

**DURATION OF EXPERIENCE OF WAR AND HOW IT RELATES TO STRESS
LEVELS AMONG SOMALI REFUGEE WOMEN LIVING IN EASTLEIGH STAREHE
SUB-COUNTY**

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DECLARATION

This project is my original work and has not been presented for any award in any other university.

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This research project has been submitted for examination with my approval as university supervisor.

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DEDICATION

This project is dedicated to my family.

ACKNOWLEDGEMENT

First, am grateful to God for seeing me through the whole study period, for without Him, I would not have gone this far for the project marks a great achievement in my life. Secondly, I appreciate my supervisor Dr. Oketch Oboth, for guiding me through this project. Third, I also thank my friends Thige, Loise and Wachira who have been a source of inspiration towards the development of this project. Lastly am grateful to my family; husband George, daughter Naserian and son Leshan for their understanding during my time of study.

Be blessed.

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ABSTRACT

The study focused on how the duration of experience of war relates to stress levels among Somali refugee women living in Eastleigh Starehe Sub-County. The specific objectives were to determine whether the duration of experience of war relates to stress levels among Somali refugee women living in Eastleigh, to identify the levels of stress among Somali refugee women living in Eastleigh and to determine the type of coping mechanism used by the Somali refugee women living in Eastleigh to cope with stress. It sampled 129 respondents randomly picked from Somali refugee women who were beneficiaries from five refugee agencies. For data collection a questionnaire was used. Analysis of data was done by adopting descriptive statistics, correlation and multiple regression. The researcher established that, duration of experience of war relates to stress levels among Somali refugee women living. Those who experienced war for long are faced with higher stress levels. The outcomes showed that many of the Somali refugee women were stressed. This was as a result of war in their country and from their encounters during their journey while fleeing to Kenya. The host community also stressed them and the stress from re-integrating with the host community. The study revealed that there were various types of coping mechanism used by the Somali refugee women to cope with stress. A great number act calm and normal when while some felt emotionally and physically drained. A large number know how to manage stress while a great number do not quickly find solution when stressed. The study concludes that the duration of experience of war relates to stress levels among Somali refugee women living. Those who experienced war for long are faced with higher stress levels. This study recommends that there should be intense counselling programs with psycho trauma informed at each refugee agency. UNHCR should source for more aid to support refugees. Better refugee policies to be incorporated in the Kenyan laws. The women refugees can be trained on how to cope with stress. This can be done through the Ministry of Health and Ministry of Gender and Sports by having them attend workshops and seminars within the sub county.

CHAPTER ONE

INTRODUCTION

1.1 Background of the Study

Globally we have above 19 million refugees, war made most of them to be displaced while others are due to planned violence. Numerous immigrants live in the receiver nations for many years. According to the estimation done by end of 2014 approximately a partial of the world's refugees will have stayed in prolonged immigrant conditions, meaning to have being in exile 5 years or more lacking prompt prospects for long-lasting resolutions. Bogic and Njoku (2015) explained in their study that a refugee can spends over 20 years in exile before finding a solution or going back home. Guterres (2009), in his paper paints a picture on the life of refugees in the twenty first century. According to him refugees have greatly increased due to many conflicts in the world. The causes of this conflicts range from political, ethnical, resources and religious differences. He argues that when such conflicts armed conflicts then it gives rise to refugee problem making them to move from one country to another looking for safety (Bogic & Njoku 2015)

The main and general meaning of a refugee that relates to conditions is confined in Article 1(A) (2) of the 1951 Agreement, as revised by its 1967 Procedure, describing a refugee as somebody due to war, persecution, or violence forced him or her to flee from his or her country . 1951 Refugee convention United Nation Human Commission for Refugees (2011) confirmed that refugee undergoes a lot of oppression because they belong to a certain societal community. Because of this, they fear the idea of returning home. Refugees flee their home countries because of War and ethnic, tribal and religious violence. According to him the international community should be tasked to establish policies and legal framework which is then grounded to humanitarian principles and which will not also ensure that people who are running away from their countries due war or social crisis are nor repatriated, until or unless there is safety to return.

Guterres (2009) argues that refugees face a lot of difficulties in their struggles to rebuild their lives at the country of asylum seeker as the host has its dynamics. According to his this alone has contributed to the changes faced by refugees. Further he suggests that the policy frameworks should be put in place to ensure that the international community deploy all the tools to aid trade, diplomacy, security and relieve the host community for the well-being of the refugees.

Guterres works is very important to this study since it gives a clear understanding on the problems faced by refugees in general. However, it does not answer the problem that this current project has set to study. Hyndman (2000) in her article enumerates how no region in the world is immune to conflict. She goes further to say that such conflicts must be managed through humanitarian support. According to her most human displacement is due to conflicts, negative ethnicity, and political created famine. According to her there are factors that cause human displacement such as cultural cleansing, conflict or unannounced politically induced famine often emerges, making hard to organize for. No country is resistant to most of crises for humanitarian and the consequences of enforced migration, however humanitarian opinions should be able come out and speak on long-lasting resolution to finish these battles. According her setting with Giles Hyndman offer us with a valued reminders that numerous of the world's refugees will not go anywhere, but discover themselves stuck in circumstances of prolonged exile, but don't have immediate hope of searching explanation by means of volunteer repatriation, resettlement or local integration to a third state (Hyndman, 2000). This study is yet another important literature for my study; however, it does not answer the research questions raised by the current study.

The research conducted by Martin and Bonfanti (2015), established that, we have big flows of refugees and (IDPs) in Eastern Africa also from horn of Africa. Further suggest that, most attention is not received from donors and international media that is the problem. He adds that, 'it's very interesting for the fact that refugees, IDPs numbers exceeded the numbers of the 2004 migrants. Somalia and Sudan received about 2.5 million each. In simultaneous status religion stands out, as generating accommodating, and supporting migrants, returnees, trafficking victims, internally displaced persons and other that related force migration occurrence of difficulties and dynamism. Environmental / climates change and adaptations, weak state, institutional and conflict are the causes of the refugees and internal displacement phenomena. The occurrences of displaced persons and mandatory migration have in an anthropological sense. This work is very crucial to the research giving an overview of statistics of the refugee's; it is over-all in nature without focusing on the length of experience of war in relation to stress. The declaration of human rights is observed by most African countries to the 1948 take on and declared by United General Assembly Resolution states that individual loose his or her self-worth of being a refugee. It requires anybody has right to freedom of movement, state borders

resident of a country to leave his/her nation and to go back to his/her country. According Martin and Bonfanti, (2005) he says anyone deserves right to find and enjoy from other republics with safety from maltreatment, arbitrarily, denied of his nationality or right to change his nationality.

According to GTZ (2003) the African countries are not left behind. Political instability and conflicts have affected them. These conflicts have led to a mass movement which to the neighboring countries as refugees. According to him refugee population in Africa is about 3.5 million with about 50% of this population being in Africa. According to the estimates, Africa alone accounted for about 17.5 % of the world's refugee's population, this made the Continent highest refugees' concentration per unit area in the world (GTZ, 2003). The study was then supported by the UNHCR (2010) statistical data which estimated that, Kenya hosts more than 374,000 refugees with important consideration on the difficulty of refugees who live in congested camps like Dadaab in the east of the country. The focus on number of refugees living on urban centers is little. Even though, the strict number of the population of refugee in the Nairobi city is unknown. 46000 is the official figures suggested in Nairobi according to the UNHCR (2010), but unauthorized approximations are closer 100,000 Refugee Consortium of Kenya, (2008); Dix, (2006). The quantitative and qualitative information existing on these populations is rare despite this higher number. Town refugees are spread on great towns, frequently very movable and unwilling to seek for support because of fear to be expatriated or sent to refugee camps. These circumstances make refugee mostly 'invisible' inhabitants, regardless of the need for protection with supporting mechanisms. This is general information on the general statistics of refugees.

Upon arrival to Kenya the refugees are faced with three options. They can be resettled to the third country of asylum seeker, repatriated (voluntary repatriation) back to their country and the third option is for them to re-integrate with the local community. According to Garlick (2015), documentation is the refugee primary source of information for UNHCR and the government. The Department of Refugee Affairs (DRA) is recognized by the Act for accountabilities which include getting and handing out requests for migrant status, these were delegated to UNHCR from the early 1990s. In 2011 the registration of refugees was done by DRA however merely reassumed about RSD 2014 in functions Garlick et al., (2015), inadequate resources and limitations of capacity, the transferal of RSD roles have not been accomplished. The process of

RSD takes roughly two years slightly than the proposed maximum of six months, and presently deficiencies of an appeal system UNHCR and DRC, (2012). The DRA was disbanded in November 2016 with shortly and then substituted by a Refugee Affairs Secretariat, mainly tasked by the similar tasks. Indication from reports shows that staffs of the new Secretariat are mainly drawn from department of intelligence and government security. This information is important in guiding the researcher to understand process involved for the refugee to observe in a country of asylum seeking and its challenges.

1.2 Statement of the Problem

There has been an increase in population in many cities and towns due to war occurring in other countries. According to the UNHCR (2006) estimates more than half of the refugee population will be living in urban areas in two decades leaving Sub-Sahara Africa being the most rural region in the world (UNHCR, 2006). The increase in population flowing to urban areas is as the result conflict and disasters. The UNHCR statistics showing that a few refugees are left in camps to depend on local and international aid (UNHCR, 2011).

With Kenya receiving a large refugee influx, statistic estimates showed that the country received 12,000 refugees in 1988 UNHCR Nairobi, (2004) and in Campbell, (2006). Kenya has then become a home to many asylum seekers registering a larger number from Somali and Ethiopia (UNHCR 2013).

According to the Human Right Watch (2002) Kenya Government has restricted refugees' numbers to the urban centers. Most of these refugees have then run away from the camps which were created for them to the city center citing lack insecurity, low system of education and inadequate medical care as the reasons for them to move to the city centers like Nairobi (Human Rights Watch, 2002).

Refugee women suffer the most, they are left behind to cater for their big families. With minimal assistance from the refugee agencies these women are at times forced to exchange sex with money to feed their families. They then tend to expose themselves to risks of abuse (RCK 2008). Many studies have been conducted on urban refugees but a few of them have concentrated on the duration of war and stress levels on Somali refugee women living in Eastleigh and their coping mechanisms.

According to Sigmund everyone has a defense mechanism which when one is stressed, they tend to use these defense mechanisms without knowing. Once a person experience trauma due to war, conflicts or violence, he or she will suffer stress. This would then mean that this person requires seeking counselling services to help him either do away with the stress or learning to adjust and leave with it. What happen next is if this person is not able to reach a counsellor or if there is no place to seek such services and the issue is not addressed then this will lead to stress which will cause post-traumatic stress disorder leading to a pathology which can result into depression. This study is therefore trying to find out whether duration of experience of war, amongst refugee Somali women, has a relationship to the level of stress and the coping mechanism to the stressors.

1.3 Objectives of the Study

The study was guided by the following objectives:

- i. To determine whether the duration of experience of war relates to stress levels among Somali refugee women living in Eastleigh.
- ii. To identify the levels of stress among Somali refugee women living in Eastleigh.
- iii. To determine the type of coping mechanism used by the Somali refugee women living in Eastleigh to cope with stress.

1.4 Research Questions

- i. What are the effects of the duration of experience of war to Somali refugees in Eastleigh?
- ii. What are the levels of stress among Somali refugee women living in Eastleigh?
- iii. What types of coping mechanism are the Somali refugee women using to cope with stress?

1.5 Hypothesis

- i. There is no relationship between the duration of experience of war and stress levels among Somali refugee women living in Eastleigh.
- ii. There is no relationship between the duration of experience of war and the coping mechanism used by Somali refugee living in Eastleigh.

1.6 Scope of the Study

The study concentrated on the levels of stress among Somali refugees' women residents of Eastleigh Starehe sub-County Nairobi. Data collection will take place in Eastleigh Starehe sub-county. Starehe sub-county was selected because it has the largest population of refugees Somali women than any other major town in Kenya. The researcher chose Nairobi reasons being, the town is easily accessible by the researcher.

1.7 Significance of the Study

The study was significant in determining the levels of stress among Somali refugee women due to the duration of war. The study also informs the Government and refugees agencies of the type of coping mechanisms that these women can use to cope with life stressor. This may help the international community, humanitarian agencies and donors to look for mitigation measures to bring peace among the fighting countries in the world. It may also be an eye opener to put in, strategies that favors refugees this includes the inclusion of polies in the refugee bills to fight for their rights. This study was also very important to the target group since they were able to break the silence and speak out to raise their issues.

1.8 Justification of the Study

As addressed above the Somali refugee woman carry a lot of responsibilities without any support. Despite their vulnerability status they still stand up for their families. Mbithi (2007) cited that women and especially Somali have been exposed to different types of constrains. The civil war has exposed Somali women to stressful experiences. He added that with the men figure being wiped out families left behind suffers most. Due to these, the study would like to look deeply into this challenges that are affecting the Somali refugee women psychologically. This study will assist in policy formulation and inclusion of these women to stand up and fight for their forgotten rights.

1.9 Limitations of the Study

Not all refugee women from Somalia were able to write or read. This was seen as one of the limitations as the questionnaires was self-administered. To overcome this limitation the researched employed research assistant to those who were not able to read or to write or understand the questions as well as to write the answers.

1.10 Definition of Terms

Refugee: Somebody being forced to escape his or her motherland, due to a well-founded fear of being persecuted because of race, faith, citizenship, belonging to a community group or political opinion.

Coping Mechanism: means plans often used by people undergoing stress or trauma to enable them manage difficulties or painful emotions. Coping mechanisms help in maintain emotional well-being by adjusting stressful events (Richard, 1984).

