THE ROLE OF SCHOOLS IN SUPPORTING LEARNING WELLBEING OF REFUGEE LEARNERS WITH PSYCHOSOCIAL PROBLEMS: A CASE OF LEARNERS AT DZALEKA REFUGEES CAMP

MASTERS OF EDUCATION (EDUCATIONAL PSYCHOLOGY) THESIS

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UNIVERSITY OF MALAWI

SEPTEMBER 2024

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MASTER OF EDUCATION (EDUCATIONAL PSYCHOLOGY) THESIS

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Submitted to the Department of Education Foundations in the School of Education in partial fulfilment of the requirements for the award of Master of Education Degree (Educational Psychology**)**

UNIVERSITY OF MALAWI

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DECLARATION

I the undersigned hereby declare that this thesis is my own original work which has not been submitted to any other institution for similar purpose. Where other people's work has been used, proper acknowledgments have been made.

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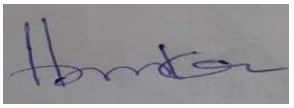

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CERTIFICATE OF APPROVAL

The undersigned certify that this thesis represents the student's own work and effort and has been submitted with our approval.

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Co-Supervisor

DEDICATION

I dedicate this research to my parents George Kenneth Malani Hara and Margaret Towera Ngoma who tirelessly encouraged me to work hard and do better than them education wise, and to my husband Phillip Tambikeni Kasambara for his selfless support, encouragement, and love throughout my education journey from certificate level. To my daughter Thenjiwe and son Themba Kasambara, I say do better than what I have achieved in education.

Finally, to all refugee learners worldwide, keep strong.

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Over the course of my academic career, many people have either directly or indirectly assisted me in achieving my objectives. The space and scope of this document prevent me from highlighting every one of them, but I will name a few of them here.

First and foremost, I want to acknowledge the time and work my husband, Phillip Kasambara, has invested in my education. He has paid for my school expenses with the meagre funds we have up to this point. I hope he will continue to do so, but more significantly, he has shown a genuine interest in my education and believed in my abilities. I have moved on because of that faith, and it has always been an inspiration to me.

Second, I want to thank my parents, Malani Hara and Towera Ngoma, my children, Thenjiwe and Themba Kasambara, and friends and family who have been a source of support and encouragement for me when the going got tough. It does make a difference when they are in my life. Thirdly, I would like to express my gratitude to my co-supervisor, Dr Elizabeth Tikondwe Kamchedzera, and my supervisor, Dr Symon Chiziwa, for always being there for me and providing me with their unselfish support. Thank you so much to Dr. Mankhwala, deputy principal secretary of the Ministry of Home and Security Affairs, for allowing me to go and complete my assignment. The camp manager, head teacher, staff, members of the school management committee, students from Umodzi Katubza (UK) primary school, and the psychosocial staff at Dzaleka refugee camp helped shape my research agenda through academic work or in other ways. Interacting with them contributed to building a solid base for this study. I praise God the Father, God the Son, and God the Holy Spirit in whole.

ABSTRACT

The study explored the roles of schools in supporting the learning well-being of refugee learners with psychosocial problems, focusing on learners at Dzaleka refugee camp. Qualitative approaches were used to collect data, including personal interviews by administering semi-structured questionnaires with refugee learners, teachers, and school management committee members. A sample of 45 participants (35 learners, five teachers, five school management committee members) was purposively selected, and 45 in-depth interviews were conducted. The generated data was analysed using Microsoft Excel 2019 package and NVivo 12, employing descriptive and thematic analysis to assess demographic characteristics, psychosocial problems, and the roles of the school in supporting learning well-being. The findings revealed that all studied learners experienced some form of psychosocial problems, including uneasiness, helplessness, and fatigue. Additionally, the school played a vital role in supporting concerned learners by providing an enabling environment in class and off-class engagement, relationship building, and referrals to health personnel. The study found evidence supporting the significance of the school in improving learning well-being among learners with psychosocial problems. Having better- prepared schools equipped with learning tools that promote the learning well-being of learners may improve the quality of education, potentially leading to reduced cases of mental health issues among refugee learners.

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LIST OF ABBREVIATIONS

DAFI Albert Einstein German Academic Refugee Program

GoM Government of Malawi

JRS Jesuit Refugee Services

JWL Jesuit Worldwide Learning

PTSD Post Traumatic Stress Disorders

SDG Sustainable Development Goals

SNE Special Needs Education

UNHCR United Nations Refugee Agency

CHAPTER ONE

INTRODUCTION

1.1 Chapter overview

This chapter introduces the study, which explored the role of the school in supporting the learning well-being of refugee learners with psychosocial problems at Dzaleka refugee camp. The chapter provides the background to the study, the statement of the problem, and the purpose of the study. It also outlines the research questions, the significance of the study, and the definition of the terms used. Lastly, it provides a chapter summary.

