

**ASSESSING THE EFFECT OF INTEGRATION PROGRAMS ON SOCIO-  
ECONOMIC ADAPTATION OF REFUGEES IN NAIROBI, KENYA**

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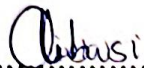
**JUNE 2025**

## DECLARATION

I hereby pronounce that the content described in this research study project is true and original to me and has never been submitted for any academic credit in any other institution of learning. Other sources of information have been properly cited.

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## **DEDICATION**

To my Parents (the late Bernard Lusweti Wanambisi and Petronila Nakhanu Oluta, I dedicate this Master of Science thesis, for having started me on a good academic foundation that has seen me this far in my academic endeavours.

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## ABSTRACT

The main objective of the study was to assess integration programs and refugees' socioeconomic adaptation in Nairobi, Kenya. The following research goals acted as the guide to the study: identifying the impact of education through integration programs on refugees' socioeconomic adaptation in Nairobi, Kenya; assessing the impact of Healthcare on refugees' socioeconomic adaptation in Nairobi, Kenya; identifying the impact of government policies on integration programs on refugees' socioeconomic adaptation in Nairobi, Kenya; and evaluating the impact of housing on integration programs on refugees' socioeconomic adaptation in Nairobi, Kenya. The study combined two theories: the social integration theory, and the Human Development Index theory. The study used a descriptive correlational design considering the 78,912 refugees in Nairobi as the study's target population. Purposive sampling was used to select 300 respondents from the listed refugee NGOs. A questionnaire was used to collect data with reliability at a Cronbach Alpha of above 0.89 in all the variable tests. The findings of the study were presented using graphs and charts produced through SPSS tool. The findings of the research study showed existence of a strong positive relationship at  $r = .856$  between education and socio-economic adaptation of refugees, where the education programs attributed 73.3% to the success of socio-economic adaptation of refugees. From the study, there was a moderately strong positive relation at  $r = .476$  between healthcare and socio-economic adaptation of refugees, where Healthcare Programs attributed 22.7% to the success of socio-economic adaptation of refugees. There was a weak positive relation at  $r = .238$  between government policies and refugees' socio-economic adaptation, where government policies in place contributed to about 18.22% to the success of socio-economic adaptation of refugees. Lastly, from the study a strong positive relation at  $r = .781$  existed between housing and socio-economic adaptation of refugees, where the housing programs attributed 61.1% to the success of socio-economic adaptation of refugees. The social-economic adaptation of refugees was concluded to be strongly influenced by education and housing in integration programs. Refugee NGOs are recommended to provide learning opportunities to the refugees through their integration programs by investing in education and training that creates impactful practical skills for self-sustainability. The need for industrial training has been highlighted to sharing of skills from the local community industries. The study recommends that the healthcare for refugees should be reviewed to create more affordable and accessible services. This study further recommends that governments should get more involved in supporting refugees with fair policies as they adapt to society. This includes developing legal assistance programs, tailored job training initiatives, and community support networks that provide essential resources and guidance as refugees navigate their new environments. The study also recommends that housing to be made even more accessible or maintain the standards as they currently are in the integration programs. The study suggests similar studies on refugee integration programs in other non-urban counties within the country and focuses on studies touching refugee integration programs influenced by other factors.

## OPERATIONALIZATION OF TERMS

**Education Programs** – This is a structured organized sequence of actions designed to accomplish precise learning outcomes and objectives over a certain period.

**Government Policies** – are the choices and actions governments make to affect the economy and society, frequently to solve particular issues or accomplish desired results. They can include budgetary measures, programs, initiatives, and laws and regulations.

**Healthcare Programs** – refer to programs aimed at promoting, preserving, or regaining health; these programs can include everything from treatment and rehabilitation to preventative care.

**Housing Programs** – are programs created to assist people and families in finding quality, safe, and reasonably priced housing. These programs usually consist of subsidized housing alternatives, homeownership support or rental assistance.

**Refugees** – Someone who has been compelled to leave their own country because of persecution, war, violence, climate change, or other dire circumstances.

**Social Integration** – refers to the process by which people or groups integrate into a broader social whole, creating a feeling of identity and belonging. It covers a number of topics, including integrating newcomers, building cohesive communities, and fostering respect and understanding amongst distinct groups.

**Socio-economic Adaptation** – refers to the process of adapting social and economic institutions to real or anticipated climate stimuli and their consequences. This includes modifying laws, procedures, and organizational frameworks in order to prevent possible harm or take advantage of possibilities presented by climate change.

## **ABBREVIATIONS AND ACRONYMS**

**HIAS** - Hebrew Immigrant Aid Society

**IOM** - International Organisation for Migration

**IOR ANU** - Institute of Research, Africa Nazarene University

**KICD** - Kenya Institute for Curriculum Development

**NACOSTI** - National Commission for Science, Technology, and Innovation

**NGOs** - Non-Governmental Organisations

**PTSD** - Post Traumatic Stress Disorder

**SPSS** - Statistical Package for Social Sciences

**UNHCR** - United Nations High Commissioner for Refugees

**USA** - United States of America

# **CHAPTER ONE**

## **INTRODUCTION**

### **1.1 Introduction**

This chapter includes an overview on the background to the research study, the problem statement, the purpose of the study, objectives of the study, the research questions, the significance of the study, the scope of the study, the delimitations and the limitations of the study, the underlying assumptions of the study, the theoretical framework, and the conceptual framework.

### **1.2 Background of the Study**

The concern of forced displacement and refugee integration is a notable occurrence within the globe. The global refugee crisis has prompted governments, humanitarian organizations, and development actors to rethink approaches to displacement. Increasingly, refugee integration is being viewed not only through a humanitarian lens but also as a socio-economic opportunity.

Historically, the response to refugees focused on immediate aid and establishing camps. Nevertheless, prolonged refugee situations have revealed the shortcomings of these approaches. The Global Compact on Refugees (GCR) highlights the necessity for shared responsibility and long-lasting solutions, advocating for the integration of refugees into national services and economies (UNHCR, 2021). This framework is also aligned with the Sustainable Development Goals (SDGs), linking refugee support to long-term development strategies. Endorsed by the United Nations in 2018, the Global Compact on Refugees (GCR) gained practical momentum in subsequent years. It promotes better mechanisms for integration, emphasizing education, employment, and legal rights to foster refugee self-sufficiency and alleviate the burden on host nations (UNHCR, 2021). Moreover, the UNHCR's Global Trends Report for 2021 indicated that the total number of forcibly displaced individuals reached 89.3 million by year's end, highlighting the pressing need for lasting solutions like local integration (UNHCR, 2022).

The European Union launched the Action Plan on Integration and Inclusion 2021–2027, which focuses on equal access to job opportunities, education, healthcare, and housing (European Commission, 2021). Nations such as Germany and Sweden have taken the lead with organized language programs and access to the job market. However, the process of integration varies significantly across the continent. For instance, Denmark enacted laws permitting asylum applications to be processed in third

nations, which raised concerns regarding the undermining of refugee rights and prospects for integration (Norwegian Refugee Council, 2021). In 2020, the refugee population in Germany, including asylum seekers, exceeded 1.77 million, making up roughly two percent of the overall population. The German government implemented various measures as part of integration initiatives to help refugees assimilate into German society. These initiatives included language classes, vocational training, and job placement support (Statista, 2021).

In the United States, the Biden administration raised the refugee admissions cap to 125,000 for FY 2022 and FY 2023. Initiatives like Operation Allies Welcome (2021) aided the integration of Afghan refugees through housing support, job placement, and language services (Refugee Council USA, 2022). Canada continues to lead in the realm of refugee integration, providing both government-assisted and privately sponsored resettlement options. Programs such as Language Instruction for Newcomers to Canada (LINC) and employment bridging services have shown success in integrating refugees, especially women and youth (IRCC, 2022). Australia's Humanitarian Program persists in resettling refugees and facilitating integration via organizations like AMES Australia, which offers employment services, education, and housing assistance (Department of Home Affairs, 2023). However, Australia's offshore detention policies hinder integration for certain asylum seekers. Other nations in the region, including Bangladesh, which accommodates over 900,000 Rohingya refugees, have limited integration prospects due to legal and political challenges (World Bank, 2021).

In Uganda, refugees are integrated through a self-reliance model that permits them to work and access education and healthcare services. Uganda's forward-thinking approach has received international acknowledgment (UNHCR, 2022). In South Africa, despite the protections offered by the constitution, challenges such as xenophobia and high unemployment impede refugee integration (IOM, 2022). Countries such as Uganda, Ethiopia, Colombia, and Kenya have adopted positive strategies that allow refugees to work, establish businesses, and access education and healthcare. These changes demonstrate an increasing understanding that including refugees benefits not only those displaced but also the host communities (World Bank, 2023). Kenya hosts around half a million refugees, mainly from Somalia, South Sudan, and the Democratic Republic of Congo. In 2021, the Kenyan government enacted the Refugees Act No. 10, a significant law providing refugees with the right to work, freedom of movement, and

access to public services (Refugees International, 2022). This legislation signified a transition towards a rights-based and development-oriented approach.

After the legal reforms, Kenya introduced the Shirika Plan in 2023 to put these changes into practice. The initiative aims to transform refugee settlements into integrated communities that offer shared services to both refugees and local inhabitants (Government of Kenya, 2023). Notable examples include the Kalobeyei Integrated Socio-Economic Development Plan (KISED) and the Garissa Integrated Socio-Economic Development Plan (GISED), which are designed to promote local economic growth, resilience, and social integration (UNHCR, 2023). Economic participation is essential for the inclusion of refugees. Those with legal rights to work and establish businesses are more likely to attain self-sufficiency and contribute positively to the economy of their host country. In Kenya, KISED has facilitated skills training, vocational education, and microfinance opportunities for both refugees and members of the host community (UNHCR, 2023). Nevertheless, research has indicated that obstacles such as lack of documentation, discrimination, and regulatory hurdles continue to hinder refugees' access to formal employment (The Legal Caravan, 2023).

A study conducted by the World Bank (2024) on refugee economies in Kenya highlighted that refugee entrepreneurs encounter limited access to financial resources and banking services, even though they are actively engaged in sectors such as trade, retail, and services. Expanding access to digital financial services and formal banking for refugees is crucial for realizing their economic potential. Education serves as a significant tool for socio-economic advancement and long-term integration. Kenya has made strides in incorporating refugee students into the national education system. The Competency-Based Curriculum (CBC), which has been implemented across the country, is also being applied in refugee camps, enhancing access to quality education (World Bank, 2024). However, challenges persist, including overcrowded classrooms, language barriers, and a lack of teaching staff.

The integration of healthcare has seen improvements due to the inclusion of refugees in the Universal Health Coverage (UHC) pilot in Turkana County. Refugees can now access community health services and national health insurance schemes, which enhance health outcomes and lessen reliance on emergency aid (UNHCR, 2023). Social integration, although more difficult to quantify, focuses on fostering mutual understanding, addressing xenophobia, and promoting peaceful coexistence. Recommended practices for enhancing social cohesion include public awareness

initiatives, inclusive governance, and joint service delivery for both refugees and host communities (Refugees International, 2022).

Gender significantly influences refugees' access to resources, opportunities, and protection. Female refugees frequently experience compounded vulnerabilities, such as gender-based violence, restricted mobility, limited access to healthcare, and lower enrollment rates in schools. In Kenya, UNHCR and its partners have developed gender-responsive initiatives that prioritize reproductive health services, legal assistance for violence survivors, and women's economic empowerment programs (UNHCR, 2023). Nevertheless, structural barriers remain. An assessment conducted by The Legal Caravan (a human rights movement) in 2023 showed that refugee women are considerably underrepresented in formal employment and leadership positions within refugee communities. Improving access to vocational training and micro-financing opportunities for women can enhance their socio-economic status and contribute to more inclusive integration strategies (The Legal Caravan, 2023).

Mwangi (2023) emphasizes the innovative contributions of NGOs and international organizations in providing educational opportunities for refugees in Kenya, particularly in camps where resources are scarce. Nevertheless, the quality of education remains a pressing concern. Refugees in Kenya often confront overcrowded classrooms, a lack of qualified teachers, and insufficient teaching materials, which can undermine the effectiveness of their education. Furthermore, refugees frequently find themselves excluded from Kenya's national education system, especially at secondary and tertiary levels. Gikonyo et al. (2022) point out that refugee students often grapple with discrimination and language obstacles that hinder their success in Kenyan educational institutions. UNHCR (2022) advocates for the greater inclusion of refugee students in local schools to ensure they have access to quality education that prepares them to make meaningful contributions to the economy once integrated into society.

Kenya's refugee policies have changed over time, yet challenges persist regarding the legal framework and governmental attitudes towards refugees. The Refugee Act (2006) laid the groundwork for refugee protection in Kenya, but the nation's policy has faced criticism for being restrictive and fragmented. Mwangi (2023) observes that while Kenya is a signatory to the 1951 Refugee Convention and the 1969 OAU Refugee Convention, refugees still experience hurdles in fully integrating into Kenyan society. A significant challenge is that refugees are often obliged to stay in designated camps unless they fulfill specific criteria for urban residence. Karanja and

Maina (2022) contend that this policy reinforces the separation of refugees and restricts their access to housing, education, and job opportunities in urban areas. Additionally, discriminatory actions from local communities and authorities further complicate the integration process. UNHCR (2022) and Karanja (2021) suggest that the Kenyan government should pursue a more inclusive refugee policy that enhances access to housing, healthcare, education, and employment for refugees, regardless of their location. This could involve policies supporting urban integration, granting refugees the right to work, and improving their access to national services.

### **1.3 Statement of the Problem**

The global refugee population continues to increase, with more than 36 million individuals being forcibly displaced and crossing borders as of 2024 (UNHCR, 2023). Despite international frameworks such as the Global Compact on Refugees emphasizing the importance of inclusion and self-reliance, many host countries, especially in low- and middle-income areas, reveal persistent inadequacies in refugee integration within critical sectors like education, healthcare, housing, and public policies. Refugees face significant challenges when trying to obtain quality education, which is essential for socio-economic adaptation. Even though there are ongoing policy reforms in countries like Kenya that seek to gradually incorporate refugee students into the national Competency-Based Curriculum (CBC), systemic obstacles remain. These obstacles include overcrowded classrooms, a lack of trained teachers familiar with refugee-specific approaches, insufficient learning materials, and low enrollment figures in secondary and higher education (Aden, 2024; World Bank, 2024). Language barriers and limited access to early childhood education further hinder long-term educational achievement.

In terms of healthcare, refugees frequently encounter unequal access to essential services. They often reside in areas with poorly funded health facilities, face language and cultural challenges, and are commonly excluded from national health insurance systems. Mental health support is particularly lacking, even though many refugees endure significant trauma (Molla, 2024; UNHCR, 2023). Women, children, and individuals with disabilities are disproportionately affected by these issues. Housing is one of the most visible and urgent challenges. Both refugees living in camps and those in urban settings often reside in inadequate, overcrowded conditions with poor sanitation, limited legal rights, and a heightened risk of eviction. Urban refugees are particularly disadvantaged due to the lack of inclusive housing policies and rental

protections, leading to unstable living conditions and increased vulnerability (World Bank, 2024; Refugees International, 2022). While there have been improvements in government policies, such as the adoption of Kenya's Refugee Act (2021), which guarantees refugees' rights to work and access services, actual implementation has been inconsistent. Refugees frequently encounter bureaucratic obstacles related to documentation, are often omitted from national planning and budgeting initiatives, and experience uneven policy enforcement at the county level (UNHCR, 2023). Additionally, there is minimal coordination between humanitarian assistance and national development efforts, resulting in fragmented service delivery and inefficiencies.

The lack of a unified, multisectoral approach to refugee inclusion hampers their ability to achieve self-sufficiency, heightens their dependency on humanitarian aid, and can intensify tensions with local communities. Although there have been advancements through localized settlement models like Kenya's Kalobeyi Integrated Socio-Economic Development Plan (KISEDPP), these initiatives are often limited in scope and frequently suffer from underfunding. Given these interconnected challenges, there is an urgent need to examine how refugees are either integrated or marginalized across key socio-economic sectors and to evaluate the effectiveness of current policies and programs. This study intends to thoroughly investigate refugee integration, focusing on education, healthcare, housing, and the influence of government policies on fostering or hindering inclusive development.

