AN ASSESSMENT OF THE PSYCHOSOCIAL AND ECONOMIC IMPACTS OF OPERATION LINDA NCHI ON KDF SOLDIERS AND THEIR FAMILIES

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DECLARATION

I hereby declare that this research project is my original work and has not been presented for academic award or qualification in any institution of higher learning

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This research project has been submitted for examination with my approval as the assigned University Supervisor.

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DEDICATION

I dedicate this Research Project to my late father, Mr. Cheney Richard Njaro Wanjohi, whose support to see me through this journey was immeasurable. If only he had lived to see it come to fruition. Much appreciation to my mother, Mary Carmela Njaro, my son Ivan Njaro and the entire Njaro's family for prayers, words of encouragement, and support.

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ABSTRACT

Since Operation Linda Nchi started, the war has claimed several lives, especially some Kenyan soldiers deployed in Somalia. Some Kenya Defense Forces soldiers have been left paralyzed, while others still suffer from post-traumatic stress disorders. Some returnees have found it difficult to integrate into society on return, while some feel abandoned by the state after such fierce combat. In all the cases, the families of these soldiers seem to be suffering both psychosocially and economically. There is evidence that, upon return, the soldiers tend to suffer more than deployment. Some of the family members also end up spending huge sums of money to treat their beloved ones. Therefore, this study arose against this backdrop to explore the psychosocial and economic impacts of Operation Linda Nchi on KDF soldiers and their families.

Specifically, the study assessed the challenges facing soldiers' families before, during, and after the operation, the economic effects of Operation Linda Nchi on soldiers' families, and the psychosocial effects of Operation Linda Nchi on soldiers' families. The study was guided by Abraham Maslow's need theory, which attempts to interrogate the human being's needs and ways in which he or she tries to achieve these needs. The study employed qualitative and quantitative techniques to collect data in the military, ex-soldiers, soldiers' families, war journalists, foreign policy practice, and technology. Desk research was also embraced where in-depth interviews were used for qualitative information. The study used 60 respondents as the sample size where key informant interviews; group discussion based on quantitative research technique; in-depth interviews based on the qualitative research method; government, non-government, and other research institutions records; and, library research was conducted. From the results and responses of the respondents, it emerged that military families were the first casualties when it comes to matters of conflict. It was concluded that the challenges experienced because of this war were such as lack of regular communication, separation from families, and education of their children. They also received many other benefits, for example, subsidized health care, tuition assistance, and housing allowances. It was also concluded that isolation was experienced among the soldier's families in the deployment cycle, which resulted in high rates of depression among the spouses, marital strain, PTSD. From these findings, it was recommended that the service providers and policy informers must comprehend the social setting and the requirements of soldiers' spouses and their children to improve the military's programs and soldiers' families.

Further, effort needs to be made towards providing counseling services to permit both the military officer and his family to access the respective services with convenience and confidentiality. Also, there is a necessity to stabilize bereaved families before compensation money is received and to transition from a military family to a civilian one. Moreover, the responsibility of taking care of those left behind, particularly the children, should be taken over by the society that the soldier was protecting. As a way of expressing gratitude for the sacrifices made, the responsibility to educate children whose fathers died while defending the nation should be taken over by the state at public expense as is the practice in other advanced militaries; that KDF adopts a one-for-one policy whereby a sibling or any other close relative to the deceased soldier is recruited into the military so that there is continued financial support, enhanced hope, and reduced stress to the families. Such a policy would portray KDF as an empathetic organization and appreciate the sacrifices made by its members. Finally, KDF needs to develop well-researched intervention programs for military children to promote the military family's general well-being.

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ABBREVIATION AND ACRONYMS

AMISOM	African Union Mission to Somalia
DEFCO	Defence Forces Canteen Organization
DOD	Department of Defense
GAO	Government Accountability Office
HIV	Human Immunodeficiency Virus
ICU	Islamic Courts Union
IGAD	Intergovernmental Authority on Development
KDF	Kenya Defense Forces
MIA	Missing in Action
PTSD	Post-Traumatic Stress Disorder
TBI	Traumatic Brain Injuries
TFG	Transitional Federal Government
UN	United Nations
UNOSOM	United Nations Operation in Somalia
US	United States

CHAPTER ONE

INTRODUCTION AND BACKGROUND TO THE STUDY

1.0 Introduction

This study assesses the socio-economic and psychological impacts of Kenyan soldiers during the deployment and after together with their families. Kenya Defense Forces in Kenya is used as a case to illustrate some of these challenges facing military personnel and their families. Operation Linda Nchi was and is still stressful, complex, and has left many casualties. Some of the stressors that military personnel experience leave destructive repercussions. For instance, some of them miss their families during the operation; this interferes with their morale hence interfering with their cohesion during operations. This makes some soldiers find themselves in an awkward position hence resort to alcohol and drug abuse.¹

The study is premised on the understanding that war is here to stay, and since man exists, war is inevitable. Wars have had positive and negative impacts. Many revolutions leading to positive changes of regimes have been sired through struggle, conflict, and war, trees of freedom have been watered time over time by the blood of revolutionists.² In war theatres, main characters tend to be the cavalries, infantry, foot soldiers, among others. Therefore, it is evident that many soldiers have suffered the wrath of war oracles and their families being left dejected and in solace.

War in the 21st century has left many soldiers' families licking their wounds and regretting the consequences. The modus operandi in battle zones have tremendously changed with the new technology used in the production of ammunitions hence changing ways and modus operandi by which soldiers today engage each other on the battlefield. Many fatalities, displacement of population, and destruction of property have been registered. Back home, soldiers' families have been left in agony, trauma, and some even regretting why their kins joined the military service. Despite the revolution in carrying out military operations, soldiers remain the first line of defense hence at the risk of being victims of the fierce exchange of guns on the battlefields.

¹ Ballone, E. (2000). Factors Influencing Psychological Stress Levels of Italian Peacekeepers in Bosnia. Military Medicine, 65:911-915.

² Holdstock D. War: from humanitarian relief to prevention. In: McKee M, Garner P, Stott R, editors. *International co-operation in health.* Oxford: Oxford University Press; 2001. pp. 109–126.

1.1 Background to the Study

War is as old as man's existence. Many archeologists have been unable to date war and where it all began. Many scholars have tried to dig deeper into what could be the possible causes of war. They, however, differ based on their theoretical inclination. For instance, there is a big difference between realists and idealist scholars when interrogating possible causes of war. Realists like Kenneth Walts and Hans Morgenthau staunchly believe that war is caused majorly by the nature and behavior of man.³ As cited in Waltz, Hobbes posits that man is naturally evil and, often than not, driven by his ego and not reason. He is a man born in anarchy hence thrives in anarchy as he tries to advance his selfish interests.

On the other hand, idealists such as John Locke, Immanuel Kant, and Jean-Jacques Rousseau argue that man is good. Therefore, the war we witness results from the structures and institutions that perpetuate war and denounce peace.⁴ Therefore, one would ask himself or herself what could be the possible cause of war in Somalia and the declaration of the famous Operation Linda Nchi by the Kenyan state.

Wars do not come from anything; they start from a conflict that finally grows and develops into a war if not well mitigated or somewhat wrongly resolved. Some scholars argue that Somalia vs. Kenya case did not demand hard power but rather soft power. Others even argue that the Kenyan authorities rushed into intervening in Somalia and, thus, advance the narrative of prime time to resolve conflict. Soft power scholars such as Joseph Nye and Robert Keohane advance diplomatic means, cultural exchange, education, and economic assistance to prevent war or resolve conflict.⁵ If Kenya was to support Somalia, would Al Shabbab emerge? Didn't Kenya support her neighbor in nation-building, was Operation Linda Nchi justified and anchored in international law, and was the conflict a loss to all the two parties, or could it have left more repercussion to Kenya than her neighbor Somalia?⁶ These are some of the pertinent issues that keep mind-boggling scholars interested in analyzing Operation Linda Nchi, which seems to have taken longer than anticipated.⁷

³ Waltz, K. *Man, The State, And War*. NY: Columbia Univ. Press, 2001.

⁴ Locke, John, Woolhouse (ed.), An Essay Concerning Human Understanding, New York: Penguin Books, 1997.

⁵ Nye, J. *Soft Power*: The Means to Success in World Politics, New York: Public Affairs, 2004 p11.

⁶ Joint Communique – Operation Linda Nchi". Kenya High Commission, Tanzania. Archived from the original on 16 August 2012. Retrieved 25 September2013.

⁷ The Kenyan Military Intervention in Somalia" (PDF). International Crisis Group. 15 February 2012. Archived from the original (PDF) on 23 September 2015. Retrieved 10 June 2015.

1.1.1 Historical Background of Operation Linda Nchi

Since its establishment, KDF had never gone to another country to intervene against a group such as Al-Shabab. The Al Shabab had carried out numerous cross-border kidnappings and attacks on Kenyans living close to the Kenya-Somalia border; this was seen as a violation of Kenya's sovereignty and Kenya's territorial integrity.⁸

The entry of KDF into Somalia was conducted by an operation coded Linda Nchi, an operation seen as a solution to the two-decade conflict in Somalia, a conflict that started after the ouster of Mohammed Siad Barre in 1992.⁹ The ouster of Barre through Somalia into a miasma of confusion characterized by anarchy and lawlessness. With anarchy, other ills and security threats found fertile soil for their growths and developments. Some of the militia groups sprung up within the clan setup. These militias later engaged in bloody rivalries on which the clan needed to control what, when, and how?¹⁰ Somali would later become ungovernable, splitting into three segments: Jubaland, Puntland, and Somaliland. Many people were consequently displaced hence the calls for the need for humanitarian assistance.¹¹ The KDF walked in to mitigate the crisis in Somalia and pacify the region by wiping the Al Shabaab.

1.2 Statement of the Research Problem

Kenya Defense Forces went to Somalia in 2011 on order by then President of Kenya Mwai Kibaki and the country's minister of Internal Security and Defence Hon George Saitoti. Since the war started, the war has claimed many lives, especially some Kenyan soldiers deployed in Somalia. Some Kenya Defence Forces soldiers have been left paralyzed, while others still suffer from post-traumatic stress disorders. Some returnees have found it difficult to integrate into society on return, while some feel abandoned by the state after such fierce combat. In all the cases, the families of these soldiers seem to be suffering both psychosocially and economically. Scholars argue that some family members frequent the health facilities during the war, unlike before these soldiers were deployed.¹² There is evidence that, upon return, the soldiers tend to suffer more than

⁸ P. T. Migue, O. M. Oluoch, P. M. Njuguna, and C. O. Imbiakha, (2014). Operation Linda Nchi: Kenya's Military Experience in Somalia, Nairobi, Kenya Literature Bureau, pp.34-35.

⁹ A. A. Mohamoud, (2006). State Collapse and Post-Conflict Development in Africa: The Case of Somalia (19602001), Purdue, Purdue University Press, p.16.

¹⁰ Ibid, pp.16-17.

¹¹ Ibid, p.17

¹² T. S. Knapp, and S. J. Newman, Variables Related to the Psychological Well Being of Army Wives During the Stress of an Extended Separation. Journal of Military Medicine, 158 Vol2, (1993), pp.77-80.

deployment. Some of the family members also end up spending huge sums of money to treat their beloved ones. This study, therefore, tries to explore the psychosocial and economic impacts of Operation Linda Nchi on KDF soldiers and their families during and after operations.

1.3 Research Questions

This study sought to answer the following specific research questions.

1.3.1 Specific Questions

- 1. What are the challenges facing soldiers' families before, during, and after deployment?
- 2. What are the economic effects of Operation Linda Nchi on soldiers' families?
- 3. What are the psycho-social effects of Operation Linda Nchi on soldiers' families?

1.4 Research Objectives

The study's main objective is to examine the psychosocial and economic impacts of Operation Linda Nchi on KDF soldiers and their families during and after operations.

1.4.1 Specific Research Objectives

- 1. Assess the challenges facing soldiers' families before, during, and after the operation.
- 2. Examine the economic effects of Operation Linda Nchi on soldiers' families.
- 3. Investigate the psycho-social effects of Operation Linda Nchi on soldiers' families.

1.5 Literature Review

This section will review previous research in the area of militarism and its impact on soldiers' families. Given its focus, this study is at the nexus of several academic disciplines, including but not limited to the following areas: psychology, strategic studies, information technology, foreign policy practice, and diplomacy. This study, therefore, plays a vital role in dissecting the issues it seeks to address.

1.5.1 Theoretical Literature Review

According to the Freudian Theory of Personality, human personality is complex and comprises multiple components. The chief proponent of this theory is Sigmund Freud, also referred to as the father of psychoanalysis. In the Freudian theory of personality, Freud divided human personality into three distinct elements: the id, the ego, and the superego. The id is the primitive and instinctive part of the mind that includes sexual and aggressive motivators and hidden memories.¹³ The superego functions as a moral conscience, and the ego is the realistic element that mediates between the desires of the id and the superego.¹⁴ Many soldiers during the war tend to apply all three, and more so the id while on the battlefield. During this period, many engaged in some activities that later came to haunt them after the war. In return, the three elements that make up one's personality seem distorted due to trauma, and the ex-soldier sometimes may fail to return to normalcy.¹⁵ Many Kenyan Defense Forces soldiers do come home more frustrated than before. They feel harassed and dejected on return, having lost the more significant part of their youth. Some even feel like life has completely lost meaning in return.

Alexander Wendt avers that one fundamental principle of constructivist theory is that one always acts to objects and other actors in accordance with the meaning these objects have.¹⁶ Constructivism has therefore been used to create a decent home for the soldiers after the war. One can be appreciated, awarded, provided for basic needs, and reintegrated into his or her family hence making everything and everyone around him or her have a meaning.¹⁷ This theory further argues that identity and perception can change over time, making it difficult to predict what would happen next. Therefore, the question is, how can the state find a lasting solution to the plight of soldiers and their families?

Soft Power option of dealing with the unending operation Linda Nchi as an exit strategy

In the lens of soft power theorists like Joseph Nye and Robert Keohane, a state can use cultural diplomacy, cultural exchange programs, economic assistance, sporting activities, economic aid, and other soft power components to create, send, or draw in its delicate power with different nations.¹⁸ Can Kenya try to use soft power as an alternative means to pursue her interest in Somalia and find a lasting solution to the deteriorating relationships between the two states?¹⁹ The use of soft power is also likely to minimize casualties in Operation Linda Nchi. Suppose the KDF soldiers can seek an alternative to their militaristic approach and appear more

¹³ Janse, B. (2018). *Sigmund Freud Theory*. Retrieved [23/09/2019] from ToolsHero:

https://www.toolshero.com/psychology/theories-of-personality/sigmund-freud-theory/

¹⁴ Ibid

¹⁵ Ibid

¹⁶ Kaufman, p58

¹⁷ Wendt, A. (1992) "Anarchy Is What States Make of It." *International Organization*46(2): 391-425.
¹⁸ Nye, J (2004), Soft Power: The Means to Success in World Politics. Cambridge: Perseus Books, p12.

Type, J (2004), Solt I ower. The means to Success in world I onties. Cambridge. I elseus books

¹⁹Nye, J. (1999) "Redefining The National Interest." Foreign Affairs78(4): 22-35.

friendly to the Somalia populace, assisting some locals in developing economically, hence creating jobs for some of the youth in Somalia. In that case, this conflict will probably be with Al-Shabaab would have been resolved. It is hard to employ hard power to resolve an ideological war motivated by economic marginalization and constraints.

1.5.2 Empirical Literature Review

This section discussed the studies covered on the psychosocial and economic impacts of Operation Linda Nchi on KDF soldiers and their families during and after operations. Specifically, the thematic areas covered included the challenges facing soldiers' families before, during, and after operation; the economic effects of Operation Linda Nchi on soldiers' families; and the psycho-social effects of Operation Linda Nchi on soldiers' families.

According to Sheppard and Colleagues,²⁰ military deployment affects their families in various aspects of life. These aspects include the academic performance of their children in every step of deployment, psychological effects, and social stability. Deployment of soldiers adversely affects the psychological stability of the family left behind and their children's education. On the same note, Rush and Akos²¹ support this when they examine the impact of military deployment on psychological stability. The study established the social stressors, for example, mobility where families migrated from one region to another because of soldiers' deployment, stress, depression, frequent parental absence, psychological problems such as restlessness, anxiety, sleep disturbances, which heightened the problem in marital relationships and children education and the changing family roles. These studies have covered American families on military deployment and do not examine the psychosocial and economic impacts of operation Linda Nchi on KDF soldiers and their families. Therefore, this generated a knowledge gap that the present study sought to bridge.