Vulnerability: being susceptible to different kind of threats and hostility.

Post-traumatic stress disorder- (PTSD) is unbearable psychological circumstance or event caused by a main shocking event or painful such as, death of beloved one, war, rape, a terrorist act, a natural disaster, or fatal accident.

Trauma- means where by a personal experienced of an occasion which involved real or endangered to death or severe injury, or further threatened toward someone physical integrity; or observing an incident that encompasses death, injury, or the physical integrity of another person was threatened; or unexpected or violent death was learned, harm which was serious, or threat of death or a family member experienced injury or other near associate (Criterion A1).

CHAPTER TWO

LITERATURE REVIEW

2.0 Introduction

This chapter provides related, appropriate areas of literature in the study. The section outline review of literature and study interrelated to, duration of experience of war, levels of stress as well as the coping mechanism among Somali refugee women living in Eastleigh.

2.1 Effects of War on the Refugees

According to Grandi (2018) 80% of the world refugees seeking refuge and asylum are being sheltered in the neighboring countries. The war back in their countries not only displaced them but has made them poor, sick, claimed the lives of their loved once and left them with a wound (Grandi, 2018). He continues to say that with this numbers increasing daily, countries like the US which used to resettle quiet several unaccompanied refugee minors has then under the Trump administration reduced the number downwards.

The above study was then opposed by Skrede et al., (2002) who according to him the mass population movement that is caused by war in different regions of the countries will spread conflict across regions. He continued to say that there is a high likelihood that the neighboring countries will experience conflicts and that no country is safe more likely those that are hosting refugees. Differing from the above study, the Guardian research (2018) indicated that refugees who have stayed for more than seven year in exile due to war are not ready to go back to their countries citing that it is not safe for them to return (Guardian research 2018).

However, The Ottawa Citizen (13 Sept. 1993) noted that throughout the conflicts and war in Somali women bare a lot of effects. They are subjected to different kinds of abuse and are also left behind after the death of the husbands due to war, to take care of their children. He added that a lot of these issues have drawn attention of the human rights groups but still less has been done to address most of it (The Ottawa Citizen 13 Sept. 1993).

The above study was greatly supported by Mbithi (2007) who cited that women and especially Somali have been exposed to different types of constrains. The civil war has exposed Somali women to stressful experiences. He added that with the men figure being wiped out families left behind suffers most. According to him although women are mostly spared when it comes to war, but this does not make them safe. Within them there is fear being killed (Mbithi, 2007).

2.2 Duration of Experience of War

According to UNHCR Fact Sheet (2018), in African continent Somalia has experienced one of the extensive consecutively conflicts. The number of Somali refugees registered in Kenya stood at 208,891 registered Somali refugees in Kenya with (44%) of them in Dadaab, 186,205 (40%), in Kakuma & Kalobeyei Settlement, 72,355 (16%) in urban areas and 2,318 in Moyale. The increase of refugees to Kenya and Ethiopia was as a result of collective violence and social structures destruction with compounded serious drought in 2011. By mid-2015, UNHCR had counted 1.1 million refugees from Somali. In Kenya most live (in camps around Dadaab and in Kakuma, while others live in major towns) and in Ethiopia (in camps around Melkadida and Jijiga). This is very important and applicable in the contextual of the research however it does not address the problem of the current study. UNHCR Fact Sheet (2018). The above was later supported positively by Hedge (2003) who according to him, Of the previous 3,400 years, people have been totally at harmony for 268 of them or recorded just history of 8 percent. In his research he added that, smallest 108 million individuals in twentieth century were killed in war. Approximations for the overall figure who lost their life because of wars during all human history variety from 150 million to 1 billion (Hedge 2003). Both contributions have a significance to the current study although it is has not narrowed down to the study population.

According to the Guardian Research Department (2012) war in Somali has not just started the other day. Somali war has been there since the first and second world war. Guardian Research Department (2012), narrowed down the history of the war which according to them began in 1950 when Italian Somali land turn into a UN trust ground under the Italian management. After six years later the nation was given inner independence and they went ahead to hold elections. Guardian Research Department (2012), July 1960 British and Italian Somali land got its independence and elected Abdullah Osman as their president although the country's borders were not clearly defined, and this brought about the hostility with Kenya and Ethiopia. Shermarke took over later as the president but was assassinated in October 1969 and in 1970 Somali was declared a socialist state. By 1977 to 1978 the country joined the Arab league. Several elections were conducted and in 1991 by then president Barre was chased from office. This then led to the collapse of the government which has led to the ongoing federal and civil war. Several peace keeping troops have been in and out of the country to maintain peace and order with no success.

With huge support from Mark and Sally (2010), the past two decades Somali nature has been changing with crisis of war. This was seen from the civil war in 1980s to the collapse of the government state. Through this time Mark and Sally (2010) noted that, the worldwide atmosphere changed from the end of cold war to the beginning of global war on terror which has greatly impacted on the calamity and worldwide answer. This is then a big challenge for the parties that are trying to work on peace and reconciliation. This background information gave the researcher the genesis of war in Somali although it does not answer the research question for the current study.

Debarati and Ruwad (2009), later different in their studies. Their study looked at the health and food components which became a big challenge in Somali due to war. They stated that improving the health component in Somali had been a big challenge due to the recurring civil conflict. According to them the breakdown of the government in 1991 is due to struggle of power between the political factions, which has led to quite several displacements of people and warlords diverted for food aid. A United States-led armed involvement tried to enable contact for humanitarian assistance. Despite all this it was not easy to distribute food due to armed forces clashes in Mogadishu. Because of the disruptions famine continued even after United Nations (UN) peacekeepers trying to restore order, (Debarati & Ruwad 2009). The study perfectly relates with the current study in that the mentioned components have contributed to the stress levels currently faced by Somali Refugee women in Eastleigh.

2.3 Stress Levels among the Somali Refugee

A research conducted by UNICEF (2010) indicated that, afterwards additional than two years of war, a peer group of Somali youngsters lost the formal education opportunity and other stable childhood benefits. A primary school-aged children enrolment rate in Somali is the lowest in world with only school children with 30% and 40 % only being girls. 18 % of kids in rural families are in schools. Drought, poverty and nomadic pastoralism are the cause of school difficulties. Parents lack school fees to support their children to go to school. Girls are not left behind with lower percentage of them attending school than boy. This is due to the fact of low availability of sanitation facilities, early marriages and female genital mutilation. The study also argues that In Somalia, numerous children attend primary much later than the recommended beginning age, (UNICEF 2010). Henkin (1998), supported the above study although stated that,

immigrants have less space in Nairobi to meet basic needs .With limited access to basic needs, sanitation, health care, employment opportunities and education. Most of their time spent on trying to obtain food and other material assistance. This has at the end made them to develop dependency syndrome from agencies and churches giving assistance. On the other hand, the report clarifies that, the principle international instrument pertaining refugees' economic rights are clear, this was adopted in Geneva in 1951 through the UN Convention. Although the economic rights are very clear, the host government needs to be effective in implementing for it to take place.

On a different study by Wagacha and Guiney (2008) economically town refugees are active, predominately in the informal sector, left over on the bounds of the economic status they dwell in live. Many arrive with high education levels but blocks to marketplace contact meaning they often involve in unqualified or low trained immigrants 'occasions so that they can make selections about their well-being and resilience, regardless of work. The above findings were greatly and positively supported by the Women Refugee Commission (2011) who ascertained that most urban refugees are indeed economically active. They added that these refugees have many concurrent living plans, like small business, home-produced part-time work or self-employment like tailoring. They different in the sense that even though this population is economically active but still challenge for them to cover their basic expenses, WRC (2011). With many of them living in poverty it is estimated that the needy one depends one main source of income or agencies social support. Bearing in mind that they must also pay for rent, if they are unable to do so, they are being rejected and crowded with high population in rooms, find accommodation on streets, get less food and participate in plans with negative economic status. With no otherwise but choose to go ahead with the negative economic strategies women increase their risk to gender-based violence, this narrows down to the children who at the end taken to a family member, stops schooling and forced to earn a living at an early age.

The above study was significantly supported by a different study conducted by UNHCR, (2008). The study cited that in many societies, men and boy have a lesser risk when it comes to their rights unlike women and girls who enter up in risk due to gender roles and position in community. Traditionally community structure doesn't uphold rights of women. Women and girls who are not accompanied heads of households and pregnancy, incapacitated or elder

females faces a lot of challenges. Refugee's consortium of Kenya (2008) also supported the above study. According to the study both urban and camp refugee women faces same challenges, differently from male. At the urban centers where there is no relief assistance except in rare emergency situations, these women are forced to work hard to provide for their families. It's not also easy to feed these families. Researchers established more risks associated with violence and exploitation on refugee women and girl, hence not accepted under any law and ideas of communal decency (RCK 2008). This study relates well with the current study although it doesn't answer the research questions of the study.

Refuge Point (2012) also supported with his research. According to them refugee both women and men may face the same challenges in life, but women are often subject to different kind of gender base violence which helps them for survival. International Commission of Jurists Kenya Chapter (1998), differed in their study. According to them Article 14 of 1967 protocol accords refugees' artistic rights and industrial property. According to the articles a refugee is supposed to be given equal treatment like the host in the country of asylum seeker. In Article 17 and 18 the refugee is accorded the right to earn a living through working. This article states the refugee right of being accorded the most favorable treatment in a foreign country. The above explains the rights of a refugee in the country of asylum seeker. The study can form a very good background although it has concentrated on a different area of study.

UNHCR (2011) through the operational guidelines, for the livelihood program in urban settlements, noted that the government polies make it very difficult for refugees to work or even own properties. According to them it's even worse for those refugees who access decent employment opportunities and most likely the ones in countries with high employment rates.

In the related study by Pavanello (2010) while supporting the above study he added that most asylum seekers face a lot of challenges in the cities, this is due language barrier and lack of social networks. Most of them are forced to sleep on the floor or else share a crowded room. Due to this many of them suffer post-traumatic stress, depression and mental illness. Others are hiding in the cities and are afraid to register for any services because they are afraid, they will be taken to the camps. According to Pavanello these refugees are exposed to all types of discrimination and harassment (Pavanello, 2010). Pavanello study has positively contribution to the current study since it has pointed out the level of stress among the refugees seeking asylum in

cities. UNHCR (2012) according to them rare refugees arrive proficient in official languages in Kenyan, Swahili and English. For this reasons women and girls are then forced to be domestic workers or stay at home mothers to look after the family. This study is best applied in the background information. Education provision in refugee is the biggest priorities to the communities. The world emphasizes education on nuclear family Refugees as important in the future; provide harmony in countries hope and stability (Pavanello, 2010).

Fuaad (2015) discovered that in 1945 and 1992, there exceeded 149 major wars where reports showed that more than 23m people were killed. The outcome of these killing, children have always been caught up in war fare. Further argues children with little choice have experience, at smallest, the similar shocks as their parents- as victims or even fighters. Fuaad pointed out that, terrorism and War are committed human actions of conflicts and affects children emotional and psychological and youth individuals throughout life. Fuaad (2015) their study pointed out three kids that dwelled in war zone might be in danger to develop symptoms kind of (PTSD) for psychopathological and low level of functioning of psychosocial throughout their lifespan, these points' violent environment and volatile which they are living. Fuaad added level of posttraumatic stress symptomatology differs commencing 10 to 90% for children who are exposed to long time war related stressors. It is demonstrated by apprehension syndromes such as posttraumatic stress disorder and additional psychiatric disorders as well as depression, disorderly behaviors and somatic symptoms He concluded that experience to war distress and terror causes' severe stress among children associated with a varied variety of psychological problems of development. However, he added that as a result of these kids manifest the outcomes in behavior as they grow. The study is relevant in that it addresses related stressors and stress levels; however, it does not address the same on Somali refugee women but rather on children (Fuaad, 2015).

Bean et. al., (2009) compared adolescents accompanied by parents with mental suffering, traumatic stress reactions, and experiences of URM. The study sample Involved 920 URM (48 countries; 12–18 years), 1059 immigrant and refugee adolescents (111 countries; 13–18 years), and 1294 Dutch adolescents (10 secondary and 3 trade schools throughout the Netherlands). The Hopkins Symptom Checklist-37 for Adolescents (HSCL-37A), Stressful Life Events (SLE), and Responses of Teenagers in relation to the Traumatic Stress (RATS) questionnaires were being

interpreted into the utmost predominant languages of URM's in the Netherlands. Bean et al. (2009). He noted emotional problem on gender moderated internalizing and externalizing behavior in the two contrast groups but not amongst URM's. In addition, the reports on older the adolescent showed more stressful experience and emotional problem. URM's presented a greater numeral of traumatic life happenings in assessment with the other groups. Crossways all samples, "loss of loved one" was high often reported. URM's described specially (statistically significant) great levels of experience to sex mistreatment and physical abuse related to the other groups. The researcher established stressful events; of life the strongest forecaster of internalizing behavior and stressful stress reactions. This study is very relevant but does not address Somali women refugees (Bean et. al., 2009).