#### **1.4 Purpose of the Study**

The main purpose and objective of this study is to assess integration programs and socioeconomic adaptation of refugees in Nairobi, Kenya.

#### **1.5 Objectives of the Study**

- (i)** To determine the effect of education in integration programs on socio-economic adaptation of refugees in Nairobi, Kenya.
- (ii)** To establish the effect of healthcare in integration programs on socio-economic adaption of refugees in Nairobi, Kenya.
- (iii)** To examine the effect of government policies in integration programs on socio-economic adaption of refugees in Nairobi, Kenya.
- (iv)** To evaluate the effect of housing in integration programs on socio-economic adaption of refugees in Nairobi, Kenya.

## **1.6 Research Questions**

- (i) What is the effect of education in integration programs on socio-economic adaptation of refugees in Nairobi, Kenya?
- (ii) What is the effect of healthcare in integration programs on socio-economic adaption of refugees in Nairobi, Kenya?
- (iii) What is the effect of government policies in integration programs on socio-economic adaption of refugees in Nairobi, Kenya?
- (iv) What is the effect of housing in integration programs on socio-economic adaption of refugees in Nairobi, Kenya?

## **1.7 Significance of the Study**

This research study provides treasured insights into the effectiveness of integration programs for refugees as they adapt to new socio-economic environments. By examining the specific context of refugee integration in Nairobi, this study contributes to progression of effective and more sustainable integration programs that support refugees in their long-term stability and success. Findings of the study inform policy and program development by identifying the key challenges and opportunities in refugee integration and suggesting strategies to address them.

The results are resourceful for other scholars and industry participants, adding to the body of knowledge already available on refugee integration. The study helps to raise awareness about the experiences of refugees in Nairobi, Kenya. By highlighting the importance of effective social integration of refugees, the study will hopefully contribute to the promotion of more inclusive and equitable societies.

## **1.8 Scope of the Study**

This research study focuses on integration programs on refugee adaptation cognizant that there may also exist other various factors that are likely to have an influence on refugee adaptation. Integration programs play a major role in the many refugee-based organizations as it is a primary solution in tackling refugee crisis and in this the researcher has access to pertinent information. That is, having worked in NGOs dealing with Integration programs for several years, the researcher reaffirms the strong commitment towards successful integration programs and knowledge in some of the procedures in integration programs to lead the research successfully. The content of this study is confined only to integration programs in the various NGOs for review. Considering the geographical coverage, the study considered Nairobi County in Kenya, as the area hosts several refugee-based organizations.

Nairobi was considered by this study due to its size and centralization of the various target organizations, which was good for responses and in consideration of the research budget. The respondents of the study comprised of refugees while there were other pertinent information and insights from other key persons managing or operating the NGOs where refugees were hosted. The refugees as respondents have first-hand experiences regarding the integration programs and are able to share their experiences with the aid of the management or operational personnel. The selection of the respondents was considerate of research data collection timelines which was utmost three months. This research study focused and restrained on the objectives under consideration.

### **1.9 Delimitation of the Study**

This study paid attention to refugees in Nairobi, Kenya without generalizing to other refugee contexts. The findings may have been skewed due to the political and social contexts in Nairobi, Kenya. The sample size of the study may have limited the generalizability of the expected results.

### **1.10 Limitations of the Study**

Several refugees opted not to engage in the study, resulting in non-response bias and limiting the sample's representativeness. Refugees who choose to participate in the study differed from those who do not, which may have influenced the sample's representativeness. The researcher did get permission from various NGOs and refugees but there was still respondent who did not provide all the information required.

The availability and accessibility of essential data and information may have limited the study conclusions. Some data sources may be missing, old, or difficult to access, reducing the analysis comprehensiveness. The study utilized published journals and related materials to get correct information and ensured that proper data collection from the respondents was conducted to have enough data for analysis and for the right conclusions and recommendations to be made.

Language hurdles made data collecting difficult, especially for refugees who were not fluent in the local language or English. This could have had an impact on the accuracy and completeness of data being collected. To address this, this research study adopted non-jargon language in questionnaires for the refugees to understand and research assistants mobilized translators where there were differences in language.

### **1.11 Assumptions of the Study**

The number of refugees in the sample were a representative of all refugees in Nairobi, Kenya. The survey respondents provided accurate and truthful information about their socio-economic adaptation and perceptions of integration programs. The data collected provided a comprehensive understanding of the effectiveness of integration programs and their impact on refugees' socio-economic.

### **1.12 Theoretical Framework**

Theories played an important role in ensuring that the research was guided properly and analysis conducted with some sense of direction. The study adopted two theories, one to guide and cover the social aspect of integration programs and the other to look at the humanitarian aspect of integration programs. This guided the study objectives in looking at the various aspects of integration programs for the refugees. The theories laid a foundation for this study and gave guidance in the discussions and findings. The study was based on two theories; *the Social Integration Theory*, and the *Human Development Index theory*.

#### **1.12.1 Social Integration Theory**

The social integration theory suggests that the successful adaptation of refugees in a host society is contingent upon their ability to integrate socially, economically, and culturally (Dahinden, 2016). Social integration theory has been a significant framework in understanding the processes and outcomes of refugee integration in host societies. Social integration theory rightfully centers on the importance of social interactions between refugees and the host population (Scholten, 2017). This emphasis is in line with the notion that integration is a two-way process that involves the receiving community and refugees. The theory acknowledges the need for refugees to adapt culturally to their host society (Carling, 2020). Cultural adaptation is essential in urban contexts where diverse cultures coexist.

Social integration theory sometimes relies on simplified assumptions about social interactions (Scholten, 2017). It may assume a straightforward and linear process of integration that does not capture the complexities of urban refugee experiences. The theory tends to underemphasize structural factors and systemic barriers that can impede integration in urban settings (Carling, 2020). In cities like Nairobi, refugees often face issues related to housing, employment, and access to services that are not sufficiently provided by the theory. While this theory recognizes the importance of social interactions, it may not fully address the vulnerabilities that refugees, especially

marginalized groups, encounter in urban environments (Lewicki, 2020). These vulnerabilities include exploitation, discrimination, and limited access to resources.

Social integration theory does not always provide a clear policy focus or concrete recommendations for policymakers (Bloch, 2019). In urban areas where policies and services are crucial, this can be a limitation. The theory does not sufficiently consider the local context and the role of local institutions and community dynamics in shaping integration outcomes (Zetter, 2017). In Nairobi, where local factors are influential, this omission is significant. The social integration theory offers insights of value to the social interactions and cultural adaptation role in refugee integration. In consideration, the study embraced the theory to guide on housing through integration and to also guide on government policies and interventions through integration programs.

### ***1.12.2 Human Development Index Theory***

According to the human development index theory, income, healthcare, and education are crucial aspects of human growth. This theory posits that integrating refugees into a host society is a multi-directional process that requires the active participation of both refugees and the community hosting the refugees. The theory provides a comprehensive way of measuring development by considering multiple dimensions of well-being, including health, education, and income. This comprehensive approach offers a more nuanced view of human development compared to traditional economic measures like GDP per capita.

The theory allows for meaningful comparisons between countries and regions, making it a valuable tool for identifying trends and disparities in human development on a global scale. This comparative aspect is essential for understanding how different countries are progressing in terms of human well-being. The theory has practical policy implications. It highlights areas where improvements are needed, such as education, healthcare, and income distribution. Policymakers can use the theory to guide their decisions and prioritize development efforts (UNDP, 2016). The simplicity of the theory makes it accessible to a larger audience, that includes policymakers, researchers, and the public. Its straightforward structure allows for easy communication of complex development concepts (UNDP, 2016).

Critics argue that the human development index simplicity can mask important nuances and inequalities within countries. By condensing multiple dimensions into a single index, it may oversimplify complex development issues (Lahoti et al., 2019).

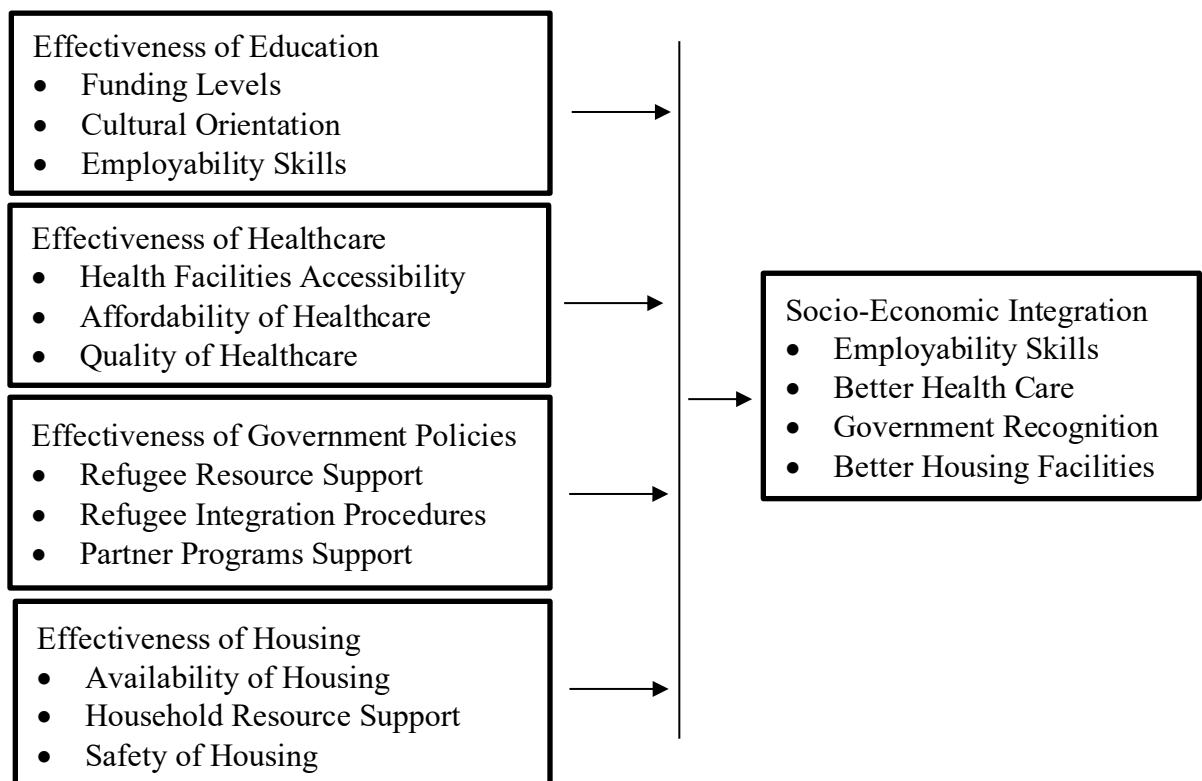
While the theory goes beyond economic indicators, it still focuses on a limited set of dimensions health, education, and income. Other crucial facets of human progress, such political freedom, gender equality, and environmental sustainability, could be overlooked due to this restricted focus (Lahoti et al., 2019). The theory relies on data that may not always be accurate or up-to-date, particularly in developing countries where data collection can be challenging (Hill & Adelman, 2019). This can lead to inaccuracies in the assessment of human development.

The theory does not explicitly account for inequality within countries, which means that a country may still have significant disparities in well-being among its population (UNDP, 2019). Effective integration programs facilitate the social integration process through the provision of refugees with education access, employment, home and housing, and social networks that are essential to their successful adaptation. The theory will guide the analysis of refugees' socio-economic adaptation and outcomes that is through access to education, and level of healthcare through integration programs.

### 1.13 Conceptual framework

The figure below represents the conceptual framework adopted for this study. The framework captures both the dependent and the independent variables. The variables under the conceptual framework constitute the objective of this study.

**Figure 1. The Conceptual Framework**



The conceptual framework includes the dependent variable which is the Socio-Economic Integration which upon the changes of the independent variables, portrays the levels of employability, healthcare, government policies, and housing. The independent variables that include; the effectiveness of education, the effectiveness of healthcare; the effectiveness of government policies; and the effectiveness of housing are manipulated to show their effect on the dependent variable.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

This section comprises a review of the relevant literature for the title under study. The section has considered for discussion with regards to refugee integration; the influence of education, the influence of healthcare, the influence of the government policies, and the influence of housing. A summary and gap of the literature of this research study has also been developed in this section.

#### **2.2 Review of Literature**

##### ***2.2.1 Effect of Education in Integration Programs***

Education is essential in helping refugees adjust to their new socioeconomic contexts. It is a crucial component in the integration of refugees, acting as a pathway to social inclusion, economic chances, and cultural adaptation. Refugee children and youth encounter significant obstacles to education. In Rwanda, funding reductions by UNHCR have threatened the education of thousands of refugee children, with just 21% enrolled in secondary school and 2.1% in tertiary education (AP News, 2023). Likewise, in the UK, teenage asylum seekers who arrive after the school year starts may experience up to a year without education, which can lead to feelings of isolation and mental health concerns (The Guardian, 2024). These delays impede timely integration and worsen vulnerabilities.

The level of education available to refugee students varies significantly. In the Dadaab camps of Kenya, nationally recognized, refugee-led schools have shown improved educational outcomes, indicating that refugee-led initiatives can enhance educational quality when given the right support (Aden, 2024). Conversely, numerous schools in host countries struggle to offer culturally relevant curricula and adequate language assistance, hindering the academic success of refugee students (Cooc & Kim, 2023). The readiness of teachers is vital for the effective education of refugees. Research shows that while many instructors are eager to assist refugee students, they frequently lack appropriate training in trauma-informed methods and cultural sensitivity (Molla, 2024). Initiatives like the International Rescue Committee's "Healing Classrooms" have been launched to train teachers in these areas, resulting in greater student engagement and well-being (The Guardian, 2024).

The involvement of parents is crucial to the educational achievements of refugee students. Studies indicate that when schools involve refugee parents through home-school communications and community liaison officers, students benefit from smoother transitions and improved academic results (Molla, 2024). However, negative stereotypes and cultural misconceptions can obstruct effective engagement, requiring focused efforts to overcome these challenges. Systemic issues, such as lack of legal status, inadequate funding, and fragmented policies, continue to hinder refugee education. The OECD underscores the necessity for a multi-stakeholder approach that includes governments, NGOs, and refugee communities to establish inclusive and effective educational strategies (Siarova & van der Graaf, 2022). Additionally, Scotland's "New Scots" strategy demonstrates the advantages of a comprehensive, rights-based approach to refugee integration that encompasses education (The Times, 2024).

Although there has been some advancement in access to basic education for refugees, there remains a significant gap in higher education. UNHCR's 2023 Education Report states that only 7% of refugee youth globally are enrolled in higher education, which is significantly lower than worldwide averages (UNHCR, 2023). Barriers include absence of documentation, lack of funding, language skills, and limited access to accredited institutions. Kenya, Uganda, and Rwanda have initiated DAFI scholarship programs, backed by the German government, to assist refugee students in accessing university education. Research by Bellino et al. (2022) found that refugee students in East Africa achieve better academic results when provided with psychosocial support and academic mentorship alongside scholarships. In Europe, Germany and the Netherlands have introduced "bridging programs" aimed at helping refugee students fulfill entrance criteria, learn the language of the host country, and adapt to university life (Siarova & van der Graaf, 2022).

The COVID-19 pandemic hastened the transition to digital education platforms, leading to an increase in online learning for refugees. However, this shift has highlighted a significant digital divide among refugees. Challenges such as poor internet connectivity, limited access to devices, and low digital literacy present considerable barriers, especially in remote refugee areas (World Bank, 2024). Programs like UNHCR's Connected Education initiative and Instant Network Schools by Vodafone Foundation have provided some refugee learners in Kenya, Mozambique, and the DRC with tablets, solar-powered internet access, and offline curricular

resources. An evaluation by Save the Children (2023) found that students in Kakuma utilizing tablets for blended learning performed better on standardized assessments than those in conventional classrooms.

