the age of 18 through 60. This age group consists of women facing a transition from childhood to adulthood, taking care of siblings or nurturing the family, widowed and elderly women.

Psychological wellbeing – a phrase which suggests the aspects of positive functioning which enables an individual to bounce back from or grow during adversity; be at liberty to think positively towards self-actualization; find meaning and happiness in life; appreciating their worthiness of living in an optimistic fashion; and to good social relations at an interpersonal and collective level.

Refugee – a person who leaves his or her country of origin seeking help or safety in another country (a sanctuary) because of perceived or actual threat to his or her life and wellbeing because of public chaos, fear of persecution because of one’s nationality, race, religion, being a member of a social or political group and instability caused by natural or man-made disasters.

Refugee camp – it is a home or community which hosts refugees and asylum seekers seeking a sanctuary.

1.12 CHAPTER SUMMARY

The chapter introduced the research by explaining the background of the research. The chapter has communicated the preliminaries of the research that is; its background, problem statement, its purpose, defining key terms, importance of carrying out the study, guiding questions, researcher assumptions, limitations and delimitations of the study.
CHAPTER TWO: LITERATURE REVIEW

2.1 INTRODUCTION
The chapter provides a plethora of information with extensive reference to related research and theory in line with the research. Ridley (2012, p.24) explains that the literature review chapter encompasses ‘the historical background of this research, an overview of contemporary issues in which this research is situated, theories and concepts that underpin the research, clarify how terms are being used in the context of this research and addresses the knowledge gap.’

2.2 DIMENSIONS OF PSYCHOLOGICAL WELLBEING EXPLAINED
The quality of life of female refugees is seen as a balance between stressors, life events, environmental or social factors and resources (knowledge, sense of competency, security, copying skills, a stable value and belief system, and a support system) (Oliver, Huxley, Bridges, & Mohamad, 1996). The following dimensions of psychological wellbeing can either strengthen or weaken female refugee psychological wellbeing depending on the gravity of the risk and protective factors on individual, relational and collective level.

Autonomy
This aspect of psychological wellbeing puts emphasis on the individual’s ability to shun off the pressures of group think. People who are autonomous have positive functioning because they are confident with their opinions contrary to compliance, conformity and obedience to the general consensus. Ryan and Deci (2006) employ the self-determination theory to which they postulate that autonomy is synonymous to self-regulation or monitoring, self-governance, self-determination and principles of intrinsic motivation in an individual’s cognition and behavioural patterns. In line with this, Sagone and Caroli (2013) attribute autonomy as ‘regulation of behaviour through internal locus of control.’ These individuals have a positive functioning compared to heteronomous individuals because they are not controlled by external stimuli or influences (group behaviour; societal norms, values and attitudes; life circumstances etc.). More this concept of self-regulation borrows from social learning theory which propounds that self-regulatory processes produces self-evaluated reaction. Thus, positive functioning is an outcome evaluated from how
much behavioural and cognitive process are congruent to self-standards and not popular culture (thinking patterns, norms, values, standards of morality etc.).

**Environmental mastery**

Human behaviour is a product of the reciprocal interaction of nature and nurture. Aversive circumstances within a person’s surrounding can threaten their wellbeing and cause environmental stress. Community psychology espouses that female refugees can attain environmental dominion in the following environments:

- **Physical environment**
  The human psyche is not alienated to nature or our physical environment. Optimum functioning is achieved if a person enjoys equitable distribution of resources in the physical environment.

- **Built-in environment**
  ‘The spatial organization of camp structures can be a clear source of insecurity for female refugees in camps (Freedman 2007, p36; Ramier 2016, p.26).

- **Ambient environment**
  This environment works hand and glove with the built-in environment. How structures of the camp are designed can have an impact on ambient features like light, sound, air and odour (Gifford, 2007; Graham, Gosling, & Travis 2015, p.349).

- **Virtual environment**
  The virtual environment comprises of the prompt and far-reaching technological advances that have revolutionizing the ways in which people relate, communicate, and live their daily lives. Technological competencies has allowed individuals to create positive relations with others through social media platforms, use the opportunity to advertise their business ideas and

- **Social environment**
  Environmental dominion is achieved if female refugees are able to make interpersonal relationships with others. Akash and Boswall (2016) explains that 50% of Syrian refugees living outside Jordan camps are ‘restrained in their homes like prisoners in a prison’ and with no social
environmental mastery (making and interacting with others in different social networks). This has resulted in these refugees losing happiness of which happiness is an antidote to distress thus they are constantly living in sadness as most of them have lost their immediate families in Syria.

The researcher adopted Gifford (2007) model of environmental psychology of public life to give a summary of what constitutes female refugees environmental mastery. Terminology was slightly edited from the original model, to suit the jargon used by community psychologist. The model below explains how personal factors of the female refugees (demographics) and aspects of different environments influence their environmental mastery as a positive aspect of functioning.

![Diagram](image)

**Fig 2.1: The environmental psychology of public life**

*Source: Gifford (2007) The environmental psychology of public life*

The diagram above illustrates how different environments can play a part in the public life of an individual. Hence, environmental mastery is a dominion across different aspects of nurture.
Personal growth
Geise (2008, p.2) defines personal growth as having adaptive prosocial behaviours, thoughts and feelings. The complete human inventory is made up of four dimensions; physical, mental, social, and spiritual (Melgosa 2014, p26-27). Refugees who are exposed to new experiences need to grow, develop and realize their potential in these four areas in order to have good psychological wellbeing.

- Physical personal growth
Melgosa (2014) explains that 'good healthy habits like (physical exercise, adequate rest, balanced diet, ecotherapy) are at the heart of a satisfactory life in all its aspects.' Exercising the body and the mind (do some recreational activities) contributes to positive physical personal growth.

- Mental personal growth
This positive aspect of human potential is determined by how our brain is wired to perceive, and interpret environmental stimulus. Female refugees face a myriad of traumatic experiences but it is how they allow their brain to nurture the emotions that make them either optimistic or pessimistic. Diehl and Ludington (2011, p.223) are of the position that 'those who nurture positive emotions keep well (physically and psychologically) even in difficult times.' This effect releases feel good hormones (endorphins) which will makes a person euphoric despite their previous disheartening experiences.

- Social and spiritual personal growth
Our social and spiritual personal growth is achieved through having positive relationships with others and God. Female refugees reach personal social and spiritual growth when they integrate in host communities where they are at liberty to practice religion and spirituality. Nonetheless, it is a sombre acknowledgement that mankind's (inclusive of refugee) social fabric is decaying despite living in an overpopulated diverse global village.

Positive relations with others
Human beings have a longing to belong (be identified by a group -social or political), to show love and empathy to others, to create friendship and warm interpersonal relationships. Creating these
relationships inculcates psychological sense of belonging which is related to positive functioning. Positive relations with others builds one’s social capital which Boateng (2006) states that it emerged from sociology which is concerned with how one’s quality of life is determined by these interpersonal relationships. Contrary to this, Melgosa (2014, p.159) explains that ‘people living in anomalous social situations have a defective identity’ because they cannot form trusting social ties or relationships which make them vulnerable to negative wellbeing. Thus, forming relationships with others promotes bonding social capital which binds individuals with people who have homogenous capabilities and characteristics and endorses bridging social capital which bridges differences in a heterogeneous or diverse community.

**Purpose or meaning in life**

The brevity of life and existential crisis we have to deal with leaves many with pervasive feelings of emptiness and meaningless of life. Individual positive functioning of female refugees is attained if meaning is attached to the past and present traumatic experiences while life offers a sense of direction and reasons to live (Gladden 2012, p.23). Setting goals in life has given people reasons to live and a sense to self-actualize. These goals should not be complicated but rather practical, achievable in a certain period of time, within which a person can make an evaluation of his or her achievements. Kleftaras and Psarra (2012) equate purpose or meaning in life to freedom of choice, death, connectedness with life, and goal achievement. This construct of psychological wellbeing borrows its concepts from Erickson’s eight life-span psychosocial stages of development which suggest that purpose and meaning of life is positively achieved if the individual resolves or overcomes developmental crisis which enhance their potential to optimal thriving.

**Self-acceptance**

Self-acceptance entails levels of personal contentment with one's personal traits, earnings, abilities and flaws. To attain this positive honest evaluation of the self it is vital to eradicate the spirit of envy, perfectionism, and narcissism, which are spiteful and destructive. Ryff’s objective conception of self-acceptance borrows its conceptualization to the seminal works of Maslow’s self-actualization. Atkinson, Atkinson and Hilgard (1983, p402) explains that self-actualizers ‘accept who they are, resist enculturation, evaluate life objectively and their behaviors are characterized as versatile to new experiences, assuming responsibilities and evaluating their
feelings with their internal locus of control. Psychological wellbeing can be revealed in the following types of the self:

- Independent self - a person’s optimal functioning is achieved if s/he accepts their peculiar identity. This enhances aspects of positive functioning since the individual is assertive with his or her cognition (motion in human thought processes - perception, attention, memory, language, decision making, thinking and problems solving) and behavior patterns. More so, acceptance of the independent self helps to buffer psychological acculturation (change of dressing, identity, values and emotions). Thus self-affirmation of personality and behavior leads to personal contentment which is an indicator of positive psychological wellbeing.

- Interdependent self – individuals who are nurtured in most collectivistic cultures have this collective or interdependent self. This collectivist self-concept is acceptance of one’s in-group (family, tribe, and nation) can bring about good psychological wellbeing because inclusion in large social groups and identifying with a group brings a psychological sense of belonging which in turn influences environmental mastery, makes life meaningful and increases personal growth. Thus, the self in this context is qualified as a liberated individual antagonizing a world devoid of meaning.

### 2.2.1 ASPECTS WHICH CONTRIBUTE TO POSITIVE PSYCHOLOGICAL WELLBEING OF FEMALE REFUGEES

**Happiness**

Sirgy (2012, p5-23) explores the concept of happiness as ‘both a philosophical and psychological concept while defining it as a state of being that people experience as a result of action by oneself or others. The following philosophical ethical theories will explain this dimension of psychological wellbeing with reference to the happiness of refugees:

- Teleological theory of ethics

Teleological theory of ethics urges professional actions that yield individual happiness of the refugees as the ultimate goal to be achieved at the end. Paying attention to this moral standard, professionals and humanitarian organizations working with refugee women, explain that their
happiness transcends the physical pleasure but satisfying the needs of the spirit (hedonism) and it is idiosyncratic (ethical egoism).

- **Consequentialist theory of ethics**
  This theory posits that the consequences of our actions can affect an individual or a group (egoistic and universal consequentialism). Programs, programs and policies that are done or those that govern refugees can have a positive or negative consequence to the happiness of an individual refugee woman or women as a group which predicts or indicates their positive or negative functioning.

- **Deontological theory of ethics**
  Refugee women achieve happiness through adherence to God-given duties, common sense and societal obligations. Despite diverse religious affiliations, societal norms and values or thinking patterns, God-given duties are homogenous in inculcating a loving spirit for oneself and others through doing well and helping each other. Refugee women who are happy practice love for one another and stop questioning their faith because when calamity falls, some will succumb to learned helplessness and sadness creeps in and they abandon their faith, social support and exercise poor emotional intelligence.

- **Rights theory of ethics**
  Female refugees are a minority who are entitled to rights. Female refugees who enjoy the same rights with the host community are happy and often present positive psychological wellbeing.

**Positive thinking**
Positive thinking is training the mind to be optimistic. Female refugees who shun off all erroneous pessimistic thoughts, excessive worry, and negative self-talk present positive optimal functioning. In a qualitative study in UK by Sherwood and Liebling-Kalifani (2012, p99), refugee women from Somalia and Zimbabwe ‘adopted positive thinking and self-talk as strategy to cope with distress.’ These strategies bolsters refugee psychological wellbeing because as Melgosa (2014, p22) states, ‘A peaceful conscience and a serene mind bring about an optimal mood.’ In addition, there are four aspects to which female refugees should pay attention to in order to have positive thinking.
and these include positive thinking about oneself, the past, the future, people and the environment (Melgosa 2014, p21). He adds on stating that positive thinking boosts psychological wellbeing because ‘helps to maintain optimal social interactions, blocks anxiety, enhances self-esteem, reduces pain and other somatic symptoms (Melgosa ibid, p20).

Resilience
Resilience has no consensus in how it is defined as it has colloquial meanings attached to it but can be defined as a trait, process or outcome which enables person capacity to bounce back from or even grow amid facing adversity (Southwick, Bonanno, Masten, & Yehuda, 2014; Sherwood & Liebling-Kalifani, 2012). Time and unforeseen occurrences befalls us all without predetermination and traumatic catastrophes faced by female refugees’ makes resilience of significance in order to have positive functioning. Resilience helps one recover quickly from stressful events and to hold on to hope for a better future while they understand that crises that are traumatizing are a universal phenomenon (Sagone and Caroli, 2014). Resilience can be manifested in the following categories:

- Community resilience- it is characterized by strong social support and networks, social participation, access to social services, social capital, and social competence. Oades (2014) explains that community resilience enhances its member’s capacity to thrive in environmental inevitable changes. This upsurges feelings of autonomy, environmental mastery, personal growth, positive relations with others and purpose in life which buffers any risk factors to psychological wellbeing.

- Psychological resilience- this is characterized by a person’s disposition or inherent traits that accentuates their commitment, endurance and control of disturbing and challenging life circumstances. Psychological resilience enables individuals to have self-acceptance (characterized by self-esteem and self-efficacy) which strengthens their bearings in face of harsh conditions before they barely get off the ground.

Self-esteem
Self-esteem is a quality for one’s psychological wellbeing and it often results from reflective evaluation or appraisals an individual makes of him or her and the degree of approval or disapproval which he or she gets from their circles of social support. The 10 point plan toolkit for
DREAMS project explains that self-esteem ‘plays a very important role in enabling an individual to make a decision and that the confidence and self-belief are key aspects that an individual needs to be able to achieve.’ Thus, levels of self-esteem in female refugees are presumed to determine their attitudes (levels of aspirations, satisfactions and self-acceptance), individual and group behavior and it is demonstrated through positive and confident statements and actions about the worthiness of living.