On the same breadth, Huebner, Mancini, Wilcox, Grass²² conducted a study to examine the impact of military deployment on the social aspect of children. The study established that most children were aware of the possibility of losing a guardian or a parent because of injury or death. These thoughts were connected to

²⁰ Sheppard, S.C., Malatras, J.W., Israel, A.C. (2010). The Impact of Deployment on U.S. Military Families.

²¹ Rush, C., & Akos, P. (2007). Supporting children and adolescents with deployed caregivers: a structured group approach for school counselors. Journal for specialists in Group

²² Hunter, E., & Nice, D, S. (Eds.). (1978). Children of military families: A part and yet apart. Retrieved December 2009, from http://www.eric.ed.gov:80/ERICocs/data/ericdocs2sql/content_storage_01/0000019b/ 80/31/a3/b5.pdf

other social stressors like lack of structures and routines, changing family roles, mobility, frequent parental absence, and trans-cultural experiences resulting in uncertainty and lack of predictability in the daily routine needed by families. Children and spouses develop psychological problems, including bad dreams, sleeplessness, stress, anxiety, and depression. The study examined American children in reaction to absent parents. There exists scarce information on the effects of soldiers' deployment on the academic performance of Kenyan military children. This is also another gap in literature the current study intended to fill.

Mauka ²³ examined the impact of Kenya Defence Forces deployment on the psychosocial well-being of their families in Nairobi County. It was indicated that military deployment resulted in loneliness, rumors, uncertainty, poor communication, physical separation, brought injuries, and eventually, death took place, affecting the psychosocial well-being of soldiers' families left at home. The study results indicated a negative psychological impact where families left behind are advised to seek counseling services, be prayed for, and other measures to mitigate the negative effects of deployment. Therefore, families should be offered regular counseling services, communication between the military personnel, and financial support. This also comprises another knowledge gap this study aimed to bridge by examining the psychosocial and economic impacts of operation Linda Nchi on KDF soldiers and their families.

Cheboi ²⁴ conducted a study on the psychological effects on Kenyan troops participating in operation Linda Nchi in Somalia. The KDF and SNA captured the city of Kismayu in late September 2012. Besides the success of the operation, several challenges marred the operation. The operation also had a profound psychological impact on the troop. Previous related studies also revealed that soldiers in peacekeeping missions in Somalia faced various forms of stressors. Some psychological impacts led to psychiatric disorders, namely adjustment disorders and generalized anxiety disorder (GAD). Kenyan troops were neither an exception. They underwent traumatic stress during the operation. This research is as far as American children are concerned in reaction to the absent parent. However, there is scarce information on the effects of military deployment on the education performance of Kenyan children. This is another knowledge gap that this study

²³ Mauka,M.S.(2019). Evaluation of the effects of Kenya defence forces deployment on psychosocial well-being of their families in Nairobi County.

²⁴ Cheboi, S.(2013). The psychological effects on kenyan troops participating in Operation Linda Nchi in Somalia 2011 - 2012

aims to fill by finding out the effects of deployment on the education performance of the children of deployed KDF soldiers.

1.5.3 Gaps in the literature

Reviewed literature explicitly avers that wars have had negative outcomes, interfering with education, health, employment opportunities, marriages among many families of soldiers.²⁵ Studies show that children whose fathers were absent during the war due to deployment were more likely to suffer from depression and lower life satisfaction in adulthood.²⁶ These outcomes have motivated the researcher to try and investigate the case of Kenyan soldiers and their families during Operation Linda Nchi; the research will investigate how the absence has affected their children's academic performance, social being, and families' economies.²⁷

1.6 Justification of the Study

The justification for this study was viewed from three levels. These are academic, policy, and general justification levels.

1.6.1 Policy Justification

The findings and recommendations of this study may help policymakers, the government, and strategists in policy formulation, policy implementation, and policy evaluation moving forward. Strategists interested in conflict and the protection of individual rights will also benefit a lot from the comprehensive findings of this study. The outcome mind-boggles the ministry of defence to rethink some of its post-war policies critically.

1.6.2 Academic Justification

The outcomes of this study may be useful to International Relations researchers and academics in international studies. The study will contribute to the body of knowledge on militarism and how to care for the soldiers who take the most significant risk in protecting their country's interest at the expense of their lives and their families. This study will also lay a framework for future studies for scholars interested in the same field.

 ²⁵ Kesternich, B. Siflinger, J. P. Smith, and J. K. Winter, (2012). Effects of World War 2 on Economics and Health Outcomes across Europe. Discussion Paper No. 6296. Available at: http://ftp.iza.org/dp6296.pdf . Accessed on 16 December 2014, p.25.
 ²⁶ Ibid

²⁷ G. Fink, (2010). Stress of War, Conflict and Disaster. Sandiego, California: Elsevier. pp. 359-366.

1.6.3 General Justification

Military men's psychosocial and economic impact before, during, and after the war is an area many scholars have neglected since time immemorial. Therefore, this study is likely to generate new literature and the existing ones for the use of the public. The study will act as a fountain of knowledge from which members of the public who are incredibly interested in matters of militarism will drink.

1.7 Theoretical Framework

Theories help us to explain, understand, analyze and possibly interpret significant phenomena in our field to make the world a better place.²⁸ Theories take the role of mirrors that assist the researcher in reflecting and guiding the researcher throughout the study. Without theories, the study becomes a flightless bird that cannot fly. Theories like a bird's wings carry the research study in its direction. Maslow's need theory will largely guide this study; Maslow's hierarchy of needs. This theory tries to interrogate the human being's needs and how he or she tries to achieve these needs. To effectively provide a cogent theoretical frame, we shall attempt to briefly introduce Maslow's theory of needs to explain why the researcher settled on this theory for this study.

Abraham Maslow first presented his need theory in a paper of 1943 titled "A Theory of Human Motivation" He later published a book titled Motivation and Personality.²⁹ This theory of hierarchy advocate that various individuals are motivated to fulfill their basic requirements before moving on to further advanced needs.³⁰ Maslow's need theory will help this study explain post-traumatic stress disorders among soldiers, challenges faced by their families while away and on return, and finally, the operation's impact. ³¹We posit that Maslow's hierarchy of needs and its basic tenets are sufficient to explain the socio-economic impacts of Kenya's Operation Linda Nchi in Somalia. This framework will unearth some of the fundamental psychosocial and economic challenges and impacts both the soldiers and their families face.

²⁸ Sharp, P (2009). Diplomatic Theory of International Relations, Cambridge University Press, New York. p4.

²⁹ Lester D, Hvezda J, Sullivan S, Plourde R. Maslow's Hierarchy of Needs and Psychological Health. J Gen Psychol. 1983;109(1):83-85. doi:10.1080/00221309.1983.9711513

³⁰ Wahba, MA, & Bridwell, LG. Maslow Reconsidered: A Review of Research on the Need Hierarchy Theory. *Organizational Behavior and Human Performance*. *1976;15:*212–240.

³¹ Lester D, Hvezda J, Sullivan S, Plourde R. Maslow's Hierarchy of Needs and Psychological Health. J Gen Psychol. 1983;109(1):83-85. doi:10.1080/00221309.1983.9711513

Maslow's hierarchy of needs argues that there are seven levels of needs; arranged according to their preference and prioritization. However, no need can be satisfied in isolation, and these needs are intertwined, hence they need to be satisfied in unison to make human beings' lives worthwhile and satisfactory.³²

Every human being, including KDF soldiers in and from Somalia, desires to achieve self-actualization. Unfortunately, quite a significant number do not achieve self-actualization. The journey to self-actualization demands the satisfaction of some basic elementary needs, such as love, security/ safety, food, and self-esteem.¹ After which one is supposed to satisfy his cognitive needs, aesthetic needs, and finally attain self-actualization.³³ Many KDF soldiers in Somalia cannot carry on with school during the period of peacemaking. Some argue that life is hogwash and balderdash and has no meaning to quite a number of the combatants in the war since they do not see any beauty in existence. This theory will assist the researcher in trying to devise amicable avenues to make the lives of soldiers and even their families better. The needs are arranged from the basic ones to the more complex ones.³⁴

In most cases, Maslow's theory is demonstrated in a pyramid whereby the lowest level presents the most basic requirements while those complex needs occupy the top part of the pyramid.³⁵The bottom part of the pyramid encompasses basic physical needs, and these include but are not limited to food, water, sleep, and warmth.³⁶ After satisfying these needs, human beings move a notch high to satisfy their need for safety and security. On this journey of satisfaction of needs, the needs get skewed into more psychological and social. One starts to start hunting for the need for love, friendship, and intimacy. During the war, many soldiers tended to be starved in this vital need for safety and security. The soldiers lose touch with their families, children,

³² Tay, L, & Diener, E. Needs and Subjective Well-Being Around the World. *Journal of Personality and Social Psychology*. 2011; 101(2): 354-365. DOI: 10.1037/a0023779.

³³ Taormina RJ, Gao JH. Maslow and the Motivation Hierarchy: Measuring Satisfaction of the Needs. *Am J Psychol.* 2013;126(2):155-77.

³⁴ Taormina RJ, Gao JH. Maslow and the Motivation Hierarchy: Measuring Satisfaction of the Needs. *Am J Psychol.* 2013;126(2):155-77.

³⁵ Lester D, Hvezda J, Sullivan S, Plourde R. Maslow's Hierarchy of Needs and Psychological Health. J Gen Psychol. 1983;109(1):83-85. doi:10.1080/00221309.1983.9711513

³⁶ Lester D, Hvezda J, Sullivan S, Plourde R. Maslow's Hierarchy of Needs and Psychological Health. J Gen Psychol. 1983;109(1):83-85. doi:10.1080/00221309.1983.9711513

friendships, romantic attachments, churches, and religious organizations. They resort to heavy drinking to overcome frustration. Consequently, their esteem and feelings are tampered with beyond repair.³⁷

1.8 Hypotheses

The study intended to test the following hypotheses:

1. Soldiers' families face various challenges before, during, and after operations.

2. Soldiers' families are economically affected either positively or negatively before, during, and after operations

3. Psycho-social effects of Operation Linda Nchi exist on soldiers' families.

1.9 Research Methodology

This section of the study outlines the chronological steps taken at each stage of this research to try and come up with definitive and amicable answers to the research questions. It describes in detail what needs to be done and how it was done. It encompasses the following but is not limited to the research design, the target population, the research site, and the sampling procedure. The section also contains the research instruments, data processing, and analysis technique, and ethical considerations.

1.9.1 Research Design

According to One and Oso, a research design should explicitly show the direction the research intends to follow. It is the plan that guides the modus operandi in which research is supposed to be carried out.³⁸ The two further identified two research design strategies; quantitative and qualitative design strategies.³⁹ In this study, the researcher will use a hybrid of both qualitative and quantitative research design strategies. The mixed-method design strategy was chosen because, among other reasons, it ensures that data collected from both methods complement each other. It also ensures that there is a total representation of experiences or associations from both methods. The mixed-method ensures that the strength of the other method counters the weakness of one method. Finally, it will lead to new insights and generate hypotheses for the phenomena being studied.

³⁷ Tay, L, & Diener, E. Needs and Subjective Well-Being Around the World. *Journal of Personality and Social Psychology*. 2011; 101(2): 354-365. DOI: 10.1037/a0023779.

³⁸ Oso WY and Onen D (2011). Writing Research Proposal and Report: A Handbook for Beginning Researchers, Ramco Printing Works Limited. Nairobi. P74.

³⁹ Ibid

1.9.2 Research Site

The research site is the area in which the research study is carried out. In this research study, the site is Kenya.

1.9.3 Target Population

Mugenda and Mugenda define a population as the entire group of objects, individuals, and events that comprise common observable features.⁴⁰ This group must be of interest to the researcher.

1.9.4 Sampling and Sampling Technique

A sample is simply a procedurally select team to take part in a study.⁴¹ For this study, the sample consists of sixty respondents and interviewees selected from the target population.

Sample Size

According to Morgan as illustrated in the table below used to determine sample sizes for research. The research targets a population of 200 persons from table 1.0 below, the sample size to be used was 60 respondents (Where N is the population and S is the sample size)

N	S	N	S	Ν	S	N	S
10	1	10	80	28	16	800	26
	0	0		0	2		0
15	1	11	86	29	16	850	26
	4	0		0	5		5
20	1	12	92	30	16	900	26
	9	0		0	9		9
25	2	13	97	32	17	950	27
	4	0		0	5		4
30	2	14	10	34	18	100	27
	8	0	3	0	1	0	8

⁴⁰ Mugenda, O. M and Mugenda A. G. (2003). Research Methods: Quantitative and Qualitative Approaches, ACTS Press, Nairobi, p41.

⁴¹ Op Cit. Oso WY and Onen D, p81.

35		3		15		10		36		18		110		28
	2		0		8		0		6		0		5	
			_		-		-							
40		3		16		11		38		18		120		29
	6		0		3		0		1		0		1	
45		4		17		11		40		19		130		29
	0		0		8		0		6		0		7	
	Ŭ		Ŭ		0		Ū		Ŭ		Ū		1	
50		4		18		12		42		20		140		30
	4		0		3		0		1		0		2	
55		4		19		12		44		20		150		30
	8		0		7		0		5		0		6	
60		5		20		13		46		21		160		31
		-	0						0		0			
	2		0		2		0		0		0		0	
65		5		21		13		48		21		170		31
	6		0		6		0		4		0		3	
70		5		22		14		50		21		180		31
	9		0		0		0		7		0		7	
75		6		23		14		55		22		190		32
10		0	_	23		11		55				170		52
	3		0		4		0		5		0		0	
80		6		24		14		60		23		200		32
	6		0		8		0		4		0		2	
85		7		25		15		65		24		220		32
	0		0		2		0		2		0		7	
90		7		26		15		70		24		240		33
		,		20		15		10		₩Т		210		55
	3		0		5		0		8		0		1	
95		7		27		15		75		25		260		33
	6		0		9		0		6		0		5	
Table				-										

Table 1.0 The sample size

1.9.5 Research Instruments

These are the tools that were used in collecting data.⁴² Since the research hinges on a contemporary, emerging, and interesting but complex psychosocial and economic impact of military action, we intended to use the following methods of collecting data:

- 1. Key informant interviews;
- 2. Group discussion based on quantitative research technique;
- 3. In-depth interviews based on the qualitative research method;
- 4. Government, non-government, and other research institutions records; and,
- 5. Library Research.

Key informant interviews were conducted using an open-ended interview guide. The researcher started by establishing a rapport with the targeted sampled informants/

1.9.6 Data Processing and Analysis Techniques

Data analysis calls for sorting of the collected data into constituent elements.⁴³ The researcher used the mixed techniques approach, a combination of qualitative and quantitative techniques, to process and analyze the data for this study. According to Creswell, qualitative research design does explicitly capture the respondents' opinions and ideas.⁴⁴ Gilgun reaffirms this narrative by his assertion that quantitative techniques provide room for summarizing results reporting in numeric, which is provided with confidence levels.⁴⁵ The views expressed by these two scholars have informed the researcher envisages the use of a combination of both techniques data analysis for this study.

On the qualitative level, secondary data was collected and analyzed using document content analysis and inductive reasoning. This assisted the researcher in identifying the material's relevance, strength, and weakness regarding this study. The outcomes that the researcher arrived at were represented in the form of brief notes and tables.

⁴² Ibid, p88.

⁴³ Ibid, p99.

⁴⁴ Creswell, N. W. (2009), Research Design: Qualitative, Quantitative, and Mixed Methods Approaches (3rd edition). London: Sage.

⁴⁵ Gilgun, J,F. (2005). "Grab" and good science: Writing up the results of qualitative research. Qualitative Health Research, 15(2), p256.

1.10 Ethical Considerations

The ethical considerations in this study are four in number and include the researcher's responsibility, privacy, anonymity, informed consent, and confidentiality. These ethical considerations placed certain burdens on the researcher. These burdens included ensuring that the respondent is given adequate information to enable him to give informed consent and that the respondent's privacy is protected while the information he gives is treated with the utmost confidentiality. The other burdens include the right of the respondent to remain anonymous without disclosing his identity and the researcher being sensitive to human dignity.

1.11 Chapter Outline of the Study

This chapter provided an introduction to the study on the socio-economic impact of Operation Linda Nchi on Kenyan soldiers and their families back home. The chapter specifically gave the background to the study, statement of the problem, research questions, objectives of the study, justification, literature and empirical reviews, theoretical framework, and methodology employed.