Even with these improvements, researchers caution that insufficient teacher training may cause digital tools to reinforce rather than eliminate existing disparities (Cooc & Kim, 2023). The integration of refugees is more effective when they are incorporated into national educational systems instead of being segregated in parallel or NGO-operated schools. According to Dryden-Peterson (2021), national integration encourages standardized curricula, peer connections with local communities, and enhanced accountability. In Kenya, the application of the Competency-Based Curriculum (CBC) in refugee schools marks a significant advancement toward integration. Aden (2024) claims that refugee-led schools in Dadaab using the CBC have facilitated better continuity for students and established more robust pathways to formal qualifications. Nonetheless, inclusion initiatives often encounter capacity challenges, including overcrowded classrooms, language barriers, and insufficient teacher training. In Uganda and Ethiopia, despite policies advocating for inclusion, refugee students frequently achieve lower academic success due to poorly funded schools (UNHCR, 2022).

Refugees commonly undergo trauma, displacement, and loss, which heavily affect their educational experiences. Molla (2024) points out that refugee learners tend to perform better academically when educators and administrators are trained in trauma-informed teaching methods. Initiatives such as the Healing Classrooms Initiative by the International Rescue Committee incorporate social-emotional learning (SEL) and mental health support into educational programs. These initiatives, executed in Lebanon, Kenya, and Iraq, have been demonstrated to enhance student engagement and emotional health (IRC, 2023). Educators often indicate that they feel unprepared to support students dealing with trauma, and a 2023 OECD report advocates for the inclusion of training in psychological first aid and inclusive practices as essential components of teacher education in host nations (Siarova & van der Graaf, 2022).

Language stands out as a crucial aspect of refugee integration through education. In contexts where English or local languages are not spoken, acquiring language skills is typically necessary for accessing school or higher education. Refugee children often fall behind due to language obstacles that hinder understanding and involvement. For example, in Germany and Sweden, intensive language immersion

programs are implemented before refugee children can fully engage in mainstream classes (Dryden-Peterson, 2021). In Kenya, language continues to pose a challenge at early primary levels, particularly for refugees from Somalia or the DRC who may lack familiarity with Swahili or English. The creation of multilingual curricula and language bridging programs has shown potential, especially in institutions that prioritize mother-tongue instruction during early schooling before transitioning to national languages (UNHCR, 2023).

### ***2.2.2 Effect of Healthcare in Integration Programs***

Access to healthcare is vital for the socioeconomic adjustment of refugees residing in Nairobi. It includes various elements such as physical and mental health, availability of healthcare facilities, and the effect of healthcare on the overall well-being of refugees. Refugees frequently face considerable hurdles in obtaining healthcare services. Common issues include language difficulties, a lack of cultural understanding among healthcare providers, and a shortage of interpreters. A scoping review has pointed out that these challenges result in miscommunication, subpar care, and a lack of trust between refugees and healthcare practitioners (Awaisu, 2022). Moreover, refugees may face discrimination and concerns about privacy violations, which can further discourage them from seeking essential medical care.

Refugees often have intricate health requirements that encompass both physical and mental health issues. Research indicates that refugees face a heightened risk of mental health disorders like anxiety, depression, and post-traumatic stress disorder (PTSD) due to their experiences of displacement and trauma. Addressing these issues necessitates not just medical care but also culturally sensitive support that considers the specific challenges faced by refugee groups (Awaisu, 2022). Initiatives to incorporate refugees into national healthcare systems have yielded varied outcomes.

In Lebanon, the inclusion of Syrian refugees in the national health system enhanced service capacity but also exposed systemic flaws, including economic instability and dependence on international aid. These elements have impeded the long-term sustainability of healthcare access for both refugees and local populations (World Health Organization, 2023). National policies are fundamental to the integration of refugees into healthcare systems. In numerous low- and middle-income nations, refugees encounter barriers such as exclusion from national health insurance programs, lack of legal status, and inadequate healthcare infrastructure. These systemic challenges

intensify health inequities and complicate the effective assimilation of refugees into the healthcare systems of host countries (Globalization and Health, 2024).

Mental health represents one of the most urgent healthcare issues confronting refugees. The impact of trauma, violence, and loss often leaves refugees prone to psychological disorders such as depression, anxiety, and post-traumatic stress disorder (PTSD). A study by the World Health Organization (2023) found that refugees are significantly more likely three to five times to suffer from mental health disorders compared to the general population. The shortage of mental health professionals and culturally adept care in countries hosting refugees often worsens the mental health crisis, resulting in many refugees lacking access to suitable mental health services. Furthermore, refugees frequently endure stigma related to mental health issues, which hinders their willingness to seek assistance. As noted by Awaisu (2022), the integration of mental health services into primary healthcare tailored for refugees is crucial for effectively meeting their needs.

Chronic illnesses such as diabetes, hypertension, and cardiovascular diseases also impact refugee groups. Many refugees arrive in host countries with unresolved health conditions that were poorly managed or untreated during their displacement. Awaisu (2022) emphasizes that the discontinuity of healthcare during displacement can worsen chronic diseases. Healthcare systems within many host countries, particularly in camps or resource-limited environments, are often ill-prepared to deliver long-term care for these health conditions. Incorporating refugee health information into national health records is a key recommendation to ensure proper care for refugees with chronic illnesses (UNHCR, 2023).

In urban settings, refugees frequently reside outside official camps, leading to distinct challenges in accessing healthcare. The World Bank (2024) discovered that urban refugees in countries such as Kenya and Lebanon face insufficient access to healthcare due to their lack of official documentation necessary for national health insurance, often being excluded from government-funded health services. Additionally, urban refugees encounter obstacles such as high healthcare costs, unfamiliarity with the local medical system, and exploitation by private healthcare providers. UNHCR (2023) recommends that improving healthcare access for urban refugees necessitates enhanced collaboration between national health systems, local authorities, and international organizations to ensure that refugees are covered by national healthcare services.

In many host nations, refugees are often left out of national health insurance plans, resulting in limited access to essential healthcare. Molla (2024) argues that refugees are typically barred from national health insurance schemes due to their legal status, absence of documentation, or being regarded as temporary residents. Lacking health insurance forces refugees to depend on humanitarian assistance, which frequently falls short of meeting all health requirements. A study conducted by the World Health Organization (2023) demonstrates that policy frameworks allowing refugees to utilize national health insurance or emergency medical services significantly enhance health outcomes and decrease reliance on aid organizations.

Integrating refugee health into national healthcare systems has emerged as one of the most effective strategies for tackling health challenges faced by refugees. Awaisu (2022) highlights the effectiveness of integrated healthcare models in nations such as Germany and Sweden, where refugees receive the same healthcare services as citizens. These countries implement intercultural training for healthcare professionals and ensure that refugee health is incorporated into public health policies. In a similar vein, Kenya's Kalobeyei Integrated Socio-Economic Development Plan (KISED II, 2023) has prioritized providing integrated healthcare services in regions hosting refugees, addressing the health needs of both refugee and local communities collectively. Such initiatives not only enhance health outcomes but also foster social cohesion between refugees and host communities.

Community health workers (CHWs) play a vital role in the strategies for integrating refugee healthcare. Often drawn from the refugee population, CHWs offer culturally sensitive care and serve as liaisons between refugees and healthcare providers. A report by the World Bank (2024) indicates that healthcare programs led by refugees utilizing CHWs facilitate access to healthcare by breaking down language and cultural barriers. Moreover, UNHCR (2023) promotes the use of peer support networks to improve mental health services because refugees are more inclined to seek assistance from trusted individuals within their communities.

Maternal and child health services represent critical focal points for refugees, particularly given the heightened risks of pregnancy complications and infant mortality rates in these populations. A study by Molla (2024) found that refugees in camps frequently lack access to prenatal and postnatal care, greatly heightening the risk of complications for mothers and infants. Furthermore, many refugee-hosting countries offer limited access to family planning and reproductive health services. As stated by

UNHCR (2023), ensuring access to maternal and child health services is essential for refugee integration and necessitates both humanitarian support and governmental initiatives to effectively expand services.

### ***2.2.3 Effect of Government Policies in Integration Programs***

Government policies are essential for the integration of refugees, impacting their access to resources, rights, and opportunities in host nations. Integration encompasses more than just offering basic services; it also includes fostering an environment that enables refugees to engage fully in society. As noted by UNHCR (2023), successful refugee integration strategies should consider multiple facets such as legal rights, employment, housing, healthcare, education, and social inclusion. Nevertheless, the integration policies vary considerably by country, influenced by national perspectives on refugees and available resources.

Legal frameworks at the national level are the bedrock of refugee integration policies. For instance, in Kenya, the Refugee Act of 2021 represents a major advancement in granting refugees legal status and access to national services (Refugees International, 2022). This legislation permits refugees to work and utilize education, healthcare, and social services. However, the implementation of the act has been gradual, leading to persistent challenges for many refugees. As highlighted by UNHCR (2023), inadequate documentation and bureaucratic obstacles frequently hinder refugees' full integration into society. Other nations have also established progressive policies aimed at facilitating better integration. Germany's Refugee Integration Act (2021) seeks to enhance access to employment, housing, and language courses for refugees. According to Haug et al. (2022), Germany's approach emphasizes the need for integration while distinguishing between permanent residency and temporary asylum status. The policies underscore the significance of employment as a key element for effective integration.

Access to the job market is a crucial aspect of refugee integration. Policies that permit refugees to work legally significantly boost their economic independence and decrease their reliance on state assistance. Molla (2024) contends that labor market integration is often obstructed by discriminatory hiring processes, language barriers, and mismatches in skills. Refugees frequently encounter bureaucratic and legal challenges in obtaining work permits, particularly in countries that limit employment during the asylum process. Conversely, some host nations have embraced more

inclusive policies. In Canada, for instance, refugees are allowed to work immediately upon arrival, significantly improving their odds of integrating into society. A study by Haug et al. (2022) on Canadian immigration policies indicates that this prompt access to the labor market bolsters the economic autonomy of refugees and facilitates their integration into Canadian society. Likewise, Sweden has concentrated on integrating refugees into the labor market by providing language courses, job training, and assistance with job searches (Molla, 2024).

Housing represents another critical element of refugee integration. Adequate housing access enables refugees to establish themselves in host countries, contributing to their overall well-being and stability. However, housing policies for refugees vary widely among nations. In Germany, for example, the state offers housing for asylum seekers during the initial phases of their stay, but securing long-term housing solutions can be challenging. Refugees frequently face discrimination in the private rental market and struggle to find permanent housing options after gaining refugee status (Haug et al., 2022). UNHCR (2023) emphasizes the need for inclusive housing strategies that not only meet the immediate housing needs of refugees but also facilitate long-term community integration. In the UK, housing for refugees is often arranged in temporary accommodations or spread across various regions, with inconsistent levels of support. Refugees International (2022) suggests that temporary housing policies and the absence of long-term integration frameworks can hinder refugees from settling and building stable lives.

Education is a crucial aspect of refugee integration. Refugees who lack access to educational opportunities are less likely to attain self-sufficiency or contribute economically in their host nations. According to Aden (2024), Kenya's refugee education policies have undergone significant changes in recent years. The Competency-Based Curriculum (CBC), launched in 2022, enables refugee students to integrate into the national education framework. Nonetheless, practical challenges, such as overcrowded classrooms, insufficient numbers of trained teachers, and limited resources, persist (UNHCR, 2023). Similarly, in Lebanon, refugees encounter considerable obstacles in accessing education due to the country's political and economic turmoil. Molla (2024) notes that Lebanese policies often prioritize the educational needs of Lebanese citizens, frequently putting refugee students at a disadvantage. Germany's educational system has made progress in accommodating refugee students by instituting integration classes that provide language training,

cultural orientation, and social skills education. However, Haug et al. (2022) point out that refugee students still face challenges in fully accessing these resources.

Government measures that encourage social inclusion and pathways to citizenship are vital for the long-term integration of refugees. Acquiring citizenship enables refugees to enjoy complete legal rights and engage in the democratic processes of their host nations. In nations such as Sweden and Germany, refugees who have resided in the country for several years are eligible to apply for citizenship, which greatly enhances their chances of integration. Haug et al. (2022) stress that social policies promoting inclusion and encouraging refugees to contribute—through community involvement, volunteering, and local governance—bolster social cohesion. In contrast, UK policies have adopted a different stance, emphasizing temporary protection and limited options for naturalization, which often leads to extended uncertainty concerning legal status and restricted access to social benefits (Refugees International, 2022).

While there have been positive advancements, notable challenges remain within refugee integration policies. Haug et al. (2022) contend that many governments hesitate to fully support refugee integration due to political opposition, economic strains, and public perceptions of refugees. The emergence of populism and anti-immigrant sentiments in numerous countries has resulted in more stringent policies that obstruct the ability of refugees to assimilate into their new environments. Additionally, Refugees International (2022) points out that fragmented policies and a lack of coordination among national governments, local authorities, and international organizations can worsen the difficulties faced by refugees. There is frequently a gap between policy objectives and practical execution, resulting in inefficiencies and unmet needs.

The political and security landscape of host nations greatly influences the policies implemented regarding refugees. Refugees often encounter suspicion and stigma in light of security issues, which can lead to more restrictive rules. Refugees International (2022) indicates that anti-terrorism measures and security worries often guide policies that restrict refugees' mobility and access to essential services. Countries like France and Hungary have enacted stringent asylum laws in recent years, frequently citing national security concerns tied to refugee resettlement (Refugees International, 2022). These security-driven policies generally undermine refugees' social integration, leaving them marginalized and disenfranchised. On the other hand, Nordic nations like Finland have adopted policies that consider both security and humanitarian aspects,

striving to balance border control with refugee rights protection. Aden (2024) points out that Finland's comprehensive approach, which aligns refugees with broader national security and social cohesion strategies, ensures their integration while addressing potential security risks. This model promotes community involvement and alleviates concerns about refugees by enhancing understanding between refugees and resident communities.

Refugee policies also shape social cohesion and the dynamics between refugees and host communities. Effective integration policies can enhance social cohesion by lowering tensions and promoting refugee contributions to the host society. For example, Germany's Integration Act fosters the social inclusion of refugees through language training, education, and social support. According to Haug et al. (2022), Germany's Integration Act focuses on civic integration, motivating refugees to engage in community activities, participate in local elections, and assimilate into social systems. However, in countries such as Hungary and Poland, the restrictionist policies enacted over the last decade have hindered refugees' ability to integrate into society, leading to increased xenophobia and hostility. Awaisu (2022) notes that these policies have made refugees feel unwelcome, diminishing their mental and social well-being and resulting in social isolation. The lack of inclusion is especially pronounced for refugees from non-European regions, who often face discriminatory policies.

Regional agreements and policies significantly influence the integration of refugees within specific regions. For example, the European Union has established the EU Asylum System, which incorporates mechanisms for the redistribution and resettlement of refugees among its member nations. The EU-Turkey agreement, aimed at curtailing refugee influxes into the EU, has been a pivotal policy shaping integration practices. Awaisu (2022) points out that while these agreements have diminished the number of arrivals, they've also resulted in varying policies across EU nations regarding refugees' rights to employment, residency, and access to services. Conversely, in East Africa, where a substantial number of refugees reside in nations like Uganda, an integration model has emerged that allows refugees to live outside of camps, cultivate land for agriculture, and participate in local economies. Uganda's refugee policy is frequently regarded as one of the most progressive in Africa, providing refugees with opportunities for self-sufficiency (UNHCR, 2023). Nevertheless, challenges persist in ensuring equal access to essential services such as education, healthcare, and jobs, particularly for refugees in remote areas.

International organizations, including UNHCR, IOM, and various NGOs, play a crucial role in influencing government policies related to refugees. UNHCR (2023) continues to push for comprehensive integration policies, stressing that integration is a long-term endeavor that necessitates political commitment, sustainable funding, and collaboration across sectors. IOM has concentrated on making sure refugee policies consider migration trends and the needs of local communities. International frameworks, like the Global Compact on Refugees (2018), have established expectations for host nations to grant refugees access to healthcare, education, and job opportunities, as well as to share the responsibilities of refugee protection. These frameworks have seen some success in motivating national governments to embrace more progressive policies, but there are still hurdles regarding the political commitment to fully realize them. Haug et al. (2022) highlight that international collaboration is essential, yet the success of refugee integration is often dictated by the domestic policies of individual countries.