Different studies by different researchers have been conducted to establish the levels of stress caused by exposure to war for unaccompanied minors both refugees and no-refugees. Wiese and Burhorst (2007) made comparison of URM's of minor refugees accompanied by families in Netherlands who were referred to adolescent psychiatry services and child. The sample size consisted patients of 29 with 70 had families and unaccompanied were 59. Wiese and Burhorst (2007) his Data for the research was extracted from intake report and structured in questionnaire involving the following, demographic data included : age level, sex, (family and community settings –level of education and employment of guardian), belief, culture, living condition (home land republic and Netherlands), education (in the home-country and presently), labor, societal information's (comrade, blood relatives, etc.), period of live in the state was cause for asylum, travelling in to symptoms the country he/she and asylum status; registering the key experiences of traumatic , symptoms of psychological as defined by the guardian, customer, parents and teacher, analytic guess as stated by the coordinator of treatment, basing on DSM-IV. Unaccompanied minors had (36%) with sexual abuse extra frequent why those who had children with family's results showed (7%). 67% girls' refugee unaccompanied and 14% youth boys had abuse sexual experience.

Dangerous happenings of traumatic like observing parents murder, those dwelling on streets, or living with rebel and being kidnapped had experience by 6% of families with children 25% of unaccompanied ($p = .002$). In terms of experienced numeral of traumatic, 54% declared one to three events of traumatic and four or more 37% reported more traumatic experiences. (63%) of

Unaccompanied minor refugee was additional probably to be four or more victims of distressing occasions than adolescents and family children (16%). Depressive disorder of (47% vs. 27%, $p < .001$) according to URMs indicated a meaningfully greater frequency of, (22 vs. 9%; $p = .045$) psychosis and borderline personality disorder (15 vs. 1%; $p = .005$) matched to families with families (Wiese & Burhorst 2007).

Hodes, Jagdev et. al., (2009), made a comparison of 78 youth refugee unaccompanied mainly from Balkans and the Horn of Africa between age of 13 and 18 years with 35 accompanied groups of refugee youth living in London, UK. Birlson Depression Self-Rating Scale, the Impact of Event Scale (IES) and the Harvard Trauma Questionnaire, result showed refugee adolescents unaccompanied were affected greater trauma war and losses, had raised symptoms of posttraumatic stress. 28 (SD 10.4) was the mean number of trauma events among the refugee youth unaccompanied and 12 (SD 9.2) amongst refugee adolescents accompanied. Total number of experiences of traumatic increased with age, predicted gender posttraumatic symptoms and low support living circumstances among unaccompanied refugee youth. Researcher established the needed great living support preparations with perceptions, afterwards 18 years of age were needed to improve mental distress (Hodes, et. al., 2009).

In the study conducted by the Department Us of Health and Human Services Centers for Diseases Control and Prevention (2014) the study pointed out that Sexually and gender-based violence (SGBV) is continuing and is used in Somalia as a weapon of war. To them Somali community stigmatization is highly in rape victims and sexual assaults frequently go unreported. Women who have undergone raping lose value in the society and face many challenges during marriage. After an assault, many survivors may isolate themselves after assault, mostly drawing from Community life. Furthermore, complications of health resulting from SGBV can be severe. Pregnancy complications can result due to sexual assault as well as issues of mental health issues comprising, depression, and Post-Traumatic Stress Disorder (PTSD), anxiety disorder and somatic symptoms. While refugee camps in countries of asylum provide some security and basic services is provided by refugee camps in countries of asylum in which camp locations can raise the danger of SGBV. Lack of opportunities livelihood frequently leads poverty in women situations where mistreatment and misuse are gradually common. Moreover, obtaining food and firewood is often responsible for women drawing them away from safe areas. Finally, inadequate

police being there with great staff turnover undesirably influence sustenance services presented to refugees. The study is very relevant only that that it does not capture the duration of experience of war (DHHS, 2014).

According to the WHO (2010), occurrence of mental health disorders in the world is increased the psychiatric literature that shows conflict situations. Adding on that, conflict-related head injuries different can only be described by higher stress levels serving as a catalyst for the psychiatric disorders emergence that else might have keep on inactive. Additionally, those who experience or witness violent deeds like as under killings attacks, amputations, sexual based violence and bodily injuring regularly develop long-period of psychological effects. We have other different type's methods of conflict-related violence which comprises enforced dislocation, limited movement, mandatory enrollment, threats and harassment the threats postured by landmines and unexploded weapons. WHO (2010) suggested that, Extensive insecurity and enlarged poverty, lack of basic services to couple as education, health services, housing, water and cleanliness, worsen problems of psychological in war-torn countries (WHO, 2010).

A study by Carroll et al., (2007) and colleagues looked at Somali women specifically, focusing on their health. Findings from that study show that there are several factors this population considers that though not necessarily health-related, nevertheless impacts their health and wellbeing, such as their dependence on religion and cultural practices, Carroll, et al. (2007). This is very relevant information but does not address Somali refugee women living in Eastleigh. Costa (2007), argues that, during displacement life in home country in camps of refugee where they spent prolonged times ladies were exposed to consistently violence and great poverty. Moreover, things like basic needs such as enough food and water, education, and generating incomes, and relocation chances would have been limited. Such factors plus lack of sexual category health care had the main results on their psychological and physical health. At their point of entrance in countries of relocation women, like men, are likely to experience a big number of acute and chronic health problems. Costa (2007) in the study other related health issues include psychological effects such as depression, self-esteem, (PTSD) post-traumatic stress disorder, apprehension, lower relationship problems; symptoms of somatic, fatigue, headaches, sleeplessness, general pain and anorexia. This study is very relevant to the current study although it has concentrated on women refugees in the camps (Costa, 2007).

According to (Soye, 2018), Gaza Strip children who are living experienced extraordinarily psychosocial distress of high rates due to response of violent to the Gaza demonstrations and everyday witness attacks. Norwegian Refugee Council study established 68 percent of schoolkids in regions nearby to the Israeli perimeter fence have clear suggestions of psychosocial distress. They said mostly severe were affected by the noises of nearby blasts and images of media of conflict in Gaza. Still, the research simply focused on children only and on the background can be applicable. She added that, in 2011 since beginning of conflict more than 5 million people has escaped to bordering nations. At least school-age children Syrian 1.5 million nowadays live in Jordan, Lebanon and Turkey. Half of these children have no access to the formal education, with several in work informally to deliver for their families. Family conflict reported increasingly as Syrian parents fight to handle with their conditions. Rising on bullying is showing a lot of tensions among host and communities refugee triggered by the wonderful basic services pressure (Soye, 2018). These stresses on daily basis have worst and long-lasting results on psychosocial wellbeing of Syrian children's and worsen the effects of trauma for some children.

Claudia (2007) explained in her study that a lot of trauma is experienced by Refugees from war due to torture, incarceration to prisons, death of loved ones and property, suffering despair and defenselessness (Claudia, 2007). The greatest communal issue for refugees for mental health is interrelated depression symptoms, post-traumatic stress disorder and anxiety, difficulties in sleeping, dreams, and guilt survival. This study was greatly supported by Drumtra (2014), who according to him Somali refugee woman face mental challenges leading to stress. These encounters comprises; right of entry to education, work opportunities, right to generative health and health maternal, gender based violence, marriage of child, genital female mutilation, gender equality, water and sanitation. However, in a different study by Rehn, Ellen and Sirleaf (2002), she emphasizes that the victims of extremely terrible killings and prejudices in war situation are Women. Many have died in wars men and women in different deaths because of torture and abuse in different ways. Occasionally for biological, on occasion social or psychological. Men are killed in war, women experience violence, enforced pregnancy, kidnapping and sexually abused and oppression. Individual bodies intentionally diseased with HIV/AIDS or a child rape conceived is carried in used as covers to direct communications to the

observed 'enemy', (Rehn & Sirleaf, 2002). The study is related to the current study although it is general.

In a different evaluation by UNHCR (2012), the familiarity and likely need girls of women and girls are meaningfully dissimilar from those boys and men. Differences cultural regularly give women opportunities difficulties to make and access decision –making and lesser community status placing individuals in a point of reliance to males. Inadequate opportunities like education contribute harder for women to get positions, policymaking and livelihoods safety opportunities (UNHCR 2012). Barriers in facing numerous extra facilities like lawful security, generative and additional health care services. On this analysis as simple as the absence of sanitary resources for girls in menses and women can inhibit contribution to the events which discourse needy. Extra obstacles comprise unreachable asylum systems and assessments gender-blind needs, inadequate contact to schooling, paths to suitable occupation, generative health services and safety opportunities livelihood (UNHCR 2012). Greatest significant dissimilarity is that of extensive sexual and gender based. A key security matter for most immigrant women and girls is that of sexual and violence gender based. This embraces organized rape in violence and post situations battle, control of community control method of rape and abolishing families, women of rape as a penalty for the community men, sexy attack, sexual afflict sexual oppression, and deal in, corrective rape of LGBTI categorizing women, earlier and involuntary marriage, female genital mutilation, and home conflict. Additionally, Women face having children of rape, small girls often pass away from pregnancy too young to have a child, girls or women from sidelined families or societies and endure enormous problem of shame. People who are targeted for rape and forced marriage are disabled women and young girls. Transgender and females are occasionally murdered. Numerous females are mandatory engaged in existence sex to cater for basic and their families facing the extra shame of being named as a prostitute. This study has discussed largely on the suffering of a refugee women and girls which is very important to my study by (UNHCR 2012). However, it does not explain the end results of the challenges and suffering which the current study seeks to answer.

Jaji (2009), study on Females and the understanding of Local Integration in Nairobi, examine a gender perspective that focuses on refugee women. Her work outlines a theme on refugee women and local integration. The study presented the experience of the refugee women self-

settled in Nairobi. The highlights of her study are various factors that influence the process of integration. Jaji (2009) added that local women experience SGBV but refugee women are the most affected due to their vulnerability status and for them being in an exile land. Her study paints a picture of the refugee women struggling to live in an environment with a lot of hostility and where she must fight for available resources to make a living. The local community here tends to believe that these refugee women should reside in designated areas. This study is very relevant with the current study since it gives the genesis of the problem faced by refugee women (Jaji, 2009).

Abdi et al., (2015), public war, sexual violence stayed used as a firearm to shame, punish or disempower contrasting tribes in camps refugee women and girls experience sexual violence when collecting firewood or use of forest as a latrine. Sexual violence is predominantly susceptible to Widows, fathers or brothers if woman is raped it may bring shame to family her clan. If a culprit is identified, clan traditional leaders frequently discuss recompense among the criminal's and survivor's family, and spinster might be enforced to get married the culprits of their rape. Otherwise, the lady enters up being forced to get married an older man to protection up the shame gotten to the family. Complications with of fertility are frequently liable on the lady and might result to divorce. In Somalia Early marriage is relatively common and in camps refugee poor families have been stated to get married their daughters to rich and elder men in order to escape their poor economical state (Abdi et al., 2015).

According to Pavanello (2010), asylum searchers go the towns short of income of survival, community set-ups or skill languages; frequently they live in depressed circumstances. Numerous undergo from PTSD, depression and mental illness and little adequate public health and education services. Other fear to recording occurrence, arising onward for support since they fear of being repatriated to the camps. Pavanello (2010) According to him, they endure a lot in the hands of the police and the host, but this is better than going to the camps.

2.4 Coping mechanism used by the Somali refugee women living in Eastleigh to cope with stress

Coping mechanisms means plans often used by people undergoing stress or trauma to enable them manage difficulties or painful emotions. Coping mechanisms help in maintain emotional well-being by adjusting stressful events. Self-efficacy refers to individual decision

of one's abilities to implementation or exercises some amount of stressful control occasions. Richard (1984), key role shows in reactions of stress and coping value. It is a vital source for psychological positive adaptation to decide person's tasks are likely more to occupy in responsibilities comfortable with and not participating to tasks which they do not. The study is very important however it does not cite the gender of the population. The study by Ana Low (2012), in her article, Local Integration: A long-lasting resolution for refugees? She claimed that the development of host country rather than establishing a 'burden' by economically united refugees. They develop increasingly a smaller amount of dependent on state aid or human support and better able to support themselves, (Ana, 2012). Community and cultural collaborations among refugees and local people allow refugees to stay amongst or together with the population host, deprived of discrimination or mistreatment as providers to local development, addition rules give refugees an increasingly broader variety of rights and powers usually proportionate with those by local citizens enjoy. These include health facility, access labor market, freedom of movement, education and public services and assistance, the opportunity of getting and disposing of property and the ability to travel with lawful documents. Everlasting habitation rights can be due to over time the procedure can lead to and eventually the achievement of nationality in the country of asylum. This study will be good in the formation of the background.

A study was conducted by Waweru (2014), on coping strategies among urban refugee women in Nairobi: She had four objectives for her study: to examine the securements risks faced by urban refugee women in Nairobi and how they cope with the risks; to establish how women children city refugee get education, reproductive health and economic survival mechanism in Nairobi. The research design was based on descriptive research analysis. The study sample constituted of 120 urban refugees sampled using simple random sampling technique and seven key informants sampled through purposive sampling technique. Both qualitative and quantitative data were collected using interview guide, observations, key informants and Focus Group Discussions. Irene's study is very relevant to the current study, however; it is too general. Her findings were urban refugee women are faced with the security risks and they adapt coping strategies such as reporting to police or agencies and alternatively shifting to new houses. The refugee women use their own means of income to ensure that their children access education. For urban refugee women to access reproduction health care they mainly visit public hospitals. The refugee women

are involved in economic activities such as selling snacks and once faced with challenges instead of closing their businesses they adapt to coping strategies such as seeking assistance from agencies and avoiding city council soldiers.

The government of Kenya since 1994 was involved in education for in refugee. This was done through delivery of the Kenyan curriculum and examination oversight by its District Education of 16 Officers. As undersigned to the 1951 Refugee Convention, it was agreed in Kenya that refugees must be treated same way with the citizens. Ministry of Education Concept Note, (2012), Government of Kenya vested attention in guaranteeing refugee should receive viable education. In cooperation and collaboration of UN agencies like UNESCO UNICEF, UNWFP as well as national and international NGOs, and Ministry of Education to provide formal and informal education in Kenyan refugee camps, are using the Kenya Curriculum as its guide. This has permitted children refugee and youth in both camp and town settings to get education that results in Kenyan certification.