CHAPTER TWO CHALLENGES FACING SOLDIERS' FAMILIES BEFORE, DURING, AND AFTER OPERATION

2.1 Introduction

The preceding chapter discussed the background to the study, statement of the problem, research questions, objectives, justification, literature review, theoretical framework, and research methodology. The present chapter was endeavored to examine challenges facing soldiers' families before, during, and after the operation. To provide the overall picture of soldiers 'families and give insights into their needs and strength, the section grounded itself by exploring the real-life experiences of the active and reserved component military officers and the respective families. By underlining the challenges and opportunities of the soldiers' life and their immediate family members in various stages of service and for various subgroups, this segment provides insights into how minor and major life stressors gather and converge wearing the military officers in service and their families. Also, it offers insights into the features that can be adopted to mitigate the impact or provide a safety net, for example, a sense of belonging to the community and opportunities for professional and personal growth. The presented challenges are most likely to be experienced and managed quite differently in contemporary soldiers' families compared to those applied from 2000.

Soldiers' families face various challenges and opportunities in their life, just like any other family in perspective, and the life-course of military families resembles the life-course of their civilian counterparts. Nevertheless, some experiences are specific to military life or are experienced differently due to the military context from which they operate. Furthermore, they vary in terms of experiences in military life across individual families. A body of empirical investigations had emerged in Kenya since October 2011 when Kenya decided to deploy military officers in Somalia's Juba valley amid war with Al-Shabaab militants in Operation Linda Nchi's mission (Protect the Country). This posed fundamental questions on whether and how experiences of the service members and their respective families changed over time and whether or how these related to the family, for example, the well-being, readiness, retention, and resilience.

Nonetheless, in light of the recent, rapid societal changes and the ongoing military efforts to support military officers in service and their families, there must be a continuation to comprehend how contemporary families experience and respond to military life. The present chapter covered the broad categories of the

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encountered challenges and opportunities of military personnel and their families. Several overarching themes covered will include:

2.2 Deployment and Military Families

The impact of war on military families can be understood from the perspective of life in the military. Military life is unique in many ways, and the military family contends with a broad range of issues that include family separation during deployment and the anxiety and worry over the possibilities of death or injury to the soldier.⁴⁶ Further to worrying, spouses assume sole responsibilities of managing the family single-handedly, a role that was previously shared. As espoused in the theory of systemic stress, this can lead to psychological and behavioral problems that affect the well-being of the family system.⁴⁷ A distinct effect of military deployment is a readjustment. The spouse left behind is forced to make adjustments due to the loss of the partnership. Some adjustments can be difficult to reverse upon the soldier's return, ultimately causing relational problems and disruption of marriages.⁴⁸

In examining the impact of deployment separation on military families, it became helpful to look at deployment by its distinct stages: pre-deployment, survival, and reunion. Every stage presented a unique set of stress to the soldier and the family.

2.2.1 Pre-Deployment

Pre-deployment is when the soldier prepares for going to combat, and the family prepares for separation, during which essential family issues such as finances are discussed. According to Caforio, it is a period filled with emotional upsets and anxiety over the anticipated loss of the partner.⁴⁹ During the interviews, members of both the immediate and extended families expressed profound sadness and helplessness at the notification of deployment to Somalia. One respondent said;

When he told me that he had been included among the soldiers who were to go to Somalia, I felt like energy had been sapped out of my body. I felt so weak. I told him: Let's hold hands and pray. We then held hands and prayed as a family. Deep inside, I was so worried because we had been married just for two years, and I had a very young child. But I kept encouraging myself, remembering that he and I met even before he joined the

⁴⁶ A.J. Marvasti, (2012). War Trauma in Veterans and their Families: Diagnosis and Management of PTSD, TBI and Comorbidities of Combat Trauma, Illinois, Charles C Thomas Publisher Ltd., p.18.

⁴⁷ D. Halpern, and S. Murphy, (2005). From-Work Family Balance to Work-Family-Interaction: Changing the Metaphor. Lawrence Erlberum Associates Inc, Publishers, p. 87.

⁴⁸ S. B. Henry, (2003). Walking on Egg Shells: A Qualitative Study on the Effect of Trauma and Deployment in Military Couples. (doctoral dissertation). p.29. Available at:

http://krex.kstate.edu/dspace/bitstream/handle/2097/9157/StaceyBlalockHenry2011.pdf?sequence=1&isAllowed=y Accessed on 11 November 2014, p.32.

⁴⁹ G. Caforio, Handbook of the Sociology of the Military, (New York, Springer, 2006). pp. 214-215.

military, and remembering that we prayed for God to open the door for him to join the military, and therefore trusting that the same God who opened doors for him to join KDF, would bring him back safely.⁵⁰

Echoing the same, an informant who lost her husband in the Somalia war described her experience as;

I felt so afraid and weak, but I had to gather courage because he told me that it was part of his work, and since others had been there, it was now his turn to go. I just prayed for God to bring him back safely. But my prayers were not answered because he did not make it back alive.⁵¹

The general reaction by spouses to the anticipated loss of companionship due to deployment was one

of shock and sadness. The need for early interventions that target families in order to enhance their resilience needed to be introduced at the pre-deployment stage. However, such interventions should make provision to reach military families wherever they may be based in the whole country.

2.2.2 Survival Period

The survival period starts when the soldier departs home for the battlefront and lasts until a few weeks before returning home. Henry contends that, during such a period, spouses experience mixed emotions and residual anger at tasks left undone. Needs during this stage are both emotional and physical.⁵² It is when role reversal and adjustment issues occur, and the established family pattern is disrupted.⁵³ Most spouses interviewed for this research reported that they had to assume the role of the head of the house during the soldier's absence. A respondent narrated her experience and the role overload during deployment as;

I became everything after he left. I paid rent, paid for water, electricity, and school fees. I was never concerned with such issues when he was around. I became the father and mother in the house. However, it was not so difficult to manage because he regularly called to instruct me on what I needed to do. For me, though he was away, it was like he was always around.⁵⁴

Within the scope of such changes, some spouses got overwhelmed and disoriented and suffered sleeplessness, loss of appetite, irritability, and fatigue, but continued to be concerned about the soldier's safety.⁵⁵ When asked about her experience during her husband's deployment to Somalia, one spouse responded;

⁵⁰ Oral Interview. Ann Karani, Thika, on 22nd July, 2021.

⁵¹ Oral Interview. Mrs Florence Obech, Homa Bay, on 28th July 2021

⁵² 2 S. B. Henry, (2003). Walking on Egg Shells: A Qualitative Study on the Effect of Trauma and Deployment in Military Couples. (doctoral dissertation). p.29. Available at: http://krex.kstate.edu/dspace/bitstream/handle/2097/9157/StaceyBlalockHenry2011.pdf?sequence=1&isAllowed=y Accessed on 11 November 2014, p.31.

⁵³ T.S. Knapp, and S.J. Newman, (1993). Variables Related to the Psychological Well Being of Army Wives During the Stress of an Extended Separation. Journal of Military Medicine, 158 Vol 2. p.78.

⁵⁴ Telephone Interview, Mrs Fatuma Hassan, Garissa, on 14 August 2021.

⁵⁵ D. Halpern, and S. Murphy, (2005). From-Work Family Balance to Work-Family-Interaction: Changing the Metaphor. Lawrence Erlberum Associates Inc, Publishers, p. 89.

I was restless the entire time. I couldn't eat nor concentrate. I took to praying the way we used to do with him whenever he was around. Whenever he got an opportunity to call me, he told me that he just wanted us to keep talking to each other. We could talk for so long and about very many things. A few times, he could ask me to sing for him. I used to feel so good after talking to him. Then I used to pray for him after our telephone conversations.⁵⁶ Keeping in touch with family members was observed to encourage coping by both the soldier and the

family. Information regarding the family's well-being and knowledge that the soldier was well, reduced stress in both parties. Respondents reported that they found the communication from KDF on the status of the deployed soldiers inadequate. This could be due to structural issues on the part of KDF or security considerations. Families had to make their efforts to communicate with the soldier, which in most cases was infrequent. The inability to regularly keep in touch with the soldier was observed to have caused stress and anxiety in KDF military wives. Out of all the 21 wives interviewed, none of them had sought mental health treatment.

2.2.3 Reunion

Reunion entails bringing together families that the war deployment had separated. According to Mateczun and Holmes, the parties concerned grow and change during their separation. They contend that individuals acquire new habits of daily life during the separation that becomes easily noticeable to those who have been apart.⁵⁷ Demers argued that the person who goes to war experiences things that change him/her in profound ways.⁵⁸ Equally, the person left behind also changes due to the newly gained independence. These changes make reunion not to be a neatly-fit-back together process and can be stressful for some couples.

During this study, most participants stated that they were filled with relief and excitement as they prepared to receive their loved ones and return home. Their testimonies corresponded with the findings of Veneisha that; in the final stages of deployment, just before soldiers return home and post-deployment activities begin, families fantasize about a perfect homecoming and reunion.⁵⁹ It was revealed that some families devised positive parental practices to create a greater sense of security and predictability that

⁵⁶ Oral Interview. Ann Karani, Thika, on 23rd, August, 2021.

⁵⁷ J. M. Mateczun and E. K. Holmes. Return, Readjustment, and Reintegration: The Three R's of Family Reunion. In R. Ursano, and A. E. Norwood.(Eds)(1996). Emotional Aftermath of the Persian Gulf War: Veterans, Families and Communities. Washington D C, American Psychiatric Press, p.378.

⁵⁸ A. Demers, (2008). TheWar at Home: Consequences of Loving a Veteran of the Iraq and Afghanistan Wars. Journal of Mental Health, Volume 6 (1). 1-12.

⁵⁹ J. Veneisha, (2008). Military Wives Whose Husbands Are Deployed During Operation Iraqi Freedom. Florida, Universal Publishers, pp. 1-2

compensated for the absence of the soldier husband.⁶⁰ One spouse stated: He was not here, so I had to be there

for them. I was doing homework with them and praying together with them before going to sleep.⁶¹

As an event, a reunion was an emotional period for both the soldiers and the families. Soldiers interviewed indicated that they were excited and looked forward to being united with their families. Families were equally anxious to receive the soldier back as captured in a statement by one respondent who said;

I kept counting days, and the days were not moving fast enough. He called me when he got to Garissa that he would be home the next day in the morning at Langata Barracks. I could not sleep that night at all, and when morning came, the children asked me when the father would be home. That day, I decided that the children would not go to school, and all of us went to Langata Barracks to receive him. I was surprised when I got to Barracks to see so many women and children waiting to receive their loved ones.⁶²

However, the joy and excitement of reunion were not felt in all families. Special challenges were

identified in three main situations; where the soldier had sustained severe combat injuries with residual

impairment, where the wife was suspected of marital infidelity, and financial mismanagement. In the case of

battle injuries, the physical changes made some previously independent soldiers dependent on others for

routine matters of daily life.

This phenomenon became intolerable to the soldier, and in some cases, intolerable to the family. Expressing

his frustration and deep emotion, one respondent stated;

Niangalie vile niko. Siwezi kujifanyia chochote bila kuomba msaada. Sikua hivi kabla ya kwenda Somalia. Hii naelewa hali ya vita, ila watu wangu hawaelewi. Wanaona ni kama nawasumbua. Naelewa ugumu uliopo. Kinachonitia hasira ni kwamba kwa sasa shemeji zangu wanajaribu kumshawishi mke wangu aniache. Hata yeye naona tabia zake kwangu zimebadilika. (Look at how I am. I cannot do anything for myself without asking for assistance. I was not like this before going to Somalia. I understand this is the reality of a war situation, but my family does not understand it. They see me as a bother. I know it is not easy. However, what angers me is that my in-laws are persuading her to leave me. I have noticed changes in her behavior).⁶³

Some of the female participants nursing injured soldiers indicated that interaction with the soldier

husbands was stressful. One participant said;

He is always angry with almost everything and everybody. He keeps more to himself and talks to no one. You really can't discuss anything with him. We are no longer a functional family. Sometimes I feel so defeated knowing that there isn't much I can do to help beyond what I was doing as a wife.⁶⁴

Some of the male participants expressed issues related to marital infidelity and financial

mismanagement. They spoke of tension at home between them and their wives, which led to communication

⁶⁰ G. Caforio, (2006). Handbook of the Sociology of the Military. New York, Springer, pp. 216-218.

⁶¹ Oral Interview. Mrs Mary Mbeki, Nanyuki, on 29th August 2021.

⁶² Oral Interview, Mrs Alice Mugana, Nairobi, on 12 August 2021.

⁶³ Oral Interview. Pte Ali Dire, Langata, on 19 August 2021.

⁶⁴ Oral Interview, Mrs Joyce Kongolo, Nanyuki, on 14 August 2021.

difficulties, and in some cases, even separation. Testifying about the situation in his family, one informant said;

When I came back from Somalia, the money I had almost died for was nowhere. I had left her with the ATM and instructions on how to use the money. Each time I called, she would tell me that she had removed some little money for use in the house. It didn't bother me because we have children. However, upon return, there was no money, and there was nothing to show where she had put the money. I became really angry, but because of the children, I could not do much. However, the anger just couldn't go away. Many a time, I have felt like killing her.65

These outcomes agree with some scholars who contend that reunions are not always blissful for many families and can be a period of immense stress for most couples. Once the initial excitement has waned and the reality of the changes set in, the relationship begins to experience strain, particularly in cases of serious injuries or mismanagement of resources. Most female participants expressed inadequacy and frustration in dealing with their loved ones and repeatedly indicated their desire to seek support. However, they confessed a lack of knowledge about where such support could be obtained.

When the responses are contextualized, what comes into mind is the need for well-coordinated programs and social support systems to facilitate reunion within KDF and at the community level. Such programs and systems should target to prepare families to deal with the stresses associated with the reunion. Just like soldiers train to be ready, families equally need to prepare to face the uncertainties of post-deployment reunion.

2.3 When a Loved One is Killed in Combat

According to Caforio, death is an inevitability of war, an inherent aspect of the military profession.⁶⁶ Despite this reality, the death of any soldier is hard to accept, not only by his family but even by society.⁶⁷ LaMorie et al. contend that the ripple effect of a single loss runs through multiple layers of social networks that include military commanders, political leadership, immediate family, extended family, and friends.⁶⁸ The people affected by the death of a soldier validate the theoretical underpinnings of this study, that of systemic stress.

⁶⁵ Oral Interview, Sgt Charles Kibett, Langata, 8 August 2021

⁶⁶ G. Caforio, (2006). Handbook of the Sociology of the Military, New York, Springer, pp. 214-215

⁶⁷ J. H. LaMorie, and M. M. Murphy, Traumatic Death in the United States Military: Initiating the Dialgoue on War-Related Loss. In R.A. Neimeyer, H. Winokuer, D. Harris & G. Thornton (Eds.), Grief and Bereavement in Contemporary Society: Bridging Research and Practice. New York, Routledge. Available at: http://www.goccp.maryland.gov/victim/documents/TraumaticDeath.pdf. Accessed on 3 September 2014, p.3.

Consistent with combat deaths, a spouse loses a husband and the father of her children. Parents lose a son, while siblings lose a brother. In most of the families interviewed, including extended families, the loss of a soldier meant the loss of their sole breadwinner. Caforio contends that this category of people bears the greatest burden during loss, and their grief does not fade away even with time.⁶⁹

While investigating the impact of death in a family, the respondents interviewed, including immediate

family members, parents, and siblings, expressed intense grief and profound loss. For them, the loss was

physical, emotional, economic, and social. One respondent narrated her experience as follows;

You know, even though he was hardly ever here, I could easily reach him on the phone and consult him whenever something came up. Now I can't. I can only consult my children, but you know there are things you cannot consult your children about. Sometimes I wish he was still around. Sometimes it does not look like he will never come back. It is hard to accept that it is real.⁷⁰

From an economic point of view, the death of a soldier destabilized his family's social security. As

already indicated, most spouses were housewives, and the soldier was the sole breadwinner. The loss left many

families financially vulnerable, as indicated by a respondent who stated;

I was in deep shock. I cried a lot. I was mostly concerned about the children because they were very young, and we didn't have any other means of survival. Willy was the breadwinner of our family.⁷¹

Following the death of a soldier's father, the children's future was a general concern of all the spouses

interviewed. Many of their children were mainly in primary school. As housewives, they expressed fear that

their children may not access quality education due to the soldier's absence. It was noted that providing for the

children was proving to be a challenge as some of the children were already out of school due to a lack of

school fees. Describing her situation, one respondent stated;

I have four children aged between 2 and 15 years. The first one is supposed to be in form two, but he has not been to school for the whole of this year. None of my children is in school as at now. The younger one was in a private school, which I now can't afford. My brother assisted me initially, but he can't anymore. I do not have anybody else.⁷²

Frustration over delay in processing dues and insensitivity of officers along the chain were also notable

complaints. An informant narrated her experience with some officers as follows;

After waiting for a few months, I went back to check on the progress, and one of the officers told me that I should just wait and that even the Mau Mau freedom fighters were still waiting for their compensation. That's when I decided to go to DOD in person since, at that time, we didn't have any means of survival; we were literally begging for food.⁷³

⁶⁹ G. Caforio, (2006). Handbook of the Sociology of the Military. New York, Springer, pp. 216-218

⁷⁰ Oral Interview. Mrs Florence Obech, Homa Bay, on 17th August 2021.