Numerous studies have aimed to assess the effectiveness of refugee integration policies in achieving long-lasting results. Molla (2024) argues that evaluating the efficacy of integration policies requires assessing refugees' economic stability, employment statistics, mental health outcomes, and social inclusion. Germany's integration initiatives have demonstrated considerable success in enhancing employment rates and educational achievements for refugees. However, Haug et al. (2022) observe that even in Germany, challenges endure, particularly regarding youth employment, housing, and language learning. The OECD (2021) report on refugee integration indicates that nations with holistic and multi-faceted approaches to integration generally achieve better results in terms of refugee welfare and social cohesion. The Scandinavian approach to refugee integration is frequently recognized as a model of excellence due to its focus on long-term support systems, robust welfare provisions, access to public services, and social housing.

#### ***2.2.4 Effect of Housing in Integration Programs***

Housing is vital in the refugee integration process, influencing their access to necessary services, employment opportunities, and engagement in the social, cultural, and economic aspects of their host communities. The unavailability of stable and affordable housing can lead to social exclusion and obstruct refugees' efforts to rebuild their lives in a new environment. According to the United Nations High Commissioner

for Refugees (UNHCR), suitable housing is not merely a physical requirement but also a pathway to greater social inclusion, and neglecting housing needs can worsen the existing challenges faced by refugees (UNHCR, 2023). Recent literature on refugee housing has advanced, focusing on how housing policies, market dynamics, and societal perceptions of refugees influence their housing experiences. This review compiles recent studies on housing strategies, practices for integration, and the obstacles that refugees encounter when trying to secure stable housing.

Housing policies for refugees differ significantly from one country to another, resulting in various models created to meet both immediate and long-term housing needs. These models can generally be divided into temporary accommodation, social housing, and private rental options. Upon their arrival in a new country, refugees are frequently placed in temporary housing or reception facilities. This initial housing type aims to provide basic shelter and services while processing their asylum applications. However, temporary housing can restrict the integration opportunities for refugees, especially if they are confined to camps or communal living spaces for prolonged periods. Molla (2024) indicates that while temporary housing may serve as a short-term fix, it can unintentionally extend refugees' reliance on humanitarian aid and postpone their integration. Refugees residing in camps or communal shelters often face isolation from local communities, making it challenging for them to develop social connections and access job or educational opportunities. Additionally, such living conditions can worsen mental health issues, including stress and anxiety, arising from the uncertainty surrounding their legal situation and living arrangements.

Countries such as Germany and Sweden have created social housing initiatives to meet the long-term housing requirements of refugees. In these frameworks, refugees receive subsidized housing or are prioritized for public housing once their asylum requests have been approved. These strategies seek to enhance refugees' social integration by promoting their participation in local communities. Germany's strategy, particularly through the Integration Act, highlights the significance of assisting refugees in transitioning to permanent and affordable housing after receiving asylum. This transition is crucial for fostering economic participation and social unity among refugees. Nevertheless, housing shortages in certain urban regions have resulted in extended waiting periods for refugees seeking permanent housing (Haug et al., 2022). Discrimination in the housing market, especially against refugees from non-European backgrounds, continues to impede successful housing integration (Molla, 2024).

In a few nations, refugees are motivated to pursue private rental options with the aid of housing support services. For instance, in Canada, refugees initially receive temporary accommodation but are often guided in locating permanent housing within the private rental sector. The Canadian approach prioritizes community involvement and local housing partnerships to help refugees secure independent housing solutions. Although this model offers refugees greater autonomy and self-reliance, obstacles such as high rental costs and housing discrimination frequently hinder their access to the private rental market. Haug et al. (2022) assert that private landlords may hesitate to lease to refugees, especially when they lack local credit history or financial means.

Despite the emergence of various housing models, refugees continue to confront considerable difficulties in securing long-term, stable housing in many host nations. Housing discrimination stands out as one of the most significant barriers refugees encounter while seeking accommodation. Research shows that refugees, especially those from non-European countries, frequently face bias and discrimination in the housing sector. This can manifest in numerous ways, such as landlords refusing to rent to refugees or requiring higher deposits and rental fees (Awaisu, 2022). A study conducted by Haug et al. (2022) revealed that refugees in Germany and France often experience discrimination in the housing market, with landlords favoring tenants who are native-born or citizens of the European Union. This results in refugees being limited to subpar housing or temporary shelters, obstructing their integration into the broader community.

Housing affordability is a significant concern that worsens the challenges faced by refugees. As more refugees settle in urban regions, the need for housing frequently exceeds the available supply. In cities like London and Paris, high housing costs lead refugees to compete for limited spots in overcrowded public housing or struggle to afford private rentals (Molla, 2024). The shortage of affordable housing can also lead to the spatial segregation of refugees, forcing many into substandard neighborhoods that lack essential services such as healthcare and education. Additionally, refugees encounter bureaucratic obstacles that complicate their access to housing. In numerous countries, refugees must present a variety of documents, including proof of income or residence permits, to qualify for housing. Awaisu (2022) points out that complicated bureaucratic processes often prolong the transition of refugees from temporary shelters to permanent residences. For instance, refugees may endure lengthy waits to obtain their asylum status, hindering their ability to secure long-term housing. Language

barriers can also hinder refugees from successfully navigating the housing market and comprehending their rights. This situation may result in refugees depending on third-party organizations for assistance, which may not always be readily available or capable of effectively addressing housing issues (UNHCR, 2023).

To address the obstacles to the housing integration of refugees, several policy suggestions have been put forth by scholars and practitioners. Governments should boost investments in affordable housing, particularly aimed at developing low-income and supportive housing for refugees. Molla (2024) suggests that public-private partnerships might effectively increase the availability of affordable housing for refugees, especially in areas with high demand. To tackle housing discrimination, stronger legal protections must be established to ensure refugees are not discriminated against due to their nationality, ethnicity, or refugee status. Haug et al. (2022) advocate for the implementation of anti-discrimination regulations and ensuring that housing providers receive training to recognize and address biases in the rental process. To make housing more accessible, bureaucratic processes should be simplified.

Governments should streamline the asylum application procedure and provide clear, transparent paths for refugees to move into permanent housing. Awaisu (2022) highlights that reducing administrative delays and expediting housing access can help minimize refugees' vulnerability to homelessness and unstable housing situations. Encouraging refugees to relocate to smaller towns and rural areas can ease the burden on urban housing markets. Sweden has pioneered this strategy, where refugees are often resettled in less densely populated regions, yielding a more equitable distribution of housing. However, Molla (2024) emphasizes that this strategy must be supported by adequate resources for the social and economic integration of refugees in these locations.

The connection between refugee housing and social cohesion has been examined in various studies. Housing serves not only as a fundamental need but also plays a crucial role in the integration process by fostering social interactions and providing refugees with a sense of belonging. The nature of the housing supplied, its location, and the social context surrounding refugees can either promote or obstruct their integration with the wider society. In nations where refugees are housed in secluded, overcrowded shelters or temporary camps, social exclusion may become more evident. Research conducted by Molla (2024) illustrates how refugees in such isolated conditions often experience social isolation, which diminishes their chances of

engaging with members of the host community. These segregated living situations can reinforce cultural and social divisions, hindering refugees' full participation in host society.

On the other hand, integration-focused housing policies that position refugees in mixed-income neighborhoods or close to various community services, such as schools and healthcare facilities, encourage social integration by fostering interactions between refugees and residents. Haug et al. (2022) underscore the significance of creating residential areas where refugees can integrate into the broader community rather than remaining in segregated or marginalized housing clusters. Such residential areas should offer opportunities for social mingling and provide access to resources that build social capital, which is critical for successful integration.

A substantial amount of research indicates that housing instability and inadequate living conditions have a significant effect on the mental health of refugees. Housing serves not only as a physical requirement but also as a psychological necessity, offering refugees a stable environment to recuperate, regain a sense of control, and begin rebuilding their lives. Refugees residing in temporary accommodations or overcrowded housing frequently experience increased stress, anxiety, and depression. The unpredictability of their living situation can worsen the psychological trauma they may have endured in their home countries. Awaisu (2022) highlights that housing insecurity, coupled with limited access to mental health resources, creates a harmful cycle that affects both the well-being and integration prospects of refugees.

Refugees living in camps or reception centers often endure conditions that lack privacy and are linked with a loss of dignity. These situations can intensify feelings of helplessness and post-traumatic stress disorder (PTSD), making it harder for refugees to adjust to their new lives. Therefore, ensuring stable housing is a vital factor in enhancing mental well-being. In their research, Haug et al. (2022) discovered that refugees who move from temporary shelters to permanent housing tend to show marked improvements in their mental health and overall integration. Housing policies that enable refugees to move into homes with privacy and stability provide an essential foundation for rebuilding their lives and addressing psychological trauma.

The availability of stable housing is essential not only for the social integration of refugees but also for their economic integration. In many instances, a lack of suitable housing directly affects refugees' chances of finding and maintaining employment. Molla (2024) states that refugees placed in temporary shelters or remote areas often

encounter transportation challenges and insufficient access to local job markets. Moreover, unpredictable housing situations, such as frequent relocations or overcrowded living conditions, can hinder refugees from holding stable jobs, as they may not possess a permanent address, often a requirement for employers.

On the other hand, refugees who are provided with stable, affordable housing have a greater likelihood of securing employment. They can establish long-term residency, which gives them a reliable address for job applications, and are generally situated near job opportunities. Haug et al. (2022) indicate that when refugees are accommodated in locations with good public transport and nearby commercial centers, they are better positioned to find work. Additionally, self-sufficiency becomes more achievable for refugees with secure housing, as they can access local employment, participate in job training programs, and pursue educational opportunities.

Local governments play an important role in housing refugees and facilitating their successful integration. Often, national policies are inadequate to meet the specific needs of refugees in different regions. Decentralizing housing policies, where local authorities are empowered to make decisions regarding refugee housing, allows for more customized and adaptable solutions. In countries like Sweden, local governments are assigned the responsibility of coordinating housing allocation for refugees. Haug et al. (2022) argue that local authorities can better respond to the particular housing needs of refugees, such as requiring family-sized units or access to social services.

However, decentralization also necessitates that local governments have the capability and resources to effectively oversee refugee housing. Molla (2024) suggests that involving local communities and integrating refugees into local planning processes could strengthen community acceptance and backing for housing initiatives aimed at refugees. Moreover, local governments can foster refugees' self-sufficiency through community-oriented projects. Examples of these include community housing cooperatives or neighborhood integration initiatives that engage refugees in decision-making regarding their living conditions. Such initiatives can also foster a sense of belonging and responsibility among refugees, helping them feel more connected to their new communities (Awaisu, 2022). Beyond just a shelter, housing has the potential to serve as a means of empowerment in refugee integration. Research by Awaisu (2022) illustrates that access to quality housing can enhance refugees' agency and self-determination. When refugees have secure and appropriate housing, they are more

inclined to participate in other life areas that contribute to their integration, such as education, employment, and civic involvement.

### **2.3 Summary of the Reviewed Literature and Research Gap**

Despite a growing pool of literature on refugee integration and socio-economic adaptation, there remains noticeable research gaps to the understanding of the effectiveness of integration programs and the socio-economic outcomes of refugees in the specific context of Nairobi, Kenya. Studies have focused on refugees but there is still gaps in information concerning refugee integrations. Karanja and Maina (2023) point out that mental health challenges in refugee populations are compounded by housing instability, trauma from conflict, and a lack of comprehensive health services.

Mwangi (2023) highlights the innovative role that NGOs and international organizations have played in providing educational opportunities to refugees in Kenya, especially in refugee camps where resources are limited. However, quality of education is a significant concern. Omondi (2021) emphasizes that healthcare services in refugee camps are often overwhelmed, and refugees have limited access to specialized care such as mental health services or treatment for chronic diseases. Research by Molla (2024) highlights how refugees living in such segregated conditions often face social isolation, which reduces their opportunities to interact with host community members.

There is limited attention directed towards comprehensively examining the integration experiences and socio-economic challenges faced by refugees in Nairobi specifically, despite its significance as a major urban centre for refugee settlement. Furthermore, the temporal aspect of refugee integration in Nairobi remains underexplored. There exist limited studies in research for tracking the longer-term socio-economic trajectories of refugees who have undergone integration programs. A focused longitudinal study could provide insights into the sustainability of socio-economic gains and identify potential challenges that emerge over time.

## **CHAPTER THREE**

### **RESEARCH METHODOLOGY**

#### **3.1 Introduction**

The methodology as presented in this chapter, outlines several logical processes that were taken by the researcher to analyze the research problem. The research design, the targeted population and sample size, data collection and data analysis tools and techniques are only few of the many tasks that are represented in this section.

#### **3.2 Research Design**

According to Akthar (2016), a study's structure is essentially the planned research work plan and serves as the glue that holds all the project's components together. Tripathy and Tripathy (2017) also define research design as a logical comprehensive plan for a study which brings out how the given study is to be conducted, showing all major components of research work and to discuss the research questions. A research design may be perceived as the fulfilment of the concept of combined procedures that improve the accuracy of the research problem details provided.

This research study embraced and used a descriptive correlational research design as this was highly relevant to describing relationships of data from interested individuals study items over a given period and making relational inferences. As the study is primarily concerned with describing such things as perception, attitudes, beliefs, values and behavior, descriptive design was adequate for the study. This on the other hand brought about formation of assumptions about possible relationships and also describe whether the expression of certain factors is consistent with certain outcomes. The selected design was attractive because it led to an understanding of the relationship between the variants.

#### **3.3 Research Site**

The area of this research study was Nairobi's metropolitan areas in Kenya. The specific areas of focus included be the Westlands Area, Kabete Areas, and most Upper hill area where most refugee NGOs are located. Numerous refugee groups and refugee reporting offices were found in these areas which were resourceful to the data and information for the study. The refugees were accessed through these points or remotely through these specific areas where the NGOs were situated.

#### **3.4 Target Population**

Gravetter and Wallnau (2016) reported that population density as a collection of all people interested in the study, highly specific and obviously can vary in size from very large to very small depending on how the study describes one. Meeker, Hahn and Escobar

(2017) describe population as people who are referred to as certain members of a nation where desirable things are drawn.

In this research study, the population included all refugees of the 26 UNHCR listed refugee partner NGOs in Nairobi, Kenya. According to UNHCR report of 2019, the number of registered refugees in Nairobi, Kenya is about 78,912. The list of all the UNHCR refugee partner NGOs in Nairobi, Kenya is as shown below.

**Table 3.1: Target Population**

| <b>Name of Organization</b>                            |
|--------------------------------------------------------|
| Action Africa Help International                       |
| Danish Refugee Council                                 |
| Finn Church Aid                                        |
| Haki Centre Organization                               |
| International Rescue Committee                         |
| Kenya Red Cross Society                                |
| Lutheran World Federation – SWI                        |
| Peace Winds Japan                                      |
| Salesians of Don Bosco – Kenya                         |
| Africa Inland Church-Kenya                             |
| Fafi Integrated Development Association                |
| Fondation Terre Des Hommes                             |
| Hakii na Sheria Initiative                             |
| Jesuit Refugee Services                                |
| Legal Advice Centre (Kituo Cha Sheria) – Kenya         |
| National Council of Churches of Kenya                  |
| Refugee Consortium of Kenya                            |
| Waldort Kakuma Project and Windle International Kenya. |
| CARE International – Kenya                             |
| FilmAid International – USA                            |
| Francis Xavier Project                                 |
| Hebrew Immigrant Aid Society (HIAS)                    |
| Kenya Human Rights Commission                          |
| Lotus Kenya Action for Development Organization        |
| Norwegian Refugee Council                              |
| Relief Reconstruction and Development Organization     |
| <b>TOTAL:</b>                                          |

**Source:** UNHCR (2023).

### 3.5 Study Sample

According to Muhammad (2016), a sampling design is the process of selecting a sample to permit selection of an estimate of characteristics of a population. Therefore, it is a technique the researcher employs to ensure that a sample is properly representing the study population for the study.

### 3.5.1 Study Sample Size

Alvi (2016) coins sample size as the units in number of a given population that are selected for consideration in a sample. The refugees of the integration programs have the requisite information and experiences to give about the programs. The sample size for this research study included refugees who are under assistance in the various refugee NGOs within Nairobi, Kenya. The study considered purposive selection of the respondents which is appropriate for achieving the desirable size of sample. This study considered Yamane formula in computing the sample size from the population of 78,912. The computation formula is as follows: **The formula:  $n = N/(1+N(e)^2)$**

As per the Yamane formula the study targeted a total of 398 refugees as the size of sample by picking **at least 15** respondents from each of the refugee NGOs.