Women Refugee Commission (2013), town refugees are usually in active, relies on irregular sources of incomes, NGOs, faith-based organization, begging and other minor trade. Others who are a bit active engage in numerous concurrent living plans like self-employment, employment in factories, business in streets and hotels. They can make informed decision and manage the little resources than the poor. Several teen-agers (ages 15 to 24) drop out of schools to engage economic activity to provide dome incomes. Meaning the children has low education than their parents with increase of risk of gender base violence. Female have less options than males and vulnerable to extra risks like abuse in jobs and homes. Working women have reported sexual harassment and abuse in businesses. Irrespective of the surviving plans economically used, most of town migrants, show level of flexibility, persist on the bounds of the economies in which they live (Women Refugee Commission 2013).

According to a report by WRC (2013) on Urban Refugee Youth Economic Empowerment, point out that, due to growing population refugees are unable to keep pace who arrive in the cities resulting from poor infrastructure and strained public services. Refugees most of them live in poverty, from lack of infrastructures, live in densely populated and poorly urban slums. They also face urban poor challenges as: little economic opportunities, insufficient with insecure housing, little access to education and healthy and violence. Other challenges include restriction

to lawful right to work, discrimination, xenophobia, lack of local language skills, exclusion and broke social and communal networks. Therefore, refugees opt to dangerous surviving plans; comprise profitable sexual labor, unlawfully selling goods on insecure streets or transaction sex for food or shelter. They mainly work in the informal sector, we have little rules and where the danger of misuse and exploitation, mainly for women and girls is great. Women, face difficulties than men in accessing markets, credits housing and basic services due to of gender inequalities and discrimination.

Wagacha and Guiney (2008) declared refugees in urban areas economically very active mainly because of informal sector and economic status of living continuing the fringes. Numerous reaches with levels of education being high, but obstacles to market get means they often involve in unqualified or low refugees skilled 'occasions in order to make choices on their welfare and pliability, irrespective of work. The countless greater part of refugees engages in the informal economy that has access to work. (Folkman et al 1986), claimed that, not all children who are exposure to spectrum of horrific atrocities exhibit durable health difficult some children adapt with only minimal symptomatology. Psycho-social handling factors are related to variation in resilience developing problems. He further suggested, persons hire many resistances and surviving plans alongside stressors to guard their mental wellbeing and emotional. Estimated the protecting factors acknowledged as: the kid's ability to identify and evade risks, grow, cope, dedicate and discover with those around them.

Schweitzer, Greenslade and Kagee (2007), on a qualitative research with Sudan refugees discovered that social supporting; beliefs in religious and individual possessions were important aspects in coping. According to Peisker and Tilbury (2003), Social support drained from families together with communities' act as a protecting shield beside the effect of experiences traumatic and present refugee difficulties facing those displaced. Religious practices and beliefs are generally witnessed in most researches of refugee coping mechanisms as providing plans such as endurance. Lazarus and Folkman (1984), coping deal with methods, skills and capabilities which let individuals facing to cope problems and minimize stress associated diseases. Lazarus and Folkman (1984) definition was adopted as who recognized coping as continually varying mental and behavior hard work to manage outside or inner stresses being evaluated as challenging or away from persons and resources. Moreover, Cocker Han and Ritchey (1997), defines coping

and behavior as procedures that people evaluate and answer social and environmentally bases of stress with effort to decrease the problems encouraged by those stressors to decrease or stop stress associated illness. When faced with problems, people use personal or outward resources for coping as the main factors to aid in lessening the hostile effects of stress in overwhelming problems. Deployment of those resources leads to coping strategies; the two most commonly two termed being focused emotional or focused - problem coping (Straub, 2003).

In emotional concentrated coping, persons try to modest and control stressful feelings, e.g, by looking for support from others, avoiding, reducing or reconsidering the problems. In problem-focused coping, persons try to challenge and finally resolve the difficulties right by being either active or responsive when the stressor is assessed as being amenable to change. Positive action contributes to improvement to problem-focused coping while circumstances that are accepted are further probable to cause emotion-focused coping. The study is very relevant however it does not answer to what the current research is looking for. Additionally, Mayer (2007) highpoints those refugees' immigration experiences need to be understood as a liminal state corresponding to a provisional period categorized by uncertainty and indeterminacy for the reason of the loss of identity. These obviously contribute to people go to faith like religious belief, as a source of emotional support to cope with improbability and problems by speaking the dilemma of being trapped between two worlds.

2.5 Theoretical Framework

2.5.1: Introduction

The study was grounded on following theories namely: coping, feminist and resilience theory. Coping theory which can be classified as functionalist theory. The feminist theory (feminism) is the key current theories of sociological theories that investigates the position of females and males in the social order with the aim of exhausting that information to better females' lives. It focuses away from men viewpoint and experience. Resilience theory is applying an act of bouncing back or counterattacking giving in or cracking down under pressure.

2.5.2: Lazarus Theory

Richard (1984), built on appraisal theory in 1991 in order to cultivate on cognitive - mediational theory. The theory states emotions are contributed by appraisal stimulus, but it recommends that instant, appraisals unconscious mediate among the emotional response and

stimulus. According to Richard people who learn to manage with stress, it is vital to reflect first on the differences of stress conceptualizations and how the handling study has developed together with different methods to stress. Coping theory denotes to a person's effort to bear or minimize the result of the stress. Folkman and Lazarus (1984) who's most research follow, defined coping as being the behavioral and cognitive energy forced to regulate, bear, decrease while battling them. According to Lazarus two ideas are essential to any psychological stress theory: assessment and coping (cf. Lazarus 1993). 'Psychological stress is the relationship with the surroundings that the person appraises as significant for his or her well-being and in which the demands tax or exceed available coping resources' (Lazarus & Folkman 1986, p. 63).

Adjusting comprises of abilities and skills enable individuals to bare or face and manage life's stressors. It is a technique and not results to problem master but not necessarily meaning the problem is mastered. In Sociology then, this theory can be conceptualized in relation to the systems theory as innovative by Talcott Parsons whereby every social system is challenged with functional four problems of pattern maintenance, integration, goal line achievement and adaptation (Lazarus, 1984).

Lazarus and Folkman (1984), as cited in UNHCR (2009) recognized coping as being persistently altering mental and behavioral effort to specifically manage inside demands or external that are assessed as demanding or beyond the personal resources. Coping is active progression which involves endless interaction and adjustments amongst the person coping and the environment. It varies with time experiences in life. 'it is not a stable trait' thus helping individual to appraise frequently to both the availability of resources and demanding situation to deal with it efficiently. UNHCR (2009) was faced with a lot of challenge, people used their coping resources (internal and external) which were defined as the environmental and social factors that aid to limit or lessen the points of negativity to stress in overwhelming problems. Inner resources mean the characteristics of personality as locus of control, self-esteem, confidence, self-efficacy, knowledge optimism, and intelligence. Folkman and Lazarus (1984), mobilization of internal and/or external resources leads to coping strategies referring to efforts and behavior which individual develop to master, endure, decrease, or lessen stressful events.

Social support potentially encourages the adaptation response of coping responses through endorsing a sense of control, self-esteem and confidence through provision of guidance and

information. While the accredited role of relocation and social services, when determined by good policy is to raise refugees' abilities to adaptation to their host country, the role of social support in terms of safeguarding the results the on-refugee stress poorly remains enlightened (UNHCR, 2009). This then explains the fact that although Somali refugee women living in Eastleigh are very vulnerable, but they have managed to apply the coping mechanism to survive the daily life stressors.

2.5.3 Feminist Theory

This is theory within sociology which changes its expectations, investigative lens, and interesting emphasis on absent from viewpoint men experience toward that of females. It brings some light on societal problems, tendencies, and issues that are else ignored or misidentified by the in history dominant male perspective within social theory.

Feminism has three main objectives: First is indicated by the significance of women, secondly goal line is to disclose that is in history, females have been subordinate to men and third to bring about gender equity. Feminist theory is a widespread, wide-ranging arrangement of thoughts on socially life and experience of human developed from a female centered perspective. Feminist theory is female centered in three different ways. First is main objective of researching the condition and women experiences in the society. Secondly, it delights women as the crucial tools and activist on behalf of women, Feminist study has shown women find themselves indulge in plans that shift and change the vagaries of marriage, divorce, widowhood and instability of most women wage sector employments (Allan, 2007). During daily activities 'of women find themselves not so much pursuing goals in linear sequences but responding endlessly to the needs and demand of others This is very evident to the refugee women who after a long journey to seek asylum, take the center stage to provide for their families despite the hostility an unfavorable environment. There are varieties of feminist theories, this study will focus on gender inequality, gender difference and gender oppression.

Gender-inequality theories identify female location in, and involvement of, social circumstances differences but also not equal to men. Ritzer (1997), Definitely females get little or less resources material social status, authority, and self-actualization opportunities than males who share their social location based on class, employment, people or any other socially significant which is not

different for a Somali refugee woman who is bound by culture, religion and placed to manage household chores but not take part leadership participation.

According to Liberal feminists, females have the same moral reasoning as capacity and agency, but sexist labor division, has in history blocked women from an opportunity to expression and ability to put in practical this thinking. These changing aspects help to bare women from fully involvement in community lifetime. Liberal feminists argue out that women in a heterosexual marriage exist in gender inequality and married women don't profit in marriage. Feminist theorist's state that wedded females possesses higher stress levels than single women and married men.

Ritzer (1997) despite women entering the public sphere, still they are expected to accomplish the private sphere child rearing and take care of household duties .This still continuous in conflict situations whereby in the country of asylum, women are expected to continue with households and child rearing duties and in some cases with little support from men (Ritzer, 1997).

In gender differences Feminist theory make available to analyses and understand why, how females' position in, with experience of, community status is difference from males. Women and men experience the community world difference because of Cultural feminists which explain the changes in morals connected with females and feminineness as reasons. Other feminist theorists rely on dissimilar duties allocated to females and males inside organizations enhance to describe sexual role difference, comprising the sexual labor division in the domestic duties. Existential and phenomenological feminists emphasized on marginalization of women and defined as "other" in male-controlled community. Almost feminist theorist's concentrates on how manhood is advanced over socialization, and how its growth interrelates with the procedure of emerging feminist in girls.

While on theories of gender oppression women are different from or not equal to men, women are actively troubled, oppressed subordinated, and abused by males (gender difference and gender inequality). Authority in the two theories is gender oppression the key variable; psychoanalytic feminism and radical feminism. Psychoanalytic feminists try to describe command connections amongst men and women by formulating theories of Freud's on human emotions, development childhood with the subconscious and unconscious. They consider conscious explains manufacture and reproduction of patriarchy. Radical feminists elaborate

woman actually being positive thing, but this is not recognized in male-controlled community where women are being oppressed. They pinpoint bodily fierceness is based on of patriarchy, but women think that patriarchy can be defeated if they be mindful of their own worth and strength.

2.5.4 Resilience Theory

Resilience is “*bouncing back*” action or fighting to blow under pressure. Basing on the American Psychological Association, resilience means technique of adjusting fine in the appearance of difficulty, distress, disaster, danger or even major causes of threat.

Resilience theory is established of notions that highlight the results of difficulties happenings on peoples and families and adaptation to the shocking experience. Resilience theory is guided motivated questions: “What is the difference for children whose lives are threatened by shortcoming or hardship? How do those children overcome most of severe challenges in life and during growth up to lead a capable and maladjusted life? Masten, Narayan, Silverman, & Osofsky, 2015; Nichols, (2013). Disclosure to hostile circumstances can lead to mental wellbeing in important amounts of stress triggering some to fold under pressure. Nevertheless, some are the keyword here. Not every person will shut down in the face of adversity. Resilience theory is embedded in the study of adversity. During World War II scientists were interested on how children reacted to war of stress. The war caused poverty, lack of residence, illness, hunger, and decease. Professors everywhere are keen to investigate the effect of severe trauma on children (Masten, 2001).

Masten (2001) researched kids nearby the world during their life. She revealed communal personalities amongst resilient children who had confronted hardship. She believed out that resilience is a mixture of what she calls “normal factors” such as their relationships, family, and individual differences such as personality, and even genetics.

2.5.5 Summary of theoretical framework.

The researcher based the study in three theories: Lazarus theory of coping, resilience theories on which were categorized as a functionalist theory and feminist theory which is a modern sociological theory. Refugee Somali women have stories untold of their difficulty past and further not given an equivalent opening to power of speech out their right in a manlike ruling community. For a very long time since war erupted in Somali these women have been coping

and taking care of their families. But in order to continue coping with the daily stressors and life challenges they need to apply various approaches skills and ability.

2.6 Conceptual Framework

The conceptual framework as presented illustrates the affiliation amongst the independent variables (security risks, education, reproductive health and economic survival) and the dependent variable (stress levels among Somali Refugee women living in Eastleigh).