2.3 NATURE OF PSYCHOLOGICAL WELLBEING OF FEMALE REFUGEES
A myriad of studies have been conducted to measure the state of or nature of psychological wellbeing of refugees in refugee camps or integrated in communities where they would have gone to seek sanctuary.

2.3.1 Quantitative studies
Ndzebir (2015) used a handful of quantitative questionnaires as research instruments to measure the psychological state of wellbeing of refugees in Luxembourg. In this study, he alludes to common stressors like acculturation, unemployment, loss and grief, poverty culture shock as increasing mental disorders like depression, general anxiety, acculturation stress, post-traumatic stress disorder, and somatic pains. More so, he explains that refugees in Luxembourg utilized coping facilitators like social support, multicultural attitude, self-efficacy, religion and spirituality to their problem focused and emotion focused coping strategies.

Experiencing stressful and traumatic events has adverse effects on positive functioning of female refugees. An excerpt of results cross-sectional study by Hollifield, Warner, Krakow & Westermeyer (2018) of 135 Kurdish and 117 Vietnamese refugees where 46% of the sample were women showed the following results for their mental health status:

<table>
<thead>
<tr>
<th></th>
<th>Kurds</th>
<th>Vietnamese</th>
</tr>
</thead>
<tbody>
<tr>
<td>PTSD</td>
<td>56%</td>
<td>24%</td>
</tr>
<tr>
<td>Depression</td>
<td>41%</td>
<td>23%</td>
</tr>
<tr>
<td>Anxiety</td>
<td>34%</td>
<td>17%</td>
</tr>
</tbody>
</table>
Hollifield, Warner, Krakow & Westermeyer (2018) published the results above from data collected using Hopkins Symptom Checklist-25 (HSCL-25) and PTSD Symptom Scale-Self Report (PSS-SR). In addition, Hollifield, Warner, Krakow & Westermeyer (ibid, p3) used the Trauma History Questionnaire (THQ), the Comprehensive Trauma Inventory-104 (CTI-104) and the Post-Migration Living Problems (PMLP) to ascertain the correlation between pre and post migration or resettlement stressors, which proved to have a significant correlation. This research proved that there is no gender effect on how PTSD has a devastating effect on the psychological well-being of refugees.

A cross sectional survey by Subedi (2016), with a sample size of 110 Bhutanese refugees in Canada (51.5 % being females) articulates that being a refugee resettling in another country is coupled with both physical and psychological stress. General Well-being Scales and the Brief COPE were adopted in this study to measure the coping strategies and psychological wellbeing of Bhutanese refugees. Descriptive statistical analysis showed that 72.5% of the sample faced a language barrier, 69.7% overthinking about relatives either in their country of origin (Bhutan) or scattered in other sanctuary countries, 31.2% experiencing acculturation, and 7.3% not accessing healthcare services. These risk factors pose a threat to the psychological wellbeing of Bhutanese refugees resettled in Canada. However, these refugees have adopted religious practice, seeking social support, acceptance, and positive reframing as positive coping strategies while others have adopted maladaptive coping strategies like drug and substance abuse, behavioral disengagement, self-blame and isolation among others.

2.3.2 Qualitative studies
A qualitative study by Haynes (2013) of female refugees explained the experiences of female refugees who are mothers and how risk factors of being refugees can affect their maternal identity. In this study, maternal identity is the female’s perception of competency in carrying out nurturing roles to children as a mother figure in the family. Haynes (2013) states that risk factors such as family climate (poverty, IPV, family structure (single-headed family, separation from (other/)children) and socio-economic obstacles (access to health care services, food and social capital) made it difficult for parenting female refugees to have meaning in life as parent, have that sense of environmental mastery and have amicable social relations with others. Haynes (ibid)
explains that his sample expressed maternal depressive disorders which affected their self-efficacy in parenting skills, communication and engagement with children and excessively disciplined their children. However these female refugees used talk therapy, and having higher self-esteem made it easy to cope with and buffer these threats to maternal identity.

2.4. RISK FACTORS TO THE PSYCHOLOGICAL WELLBEING OF FEMALE REFUGEES AT TONGOGARA REFUGEE CAMP
Risk factors are circumstances, issues and variables that propagate the likelihood of refugee women to have poor psychological wellbeing. These factors trigger depression, pessimism, low self-esteem, low self-efficacy, poor decision making, poor emotional intelligence which results in poor social competence etcetera.

2.4.1 PSYCHOLOGICAL RISK FACTORS
a) A person’s mindset can be a risk factor to an individual’s psychological well-being. This echoes Borg’s statement, ‘The mind is given to us, and we are not given to the mind’ (Borg, 2014 p.19). In addition, Sherwood and Liebling-Kalifani (2012, p89) state that refugee ‘cognitive processes in the form of interpretations and perceptions of themselves and their situations. If refugees are to perceive the world and the situations they have been through or are in with positive thinking and with a cowrie of hope, it will bolster their psychological wellbeing.

b) Female refugees’ experiences of acculturation result in acculturative stress as a risk factor to their psychological wellbeing. Acculturation is defined as ‘how people adjust to the mainstream culture’ and in this study, it refers to how refugee women adjust to Zimbabwean Shona culture (Kim, 2006; Kloos et.al. 2012). Berry’s model of acculturation strategies (as cited by Kloos et.al, 2012) explains that acculturation takes the forms of bicultural, assimilation, marginality and separation. Acculturative stress refers to the stress that arises from the process of acculturation (Balidemaj, 2016; Milner, & Khawaja, G, 2012). It carries with it difficulties in embracing the new host or dominant culture while making female refugees to feel guilty of abandoning their origins (their ethnic norms, values, attitudes and thinking patterns). However, Balidemaj (2016) quantitative survey showed a significant
difference between the two variables (acculturation and psychological wellbeing) hence his study rejected the null hypothesis that acculturation has a negative relationship with ethnic identity and psychological wellbeing on Albanian-American female refugees. Though different opinions across scholars about the positive and negative effects of acculturation abound, they all appreciate the negligence to the plight of female refugees and the dire need for psychological intervention that enables them to have strong and positive psychological wellbeing.

c) Trauma exposure and post-traumatic stress are the major risk factors to the psychological wellbeing of refugees across the globe. Traumatic events are unpredictable or sudden horrible, devastating events that leave an emotional wound or shock that creates substantial, lasting damage to the psychological development of the person, often leading to neurosis (Wainrib, 2006). These events cause depression in the surviving victims, whom in this case are refugee women. This echoes Diehl and Ludington’s (2011, p.227) position which explain that leaving home and moving to a new location causes reactive depressions. The diagram below shows how trauma exposure affects one’s psychological wellbeing.

**Psychological impact of traumatic events faced by female refugees**

<table>
<thead>
<tr>
<th>Type of trauma</th>
<th>Traumatic Events faced by female refugees</th>
<th>Psychological Impact of distress</th>
</tr>
</thead>
</table>
| • **Situational trauma**<br>Environmental issues that are ‘random, sudden, shocking, intense and catastrophic’ (Wainrib 2006,p19) | • Rape, widowhood, separation and divorce.  
• Spreading of communicable deadly diseases like Ebola.  
• Being kept as hostages.  
• Political violence | • Decreases immunity  
• Anger  
• Anxiety  
• Bereavement – loss  
• Change in appetite  
• Change in libido |
<table>
<thead>
<tr>
<th><strong>Clinic</strong></th>
<th><strong>Description</strong></th>
<th><strong>Symptoms</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Collective trauma</td>
<td>Effects of tribalism, religious persecution etc.</td>
<td>Compulsions, Easily startled</td>
</tr>
<tr>
<td>Transgenerational trauma</td>
<td>Traumatic experiences passed on affecting generation by generation</td>
<td>Eating disturbance, Fear, Frustration</td>
</tr>
<tr>
<td>Interpersonal trauma</td>
<td>Refugee women can be victims of:</td>
<td>Hoarding, Inability to concentrate, Irritability, Nightmares, Obsessions, Overwhelmed, Psychogenic muscle aches / spasms, Questioning faith</td>
</tr>
<tr>
<td>witnessing or being a victim of child abuse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>sexual assault – any coerced sexual contact</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Witnessing or being a victim of domestic abuse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elder abuse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>House demolition</td>
<td></td>
<td></td>
</tr>
<tr>
<td>External trauma</td>
<td>Female refugees have succumbed to external pressures which leave emotional wounds that have forced them to decide fleeing their country of origin. These are:</td>
<td>Questioning God’s Actions, Reduced problem solving capacity, Relieving the event, Sadness, Sleep disturbance</td>
</tr>
<tr>
<td>War – combat, killing, fear of being killed,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychological impact of traumatic events faced by female refugees</td>
<td>Source: the author</td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>witnessing death and extreme suffering, dismemberment</td>
<td>• Temporary confusion</td>
<td></td>
</tr>
<tr>
<td>• Being a victim of a crime</td>
<td>• Temporary phobic avoidance</td>
<td></td>
</tr>
<tr>
<td>• Sudden death of a loved one</td>
<td>• Profound shock</td>
<td></td>
</tr>
<tr>
<td>• Suicidal loss</td>
<td>• Psychogenic headaches</td>
<td></td>
</tr>
<tr>
<td>• Loss of a loved one</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Sudden and unexpected loss – of a job, housing, relationship</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Living with extreme poverty</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Refugees face different types of trauma as highlighted above, but re-traumatization is another risk factor to their psychological wellbeing. This can happen through hearing devastating news from home or experiencing more traumatic events in their country of sanctuary. For example, reports of Ebola in Democratic Republic of Congo (DRC) again and being declared by WHO as national emergency and this can re-traumatize Congolese refugees at Tongogara refugee camp who are already fighting for their survival in Zimbabwe despite economic hardships here.

### 2.4.2 NON-PSYCHOLOGICAL RISK FACTORS

a) Bereaved female refugees find it difficult to blossom positively in their grieving status. Bereavement in female refugees is their experience of grief or crying when they lose a loved one or someone they care about in death because of traumatic experiences. These or this
loved one could be significant others (husband, child, relatives) or general others (friends and community members) to the bereaved female refugee(s). Wainrib (2006, p.121) explains that ‘traumatic events are often unexpected and horrible, leaving most victims feel lost, disoriented, and powerless when former ways of making their bearings have been damaged or destroyed.’

b) Broken ties with family members, friends, and culture of origin often make refugee women lonely. ‘Loneliness is unpleasant, and the negative feelings it involves include depression, anxiety, unhappiness, dissatisfaction, pessimism about the future, self-blame and shyness’ (Anderson, Miller, Riger, Dill, & Sedikides, 1994; Jackson, Soderlind, &Weiss, 2000; Jones, Carpenter, & Quintana, 1985). More so, divorced, widowed and women taking up caregiving for children of their loved ones often feel lonely and overwhelmed when a male figure is not there to support them physically and emotionally. Melgosa (2014, p.275) explains that such women confined in such a family structure end up ‘projecting their frustrations on children and use those children as their source of emotional and interpersonal support.’

c) Exchange of gender roles increases the likelihood of poor psychological wellbeing in female refugees. Refugee women from patriarchal countries experience an exchange of gender roles when their spouses are deceased or remain behind in their country of origin for different reasons (man in countries with war and violence mostly join the army). Feminists can applaud this transition as the emancipation of the females from male domination but contrary to their perspective, in this study, it is not empowering but rather debilitating and posing a threat to the psychological wellbeing of the refugee women. Women during their exile have to fend for their children, protect themselves from SGBV which can encompass sexual harassment and sexist languages. These experiences leave some refugee women with a low self-esteem, poor self-efficacy, pessimistic perceptions about the future and struggle to sustain their livelihood. Considering the economic hardships facing Zimbabwe as a nation, with refugees at TRC resettled in arid regions where earning a living through subsistence farming is hard, they have a poor sense of environmental mastery. Abject poverty has led some women to succumb to quid pro quo sexual harassment or transactional sex in order to get basic needs at the expense of their growth needs.
d) Fear of repatriation or deportation by hosting governments threatens the security of refugees since they may face persecution upon arrival in their country of origin. Rwanda has resolved its conflicts and for Rwandan female refugees who have lived for years at TRC, it may be difficult for them to repatriate because of place attachment and some may doubt their safely going back. More so, reflecting on the traumatic situations they faced, going back will remind them of the events that led to some changes in their lives thus arousing the emotional wounds.

e) Human-wildlife conflict poses a threat to the harmonious nature of mankind and animals. Tongogara Refugee camp is located 100 meters away from Gonarezhou National Park and near Save River where wild animals come to drink water (Reporter, 2017). This poses a threat to the security and autonomy of refugee females in the camp. They live in fear of being attacked by wild animals thus exacerbates environmental distress.

f) Ontological identity and resentment from the host community are threats to female refugee environmental mastery; creation of trusting, positive interpersonal relationships; and finding meaning or purpose in life. Marks, Murray, Evans, & Estacio (2011, p56) explain that ontological identity is ‘the relationship between one’s sense of identity and place. Refugee women often suffer depression, anxiety and uncertainty if the host community harbors resentment for them and if they themselves are living in limbo (being at TRC temporarily while waiting to travel other countries for sanctuary). Freedman, Kivilcim, and Baklacioglu (2019, p.133) explain that this was the case with refugees in Greece who were at Calais waiting for their permits to go to Athens, to which he described their living conditions as ‘precarious and insalubrious in the extreme.’ In addition, place attachment also known as ‘topophilia’ is the bond that community members have with the place and it increases one’s psychological sense of belonging, social competence and psychological wellbeing. However this could be difficult for refugee women at TRC with their heterogeneous nature characterized by different backgrounds, norms, values, attitudes, culture religious and political affiliations and lifestyles.

g) Religion has become hypothetically the answer to the purpose and meaning of life. However some inculcated doctrines of religion have made female refugees to question their faith and
the loving nature of our omnipotent and omnipresent God. Across many African states, Christianity is the most practiced religion and many professed Christians adhere to the doctrine of predestination. This belief promotes the view that the ultimate salvation or damnation of each individual has been ordained beforehand. Henceforth, such teachings make refugees to question the purpose of living if that will mean that God had prescribed their life as ill-fated. BBC Media Action (2016) reports that refugees aspire to have a listening ear to their plight and experiences, while they need counselling, physical and psychosocial support. Thus, with the doctrine of life's predestination, they live in doubt of vindication from the most colossal power in the universe since it suggests that it was His will and doing.

h) Sexual and gender-based violence on female refugees has made the female victims to question the meaning of life, unable to have trusting interpersonal relationships with others, and make negative self-evaluation. The UNHCR report as quoted by Freedman, Kivilcim, & Baklacioglu (2019) explains that in 2016, ‘20% of over one million refugees were women (45% of the refugees arriving in European Union (EU) were from ten (10) countries with 45% from Syria and 24% from Afghanistan) and they have encountered SGBV on their journey from their countries of origin to where they were going to seek sanctuary. Most of the female refugees were travelling unaccompanied by their husbands since they would have either been killed or stayed behind to fight in war or conflict.

i) Systemic racism and discrimination by host communities to refugees affects their psychological wellbeing. Simich and Andermann (2014, p.28) explain that the discrepancies of mental health between Canadian by birth citizens and the refugees and immigrants has been attributed to ‘inequalities in social determinants including socioeconomic factors, social support, and systemic racism and discrimination.’