**Table 3.2 Study Sample Size**

| <b>Name of Organization</b>                            | <b>Number of Refugees</b> |
|--------------------------------------------------------|---------------------------|
| Action Africa Help International                       | 15                        |
| Danish Refugee Council                                 | 15                        |
| Finn Church Aid                                        | 15                        |
| Haki Centre Organization                               | 15                        |
| International Rescue Committee                         | 18                        |
| Kenya Red Cross Society                                | 15                        |
| Lutheran World Federation – SWI                        | 15                        |
| Peace Winds Japan                                      | 15                        |
| Salesians of Don Bosco – Kenya                         | 15                        |
| Africa Inland Church-Kenya                             | 15                        |
| Fafi Integrated Development Association                | 15                        |
| Fondation Terre Des Hommes                             | 15                        |
| Hakii na Sheria Initiative                             | 15                        |
| Jesuit Refugee Services                                | 15                        |
| Legal Advice Centre (Kituo Cha Sheria) – Kenya         | 15                        |
| National Council of Churches of Kenya                  | 15                        |
| Refugee Consortium of Kenya                            | 18                        |
| Waldort Kakuma Project and Windle International Kenya. | 15                        |
| CARE International – Kenya                             | 17                        |
| FilmAid International – USA                            | 15                        |
| Francis Xavier Project                                 | 15                        |
| Hebrew Immigrant Aid Society (HIAS)                    | 15                        |
| Kenya Human Rights Commission                          | 15                        |
| Lotus Kenya Action for Development Organization        | 15                        |
| Norwegian Refugee Council                              | 15                        |
| Relief Reconstruction and Development Organisation     | 15                        |
| <b>TOTAL:</b>                                          | <b>398</b>                |

**Source:** Author (2023).

### ***3.5.2 Sampling Procedure***

Devi (2017) describes the sampling process as the process by which the researcher decides on type of sample for use within the study. Mwangi (2017) describes a potential sample as a model where each member of the given population derives an equal opportunity of being nominated and used when sample representation is essential to enable overall performance. Possibly the sample in contrast may refer to the sampling process where it uses random methods to draw a sample which is why it does not give all participants or units to individuals equal opportunities for input including mainly using judgment to create samples (Showkat and Parveen, 2017).

Purposive sampling is where a researcher selects a sub-group, which can be judged to be representative of the population (Kothari, 2015). This study adopted a purposive sampling technique so as to consider refugees as respondents in refugee NGOs within Nairobi, Kenya. Purposive sampling is ideal for this study as there may be uncertainty in the number of refugees in each of the refugee organizations.

## **3.6 Data Collection**

Data collection refers to the desirable techniques and selected tools to be used in generating the data required for research. Each method is suitable for a specific type of research, that is, the questionnaire developed, the research objectives, issues like accessibility to respondents and participants, constraints of time, and researchers' skillset in data collection (Leavy, 2017).

### ***3.6.1 Data Collection Instruments***

Data was collected from the respondents directly using structured questionnaire which was the data collection tool. The questionnaire was the most suitable for use in this study because it was inexpensive but very effective in collecting data. The questionnaire was also easy to use by the respondents and the data captured was highly structured for precise analysis. The questionnaire was compiled with a 5-point Likert scale based on research questions. The questionnaire used is attached (See appendix one). The questionnaire was presented in four parts that comprised of background information section, the education integration section, the healthcare services section, the government policies section, and the housing integration section. Questionnaires were administered face-to-face so as to help the respondents to get clarity on questions and to ensure minimal to zero missing responses. Insights from the staff working at the refugee organizations provided insights which were essential for inclusion in this research and as part of validity.

### **3.6.2 Pilot Testing of Research Instruments**

Pilot testing was done to ascertain likely gaps and errors that may arise during the actual data collection. The pilot study comprised of 10% of the respondents, which was 39 respondents to enable easy trace of inconsistencies. Only three refugee NGOs were selected purposively for the pilot testing.

### **3.6.3 Instrument Reliability**

According to Kothari (2015), test instrument reliability may be looked at as the degree to which a test instrument yields similar outcomes when given to the same group at different times. This is most frequently adopted to quantify internal consistency (recognized as "reliability") is Cronbach's alpha. Frequently, the test is employed when finding out scales that are formed by several Likert questions in a given survey or questionnaire are highly dependable for the study.

Reliability test was conducted to determine the internal consistency of the created data collection tool. This was established using the Cronbach Alpha. A value of 0.7 was the consideration for the tool's dependability for this study. All values were above 0.7 and indicated the tools adequacy and reliability. The test done showed the results as below in table 3.3 below.

**Table 3.3: Reliability Statistics**

|                                                                 |                                                   |            |
|-----------------------------------------------------------------|---------------------------------------------------|------------|
| Cronbach's Alpha – Education in Integration Programs            | Cronbach's Alpha basing on the Standardized Items | N of Items |
| .894                                                            | .894                                              | 9          |
| Cronbach's Alpha – Health Care Services in Integration Programs | Cronbach's Alpha basing on the Standardized Items | N of Items |
| .904                                                            | .904                                              | 9          |
| Cronbach's Alpha – Government Policies in Integration Programs  | Cronbach's Alpha basing on the Standardized Items | N of Items |
| .896                                                            | .894                                              | 9          |
| Cronbach's Alpha – Housing in Integration Programs              | Cronbach's Alpha basing on the Standardized Items | N of Items |
| .896                                                            | .897                                              | 9          |

### 3.6.4 Instrument Validity

The mark of accuracy in logistical and empirical measures is known as validity. It assesses how well a measuring tool captures actual differences between the things being measured (Kothari, 2015). Content validity was employed for the study as it a measure that considers the entire study dimension. Content validity was ascertained through ensuring items sufficiently cover the determined study objectives. This was also ascertained by placing the collection of tools or instruments to experts for critical judgment and peers to do reviews. This study measured the construct validity to ensure that the instrument is measuring the construct, performance, which it is intended to measure and not the other variables. Multi-collinearity was checked and the outcomes derived existence of high correlation between various predictor variables. The table 3.4 below shows that the correlations between the variables are not close to negative or positive one. This show the test for validity regarding multicollinearity is ok.

**Table 3.4: Collinearity Tests**

| Correlations                                                 |             |             |           |            |         |
|--------------------------------------------------------------|-------------|-------------|-----------|------------|---------|
|                                                              |             |             | Education | Healthcare | Housing |
| Education                                                    | in          | Pearson     | 1         | .436**     | .412**  |
| Integration Programs                                         |             | Correlation |           |            |         |
| Health Care Services                                         |             | Pearson     | .436**    | 1          | .556**  |
| in                                                           | Integration | Correlation |           |            |         |
| Programs                                                     |             |             |           |            |         |
| Government Policies                                          |             | Pearson     | .412**    | .556**     | 1       |
| in                                                           | Integration | Correlation |           |            |         |
| Programs                                                     |             |             |           |            |         |
| Housing in Integration                                       |             | Pearson     | .412**    | .556**     | 1       |
| Programs                                                     |             | Correlation |           |            |         |
| **. Correlation is significant at the 0.01 level (2-tailed). |             |             |           |            |         |

### 3.6.5 Data Collection Procedure

Primary data, comprising both qualitative and quantitative information, was used in this study. The sample respondents were issued the questionnaires to complete to collect the primary data. The questionnaire used an open-ended question format to maximize the quality of data and for respondents to share their personal writing experiences with ease.

The Institute of Research (IOR) at Africa Nazarene University (ANU) and the National Commission for Science, Technology, and Innovation (NACOSTI) provided letters of authorization for the study to be conducted. The researcher's identity and the study's objectives were properly disclosed to correspondence.

The questionnaires were tested during pilot study, that is a 10% of the sample, to assess whether the questions were easily understood or were unambiguous. The actual study then followed with respondents providing information after being briefed of confidentiality of the data they will give and their voluntary participation in the study. Respondents had the right to withdraw from responding to the study questions. Once there was acceptance, the questionnaire was shared to the refugees through their organizations, filled, and returned.

### **3.7 Data Analysis**

Data analysis is a process of methodically arranging and carefully examining replies that are acquired from respondents to draw meaningful conclusions (Matula, Kyalo, Mulwa, Gichuhi, 2018). The first step included coding the data collected from the questionnaires and generating a code sheet for reference. Data was then captured in the SPSS analysis tool and thereafter utilizing descriptive statistics techniques that comprised of means and standard deviation among other reports were extracted to present the information in summary for interpretation.

Inferential statistics that included correlation analysis, regression analysis among other techniques were applied to show the relationship of the study variables as well as aid in providing a generalized conclusion. The regression model determined was as follows  $Y = B_0 + B_1X_1 + B_2X_2 + B_3X_3 + B_4X_4 + e$  where;  $e$  is the error term,  $B_0$  the constant,  $B_nX_n$  the variables and their coefficients. The presentation of findings was done in graphs and in tables as represented in the next chapter.

### **3.8 Legal and Ethical Considerations**

The respondents' private information has been kept confidential and of the highest quality, and appropriate steps have been taken to preserve its secrecy. All information sources have been duly acknowledged accordingly. The permits from NACOSTI were duly acquired and permissions from the UNHCR and the Department of Refugees under the Ministry of Interior and National Administration Kenya were duly requested.

## CHAPTER FOUR

### DATA ANALYSIS AND FINDINGS

#### 4.1 Introduction

This following chapter reviews the findings and results achieved from the data collected during the field activities. The data was analyzed using frequencies, means, correlations, and regression, and presented using tables and graphs for clarity in inferencing. The findings have been presented in line with the objectives under study.

#### 4.2 General Information

##### 4.2.1 Response Rate

During the data collection, a total of 398 questionnaires were administered to the respondents. Out of the 398 expected respondents only 300 were successfully completed which was 75.4% success rate and the rest 98 which accounted for 24.6% that were not filled due to personal reasons. The successful responses at 75.4% were enough for analysis. This is as shown table 4.1 below.

**Table 4.1: Response Rate**

| Responses                   | Number | Percentage |
|-----------------------------|--------|------------|
| Successful Questionnaires   | 300    | 75.4%      |
| Unsuccessful Questionnaires | 98     | 24.6%      |
| Total                       | 398    | 100%       |

##### 4.2.2 Gender Distribution

The distribution of the refugees based on gender was 73.67% Males and 26.33% Females. This shows that a majority of displaced refugees within the country are males. This is as shown table 4.2 below.

**Table 4.2: Gender Distribution**

| Gender | Number | Percentage |
|--------|--------|------------|
| Male   | 221    | 73.67%     |
| Female | 79     | 26.33%     |
|        | 300    | 100.00%    |

##### 4.2.3 Age Groups

The response on the age groups of the refugees showed that 7.00% were above the age pf 37, 19.67% between ages 33 and 37, 27.67% for ages between 28 and 32, 25.00% for ages between 23 and 27, 6.67% for ages between 18 and 22, and 19.67% for those

below age 18. This shows that a majority of displaced refugees within the country are falling between the ages of 23 and 32 which comprises of a very youthful refugee populace. This is as shown table 4.3 below.

**Table 4.3: Age Groups**

| Age Groups | Number | Percentage |
|------------|--------|------------|
| Above 37   | 21     | 7.00%      |
| 33-37      | 42     | 14.00%     |
| 28-32      | 83     | 27.67%     |
| 23-27      | 75     | 25.00%     |
| 18-22      | 20     | 6.67%      |
| Below 18   | 59     | 19.67%     |
|            | 300    | 100.00%    |

#### ***4.2.4 Educational Levels***

The distribution of the refugees based on their education showed that a majority had pursued degrees and diplomas at 28.33% and 32.33% respectively. Certificate holders accounted for 14.33%, those who had attended a high school 12.33%, and those who had attended primary schools accounted for 12.67%. This shows that refugees are able to access education within the country and a majority have accessed tertiary levels of education. This is as shown table 4.4 below.

**Table 4.4: Educational Levels**

| Educational Levels | Number | Percentage |
|--------------------|--------|------------|
| Certificate        | 43     | 14.33%     |
| Degree             | 85     | 28.33%     |
| Diploma            | 97     | 32.33%     |
| Primary School     | 38     | 12.67%     |
| High School        | 37     | 12.33%     |
|                    | 300    | 100.00%    |

#### ***4.2.5 Number of Years in the Country***

The distribution of the refugees based on the years they had stayed in the country showed that 34.67% had stayed for more than ten years in the country, 28.00% had stayed for about 7 to 10 years, 13.00% stayed between three to six years, and 24.33% had stayed between one to two years. It is seen that a majority of refugees have stayed for at least

a decade with the country. The numbers appear to have gone down with a low number accounted for those stayed for lesser time. This is as shown table 4.5 below.

**Table 4.5: Number of Years in the Country**

| Number of Years in the Country | Number | Percentage |
|--------------------------------|--------|------------|
| 10 and Above                   | 104    | 34.67%     |
| 7-10                           | 84     | 28.00%     |
| 3-6                            | 39     | 13.00%     |
| 1-2                            | 73     | 24.33%     |
|                                | 300    | 100.00%    |

#### ***4.2.6 Country of Origin***

The data shows that a majority of the refugees in Kenya originate from Congo accounting for 54.00% of the refugees. The other countries of origin represented Somalia accounting for 13.67%, South Sudan 13.67%, Ethiopia 12.00%, and Burundi 6.67%. There shows that a majority of refugees within the country are from Congo which show high levels of displacement compared to other countries. This is as shown table 4.6 below.

**Table 4.6: Country of Origin**

| Country of Origin | Number | Percentage |
|-------------------|--------|------------|
| Somalia           | 41     | 13.67%     |
| South Sudan       | 41     | 13.67%     |
| Ethiopia          | 36     | 12.00%     |
| Congo             | 162    | 54.00%     |
| Burundi           | 20     | 6.67%      |
|                   | 300    | 100.00%    |

### **4.3 Presentation of Research Analysis and Findings**

#### ***4.3.1 Education on Socio-economic Adaptation of Refugees***

The study sought to determine how education in integration programs influences the socio-economic adaptation of refugees. Education was evaluated through several constructs. The constructs that were assessed included availability of adequate funding for educational purposes and acquisition of skills through the educational programs. This was by using questions of a Likert nature with the scale ranging from 1-5, where Strongly Disagree=1, Disagree=2, Neutral=3, Agree=4, Strongly Agree=5.

Data was calculated on mean score and interpreted as, 1 – 1.4 = strongly disagree, 1.5 – 2.4 = disagree, 2.5 – 3.4 = neutral, 3.5 – 4.4 = agree and 4.4 – 5.0 = strongly agree. According to results, the multiple constructs showed mean that were consistent. The construct question on “I got adequate funding from the integration programs for educational purposes.” had the highest means of 3.96 with standard deviation of 0.984. This indicates that most respondents agree that they receive adequate funding, but the relatively high SD suggests responses varied, meaning not all refugees experience the same level of support since some might strongly agree, while others only agree or remain neutral.

Notably, another construct “I learnt skills through educational initiatives under programs integration exists in our organization.” had also the highest mean of 3.35 and a standard deviation of 1.258. The lower mean compared to funding shows less overall agreement, and the higher SD implied dispersion; some respondents strongly agree, some are neutral or disagree. This variation could be due to differences in access or engagement with educational initiatives. The variation reflects differing individual experiences with educational funding and skills acquisition, likely influenced by the level of support provided by organizations, individual engagement, or availability of resources. All constructs in questions had means above 3.0 which was showed high agreeability of each question posed to the respondents. The detailed results are as shown in table 4.7 below.