⁷¹ Ibid

⁷² Oral Interview, Mrs Fatuma Hassan, Garissa, on 22nd July 2021.

⁷³ Oral Interview. Mrs Barnice Njoroge, Nanyuki, on August 20th, 2021.

How compensation matters are handled is critical in influencing how families view the circumstances that led to the soldier's death and can either contribute to difficult grief or aid in healing. Attaching a human face to the process and empathizing with the survivors can help ease the pain in military families.

2.4 Social Disruption

Military families are entitled to certain benefits enjoyed as long as the soldier remains in active service. These benefits include DEFCO facilities, on-base housing, and medical care for the immediate family members.⁷⁴ On-base housing means that the government caters for rent. Residing in the barracks affords a military family the support of a military community. However, upon the death of a soldier and once the burial process is completed, the enjoyment of service benefits ends, and the family must move away from the supportive military community.⁷⁵ Some families reported being torn between staying in town and relocating to a rural village during the interviews. Relocating to the rural home meant transferring the children from urban schools to rural ones. Such relocations had a destabilizing effect on the family, particularly the children. During the interviews, a respondent spouse stated:

When he died, I had to move to the rural home. I could not afford to keep the family in town. I took the children out of the barracks school and transferred them to a rural one. I had no other option.⁷⁶

The death of a soldier thus translated into a loss of regular income and the supportive military community for the immediate family. However, the economic loss was observed to have been felt beyond the immediate family. Since most soldiers came from modest backgrounds, they supported other relatives such as parents and siblings. Thus, the death of a soldier not only robbed a wife of a husband but also robbed the extended family members of a critical element of their survival. This reality indicates how deep the impact of war can run. However, other than the soldier, the other victims of this war may never become part of the official war casualty list.

⁷⁴ DOD Personnel Policy

⁷⁵ S. J. Cozza, R, M. Lerner, and R. Haskins, (2014). Military and Veteran Families and Children: Social Policy Report. Policies and Programs for Health Maintenance and Positive Development. Social Policy Report, Volume 28 (3). 1-17. Available at: https://scholar.google.com/scholar?q=Military+and+Veteran+Families+and+Children:+Social+Policy+Report+ https://scholar.google.com/scholar?q=Military+Active Active Act

by+cozza&hl=en&as_sdt=0&as_vis=1&oi=scholart&sa=X&ved=0CBwQgQMwAGoVChMIpoycm92SyQIVx rgUCh1Aqgov Accessed on 9 June 2015, p.9.

⁷⁶ Oral Interview. Mrs Barnice Njoroge, Nanyuki, on August 20th, 2021.

2.5 Family Disintegration

Wadsworth and Briggs state that deployment that results in death is more stressful and damaging to marriages of enlisted service members who, on average, tend to be younger and more likely to be exposed to more violent combat as compared to the marriages of officers who usually are older, and less exposed to the dangers of combat.⁷⁷ During this study, it was noted that out of the 15 fallen soldiers, only 2 were officers. Among the officers, one was married. Of the remaining 13 servicemen, 12 were married, 11 left behind very young families. 3 out of the 11 young soldier's spouses left the original home and got married elsewhere. A grandmother who was taking care of a grandchild left in her care stated:

She brought this child and left him here with me. She got married to somebody else. Now look at me, what do I have to bring up this child with?⁷⁸

In another related case, the parents of a young married woman reclaimed her and married her off to somebody else while the soldier husband was still in Somalia. During the interview, the soldier said;

I came back and found out that she had left. I had left my ATM with her. All the money was gone too. I followed her to her home, and her parents told me that they did not marry off their daughter to be staying alone. It was painful coming back to an empty house.⁷⁹

These cases highlighted some of the challenges faced by young couples. They demonstrate how absence due to war can impact marital relationships. All these instances involved young people. Being so young, both in age and in relationships, implied that the victims had not developed a strong sense of community within the areas where they lived to offer emotional support and a sense of security that would promote coping. Such outcome is supported by Wadsworth's argument that how a spouse copes with the stress of deployment is influenced by variables such as the available circle of friends, extended family support, financial ability, age, and the quality of the marital relationship, among others.⁸⁰ The poor coping responses displayed by some spouses could be attributed to financial-related issues, influence from family, and inexperience with deployment. Unavailability of social support at the community level and lack of specific military family support services may have contributed to poor coping.

⁷⁷ S. M. Wadsworth, and D. Riggs, (Eds). (2011). Risk and Resilience in US Military Families. New York, Springer

⁷⁸ Oral Interview. Mwanaisha Said., Mombasa, on 10th, August, 2021.

⁷⁹ Oral Interview. Pte Aggrey Shitoli, Nanyuki, on 15th August 2021.

⁸⁰ S. M. Wadsworth, and D. Riggs, (Eds). (2011). Risk and Resilience in US Military Families. New York, Springer, pp.24-2

2.6 Impact of War Trauma on Children

Military children are affected by many experiences of military life that can present opportunities and hardships for them.⁸¹ From an early age, military children endure periods of family separation due to the requirement for the soldier to undergo training locally and even overseas.⁸² The frequent separation can contribute to resilience in the children during deployment. However, the stress of a parent being away from home for peacetime deployment is different from separation due to combat. During wartime, children worry over the father's safety and may develop a pervasive concern that the father may return injured or perhaps never return at all.⁸³ According to Jensen and Shaw, war trauma can cause emotional grief in children whose symptoms include regressive behaviors, depression, and anxiety.⁸⁴

During the interviews for this study, it was noted that some KDF children suffered regressive behaviors, intrusive images, and depression. These conditions corresponded with the findings of Jensen and Shaw and were confirmed by a respondent mother who stated;

Chege's performance had already dropped just when his father went to Somalia. After his death, it deteriorated. He could even forget details of the assignments given at school. It is a neighbor's child that could tell me the assignments given, then I would sit with him to help him do the assignments.⁸⁵

The need for mental health intervention was observed to be acutely necessary to assist the children. The mothers, who were also dealing with their grief, became their children's counselors in the prevailing circumstances. While this appeared to remedy the problem, the mothers did not possess the requisite counseling skills to address the problem holistically. How the problem might affect the children in the years ahead might need further investigation. The extent of the behavioral effect of the Somalia war on academic performance was supported by the headmaster of Nanyuki Garrison Primary School. During his interview, the headmaster indicated that the school's overall performance, which has an 80% military children and 20% civilian population, had significantly dropped.⁸⁶ He stated;

⁸¹ P. Lester, and E. Flake, (2013). How Wartime Military Service Affects Children and Families. Journal of the Future of Children, Vol 23(2). 121-41. Available at: http://www.ncbi.nlm.nih.gov/pubmed/25518695. Accessed on 11 Jan 2015, p.122.

⁸² Ibid
⁸³ Ibid, p. 122

⁸⁴ P. S. Jensen, and J. A. Shaw, (1996). The Effects of War and Parental Deployment Upon Children and Adolescents. In R, Ursano. and A. E. Norwood, (1996). Emotional Aftermath of the Persian Gulf War: Veterans, Families and Communities. Washington D C, American Psychiatric Press, p.84.

⁸⁵ Oral Interview. Mrs Barnice Njoroge, Nanyuki, on August 20th, 2021.

⁸⁶ Oral Interview. Mr. James Mburugu, Headmaster Nanyuki Garrison Primary School, Nanyuki, on 18 August 2021

The worst period for the children is when news of an attack is received with no details of the casualty. They are so anxious and only relax after confirming that their parents have not been affected.⁸⁷

These cases highlight the anonymity of military children in civilian schools and the deficiency of social support infrastructure in schools and at the community level. Military children are the minority in such schools and have nobody to empathize with their situation. This situation is different from military schools where the bulk of the pupils are from military families where some of the children may have parents deployed in Somalia. Being close to somebody who shares the same experience can aid in coping.⁸⁸ In civilian schools, support for military children may not exist, a situation that would affect their academic performance. The overall impact of depressed academic performance in school is likely to be reflected in the children's later life outcomes. Such observations agree with the findings of Kesternich et al. that children exposed to combat show depressed quality of life and are more likely to suffer from depression with overall lower levels of life satisfaction in their adulthood life.⁸⁹

As much as deployment can be disruptive to children's stability and social security, it also provides the military children with a meaningful identity associated with strength, service, and sacrifice, a basic component of military culture.⁹⁰ This identity and the larger military community, particularly for children living in the barracks, are an essential source of resilience and support. The support and comfort the children receive from those who are in the same situation help in coping. According to Lester and Flake, deployment provides an opportunity for adolescent military children to be more independent and develop self-confidence.⁹¹ Huebner et al., in their study of the impact of the Iraqi War on American children, validated this argument when they found that the children assumed more demanding responsibilities due to the absence of the father.⁹²

During the interview, it was noted that over 90% of KDF military children had not attained the age of comprehending the separation, hence could not fall within the findings of Huebner et al. However, the

⁸⁷ Ibid

⁸⁸ P. Lester, and E. Flake, (2013), How Wartime Military Service Affects Children and Families. Journal of the Future of Children, Vol 23(2). 121-141. Available at: http://www.ncbi.nlm.nih.gov/pubmed/25518695 . Accessed on 11 Jan 2015, pp.127-128.

⁸⁹ I. Kesternich, B. Siflinger, J. P. Smith, and J. K. Winter, (2012). Effects of World War 2 on Economics and Health Outcomes across Europel. Discussion Paper No. 6296. Available at: http://ftp.iza.org/dp6296.pdf. Accessed on 16 December 2014, p.22.

⁹⁰ P. Lester, and E. Flake, (2013). How Wartime Military Service Affects Children and Families. Journal of the Future of Children, Vol 23(2). 121-41. Available at: http://www.ncbi.nlm.nih.gov/pubmed/25518695. Accessed on 11 Jan 2015, p.123.

⁹¹ Ibid

⁹² A. J. Huebner, J. Mancini, R. Wilcox, S. Grass, and G. Grass, (2007). Parental Deployment and Youth in Military Families: Exploring Uncertainty and Ambiguous Loss. Journal of Family Relations, Special Issue: Vol. 56(2). Available at: http://www.jstor.org/stable/4541654 Accessed on 20 July 2015, pp.116-117.

adolescent children were observed to have taken prominent roles and responsibilities in helping their staybehind parents in line with Huebner's finding. A testimony by one mother supported this statement when she testified that one of her sons had become the man in the home. The respondent's mother stated: He has been our source of strength. He is always thinking of what we can do as a family. In Tom, we felt very secure.⁹³ Active involvement of the children in family activities was observed to aid coping.

2.7 Impact of Loss on Parents and Extended Family

Intense grief and great emotional trauma were observed on the parents of the fallen soldiers. During the interviews for this study, it was noted that the soldiers were the pride of their parents, and their death robbed the family of that pride, replacing it with deep emotional pain and a situation of hopelessness. Pain, compounded by anger over the loss, was more pronounced on the mothers than the fathers. Some of the mothers questioned the wisdom of KDF in deploying only young soldiers to the battlefield, arguing that such young soldiers did not have the necessary experience to face an enemy. Such reaction was motivated by the ages of the fallen soldiers, most of whom had been very young. The KDF soldiers who died during the war were between 20-42 years of age.⁹⁴ The experience of KDF during Operation Linda Nchi concerning age, mirrored closely the Iraq War outcome in which most of the war deaths were adolescents to young adults aged between 18-40 years old, and all were survived by equally young families.⁹⁵

A further factor that compounded the loss for parents and exposed them to complicated grief was that most of the deaths had been sudden, untimely and violent. Within an extended family household, conflicting and sometimes confusing emotions were observed. Fathers were more guarded with their emotions, while emotions from the mothers flowed freely. One mother expressed guilt for having let her child join the military. She said: I would never have allowed him to join KDF if I knew it would end this way. He was so young to have died like this.⁹⁶

The degree of emotional pain expressed by parents was also found to vary from family to family and was greatly influenced by the marital status of the fallen soldier and the age of the surviving children. Out of

⁹³ Oral Interview. Mrs Florence Obech, on 15 August 2021.

⁹⁴ Classified KDF Operation Records.

⁹⁵ S. Cozza, and M. Goldenberg and R. J. Ursano, (Eds) (2014). Care of Military Service Members, Veterans and their Families. Arlington, American Psychiatric Publication, p. 260.

⁹⁶ Oral Interview. Mrs Anna Maina, Othaya, on 13 August 2021.

the 15 families interviewed, only 2 had adult children. The rest were survived by very young families or were not married at all. Parents of fallen soldiers with adult children were less emotional than the parents of unmarried soldiers or soldiers with young families. Parents with adult grandchildren were observed to grief less compared to parents with very young or no grandchildren. This observation contradicted the findings by Fontana et al. that younger parents, with the ability to get children grief less than those who are beyond childbearing years.⁹⁷

According to this study, the younger the parents, the less likely they are to have adult grandchildren,

hence the more the pain caused by the worry of losing their historical lineage. This observation was validated

by the testimony of a respondent mother who expressed her emotional distress on her son's death. She said,

I cannot even look at his picture on the burial program. How can I accept that he is gone? He was so young. It is hard to accept. Indeed, I look alive, but I think I died with him when we received the news that his body had been recovered. For three months, we were hopeful until it was confirmed that it was him. The day I buried my son is the day I buried my heart.⁹⁸

Emotions in this statement compare with the emotions expressed by Winnie Mandela at the time of her

arrest when she wrote:

I knew at that time that this was the end of any kind of family life, as was the case with millions of my people - I was no exception. Part of my soul went with him at that time.⁹⁹

Other parents and respondents expressed similar feelings regarding the loss of a soldier member of

their family. It was noted that close and extended families heavily depended on the soldiers due to their steady

income. Just like the arrest of Nelson Mandela affected the lives of many South Africans, the death of these

soldiers in similar ways impacted the future of many other people, as captured in a statement by a respondent

who said;

He was the breadwinner and the only one educated in the whole family. He was supporting many other people. His sister had a child, and she wasn't financially able to take care of the child because her husband, too, wasn't financially able. We used to do some shopping for her and the family or send her money to take care of her family. When Mwai died, she used to cry helplessly. I decided to give her and mum-in-law the piece of land we had bought near our home, which they shared equally, and out of it, they have been able to farm and earn a living.¹⁰⁰

⁹⁷ A. Fontana, and J. Keene, (2009). Death and Dying in America, Malden, Polity Press, pp. 131-132.

⁹⁸ Oral Interview. Mrs Anna Maina, Othaya, on 13 August 2021.

⁹⁹ W. Mandela, (1985). Part of My Soul Went With Him. New York, W. W. Norton & Company Inc, p.76. ¹⁰⁰ Oral Interview. Ann Karani, Thika, on 23rd, August, 2021.

From these revelations, it became evident that the victimhood of a soldier affected more than his immediate family. It was observed that grief following death cascaded several layers of social networks from the immediate family through the extended family to the soldiers' community. The impact of loss on the community can be seen in the African reality that when one person is employed, the whole clan is employed. The testimonies indicate the pain and emotional distress siblings and other relatives endured as secondary victims of war.

The impact of deployment is, however, not always negative for all families. During the interviews carried out for this study, some respondents testified that the war had a positive impact on their lives. Soldiers revealed that from the deployment, they could make extra money to improve the homes of their families and parents. Financial gain was noted as an essential incentive for soldiers on deployments, as confirmed by a respondent who stated:

I am so grateful that I was part of AMISOM. At least I managed to put up a small house for my parents back at home. I always feel good when I go back home.¹⁰¹

During the interviews, deployment had a positive economic impact and a positive relational impact. Absence away from home and the constant threat of danger made some soldiers very close to their families. Intermittent communication with loved ones opened a whole new page for some soldiers who realized just how important their families meant to them. One wife said: At first, I just couldn't believe this was happening. He became so concerned with the children, and he just wanted to be with us all the time. I never thought he would change, but Somalia changed him. I thank God for it.¹⁰²

Such transformation is not unique to KDF soldiers. Similar outcomes were observed by Henry on US soldiers who had returned from Afghanistan and Iraq and their families.¹⁰³ The separation and the limited communication under the constant threat of danger provided an opportunity for some soldiers to reflect on their lives and their families. Such reflection provided new revelations to them about the importance of their

¹⁰¹ Oral Interview. Pte Mohammed Jamal, Nakuru, on 12 August 2021

¹⁰² Oral Interview. Mrs Grace Kaluma, Nakuru, on 15 August 2021.