2.5 PROTECTIVE FACTORS TO THE PSYCHOLOGICAL WELLBEING OF FEMALE REFUGEES AT TONGOGARA REFUGEE CAMP
Protective factors are individual or community characteristics or factors that reduce the likelihood of refugees having psychological, psychosocial and psychosomatic problems that impedes their psychological wellbeing. These factors modify and ameliorate female refugee’s responses to some
environmental hazards that predispose them to maladaptive outcomes or behaviors. Thus, protective factors shield female refugees from exposure to risk factors or experiencing them.

PSYCHOSOCIAL FACTORS
Social support is an essential protective factor to female refugee psychological wellbeing. A cross-sectional study by Marume, January & Maradzika (2018) has explained that ‘social capital has the potential of improving the health and wellbeing of refugees at TRC.’ The diagram below shows sources of supportive binding and bridging social capital:

![Diagram showing sources of supportive social networks: Primary and Secondary]

**Fig 2.2: Psychosocial Factors**

The above social support networks are protective factors and functional to the psychological wellbeing of individuals because female refugees can get tangible and intangible support (Orford 1992, p.65). These types of support allow female refugees have positive relations with others, boost their self-esteem which heightens their autonomy, increases prosocial behaviors, feelings and thoughts. Thus, amid stressors, social support is a protective factor, an emotional and problems focused strategy for female refugees.

Bicultural competence as a form of acculturation is a protective factor to female refugee functioning. Kloos, Hill, Thomas, Wandersman, Elias & Dalton (2012, p.229), explain that bicultural competence ‘involves three social or behavioral factors that comprises of communication competence, repertoire of behavioral skills in both the dominant culture and culture of the origin, and cultivating social support networks within both cultures. Female refugees who exhibit this quality can easily acclimatize into the host community, widen their social networks, and look for employment since communication will neither become a barrier nor will
they feel cognitive dissonance caused by discrepancies between behaviors, thinking patterns, perceptions, values and attitudes. Thus bicultural competence boosts their personal contentment of the self, confidence in making positive relations with others, become autonomous; feel that there is meaning to life and also results in self-directed growth and ego development.

Innumerable researches on refugees have attributed good psychological wellbeing to refugee resilience. Staying, working and socializing with diverse people can be very stressful if one is rigid to his or her own culture thus resulting in acculturative and environmental stress. Refugee women who are resilient also practice the skill of reciprocity which enables them to understand the heterogeneous nature of social identities, cultures and values as a worthy celebrating which does not threaten their own. Thus resilience is a protective factor to the psychological wellbeing of female refugees because it relates to self-confidence, self-efficacy and the adjustment after adversity bolsters social competence and psychological sense of wellbeing.

Religion and spirituality is mind-regulating for female refugees whose endurance and faith have suffered shipwreck. Religion and spirituality invigorates, fosters hope amidst despair and it fortifies female refugees to cope with anxieties that come from living in critical times hard to deal with. Thus, religiosity and spirituality inculcate a sense of worth, enriched spiritual connection, empathy and concern for others as well as appreciation for life in female refugees.

Opportunities for exploration in work and school provide equitable procedural and distributive aspects of justice between refugees and the host community members. These opportunities allow female refugees to have autonomy and gain mastery over the environment which enhances their psychological wellbeing.

2.6 COPING MECHANISMS USED BY FEMALE REFUGEES AT TONGOGARA REFUGEE CAMP
Coping refers to our cognitive processes (problem-solving skills, perception of situations etc.) and behavioural patterns (skills and capabilities) which we put in motion to alleviate manage, solve, the discomfort of personal and interpersonal problems (Wanjiku 2014, p.27; Subedi, 2016). Approaches or ways of coping are referred to as coping strategies and these can be as follows:
2.6.1 Problem-focused coping
This strategy is used when the individual focuses on the root cause or the problem rather than its consequences. Female refugees can either face or evade anxiety-producing situations that are a threat to their psychological wellbeing.

a) Formal support – humanitarian aid from faith-based organizations (FBOs), non-governmental organizations (NGOs) and the hosting government help refugees with their physical and basic needs. This problem solving aid helps female refugees to cope with threats to their psychological wellbeing. UNHRC is popularly known for helping refugees with basic needs across the world. Gladden (2012, p.18) states that formal support encompasses services offered by ‘medical clinics, mental health clinics, psychologists, and social workers’ among others.

b) Informal employment – Wanjiku (2014) states that female refugees in Nairobi cope with the constraints of economic challenges to their environmental mastery by engaging in informal day labour in economic sectors like construction, domestic chores, and hotels among others to sustain livelihood.

c) Education – female refugees are engaged in vocational training and formal education sponsored by NGOs, FBOs and the government. Education can also encompassed informal learning of the host culture in order to lessen acculturative stress. Gladden (2012) states that education is one of the primary sources of emotional support for female Sudanese refugees in Kakuma Refugee Camp, Kenya.

d) Spirituality and religiosity – female refugees who are loyal to practising certain beliefs and upholding certain values have a sense of belonging to a group. Wilson and Drozdek, (2015) explain that believing in the vindication of problems from an omnipresent, omnipotent and omniscient Supreme Being makes female refugees to be optimistic, exercise faith that make them hope for a better future and strengthen optimum positive functioning. These practices heal the broken spirits of traumatized female refugees.
2.6.2 Emotion-focused coping
This strategy is used when the individual focuses on their emotions in relationship to female refugee psychological wellbeing. It correlates to how female refugees manage their emotional intelligence amidst emotion-eliciting situations or events. Goleman (2005) states that in order to have optimal functioning, individuals should practice self-regulation of mood, be aware of their social competencies, know their emotions, persevere to achieve goals, control their impulses, to exhibit intrinsic motivation and have the ability to trust others and to show empathy.

a) Social support – most refugee women have used their social networks to cope with risk factors to their psychological wellbeing (Wanjiku, 2014; Kendrik, 2010). This support has helped them with instrumental and emotional support which bolsters their self-esteem, self-efficacy, social competence, resilience, happiness, and emotional intelligence which alleviates the emotional discomfort they encounter by virtue of being female refugees.

b) Talk therapy – female refugees in England have utilized this emotion-focused coping in order to adjust their cognitive patterns and improve their self-esteem in face of threats to their positive functioning. Haynes (2013) states that despite threats to maternal identity, these female refugees chose to think about positive life events, feelings and behaviors which helped them to cope better with their devastating situations.

2.6.3 Maladaptive coping
a) Survival and transactional sex – Ramier (2016) state the female refugees at Dzaleka camp, Malawi, engage in these kinds of sex work for survival as financial insecurity is a push factor to such maladaptive coping mechanism.

2.7 THEORETICAL FRAMEWORK
Theoretical framework refers to a collection of interrelated concepts like theories that guides one’s research. The researcher uses Bronfenbrenner’s ecological theory (1976) and Axel Honneth’s theory on the struggle for recognition (1995).

2.7.1 Bronfenbrenner’s Ecological Theory
The concept of this theory is that the psychological wellbeing of female refugees does not exist independently without the reciprocal influences of nature and nurture. The researcher seconds
Southwick et al.’s (2014) interactionist position that ‘humans are embedded in families, families in organizations and communities and communities in societies sand culture. Thus, to measure the PWB and understand the risk and protective factors to one’s PWB, there is need to look into the intrapersonal and interpersonal processes of female refugees at TRC (Subedi, 2016). This theory hence gives the researcher a platform to assess the impact of risk and protective factors on the psychological wellbeing of female refugees ‘from the cradle to the grave.’ Bronfenbrenner’s ecological theory consists of five systems in the, namely microsystem, mesosystem, exosystem, macrosystem, and chronosystem and illustrates how individuals can best fit in these systems.

**Microsystem**
The microsystem involves the family, school, peers, religious organization, and neighborhood playground. These form the primary source of support for refugees. However, push factors to individual or group decision to seek refugee disrupts the social fabric through displacement, death and dislocation. Female refugees can be widows, single orphaned young adults, victims of sexual violence etcetera. Relocating to other countries as a refugee with such an inordinate burden on the climate and structure of primary sources of social support can have detrimental effects on the psychological wellbeing and coping mechanisms of female refugees at TRC. Thus, family structure and cohesiveness contributes negatively or positively to the psychological wellbeing of refugee women. Divorced and widowed women are most likely to score low in aspects of psychological wellbeing because they have to take up the man’s roles in the family to balance the puzzle.

**Mesosystem**
The system concentrates on how female refugees interact with others from the home setting to the community. Interpersonal relationships, trading, social networking and all can be best explained by intersectionality in how the mesosystem influences the psychological wellbeing of female refugees. Refugee women do not exist in a vacuum but the concept of Ubuntu in Africa is a contributing factor to their interaction in refugee camps. Refugee women have their own family members but they make social relationships or network with others at church, work and school, in social groups, at clinics or with community health workers among others. These interactions can provide both material and emotional support which can either exacerbate or upsurge aspects of
their psychological wellbeing. Female refugees make positive relationships, are empowered to have dominion over different environments, become autonomous, have personal growth and purpose in life through accessing healthcare services at the camp clinic, interact and gain knowledge in formal and vocational schools in the camp, interact and incite each other to fine works at church and where they work.

**Exosystem**

This system comprised of local humanitarian organizations that are looking at the welfare of female refugees. Red Cross Society (RCS) implements the Restoration of Family Links (RFL) program which helps refugees at TRC ‘to have communication links with their immediate members of the family still in their home countries which they fled from helps alleviate feelings of distress in female refugees (Chuma 2014, p.3). Goal Zimbabwe also empowers female refugees in its vocational training programs. Non-governmental organizations like JRS offer education, livelihood training and pastoral support to female refugees. Their 2019 target is to register the range of people aged between 12 and 21 with a target of 250 students but already, they have interested people reaching above the target. Terre des homes (TDH -which means Land of man) works with female refugees at TRC in primary health activities, managing public health, facilitating and advocating child protection and stopping SGBV. This organization works with UNHCR and World Food Program (WFP) in distributing cash and non-food items (mosquito nets, plates, sanitary wear, blankets, etcetera). This stewardship allows female refugees to have access to basic needs which increases environmental mastery and problem-focused coping.

**Macrosystem**

This system looks at the influences of our attitudes, and culture on psychological wellbeing. Female refugees come from different localities, cultures, and tribes even if they might be coming from the same country. Thus, their conceptualization of life situations, values etcetera could be different. Hence, female refugees thinking patterns (cognitions) and behaviors are different. These could either have a positive or negative influence to their levels of happiness, positive thinking, resilience, self-efficacy, self-esteem and social competencies.
Chronosystem

This system looks at how the global village of organizations and its policies have an impact on refugees’ psychological wellbeing. UNHCR has integrated mental health and psychosocial support for refugees in the UNHCR Public Health Strategy of 2014-15 and the Strategy and Action Plan for Refugee and Migrant Health in the WHO European Region was developed and endorsed by the WHO European Region in 2016 (Tsutsumi, Izutsu & Ito, 2015; WHO, 2018). More so, the Asylum Act (cited by WHO, 2018) protects female refugees as practices like female genital mutilation and sexual violence as persecution and these practices are risk factors to the psychological wellbeing of female refugees.

2.7.2 Axel Honneth’s theory on the struggle for recognition

Honneth (1995) proposed a tripartite theory which facilitates individual coping mechanism. His theory is ideal for this research as female refugees are in dire need of recognition as a minority group. Thomas (2010) explains that this theory is a paradigm shift in explaining refugee psychological well-being and coping as it focuses on structural factors and community contribution to positive functioning which goes beyond the traditional perspectives that merely looked at individual modification of thoughts, actions and behaviors. The diagram below is an edited excerpt from Thomas (2010) which shows a visual depiction of this theory.

Fig 2.3: Axel Honneth’s theory on the struggle for recognition

Source: Thomas (2010)
The three dimensions of this critical theory of recognition and social justices have two variables in every dimension that are inextricably coupled. These are to be mentioned below.

**Love and self confidence**
Human self-esteem is achieved when individuals either perceive or receive love from the significant and general others who validates our capabilities. Establishing and maintaining close relationships with people on a personal and mutual level bolsters one’s self-determination. This bolsters their levels of social environmental mastery; attach meaning to life, increases self-determination, and enhances one’s pro-social traits (social competencies, emotional intelligence).

**Solidarity and self-esteem**
Teamwork can enhance one’s self-esteem. Female refugee interaction in different spheres of influence where they can make unanimous decisions, project planning among others increases female refugee’s individual autonomy and environmental mastery.

**Rights and self-respect**
The eudaimonic and hedonic nature of females in exile can be determined by how they exercise both procedural and distributive rights. Thomas (2010) with adroitness puts it that the apex of the pride of a woman may be achieved through human legal recognition.