**Table 4.7: Education**

|                                                                                                           | Mean | Std.<br>Deviation |
|-----------------------------------------------------------------------------------------------------------|------|-------------------|
| 6. I got adequate funding from the integration programs for educational purposes.                         | 3.96 | .984              |
| 7. I learnt skills through educational initiatives under programs integration exists in our organization. | 3.35 | 1.258             |

#### **Correlation Analysis: Education and Socio-economic adaptation of refugees**

Correlation analysis showed Education had a strong positive significant relationship with Socio-economic adaptation of refugees, where  $r = .856$  and  $p = .000$ . The correlation coefficient ( $r = .856$ ) which is very close to 1, indicates a strong positive

relationship. This suggests that the more positive the perception of educational support, the better the socio-economic adaptation. The high correlation indicates that education plays a significant role in adapting economically likely because education provides skills and knowledge that aid refugees in integrating effectively.

The results are illustrated as in the Table 4.8 below.

**Table 4.8: Correlation on Education**

|                                       |                     | Education | Socio-economic adaptation of refugees |
|---------------------------------------|---------------------|-----------|---------------------------------------|
| Education.                            | Pearson Correlation | 1         | .856                                  |
|                                       | Sig. (2-tailed)     |           | .000                                  |
| Socio-economic adaptation of refugees | Pearson Correlation | .856      | 1                                     |
|                                       | Sig. (2-tailed)     | .000      |                                       |

### **Regression Analysis: Education and Socio-economic adaptation of refugees**

The regression model showed that,  $r^2 = .733$ , this revealed that education predicted 73.3% of socio-economic adaptation of refugees. However, 26.7% of socio-economic adaptation of refugees is accounted for by other factors outside the model.

Most adaptation outcomes as captured in the data are associated with education, because this variable captures the influence of access to training, skills, and resources, which are essential for adaptation. The standard error of 0.634 signifies the average amount the actual data points deviate from the predicted values based on education support. This is shown and presented in table 4.9 below.

**Table 4.9: Model Summary**

| Model | R                 | R Square | Adjusted R Square | Std. Error of the Estimate |
|-------|-------------------|----------|-------------------|----------------------------|
| 1     | .856 <sup>a</sup> | .733     | .731              | .634                       |

a. Predictors: (Constant), Education.

According to the ANOVA results, education confidently predicted socio-economic adaptation of refugees's success significantly since the p value was .000 which is less than 0.05. The significant F-value of 269.58 ( $p = .000$ ) indicates that the regression model is statistically significant overall. Since the model is highly significant, it confirms that education, as a predictor, reliably influences socio-economic adaptation, and the high F-value reflects a strong relationship in the data. Table 4.10 below illustrates the results.

**Table 4.10: ANOVA**

| Model |            | Sum of Squares | df | Mean Square | F       | Sig.              |
|-------|------------|----------------|----|-------------|---------|-------------------|
| 1     | Regression | 108.396        | 1  | 108.396     | 269.658 | .000 <sup>b</sup> |
|       | Residual   | 39.394         | 98 | .402        |         |                   |
|       | Total      | 147.790        | 99 |             |         |                   |

a. Dependent Variable: Socio-economic adaptation of refugees.

b. Predictors: (Constant), Education.

According to the regression coefficients Education programs,  $B = .832$  which shows that with a unit increase in Education, Socio-economic adaptation of refugees increased by 0.832 units. Education was significant in predicting Socio-economic adaptation of refugees on its own,  $t = 1.667$ ,  $p > .099$ . The  $B = .832$  coefficient suggests that each increase in perceived educational support correlates with a 0.832 increase in socio-economic adaptation. The standard error of 0.051 shows high precision, meaning the estimate is stable. The positive coefficient aligns with the theory that education facilitates adaptation, more support leads to better skills and resource access, which improves socio-economic outcomes.

The data indicate that perceptions of educational support are strongly linked with adaptation outcomes because education provides essential knowledge and skills. Variability in SDs demonstrates individual differences in experiences with support, which influence how strongly education impacts each person's adaptation process.

The statistical significance and high explained variance reinforce the importance of educational programs in refugee integration, as directly evidenced by the data. These results are shown in Table 4.11.

This variable regression model is represented as below:

$$Y = B_0 + B_1X_1 + e$$

$$Y = 0.604 + 0.832 X_1 + 0.634$$

Y= Socio-economic adaptation of refugees;  $X_1$  = Education;

**Table 4.11: Coefficients**

| Model      | Unstandardized Coefficients |            | Standardized Coefficients | t      | Sig. |
|------------|-----------------------------|------------|---------------------------|--------|------|
|            | B                           | Std. Error | Beta                      |        |      |
| (Constant) | 0.604                       | .181       |                           | 3.336  | .001 |
| Education  | .832                        | .051       | .856                      | 16.421 | .000 |

a. Dependent Variable: Socio-economic adaptation of refugees.

#### 4.3.2 Healthcare on Socio-economic Adaptation of Refugees

The study sought to determine how healthcare influences the Socio-economic adaptation of refugees. Healthcare was evaluated through several constructs. The constructs were assessed using questions of a Likert scale ranging from 1-5, where Strongly Disagree=1, Disagree=2, Neutral=3, Agree=4, Strongly Agree=5. Data was calculated on mean score and interpreted as, 1 – 1.4 = strongly disagree, 1.5 – 2.4 = disagree, 2.5 – 3.4 = neutral, 3.5 – 4.4 = agree and 4.4 – 5.0 = strongly agree.

According to results, the construct questions on “I am able to access quality healthcare facilities through the programs.” and “The healthcare provided under program is affordable for me to use.” had means of 3.52 and 3.96 respectively, and SD of 1.314 and 0.875 respectively. The mean values above 3.0 indicate that respondents generally agree that healthcare access and affordability are positive factors. The higher SD of 1.314 for the quality of healthcare suggests greater variability in respondents’ perceptions some may feel they have good access and affordable healthcare, while others may not.

Conversely, the lower SD of 0.875 for healthcare affordability indicates responses are more consistent, with most respondents agreeing that healthcare is affordable. All constructs in questions had means above 3.0 which showed high agreeability of each question posed to the respondents. The detailed results are as shown in table 4.12 below.

**Table 4.12: Healthcare Programs on Socio-economic adaptation of refugees**

|                                                                            | Mean | Std.<br>Deviation |
|----------------------------------------------------------------------------|------|-------------------|
| 8. I am able to access quality healthcare facilities through the programs. | 3.52 | 1.314             |
| 9. The healthcare provided under program is affordable for me to use.      | 3.96 | .875              |

**Correlation Analysis: Healthcare and Socio-economic aAdaptation of Refugees**

Correlation analysis showed Healthcare had a moderate positive significant relationship with Socio-economic adaptation of refugees, where  $r = .476$  and  $p = .000$ . This suggests that improvements in healthcare access and affordability are associated with better adaptation outcomes. The data shows that as refugees perceive healthcare services as more accessible and affordable, their ability to adapt socio-economically also tends to improve, although the correlation is only moderate, indicating healthcare is one of several factors influencing adaptation. The results are illustrated as in Table 4.13 below.

**Table 4.13: Correlation on Healthcare Programs**

|                                          |                     | Socio-<br>economic<br>adaptation<br>of<br>refugees | Healthcare<br>Programs<br>of |
|------------------------------------------|---------------------|----------------------------------------------------|------------------------------|
| Socio-economic<br>adaptation of refugees | Pearson Correlation | 1                                                  | .476**                       |
|                                          | Sig. (2-tailed)     |                                                    | .000                         |
|                                          | N                   | 100                                                | 100                          |
| Healthcare                               | Pearson Correlation | .476**                                             | 1                            |
|                                          | Sig. (2-tailed)     | .000                                               |                              |
|                                          | N                   | 100                                                | 100                          |

### Regression Analysis: Healthcare and Socio-economic adaptation of refugees

The regression model showed that,  $r^2 = .227$ , this revealed that Healthcare predicted 22.7% of Socio-economic adaptation of refugees. However, 77.3% of socio-economic adaptation of refugees is accounted for by other factors outside the model. This highlights healthcare's partial but meaningful role in the adaptation process. Table 4.14 shows these results.

**Table 4.14: Model Summary**

| Model                                  | R                 | R Square | Adjusted R Square | Std. Error of the Estimate |
|----------------------------------------|-------------------|----------|-------------------|----------------------------|
| 1                                      | .476 <sup>a</sup> | .227     | .219              | 1.080                      |
| a. Predictors: (Constant), Healthcare. |                   |          |                   |                            |

According to the ANOVA results, Healthcare Programs predicted socio-economic adaptation of refugees success significantly since the p value was .000 which was less than 0.05. Therefore, the F-value of 28.766 with  $p = .000$  indicates the model is statistically significant and this confirms that healthcare programs are a significant predictor of socio-economic adaptation, meaning the relationship observed in the data is unlikely due to chance. Table 4.15 below illustrates the results.

**Table 4.15: ANOVA**

| Model                                                         |            | Sum of Squares | df | Mean Square | F      | Sig.              |
|---------------------------------------------------------------|------------|----------------|----|-------------|--------|-------------------|
| 1                                                             | Regression | 33.537         | 1  | 33.537      | 28.766 | .000 <sup>b</sup> |
|                                                               | Residual   | 114.253        | 98 | 1.166       |        |                   |
|                                                               | Total      | 147.790        | 99 |             |        |                   |
| a. Dependent Variable: Socio-economic adaptation of refugees. |            |                |    |             |        |                   |
| b. Predictors: (Constant), Healthcare.                        |            |                |    |             |        |                   |

According to the regression coefficients Healthcare Programs,  $B = 0.443$  which shows that with a unit increase in Healthcare, Socio-economic adaptation of refugees increased by 0.443 units. Healthcare was significant in predicting Socio-economic adaptation of refugees on its own,  $t = 5.905$ ,  $p < .000$ . This positive and significant coefficient implies a direct relationship between perceived healthcare quality/access and socio-economic adaptation. As refugees perceive healthcare services as more

accessible and affordable, they are better able to manage health-related challenges, which in turn enhances their capacity to adapt socio-economically. The high t-value and significant p-value indicate that this predictor healthcare has a strong and reliable effect on the outcome variable that is socio-economic adaptation. These results are shown in Table 4.16 below.

This variable regression model is represented as below:

$$Y = B_0 + B_1X_2 + e$$

$$Y = 1.831 + 0.443 X_2 + 1.080$$

Y= Socio-economic adaptation of refugees;  $X_2$  = Healthcare.

**Table 4.16: Coefficients**

| Model |            | Unstandardized Coefficients |            | Standardized Coefficients | t     | Sig. |
|-------|------------|-----------------------------|------------|---------------------------|-------|------|
|       |            | B                           | Std. Error | Beta                      |       |      |
| 1     | (Constant) | 1.831                       | .310       |                           | 5.905 | .000 |
|       | Healthcare | .443                        | .083       | .476                      | 5.363 | .000 |

a. Dependent Variable: Socio-economic adaptation of refugees.

#### ***4.3.3 Government Policies on Socio-economic Adaptation of Refugees***

The study sought to determine how government policies in integration programs influence the socio-economic adaptation of refugees. Government policies was evaluated through a number of constructs. The constructs that were assessed using questions of a Likert nature with the scale ranging from 1-5, where Strongly Disagree=1, Disagree=2, Neutral=3, Agree=4, Strongly Agree=5.

Data was calculated on mean score and interpreted as, 1 – 1.4 = strongly disagree, 1.5 – 2.4 = disagree, 2.5 – 3.4 = neutral, 3.5 – 4.4 = agree and 4.4 – 5.0 = strongly agree. According to results, the multiple constructs showed mean that were consistent. The construct question on “I am able to get government resource support as a refugee through the programs.” had means of 1.97 with standard deviation of 0.484. The construct “It is easy to as understand and follow procedures from the government as a refugee.” had a mean of 1.56 and a standard deviation of 0.658. All constructs in question had means below 3.0 which was showed low agreeability of each question posed to the respondents.

The detailed results are as shown in table 4.17 below.

**Table 4.17: Government policies**

|                                                                                         | Mean | Std.<br>Deviation |
|-----------------------------------------------------------------------------------------|------|-------------------|
| 10. I am able to get government resource support as a refugee through the programs.     | 1.97 | .484              |
| 11. It is easy to as understand and follow procedures from the government as a refugee. | 1.56 | .658              |

### **Correlation Analysis: Government policies and Socio-economic adaptation of refugees**

Correlation analysis showed Government policies had a weak positive significant relationship with Socio-economic adaptation of refugees, where  $r = .238$  and  $p = .000$ . This suggests that perceptions of more favorable government policies are associated with better socio-economic adaptation among refugees, although other factors play a more prominent role. Perception of government policies among refugees shows generally low support, with mean scores below 2, indicating dissatisfaction with resource support and procedural clarity. Despite the weak correlation ( $r=0.238$ ), the significant p-value suggests that improvements in government policies could positively influence socio-economic adaptation. The results are illustrated as in the Table 4.18 below.

**Table 4.18: Correlation on Government policies**

|                                          |                 | Government<br>policies | Socio-<br>economic<br>adaptation of<br>refugees |
|------------------------------------------|-----------------|------------------------|-------------------------------------------------|
| Government policies                      | Pearson         | 1                      | .238                                            |
|                                          | Correlation     |                        |                                                 |
|                                          | Sig. (2-tailed) |                        | .000                                            |
| Socio-economic<br>adaptation of refugees | Pearson         | .238                   | 1                                               |
|                                          | Correlation     |                        |                                                 |
|                                          | Sig. (2-tailed) | .000                   |                                                 |

## Regression Analysis: Government policies and Socio-economic adaptation of refugees

The regression model showed that,  $r^2 = .1822$ , this revealed that government policies predicted 18.2% of socio-economic adaptation of refugees. The model explains only 18.2% of the variance in adaptation, emphasizing that while government policies are relevant, other factors play a more substantial role. Improving policy implementation could serve as a lever for better adaptation outcomes. However, 81.8% of socio-economic adaptation of refugees is accounted for by other factors outside the model. This is shown and presented in table 4.19 below.

**Table 4.19: Model Summary**

| Model                                           | R                 | R Square | Adjusted R Square | Std. Error of the Estimate |
|-------------------------------------------------|-------------------|----------|-------------------|----------------------------|
| 1                                               | .238 <sup>a</sup> | .733     | .731              | .634                       |
| a. Predictors: (Constant), Government policies. |                   |          |                   |                            |

According to the ANOVA results, government policies predicted socio-economic adaptation of refugees' success significantly since the p value was .000 which is less than 0.05. The significant F-value indicates that government policies, although weak predictors independently, still have a meaningful role in shaping socio-economic adaptation when combined with other factors. Table 4.20 below illustrates the results.

**Table 4.20: ANOVA**

| Model                                                         |            | Sum of Squares | df | Mean Square | F       | Sig.              |
|---------------------------------------------------------------|------------|----------------|----|-------------|---------|-------------------|
| 1                                                             | Regression | 108.396        | 1  | 108.396     | 269.658 | .000 <sup>b</sup> |
|                                                               | Residual   | 39.394         | 98 | .402        |         |                   |
|                                                               | Total      | 147.790        | 99 |             |         |                   |
| a. Dependent Variable: Socio-economic adaptation of refugees. |            |                |    |             |         |                   |
| b. Predictors: (Constant), Government policies.               |            |                |    |             |         |                   |

According to the regression coefficients Government policies,  $B = .416$  which shows that with a unit increase in Government policies, Socio-economic adaptation of refugees increased by 0.416 units. Government policies was not significant in predicting Socio-economic adaptation of refugees on its own,  $t = 0.667$ ,  $p > .099$ . The

regression coefficient suggests that refining government resource support and legal frameworks may enhance refugees' adaptation, but a multifaceted approach is necessary for substantial improvements.

These results are shown in Table 4.21.

This variable regression model is represented as below:

$$Y = B_0 + B_1X_1 + e$$

$$Y = 0.604 + 0.416 X_1 + 0.634$$

Y= Socio-economic adaptation of refugees; X<sub>1</sub> = Government policies;

**Table 4.21: Coefficients**

| Model               | Unstandardized Coefficients |            | Standardized Coefficients | t      | Sig. |
|---------------------|-----------------------------|------------|---------------------------|--------|------|
|                     | B                           | Std. Error | Beta                      |        |      |
| (Constant)          | 0.604                       | .181       |                           | 3.336  | .001 |
| Government policies | .416                        | .051       | .856                      | 16.421 | .000 |

a. Dependent Variable: Socio-economic adaptation of refugees.