¹⁰³S. B. Henry, (2003). Walking on Egg Shells: A Qualitative Study on the Effect of Trauma and Deployment in Military Couples.(doctoraldissertation).Availableat:http://krex.kstate.edu/dspace/bitstream/handle/2097/9157/StaceyBlalockHenry2011.pdf?sequence=1&isAllowed=y Accessed on 11

http://krex.kstate.edu/dspace/bitstream/handle/209//915//StaceyBlalockHenry2011.pdf?sequence=1&isAllowed=y Accessed on 11 November 2014, p.80.

families in their lives. This reality of war helped strengthen some struggling relationships, but conversely, it also created an opportunity for others to disintegrate.

To mitigate the effect of deployment on both the soldier and the military family to promote resilience for proper family functioning, strategies at the institutional level and at the individual family level become a necessity. The next chapter addresses the economic effects of operation Linda Nchi on the soldiers' families.

2.8 Conclusion

The effect of war or conflict does not affect only the military officer but also his/ her family. Therefore, the military officer in service is affected by being subjected to the enemy's hands and some battle filed hazards. These include the violence during compartment and the long absence from his/her family, which exert massive pressure on the officer. Nevertheless, military officers do not exist in a vacuum, like when deployed on the battlefront, and their families are deployed at home. Upon their return, the officers come back with war, only this time, it is a different kind of war. When these soldiers come home, they interact with the family, which is already in emotional turmoil where the interaction can weigh heavily in these families. However, some military officers never return from the war, which prompts their family members to adjust to make up for the loss of their loved ones. In this chapter, various challenges facing soldiers' families have been discussed, ranging from social disruption, family disintegration, trauma, and injury. Having discussed the challenges in this part, chapter three examined the economic effects of operation Linda Nchi on soldiers' families. This discussion is crucial to provide the overall picture of how soldiers' families are affected economically, either positively or negatively.

CHAPTER THREE

THE ECONOMIC EFFECTS OF OPERATION LINDA NCHI ON SOLDIERS' FAMILIES 3.1 Introduction

The previous chapter has examined challenges facing soldiers' families. The current chapter presents the discussion on the economic effects of Operation Linda Nchi on the soldiers' families. Several reasons exist as to why the deployment may have influenced the outcomes, specifically the employment status of soldiers' families, the wealth, earnings, and their level of education. Military service of any type denotes a break in the civilian labor force membership, which carries an earnings penalty if the military experience is less compensated in the labor market than civilians' experience. For enlistees, the time taken in the military service could defer or impede further schooling. There is also a probability that the service offered by the military personnel could influence their economic outcomes. Distribution to a war zone increases soldiers' compensation, and the government has directed generous subsidies in education for specific cohorts in the military. Therefore, the disposable effect of military deployment on the economic outcomes could be either positive or negative and could shift from time to time of the surviving veterans.

For the children and families of military personnel, the economic news is not badly off, as demonstrated by Hosek and MacDermid, who claimed that service members typically earn more than civilians of the same level of education are paid. In addition, they are given many other benefits that the civilians do not acquire, including tuition assistance, comprehensive health care, subsidized child care, and housing allowances. Despite these benefits, the service members work for longer hours in the operation than the civilians, and they are exposed to various hazards that the civilians rarely face. The extra pay they obtain is when they go to a conflict zone, which assists their families back at home to cope financially but cannot alleviate their stress.

As the military in service receives handsome packages in terms of payment, their spouses are considered first in the military lifestyle. This phenomenon is because the military officers in service frequently migrate from one place to another, which result in a disruption of careers of military spouses, and to some extent, some employers are hesitant to provide job opportunities for them as they require job orientation and training, in which these employers are not ready to invest. Most of the soldiers' spouses who are in service are either unemployed or work for fewer hours compared to the civilians' spouses, and majorly if by any chance they secure a job opportunity, they are paid less salary than the spouses of civilians. Despite the high pay of

military officers, some members of the military and their respective families, specifically the junior ranks, report distress in terms of finances, and few of them are eligible for food stamps. Furthermore, the payment of military officers tends to be higher than their civilian counterparts, and there is a drop in terms of the flow of income the moment the military in service leaves the armed forces. Lastly, the pay increment of the current years has declined, and the force cutbacks are upcoming. Thus, both aspects will modify the overall picture of financing the service members, probably for worse.

3.2 Buffers for Military Families

The buffers for soldiers' families entail certain benefits that are not received by their civilian counterparts. For example, these benefits are commissary and affordable quality childcare, which may buffer financial distress. Moreover, the service members usually contain high pay compared to the civilians, and these payments generally entail housing allowances, basic pay, and subsistence allowances, which are for the service members living off base. Further, the military in service and their respective families benefit from separation payment, healthcare, financial assurances that enable them to buffer against distress of finances, health care, hardship duty, vacation time, and bonuses.¹⁰⁴ Soldiers and their families benefit from steady work and the accessibility to quality education for their children.¹⁰⁵ The soldiers' specific protections may assist in helping families during the deployment cycle and can ease the transitioning period to retirement from the armed forces.

3.3 Promoting Financial Well-Being and Resilience among Families

The ground of the majority of financial programs is that the soldier's families lack sufficient knowledge in the finances received. They may exhibit more positive and progressive financial behaviors once they are enlightened with better information on financial matters.¹⁰⁶ Consequently, businesses and the government aim to develop financial knowledge hoping that there will be an increment of financial behaviors, including skills in money management, knowledge-seeking through research, planning, and setting goals.¹⁰⁷ The various mentioned interventions are also availed to soldiers in service through various programs created and delivered by the service branch. Programs specifically for financial education widely employ an array of methodologies ranging from low-touch, low resource to greater-resource and greater-touch. These methodologies can be executed in blend to generate all-inclusive interventions that support military families' wellness in matters associated with finances.¹⁰⁸ The methodologies employed in financial education are categorized into three areas: financial engagement, financial knowledge, and financial communication.

3.3.1 Financial Communication

¹⁰⁴ Hosek, J., & Wadsworth, S. M. (2013). Economic conditions of military families. Future of Children, 23(2), 41–59. http://doi.org/10.1353/foc.2013.0009

¹⁰⁵ Floyd, L., & Phillips, D. A. (2013). Child care and other support programs. The Future of Children, 23(2), 79–97. http://doi.org/10.1353/foc.2013.0013

¹⁰⁶ Agnew, J. R., & Szykman, L. R. (2005). Asset allocation and information overload: The influence of information display, asset choice, and investor experience. Journal of Behavioral Finance, 6(2), 57–70. http://doi.org/10.1207/s15427579jpfm0602_2

¹⁰⁷ Consumer Financial Protection Bureau. (2015). Financial well-being: The goal of financial education. Retrieved from http://files.consumerfinance.gov/f/201501_cfpb_report_financial-well-being.pdf

¹⁰⁸ ¹⁰⁸ Sledge, J., Tescher, J., & Gordon, S. (2010). From financial education to financial capability: Opportunities for innovation

The financial communication methodologies emphasize the provision of immediate feedback. It provides financial commitments and motivates to follow up strictly and pursue significant goals stipulated in life. The examples listed regarding financial communication include text messaging, emailing, account alerts, individual communication, and media campaigns.¹⁰⁹ The merits of these methods comprise the low cost required and their capacity to engage with soldiers' families from time to time. Nonetheless, those merits come with limited opportunities for personalization.¹¹⁰

The examples provided are:

Military Saves. The organization focuses on the motivation and encouragement of military officers in service to save money for every month by promoting automatic saving programs for members in the service.

Text Message Reminders. The monthly text messages act as a reminder for all participants to redeem their monthly subscriptions to increase savings to cater to financial distress in the future.¹¹¹

3.3.2 Financial Knowledge

These methodologies are standard in the financial education field.¹¹² Most of the programs associated with financial knowledge are generated in online courses or individual workshops that include credit repair, general financial education, and bankruptcy.¹¹³ Generally, the merits of financial knowledge programs are that fewer resources are required than more intense methods such as financial therapy, which can increase soldiers' families' knowledge in financial matters. Nevertheless, there exists mixed evidence whether these programs have increased knowledge or changed financial behaviors.¹¹⁴

For examples is:

Army Personal Financial Management Course. Military officers who attend mandatory workshops and training in financial issues hope to increase spending schedules and other cautious financial plans.¹¹⁵

 ¹⁰⁹ Gartner, K., & Todd, R. M. (2005). Effectiveness of online "Early Intervention" financial education for credit cardholders (No.
 962). Federal Reserve Bank of Chicago Proceedings. Washington, DC. Retrieved from https://www.chicagofed.org/digital_assets/others/events/2005/promises_and_pitfalls/paper_inte rvention.pdf

¹¹⁰ Sledge, J., Tescher, J., & Gordon, S. (2010). From financial education to financial capability: Opportunities for innovation.

¹¹¹ Chan, P., Cohen, P., Derbigny, D., & Markoff, S. (2014). Saving by design: An analysis of six strategies' potential for scale. CFED Expanding Economic Opportunity.

¹¹² Gale, W. G., & Levine, R. (2011). Financial literacy: What works? How could it be more effective? (Financial Security Project No. FSP 2011-1). Chesnut Hill, MA

¹¹³ Wiener, R. L., Baron-Donovan, C., Gross, K., & Block-Lieb, S. (2005). Debtor education, financial literacy, and pending bankruptcy legislation. Behavioral Sciences and the Law, 23(3), 347–366. http://doi.org/10.1002/bsl.634

¹¹⁴ Collins, J. M., & O'Rourke, C. M. (2010). Financial education and counseling - Still holding promise. Journal of Consumer Affairs, 44(3), 483–498. http://doi.org/10.1111/j.1745-6606.2010.01179.x

¹¹⁵ Bell, C., Gorin, D., & Hogarth, J. M. (2009). Does financial education affect soldiers' financial behaviors (No. 2009-WP-08).

Stash Your Cash and Win. During the financial education sessions, the members are given the opportunity to open an emergency account, which will enable access to raffle tickets for every deposit for a certain amount of money deposited.¹¹⁶

3.3.3 Financial Engagement

Financial engagement methods are generated to engage military officers and their families in increasing and conserving positive behaviors of finance. These methods are categorized into two thematic areas, which include passive and active engagement. The programs conducted to support passive engagement put in place enable individuals in perspective to engage in positive behaviors of their finances without much stress or effort. In some instances, these methods are obligated by the employers who repeatedly enroll workers except the individuals who opt to be out of the program. The examples comprise opt-out retirement plans or automatic work savings plans.¹¹⁷

Active engagement plans aim to generate a progressive relationship between the support professionals and consumers who serve the individual families and couples.¹¹⁸ These programs are categorized into financial coaching and financial therapy. Financial therapy aims to provide holistic support for individual families and couples via the attention of cognitive, behavioral, emotional, relational, and economic factors.¹¹⁹ While on the other hand, financial coaching aims to assist families to align the positive behaviors of their finances with financial goals.¹²⁰ Financial coaching and therapy methods emphasize the long-term results and ongoing, collaborative processes in supporting families to generate positive behaviors in financial matters more personalized.

3.4 General Programmatic Considerations

¹¹⁶ Chan, P., Cohen, P., Derbigny, D., & Markoff, S. (2014). Saving by design: An analysis of six strategies' potential for scale. CFED Expanding Economic Opportunity.

¹¹⁷ Boshara, R., Gannon, J., Mandell, L., Phillips, R. J. W., & Sass, S. (2010). Consumer trends in the public, private, and nonprofit sector. National Endowment for Financial Education.

¹¹⁸ Sledge, J., Tescher, J., & Gordon, S. (2010). From financial education to financial capability: Opportunities for innovation.

¹¹⁹ Archuleta, K. L., Britt, S. L., Tonn, T. J., & Grable, J. E. (2011). Financial satisfaction and financial stressors in marital satisfaction. Psychological Reports, 108(2), 563–576. http://doi.org/10.2466/07.21.PR0.108.2.563-576

¹²⁰ Collins, J., Baker, C., & Gorey, R. (2007). Financial coaching: A new approach for asset building. Ithaca, NY. Retrieved from http://caseyfoundation.com/~/media/Pubs/Topics/Economic

 $Security/Other/FinancialCoachingANewApproachforAssetBuilding/financial_coaching_nov20.pdf$

While improving financial knowledge in soldiers' families is vital in addressing financial distress, it is significant to note that acquiring this type of knowledge is crucial¹²¹ but not adequate¹²² to lead a behavior change. This type of knowledge operates in a much wider context of significant factors that entail individual characteristics, such as the resources available, the setting in which financial decisions are generated, the individual attitudes, and the perceived level of control over the outcome.¹²³ Therefore, it is vital to consider all these factors to improve financial behaviors via education programs.¹²⁴

¹²¹ Fernandes, D., Lynch Jr, J. G., & Netemeyer, R. G. (2014). Financial literacy, financial education, and downstream financial behaviors. Management Science, 60(8), 1861–1883. http://doi.org/10.1287/mnsc.2013.1849

¹²² Ajzen, I., Joyce, N., Sheikh, S., & Cote, N. G. (2011). Knowledge and the prediction of behavior: The role of information accuracy in the theory of planned behavior. Basic and Applied Social Psychology, 33(2), 101–117. http://doi.org/10.1080/01973533.2011.568834

¹²³ Perry, V. G., & Morris, M. D. (2005). Who is in control? The role of self-perception, knowledge, and income in explaining consumer financial behavior. Journal of Consumer Affairs, 39(2), 299–313. http://doi.org/10.1111/j.1745-6606.2005.00016.x

¹²⁴ Stawski, R. S., Hershey, D. a, & Jacobs-Lawson, J. M. (2007). Goal clarity and financial planning activities as determinants of retirement savings contributions. International Journal of Aging & Human Development, 64(1), 13–32. http://doi.org/10.2190/13GK-5H72-H324-16P2

3.5 Pay and Benefits

Soldiers and their respective families benefit from the various levels of health care, training, education, military payment, housing allowances, discounts, subsidized child care, and recreational facilities and activities. Eligibility can differ from the active soldier to the reserve military component. More benefits are availed to military officers in service who are active in duty and full-time in the service. The military members of the active module and reserves constantly function under government control regardless of whether the member in the reserves is actively in service or reserve status.

Since the military service promises financial stability and upward mobility for soldiers' families, the military officers in service who are from the periphery background are over-represented in the forces.¹²⁵ Moreover, within the enlisted ranks, though, they are by no means the only class of people to join the all-volunteer force. The military service provides opportunities for overpowering the structural and collective disadvantages of low-income families and communities who have received low-quality education.¹²⁶ The youths from deprived backgrounds frequently have few chances to access jobs that provide handsome wages and skill advancement. Therefore, the service provides opportunities for socio-economic growth by providing better wages, education attainment, including the pathway to colleges, housing allowances, and better health benefits. Moreover, the members in military service contain the flexibility in using their service to obtain the required skills and training for their later entry into the labor market as civilians, or they might be retained in the military through retirement.¹²⁷

3.6 Pay and Financial Gains

Amongst the chief benefits of military officers are the steady earnings and employment opportunities for the service members. Those benefits encompass the paid leave and payment while sick or not in duty as recovering from injuries for the active personnel. Also, some military personnel will be eligible for some bonuses or given special pays as per military's requirements, the conditions of the duty (hazardous duty incentive pay, tax breaks, family separation allowance, flight pay, pay for critical skills, and enlistment and re-

¹²⁵ Kelty, R., and Segal, D. R. (2013). The military as a transforming influence: Integration into or isolation from normal adult roles. In J. M. Wilmoth and A. S. London (Eds.), *Life Course Perspectives on Military Service* (pp. 19–47). New York, NY: Routledge. ¹²⁶ Bennett, P. R., and McDonald, K. B. (2013). Military service as a pathway to early socioeconomic achievement for disadvantaged groups. In J. M. Wilmoth and A. S. London (Eds.), *Life Course Perspectives on Military Service* (pp. 119–143). New York, NY: Routledge.

enlistment bonuses) and specialized skills. Increment in the active and reserve module-based pay is linked to the increment of rank and the number of years in service irrespective of race, gender, ethnicity, age, or sexual orientation.

Deployment in UN peacekeeping comes with high expectations in terms of financial benefits. In several cases, the troops deployed in these missions are usually provided with allowances for their services, motivating many military officers deployed in peace support missions. However, the Somalian case differed from this one as most of the soldiers were initially unaware of what they would gain financially- a stressor for this case. Financial challenges were observed in small percentages of the peacekeeping soldiers from the first group deployed KDF compared to the second KDF personnel replaced by the first group. This phenomenon could be described based on peacekeeping soldiers who were aware of the financial implications of the mission. The first contingent of KDF soldiers in the mission in Somalia was not aware of the financial benefits associated with the mission. Nevertheless, the second contingent group went to the mission in Somalia when the KDF soldiers had already rehatted to AMISOM. Hence, obtaining clearer procedures from the military personnel contained positive feedback on the entire process of how the stressor was contained.