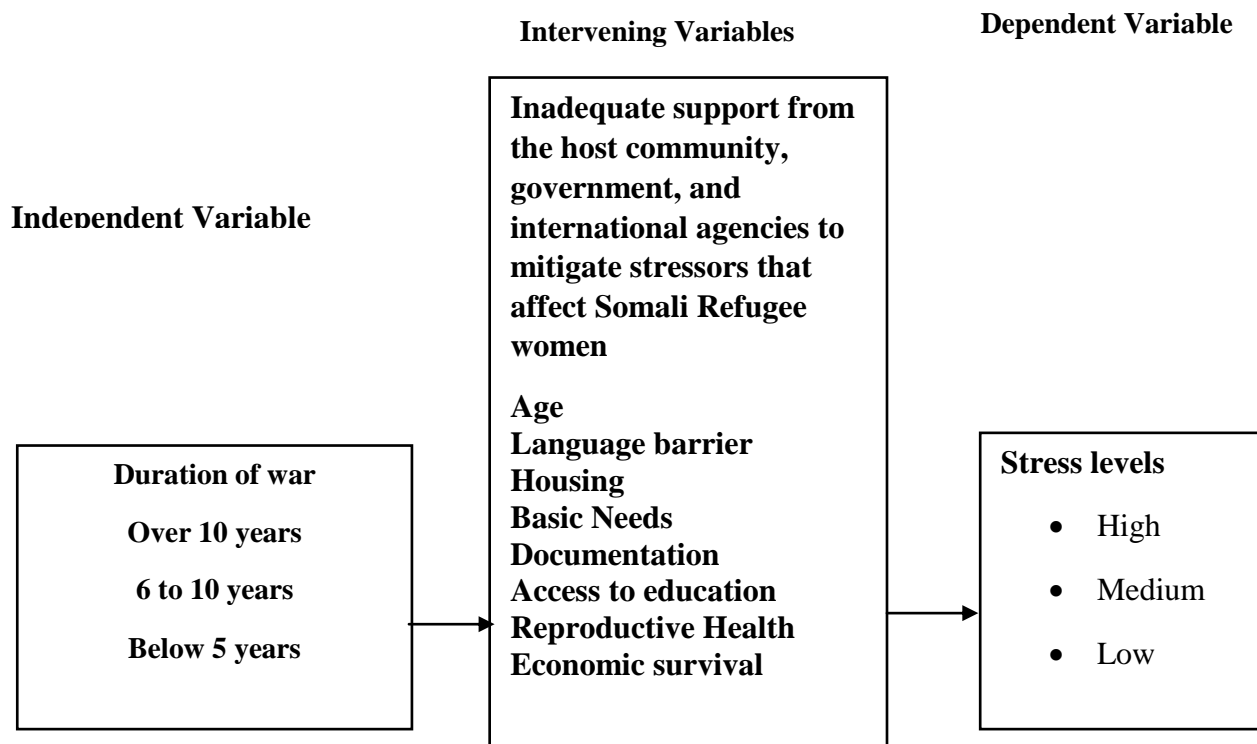


Figure 2.1: Conceptual framework

According to the conceptual framework the duration of war (independent variable) has an influence on the stress levels of the Somali refugee women (dependent variables). However, there is the intervening variables (lack of adequate support from the host community government and international agencies) which mediates between the duration of war and the stress levels. It is in the process of addressing the security risks, access to education, access to reproductive health and economic survival that Somali refugee women in Eastleigh adapt to healthy coping strategies or mechanism to deal with stress.

The conceptual framework shows that with the breakdown of community support structures and policies that fights for the women rights, sexual gender-based violence and discrimination has taken the center stage. Somali refugee women are then left to seek for ways of deal with the various security risks they encounter on day to day living. Somali Refugee women face many barriers to accessing education services, stemming from economic, geographic, cultural and religion. Financial constraints due to lawful and strategy limitations jointed with higher living costs in Eastleigh and them striving to enroll their children in best schools which is a bit expensive.

Health reproductive suggests that individuals are capable to have a responsible, sustaining and life safer sex and are ability to reproduce and they have choice to decision if, when and how often to do so Health. Reproduction care is very crucial to this study. A woman does not stop being pregnant if she becomes a refugee. Attention is often focused exclusively on immediate life-saving measures reproductive health care is not considered a priority. The countless common refugees who get access to labor are involved in the informal economy. This is not a guarantee to the Somali refugee woman. They are required to have work permits and are only allowed to operate in restricted areas. To those who can do business, what is available for them is selling clothes, perfumes, application of hyina and selling Carmel milk. To those who are lucky enough to get employed in informal sectors, they are higher and commonly linked with exploitation, lower pay and employer's abuse.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

This chapter points out steps that were followed during the, study process to attain research objectives of the study. This consists of the following; site selection and description, study plan, targeted population, sampling procedure, the sample, research tools, collection of data procedure and data analysis.

3.2 Research Design

Research plan offers an outline for the gathering and data analysis. A selection of research design reveals judgements approximately the significance to being given to a range of scopes of the study procedure (Bryman 2012). The study adopted mix method plan as the research planned to collect quantifiable and qualitative data to investigate stress levels among Somali refugee woman living in Eastleigh. Quantitative and qualitative approaches were used.

Quantitative allowed the investigator to establish statistical correlation amongst the duration of experience of war and stress level among the Somali refugee women in Eastleigh. While Qualitative brought out the underlying factor in broad relationships and allow the researcher to gain new emerging trends, difference in individual perspective and experience concerning the variables under study and therefore provide a researcher with a further course of action. Quantitative data was gathered by use of standardized questionnaire while qualitative data by use of focus group discussion. Cluster and opportunity sampling procedure was used for quantitative data sample while for qualitative data sample snowballing sampling will be utilized.

3.3 Study Area

Study took place among refugee Somali women living in Eastleigh Nairobi Kenya. Eastleigh boarders Kamukunji, starehe sub-counties. Administratively, Eastleigh is divided into Eastleigh North and Eastleigh South. The area is further partitioned into three areas: Section one, section two and section three. Eastleigh covers an area of 580,365 square kilometres. Since early 1990, Eastleigh has been known as a home for Somali Refugees. With the collapse of Somali government, many Somali refugees arrived in Kenya and settled in Eastleigh and have been involved in various types of business such as selling shoes, clothes and even hawking tea and

snacks for the Somali refugee women. Eastleigh is also a home for refugees from Ethiopia, Eritrea, with very few Congolese and Rwandese. Eastleigh's is becoming huge achievement in Kenya the leading commercial hubs and country's greatest lively and in culturally diverse town neighborhoods. Goods are brought from far countries mostly China and Dubai through Eldoret International Airport or Mombasa port. They are arriving in Eastleigh, through people retailers or wholesaler for sale. Wholesalers many stalls in Eastleigh, where related goods are collected in individual malls or sell them to traders from the CBD and counties up country.

3.4 Target Population

Population according to Bryman (2012), is the universe components whereby sample is selected. (Mugenda and Mugenda (2003) Defined population as the investigator needs to generalize the research outcomes.

The study population is the Somali refugee women residing Eastleigh location. The study also targeted key informants who were from refugee community leaders and staff from partner agencies implementing refugee programmes in Nairobi.

3.5 Sample Size

Sampling is a procedure used to choose a representative of a population. (Mugenda and Mugenda, 2003). The researcher used proportionate random sampling to ensure that every Somali refugee woman in the sampling frame had a chance of being selected. The sample of 129 respondents were randomly selected from Somali refugee women who were beneficiaries from five refugee agencies.

3.6 Sampling Procedure

This study applied proportionate random sampling to choose a sample. To select the 129 respondents, every refugee in the list of beneficiaries were enumerated through allocation of number 1-129. These were then put in a small container and the respondents picked randomly from the four agencies as shown below. The numbers picked corresponded with the refugees in the sampling frame to make the sample of 129 respondents. By use of proportionate random sampling, all refugees in the list of beneficiaries had a chance to be selected.

One focus group discussion was selected using stratified sampling; two members were selected from each agency to form the group. The researcher then requested the social workers from two agencies to purposively identify a woman support group comprising of 10 members each which had existed for more than two months.

$$\text{Sample size} = \frac{N}{1 + Ne^2}$$

$$\frac{740}{1 + 740(0.08)^2}$$

$$= 129.009$$

$$= 129 \text{ respondents.}$$

The sample size for this study is as presented in Table 3.1.

Table 3.1 Sample size distribution

Agency	Population	Sample Size
RefuSHE	100	17
Danish refugee council	120	22
Center for Victims of Torture	150	26
HIAS	150	26
MSF	220	38
Total	740	129

3.7 Research Instrument

The researcher used Standardized questionnaire to collect **quantitative data**. The Likert scale was applied and structured interview method to elicit data from the informant or respondents. The interview questionnaires were separated into **three** Sections. Section A captured information on demographic of respondents. Section B evaluated the levels of stress among the Somali refugee woman in Eastleigh as a result of war. 12 questions and responses were in Likert scale of 1-5, (1) strongly disagrees – (5) strongly agree, to be read out by the interviewer; the researcher and the research assistant. Section C assessed the coping mechanism of the respondents. 13 items/questions were interview schedule read out by the researcher and the research assistant.

For **qualitative data** focus group discussion was used to gather data. The FDGs comprised of 10 members, 2 from each agency.

3.8 Data Collection Procedure

The technique to gather data started when the researcher was given a letter of authorization by the University of Nairobi for the study and data collection. Another letter of a permit to carry out the research was attained from (NACOSTI). Once this is obtained the researcher then informed the senior management team about the study. For quantitative data the researcher collected data with aid of used two research assistants. The researcher had trained them on how to administer the questionnaire.

For qualitative data the researcher interviewed two groups of Somali refugee women in Eastleigh as provided by the responsible agencies to get in-depth understanding of variables under study.

3.9 Data Analysis and Presentation

This section explains procedure that was used to analyze, and present qualitative and quantitative data as discussed in subsequent sections:

3.9.1. Quantitative Data

Statistical Package for Social Sciences (SPSS) aided the researcher. Quantitative data was collected using Descriptive Statistics such as the measures of central tendencies, dispersion and frequency distribution was used give summary to the data describing the sample distribution. Similarly, the inferential statistics such, Pearson's correlation which brings about the relationship between the duration of experience of war and the levels of stress, multiple regression which will bring in the effect of the intervening variables. The researcher also used Pearson Product Moment Correlation coefficient to analyze the relationship of duration of experience of war and stress levels among Somali refugee women in Eastleigh. Analyzed quantitative data was presented using, bar graphs, charts and frequency tables. Chi square test was done to test the association between duration of experience of war and the levels of stress.

3.9.2. Qualitative Data

Qualitative data was analyzed in relation to the themes that emerged from the quantitative data regarding levels of stress among Somali refugee women in Eastleigh due to the duration of experience of war. This data was used mainly to compliment quantitative data.

3.10 Pilot of the Study

According to Cooper, Schndler and Sun (2006) the purpose of pretest is to identify flaws in study design and implementations and to offer a proxy for data collection of likelihood sample.

3.10.1 Validity

To address issues of validity of the research instrument, piloting was carried out where questionnaires were pre tried to a chosen test like the real sample which was used in this study. The guiding was done on 10 Somali refugee women who was selected using purposive sampling in one agency. Those who participated in piloting exercise was not included in actual study. The finding from the pilot exercise informed the researcher whether the respondent answered the questions correctly or whether the researcher needs to modify the questions.

3.10.2 Reliability

To also address issues of reliability the research instrument was pilot tested, by measuring the instrument mathematically by use of Cronbach's Alpha coefficient method. The Cronbach, s Alpha coefficient was calculated from the Likert scale questions. The coefficient was between 0-1. The closer the Cronbach Alpha was to 1, the better the questionnaire reliability. According to Field (2009) as cited by Gathondu (2018), a questionnaire with Cronbach s Alpha of 0.8 should be taken as reliable. This study had an overall Cronbach Alpha coefficient of 0.895 indicating that the questionnaire was reliable.

3.11 Ethical Consideration

Refugees are a needy group that can be easily exploited and abused. During the research the researcher sought authorization from the appropriate authorities before commencing the study. The research adhered to suitable study techniques by ensuring that every all information resources were approved as far as possible. Consent was sought from the respondents before the extraction tool was administered. The study ensured respondents of confidentiality of the

response and also guarantee respondent that the research was used for only academic purpose. The source of data and other information for literature review was acknowledged. The researcher presented before a panel of scholars to indicate that the information (data) extracted was merely used for the main purpose of the research.

CHAPTER FOUR

DATA ANALYSIS INTERPRETATION AND DISCUSSION

4.1 Introduction

Findings and the interpretations are on duration of experience of war and how it relates to stress levels among Somali refugee women living in Eastleigh Starehe Sub-County. The outcomes were presented according to research questions: What are the effects of the duration of experience of war to Somali refugees in Eastleigh? What are the levels of stress among Somali refugee women living in Eastleigh? What types of coping mechanism are the Somali refugee women using to cope with stress?

4.2 Response Rate of Instruments

The study sample size comprised of 129 respondents from RefuSHE, Danish refugee council, Center for Victims of Torture, HIAS and MSF agencies.

Table 4.1: Response Rate

Agency	Sample Size	Responded
RefuSHE	17	14
Danish refugee council	22	16
Center for Victims of Torture	26	20
HIAS	26	21
MSF	38	25
Totals	129	96

The study realized 96 questionnaires being responded from the 129 issued. This was from 14 RefuSHE, 16 Danish refugee council, 20 Center for Victims of Torture, 21 HIAS and 25 MSF. This gave a 74% rate of response which was higher than the 70% threshold recommended by (Kothari, 2004).

4.3 Demographic Characteristics of the Participants

The study collected background information of the participants in the study. This was necessary in order for the study to describe the information concerning the participants for conclusions in the study.