#### ***4.3.4 Housing on Socio-economic Adaptation of Refugees***

The study sought to determine how Housing influences Socio-economic adaptation of refugees. Housing was evaluated through a number of constructs using questions of a Likert scale ranging from 1-5, where Strongly Disagree=1, Disagree=2, Neutral=3, Agree=4, Strongly Agree=5. Data was calculated on mean score and interpreted as, 1 – 1.4 = strongly disagree, 1.5 – 2.4 = disagree, 2.5 – 3.4 = neutral, 3.5 – 4.4 = agree and 4.4 – 5.0 = strongly agree. According to results, the construct questions on “I am able to get affordable and safe housing facilities through the program.” and “I am able to get enough resources for use in my house under the program.” had means of 3.28 and 4.08, and SD of 1.334 and 0.849 respectively. Housing demonstrates an exceptionally strong positive relationship with adaptation, with a mean agreement above 3, indicating respondents' high perception of the importance of affordable, safe housing.

The analysis shows that access to stable housing explains 61.1% of the variation in adaptation, positioning housing as a central element for successful refugee integration. All constructs in questions had means above 3.0 which was showed high rate of agreeability of the respondents. The results are presented and shown in table 4.22 below.

**Table 4.22: Housing on Socio-economic adaptation of refugees**

|                                                                                  | Mean | Std. Dev. |
|----------------------------------------------------------------------------------|------|-----------|
| 12. I am able to get affordable and safe housing facilities through the program. | 4.08 | .849      |
| 13. I am able to get enough resources for use in my house under the program.     | 3.28 | 1.334     |

**Correlation Analysis: Housing and Socio-economic adaptation of refugees**

Correlation analysis showed Housing had a strong positive significant relationship with Socio-economic adaptation of refugees, where  $r = .781$  and  $p = .000$ . The high correlation coefficient confirms that housing access and quality are directly linked to better socio-economic adaptation, reaffirming the need for policies focused on affordable, secure housing. The results are illustrated as in Table 4.23 below.

**Table 4.23: Correlations on Housing**

|                                    |                     | Refugees Socio-economic adaptation | Housing |
|------------------------------------|---------------------|------------------------------------|---------|
| Refugees Socio-economic adaptation | Pearson Correlation | 1                                  | .781    |
|                                    | Sig. (2-tailed)     |                                    | .000    |
| Housing                            | Pearson Correlation | .781                               | 1       |
|                                    | Sig. (2-tailed)     | .000                               |         |

**Regression Analysis: Housing and Socio-economic adaptation of refugees**

The regression model showed that,  $r$  square = .611, this revealed that Housing predicted 61.1% of Socio-economic adaptation of refugees. However, 38.9% of socio-economic adaptation of refugees is by other factors. The substantial explanatory power of the model underscores housing as a pivotal factor. Enhancing housing programs can have a transformative impact on refugees' overall adaptation processes. Table 4.24 below shows these results.

**Table 4.24: Model Summary**

| Model | R                 | R Square | Adjusted R Square | Std. Error Estimate |
|-------|-------------------|----------|-------------------|---------------------|
| 1     | .781 <sup>a</sup> | .611     | .607              | .766                |

a. Predictors: (Constant), Housing.

According to the ANOVA results, Housing predicted socio-economic adaptation of refugees' success significantly since the p value was .000 which was less than 0.05. Table 4.25 below illustrates the results.

**Table 4.25: ANOVA**

| Model |            | Sum of Squares | df | Mean Square | F       | Sig.              |
|-------|------------|----------------|----|-------------|---------|-------------------|
| 1     | Regression | 90.237         | 1  | 90.237      | 153.654 | .000 <sup>b</sup> |
|       | Residual   | 57.553         | 98 | .587        |         |                   |
|       | Total      | 147.790        | 99 |             |         |                   |

a. Dependent Variable: Socio-economic adaptation of refugees.

b. Predictors: (Constant), Housing.

The regression coefficients shows that a unit increase in Housing, Socio-economic adaptation of refugees increased by 0.716 units. Housing was significant in predicting Socio-economic adaptation of refugees on its own;  $p < .000$ . The significant results from ANOVA demonstrate that housing interventions significantly predict socio-economic adaptation, supporting targeted efforts in this domain. The robust coefficient emphasizes that improvements in housing conditions such as affordability and safety are directly associated with better socio-economic outcomes for refugees, making housing a priority in integration strategies. The data is represented in table 4.26 below. This variable regression model is represented as below:

$$Y = B_0 + B_1X_3 + e$$

$$Y = 1.042 + 0.716 X_3 + 0.766$$

Y = Socio-economic adaptation of refugees;  $X_3$  = Housing;

**Table 4.26: Coefficients**

| Model |            | Unstandardized Coefficients | Standardized Coefficients | t     | Sig. |
|-------|------------|-----------------------------|---------------------------|-------|------|
|       |            | B                           | Std. Error                | Beta  |      |
| 1     | (Constant) | 1.042                       | .204                      | 5.103 | .000 |
|       | Housing    | .716                        | .058                      | .781  | .000 |

a. Dependent Variable: Socio-economic adaptation of refugees.

## **CHAPTER FIVE**

### **MAJOR FINDINGS, DISCUSSIONS, CONCLUSIONS AND RECOMMENDATIONS**

#### **5.1 Introduction**

This chapter discusses the findings presented in chapter four and the conclusion and recommendations drawn from the findings. The chapter is outlined according to the research objectives and thereafter the chapter presents the summary of the study.

#### **5.2 Major Findings**

The general objective of this study was to establish how integration programs influence socio-economic adaptation of refugees. It was guided by four research objectives: identifying the impact of education through integration programs on refugees' socioeconomic adaptation in Nairobi, Kenya; assessing the impact of health on refugees' socioeconomic adaptation in Nairobi, Kenya; identifying the impact of government policies on integration programs on refugees' socioeconomic adaptation in Nairobi, Kenya; and evaluating the impact of housing on integration programs on refugees' socioeconomic adaptation in Nairobi, Kenya.

The study adopted a correlational research design with a sample size of 306 refugees in organisations within Nairobi Kenya. A questionnaire was used to capture the data where 300 responses were achieved successfully which was about 98.04%. The data collected was analyzed through descriptive and inferential statistics that included, means, correlation and regression analysis. The SPSS software was used to carry out the analysis and produce relevant graphical outputs like charts and tables. The first objective showed that refugees agreed at a mean of 3.35 and a standard deviation of 1.258 on positive influence of education in integration. The correlation analysis education and socio-economic adaptation of refugees showed a strong positive significant relationship at  $r=.856$ ,  $p<.000$ . The regression analysis showed that education programs predicted 73.3% of socio-economic adaptation of refugees.

The second objective showed positive responses on healthcare under the integrated program at a mean of 3.52 with standard deviation of 1.314. Correlation analysis between the healthcare and socio-economic adaptation of refugees showed moderately strong positive relationships at  $r=.476$ ,  $p<.000$ . In regression analysis, healthcare accounted for 22.7% of socio-economic adaptation of refugees. The third objective showed that refugees agreed at a mean of 3.35 and a standard deviation of 1.258 on positive influence of government policies in refugee integration. The correlation

analysis education and socio-economic adaptation of refugees showed a strong positive significant relationship at  $r=.238$ ,  $p<.000$ . The regression analysis showed that government policies predicted 18.22% of socio-economic adaptation of refugees.

The fourth objective on housing showed a positive response integration programs had on adaptation by refugees at mean of 3.96 and a standard deviation of 0.77. The correlation analysis between housing and socio-economic adaptation of refugees showed a significant strong positive relationship at  $r=.781$ ,  $p<.000$ . Regression analysis showed housing accounted for 61.1% of socio-economic adaptation of refugees.

### **5.3 Discussions**

#### ***5.3.1 Education on Socio-economic Adaptation of Refugees***

On review of education, the constructs established presented positive orientations towards the success of socio-economic adaptation of refugees. Looking at the results on the influence of education on socio-economic adaptation of refugees, with regards to level of education, the respondents agreed that they benefited greatly from the education programs within the integration programs. The training skills acquired by the respondent was also significant to their adaptation to the society. The critical underlying factor here is therefore ensuring that there exist learners or trainers who have had exposures in the current environment so that they can replicate the same exposures to the refugees. Training also ensure that existing trainers and tutors are able to understand and interact properly with the refugees. Looking at the correlation analysis for the general education variable, there is a strong relationship with socio-economic adaptation of refugees and the direction shows positivity in the relations of the two, where the increase in levels of skills result in the increase of the success in socio-economic adaptation of refugees.

The study clearly establishes that education plays a crucial role in facilitating the socio-economic adaptation of refugees, with a strong positive correlation of  $r = .856$ . The regression analysis indicates that educational initiatives contribute approximately 73.3% to the variance in socio-economic adaptation outcomes, underscoring the pivotal role of education within integration frameworks. This finding resonates with a wealth of existing literature emphasizing the transformative power of education in refugee contexts. Molla (2024) emphasizes that involving refugee parents through home-school communication and community liaison officers significantly benefits refugee children's

adjustment and academic success. Such community engagement strategies foster social inclusion by creating bridges between refugees and host communities, thereby promoting socio-economic cohesion.

Further supporting this, Bellino et al. (2022)'s research underscores the importance of psychosocial support, mentorship, and scholarships in enhancing refugee students' academic and social achievement, particularly in East African contexts. These factors mitigate barriers such as trauma, cultural dissonance, and economic hardship, aligning with the present study's findings that accessible and supportive educational interventions have a direct positive impact on socio-economic adaptation. Siarova & Van de Graaf (2023) extend this understanding by highlighting that teachers trained in trauma-informed approaches and cultural sensitivity substantially improve refugee students' engagement and well-being. These educators create safe and inclusive learning environments, which are critical for refugee students' successful integration into both the educational system and the broader society.

The literature also underscores the significance of culturally relevant curricula and locally led initiatives. Cooc & Kim (2023)'s research on refugee-led schools in Kenya's Dadaab camps indicates that models emphasizing locally motivated and culturally adapted education promote higher academic achievement and social cohesion. Such initiatives empower refugees and foster community resilience, thereby bolstering socio-economic adaptation. Adding a broader policy perspective, UNHCR advocates for targeted educational programs that recognize the unique challenges faced by refugee learners, including language barriers, interrupted formal education, and resource constraints. UNHCR's guidelines recommend integrating psychosocial support, vocational training, and community involvement into educational policies to catalyze sustainable socio-economic integration.

In sum, these studies collectively reinforce that education operates as a multifaceted instrument—delivering technical skills, fostering psychosocial stability, and strengthening community ties—all vital for effective socio-economic adaptation. Ensuring culturally relevant curricula, trained educators, community participation, and supportive policies are essential elements in actualizing education's full potential in refugee integration efforts.

### ***5.3.2 Healthcare on Socio-economic Adaptation of Refugees***

The general analytical results on the influence of healthcare on socio-economic adaptation of refugees' success revealed that respondents agreed positively to their relationship. The healthcare of the refugees are impacted in the long-term which constitute part of their socio-economic adaptation. The employed resources are seen to impact adequately the affordability and access of healthcare thereby improving their socio-economic adaptation. Generally looking at the correlation analysis, health care had a moderately strong positive relationship with socio-economic adaptation of refugees. The adoption of affordable and accessible healthcare goes hand in hand with the successful socio-economic adaptation of refugees. The findings here affirm affordable and accessible healthcare moderately determines the successful integration of refugees to the society.

The study reveals that healthcare exerts a moderately strong positive influence on refugees' socio-economic adaptation, with a correlation coefficient of  $r = 0.476$  and explaining approximately 22.7% of the variance in adaptation outcomes. The findings suggest that access to affordable and accessible healthcare services is essential for maintaining the physical and mental well-being of refugees, thereby enabling their active participation in economic and social activities necessary for integration. This correlation aligns with the broader literature emphasizing the crucial role of healthcare in refugee adaptation. Awaisu (2022) highlights that healthcare services, especially mental health support, serve as foundational elements in addressing trauma-induced barriers to social inclusion. Refugees suffering from untreated health issues or psychological distress are less likely to engage effectively in economic opportunities or community activities, which impairs their integration trajectory.

Furthermore, the World Health Organization (WHO) underscores that equitable access to quality healthcare is a fundamental determinant of refugees' overall well-being and socio-economic stability. The WHO advocates for healthcare systems that are culturally sensitive, linguistically accessible, and financially affordable—aligning with the study's observation that perceived quality and affordability of healthcare significantly influence adaptation outcomes. WHO's guidelines emphasize that integration of healthcare into broader social support networks enhances resilience and social cohesion among refugee populations. Molla (2024) expands on this by arguing that healthcare is not solely about medical treatment but also includes health education, preventive services, and psychosocial support. These components are vital for fostering

trust, reducing health disparities, and encouraging health-seeking behavior among refugees. Molla further notes that when healthcare services are integrated with social services—including housing, employment, and education—refugees experience improved stability and confidence, which directly impacts their capacity for socio-economic adaptation.

Resilient healthcare systems that address these multifaceted needs are, therefore, pivotal in removing barriers to integration. The literature collectively advocates for policies that improve healthcare accessibility—particularly for marginalized groups—while ensuring that services are responsive to the cultural and linguistic diversity of refugees. In summary, these evidence-based insights reinforce the study’s findings that healthcare contributes to socio-economic adaptation but also highlight that its effectiveness depends on quality, accessibility, and integration within broader support frameworks. Enhancing healthcare services—through policy reforms, resource allocation, and culturally competent care—can significantly boost refugees’ overall well-being and their capacity to integrate successfully into host societies.

### ***5.3.3 Government Policies on Socio-economic Adaptation of Refugees***

It was established that there existed a positive relation that government policies have on the socio-economic adaptation of refugees. Their support through government policies were not properly formulated to all the refugees. Smart allocation and distribution of resources to refugees in a given country shows commitment to refugee integration. On the other hand, government policies should be properly executed to enable better guidance on integrating refugees within a country.

Effective government policies are a cornerstone for facilitating socio-economic adaptation among refugees. While the study’s findings reveal a positive correlation ( $r = 0.238$ ) indicating that policies do contribute to refugees’ integration, their impact remains relatively modest when compared to other factors such as housing and education. This discrepancy underscores that policy formulation alone is insufficient; robust implementation and multisectoral coordination are equally vital. Recent evaluations by Refugees International (2023) highlight that many countries, including Kenya, have introduced progressive legal frameworks such as the Kenya Refugee Act (2021) aimed at granting refugees rights to work, access services, and integrate socially. Despite these legislative advancements, actual implementation is often hamstrung by bureaucratic hurdles like cumbersome documentation, limited inclusion of refugees in

national development plans, and inconsistent enforcement at the regional and local levels. Refugees frequently encounter procedural bottlenecks, which hinder their ability to access employment, healthcare, and housing, ultimately diminishing the intended socio-economic benefits of such policies.

Haug et al. (2023) emphasize that the mere existence of policies is insufficient without effective operationalization. They advocate for integrated, context-sensitive policy frameworks that coordinate efforts across sectors education, health, employment, and housing to facilitate holistic integration. Policies should prioritize not only legal rights but also practical support mechanisms, ensuring refugees can navigate bureaucratic processes seamlessly. Without this, even well-crafted policies risk remaining symbolic rather than transformative. The research by Molla (2024) further stresses that legal and policy barriers such as restrictive work permit regulations and non-recognition of foreign qualifications are significant constraints on refugees' ability to achieve self-sufficiency. Discriminatory hiring practices and skill mismatch issues exacerbated by inadequate policies thwart economic participation, thereby limiting socio-economic adaptation. Policymakers need to focus on simplifying legal procedures, improving recognition of prior learning, and fostering entrepreneurship through targeted support.

In the context of education, Aden (2024) illustrates that recent reforms such as the Competency-Based Curriculum (CBC) represent positive steps toward integrating refugee students into national systems. However, challenges including overcrowded classrooms, inadequate resources, and shortage of trained teachers continue to limit policy efficacy. These gaps demonstrate that policy formulation must be complemented by strong resource commitment, capacity development, and infrastructural investments to translate policy intentions into real opportunities for refugee advancement. Finally, UNHCR (2023) advocates that long-term refugee integration requires a broad-based, rights-oriented approach that bridges humanitarian and development efforts. They call for cohesive policies that align legal protections with economic opportunities, health services, and social inclusion strategies. Creating such synergies demands multisectoral governance, stakeholder engagement, and consistent resource allocation—elements critical for translating policy commitments into meaningful socio-economic progress.