**2.8 KNOWLEDGE GAP**

**2.8.1 Conceptual gap**
A myriad of studies have been negligent to positive aspects of human potential in life circumstances glutted with agitation and paid more attention to psychosocial consequences of risk factors on the psychological wellbeing of refugees. This research has fully explained psychological well-being aspects and contrary to previous studies, it has explored several aspects of psychological wellbeing, risk and protective factors to positive functioning and the copying mechanisms used by female refugees.
2.8.2 Timeframe gap
Previous studies by Chuma (2014), Govere (2017), Marume, January & Maradzika (2018) on refugees at Tongogara Refugee Camp, were before the devastating Cyclone Idai and only focused on the population as a whole rather than targeting on female refugees and their positive functioning.

2.8.3 Discipline gap
Social workers, lawyers and public health professionals have written studies about refugees but because psychological wellbeing has a bias with the discipline of psychology, the researcher was fascinated to put psychology on the map. Contrary to previously mentioned disciplines, this research will show the positive functioning of female refugees in a multicultural set up, how they embrace diversity, prevent risk factors to result in neurosis, embrace protective factors in the community and individually to enhance positive optimum functioning in the face of adversity.

2.9 SUMMARY OF CHAPTER
The chapter presented different scholarly opinions about the nature, risk an protective factors to psychological wellbeing of female refugees and their coping strategies. Dimensions and aspects of psychological wellbeing were explained and the Ecological theory of Urie Bronfenbrenner is the theoretical framework guiding this study. Knowledge gap recognized by the researcher from contemporary and past studies was revealed.
CHAPTER THREE: METHODOLOGY

3.1 INTRODUCTION
The research methodology is highlighted and justified in this chapter. A brief description, advantages and disadvantages of the adopted approach, instruments used, population sample and how the sample was sampled, methods of proving the validity and trustworthiness of instruments and that data collection steps and intended analysis are given in this chapter. More so, the chapter will take you through the ethics guiding the moral and professional conduct between the researcher and the participants in this study.

3.2 RESEARCH APPROACH/ PARADIGM
The researcher will use the transformative approach in this study. This paradigm allows the researcher to switch through both qualitative and quantitative research instruments and data analysis. This mixed-method approach ‘triangulates the research methods which increases the credibility of the research, enriches and confirms the puzzled picture’ of plight of female refugees and their psychological wellbeing a TRC (Greener 2008, p.36). The advantages of using this paradigm in this research are that:

- It enables the researcher to dispel myths and misconceptions about the psychological well-being of refugees.
- Data collection procedures use culturally responsive or sensitive techniques.
- The qualitative aspect of the paradigm provides in-depth understanding of refugees as they are human beings who in this research are viewed as people who create new knowledge and meaning every day whilst their knowledge is idiosyncratic or subjective to individuals.
- The ontological nature of this paradigm in this research is that it believes in multiple realities of the psychological wellbeing of female refugees as shaped by psychosocial, socioeconomic and political factors.

3.2.1 Methodology of transformative paradigm
Quantitative
Quantitative research entails the collection of numerical data and addresses issues of reliability and validity.
Advantages

- The psychological wellbeing scales which the researcher will apply in this research method enables to measure, generalize and replicate the psychological wellbeing of female refugees at Tongogara Refugee Camp because psychology as science grows through verification.

Disadvantages

- Quantifying the concept of psychological wellbeing can difficult as social aspects to the psychological wellbeing can come along with response biases thus there is need for an alternative qualitative research method to counterpart this variance.

Qualitative

Qualitative research in this study allows the researcher to get in depth information on the risk and protective factors affecting females at TRC. This aspect employed in the transformative paradigm will address elements of trustworthiness.

Advantages

- This method has been employed to the research as allows refugee women to narrate their stories, and dialogue participation provides a plethora of information about risk and protective factors to their psychological wellbeing.
- Qualitative methods allows the researcher to observe non-verbal cues (facial and body gestures) and conversing with them allows for catharsis
- Disadvantages which will give the researcher a clear cut and honest picture to their psychological wellbeing.

3.3 RESEARCH DESIGN

The research has employed a case study as a quantitative research design because it will enable mixed methods to be used in the research. A case study will be the most suitable design because it is focusing on a minority group: female refugees at TRC and it will enable the researcher to have an in-depth understanding to the psychological well-being them and the statistics of its prevalence or nature.
3.4 TARGET POPULATION
The study targets female refugees from at least two different countries Tongogara Refugee Camp.

3.5 SAMPLE AND SAMPLING TECHNIQUE
3.5.1 Sample
The study quantitative sample is n≤60 and a qualitative sample of 30<n≥30.

3.5.2 Sampling Method / Technique
Probability sampling
Participants of this study were selected using random sampling which enables any female refugee in the camp to have an equal chance of participating in the study. Simple random sampling was used in this study and participants were given codes. This method reduces having a biased sample of females from one country representing all females in that multicultural population.

Non-probability sampling
Key informant organizations working with female refugees in the camp were handpicked using purposive sampling method. Convenient sampling was used to locate single mothers in the camp as this group amongst the target population had similar attributes which suit the researcher’s interest (Ramamurthy, 2008).

3.6 RESEARCH INSTRUMENTS
These are tools employed in the research to gather raw data from his or her research participants. The researcher will gather data through using two psychological wellbeing scales, a questionnaire and one short unstructured interview.

3.6.1 Quantitative Research Instrument
The researcher will adopt and adapt Ryff’s PWB Scale (42 item version) . This tool measures six psychological wellbeing dimensions (measure autonomy, environmental mastery, personal growth, positive relations, purpose in life, and self-acceptance) and each construct has seven items (questions).
Advantages

- It is easy to administer and to score
- The instrument has been used with similar population (in refugee studies) and has produced accurate and consistent results.

Disadvantage

- Data is quantified not qualified hence the PWB scale cannot reveal the risk and protective factors to the psychological wellbeing of refugees hence the researcher will use focus group discussion with the participants and individual semi-structured interviews.

3.6.2 Qualitative Research Instruments

The researcher employed interviews in this study to have in-depth information about the protective and risk factors to the psychological well-being of female refugees at Tongogara Refugee Camp. The following were the interviews:

a) **Face to face interviews / Personal interviews**

This type of interview is like an informal flexible dialogue between the researcher and the participants. In this context, this type of interview was significant for illiterate participants who have more than five (5) years at TRC.

Advantages

- Gives the researcher leeway should the client needs to drift as these protective and risk factors are potentially emotion-laden topics with refugee women thus they can be cathartic and so the researcher will probe if needed and pay attention to non-verbal cues presented by the participants.
- It increases more questioning and answering during the interview.

b) **Group interviews**

This type of interview is popularly known as focus group discussion. This interview enables the researcher to have a discussion on risk ad protective factors to psychological wellbeing with the female refugees in the camp as a group. The researcher has used this interview to interview single
mothers and elderly women in the chosen sample since they also have their peculiar issues and problems amongst other women.

c) **Semi-structured interviews**

Semi-structured type of interview was used to interview key informant organizations within the camp, who work directly with female refugees on a daily basis.

<table>
<thead>
<tr>
<th>Key Informant Organization</th>
<th>Number of interviewees</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Jesuit Refugee Services</td>
<td>Two social workers and one pastor</td>
</tr>
<tr>
<td>2. Terre des hommes – Italia</td>
<td>Monitoring and evaluation officer</td>
</tr>
<tr>
<td>3. Goal Zimbabwe</td>
<td>Monitoring and evaluation officer</td>
</tr>
</tbody>
</table>

**Table 3.1: Semi-structured interviews**

Advantages

- Allows the researcher to flow between structured and unstructured interviewing approaches.
- Semi-structured interviews give room for rapport and relationship building and this essentially important in this study for the participants to trust their information with the researcher which will make them reveal a plethora of information to the researcher.

Disadvantages

- Information gathered cannot quantify the psychological wellbeing of the female refugees at Tongogara Refugee Camp.

**3.7 PRE-TESTING AND PILOT STUDY**

**3.7.1 Pre testing**

The PWB-scale was pre tested with forty (40) Sudanese scholars at Midlands State University in order to ascertain if participants can understand items on the tool and how to respond to the items. According to Murairwa (2015), pre testing instruments ‘determines the alacrity’ of participants in
the study. Pre-testing also ensures construct validity and reliability of the instrument towards measuring the construct which in this case is the psychological well-being.

3.7.2 Pilot Study
A pilot study will be conducted with forty (40) female Sudanese students at Midlands State University to see the research’s feasibility and if the items on the instrument are clear, and understandable. The sample for the pilot study was significant considering that international students from Sudan came to Zimbabwe for their four-year studies and one extensive year of learning English languages and bridging other subjects like Mathematics. Their circumstance are similar to that of the refugee women in that they have faced or witnessed traumatic events in their country because of political and tribal conflicts in their country of origin which resulted in a civil war. Upon arrival to Midlands State University they have endured linguistic acculturation, cultural bereavement, and stigma and discrimination from the other students because of their physical outlooks (complexion, height and body structures). The pilot study was conducted to see if items on the interview guide

3.7.3 Validity and Reliability
This pretesting allowed the researcher to perform questionnaire and item checking in the PWB-scale. The researcher performed split-half reliability in administering the PWB-scale (first phase administered items 1-21 then the other 22-42). Pretesting allowed the researcher to achieve accuracy or measurement of truthfulness of items on the tool in measuring the purported construct and to ascertain the consistence in results by checking response variations, incompleteness of filling all the items and answering the questionnaire.

3.8 DATA COLLECTION PROCEDURE
The researcher received a letter from Midlands State University on the as an approval letter for her to conduct this research. The researcher applied for a recommendation to conduct this study at the Manicaland Provincial Office for the Ministry of Public Service, Labor and Social Welfare end of August and received the recommendation. The researcher then travelled to Harare with the recommendation and applied for its endorsement at Compensation House by the Human Resource Director of the Ministry of Public Service, Labor and Social Welfare. The researcher was permitted
to carry out the research. The researcher printed 80 sets of Ryff’s psychological wellbeing scale, 42 version and notified the camp administrator of her visit for days in the camp. The researcher also requested for an interpreter and notifies the key informant organization gate keepers in the camp of her visit. After a day, the researcher embarked on a journey to Tongogara Refugee camp to collect data.

3.9 DATA PRESENTATION AND ANALYSIS PROCEDURE
Data analysis is the process of systematically applying statistical and or logical techniques to describe and illustrate, condense, recap and evaluate data (Dawson and Catherine, 2010). The researcher used SPSS version 21 and Microsoft excel to analyse data and descriptive statistics namely tables, graphs and pie charts were utilized to present biometric data and responses to items on the psychological wellbeing scale. Qualitative data will be presented in form of pictures and analyzed through thematic analysis.

3.10 ETHICAL CONSIDERATIONS
Nelson and Prilleltensky (2005) define ethics as thinking and acting in ways that are morally justifiable though the meaning of morally justifiable is controversial. Thus, research ethics are justifiable moral and professional codes of conduct between the researcher and the participants. Since the research will be about the psychological wellbeing of female refugees, the risk and protective factors that are circumvent to their psychological wellbeing are considered sensitive and traumatic.
Thus, these guidelines give assurance to the participants that they are not being abused by the researcher in her endeavours to carry out a psychological research but rather uphold the welfare of the participants (Jackson, 2012, p.39).

3.10.1 Ethical clearance
To get permission to work with female refugees as participants to the study, the researcher was cleared and given a written consent to conduct the study. The quantitative and qualitative research instruments were approved by the department of Psychology at Midlands State University.
3.10.2 Debriefing
Participants were carefully debriefed about the true goal of the research that is to reveal the frequency of psychological wellbeing, its aspects and the risk and protective factors of it. Debriefing is normally done before participants grant their informed consent. Since the research has psychological jargon, the researcher will explain the meaning of some words to the participants for them to give consent to what they would have understood.

3.10.3 Informed consent
Informed consent is the participant’s agreement to participate in the research after the participant(s) has been clearly debriefed about the purpose and procedures of the research. (Helman, 2007 p.15) explains that giving full information about the study to illiterate participants will make them understand what the study is all about and exercise their liberty to give their verbal consent or accent.

3.10.4 Autonomy and Withdrawal
Participants to the study are independent to give consent to participation in the research and if they wish to withdraw from the study after giving assent, Breakwell, Hammond, Fife-Schaw, & Smith, (2006, p.41) explain that they are at liberty to withdraw from the research whether it has incentives or not. Participants will not be coerced to give an explanation of refusing to participate or pulling out of the study.

3.10.5 Privacy and Confidentiality:
The research is a value-laden and emotion-laden topic which might make participants to be cathartic about their experiences and challenges hence the researcher adheres to principles of privacy and confidentiality. Information gathered will not be published publicly without the written or verbal consent from the participants or gatekeeper authority (Canter, Bennett, Jones, & Nagy, 1994, p.105). Pseudo names will be used to safeguard intrusion into the privacy of participants. Where confidentiality if prima facie (limited) participants were debriefed.

3.10.6 Anonymity:
The statistical analysis of the female refugees are not to be published using their names and without their assent. Coolican (2006, p.198) explains that names of the participants should be anonymous. The researcher used codes for participants to respect their right to anonymity.
3.9 CHAPTER SUMMARY
This chapter has taken us through the research methodology. Enclosed to this chapter are the research approach, tools or instruments used, design, how data has been collected and the intended analysis. Ethics guiding this research were also explained.
CHAPTER FOUR: DATA PRESENTATION AND ANALYSIS

4.1 INTRODUCTION
Collected raw data acquired through administering the demographic questionnaire, Ryff’s psychological wellbeing scale (42-version) and conducting interviews with participants is presented and analyzed in this chapter. Data collected from the transformative approach which utilizes mixed methods approach is to be presented using charts, graphs, tables and pictures whilst being quantitatively analyzed with Microsoft Excel and SPSS and qualitatively analyzed using thematic analysis.