Figure 4.1: Age of respondents

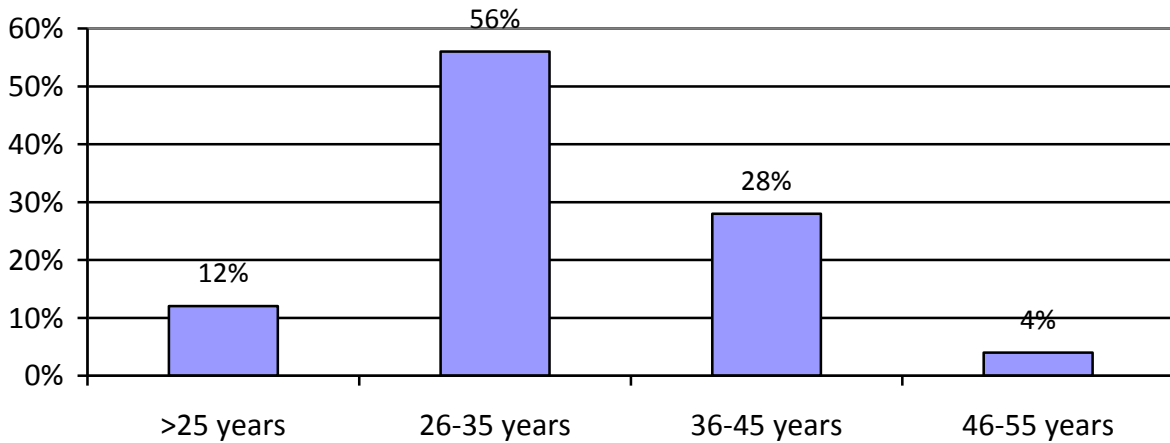


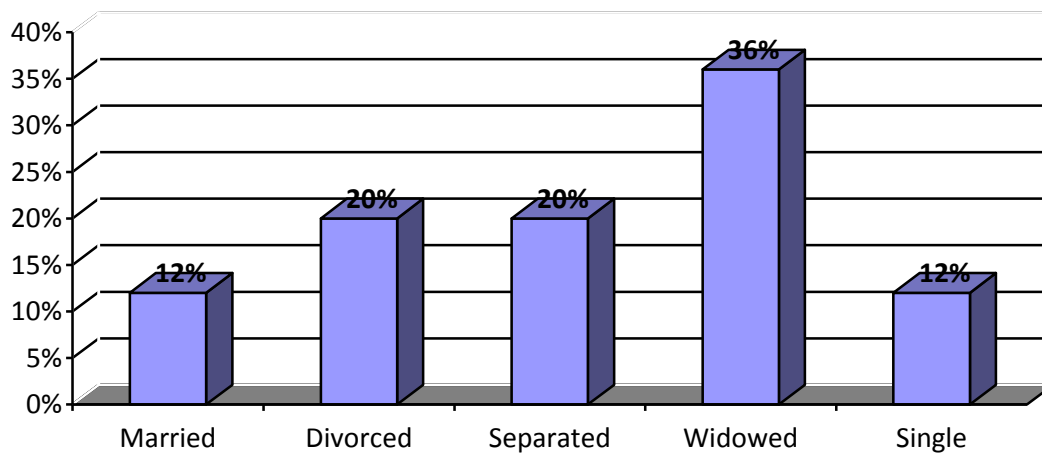
Figure 4.1 reveals that a great number 54 (56%) of the respondents were of between 26 – 35 years’ of age while 27 (28%) were of between 36-45 years. A few 11 (12%) were below 25 years while 4 (4%) were between 46 – 55 years. Based on this result it can be concluded that the study sampled all the age groups of women and hence the response is a reflection of all of them.

Table 4.2: Highest level of education of respondents

Highest level of education	Frequency	Percent
Certificate	7	8.0
No schooling	77	80.0
Adult education	12	12.0
Total	96	100.0

The data in Table 4.2 indicate that a great number 77 (80%) of the women respondents had no education while 12 (12%) possessed adult education. A few 7 (8%) had certificate as their highest level of education. These outcomes show that a great number of the women respondents were uneducated, making their chances of gaining meaningful employment to be narrow. This causes stress among them.

Figure 4.2: Marital status of respondents



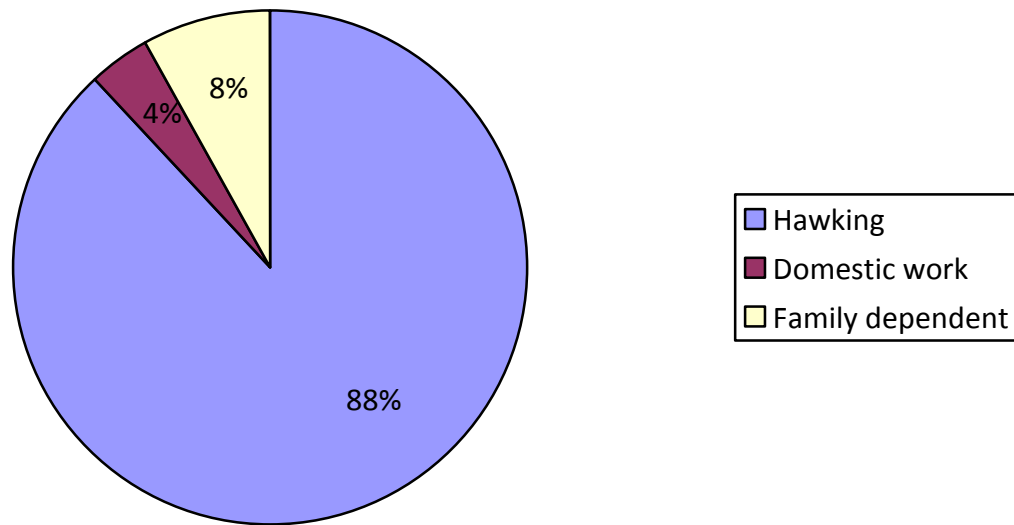
From the results in Figure 4.2, a large number 34 (36%) of the respondents indicated that they were widowed while 20 (20%) were divorced. Another 20 (20%) were separated. A few 11 (12%) were married. It might indicate that the Somali refugee women are having it hard to provide for their families since they come from single families where there is no husband.

Table 4.3: Number of children

Number of children	Frequency	Percent
Below 5	61	64
6-10	31	32
Over 10	4	4
Total	96	100

A great number 61 (64%) of the respondents indicated that they had below 5 number of children while 31 (32%) had between 6-10 children. A few 4 (4%) had over 10 children. This means that the women refugees have dependents who stress them in terms of providing them with livelihoods.

Figure 4.3: Source of income



A large number 84 (88%) of the respondents indicated that they got their source of income from hawking while 9 (8%) depended on their family members. A few 3 (4%) did domestic work. This means that a lot of the women refugees are stressed even more in finding for themselves through doing shoddy jobs.

4.4 Objective 1; Effects of the duration of experience of war to Somali refugees

Table 4.4: Number of years in the host country due to war in their country of origin

Number of years	Frequency	Percentage
Below 5 years	3	4
6-10 years	42	44
Over 10 years	51	52
Total	96	100.0

A large number 51 (52%) of the respondents indicated that they had stayed for over 10 years in the host country while 42 (44%) had stayed for between 6-10 years. A few 3 (4%) stayed in the host country for below 5 years. This means that a lot of the women refugees had stayed in the

host country long enough to understand the duration of experience of war and how it relates to stress levels among Somali refugee women living in Eastleigh Starehe Sub-County.

A discussion with the refugee community leaders revealed that women refugees who had stayed for long in the host country had developed ways of coping with stress unlike the new ones. One was quoted saying;

“Somalis come in Kenya and integrate with the community after a short time since they already have other Kenyan born Somalis and relatives that accommodate and help them.”

The outcomes from the 10 Somali refugee women group revealed that the women refugees had learnt to cope with the challenges of staying in a new country over time. Although the women indicated that they suffer discrimination in terms of acquiring social amenities from the host government. It takes long for them to acquire identity which makes it even harder. One was quoted saying;

“I have been in Kenya for over 8 years but my efforts to get citizenship have been in vain. This has made me have it difficult to get medical attention from the government hospitals.”

Another one said;

“I have been unable to get bank services and even mobile money registration since I do not have valid Kenyan Identification Card. I have tried to acquire it but the refugee identification documents do not meet the threshold to acquire a Kenyan identification.”

4.5 Objective 2; Levels of stress among Somali refugee women living

This study investigated the various levels of stress among Somali refugee women living in Kenya by examining various aspects of stresses.

The outcomes from the focus group discussion highlighted a high stress level among the women refugees. One woman said;

“Us women go through a lot of challenges that include providing for our families. This forces us to do hard work that sometimes involves domestic chores that stresses us. Some of us are widows and this means that we are bread winners.”

Another said

“I have eleven children who need to eat and attend school. I am also needed to pay a monthly rent 15,000/= which is a stress to me. Sometimes I feel like giving up since this stress is just too much to bear.”

Table 4.5: Levels of stress among Somali refugee women living

Statements	N	Mean	Std. Deviation
The experience of war in my country	96	4.88	.440
The duration of war in my country	96	4.92	.277
The encounters during my journey while fleeing to Kenya	96	4.72	.843
The host community	96	1.88	1.453
Re-integrated with the host community	96	2.12	1.536
Where to stay after arriving to Kenya	96	4.04	1.367
Re-integration with the host community.	96	2.64	1.598
Women from the host community.	96	1.72	.980
Getting an identification document to allow me stay in Kenya.	96	2.64	1.440
Getting refugee recognition document	96	2.64	1.440
Insecurity in Kenya	96	3.36	1.186
Kenyan Police	96	3.48	1.447
Finances	96	4.12	1.301
Fear for my life	96	3.36	1.411
Medical services	96	3.64	1.381
Getting an NHIF card	96	3.96	1.274
A work permit	96	4.44	.768
Resettlement process	96	4.08	1.256
Life in Kenya	96	4.52	.823
Going back to my country.	96	5.00	.000

Many of them responded to being stressed as a result of war in their country with a mean of 4.88 and a (Standard Deviation) of .440. A great number indicated due to the duration of war in my country as revealed by a mean of 4.92 and a (S D) of .277 while many agreed that their encounters during their journey while fleeing to Kenya as indicated by a mean of 4.72 and a (S D) of .843. A great number indicated that the host community did not stress them as shown by a mean of 1.88 and a (S D) of 1.453 while a great number disagreed that stress was re-integrated with the host community as indicated by a mean of 2.12 and a (S D) of 1.536. A great number indicated that where to stay after arriving to Kenya stressed them as revealed by a mean of 4.04 and a (S D) of 1.367. Many disagreed that re-integration with the host community stressed them as shown by a mean of 2.64 and a (S D) of 1.598 while a great number disagreed that women from the host community stressed them as revealed by a mean of 1.72 and a (S D) of .980. A large number disagreed that getting an identification document to allow them stay in Kenya was stressful as indicated by a mean of 2.64 and a (S D) of 1.440.

The outcomes agreed with a study by Carroll (2007) on Somali women, focusing on their health. Findings from that study show that there were several factors this population considers that though not necessarily health-related, nevertheless impact their health and wellbeing, such as their dependence on religion and cultural practices.

A great number disagreed that getting refugee recognition document was stressful as shown by a mean of 2.64 and a (S D) of 1.440 while a large number indicated that insecurity in Kenya was stressful as revealed by a mean of 3.36 and a (S D) of 1.186. A great number indicated that the Kenyan Police caused them to be stressed as indicated by a mean of 3.48 and a (S D) of 1.447 while a large number agreed that finances was stressful as shown by a mean of 4.12 and a (S D) of 1.301. A large number were stressed from fear for their life as indicated by a mean of 3.36 and a (S D) of 1.411 while a great number were stressed from getting medical services as revealed by a mean of 3.64 and a (S D) of 1.381. Many respondents indicated that getting an NHIF card was stressful as shown by a mean of 3.96 and a (S D) of 1.274 while many indicated that acquiring work permit was stressful as indicated by a mean of 4.44 and a (S D) of .768. Many respondents agreed that resettlement process made them stressed as revealed by a mean of 4.08 and a (S D) of 1.256 while many indicated life in Kenya was stressful as shown by a mean

of 4.52 and a (S D) of .823. A great number agreed that going back to their country was stressful as revealed by a mean of 5.00 and a (S D) of .000.

These outcomes are shown in a study by (Costa, 2007) which revealed related health issues relating to stress include psychological effects such as depression, self-esteem, (PTSD) post-traumatic stress disorder, apprehension, lower relationship problems; symptoms of somatic, fatigue, headaches, sleeplessness, general pain and anorexia.

4.6 Objective 3; Types of coping mechanism are the Somali refugee women using to cope with stress

Table 4.6: Types of stress coping mechanisms

	N	Mean	Std. Deviation
Am able to know what stresses me	96	4.24	.136
I act calm and normal when am stressed	96	4.00	.201
I feel emotionally and physically drained when am stressed	96	4.44	.377
I know how to manage stress	96	4.08	.924
Am quickly able to find solution when am stressed	96	4.00	.941
I cope well when am stressed	96	3.12	.927
I can adopt to any environment	96	4.76	.022
I eat well when am stressed	96	4.52	.035
I sleep well when am stressed	96	2.12	.927
I keep a positive attitude when am stressed	96	4.44	.094

Many respondents indicated that they were able to know what stresses them as indicated by a mean of 4.24 and a (S D) of 0.136. A great number acted calm and normal when stressed as shown by a mean of 4.00 and a (S D) of 0.201. Many felt emotionally and physically drained when stressed as revealed by a mean of 4.44 and a (S D) of 0.377. A large number indicated that they knew how to manage stress as indicated by a mean of 4.08 and a (S D) of 0.924 while a great number agreed that they quickly were able to find solution when stressed as revealed by a

mean of 4.00 and a (S D) of 0.41. A large number agreed that they coped well when stressed as indicated by a mean of 3.12 and a (S D) of .927 while many could adopt to any environment as shown by a mean of 4.76 and a (S D) of 0.02. A large number agreed that they ate well when am stressed as indicated by a mean of 4.52 and a (S D) of .035. A great number disagreed that they slept well when stressed as revealed by a mean of 2.12 and a (S D) of .927 while a great number agreed that they kept a positive attitude when stressed as indicated by a mean of 4.44 and a (S D) of .094.