3.7 Health Care

Specifically applicable for soldiers' families' well-being are the benefits extended to the military in service and their legal dependents and the free healthcare. Military healthcare includes pre-existing conditions, mental health care, maternity care, catastrophic sicknesses, hospitalization, prescription medications, outpatient procedures, and preventive care. The supplemented mental healthcare for the military officers is kept confidential, the short-term nonmedical counseling choices, akin to employee assistance program offerings that assist soldier's families with matters, for example, managing the loss of the loved ones, work-life balance, managing of stress, challenges connected to parenting and relationships and deployment issues.¹²⁸

3.8 Activities, Facilities, and Discounts

Other military benefits entail low-cost recreational facilities, for example, fitness centers, movie theatres, installation of pools, hobby shops, golf courses, ticketing services for various activities which include

¹²⁸ Trail, T. E., Martin, L. T., Burgette, L. F., Warren May, L., Mahmud, A., Nanda, N., and Chandra, A. (2017). *An Evaluation of* U.S. *Military Non-Medical Counseling Programs*. Santa Monica, CA: RAND Corporation.

comedy shows, festivals, amusement parks, and concerts; rental of outdoor equipment such as camping gear, kayaks and bikes; and finally the free or discounted flight opportunities. Moreover, some organizations and businesses provide discounts to soldiers and their respective families, for example, discounted admission to museums, zoos, and parks. Several of these benefits provide access to various venues where the community and military families bond and reinforce, and discounts and subsidies enable soldiers' families to afford such activities.

According to the Department of Defense (DoD, 2009), policy regarding Morale, Welfare, and Recreation programs stipulate precisely these benefits by the DoD. They form the critical part for military personnel benefits packages that enable to build healthy families and communities. Their sole purpose is to maintain mission, readiness, the individual, and families in perspective. The study by GAO (2018) established that from 2012-2017, the services offered were not constantly meeting the funding targets for some stipulated resources, and they noted that DoD recognition extended overseas wars budgets which constrained both the military officers and their families. Therefore, GAO findings deduced that we could not be specific that even meeting the funding targets would be enough for operating in the current environment. DoD corresponded with GAO's suggestions on evaluating targets and generating measurable goals and indicators of the performance of the conducted military programs (GAO, 2018).

3.9 Access to funding

Accessing funds to conduct various training programs was critical for soldiers' spouses and their respective partners. From the field responses, spouses expressed how much the valued opportunities were available to them to access training grants. They alleged that the training grant was one of the tangible benefits that would enable them to pursue their career, and it is an essential element of employment support as it enabled them to afford to be trained a package otherwise not have been able to afford without a training grant.

[&]quot;It can help you move onto things that you've perhaps always wanted to do but haven't had the confidence to do maybe. And of course, as soon as they see the prices of courses over here, anybody is likely to think, 'no way am I doing that.' But it just makes life that little bit easier." "I think it's been great. You know, cos the allowance she had to get her into driving, to enable her to get a job and get to and from a job is brilliant. And it's such a lot of money to fork out as well with everything else you gotta pay. Yeah, I think it's great, great support." (Corporal with 17 years' service)

3.10 Conclusion

Nonetheless, the effect of war is not necessarily negative as the life of some soldiers' families and relatives improved instantly from the extra pay and allowances paid to the soldier. Some military officers used the extra payment to construct houses for their guardians and parents while other military personnel invested in various business opportunities for their families. Regarding family relationships and bonding, the soldier's absence from homemade individual families develops closer bonds, leading to soldiers being more involved in parenting their children than before the war. Generally, during the conflict, every individual attached to the soldier, including his immediate family, is affected negatively or positively. Having discussed the economic effects of Operation Linda Nchi On soldiers' families.

CHAPTER FOUR THE PSYCHO-SOCIAL EFFECTS OF OPERATION LINDA NCHI ON SOLDIERS' FAMILIES

4.1 Introduction

The previous chapter examined the economic effects of Operation Linda Nchi on soldiers' families. The present chapter analyzed the psycho-social effects of Operation Linda Nchi on soldiers' families. Military personnel participating in the peacekeeping missions has been connected with stress-associated challenges in times of deployment and after deployment periods with changing degrees on the individuals in participation. Every human being experiences trauma at various levels of life.¹²⁹ Nevertheless, the soldiers who participate in peace-keeping missions do not contain the extraordinary capacity to acclimatize with the associated trauma during the period of a combatant. The greatest and common response to trauma is resilience.¹³⁰ However, the traumatic moments affect an individual's biological, social and psychological equilibrium. The psychological effects encountered many years ago can be retained by the individual for many years. These events influence contemporary experiences.¹³¹ Despite the advancement concerning knowledge of PTSD and the development of psychosocial treatments, nearly half of those individuals engaged in treating this kind of disorder, in most cases, fail to recover.¹³² Moreover, no theory has offered an adequate account of the complex phenomena and processes in treating PTSD.¹³³

Sarah Schubart and Christopher Lee describe the prevention diagnosis and treating of psychological effects related to soldiers' deployment are considered with the recognition of the effects caused by trauma in the veterans of the Vietnam War in 1980.¹³⁴ Ever since investigations and empirical studies concerning PSTD have produced massive literature on how the victims of PSTD should be treated in various types of trauma, this segment summarizes a range of psycho-social effects of Operation Linda Nchi on the soldiers' families.

¹²⁹ Bessel van der Kolk, Alexander McFarlane, and Lars Weisaeth (Eds.) Traumatic Stress: The Effects of Overwhelming Experience of on Mind, Body and Society, New York, Guilford Press, 2006, p.3.

 ¹³⁰ George A. Bonanno, Loss, Trauma and Human Resilience, London, Oxford University press, 2005, p.18.
 ¹³¹ Ibid

¹³² 8 Bradley R. Greene, Russ Dutra and Western L., "A multidimensional Meta- Analysis of Psychotherapy", Journal of Psychiatry, Volume 162, No. 4, 2005.

¹³³ Sarah Schubert and Christopher W. Lee. "Adult PTSD and its Treatment with EMDR: A Review of Controversies, Evidences and Theoretical Knowledge", Journal of EMDR Practice and Research, Vol. 3, No. 3, 2009, pp. 117.

¹³⁴ Ibid

4.2 Family Separation

Empirical investigations have proved that stress in various homes due to family separation is frequently conveyed as the aggression encountered in the workplace. Therefore, the stress in the family enlarges to combat-imposed stress, resulting in distraction and interference in performing essential duties. This stress also negatively affects the stress-coping capacity, resulting in the inability to perform various tasks to the peak. An excellent example was the incident where the military officer faced a family problem, and because of this, he transferred by killing three innocent civilians.¹³⁵ Therefore, the relevant unit should assist military officers in resolving essential family matters in the deployment cycle and create methods and procedures for assisting families once the troops are deployed.

Though it is usually common for soldiers' families not to stay together in combat zones because of the accommodation and deployment challenges, in Kenya, the soldiers and their families have attempted to live together despite the accommodation in the barracks being not inadequate. Most military officers have come up with what is casually known as "Ghetto" in estates adjacent to their military camps to ensure family union during peace periods. Lack of frequent communication and family separation resulted in anxieties. In the Somalia deployment case, soldiers' families were not prepared prior, no leave was offered, no passes, and family finances were not prepared, and all these magnified the problems experienced by both the soldier and his/her family. Therefore, the KDF psychologists felt that the military officers might win the battle in Somalia but lose their families and themselves. The top stressors for the military officers involved containing to quickly leave their respective families before journeying to Somalia to pursue the dreaded Al-Shabaab extremists.¹³⁶

The isolation from soldiers' families occurs during and after deployment, leaving their spouses to suffer from PTSD, parenting and marital strain, and depression. Several deployments stress soldiers' children, and frequently, their communities and schools were not aware of when the deployment occurred and the challenges they encountered. Married military officers and the other soldiers under deployment duty in the jungle or sand sentry box understood very well what it meant by being shot every day or regularly living under the threat of the enemy while their spouses were miles far away waiting for them. Most spouses were worried about

¹³⁵ P. Lester, and E. Flake, (2013). —How Wartime Military Service Affects Children and Families. | Journal of the Future of Children, Vol 23(2). 121-41. Available at: http://www.ncbi.nlm.nih.gov/pubmed/25518695. Accessed on 11 Jan 2015, p.122

¹³⁶ Focused Group Discussion, Langata Barracks, 22nd August, 2021

managing and single parenting of the children alone. This scenario was common among the married officers than other soldiers.

Military officers were also regularly worried about losing their respective spouses, where many of these cases, specifically to the newly married officer, occurred in the period of other peacekeeping missions. Some cases exist where the officers threatened never to participate in the mission until they were assured that their spouse would be taken care of by the rear unit. One of the respondents narrated this:

I felt like I had lost my mind and soul when I was in Somali. I was deployed in Baghdad. While on duty, I constantly thought about my family. I had just gotten married when I was deployed to the operation area in October 2011. I thought it was going to last for six months as usual, but all in vain. By the time I returned. My worries of losing my wife were confirmed. My wife left me due to lack of communication and felt that I was cheating on her since I told her that I was to return within six months. I came home in April 2012 and found my wife gone.¹³⁷

Apart from the fear of military officers losing their spouses, some of them returning from the mission have happened to kill their spouses after suspecting them of infidelity. For example, in Mombasa, the military officer killed his spouse and injured his son, claiming that the wife endangered his life which he narrowly escaped death in Somalia. The soldier equated this incidence of marital affairs to contracting HIV/AIDS, resulting in death. Despite the claims, the officer did not reveal whether he contracted HIV/AIDS or not. In Amukura, Busia County, a military officer also attacked his fellow in the village, suspecting him of having a love affair with his wife. Though there might be other reasons for all these actions, important to note is that all the cases covered were from the soldiers who returned from a mission in Somalia.¹³⁸ Also, some cases existed where a junior officer fought his superior in the rank over allegations of fraternization. Fraternization refers to a term used to denote the sexual relations between seniors and juniors and vice versa.¹³⁹ Such cases have increased after deployment to Somalia, and a few cases were reported before the deployment period.

Families and children were also affected because of the deployment as it is involved with regular movements from one place to another, which specifically affects children. For example, the soldiers' family magnifies the effects, which is anticipated to move thrice a year. In periods of war, both the parents are deployed in the combat zones and must be away from their loved ones as much as the entire period. Various families in the military make an effort to be resilient in support of their soldiers in the entire period of

¹³⁷ Oral Interview, Defence Forces Memorial, 28th August 2021

¹³⁸ Sammy Jakaa, "Soldier Stabs Man in Love Triangle", The Standard, Tuesday, October 23, 2012. pg.24.

¹³⁹ Oral Interview, Ali Mohammed, Gilgil, 18th August 2021.

deployment. In some military families, these stressors are on the top in connecting with parents, spouses, and children and within the nuclear family.¹⁴⁰

The spouses of the military officers in Somalia's mission indicated that parenting of young children in periods of deployment is stressful as young children regularly demand to know where their parent was distributed, the returning period, and the reason he/her has never called them. As Kelley¹⁴¹ described, the problem of young children's socialization without help results in difficulties in maintaining regular routines. He added that children had indicated increment of behavior and problems of moods in periods of deployment. These children also have indiscipline cases while at home, sadness, and increased attention demands.¹⁴² The news regarding the causalities among the Kenyan troops increased anxiety among the military spouses and older children. The children aged eight years and above were worried and feared whether their fathers were safe and not in the reported causalities.¹⁴³

It was also reported that some military officers had difficulty adapting to their families after returning from deployment, which resulted in even disciplining their children being a problem as most children got used to being corrected by their mothers. The children were upset when their fathers corrected them, but they clung more to their mothers, and the same case was reported if the mother was deployed. The young children who were born a few months before the father departed to Somalia and they had not interacted contained negative attitude on returning of the soldier. These children had nothing to do with their fathers because they did not know them, which resulted in children crying a lot and sometimes spanking them.

4.3 Visible Injuries

Visible injuries affect both the soldier and family. The degree of impact is influenced by the severity of the injury, the composition of the family, and the treatment required.¹⁴⁴ Families with young children face the greater challenge of informing the children about the injury and the uncertainty over the child's reaction to

¹⁴⁰ Lisa Hains Barker, and Kathy D. Berry, "Developmental Issues Impacting Military Families with Young Children During Single and Multiple Deployments" Journal of Military Medicine, Volume 174, 10:1033,2009

¹⁴¹ Kelley ML: "The effects of military-induced separation on family factors and child behavior" Journal of Orthopsychiatry, Volume 64: 103-11, 1994.

¹⁴² Ibid

¹⁴³ Oral Interview, Defence Forces Memorial, 10th August 2021

¹⁴⁴ S. J. Cozza, R. S. Chun, and J. A. Polo, (2005). Military Families and Children during Operation Iraqi Freedom. Journal of Psychiatric Quarterly, Vol 76(4), 371-378. Washington DC, Walter Reed Army Medical Centre. Available at: https://msrc.fsu.edu/system/files/Military%20families%20and%20children%20during%20Operation%20Iraqi%2 0Freedom.pdf Accessed on 27 October 2014, pp. 374-376.

the soldier's new condition.¹⁴⁵ Injuries that altered an individual's original appearance were noted to have the greatest impact on families. Narrating her experience, a respondent expressed her emotions when she visited her husband at the hospital. She stated;

When I saw him, I cried. I just couldn't stop crying. He was just lying there on his back, not able to talk. I had to be with him in hospital until he was discharged. But when he got home on crutches, the children rejected him. One of them asked me to get this man out of our house. 'I didn't know what to do. Our youngest daughter, who used to play freely and always sat on his lap whenever we were in the sitting room, couldn't get near him. She used to tell him that he had a bad walking style, and she didn't want to be his friend anymore. ¹⁴⁶

Many other families expressed similar emotions, with the general theme being fear and hopelessness.

The reaction of the children towards the father exerted greater stress and strain in the family. During the interviews, it was revealed that many families in similar situations were not being monitored for mental health care support.

Extended hospitalization due to injuries suffered was also noted to have exerted emotional pressure and financial strain on families. For example, family members travelled to Nairobi from other parts of the country to be close to the patients. Accommodation became an issue, particularly for families that had no other relatives in Nairobi. One respondent from Mombasa revealed the difficulties of raising the bus fare to Nairobi when she said;

We didn't have money at the time. My father-in-law raised some money for my bus fare to Nairobi. He also wanted to come, but he could only afford my bus fare to Nairobi because of limited finances. Even after my husband had been discharged, he was asked to stay close to the hospital for regular clinics. It was expensive. My cousin had to take us in for some time.¹⁴⁷

The modest backgrounds of most military families, compounded by the need to care for the injured in

unfamiliar surroundings, exerted enormous pressure and stress on them. While some numbed their feelings,

others openly expressed the difficulties they had to contend with and the adjustments they had to make in their

lives in order to offer better care for the soldier. One respondent testified as follows;

Moving from our house in town to the barracks each morning really affected him. He complained of chest pains every morning. For his sake, we relocated from a town-house into the Barracks, but it also forced me to stop working in order to take care of him.¹⁴⁸

It was noted that the experience of the Somalia war compelled families to make critical adjustments in their

daily lives to provide better care to injured soldiers. Some of the changes made translated into reduced family

¹⁴⁵ Ibid

¹⁴⁶ Oral Interview, on 15th August 2021

¹⁴⁷ Oral Interview, Nanyuki, on 13th August 2021

¹⁴⁸ Oral Interview, on 15th August 2021.

earnings by moving from two paycheques to one. The net effect of this reality is that the Somalia war impoverished soldiers' families. The attendant financial challenges due to injuries suffered were noted to have led to great psychological and emotional stress on the soldier and the family. With the absence of need-based intervention mechanisms, soldiers in similar situations are likely to develop PTSD and depression, which may further affect their families, causing them to lapse into depression as secondary trauma sufferers. Such an outcome is supported by theories of systemic stress which suggest that how an individual responds to trauma impacts others close to him/her.¹⁴⁹

4.4 Invisible Injuries: PTSD

PTSD is defined as a psychiatric condition that soldiers experience due to a life-threatening event and elicits feelings of fear, helplessness, and/or horror in the individual.¹⁵⁰ One of the common symptoms of combat exposure is Post Traumatic Stress Disorder (PTSD). Symptoms associated with PTSD exist in three categories; one - reliving the trauma (nightmares, flashbacks, or intrusive thoughts), two - dissociation, avoidance, and emotional numbing, and three- increased hyper arousal and exaggerated startle response.¹⁵¹ Rundell and Ursano observed that the prevalence of PTSD on American soldiers in Iraq and Afghanistan upon their return home was 23%. Out of this number, 62% indicated startle response, 50% irritability and outbursts of anger, 35% suffered from reliving experiences, 35% feeling on edge, and 31% had nightmares.¹⁵² Dr. Kanini confirmed having handled KDF soldiers suffering from PTSD but stated that statistical data on the prevalence of the condition within KDF was unavailable.¹⁵³

Soldiers who exhibit arousal symptoms have difficulty concentrating, are easily irritable and constantly look for danger.¹⁵⁴ Basic military training develops survival instincts in a soldier that aids him to keep alive and to continue fighting under extreme conditions and circumstances.¹⁵⁵ The threat of death during combat

¹⁴⁹ D. Becvar, & R. Becvar, (1996). Family Therapy: A Systemic Integration. Needham Heights, MA: Allyn and Bacon. p. 234.