4.2 QUANTITATIVE PRESENTATION AND ANALYSIS
4.2.1 RESPONSE RATE
Out of 60 administered demographic questionnaires and Ryff’s psychological wellbeing scale (42-version), all the participants completed the instruments which make the total response rate (TRR) 100%. This response was above expected limit and this outcome has been achieved through working along with the research assistant who translated the instruments to suit the bilingual nature of the participants.

4.3 BIOMETRIC DATA OR DEMOGRAPHIC CHARACTERISTICS OF PARTICIPANTS
4.3.1 Age distribution of participants

![Age distribution of participants](image)

Figure 4.1: Age of participants
Age of respondents is being illustrated with the figure above. The highest frequency was participants aged 19 with 8.3 % (5) which suggests that they were the dominant age group amongst the participants. The modal percentage was 1.7% (1) for individuals aged 24,34,35,38,42,43,48,50,54,55 and 58.

### 4.3.2 Participant’s country of origin

![Graph of country of origin](image)

**Figure 4.2 Country of origin of participants**
The information in the above figure depicts that the highest frequency of participants were 55% (33) Congolese females from Democratic Republic of Congo, followed by 25% (15) Burundian females from Burundi and the least participants were 20% (12) Mozambican females from Mozambique. This indicates that most of the participants were from DRC.

### 4.3.3 Marital status of the female participants

![Graph of marital status](image)

**Key:**
- Single – both never married and single mothers.

**Figure 4.3: Marital statuses of respondents**
The highest frequency of the female participants is single with 56.7% (34) followed by 25% (15) married female refugees and lastly 18.3% (11) widows. This put forward the fact that the responses were highly affected by the respondents’ marital status since the single female refugees at TRC were dominating the sample.

4.3.4 Religious affiliation of participants

![Bar chart showing frequency of religious affiliation among participants.](image)

**Figure 4.4 Religion of participants**

Most of the participants are Christians who have 75% (45), followed by 15% (9) unaffiliated participants and lastly by 10% (6) Muslims. This depicts that the sample is Christian dominated.
4.3.5 Level of education of participants

The general consensus of the participants are educated with 65% (39) being vocationally trained, followed by 30% (18) with secondary level education and the least being 5%(3) with primary level education. This informs us that the majority of participants are empowered with vocational skills.
4.3.6 Employment status of participants

Key:

<table>
<thead>
<tr>
<th></th>
<th>Unemployed</th>
<th>Permanently Employed</th>
<th>Self-employed</th>
<th>Part-time Employment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unemployment</td>
<td>63.3%</td>
<td>23.3%</td>
<td>8.3%</td>
<td>5.0%</td>
</tr>
</tbody>
</table>

Figure 4.6 Current employment status of participants

The figure explains that 63.3% (38) of the participants are unemployed, 23.3% (14) are self-employed, 8.3% (5) and 5% (3) are permanent employees at Tongogara Refugee Camp. This put forward that the majority of female refugees are not permanently employed and they work as self-employed and as part-time employees.
4.1 NATURE OF PSYCHOLOGICAL WELLBEING AMONGST FEMALE REFUGEES AT TRC.
The nature of psychological wellbeing of female participant refugees at TRC was measured using Ryff’s six dimensions, measured on a scale of 1-6 and the researcher has analysed the scale as follows:

Table 4.1: Comprehension of Ryff’s psychological wellbeing 42 item version

<table>
<thead>
<tr>
<th>Range</th>
<th>Understanding of the range</th>
<th>Researcher’s interpretation of scores to dimensions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-3</td>
<td>Below 3.5 = agree</td>
<td>Good psychological wellbeing</td>
</tr>
<tr>
<td>3.5</td>
<td>3.5 = neutral</td>
<td>Moderate psychological wellbeing</td>
</tr>
<tr>
<td>3.51-6</td>
<td>Above 3.5 = disagree</td>
<td>Poor psychological wellbeing</td>
</tr>
</tbody>
</table>

Classification of psychological wellbeing

Key:
PWB – psychological wellbeing

Figure 4.7 Classification of psychological wellbeing
The bar graph illustrates the classification of psychological wellbeing. Good psychological wellbeing are mean scores below 3.5, moderate psychological wellbeing will be at 3.5 mean score and poor psychological wellbeing are scores above 3.5.

In the statistical analysis below, PWB is a code given to every question or item on Ryff’s psychological wellbeing scale 42 item version. The range and measurement are measurements of spread in the participant’s responses. The researcher concentrated on the mean as it suggests the level of psychological wellbeing of every participant in the given item and in summation the analysed dimension.

**Autonomy**

**Table 4.2: Mean scores for items measuring autonomy**

<table>
<thead>
<tr>
<th>PWB1</th>
<th>PWB7</th>
<th>PWB13</th>
<th>PWB19</th>
<th>PWB25</th>
<th>PWB31</th>
<th>PWB37</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.9</td>
<td>5.5</td>
<td>5.1167</td>
<td>2.4</td>
<td>5.1</td>
<td>2.25</td>
<td>1.9667</td>
</tr>
</tbody>
</table>

The table above shows the mean responses of all the participants in items measuring autonomy.

**Bar graph shows mean scores for autonomy**

**Figure 4.8 Mean scores for autonomy for all the participants**
The bar chart above illustrates a wide spread of responses on item 37. This suggests that participants had diverse answers to how their self-determination is significantly determined by the opinions of others. The general consensus however, agrees to item 19 where there is a 2.4 mean which suggests that participants all agree to be influenced by people with strong opinion. The grand mean of the participants in 3.890486 which is above 3.5 which suggests that all the participants have poor autonomy.

ENVIRONMENTAL MASTERY

Table 4.2: Mean scores for items measuring environmental mastery

<table>
<thead>
<tr>
<th>PWB2</th>
<th>PWB8</th>
<th>PWB14</th>
<th>PWB20</th>
<th>PWB26</th>
<th>PWB32</th>
<th>PWB38</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.0833</td>
<td>2.667</td>
<td>4.933</td>
<td>3.2</td>
<td>4</td>
<td>2.733</td>
<td>2.0833</td>
</tr>
</tbody>
</table>

The table above shows the mean responses of all the participants in items measuring environmental mastery

Bar graph illustrating mean scores for environmental mastery

![Bar graph illustrating mean scores for environmental mastery](image)

Figure 4.9 Mean scores for environmental mastery for all the participants
The highest mean response was on item 2 and 14 measuring environmental mastery. The least mean of 2.7333 suggests that all the female refugees who participated in this study all agree that it is challenging for them to organize their life in a fashion that gratify them. The grand mean of 3.528557143 suggests poor psychological wellbeing. On the dimension of environmental mastery, participants disagree to their potential of having dominion over environments influencing their psychological wellbeing.

**Personal Growth**

**Table 4.3: Mean scores for items measuring personal growth**

<table>
<thead>
<tr>
<th>PWB3</th>
<th>PWB9</th>
<th>PWB15</th>
<th>PWB21</th>
<th>PWB27</th>
<th>PWB33</th>
<th>PWB39</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.116</td>
<td>5.2167</td>
<td>3.9000</td>
<td>4.8000</td>
<td>2.5</td>
<td>5.2</td>
<td>3.1667</td>
</tr>
</tbody>
</table>

The table above shows the mean responses of all the participants in items measuring personal growth.

**Bar graph depicts mean scores for personal growth**

![Bar graph](image)

**Figure 4.10 Mean scores for personal growth for all the participants**
The modal mean of responses on personal growth is 5.0 in items 3, 15, 27, 33, and 39. Item 27 and item 39 on the scale are above the threshold (3.5) of having good psychological wellbeing on personal growth. These items show that participants agree that experiencing a new state of affairs brings a revolution to their former ways of doing things. However, they all agree with a pessimistic outlook that they have retired trying to make huge positive changes in their lives. The grand mean of 4.2714 proposes that all the participants have poor psychological wellbeing on the dimension of personal growth.

**POSITIVE RELATIONS**

**Table 4.4: Mean scores for items measuring positive relations**

<table>
<thead>
<tr>
<th>PWB4</th>
<th>PWB10</th>
<th>PWB16</th>
<th>PWB22</th>
<th>PWB28</th>
<th>PWB34</th>
<th>PWB40</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.25</td>
<td>4.5833</td>
<td>4.7167</td>
<td>5.1167</td>
<td>5.2000</td>
<td>5.1833</td>
<td>5.3729</td>
</tr>
</tbody>
</table>

The table above shows the mean responses of all the participants in items measuring positive relations.

**Bar graph shows mean scores for positive relations**

**Figure 4.11 Mean scores for positive relations for all the participants**
There is high prevalence of not having positive relations across most participants. The highest mean score is on item 40 and the least on item 10 which suggests diversity of responses on item 10. Female refugees who participated in the study had a grand mean of 5.0604 which suggests that most of the participants have poor psychological wellbeing on the dimension of having positive relationships.

PURPOSE IN LIFE

Table 4.5: Mean scores for items measuring purpose in life.

<table>
<thead>
<tr>
<th>Item</th>
<th>PWB5</th>
<th>PWB11</th>
<th>PWB17</th>
<th>PWB23</th>
<th>PWB29</th>
<th>PWB35</th>
<th>PWB41</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>5.25</td>
<td>4.5833</td>
<td>4.7167</td>
<td>5.1167</td>
<td>5.2000</td>
<td>5.1833</td>
<td>5.3729</td>
</tr>
</tbody>
</table>

The table above shows the mean responses of all the participants in items measuring purpose in life.

Bar chart shows mean scores for measuring purpose in life.

![Bar chart showing mean scores for purpose in life for all the participants](image)

Figure 4.12 Mean scores for purpose in life for all the participants
The bar graph shows that participants have poor psychological wellbeing on the dimension which measures purpose and meaning in life. Items 23 and 35 had a similar mean score of 5.1 and the lowest mean score is on item 41. The grand score of 4.8305 is below threshold and suggests a poor psychological wellbeing on the dimension measuring the meaning of life or the purpose of living.

**SELF- ACCEPTANCE**

**Table 4.6: Mean scores for items measuring self-acceptance**

<table>
<thead>
<tr>
<th></th>
<th>PWB6</th>
<th>PWB12</th>
<th>PWB18</th>
<th>PWB24</th>
<th>PWB30</th>
<th>PWB336</th>
<th>PWB40</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean</td>
<td>2.4833</td>
<td>5.1500</td>
<td>4.0500</td>
<td>5.3500</td>
<td>4.4667</td>
<td>4.8000</td>
<td>5.3729</td>
</tr>
</tbody>
</table>

The table above shows the mean responses of all the participants in items measuring self-acceptance.

**Bar chart shows mean scores for self-acceptance**

![Bar chart showing mean scores for self-acceptance](image)

**Figure 4.13: Mean scores for self-acceptance for all the participants**
The bar graph above depicts mean score of items measuring self-acceptance. The lowest mean score is on item 24 and the highest on item 6. Most of the participants show least scores which suggest poor psychological wellbeing on the dimension measuring self-acceptance.

SUMMARY OF THE PSYCHOLOGICAL WELLBEING OF PARTICIPANTS ON ALL DIMENSIONS

Table 4.7: Mean scores for all items measuring all the six dimensions on Ryff’s psychological wellbeing scale

<table>
<thead>
<tr>
<th>Category</th>
<th>Autonomy</th>
<th>Environmental Mastery</th>
<th>Personal Growth</th>
<th>Positive Relations</th>
<th>Purpose in Life</th>
<th>Self Acceptance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand Mean</td>
<td>3.8904857</td>
<td>3.528557143</td>
<td>4.2714</td>
<td>5.0604</td>
<td>4.8305</td>
<td>4.5247</td>
</tr>
</tbody>
</table>

The table above shows the summation of mean scores for responses of all the participants in all dimensions on the psychological wellbeing scale.

Bar chart shows a summary of mean scores for all the dimensions

Figure 4.14: Summary of mean scores for all the dimensions of psychological wellbeing of all the participants
The bar graph above presents the grand means as illustrated in the table 4.1.7 shows that participants have low mean scores of every dimension of positive functioning. This suggests that, participants have poor psychological wellbeing.

4.4 QUALITATIVE PRESENTATION AND ANALYSIS
4.4.1 RESPONSE RATE

Table 4.8 Response rates for interviewees

<table>
<thead>
<tr>
<th>Type of interview</th>
<th>Number of interviewees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Group interviews</td>
<td>10</td>
</tr>
<tr>
<td>Personal interviews</td>
<td>15</td>
</tr>
<tr>
<td>Semi-structured interviews</td>
<td>5</td>
</tr>
</tbody>
</table>

4.5 PROTECTIVE FACTORS TO THE PSYCHOLOGICAL WELLBEING OF FEMALE REFUGEES AT TRC

a) Entrepreneurship

Female refugees at Tongogara Refugee Camp engage in business. In a group interview, the female participants say:

They’ve taught us vocational skills in female refugees and we survive by doing hairdressing, rafting and weaving, vending, sewing or cooking and selling food.

b) Restoration of family links (RFL)

Red Cross Zimbabwe in partnership with Netone Zimbabwe is conducting this programme at Tongogara Refugee Camp. All refugees inclusive of female refugees have been given Netone lines to make international calls to their friends and relatives in their countries of origin. Participants say:

We feel happy when we talk to our family members at home and sometimes knowing if your relatives have died will make us move on with life without thinking too much.
c) Social networks and social support
Female refugees in the camp acknowledge how they are helped by social support systems and social capital in the community. One participant says:

*Tinohamba kuchurch, kuchikora, tinotamba nekuzorora tese kwetinonamatira, kuminda, kumusika, nekwetodzidza mabasa ekuzvishandira. Ikoko tinoite shamwari zvichiita tiwe takabatana* [We interact with friends and family members in different cycles. This creates bridging and binding social support as we interact at church, vocational centres, restaurants, at the market place and at the fields].

d) Vocational training
Key informant organizations like Noded, Terre des hommes, Goal Zimbabwe, JRS, and UNHCR work in partnership in training female refugees vocational skills in weaving, poultry, hairdressing, dressmaking and detergent/soap-making among others. Key interviewees at JRS state that:

*We create female empowerment opportunities by teaching them basic life and vocational skills. There is also social and emotional learning (SEL), conscientise women on the importance of learning, and both mothers and their children benefit from parenting and sexual and reproductive health (SRH) lessons. More so, our pastoral support program offers female referees with paraprofessional counselling, and psychosocial support. The monthly report of September revealed attended to 76 cases.*

4.6 RISK FACTORS TO THE PSYCHOLOGICAL WELLBEING OF FEMALE REFUGEES AT TRC
Environmental insecurity
Cyclone Idai has left many refugees living in tents and in houses without roof. Female refugees live with fear as they are insecure of their security and protection from wildlife from Gonarezhou Game Park which roams around the camp at night. Participants complained about this challenge saying:

*Nzou dzadya magarden edu atinorima husiku and patakauya unonzwa shumba dzichifamba* [Elephants feed on our crops at night in our garden and when we arrived here, we could hear lions roaming around the camp]
One of the participants said:

*Takaakirwa mhatso kwakuuye Cyclone ikamontoka ngemvura iya iya kwakungotipe matende amuri kungoona apapo hino apere kudurika saka mvura ikanaya tichagara sei?