In sum, while policy development in refugee contexts has advanced, their effective impact is compromised by gaps in enforcement, resource constraints, and lack of coordination. Achieving genuine socio-economic integration necessitates not only

legislative reforms but also operational reforms—ensuring policies are accessible, well-resourced, and implemented through inclusive, multisectoral strategies. Addressing these systemic constraints is essential for transforming policies from paper provisions into tangible pathways toward refugees’ sustainable socio-economic self-reliance.

#### ***5.3.4 Housing programs on Socio-economic Adaptation of Refugees***

Findings on the influence of housing on the socio-economic adaptation of refugees showed a strong positive response on all the constructs. There was a positive agreeable response on the successful socio-economic adaptation of refugees was as a result of better housing facilities. The existence of strong norms that is in ways people are accustomed to doing things, the structuring of such norms and beliefs brings about better integration of people. Generally, looking at the correlation analysis, housing programs had a strong positive relationship with socio-economic adaptation of refugees. Refugee organisations should develop housing affordability and livelihoods improvements that could improve the socio-economic adaptation of refugees.

The analysis underscores that housing plays an undeniably pivotal role in the socio-economic adaptation of refugees, with a reported strong positive correlation ( $r = 0.781$ ) indicating that better housing significantly enhances refugees’ ability to integrate successfully into new environments. Housing not only provides physical shelter but also establishes a foundation of social stability, safety, and privacy, which are vital for mental health, social cohesion, and economic participation. UNHCR (2023) emphasizes that suitable housing transcends mere physical shelter; it functions as a pathway to broader social inclusion. When refugees have access to quality, affordable, and permanent housing, they are better positioned to participate in employment, education, and community activities. Conversely, neglecting housing needs can exacerbate vulnerabilities, entrench marginalization, and hinder efforts toward integration. Specifically, UNHCR highlights that inadequate housing leads to increased stress, social exclusion, and dependence on aid, creating a cycle that impairs long-term socio-economic progress.

Awaisu (2022) further elaborates that housing insecurity, which encompasses insecure tenure, overcrowding, and poor living conditions, cultivates a harmful cycle that adversely affects refugees' well-being and their prospects for integration. Limited access to mental health resources—often intertwined with housing stressors—compound these challenges, diminishing refugees’ resilience and capacity to adapt

socio-economically. Awaisu also notes that housing, when accessible and of good quality, can serve as a form of empowerment, bolstering refugees' agency and enabling them to participate actively in their communities. Additionally, Awaisu (2022) stresses that language barriers can impede refugees' effective navigation of housing markets, leading to reliance on third-party organizations and substandard accommodation options. Refugees often depend on NGOs or informal networks, which may not guarantee adequate housing or support, thus highlighting the need for government interventions that bolster accessible and affordable housing pathways.

Molla (2024) complements these insights by stressing that housing programs are not solely about shelter but are deeply intertwined with socio-economic stability. His research indicates that housing insecurity and the lack of access to mental health resources form a destructive feedback loop that hampers good health, employment, and social integration. Therefore, housing initiatives should be designed holistically to address both physical shelter and the broader psychosocial dimensions that influence refugees' adaptation. Furthermore, UNHCR advocates involving local communities in the planning and implementation of housing initiatives. Such participatory approaches foster social acceptance and ownership, which are critical in ensuring sustainability and community integration. When refugees are involved in housing planning, it enhances their sense of belonging and helps to dispel tensions with host communities, fostering social cohesion.

Research by Molla (2024) emphasizes that involving local communities and integrating refugees into local planning processes could strengthen community acceptance and support for refugee housing initiatives. This approach not only improves the physical quality and appropriateness of housing but also cultivates social networks that can facilitate employment, education, and local engagement—key elements in socio-economic adaptation. In summary, these studies collectively reinforce that housing is a cornerstone for socio-economic integration. Adequate housing reduces stressors, promotes stability, and creates an environment conducive to participation in economic and social activities. Effective housing programs must be accessible, affordable, and community-driven, with active involvement from local stakeholders to foster acceptance, support, and sustainability.

## **5.4 Conclusions**

This section presents the conclusive reports of the study. The conclusion section is aligned to the study objectives. This study concludes that Education strongly

influences socio-economic adaptation of refugees through acquired trainings skills and adequately funded education. Healthcare fairly influences the successful socio-economic adaptation of refugees through adoption of accessible and affordable healthcare services. Government policies have minimal influence on the socio-economic adaptation of refugees through resource support and guidance. Housing has a strong positive influence on the successful socio-economic adaptation of refugees by integrating affordable housing and resources for livelihoods.

This research comprehensively examines the socio-economic adaptation of refugees, emphasizing the significant influence of education and housing, while also considering healthcare and government policies. The study utilizes a descriptive correlational design, focusing on refugees in Nairobi, Kenya, with data collected from 306 respondents through structured questionnaires, demonstrating high reliability (Cronbach Alpha above 0.89). The findings reveal that education has the strongest positive correlation with socio-economic adaptation, with a correlation coefficient of  $r = 0.856$ ,  $p = 0.000$ . Regression analysis shows that education accounts for roughly 73.3% of the variation in refugees' adaptation success, underscoring the pivotal role of educational programs, skills training, and community engagement in facilitating integration. Refugees benefit significantly from vocational training and skills acquisition, which enhance their employment prospects and social participation. Literature supports these findings, indicating that involving refugee parents in home-school communications and providing psychosocial support improves academic outcomes, thus aiding socio-economic adaptation (Molla, 2024; Bellino et al., 2022).

Housing also demonstrates a very strong positive relationship with socio-economic adaptation ( $r = 0.781$ ,  $p < 0.000$ ), explaining approximately 61.1% of the variability. Stable, affordable, and quality housing provides safety, privacy, and a foundation for refugees to access employment, education, and social integration activities. The research underscores that integration efforts should prioritize improving housing access, as it directly impacts refugees' stability and participation in community life. Literature highlights that housing stability reduces stressors associated with shelter insecurity, fostering environments conducive to economic and social development (T4, p. 66). Healthcare's role, while positive, is moderately strong ( $r = 0.476$ ,  $p < 0.000$ ), accounting for about 22.7% of adaptation outcomes. Accessible and affordable healthcare enables refugees to maintain wellbeing and productivity, which are essential for integration. However, barriers such as administrative hurdles, language barriers, and

costs limit its effectiveness, suggesting the need for more inclusive health systems that address these issues comprehensively. Healthcare's contribution is crucial but less impactful compared to education and housing, emphasizing that it should be part of an integrated support framework.

Government policies, although significant, have a weaker correlation ( $r = 0.238$ ,  $p < 0.000$ ), explaining approximately 18.2% of variation in adaptation. Policies such as legal protections, resource support, and guidance are essential but must be effectively implemented to impact refugees' socio-economic integration meaningfully. The literature emphasizes that robust, well-executed policies create enabling environments that uphold refugees' rights and support their integration journey (T3, p. 67). Effective policy frameworks need operational outreach and must align with on-the-ground realities. The synthesis of findings indicates that education and housing are the most influential factors in refugee adaptation, with education slightly surpassing housing in predictive power. Healthcare and government policies contribute positively but are secondary in immediate effects. The variability in refugee experiences points to the necessity of tailored, context-sensitive interventions. Enhancing access to quality education through scholarships, language instruction, and vocational training can significantly improve adaptation outcomes. Similarly, expanding affordable housing options can foster stability and promote participation in economic and social spheres.

The study recognizes limitations, notably response biases and the heterogeneity of refugee experiences, which suggest the value of longitudinal and qualitative research for deeper insights. Factors like social networks, cultural integration, and economic opportunities also warrant further exploration for a holistic understanding of socio-economic adaptation. In conclusion, this research emphasizes that a coordinated approach focusing on education and housing can substantially enhance refugees' socio-economic adaptation. Humanitarian agencies and policymakers should prioritize these areas, foster supportive environments that facilitate integration. The findings contribute to existing literature by quantifying the impact of these factors, providing valuable insights for designing more effective refugee support programs. Future research should explore other potential influences, including social capital and economic opportunities, to develop comprehensive strategies for refugee integration in diverse contexts.

## 5.5 Recommendations

This section presents the recommendations of the study. The recommendations are intended for various stakeholders within the industry at large. The section is aligned to the study objectives for clarity.

This study therefore recommends that refugee organizations should provide opportunities for refugees learning through their integration programs. This will involve industrial training sessions that will enable the sharing of skills between the country host and the refugees. The study also recommends that healthcare for refugees should be reviewed to create more affordable and accessible services. This study further recommends that governments should get more involved in supporting refugees with fair policies as they adapt to society. Finally, the study also recommends that housing be made even more accessible or maintain the standards as they currently are in the integration programs.

To enhance the socio-economic adaptation of refugees, it is imperative for refugee organizations to prioritize the development and expansion of educational programs that include tailored vocational training aligned with local job market needs. By focusing on practical skill sets that resonate with the demands of employers, these organizations can significantly improve the employability and self-sufficiency of refugees, which, as evidenced by the study finding a strong correlation ( $r = 0.856$ ) between education and adaptation success, is crucial for their successful integration into society. Improving access to affordable healthcare services should be a primary goal for both governments and healthcare providers. This can be achieved through the implementation of financial assistance programs, sliding scale payment options, and outreach initiatives that specifically target refugee populations. With the study indicating that healthcare correlates moderately ( $r = 0.476$ ) with socio-economic adaptation, ensuring that refugees can access necessary health services not only promotes their overall well-being but also facilitates their participation in local communities and economies.

Furthermore, policymakers must strengthen government support policies to be more inclusive and responsive to the unique needs of refugees. This includes developing legal assistance programs, tailored job training initiatives, and community support networks that provide essential resources and guidance as refugees navigate their new environments. Given the lower correlation ( $r = 0.238$ ) observed between government policies and adaptation, enhancing the effectiveness and reach of these

policies will be vital in facilitating smoother transitions for refugees into their host societies. Housing stability is another critical area that requires immediate attention. Housing authorities should work in collaboration with refugee organizations to create programs that ensure access to affordable and quality housing options for refugees. This could include integrating rental assistance programs and establishing partnerships with landlords who are willing to provide safe and stable living conditions. The study highlighted the strong positive influence of housing on adaptation ( $r = 0.781$ ), emphasizing the need for stable and affordable housing to serve as a foundation for successful integration.

Finally, fostering community engagement initiatives that promote interaction between refugees and residents is essential. Programs designed to facilitate cultural exchange and skill-sharing can greatly enhance social cohesion and create an environment of mutual support. Although the study did not quantitatively measure community engagement's impact, building supportive community networks plays a crucial role in easing the integration process. By cultivating an inclusive atmosphere, local communities can help refugees feel a sense of belonging and reduce barriers to adaptation. By taking these actionable steps, stakeholders can significantly improve the socio-economic adaptation of refugees, leading to more successful integration outcomes that benefit both refugees and the communities they join.

## **5.6 Areas of Further Research**

This study examined integration programs and socio-economic adaptation of refugees and thus further similar research can be recommended to build up on this study. Further studies should examine integration programs influencing socio-economic adaptation of refugees in other counties within the country, especially non-urban areas. Also, further studies should explore other factors that may affect integration programs of refugees other than education, healthcare, government policies and housing.

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## APPENDICES

### Appendix 1: Questionnaires

#### SECTION A: GENERAL INFORMATION

Hello, my name is Olivia and I am currently conducting a study on refugee integration programs and the socio-economic adaptation. I appreciate the time you are taking to fill in this questionnaire. Please see the instructions under each section for guidance.

**Please tick the most appropriate answer (✓)**

**1. Indicate your gender**

Female ☐

Male ☐

**2. What is your age group?**

Below 18 ☐

18-22 ☐

23-27 ☐

28-32 ☐

33-37 ☐

Above 37 ☐

**3. Which is your highest education level?**

Certificate ☐

Diploma ☐

Degree ☐

Masters ☐

PHD ☐

Any Other ☐ Please Specify: \_\_\_\_\_

**4. How many years have been in the country?**

1-2 ☐

3-6 ☐

7-10 ☐

10 and Above ☐

**5. What is your country of origin?**

Please Specify: \_\_\_\_\_

## SECTION B: ASSESSING INTEGRATION PROGRAMS

Kindly indicate your level of agreement or disagreement with the following statements by ticking (✓) where appropriate

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

|            |                                                                                                       |          |          |          |          |          |
|------------|-------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|
|            | <b>1.0 Effectiveness of Education in Integration Programs</b>                                         | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
| <b>6.</b>  | I got adequate funding from the integration programs for educational purposes.                        |          |          |          |          |          |
| <b>7.</b>  | I learnt skills through educational initiatives under programs integration exist in our organization. |          |          |          |          |          |
|            | <b>2.0 Effectiveness of Healthcare in Integration Programs</b>                                        | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
| <b>8.</b>  | I can access quality healthcare facilities through the programs.                                      |          |          |          |          |          |
| <b>9.</b>  | The healthcare provided under the program is affordable for me to use.                                |          |          |          |          |          |
|            | <b>3.0 Effectiveness of Government Policies in Integration Programs</b>                               | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
| <b>10.</b> | I can get government resource support as a refugee through the programs.                              |          |          |          |          |          |
| <b>11.</b> | It is easy to understand and follow procedures from the government as a refugee.                      |          |          |          |          |          |
|            | <b>4.0 Effectiveness of Housing in Integration Programs</b>                                           | <b>1</b> | <b>2</b> | <b>3</b> | <b>4</b> | <b>5</b> |
| <b>12.</b> | I can get affordable and safe housing facilities through the program.                                 |          |          |          |          |          |
| <b>13.</b> | I am able to get enough resources for use in my house under the program.                              |          |          |          |          |          |

## Appendix 2: Research Permits

|                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <br><b>REPUBLIC OF KENYA</b>                                                                                                                                                                                                                                                                                            | <br><b>NATIONAL COMMISSION FOR<br/>SCIENCE, TECHNOLOGY &amp; INNOVATION</b> |
| Ref No: <b>486638</b>                                                                                                                                                                                                                                                                                                                                                                                    | Date of Issue: <b>14/June/2024</b>                                                                                                                             |
| <b>RESEARCH LICENSE</b>                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                |
| <p><b>This is to Certify that Miss.. Olivia Lumbasi Wanambisi of Africa Nazarene University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Nairobi on the topic: "Assessing the Effect of Integration Programs on Socio-Economic Adaptation of Refugees in Nairobi, Kenya". for the period ending : 14/June/2025.</b></p> |                                                                                                                                                                |
| License No: <b>NACOSTI/P/24/36710</b>                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                |
| <b>486638</b>                                                                                                                                                                                                                                                                                                                                                                                            |                                                                           |
| Applicant Identification Number                                                                                                                                                                                                                                                                                                                                                                          | Director General<br><b>NATIONAL COMMISSION FOR<br/>SCIENCE, TECHNOLOGY &amp;<br/>INNOVATION</b>                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                          | Verification QR Code                                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                           |
| <p><b>NOTE: This is a computer generated License. To verify the authenticity of this document, Scan the QR Code using QR scanner application.</b></p>                                                                                                                                                                                                                                                    |                                                                                                                                                                |
| See overleaf for conditions                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                |

### Appendix 3: Research Approvals and Letters



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28<sup>th</sup> May 2024

**RE: TO WHOM IT MAY CONCERN**

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Olivia Lumbasi Wanambisi (21S01DMGP004) is a bonafide student at Africa Nazarene University. She has finished her course work and has defended her thesis proposal entitled: -

*“Assessing the Effect of Integration Programs on Socio-Economic Adaptation of Refugees in Nairobi, Kenya”.*

Any assistance accorded to her to facilitate data collection and finish her thesis is highly welcomed.

A handwritten signature in cursive script, appearing to read "Rodney Reed".

**Prof. Rodney Reed**  
Deputy Vice Chancellor, Academic & Student Affairs

#### Appendix 4: Map of Study Area



**Source:** Google Maps (2025)

**Key** – Red dotted lines show boundary for Nairobi County.