¹⁵⁰ D. Becvar, & R. Becvar, (1996). Family Therapy: A Systemic Integration. Needham Heights, MA: Allyn and Bacon. p. 234.

¹⁵¹ C. Lawhorne-Scott, and D. Philpott, (2010). Combat Related Traumatic Brain Injury and PTSD: A Resource and Recovery Guide. Plymouth, Government Institute, p.57.

¹⁵² Ibid

¹⁵³ J. Rundell, and R. Ursano. Psychiatric Responses to War Trauma. In R. Ursano, and A. E. Norwood, (Eds) (1996). Emotional Aftermath of the Persian Gulf War: Veterans, Families and Communities. Journal of Nervous and Mental Diseases, Vol 185 (11). Washington D C, American Psychiatric Press, p.174.

¹⁵⁴ Canadian Ministry of Veteran Affairs. (2006). Post-Traumatic Stress Disorder (PTSD) and War Related Stress. The New Veterans Charter for Canadian Forces. Available at: http://www.veterans.gc.ca/public/pages/publications/system-pdfs/ptsd_warstress_e.pdf. Accessed on: 1 September 2015, p.5.

sharpens an early warning system and quick physiological responses to danger in a soldier.¹⁵⁶ Upon return from combat, adjusting to everyday life becomes difficult.¹⁵⁷ An American soldier from Afghanistan described his hypervigilance condition as; Occasionally, something will click in the house, and I'll get out of bed, and I'll check the whole house.¹⁵⁸

During interviews carried out for this study, a similar post-war reaction was observed in KDF soldiers. One officer described his startle response condition as horrifying. For example, he described how he would jump out of his skin at any cracking sound. He narrated an experience in which the sound of a thunder flash made him think that the enemy had attacked the barracks.¹⁵⁹

The incident is one of the many instances encountered that demonstrates the magnitude of the operation's impact on soldiers. It highlights the need for a program of intervention that targets the soldier and his family. Other soldiers re-live the war long after the war is over. Such soldiers experience various forms of intrusion, such as sleep disturbances, nightmares, intrusive memories, and thoughts of the traumatic event as if the event is occurring in real-time again.¹⁶⁰ Henry argues that the condition makes soldiers become powerless and exercise limited control over the memories of war. The inability to control the experiences can lead to self-blame, self-pity, and isolation, as expressed by a KDF respondent spouse who stated that; He screams so loudly in the middle of the night, throwing his arms all over the place. I am glad he has not grabbed my neck otherwise I would be dead by now.¹⁶¹

While investigating KDF families' experiences, one female respondent, whose husband sustained severe injuries, expressed fear of her husband, saying that the husband had become too temperamental, aloof, and shunned normal conversation. She testified that he had threatened to kill her on several occasions, a situation that was interfering with stability in the family. She stated: He has threatened to kill me many times

¹⁵⁶ (1993). H. C. Mason. After the War: For the Wives of all Veterans. Available at: http://www.patiencepress.com/documents/After%20the%20War.pdf Accessed on 18 July 2015

¹⁵⁷ S. B. Henry, (2003). Walking on Egg Shells: A Qualitative Study on the Effect of Trauma and Deployment in Military Couples. (Doctoral dissertation). Available at: http://krex.kstate.edu/dspace/bitstream/handle/2097/9157/StaceyBlalockHenry2011.pdf?sequence=1&isAllowed=y Accessed on 11 November 2014, p.29

¹⁵⁸ Ibid

¹⁵⁹ Oral Interview on 15 August 2021

¹⁶⁰ S. B. Henry, (2003). Walking on Egg Shells: A Qualitative Study on the Effect of Trauma and Deployment in Military Couples. (Doctoral dissertation). Available at:

http://krex.kstate.edu/dspace/bitstream/handle/2097/9157/StaceyBlalockHenry2011.pdf?sequence=1&isAllowed=y Accessed on 11 November 2014, p.26.

¹⁶¹ Oral Interview, Nairobi, on 14th August 2021.

over minor domestic disagreements. We are not like a normal family anymore. I reported this to my motherin-law, and all she told me was that he is the person I married.¹⁶²

Narrating his experience on anger, a senior commander cited a case of a soldier who, upon his return from deployment, differed with his wife over financial issues. The situation deteriorated and eventually led to a tragic end. The respondent stated;

In one mad rage to hit the wife, the soldier grabbed the old-box type TV and threw it at her in an attempt to hit her. Unfortunately, it missed the wife and landed on the head of a three-month-old baby who was sleeping on the sofa. The baby died instantly.¹⁶³

These narrations demonstrate how indirect effects of war can impact families as secondary victims and the overlap between the home front and battlefront. Appreciating the battlefield in terms of the relationship between the home front and battlefront is key to establishing robust family support and soldier support systems that cater to the emotional well-being of both the soldier and family. However, the effect of anger on family members supports the theory of systemic stress that how an individual family member reacts to stress affects the other family members and may ultimately threaten stability in the family.

Soldiers who survive combat have been known to suffer from depression as a consequence of postcombat reaction.¹⁶⁴ Rundell and Ursano argued that soldiers, who experienced higher warzone stress during the Vietnam War, were seven times more likely to suffer depression than soldiers who had been exposed to low or moderate stresses of combat.¹⁶⁵ Studying the experiences of American soldiers in Afghanistan, Henry also found that 32% of the soldiers indicated signs of depression. While describing a colleague's behavior, a veteran soldier of the Afghanistan war said: At times, she could not summon any emotion at all, while the other times she would become upset for no reason.¹⁶⁶

Depression was noted as one of the signs of PTSD among military officers. According to Kanini, tracing the occurrence of melancholy within the KDF soldiers has been a challenging task. Essentially, the orbiting door conditions where the soldiers in the recovery path relapsed into the novel state because of the

¹⁶² Oral Interview, Nanyuki, on 15th August 2021.

¹⁶³ Oral Interview, Nanyuki, on 15 August 2021.

 ¹⁶⁴ J. Rundell, and R. Ursano. Psychiatric Responses to War Traumal. In R. Ursano, and A. E. Norwood, (Eds) (1996). Emotional Aftermath of the Persian Gulf War: Veterans, Families and Communities. Washington D C, American Psychiatric Press, p.44.
 ¹⁶⁵ Ibid

¹⁶⁶ S. B. Henry, (2003). Walking on Egg Shells: A Qualitative Study on the Effect of Trauma and Deployment in Military Couples.(Doctoraldissertation).p.29.Availableat:http://krex.kstate.edu/dspace/bitstream/handle/2097/9157/StaceyBlalockHenry2011.pdf?sequence=1&isAllowed=y Accessed on 11November 2014, p.29.

non-adherence to the treatment regime, resulting in some victims being in that condition and out of it again and again. She illustrated several cases on the ground where the depressed officers have threatened to exterminate their respective families, their colleagues or kill themselves. As indicated by her, when the said officer retires from the service before recovering, they can be dangerous to themselves and the community.¹⁶⁷

4.5 Traumatic Brain Injury

Lawrence-Scott and Philpott define Traumatic Brain Injury (TBI) as a disorder triggered by swift trauma, for example, blow or jolt to the head or penetrating head injury that interrupts the brain's normal functioning.¹⁶⁸ Common symptoms for TBI can be categorized into psychological and non-psychological. Psychological signs include confusion, fatigue, insomnia, depression, anxiety, irritability, and PTSD, while non-psychological ones include clumsiness, dizziness, loss of balance, blurred vision, photophobia, slurred speech, and seizures.¹⁶⁹ The prevalence of TBI during World War II was 24% and between 16-18% during Vietnam War. The prevalence for American soldiers during Iraq and Afghanistan Wars was put at 20%.¹⁷⁰ During the interview, Dr. Judy Kanini indicated that cases of TBI exist within KDF and put the prevalence at 50%.¹⁷¹ According to her, the figure is likely to rise as awareness increases and more soldiers seek help. A respondent who was nursing a TBI sufferer stated this about her experience;

Unajua haongei vizuri kama zamani. Hata kusikia ni shida. Kila wakati watu wetu wananiambia kwamba nimetupa mbao. Ati naweza kuishi vipi na mtu kama huyo. Wananishawishi nimwache. (You know he does not talk properly as before, and his hearing ability is affected. My people keep telling me I have lost my mind. How can I live with a person like him. They have been advising me to abandon him.)¹⁷²

The reaction of the extended family is seen in the context of normal human reactions to such situations. Being so young a spouse, her family would not wish to see her take care of the mentally and physically injured soldier for the rest of her life. Pressure from the extended family members who would be expected to assist in coping added to the stress the family is experiencing, making coping difficult. KDF intervention mechanism targeting such families would greatly promote confidence within the family. However, such mechanisms were

¹⁶⁷ Ibid

¹⁶⁸ C. Lawhorne-Scott, and D. Philpott, (2010). Combat Related Traumatic Brain Injury and PTSD: A Resource and Recovery Guide. Plymouth, Government Institute. p.28.

¹⁶⁹ A. J. Marvasti, (2012). War Trauma in Veterans and their Families: Diagnosis and Management of PTSD, TBI and Comorbidities of Combat Trauma, Illinois, Charles C Thomas Publisher Ltd, p.16.

¹⁷⁰ Ibid

¹⁷¹ Oral Interview, Nairobi, on 19 August 2021.

¹⁷² Oral Interview Nanyuki, on 12th August 2021

unavailable, making this particular family and others interviewed numb their feelings in the absence of KDF need-based programs and services.

4.6 Substance Abuse and other Related Disorders

Alcohol and substance abuse have been associated with secondary disorders after combat. During the Vietnam War, Rundell and Ursano observed that alcohol dependency was more common in soldiers who had been exposed to intense battle conditions with a prevalence of 17.2% than those less exposed to severe combat.¹⁷³ Statistical data on the prevalence of alcoholism on KDF soldiers could not be obtained. However, Dr. Judy Kanini informed the researcher that cases of alcoholism were on the rise.¹⁷⁴ During the study, individual cases of addiction were noted that validated Dr. Judy Kanini's claim. In one case, a nursing injury respondent stated: To stay sober, I have to drink. Alcohol addiction was considered a coping mechanism with post-war stress.

Other forms of abuse revealed during the interviews were bhang smoking, chewing of khat, and viewing pornographic material via internet-enabled mobile telephones. A spouse confided in her friend (my informant) that her husband was addicted to watching pornography and would stay late in the sitting room, a behavior that was straining their marital relationship. This habit could be attributed to situations of boredom on the battlefield during which soldiers influence one another to view such material as a method of dealing with stress. The problem of substance abuse and related disorders, as residual effects of war, was a combat-induced transformation on soldiers' behavior. The narrated experiences demonstrate the need for in-theatre and post-theatre interventions to create greater awareness of stress management in soldiers, contributing to better coping during and after deployment.

4.7 Missing-in-Action

In situations of combat deployment, soldiers are sometimes categorized as Missing-in-Action if their whereabouts are unknown. During such situations, Goldich contends that families and relatives of the missing soldiers go through a mixture of emotions, from feelings of hope through despair to fear.¹⁷⁵ However, as days

¹⁷³ J. Rundell, and R. Ursano, Psychiatric Responses to War Traumal. In R. Ursano and A. E. Norwood, (Eds) (1996). Emotional Aftermath of the Persian Gulf War: Veterans, Families and Communities. Washington D C, American Psychiatric Press, p.55. ¹⁷⁴ Oral Interview, Nairobi, on 19 August 2021.

¹⁷⁵ L. R. Goldich, (2005). POWs and MIAs: Status and Accounting Issues. Foreign Affairs, Defence, and Trade Division. CRS Issue Brief for Congress. Available at: https://www.fas.org/sgp/crs/natsec/IB92101.pdf. Accessed on 24 September 2015, p.7.

pass by, hope that the soldier would be found alive begins to fade.¹⁷⁶ In the American operation in Iraq, 49 US

soldiers were listed as MIA, and KDF declared three soldiers as missing in action during the Somalia war.¹⁷⁷

In this study, the experience of a mother of a KDF soldier declared missing in action is captured verbatim, and it corresponded with Goldich's statement on the emotional turmoil relatives of an MIA victim

experience. The respondent stated:

I couldn't eat because I was asking myself: How can I eat when my son is probably not eating wherever he is? Given the acts that those terrorists had done before, I used to think that maybe they are cutting him piece after piece as he watches. Maybe they cut a finger today, another one tomorrow, gouge out an eye the following day, and do so many other horrific things to him. I lost my mind several times thinking about the possible horror that my son was enduring. I could cook food, hoping that maybe my husband would eat, but it was difficult for any of us to eat. At that time, we were just the two of us here. It is the church members who would comfort us whenever they came around and really encouraged us to taste, even if just a cup of tea. It is purely by the grace of God that we survived and are here talking to you today. We can't actually understand how we pulled through without eating and without sleeping.¹⁷⁸

The emotional torture that families of a soldier declared to be missing endured was aptly captured by

another respondent who stated;

The intervening days were extremely difficult for us. We couldn't eat, we couldn't sleep. I tried to keep busy at the farm until one day, I fainted while there because I had not eaten for two consecutive days. All what was on my mind was where my son was and what these Al-Shabaab terrorists could possibly be doing to him. His mother was crying all the time. She could sob until she couldn't sob anymore and just took to screaming out loud, especially in the middle of the night because we couldn't sleep.¹⁷⁹

Experiencing loss occasioned by one declared missing in action appeared harder for relatives to deal

with than even in situations of confirmed death. The uncertainties surrounding this kind of outcome made

closure impossible and were very stressful for the families. Timely intervention services, such as counseling

for the affected families, can assist in making the situation of the affected families bearable.

4.8 Conclusion

There is always stress which is connected to the participation of peacekeeping missions. The effect of conflicts and wars affects the military officers and their respective families at home. The military officer is not only affected by being subjected to the hand of the enemy but also by a series of battle filed risks. The violence connected to the combat and the long absence from home increase huge pressure on the officer in service. Nevertheless, the military officer does not operate through a vacuum as they are on the battlefront, and their

¹⁷⁶ Ibid

¹⁷⁷ KDF Operation Linda Nchi Casualty records.

¹⁷⁸ Oral Interview Othaya, on 13th August 2021.

¹⁷⁹ Oral Interview Othaya, on 13th August 2021.

respective families are in the home front battles. Upon returning home from the battle, these officers take the war back to their homes, and only this time around is a different type of war. They come home to associate with their families, who are already on another kind of war of emotions. The result of this heavily affects the different families of these officers. Hitherto, those officers have never returned from the battle, and their respective families have to make various adjustments to accept the loss. This chapter has provided a discussion on the psycho-social effects of Operation Linda Nchi on soldiers' families. The following discussed summary, conclusion, and recommendations of the research findings.

CHAPTER FIVE SUMMARY, CONCLUSION, AND RECOMMENDATIONS

5.1 Introduction

The main goal of this investigation was to assess the psychosocial and economic impacts of Operation Linda Nchi on KDF soldiers and their families during and after operations. The chapter addresses the study's objectives: the challenges facing soldiers' families before, during, and after operation; the economic effects of Operation Linda Nchi on soldiers' families; and finally, the psycho-social effects of Operation Linda Nchi on soldiers' families.

5.2 Summary

This sought to establish the psychosocial and economic impacts of Operation Linda Nchi on KDF soldiers and their families during and after operations. The findings in this study were arrived at through the analysis of themes and patterns that emerged from the primary data collected and other works from the secondary sources of information. The analysis of the findings was consistent with Maslow's need theory. This theory attempts to interrogate the human being's needs and how he or she tries to achieve these needs. The testimonies and experiences of the respondents supported the validity of the theoretical framework and the extent to which each objective was achieved. The findings thus agreed with the assertion that during the war, there was no real victory. Even if one side claims victory, there is widespread gloom, and the sighs of the weeping subdue the songs of triumph.¹⁸⁰ On the challenges facing soldiers' families before, during, and after the operations, the study established that the immediate and extended family members expressed profound sadness and helplessness at the notification of deployment to Somalia. The respondents expressed their views that when they realized that one of their members had been included among the soldiers to a mission in Somalia, they felt like their energy had been sapped from their bodies which prompted them to enter a session of prayers in an effort of reducing the pressure and worries connected to the mission.