[We had built houses but Cyclone Idai destroyed our houses and UNHRC has given us tents as you can see but the tents are torn now. So how will we live during the rainy season?]

**Poverty and sexual violence**

In addition to physical security, female refugees suffer emotional pain inflicted upon them by man through sexual harassment and sexual violence. Participants state that these insecurities remain veiled in obscurity as the law enforcement agencies are negligent of pursuing justice for female victims and also the victims are afraid of witchcraft. An interviewee had this to say:

*Harassment is there but whom do you report to? And if you do [muno vanhu vane mishonga vanokugadzirisa] the perpetrators will bewitch you. And because of poverty, mothers opt for child marriages to relieve themselves the burden of failing to provide for the needs of the child.*

**Patriarchy**

TRC is a multicultural community characterised by patriarchy. Issues like SGBV and interpersonal abuse of women is propagated by the patriarchal system which praises male dominion over females. One key informant states that:

*Married female refugees at TRC are aggrieved by how men are signatories of the money they receive from humanitarian organizations in partnership with UNHCR as they abuse the funding which the family relies on for their livelihood.*

**Stigma and discrimination**

Single mothers in the camp are discriminated upon by married female refugees. Participants reported fights, insults and obliteration of their properties with fire (arson) upon of allegations of being home wreckers. When they report the cases, they experience the same stigma and discrimination from the police or they will not be on duty such that some of the cases are veiled in
obscurity. More so, the stigma and discrimination can re-traumatize other female refugees. For instance, participant had this to say:

_Mimini metoka kwetu Burundi kwaajiri yamauwaji kwaivi nikoha Zimbabwe, rakini mpaka ivi nikona matatizo kwaajiri yawatu wanazidi kunifatiriya. Wanaizidi kuwesa kirenimekibiya kinafatatena wakati mumoja watoto wangu wanamu mburirwa uyote hiuyo binani usuwa moyo, cakura nina pewa hakuna shida ira, rohoyangu nasumbuka. Nayenda kukanisa iriniturize rohoyangu, Mungu anisayidiye. [I left my country because of war, sometimes hated. So now I am in Zimbabwe but I am now oppressed with fellow refugees like me. Sometimes my children are oppressed so it is heart-breaking to think that what I fled from has followed me. Food I am given, there is no problem but in my heart it’s heart-breaking. I go to church to soothe my heart]._

**Lack of documentation / legal recognition**

When asked to compare the environment in the camp and that of their home country, most participants complained about not having work permits outside the camp. Though most of them are now registered as either asylum seekers and refugees, new arrivals are no longer registered and this means that registered female refugees who are taking care of them experience maternal burden. This lack of legal recognition make female refugees to lack ontological identity / place attachment which make them be eager to grow in that environment, make positive relationships, and have meaning to live with self-regulation and respect. An aggrieved participant states this:

_They are no longer registering new arrivals and once you do not have a photo slip to show that you are a registered asylum seeker or refugee in Zimbabwe, you will neither get the aid which comes nor money. So we take care of our arriving friends and relatives but it is a burden because we cannot afford._

As one mother puts it:

_I want to work for my children and give them all they want but we are not legally recognised as capable workers outside the camp. When we go out, it is only a pass to purchase food to town and come back. It is painful for a mother to feel incompetent to please your child because they also learn with children from the Zimbabwe who have things they need._
Financial insecurity
Female refugees who are now the breadwinners and heads of their families revealed in a focus group discussion that the money they are receiving ($RTGS 100) per registered head is not sufficient for them to buy food for the family. One of the respondents in a focus group said this:

*Takagara munyika ine peace but tinoashira mare isikakwane kungwarire mpuri yeshe. Zvinhu zviri kukwira everyday zvekuti hatina chatinotenga nayo and kuenda kutown kunotenga mabhazi anodhura. [We are staying in a peaceful country but the money we are given is insufficient to purchase what we need to sustain the whole family and even if one wants to board a bus to go and buy in town, transport costs is expensive]*

In addition, another participant states that:

*Taipihwa zvekufuga, mapoto nemagumbezi uye vana vanoenda kuchikoro mahara, tinoendeswa kuchipatara mahara. Izvezvi dambudziko vakatipwa magumbezi asina mandi pasina mapoto, kana kuti cotton pasine sipo yekugezesa [We used to get blankets, pots and our children go to school for free and we access healthcare for free but the problem now is that we get blankets without mats or cotton for sanitary use without bathing soap].*

Exposure to traumatic experiences
Female refugees at Tongogara Refugee Camp explain that exposure to traumatic experiences have made them pessimistic, lose trust in people, insomniac and feel incompetent in making long trusting relationships with others. This correlates with their responses to item 10 of Ryff’s psychological wellbeing scale, 42 item version which had diverse responses that had a standard deviation of 1.61866. Exposure to interpersonal trauma has cause most of them to lose confidence in having positive, trusting and nourishing interpersonal relationships amongst each other. For instance, one Congolese respondent said this:

*Nili toka katika inchi yangu kwasababu ya vita ya ukabila. Iliyo nizuru kulingana na wanyamulenge katika province ya sud-kivu-uvira. I left my country because of tribalism. War has affected me comparing with the Banyamulenge people in South Kivu especially Uvira. [I left my country because of tribalism and war has affected me compared to Banyamulenge people in South Kivu especially Uvira].*
In addition, one participant from Burundi says:

*Nikukumbuka na liya. Kutokana na matati zi niriyo kutana nayo. Burundi [If I think of the challenges or problems I have encountered in Burundi, I will cry].*

**Pessimism**

Most participants who came from their country of origin as adolescents in school or as young adults about to go to college are pessimistic about the future. One participant responds:

*My country neglected me and I feel like my dreams are shuttered. Here they said I should repeat from form one when I came here going form four (4\textsuperscript{eme} des imanite) in my country of origin. So I was disappointed and what is the significance of learning when we cannot get work permits.*

**4.7 COPING MECHANISMS USED BY FEMALE REFUGEES AT TRC**

**Acceptance**

Participants acknowledged that in some instances, acceptance of what happened in the past and move on helped them to overcome the traumatic shock they faced. Participants in the focus group who ascribed to this emotional coping strategy say

*We are grateful about the pastoral support we receive from JRS. They teach us how to forgive and accept what happened. To move on, we were encouraged to give new meanings to our stories focus on God’s blessings.*

**Crying and positive self-talk**

Some respondents acknowledged that crying was their emotional strategy of coping with overwhelming thoughts. Others said that:

*I cry to let my inner scars heal but speaking positively makes know I can conquer all my problems.*

**Domesticating animals and subsistence farming**

Female refugees at TRC state that, ‘we domesticate poultry, and goats to save the income for other necessities.’
Living a simple life
This problem-focused coping mechanism was revealed by most of the interviewees. One of the participants said, ‘this is our little paradise.’ Participants in the group interview explained:

Though we lost our precious assets in our country and exiled to be resettled in this camp, we appreciate living a simple life with little things but we have abundance of peace.

Bicultural competence
Learning the culture, language and way of living done by Zimbabweans has made the participants to be bicultural competent. This problem-focused/ emotion focused coping strategy alleviates the emotional and physical risk factors of acculturation on female refugees positive functioning. In interviewees, participants state that:

Problem hapana pakutura. Tinotaura Shona takaenda kuchikora. Takugona kutenga nekutengesa mutown patoenda kwaMutare [We have no linguistic problems. We can now speak Shona as we learned it at school and we can now trade in Zimbabwean common vernacular language.

Music
Some female participants said that they play uplifting music that makes them forget the past or bring them closer to the Supreme Being. Thus music is an emotional coping mechanism that soothes their emotional wounds. Some of the bilingual participants said, ‘Tinoda kuridza Jah Prayzer tichitamba’ [We love playing Jah Prayzer’s songs (a Zimbabwean artist) and dance].

Social support
Most Christian interviewees acknowledged that believing in God’s intervention and hope in the resurrection helped them cope with bereavement and other psychosocial problems. Religiosity and spirituality helped them to perceive that peace will abound in the near future. Participants state that, ‘… we worship and cry together at church. God will end our problems one day.’
Sporting
Refugees in the camp are encouraged to do sporting activities during dawn and dusk to exercise the body and mind. Female refugees in the camp normally have sporting tournaments with teams outside the camp from Chibuwe, Masapingura and Maronga. A participant had this to say

*Tinomhanya, kukaba bhora ngerutamba reku'aka kuitira kuti tigwinye miiri ngerutamba mingazi ifambe zvakakanaka [We do athletics, play soccer and netball so that we strengthen our body function and to relieve stress].*

Piece-jobs and credits
Female refugees at TRC do piece jobs in nearby farms to earn extra money to by some more basic commodities. One participant says:

*Tinoenda kuchipangai kunoita magau towana ten maRTGS totengao murio nemadomasi. Pamwenio tinokwereta kumshops [We go out to Chipangai Irrigation Scheme to look for fieldwork piece jobs where they get a maximum of $RTGS 10 which will sustain them in purchasing perishables like vegetables at the end of the day. While waiting for the monthly pay-outs, some purchase goods on credit from shop owners and pay back later].*

4.8 CHAPTER SUMMARY
This chapter has discussed the nature of female refugees’ psychological wellbeing at TRC. Results of the protective factors and risk factors to the positive function of female refugees at TRC obtained from in-depth interviews were presented and analysed through thematic analysis and pictures. In this chapter, their coping mechanisms were also presented falling either as emotion-focused or problems focused strategies. Data was presented using graphs and pie charts and analysed using Microsoft Excel and SPSS version 21.
CHAPTER FIVE: DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

5.1 INTRODUCTION
A discussion of the results presented in chapter four of is done in this chapter. The researcher will discuss the findings in relation to the research questions presented in chapter one. The findings will make a comparison with other research findings proposed by other researchers. After this discussion, the researcher will make recommendations to the beneficiaries of the study.

5.2 DISCUSSION OF RESULTS
This discussion will be guided by the research objectives and questions guiding this research. The research was intended to make statistical measurement of the nature of the psychological wellbeing of female refugees at Tongogara Refugee Camp. The other objectives of the research were to have an in-depth understanding of the risk and protective factors to the psychological wellbeing of refugees at TRC. More so, the researcher intended to explain the coping mechanisms used by female refugees at TRC to enhance their positive functioning in face of adversity.

5.2.1. The nature of psychological wellbeing amongst female refugees at TRC
The overall psychological wellbeing of female refugees at Tongogara Refugee Camp was low. The grand mean for autonomy scored 3.8904857, environmental mastery was 3.528557143, personal growth was 4.2714, and positive relations were 5.0604 purposes in life were 4.8305 and self-acceptance with 4.5247. All these mean sores for the six dimensions are below 3.5 and on the disagreeing side which suggests poor psychological wellbeing. There was a wide spread or diversity in responses on items in all the six categories. The researcher synthesized the above results about the nature of the psychological wellbeing of female refugees with the risk and protective factors that were revealed by the participants to draw the following conclusions buttressed by other scholarly opinions.

Autonomy

The female participants to this study had low scores in the dimension of autonomy which suggests that they are heteronomous (controlled by group opinion). When patriarchy is king, what suffers
is the woman’s ego thus it affects their levels of self-determination and evaluation. This conclusion seconds Melgosa (2014, p110) who explains that psychological traumas have an impact on ego-development and victims portray ‘feelings of insecurities and inferiority.’ This conclusion echoes the writings of Ryan and Deci (2006) that used self-determination theory to explain that autonomy has a correlation with ego-development.

**Environmental mastery**

Results of the participant responses to items measuring autonomy revealed that female refugees at Tongogara refugee camp have poor psychological wellbeing. The uncertainties of what will happen to them (repatriation, or resettlement) make female refugees to be pessimistic and to live in limbo. Their responses reveal that dominion over the environment takes into account the interaction between the interpersonal and intrapersonal hence affirming to Bronfenbrenner’s ecological theory. Though the government of Zimbabwe has accommodated refugees in the camp and humanitarian organizations offering aid and vocational trainings, their low psychological wellbeing on the dimension of environmental mastery suggests that it takes different ecological systems for one to have confidence in their competence to benefit from their surroundings. Thus, environmental mastery takes consideration to refugee legal recognition (which upholds social and distributive justice), territoriality (how they exercise personal boundaries and space), virtual competence (how they use technology to have mastery in this advanced virtual environment defining social circles), access to physical resources (owning land and benefiting from creation), social competences and emotional intelligence (which makes them to enjoy the social environment) among others.

**Personal growth**

Undoubtedly, man grow physically given the food and time lapse but maturity of handling stressors, having a sense of direction, set a vision and mission to accomplish in life it takes more than just paying attention to primary basic needs. This is in agreement to Honneth’s position that solidarity enhances one’s self-esteem. If female refugees are given the opportunity to develop, they will realize their potential and this in turn influences their mental growth, social and spiritual
growth. Thus, when female refugees lack educational funding to advance their studies, and work permits to utilize their skill sets in the workplace environment, it takes long for them have self-directed growth.