These outcomes are reflected in a study conducted by Waweru (2014). In her findings, urban refugee women are faced with the security risks and they adapt coping strategies such as reporting to police or agencies and alternatively shifting to new houses. The refugee women use their own means of income to ensure that their children access education. For urban refugee women to access reproduction health care they mainly visit public hospitals. The refugee women are involved in economic activities such as selling snacks and once faced with challenges instead of closing their businesses they adapt to coping strategies such as seeking assistance from agencies and avoiding city council askaris.

From the Focus Group Discussion with the 10 women group. It was evident that some women had stress coping mechanisms. Although some did not realize the availability of different coping mechanism like the counselling and sharing with friends can help to relieve stress. One was quoted saying;

“I cry a lot when stressed. I also share with my friend on the challenges and facing so as to get a solution. Sometimes I visit the counselling center at the agencies for guidance.”

4.7 Correlation Analysis

This study did a Pearson’s correlation to bring about the relationship between the duration of experience of war and the levels of stress.

Table 4.7: Correlation analysis

	Over 10 years	6-10 years	Below 5 years	Levels of stress
Over 10 years	1			
6-10 years	.364*	1		
Below 5 years	.399*	.441*	1	
Levels of stress	.418*	.190*	.137*	1

*. Correlation is significant at the 0.05 level (1-tailed).

The correlation matrix indicates that levels of stress is correlated with refugees who had experienced war for over 10 years at 5 percent significance level (.418). For those who had experienced war for below 5 years is positively correlated to those who had experienced war for over 10 years and 6-10 years at 5 percent significance level (.399) and (.441) respectively. The table also indicates that there is a positive correlation between those who had experienced the war for over 10 years and 6-10 years at (.364). There is also a positive correlation between stress levels and those who had experienced war for over 10 years at (.418).

This results are reflected in the Guardian research (2018) which indicated that refugees who have stayed for more than seven year in exile due to war are not ready to go back to their countries citing that it is not safe for them to return (Guardian research 2018).

4.8 Regression Analysis

Multiple regression was used to determine whether I Vs affect the D V. To achieve this, stress levels as the D V was regressed against three variables namely Over 10 years, 6-10 years and Below 5 years as I Vs. The regression model for this study generally assumed the following equation:

$$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \varepsilon$$

Where: Y = Stress levels, $\{\beta_i; i=1,2,3\}$ = The coefficients for the various I Vs. X_i for; X_1 = Over 10 years, X_2 = 6-10 years, X_3 = Below 5 years, ε = Error term.

This section examined whether the multiple regression equation can be used to explain the effects of duration of war on stress levels among Somali refugee women.

Table 4.8: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.831 ^a	.691	.679	6.567

a. Predictors: (Constant), Over 10 years, 6-10 years and Below 5 years

From the results obtained, an R of 0.831 shows that there is a positive correlation between effects of duration of war and stress levels. The R square of 0.691 indicates that the women who had experienced war for over 10 years, 6-10 years and below 5 years, in exclusion of the constant variable explained the change in stress levels by 69.1%, and the remaining percentage can be explained by factors not included in the model.

The coefficient of determination (r-squared) of 0.691 indicates that 69.1 % of stress levels can be explained by the duration of experience of war of over 10 years, 6-10 years and below 5 years. The outcomes on ANOVA results on effects of various factors on stress levels are presented in Table 4.9.

Table 4.9: ANOVA Results

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	10111.282	4	2527.821	58.622	.000 ^b
	Residual	4527.709	92	49.2142		
	Total	14638.991	96	152.48949		

a. D V: Stress levels

b. Predictors: (Constant), Over 10 years, 6-10 years and Below 5 years

The Analysis of Variance (ANOVA) indicated a p-value of 0.001. This, therefore, means that the relationship between effect the three durations of experience of war of over 10 years, 6-10 years and below 5 years was significant at 95% confidence level. The F statistics of 58.622 was large enough to conclude that the set of variables have a significant influence on stress levels among Somali refugee women in Eastleigh Starehe Sub County.

Table 4.10: Model Coefficients

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1 (Constant)	.337	2.205		2.153	.029
Over 10 years	1.003	.075	.069	2.354	.026
6-10 years	.135	.062	.241	2.040	.045
Below 5 years	0.180	.072	.024	2.152	.034

a. Dependent Variable: Stress level

Further analysis as shown in Table 4.10 shows that war experience of below 5 years had a coefficient of 0.180, between 6-10 years had a coefficient of 0.135 while over 10 years experience of war had a coefficient of 1.003. From the coefficients, the model is as follows;

Stress levels = 0.337 + 1.003 Over 10 years + 0.135 6-10 years + 0.180 Below 5 years

The beta coefficients in the regression shows that all of the tested variables had positive relationship with stress levels. The outcomes show that all the three variables tested were statistically significant with positive beta coefficients.

4.9 Association between duration of experience of war and the levels of stress

Table 4.11: Association between duration of experience of war and the levels of stress

		Years		
		Over 10 years	6-10 years	Below 5 years
Levels of stress	High	70 (73%)	43 (45%)	33 (34%)
	Low	26 (27%)	53 (55%)	63 (66%)
	Pearson Chi-Square	$\chi^2=37.804^a$ df=4, p=0.001	$\chi^2=46.512^a$ df=4, p=0.001	$\chi^2=95.262^a$ df=4, p=0.001

The study showed a great number 70 (73%) of the Somali refugee women in Eastleigh Starehe Sub County who had over 10 years duration of experiencing war had a high level of stress. There was a significant statistical relationship between the duration of experience of war and the level of stress. Those who had experienced war for over 10 years had a higher stress level ($\chi^2=37.804^a$ df=4, p=0.001) compared to those who had experienced war for below 5 years ($\chi^2=95.262^a$ df=4, p=0.001).

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

This chapter summarizes the outcomes of the study and presents conclusions, recommendations and suggestions for further research.

5.2 Summary of Findings

The study sought to assess the duration of experience of war and how it relates to stress levels among Somali refugee women living in Eastleigh Starehe Sub-County. The study was guided by the following research questions; What are the effects of the duration of experience of war to Somali refugees in Eastleigh? What are the levels of stress among Somali refugee women living in Eastleigh? What types of coping mechanism are the Somali refugee women using to cope with stress?

5.2.1 To determine whether the duration of experience of war relates to stress levels among Somali refugee women living

A large number 51 (52%) of the respondents indicated that they had stayed for over 10 years in the host country while 42 (44%) had stayed for between 6-10 years. A few 3 (4%) stayed in the host country for below 5 years. The correlation matrix indicated that levels of stress was correlated with refugees who had experienced war for over 10 years at 5 percent significance level (.418). For those who had experienced war for below 5 years is positively correlated to those who had experienced war for over 10 years and 6-10 years at 5 percent significance level (.399) and (.441) respectively. The table also indicates that there is a positive correlation between those who had experienced the war for over 10 years and 6-10 years at (.364). There is also a positive correlation between stress levels and those who had experienced war for over 10 years at (.418).

5.2.2 To identify the levels of stress among Somali refugee women living

The outcomes showed that many the respondents indicated that they were stressed as a result of war in their country as shown by a mean of 4.88 and a (S D) of .440. a great number indicated due to the duration of war in my country as revealed by a mean of 4.92 and a (S D) of .277 while many agreed that their encounters during their journey while fleeing to Kenya as indicated

by a mean of 4.72 and a (S D) of .843. A great number indicated that the host community stressed them as shown by a mean of 1.88 and a (S D) of 1.453 while a great number indicated that stress was re-integrated with the host community as indicated by a mean of 2.12 and a (S D) of 1.536. A great number indicated that where to stay after arriving to Kenya stressed them as revealed by a mean of 4.04 and a (S D) of 1.367. A large number agreed that re-integration with the host community stressed them as shown by a mean of 2.64 and a (S D) of 1.598 while a great number indicated that women from the host community stressed them as revealed by a mean of 1.72 and a (S D) of .980. A large number revealed that getting an identification document to allow them stay in Kenya was stressful as indicated by a mean of 2.64 and a (S D) of 1.440.

A great number indicated that getting refugee recognition document was stressful as shown by a mean of 2.64 and a (S D) of 1.440 while a large number indicated that insecurity in Kenya was stressful as revealed by a mean of 3.36 and a (S D) of 1.186. A great number indicated that the Kenyan Police caused them to be stressed as indicated by a mean of 3.48 and a (S D) of 1.447 while a large number agreed that finances was stressful as shown by a mean of 4.12 and a (S D) of 1.301. A large number were stressed from fear for their life as indicated by a mean of 3.36 and a (S D) of 1.411 while a great number were stressed from getting medical services as revealed by a mean of 3.64 and a (S D) of 1.381. A large number of respondents indicated that getting an NHIF card was stressful as shown by a mean of 3.96 and a (S D) of 1.274 while many indicated that acquiring work permit was stressful as indicated by a mean of 4.44 and a (S D) of .768. A large number of the respondents agreed that resettlement process made them stressed as revealed by a mean of 4.08 and a (S D) of 1.256 while many indicated life in Kenya was stressful as shown by a mean of 4.52 and a (S D) of .823. A great number agreed that going back to their country was stressful as revealed by a mean of 5.00 and a (S D) of .000.

5.2.3 To determine the type of coping mechanism used by the Somali refugee women to cope with stress

From the outcomes, it was revealed that many respondents indicated that they were able to know what stresses them as indicated by a mean of 4.24 and a (S D) of 0.136. A great number acted calm and normal when stressed as shown by a mean of 4.00 and a (S D) of 0.201. Many felt

emotionally and physically drained when stressed as revealed by a mean of 4.44 and a (S D) of 0.377. A large number indicated that they knew how to manage stress as indicated by a mean of 4.08 and a (S D) of 0.924 while a great number agreed that they quickly were able to find solution when stressed as revealed by a mean of 4.00 and a (S D) of 0.41. A large number agreed that they coped well when stressed as indicated by a mean of 3.12 and a (S D) of .927 while many could adopt to any environment as shown by a mean of 4.76 and a (S D) of 0.02. A large number agreed that they ate well when am stressed as indicated by a mean of 4.52 and a (S D) of .035. A great number disagreed that they slept well when stressed as revealed by a mean of 2.12 and a (S D) of .927 while a great number agreed that they kept a positive attitude when stressed as indicated by a mean of 4.44 and a (S D) of .094.

5.3 Conclusions

The study concludes that the duration of experience of war relates to stress levels among Somali refugee women living. Those who experienced war for long are faced with higher stress levels.

The study investigated the levels of stress among Somali refugee women living. The outcomes showed that many the Somali refugee women were stressed. This was as a result of war in their country and from their encounters during their journey while fleeing to Kenya. The host community also stressed them and the stress from re-integrating with the host community.

The study concludes that there were various types of coping mechanism used by the Somali refugee women to cope with stress. A great number act calm and normal when while some felt emotionally and physically drained. A large number know how to manage stress while a great number do not quickly find solution when stressed.

5.4 Recommendations

Based on the study, the researcher recommends the following;

- i. There should be intense counselling programs with psycho trauma informed components.
- ii. UNHCR should source for more aid to support refugees.
- iii. Better refugee policies to be incorporated in the Kenyan laws.
- iv. The women refugees can be trained on how to cope with stress. This can be done through the Ministry of Health and Ministry of Gender and Sports by having them attend workshops and seminars within the sub county.

5.5 Area for Further Research

The study assessed duration of experience of war and how it relates to stress levels among Somali refugee women living in Eastleigh Starehe Sub-County. Therefore, further research should be carried out in other areas like the camps. The study should include men and children.

REFERENCES

- Abraham, F. (1982). *Modern sociological theory: an introduction*. Delhi OU.
- Allan, A. J. (2009). The importance of being a 'lady': hyper- femininity and heterosexuality in the private, single- sex primary school. *Gender and Education, 21*(2), 145-158.
- Ana Low (2012). *Local integration: a durable solution for refugees?*
- Ellis, B. H., Abdi, S. M., Miller, A. B., White, M. T., & Lincoln, A. K. (2015). Protective factors for violence perpetration in Somali young adults: The role of community belonging and neighborhood cohesion. *Psychology of Violence, 5*(4), 384.
- Bean, T., Eurelings-Bontekoe, E., Mooijaart, A., & Spinhoven, P. (2009). Factors associated with mental health service need and utilization among unaccompanied refugee adolescents. *Adm Policy Ment Health. 2009, 33* (3): 342-55.
- Bogic, M., Njoku, A., & Priebe, S. (2015). Long-term mental health of war-refugees: a systematic literature review. *BMC international health and human rights, 15*(1), 29.
- Bryman. A, (2012). *Social Research Methods* (4th Ed), New York : Oxford University Press.
- Carroll, J., Epstein, R., Fiscella, K., Gipson, T., Volpe, E., & Jean-Pierre, P. (2007). Caring for Somali women: implications for clinician–patient communication. *Patient education and counseling, 66*(3), 337-345.
- Claudia, M. L. (2007). The relationship between culture, gender, structural factors, abuse, trauma, and HIV/AIDS for Latinas. *Qualitative health research, 17*(3), 340-352.
- Cockerham, W. C., Han, J., & Ritchey, F. J. (1997). *Dictionary of medical sociology*: Greenwood Press.
- Cooper, D. R., Schindler, P. S., & Sun, J. (2006). *Business research methods* (Vol. 9). New York: McGraw-Hill Irwin.
- Costa, D. (2007). Health care of refugee women. *Australian Family Physician, 36*(3), 151.
- Debarati, G.S., & Ruwad, R. (2009). Consequences of Ongoing Civil Conflict in Somalia: Evidence for Public Health Responses. Accessed from <https://doi.org/10.1371/journal.pmed.1000108>.
- Drumtra, J. (2014). *Internal Displacement in Somalia*. Brookings Institution.