The study's findings also demonstrated the general reactions from spouses in perspective in the anticipated loss of companionship due to deployment. It was also noted that most of the interventions targeting families to cope up with the situation were conducted after deployment instead of introducing before

¹⁸⁰ Kohli, S and Show Kat, K. (May 2013). The Impact of War on Mental Health of Civilians: An Overview. International Journal of Innovative Research and Studies. Vol.2(5), 262-275. Available at: http://www.ijirs.com/vol2_issue-5/21.pdf. Accessed on 16 May 2015, p.263.

deployment. For example, such interventions should provide provisions to reach military families wherever they may be based countrywide.

It was also established that, once the soldier is deployed, the spouse who has remained to take care of the family assumes all the responsibilities, for example paying for rent, school fees, electricity, and water bills. Some spouses were overwhelmed and disoriented where they suffered from fatigue, loss of appetite, and seaplanes. Communication from the deployed soldiers was inadequate because of the structural issues in KDF or the security considerations. Therefore, the family had to make an effort to communicate with the soldier, which was infrequent in most cases. This phenomenon resulted in anxiety and stress on the soldiers' spouses.

Special challenges were captured in the three main situations: the soldier had sustained severe combat injuries with residual impairment, the wife was suspected of marital infidelity and financial mismanagement. In cases where soldiers battled with injuries, it forced them to depend on others for routine matters of daily life. The interviewees expressed Matters related to financial management and marital infidelity. This scenario brought tension in soldiers' homes and their spouses, which resulted in communication difficulties, and in some instances, it brought separation and divorce.

When a death occurs, parents lose their son, a spouse loses a husband and the children's father, while the siblings lose a brother. Therefore, the loss of a soldier meant the loss of a breadwinner for both nuclear and extended family. This incident is because there are the very people who bear the greatest burden in times of loss, hence their grief does not fade away quickly like that. From the interviewees' responses, they expressed emotions of intense grief and profound loss, which resulted in physical, economic, social, and emotions.

The death of a soldier destabilized the family economically and social security. The reason is that the majority of the military officers were the sole breadwinners where his/her death resulted in financial vulnerability. Their children's education becomes a challenge as these children would not be able to access quality education due to the absence of the soldier. It was noted that providing for the children was proving to be a challenge as some of the children were already out of school due to a lack of school fees.

Upon the death of a soldier and once the burial process is completed, the enjoyment of service benefits ends, and the family must move away from the supportive military community. Some families reported being torn between staying in town and relocating to a rural village during the interviews. Relocating to the rural home meant transferring the children from urban schools to rural ones. Such relocations had a destabilizing effect on the family, particularly the children. The death of a soldier thus translated into a loss of regular income and the supportive military community for the immediate family. However, the economic loss was observed to have been felt beyond the immediate family. Since most of the soldiers came from modest backgrounds, they were also financially supporting other relatives such as parents and siblings.

The second objective of this study was to establish the economic impact of operation Linda Nchi on soldiers' families. From the results of the findings, it was established that the children and families of military officers, the economic news was not badly off as the service members earned more than what the civilians of the same level of education earned. They were also provided with many benefits that the civilians had not acquired, such as comprehensive health care, tuition assistance, and subsidized child care and housing allowances. Despite the benefits, the military officers in service tended to work longer hours than the civilians, and they were exposed to various hazards which the civilians did not encounter. The extra payment and benefits assisted their families to cope financially but cannot solve issues with stress.

The soldiers' spouses are well-considered in terms of payment because the military officers must move where the spouses' careers are frequently disrupted. The employers who afford job opportunities are hesitant to offer them employment fearing the costs related to job orientation and training. Hence, a majority of military spouses are either unemployed or work for fewer hours than the spouses of the civilians, and majorly if by any chance they secure a job opportunity, they are paid less salary than the spouses of civilians. Despite the high pay of military officers, some members of the military and their respective families specifically the junior ranks report distress in terms of finances, and few of them are eligible for food stamps. Finally, the pay increment of the current years has declined and the force cutbacks are upcoming; thus, both of these aspects will modify the overall picture of financing the service members, probably for worse.

The third objective was to determine the psycho-social effects of operation Linda Nchi on soldiers' families. According to the responses from the field, it emerged that isolation in soldiers' families results during and after the process of deployment. Soldiers' spouses had PTSD, parenting and marital strain, and depression. Soldiers' children were stressed by several deployments and were not aware of when the deployment occurred. Most spouses were worried about managing and single parenting of the children alone. This situation was

particularly to the married officers to other soldiers. Military officers were also regularly worried about losing their respective spouses where many of these cases specifically to the newly married officer occurred in the period of other peacekeeping missions.

Apart from the fear of military officers losing their spouses, some of them returning from the mission have happened to kill their spouses after suspecting them of infidelity. Families and children were also affected because of the deployment as it is involved with regular movements from one place to another, which specifically affects children. The spouses also indicated that parenting of young children in deployment periods is stressful as young children regularly demand to know where their parent was distributed, the returning period, and the reason the parent has never called the children. It was also reported that some military officers had difficulty adapting to their families after returning from deployment, which resulted in even disciplining their children being a problem as most children got used to being corrected by their mothers. Families with young children faced the challenges of informing the children about the injuries that occurred and the uncertainty over the child's reaction to the soldier's new condition.

Families with young children faced the more significant challenge of informing the children about the injury and the uncertainty over the child's reaction to the soldier's new condition. Injuries that altered an individual's original appearance were noted to have the most significant impact on families. Many other families expressed similar emotions, with the general theme being fear and hopelessness. The reaction of the children towards the father exerted greater stress and strain in the family. Extended hospitalization due to injuries suffered was also noted to have exerted emotional pressure and financial strain on families. For example, family members travelled to Nairobi from other parts of the country to be close to the patients. Accommodation became an issue, particularly for families that had no other relatives in Nairobi.

5.3 Conclusion

The first objective was to analyze the challenges facing soldiers' families before, during, and after the operation. Indeed the impact of KDF's incursion into Somalia was felt far and wide within KDF and in many villages in the country, and the general mood was that of stress and distress. Military families were found to have been the first casualties of the conflict. The soldiers' general reactions were the anticipated loss of

companionship due to deployment, and most interventions targeting families to cope with the deployment situation were conducted after it had been done.

It was also indicated that once the soldier has been deployed, the spouse who remained to take care of the family assumed all the responsibilities, for example, paying for rent, school fees, electricity, and water bills. Some spouses were overwhelmed and disoriented where they suffered from fatigue, loss of appetite, and seaplanes. Communication from the deployed soldiers was not adequate because of the structural issues in the KDF or the security considerations. Therefore, the family had to make an effort to communicate with the soldier, which was infrequent in most cases, resulting in stress and anxiety on the soldiers' spouses. Therefore, with these findings, the study accepts the alternate hypothesis that: H1: Soldiers' families face various challenges before, during, and after operations.

The second objective was to establish the economic effects of operation Linda Nchi on soldiers' families. The study concluded that the economic news was mostly good, as the service members earned well compared to civilians. Also, they received many other benefits, such as comprehensive health care, tuition assistance, and subsidized child care and housing allowances. Despite the benefits, the military officers in service tended to work longer hours than the civilians, and they were exposed to various hazards which the civilians did not encounter. The extra payment and benefits assisted their families to cope financially but could not solve issues associated with stress.

The military officers' spouses were well considered as they were well paid because the military officers are required to move where the spouses' careers are disrupted frequently. The employers who afford job opportunities are hesitant to offer them employment fearing the costs related to job orientation and training. Hence, a majority of military spouses are either unemployed or work for fewer hours than the spouses of the civilians, and majorly if by any chance they secure a job opportunity, they are paid less salary than the spouses of civilians. Despite the high pay of military officers, some members of the military and their respective families specifically the junior ranks report distress in terms of finances, and few of them are eligible for food stamps. This phenomenon confirms the second hypothesis: **H2:** Soldiers' families are economically affected either positively or negatively before, during, and after operations.

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The third objective investigated the psycho-social effects of operation Linda Nchi on soldiers' families. It was established from the field responses that isolation in soldiers' families results during and after the deployment process. Soldiers' spouses had PTSD, parenting and marital strain, and depression. Soldiers' children were stressed by several deployments and were not aware of when the deployment occurred. Most spouses were worried about managing and single parenting of the children alone. This scenario was particularly to the married officers to other soldiers. Military officers were also regularly worried about losing their respective spouses where many of these cases specifically to the newly married officer occurred in the period of other peacekeeping missions. The spouses also indicated that parenting of young children in periods of deployment is stressful as young children regularly demand to know where their parent was distributed, the returning period, and the reason he/she has never called them. Injuries that altered an individual's original appearance were noted to have the most significant impact on families. Many other families expressed similar emotions, with the general theme being fear and hopelessness. The reaction of the children towards the father exerted tremendous stress and strain in the family. Extended hospitalization due to injuries suffered was also noted to have exerted emotional pressure and financial strain on families. It prompted families to travel to Nairobi from other parts of the country to be close to the patients. This incident supports the third hypothesis: H3: Psycho-social effects of Operation Linda Nchi exist on soldiers' families.

5.3 Recommendations for Policy Implications

The Somalia war has brought new realities and challenges to the military family in Kenya. The Kenya military family may not have been deployed in the theatre, but the emotional stress of being attached to the soldier and the trauma they endured during the deployment placed them in the front row of those in need of mental health services. Therefore, to respond to their current and future mental and emotional health care needs, the researcher recommends the establishment of trauma centers in designated units. Having such a facility close to those who need its services would greatly benefit the many victims who require assistance.

Military policies and programs have increasingly seen family wellbeing as central to the overall health of the force. Spouses and children who are happy with military life are more likely to support a service member's decision to stay in the military. To continue improving the military's programs and services for families, policymakers and service providers must understand military spouses and children's social context and needs.

The researcher further recommends that a deliberate effort be made to provide counseling to permit both the military officer and his family to access these services conveniently and with confidentiality. This could be attained by decentralizing counseling services to individual units and entering into a partnership with the private sector to offer such services for the benefit of soldiers and their families. They may not be comfortable to openly sharing their traumatic experiences or family issues with a uniformed colleague.

Taking into account that soldiers usually deploy in defense of the nation and the circumstances that generally surround the death of a soldier during such deployment, the researcher holds the view that there is a necessity to establish to assist bereaved families to stabilize before compensation money is received and to transition from a military family to a civilian one. This proposal would not be unique to only KDF but will also be embraced by various military families globally. Having such an arrangement would not only indirectly boost the morale of the soldiers but also cushion the families and reduce the possibilities of begging, as is currently the case, a situation that makes both KDF and the Kenyan society appear unappreciative and insensitive.

During conflict situations, soldiers risk their lives for the rest of the nation, and upon their death, most of them leave behind very young families. The demography of KDF casualties in this war was no different. In light of this, it is the researcher's opinion that since the soldiers laid their lives in order for the society to be safe, the society has the responsibility to give something in return. The researcher thus recommends that the responsibility of taking care of those left behind, particularly the children, should be taken over by the society that the soldier was protecting. As a way of expressing gratitude for the sacrifices made, the responsibility to educate children whose fathers died in defense of the nation should be taken over by the state at public expense, as is the practice in other advanced militaries.

On compensation procedures, the researcher recommends that post-burial contact between the soldiers' family and KDF should be maintained and should not end until the compensation process is duly concluded. This scenario could be done by assigning an officer to each deceased soldier's family with specific instructions on what his/her role is and when it should end. The designated officer would need to liaise very closely with

the soldier's appointed kin for information or clarification so that the processes are handled as smoothly and efficiently as possible. The existing practice in which the bereaved families are left to do the chasing on their own through a government bureaucracy that they hardly understand was quite stressful.

As stated in the findings, most of the deceased soldiers were the sole breadwinners of their immediate and even extended families. Their deaths left the affected families financially exposed. When one considers the needs of a young family in the foreseeable future, such as education, health, and development, among other needs, a compensation amount of USD 50,000 offered by AMISOM to bereaved families is insufficient. The researcher thus recommends that KDF adopts a one-for-one policy whereby a sibling or any other close relative to the deceased soldier is recruited into the military so that there is continued financial support, enhanced hope, and reduced stress to the families. Such a policy would portray KDF as an organization that is not only empathetic, but also one that appreciates the sacrifices made by its members.

The researcher further recommends that the term concerning a military officer be conceptualized well, particularly in war periods, and be lengthened to encompass the legitimate guardians/parents of the soldier. Such policies might assist the said parents in benefiting from the armed forces' counseling and mental health care services. The suggestions are grounded on the findings presented in the present investigation that underlined the feelings and experiences of the parents. Because of the inadequate community-based services, which may provide the need-based remedies, empowering the KDF parents to receive the benefits offered may assist them to cope up and reduce their pain, specifically in the event of severe combat injuries or losses.

To validate the gratitude and recognize the sacrifices made by the soldiers during combat in securing the nation, the military officers returning from the mission should not be quietly welcomed back home as an obvious case of someone who has just returned from the field. The present study recommends that these officers be esteemed and honored for their suave performance at the theatre of war. The military officers should be rewarded by being given medals and handed the country's national flag to recognize their bravery. This gesture will be etched in the memory of these soldiers, which will act as a regular reminder of the honor conferred to them by the state.

Finally, the researcher recommends that to promote the general well-being of the military family, particularly the children, KDF needs to develop well-researched intervention programs for military children.

Not only would such research address a critical gap in the support systems, but it would also provide greater insight into how the war impacted KDF children.

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APPENDICES

Appendix I: Interview Schedule

Interview Guide on the assessment of the psychosocial and economic impacts of operation Linda Nchi

on KDF soldiers and their families

Information with regard to challenges facing soldiers' families before, during, and after the operation

- 1. Kindly indicate your experience during the deployment period
- 2. What were your feelings when you were informed that your spouse had been deployed to Somalia?
- 3. Describe the difficult moments you went through during the deployment of your spouse
- 4. List down some of the concerns you had with regard to your spouse during the deployment period
- 5. How did you manage this situation/ some of the life practices/ remedies to cope up?
- 6. Please indicate the frequency of communication with your spouse during the deployment period, what mode of communication did you embrace
- 7. Provide information on how your spouse responded with regard to his/her whereabouts
- 8. In your opinion, do you think his/ her absence affected your relationship? If yes, how.
- 9. Can you describe the feelings on the news of his/ her return to home?
- 10. Indicate how you were assisted by the military in general during the absence and return of your spouse
- 11. Any challenges you faced in your relationship

Information with regard to economic effects of Operation Linda Nchi on soldiers' families.

- 1. Kindly describe and provide insights on the assistance offered by the military in general
- 2. What is that thing you might feel that would be done differently in the military with regard to soldiers and their families?
- 3. From your own assessment, how can you rate the assistance provided by the military towards the soldiers and their families
- 4. Kindly indicate whether there exist any monetary benefits, allowances, tax exemptions, or otherwise, that soldiers and their respective families are enjoying from the government in connection with the deployment of the soldier
- 5. Are there any monetary benefits, compensation, or otherwise, that the soldier and their families enjoy from the government during their death? If yes, describe each.
- 6. How have you managed the loss of your spouse?

Information in regard to psychosocial effects of Operation Linda Nchi on soldiers' families.

- 1. Kindly indicate the number of years you have been together as a couple
- 2. What were some of the sources where you got the information on the injuries the soldier encountered?
- 3. What were your reactions and reservations when you received the information in connection to the injuries of the soldier?
- 4. How have his injuries affected your daily routine?
- 5. How do you feel about the soldier's injuries?
- 6. How have the other family members, relatives, and friends reacted to his injuries?
- 7. How did the children receive the news about his injuries?
- 8. How can you describe the children's reaction to the news then?
- 9. How can you describe their behavior now?
- 10. Have you noticed any general change in the children?
- 11. Do you think this injury has affected you and your family?
- 12. How helpful has the military been? Describe the nature of any assistance offered by the military
- 13. Did injuries to/death of parents affect children's performance? If yes, state how?

- 14. How have you managed to cope with the loss?
- 15. How has this loss affected your relationship with other family members?
- 16. Can you explain what this loss means to you? And to the family?
- 17. How has this loss affected you personally?
- 18. Have you lost any other family members before?
- 19. How do you compare the soldier's loss and the previous ones?

Thank you for your participation in this interview

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