**Positive relations**

Refugees have experienced loss, traumatic experiences and if risk factors outweigh protective factors and adaptive coping mechanisms, there will be a limited element of trust, and social competence, emotional intelligence and prosocial behaviors. This would be the ideal recipe of not forming positive relationships. Melgosa (2014) would explain that people who live in environments characterized like this experience ‘paranoid tendencies’ and forming trusting relationships with others will be a challenge. Single mothers in the camp do not have warm satisfying relationship with others because of the stigma and discrimination they face from other women in the community. This vehemently speaks to Honeth’s position that for people to cope better they should experience love.

**Purpose and meaning in life**

Life of female refugees can have meaning and purpose when there are goals to be achieved. Female refugees at TRC had poor psychological wellbeing in this dimension because their life experiences make them feel like ‘fleeing from a leopard and seek refuge to a lion’s den.’ This is so because most participants fled war and persecution only to experience yet another emotional war of racing with economic hardships and not being at liberty to exercise their liberty to work and earn a living. Some have changed their conceptualization of meaning by attaching new meanings to their lives and this is similar to what Sudanese refugees in Canada have done (Simich, Este, & Hamilton 2010; Sherwood and Liebling-Kalifani, 2012). These cognitive restructuring actions were noted by the researcher in participants who looked at the positives of staying at Tongogara Refugee Camp who defined the environment as their ‘little heaven.’ Thus, purpose and meaning of life in female refugees is not only about setting goals to achieve in life, but how female refugees direct their cognitions to sense and interpret the environments and situations they were in or are in.
**Self-acceptance**

Female refugee’s self-evaluation in this study was influenced by what the group would define the person. This can be explained by the key informant’s comment that the closed community is a patriarchal community and the collective self-rules. Thus, with the revolving world, women face huge cognitive dissonance which makes it difficult for them to make egocentric apprehension of one’s traits despite how good or bad the group thinks.

### 5.2.2 Risks factors to the psychological wellbeing of female refugees at TRC

The risk factors to the psychological wellbeing of refugees were both psychological and non-psychological. Some of these factors were SGBV, living in insecure built-in environments, patriarchy, exposure to traumatic events, lack of documentation, pessimism, insufficient funds and lack of sufficient basic needs. These findings are similar to refugee studies by Freedman, Kivilcim, and Baklacioglu (2019), Simich and Andermann (2014) and Balidemaj (2016). The risk factors explain the poor psychological wellbeing outcome from the administered Ryff’s psychological wellbeing scale, 42 version because these factors propagate the likelihood of refugee women to have poor psychological wellbeing.

### 5.2.3 Protective factors to the psychological wellbeing of female refugees TRC

Protective factors to the psychological wellbeing of female refugees in the camp that increases their likelihood of functioning positively were entrepreneurship, activities done by humanitarian organizations within the camp like vocational training and RFL, social support and creating social networks. These protective factors are alike to studies done by Subedi (2016), Ramier (2016), and Gladden (2012). As propounded by Honneth’s theory these protective factors offer love, solidarity and helps to uphold female rights which are all prerequisites to self-esteem, self-respect and self-confidence. These activities buffer stressors which hinder positive functioning.

### 5.2.4 Copying mechanisms used by female refugees at TRC

Female refugees in the camp embarked on two adaptive coping strategies that is, emotion focused and problem focused coping strategies. Emotion-focused coping mechanisms like crying and
positive self-talk have a relationship to female refugee coping studies done by Haynes (2013). Female refugees at TRC do piece jobs in nearby farms, and domesticate animals like goats and guinea fowls as a problem-focused mechanism to sustain family livelihood. Emotional focused coping mechanisms similar across literature in chapter two were positive self-talk, social support and social capital (Boateng, 2006; Kendrik, 2010; and Wanjiku, 2014). These strategies help to curb risk factors to female refugee’s psychological wellbeing. However, participants in this study also mention listening to, music and having sporting activities as their coping mechanisms too. These activities reinforces psychological wellbeing as Diehl and Ludington (2011) state that they produce feel good hormones (endorphins) which curtail levels of cortisol which aggravates stress. In addition, female refugees at TRC engage in entrepreneurship or businesses like refugee participants in Wanjiku (2014, p.64).

5.2.5 Limitations
Research findings from this study cannot be generalised to other refugee populations since the research is confined to a sample of 30 female refugees at Tongogara Refugee Camp in Zimbabwe.

5.3 CONCLUSIONS TO THE STUDY
The discussion above is evidently suggesting that the psychological wellbeing of female refugees is low. As a closed multicultural community, females in the camp are at risk of negative functioning because the system propagates rule by man hence issues like SGBV, stigma and discrimination, impotency to make decisions, among others can saw the seed of pessimism, negative thinking, and traumatic shock. However adaptive coping mechanisms and protective factors within the individual and community helps to shield these risks factors to the psychological wellbeing of female refugees in the camp.

5.4 RECOMMENDATIONS
The research is making these recommendations to:
5.4.1 The Ministry of Public Service, Labor and Social Welfare –
TRC is a closed community and with limited interaction with the host community, they do not feel that they can have mastery over the environment and without work permits there is no personal growth felt or achieved hence the ministry should also give female refugees work permits for competent refugees while monitoring them for national security reasons.

5.4.2 The Ministry of Primary and Secondary Education –
Most students are reluctant to attend lessons because of the attitude of teachers and difficulty in understanding English and Shona as it is the only language of instruction. Teachers should not only be taught special needs education for the disabled but also how to teach students who have suffered physical and emotional trauma. Informal education should also be done for females above 18 at St Michael’s Secondary school considering levels of illiteracy in the camp.

5.4.3 The Zimbabwe Republic of Zimbabwe –
Female refugees complain about the incompetence of police in handling gendered cases hence the performance evaluation of the police of the Victim Friendly Unit police should be ecological, which means that the community they serve should evaluate their services as well.

5.4.4 Non-governmental organizations –
They should engage in non-aid activities that integrate the host community and the refugee community. Participatory approaches like having sports galas and musical concerts synthesized with behaviour change awareness campaigns can be done.

5.4.5 Professional Boards of Psychology –
To monitor the psychological services offered to refugees. Paraprofessional can be incompetent in offering proper psychological first aid and can do more harm than good to traumatised communities or the individuals. Most participants to this study will benefit from psychotherapies (transpersonal therapy, family therapy, acceptance and commitment therapy) done by competent professionals.
5.4.6 The Camp Administrator –
To organize counselling and psychotherapy of employees at Tongogara Refugee camp because listening to the plight and stories of traumatised people can also make employees suffer vicarious trauma. These employees also need time out so plan recreational services for the employees at Tongogara.

5.4.7 Researchers –
There is still a knowledge gap in psychological research on male refugees and employees working with refugees. From this thesis one can investigate the correlation between psychological wellbeing with resilience, social competence, happiness, ethical thinking in psychological practice among others.

5.5 SUMMARY
The chapter gave a summary of the research finding in cognizance to the research objectives and questions. The discussion of results has mapped the recommendations put forward by the researcher.
REFERENCES


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APPENDICES
Appendix A: MSU Research Letter

Midlands State University
Established 2000
P BAG 9055
GWERU
Telephone: (263) 54 260404 ext 2156
Fax: (263) 54 260233/260311

FACULTY OF SOCIAL SCIENCES
DEPARTMENT OF PSYCHOLOGY

Date: 14 FEBRUARY 2019

To whom it may concern

Dear Sir/Madam

RE: Request For Assistance with Dissertation Information for
Majoni Annie Faith
Registration Number: R137416

MASTERS IN COMMUNITY PSYCHOLOGY DEGREE

This letter serves to introduce to you the above named student who is studying for a Master of Science Degree in Community Psychology and is in his/her final year. All Midlands State University students are required to do research in their final year of study. We therefore kindly request your organisation to assist the above-named student with any information that he/she require to do his/her dissertation.

Topic: Psychological Wellbeing of Female Refugees at Tongogara Refugee Camp

For more information regarding the above, feel free to contact the Department.

Yours faithfully

[Signature]
N. Neube
A/Chairperson
Appendix B: Permission to conduct research

PROVINCIAL SOCIAL WELFARE OFFICER
MANICALAND
Private Bag Q 7743
Mutare

Official Communications should not be addressed to individuals

Telephone: (02020) 64615

The Director
Human Resources
Department of Social Welfare
Causeway
Harare

3 September 2019

Dear Sir

Re: RECOMMENDATION FOR MAJONI ANNIE FAITH TO CARRY OUT A RESEARCH IN TONGOGARA REFUGEE CAMP

Majoni Annie Faith, Registration Number R137411E, is a Master of Science Degree in Community Psychology and is in her final year at Midlands State University. All Midlands State University students are required to do research in their final year of study.

Majoni Annie Faith’s topic is “Psychological Wellbeing of female refugees at Tongogara Refugee Camp”.

Please find attached:
- Letter from Midlands State University
- Project proposal

Thank you.

M.J. Machisa
For: Provincial Social Welfare Officer
Manicaland
REQUEST FOR PERMISSION TO CONDUCT A RESEARCH STUDY AT TONGOGARA REFUGEE CAMP: DEPARTMENT OF SOCIAL WELFARE,
MINISTRY OF PUBLIC SERVICE, LABOUR AND SOCIAL WELFARE.

Please be advised that your application for permission to conduct a research at Tongogara Refugee Camp in the Ministry of Public Service, Labour and Social Welfare has been approved.

The approval is on condition that you submit your final report to the Director Human Resources for verification and that your research will be for academic purposes only.

D. F. Chamakupa
Human Resource Department
MINISTRY OF PUBLIC SERVICE, LABOUR AND SOCIAL WELFARE

Cc: Head of Tongogara Refugee Camp

The student managed to conduct the research at Tongogara Refugee Camp. We however would like to request the student to submit the final report on the research.
Appendix C: Demographic Questionnaire

In English

(Please tick ☐ or fill in where applicable)

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>How old are you?</td>
<td></td>
</tr>
<tr>
<td>What is your country of origin?</td>
<td>DRC, Ethiopia,</td>
</tr>
<tr>
<td></td>
<td>Rwanda</td>
</tr>
<tr>
<td>What is your marital status?</td>
<td>Divorced/ Separated, Married, Partnered, Single, Widowed</td>
</tr>
<tr>
<td>What is your religious affiliation</td>
<td>Buddhist, Christianity, Muslim, Orthodox, Unaffiliated, Other (specify)</td>
</tr>
<tr>
<td>What is your level of education?</td>
<td>Illiterate, Literate, Primary, Secondary</td>
</tr>
</tbody>
</table>
- College (undergraduate/postgraduate/vocational qualification)

<table>
<thead>
<tr>
<th>What is your current employment status?</th>
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<tbody>
<tr>
<td>- Casual</td>
</tr>
<tr>
<td>- Fulltime/ Permanent</td>
</tr>
<tr>
<td>- Part-time</td>
</tr>
<tr>
<td>- Self-employed</td>
</tr>
<tr>
<td>- Unemployed</td>
</tr>
<tr>
<td>- Volunteer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Are you a member of any club or association?</th>
</tr>
</thead>
<tbody>
<tr>
<td>(If yes, fill in the name and your position)</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>
**In Swahili**

**SWALI LA DEMOGRAPHIC**

(Tafadhali tibu ✓ au jaza pale inapofaa)

<table>
<thead>
<tr>
<th>Una miaka mingapi?</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Ni c wako ni upi ountry ya asili?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• DRC</td>
</tr>
<tr>
<td>• Ethiopia</td>
</tr>
<tr>
<td>• Rwanda</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Je! Hali yako ya ndoa ni ipi?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Kugawanywa / Kutengwa</td>
</tr>
<tr>
<td>• Kuolewa</td>
</tr>
<tr>
<td>• Kushirikiana</td>
</tr>
<tr>
<td>• Moja</td>
</tr>
<tr>
<td>• Mjane</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Je! Ushirika wako unaostahiki ni nini?</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Wabudhi</td>
</tr>
<tr>
<td>• Ukristo</td>
</tr>
<tr>
<td>• Mwislamu</td>
</tr>
<tr>
<td>• Orthodox</td>
</tr>
<tr>
<td>• Haifanyi kazi</td>
</tr>
<tr>
<td>• Nyingine (taja)</td>
</tr>
</tbody>
</table>
**Ni l wako ni upi Evel ya e ducation ?**

- Msomi
- Fasihi
- Msingi
- Sekondari
- Chuo (shahada ya kwanza / shahada ya kwanza / udahili wa ufundi)

**Je! Ni nini hali ya ajira kwako ?**

- Kawaida
- Muda / kudumu
- Muda
- Kazi binafsi
- Isiyo na ajira
- Kujitolea

**Je! Wewe ni mwanachama wa kilabu chochote aussociation ?**

(Ikiwa ndio, jaza jina na msimamo wako)

<table>
<thead>
<tr>
<th>Ndio</th>
<th>Hapana</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
3. Ryff’s Psychological Well-Being Scales (PWB), 42 Item version

Please indicate your degree of agreement (using a score ranging from 1-6) to the following sentences.