- Folkman, S., & Lazarus, R. S. (1988). Coping as a mediator of emotion. *Journal of personality and social psychology*, 54(3), 466.
- Fuaad, M. (2015). PTSD, depression, and anxiety among young people in Iraq one decade after the American invasion. *Traumatology*, 22(1), 56–62.
- Gathondu, P. G. (2018). *Influence of Transformational Leadership Outcomes on Performance of Staff in Microfinance Institutions in Kenya* (Doctoral dissertation, United States International University-Africa).
- German Agency for Technical Cooperation, (2003). *Capacity Development*. GTZ, Eschborn.
- Grandi, N. (2018). Considerazioni sulla definizione e la classificazione dei composti. *Sezione di Lettere*, 1(1), 31-52.
- Guardian Research (2018). *Living with a refugee gives you a real understanding of what is important*. Management consultant Rachel Mantell on what she has learned from hosting refugees.
- Guterres, A. (2008). People on the Move: The Challenges of Displacement in the 21st century. *International Rescue Committee UK Annual Lecture, Royal Geographical Society, London*.
- Hedges, C. (2003). *War is a force that gives us meaning*. Anchor.
- Henkin, L. (1998). Elements of constitutionalism. *Review-international commission of jurists*, 11-22.
- Hodes, M., Jagdev, D., Chandra, N., & Cunniff, A. (2008). Risk and resilience for psychological distress amongst unaccompanied asylum seeking adolescents. *Journal of Child Psychology and Psychiatry*, 49, 723–732.
- Horst, C. (2006). *Transnational Nomads: How Somalis Cope with Refugee Life in the Dadaab Camps of Kenya*. Oxford: Berghahn Books.
- Human Rights Watch (2002). *Hidden in Plain View: Refugees Living Without Protection in Nairobi and Kampala*, New York: Human Rights Watch.
- Hyndman, J. (2000). *Managing Displacement. Refugees and the Politics of Humanitarianism*, Minneapolis: University of Minnesota Press.

- International Crisis Group. (2012). *The Kenyan Military Intervention in Somalia*. Crisis Group Africa. IRIN Africa. (2010, September 17). Kenya - Somalia: Insecurity Without Borders. Retrieved June 18, 2014, from IRIN Africa: <http://www.irinnews.org/report/90505/kenya-somalia-insecurity-withoutborders>.
- Jacobsen, K. (2005). *The Economic Life of Refugees*, Bloomfield, CT: Kumarian Press.
- Jaji, R. (2009). *Refugee woman and the experiences of local integration in Nairobi, Kenya* (Doctoral dissertation).
- Kenyeki, J. (2006). Survival Strategies among urban refugee in Nairobi. Unpublished Masters of Art in Sociology Project of the University of Nairobi
- Kibreab, G. (1993). 'The Myth of Dependency among Camp Refugees in Somalia 1979-1989', *Journal of Refugee Studies* 6(4):321-349.
- Lazarus, R. S., & Folkman, S. (1984). *Stress, Appraisal and Coping*. New York: Springer
- Lewis, I.M. (2002). *A Modern History Of Somalia - Nation And State In The Horn of Africa*, London: Longman, 4th Edition.
- Lindley, A. (2006a). The dynamics and effects of remittances in insecure settings: the Somali case, DPhil Thesis, Department of International Development, University of Oxford.
- Lindley, A. (2007b). *Remittances in Fragile Settings: A Somali Case Study, Households in Conflict Network*. Working Paper No. 27. Brighton: University of Sussex.
- Lindley, A. (2007b). *The Early Morning Phonecall: Remittances from a Refugee Diaspora Perspective, Centre on Migration, Policy and Society Working Paper No.47*. Oxford: University of Oxford.
- Mark, B., & Sally, H. (2010). *Endless war*. A brief history of the Somali conflict.
- Martín, I., & Bonfanti, S. (2015). Migration and asylum challenges in Eastern Africa: Mixed migration flows require dual policy approaches.
- Masten, A. S., Narayan, A. J., Silverman, W. K., & Osofsky, J. D. (2015). Children in war and disaster. *Handbook of child psychology and developmental science*, 1-4.

- Mayer, J.-F. (2007). "In God I have put my trust": refugees and religion. *Refugee Survey Quarterly*, 26(2), 6-10.
- Mbithi, S. (2007). A critical assessment of the socio-economic effects of civil war on women: a case study of Somali women refugees in Dadaab, Kenya (1991-2007). Masters of Arts. Institute of diplomacy and international studies, University of Nairobi.
- Milner, J. (2006). 'Somali refugees in Kenya: Abdication and containment', in The politics of asylum in Africa: the case of Kenya, Tanzania and Guinea, DPhil Thesis, Department of International Development, University of Oxford.
- Mugenda, O., & Mugenda, A. (2003). *Research Methods: Quantitative and Qualitative approaches*, Nairobi: ACTS press.
- The Ottawa Citizen from Ottawa, Ontario, Canada · 79 September 13, 1993 A Publisher Extra Newspaper, p 79 Ottawa, Ontario, Canada
- Pavanello, S., Elhawary, S., & Pantuliano, S. (March, 2010). *Hidden and Exposed*. Urban refugees in Kenya, Humanitarian Policy Group (HPG) assessment report, London ODI.
- Peisker, V. C., & Tilbury, F. (2003). "Active" and "passive" resettlement: The influence of support services and refugees' own resources on resettlement style. *International Migration*, 41(5), 61-91.
- Republic of Kenya (2012). *Ministry of Education Refugee Education Concept Note*: Nairobi
- Refugee Consortium of Kenya (2008). *Enhancing the Protection of Refugee Women in Nairobi: A survey of Risks Protection Gaps and Coping Mechanisms of Refugee Women in Nairobi*.
- RefugePoint (2012). *Where We Work*". www.refugepoint.org.
- Rehn, E., & Sirleaf, E. J. (2002). Women, war and peace. *Progress of World's Women*, 1.
- Richard S. (1998). "Toward better research on stress and coping." (2000): 665.
- Ritzer. G. (1996). *Sociological Theory*, USA: Mcgraw Hill Companies.

- Schindler, P., & Donald, C. (2005). *Business Research Methods* (9th Ed), USA: Mc Graw – Hill Company.
- Schweitzer, R., Greenslade, J., & Kagee, A. (2007). Coping and resilience in refugees from the Sudan: a narrative account. *Australian & New Zealand Journal of Psychiatry*, 41(3), 282-288.
- Skrede, Gleditsch, K., Cunningham, D. E., & Salehyan, I. (2009). It takes two: A dyadic analysis of civil war duration and outcome. *Journal of Conflict Resolution*, 53(4), 570-597.
- Soye, E., Ficarelli, T., Lakshman, R., Mansour, W., & Woodward, W. (2018). *Wellbeing and Protracted Urban Displacement: Refugees and Hosts in Jordan and Lebanon*.
- Straub, D. (2003). Editor's comments: does MIS have native theories?. *MIS quarterly*, iii-xii.
- UNHCR (2009). *UNHCR Policy on Refugee Protection in Urban Areas*: Geneva.
- UNHCR (2009). *The coping processes of adult refugees resettled in New Zealand*, New Issues in Refugee Research Paper No. 179
- UNHCR (2009). *Protecting refugees and the role of UNHCR*: Geneva.
- UNHCR (2011). *Ensuring Access to Education: Operation Guidance on Refugee Protection and Solutions in Urban Areas*.
- UNHCR, Jordan (July 2009). *Assessment for livelihoods and Strategy for Livelihoods Promotion*, UNHCR Assessment Report for Iraqis Refugees in Jordan
- UNHCR, (March 2013). *Monthly Statistical Update*, Nairobi: UNHCR
- UNHCR (2012). *Living on the edge in Nairobi*, Nairobi: UNHCR
- UNICEF. (2010). *The progress of nations, 2010*. UNICEF.
- Wagacha, J. B., & Guiney, J. (2008). The plight of urban refugees in Nairobi, Kenya. *Refugee rights: Ethics, advocacy, and Africa*, 91-102.
- Waweru W. I. (2014). *Coping strategies among urban refugee women in Nairobi*.

- Wiese, E. B., & Burhorst, I. (2007). The mental health of asylum-seeking and refugee children and adolescents attending a clinic in the Netherlands. *Transcultural psychiatry*, 44(4), 596-613.
- Women's Refugee Commission, (2011). *The Living Ain't Easy, Urban Refugees in Kampala-Uganda, Livelihoods Assessment Report*, New York: WRC
- Women's Refugee Commission, (2011). *Bright Lights, Big City, Urban refugees struggle to make a living in New Delhi-India*, Livelihoods Assessment Report. New York: WRC
- Women's Refugee Commission, (2011). *No Place To Go But Up, Urban Refugees in Johannesburg- South Africa. Livelihoods Assessment Report*, New York: WRC
- WHO. (2010). *mhGAP intervention guide for mental, neurological and substance use disorders in non-specialized health settings*. Geneva, Switzerland: Author.

APPENDICES

APPENDIX 1: Questionnaire

TOPIC: Duration of experience of war and how it relates to stress levels among Somali refugee women living in Eastleigh Starehe Sub-County. I am a student at the University of Nairobi pursuing a postgraduate degree leading to the award of Master of psychology. As part of my course, I am required to carry out a research on the above topic. Somali women refugees living in Eastleigh have been selected to participate in the study. I kindly request you to fill for me the attached questionnaire with sincerity. The information provided by you, will be treated with utmost confidentiality and will be used for academic purposes only. Kindly do not write your name anywhere on the questionnaire.

Thank you for agreeing to participate in this academic study.

Instructions:

Please fill the gaps or tick where appropriate.

SECTION A: DEMOGRAPHIC INFORMATION OF THE RESPONDENTS

Instructions: Tick where appropriate

A1. State your Age.>25yrs [] 26-35yrs [] 36-45yrs [] 46-55[] < 56 yrs. []

A2. Country of origin. _____

A3. What is your highest level of education?

Certificate [] Diploma [] Undergraduate [] Master's degree []

Others (Specify) _____

A4. Marital status

Married [] divorced [] separated [] widowed [] Single []

A5. Number of years in the host country.....

A6. Number of children.....

A7. Source of income.....

SECTION B.

To what extent do you agree that the following has stressed you?

1=Strongly Disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly Agree

	Statements	Strongly Dis- Dis- Agree	Dis- Agree	Neutral	Agree	Strongly Agree
1.	The experience of war in my country	1	2	3	4	5
2.	The duration of war in my country	1	2	3	4	5
3.	The encounters during my journey while fleeing to Kenya.	1	2	3	4	5
4.	The host community	1	2	3	4	5
5.	Re-integrated with the host community	1	2	3	4	5
6.	Where to stay after arriving to Kenya	1	2	3	4	5
7.	Doing business with the host community	1	2	3	4	5
8	Women from the host community.	1	2	3	4	5
9.	Getting an identification document to allow me stay in Kenya.	1	2	3	4	5
10.	Getting refugee recognition document	1	2	3	4	5
11	Insecurity in Kenya	1	2	3	4	5
12	Kenyan Police	1	2	3	4	5
13	finances	1	2	3	4	5
14	Fear for my life	1	2	3	4	5
15.	Medical services	1	2	3	4	5
16	Getting an NHIF card	1	2	3	4	5
17	A work permit	1	2	3	4	5
18	Resettlement process	1	2	3	4	5
19.	Life In Kenya	1	2	3	4	5
20	Going back to my country.	1	2	3	4	5

SECTION C.

C1. Who do you talk to when you feel stressed?

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.....
.....

C2. How does it make you feel to have someone to talk to?

.....
.....
.....

C3. How have you been coping with life here in the host country since you arrived from your country?

.....
.....
.....

C4. What do you do when you feel stressed?

.....
.....
.....

C5. Who provides for your basic needs?

.....
.....
.....

C7. Have you ever sought counseling services from a counselor either on your own or through organizations? If yes, how did the sessions help you cope with stress here in Eastleigh? If not, why?

.....
.....
.....

C8. How has religion helped you to cope with stress?

.....
.....
.....

C9. What are your hopes in life and what keeps you strong?

.....
.....
.....

C10. What would you wish to tell other women who are facing the same issues that you have gone through or are still facing?

.....
.....
.....

To what extent do you agree that the following coping strategies/levels?

1=Strongly Disagree 2=Disagree 3=Neutral 4=Agree 5=Strongly Agree

	Statements	Strongly Dis- Agree	Dis- Agree	Neutral	Agree	Strongly Agree
1.	Am able to know what stresses me	1	2	3	4	5
2.	I act calm and normal when am stressed	1	2	3	4	5
3.	I feel emotionally and physically drained when am stressed	1	2	3	4	5
4.	I know how to manage stress	1	2	3	4	5
5.	Am quickly able to find solution when am stressed	1	2	3	4	5
6.	I cope well when am stressed	1	2	3	4	5
7.	I can adopt to any environment	1	2	3	4	5
8.	I eat well when am stressed	1	2	3	4	5
9.	I sleep well when am stressed	1	2	3	4	5
10	I keep a positive attitude when am stressed	1	2	3	4	5