<table>
<thead>
<tr>
<th>Sentence</th>
<th>Strongly disagree</th>
<th>Strongly agree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I am not afraid to voice my opinions, even when they are in opposition to the opinions of most people.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>2. In general, I feel I am in charge of the situation in which I live.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>3. I am not interested in activities that will expand my horizons.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>4. Most people see me as loving and affectionate.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>5. I live life one day at a time and don’t really think about the future.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>6. When I look at the story of my life, I am pleased with how things have turned out.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>7. My decisions are not usually influenced by what everyone else is doing.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>8. The demands of everyday life often get me down.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>9. I think it is important to have new experiences that challenge how you think about yourself and the world.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>10. Maintaining close relationships has been difficult and frustrating for me.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>11. I have a sense of direction and purpose in life.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>12. In general, I feel confident and positive about myself.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>13. I tend to worry about what other people think of me.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>14. I do not fit very well with the people and the community around me.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>15. When I think about it, I haven’t really improved much as a person over the years.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>16. I often feel lonely because I have few close friends with whom to share my concerns.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>17. My daily activities often seem trivial and unimportant to me.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>18. I feel like many of the people I know have gotten more out of life than I have.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>19. I tend to be influenced by people with strong opinions.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>20. I am quite good at managing the many responsibilities of my daily life.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td>21. I have the sense that I have developed a lot as a person over time.</td>
<td>1 2 3 4 5 6</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>22.</td>
<td>I enjoy personal and mutual conversations with family members or friends.</td>
<td>1</td>
</tr>
<tr>
<td>23.</td>
<td>I don’t have a good sense of what it is I’m trying to accomplish in life.</td>
<td>1</td>
</tr>
<tr>
<td>24.</td>
<td>I like most aspects of my personality.</td>
<td>1</td>
</tr>
<tr>
<td>25.</td>
<td>I have confidence in my opinions, even if they are contrary to the general consensus.</td>
<td>1</td>
</tr>
<tr>
<td>26.</td>
<td>I often feel overwhelmed by my responsibilities.</td>
<td>1</td>
</tr>
<tr>
<td>27.</td>
<td>I do not enjoy being in new situations that require me to change my old familiar ways of doing things.</td>
<td>1</td>
</tr>
<tr>
<td>28.</td>
<td>People would describe me as a giving person, willing to share my time with others.</td>
<td>1</td>
</tr>
<tr>
<td>29.</td>
<td>I enjoy making plans for the future and working to make them a reality.</td>
<td>1</td>
</tr>
<tr>
<td>30.</td>
<td>In many ways, I feel disappointed about my achievements in life.</td>
<td>1</td>
</tr>
<tr>
<td>31.</td>
<td>It’s difficult for me to voice my own opinions on controversial matters.</td>
<td>1</td>
</tr>
<tr>
<td>32.</td>
<td>I have difficulty arranging my life in a way that is satisfying to me.</td>
<td>1</td>
</tr>
<tr>
<td>33.</td>
<td>For me, life has been a continuous process of learning, changing, and growth.</td>
<td>1</td>
</tr>
<tr>
<td>34.</td>
<td>I have not experienced many warm and trusting relationships with others.</td>
<td>1</td>
</tr>
<tr>
<td>35.</td>
<td>Some people wander aimlessly through life, but I am not one of them.</td>
<td>1</td>
</tr>
<tr>
<td>36.</td>
<td>My attitude about myself is probably not as positive as most people feel about themselves.</td>
<td>1</td>
</tr>
<tr>
<td>37.</td>
<td>I judge myself by what I think is important, not by the values of what others think is important.</td>
<td>1</td>
</tr>
<tr>
<td>38.</td>
<td>I have been able to build a home and a lifestyle for myself that is much to my liking.</td>
<td>1</td>
</tr>
<tr>
<td>39.</td>
<td>I gave up trying to make big improvements or changes in my life a long time ago.</td>
<td>1</td>
</tr>
<tr>
<td>40.</td>
<td>I know that I can trust my friends, and they know they can trust me.</td>
<td>1</td>
</tr>
<tr>
<td>41.</td>
<td>I sometimes feel as if I’ve done all there is to do in life.</td>
<td>1</td>
</tr>
<tr>
<td>42.</td>
<td>When I compare myself to friends and acquaintances, it makes me feel good about who I am.</td>
<td>1</td>
</tr>
</tbody>
</table>
Scoring Instruction:

1) Recode negative phrased items: # 3, 5, 10, 13,14,15,16,17,18,19, 23, 26, 27, 30,31,32, 34, 36, 39, 41. (i.e., if the scored is 6 in one of these items, the adjusted score is 1; if 5, the adjusted score is 2 and so on…)

2) Add together the final degree of agreement in the 6 dimensions:
   a. Autonomy: items 1,7,13,19,25, 31, 37
   b. Environmental mastery: items 2,8,14,20,26,32,38
   c. Personal Growth: items 3,9,15,21,27,33,39
   d. Positive Relations: items: 4,10,16,22,28,34,40
   e. Purpose in life: items: 5,11,17,23,29,35,41
   f. Self-acceptance: items 6,12,18,24,30,36,42
Appendix E: Participant Interview Guide

Objectives:
To obtain first-hand information or primary raw data from participants
To observe and record participant non-verbal cues and cathartic moments

Guiding Questions:
- What were the push factors that led you to leave your country of origin?
- What were your experiences during your journey to exile?
- How would you describe the environment in the camp compared to your country or origin?
- What do you do when you feel distressed or overwhelmed by life circumstances or situation?
- What opportunities were provided to you that have contributed to your psychological wellbeing?
- What challenges have you encountered or still present that either promote or hinder your psychological wellbeing?
Appendix F: Key informant guide

KEY INFORMANT INTERVIEW

Objectives:
To obtain primary source data from organizations and gatekeepers working directly with female refugees in the camp

Name of organization or pseudo name of key informant:

Guiding Questions:

➢ What challenges do female refugees encounter in the camp that hinders their psychological wellbeing?
➢ How would you describe the relationship between female refugees in the camp and the host community?
➢ What projects or activities that you do or have done with female refugees to unlock their potential improve or train new skill sets and increase their psychological wellbeing?
➢ Are there any interacting projects or activities between the refugee community and the host community?

N.B: The researcher will probe in some questions which require clarity but if it seem to delve into their privacy, and wish not to answer, participants are not obliged to answer (they can choose not to answer or withdraw from participating).
Appendix G: Focus group guide

Objectives:

To observe group interaction and social competencies
To observe and record their experiences as groups or on a relational level

Guiding Questions:

- What is your understanding of psychological wellbeing?
- Do you get any humanitarian aid or psychosocial support? If yes, from who, and how has it helped you to have positive functioning?
- How many of you are affiliated to a social club or association? And how has this affiliation helped you?
- What issues do you feel should be addressed that have an impact on female refugee psychological well-being
INFORMED CONSENT TO PARTICIPATE IN A RESEARCH STUDY

Research Topic:
Psychological wellbeing of female refugees at Tongogara Refugee Camp.

Name of researcher:
Majoni Annie Faith
+263775200019 – faymajoni@gmail.com

Institution:
Midlands State University, Gweru.

______________________________

INFORMED CONSENT
This form seeks for your written agreement to participate in an academic research with the above mentioned topic. Please read the information below which will take you through the research purpose, data collection procedure and your rights as a participant.

INTRODUCTION
My name is Annie Faith Majoni. I am a postgraduate student at Midlands State University, Gweru, Zimbabwe. This research is carried out in partial fulfillment of the requirements for a Master of Science in Community Psychology Degree. You are being requested to participate in this study without coercion but on voluntary basis.
Research Objective
This psychological research is a systematic way of gathering, analyzing, and interpreting data on the nature of female refugee psychological wellbeing, risk and protective factors to their psychological wellbeing and coping mechanisms used by female refugees.

Data collection procedure
- Female refugees in this camp whose age fall within the range of 18 years to 60 years qualify to volunteer as participants in this study.
- The researcher will administer one psychological wellbeing scale, interview the participant(s) and conduct a focus group session with all the participants at a place convenient for the participants or provided by the Camp Administrator.
- The research will ask questions about how you cope with or adjust to life circumstances, and what aspects either promote or hinder your positive functioning.

Responsibilities of participant(s)
- Complete the psychological wellbeing scale with honesty, thoughtfulness and accuracy.
- Response(s) should communicate to your personal experiences.

Rights of participant
Informed consent: The participant should give a written agreement after understanding all the aspects of the research. Thus, a decision comes after the research debriefs the participants about the study.

Autonomy and Withdrawal: The researcher respects participant’s right to self-governing thus after reading the requirements and procedures of research, the participant had a right to decision making which can comprise of withdrawing from the study.
N.B: CONFIDENTIALITY: Information gathered here is for academic purposes and it will not be publicly disclosed without consent or special legal authorization.

Informed Consent Documentation
Participants will be given a copy of the informed consent form to sign and date.
Disclaimer:

I, (participant) declare that I have read and understood all the above and by signing this form, I am confirming that I have volunteered to take part in this study and the researcher had debriefed clearly about the study.
FOMU YA KUZUNGUMZA KWA KISINGA

KUFANYA KUFANYA KUFUNGUA KESI YA KUFUNZA UFUNZO

Mada ya Utafiti :
Ustawi wa kisaikolojia wa wakimbizi wa kike katika Kambi ya Wakimbizi ya Tongogara.

Jina la mtafiti:
Majoni Annie Imani
+263775200019 - faymajoni@gmail.com

Taasisi :
Chuo Kikuu cha Jimbo la Midlands, Gweru.

KUFANIKIWA KUFANYA
Njia hii inatafuta makubaliano yako ya kuhusika ili kushiriki katika utafiti wa kitaalam na mada iliyotajwa hapo juu. Tafadhali soma habari hapa chini ambayo itachukua wewe kwa madhumuni ya utafiti, utaratibu wa ukusanyaji wa data na haki zako kama mshiriki.

UTANGULIZI

Lengo la Utafiti
Utafiti huu wa kisaikolojia ni njia ya utaratibu wa kukusanya, kuchambua, na kutafsiri data juu ya asili ya utawala wa kisaikolojia wa kisaikolojia wa kike, hatari na kinga juu ya utawala wao wa kisaikolojia na njia za kukabiliana na zinazotumiwa na wakimbizi wa kike.
Utaratibu wa ukusanyaji wa data

- wakimbizi wa kike katika kambi huu ambao umri kuanguka ndani ya mbalimbali ya miaka ya miaka 18 ya ya 60 kufuzu kwa kujitolea kama washiriki katika utafiti huu
- mtafiti kusimamia moja ya kisaikolozia ustawizi kikubwa, mahojiano mshiriki (s) na kufanya lengo kundi kikao na washiriki wote kwa nafasi rahisi kwa washiriki au zinazotolewa na Camp Msimamizi.
- utafiti kuuliza maswali kuhusu jinsi kukabiliana na au kurekebisha na mazingira ya maisha, na nyanja ama kukuza au kuzuia utendaji kazi yako nzuri.

Majukumu ya washiriki

- Kukamilisha kisaikolozia ustawizi wadogo na ukweli, thoughtfulness na usahihi.
- Response (s) lazima kuwasilisha kwa uzoefu wako binafsi.

Haki za mshiriki

*Dhibitisho inayojulikana:* Mshiriki anapaswa kutoa makubaliano ya maandishi baada ya kuelewa mambo yote ya utafiti. Kwa hivyo, uamuzi unakuja baada ya utafiti kuwafanya washiriki juu ya utafiti.

*Kujitolea na Kuachana:* Mtafiti anaheshimu haki ya mshiriki ya kusimamia mwenyewe baada ya kusoma mahitaji na taratibu za utafiti, mshiriki alikuwa na haki ya kufanya maamuzi ambayo inaweza kujumuisha kutoka kwa masomo.

**NB: KUTEMBELEA:** Habari iliyokusanywa hapa ni kwa sababu za kitaaluma na *haitatolewa* wazi bila idhini au idhini maalum ya kisheria.

Hati ya Hati ya Ujuzi

Washiriki watapewa nakala ya fomu ya idhini iliyo sahihi ya kutia saini na tarehe.

Kanusho:

Mimi, (mshiriki) natangaza kuwa nimesoma na kuelewa yote hapo juu na kwa kusaini fomu hii, ninahakikisha kuwa nimejitolea kushiriki kwenye utafiti huu na mtafiti alikuwa amejitolea wazi juu ya utafiti huu.
Name of student:  Majoni Annie Faith  
Registration number:  R137411E  
Name of supervisor:  Mr. Mupedziswa

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic Discussed</th>
<th>Supervisor’s Comment(s)</th>
<th>Student Signature</th>
<th>Supervisor’s Signature</th>
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<tbody>
<tr>
<td>11-02-19</td>
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<td>Change topic</td>
<td></td>
<td></td>
</tr>
<tr>
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<td>Topic approved</td>
<td></td>
<td></td>
</tr>
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<td>Rework</td>
<td></td>
<td></td>
</tr>
<tr>
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<td>Approved and proceed</td>
<td></td>
<td></td>
</tr>
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<td>Rework</td>
<td></td>
<td></td>
</tr>
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<td>17-05-19</td>
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<td></td>
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<tr>
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<td>Rework</td>
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<td></td>
<td></td>
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STUDENT’S SIGNATURE  

SUPERVISOR’S SIGNATURE
Appendix J - Turn it in report
### Appendix K: FREQUENCIES

#### Statistics

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# Appendix L: Marking guide

## A GUIDE FOR WEIGHTING A DISSERTATION

**NAME OF STUDENT:** ………………………………………………………..

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| **A** RESEARCH TOPIC AND ABSTRACT  
Clear and concise | 5 | | |
| **B** PRELIMINARY PAGES  
Title page, approval form, release from, dedications, acknowledgement, appendices, table of contents | 5 | | |
| **C** AUDIT SHEET/PROGRESSION  
Clearly shown on the audit sheet | 5 | | |
| **D** CHAPTER 1  
Background, statement of the problem, significance of the study, research questions, objectives, hypothesis, assumptions, purpose of the study, delimitations, limitations, definition of terms | 10 | | |
| **E** CHAPTER 2  
Addresses major issues and concepts of the study, findings from previous work, relevance of literature to the study, identifies knowledge gap and subtopics | 15 | | |
| **F** CHAPTER 3  
 Appropriateness of design, target population, population sample, research tools, data collection procedures, presentation and analysis | 15 | | |
| **G** CHAPTER 4  
Findings presented in a logical manner, tabular data properly summarised and not repeated in the text | 15 | | |
| **H** CHAPTER 5  
Discussion (10)  
Must be a presentation of generalizations shown by results; how results and interpretations agree with existing and published literature, relates theory to practical implications.  
Conclusions (5)  
Ability to use findings to draw conclusions  
Recommendations (5) | 20 | | |
| **F** Overall presentation of dissertation | 5 | | |
| **G** References | 5 | | |
| **Total** | 100 | | |

**MARKER:** ……………………………………………**SIGNATURE:** ……………………………………………**DATE:**………………

**MODERATOR:** ……………………………………………**SIGNATURE:** ……………………………………………**DATE:**………………