1.2 Background to the study

The global refugee crisis is intensifying, with displacement rates reaching alarming levels. According to recent data, one person becomes displaced every three seconds, with developing countries hosting 84% of refugees (UNHCR, 2017). This places significant pressure on these nations and development agencies to address the challenges faced by refugees and asylum seekers. Children constitute a substantial portion of the refugee population, with over 33 million children forcibly displaced worldwide by the end of 2020 (UNHCR, 2021). Nearly half of the world's refugees in 2020 were children despite making up less than one-third of the global population (UNHCR, 2021). In Malawi specifically, more than 45% of refugees are children (UNHCR, 2021).

These statistics highlight the urgent need to address the educational needs of refugee children.

Education plays a crucial role in the lives of refugee children, with the United Nations Refugee Agency (UNHCR) identifying access to education as a critical area, aligning with Sustainable Development Goal 4 (SDG 4) (UNHCR, 2019). However, the education of refugees faces significant challenges, with only about 50% of refugee children attending primary school and approximately 25% in secondary school (UNHCR, 2021).

Refugee children often face psychological and mental health problems that affect their learning, having experienced trauma and disruption in their lives. In Syria, for example, more than 20% of refugee children attending school exhibit signs of psychosocial problems (Save the Children, 2017). These challenges underscore the complex interplay between education, mental health, and the overall wellbeing of refugee children, emphasizing the need for comprehensive support systems within educational settings.

1.3 Education and refugee children

Educational institutions play a crucial role in the psychosocial wellbeing and societal integration of refugee children. Richman (1998) posits that the overall wellbeing of refugee children is significantly influenced by their educational experiences, successes, and failures. This assertion is further supported by Taylor and Sidhu (2012), who emphasize the critical function of schools in facilitating the transition to citizenship and fostering a sense of belonging among refugee youth.

The Dzaleka refugee camp in Malawi serves as an illustrative case study of educational provision for refugee populations. The camp demonstrates a multi-tiered approach to education, encompassing primary, secondary, and tertiary levels.

According to Wirsig (2020) , a total of 5,678 refugees and asylum seekers are enrolled in various educational programs within the camp. The primary education sector exhibits the highest engagement, with 4,211 children enrolled, representing a 40% participation rate. Secondary education, while less prevalent, maintains a notable presence with 567 students, constituting an 18% enrollment rate.

Higher education initiatives have also been implemented at Dzaleka, with 629 youth pursuing postsecondary and higher education programs. These programs, ranging from certificates to degrees, are facilitated through partnerships with organizations such as Jesuit Refugee Services (JRS) and Jesuit Worldwide Learning (JWL). This diversification of educational offerings reflects an acknowledgment of the varied academic needs and aspirations within the refugee population.

Furthermore, targeted scholarship programs have been introduced to enhance educational access and promote empowerment. The Naweza Girl Empowerment Initiative, for instance, provides scholarships at both secondary and tertiary levels, addressing gender- specific educational barriers. In 2018, Malawi implemented the Albert Einstein German Academic Refugee Program (DAFI) scholarship, initially benefiting six refugee students, with plans for expansion in subsequent years (UNHCR, 2019).

It is worth noting that schools influence the learning wellbeing of refugee children dealing with psychosocial problems at hand. Psychosocial refers to 'the dynamic relationship between the psychological and social dimensions of a person, where one influences the other' (IFRC, 2014). Psychological aspects of development refer to an individual’s thoughts, emotions, behaviours, memories, perceptions, and

understanding. The social aspects of development refer to the interaction and relationships among the individual, family, peers, and community (UNRWA, 2016). School is one of the best ways to give children the structure and predictability they need. School can focus on the attention of children, stimulate their creativity, and develop their social skills. Teachers can be trained to look for signs of emotional problems and to help children talk about their experiences.

1.4 Dzaleka refugee camp

The Dzaleka refugee camp was established in 1994 by the UNHCR in response to a huge displacement of people fleeing genocide, violence, and wars in Burundi, Rwanda, and the Democratic Republic of Congo (WFP and UNHCR, 2014). Some refugees at Dzaleka camp are from Zambia, Zimbabwe and Mozambique (UNHCR 2019). By 31 January 2019, 38,297 refugees and asylum-seekers were resident in Dzaleka Refugee Camp. 419 new arrivals and babies were registered in February 2019. The Mwanza Field Unit was officially closed on 31 December 2018 following the voluntary repatriation of 2,603 asylum seekers from the Luwani Refugee Camp to Mozambique. In 2018, a total of 1,069 refugees were resettled in Canada, Australia, Finland, Sweden, and the USA. 1,250 were resettled in 2019 (UNHCR 2019). The study focused on the camp's primary school, which is attended by children from the surrounding community as well as refugee children.

1.5 Statement of the problem

Psychosocial problems are prevalent among refugees living in Dzaleka refugee camp, with more than 50% of the refugee population reported to have attributes of such problems (UNHCR, 2002; Donald, 2014). These issues, which can be classified as personal, relational, and contextual (Evans, 1999), disproportionately affect children.

In this instance, most of the refugee children, for the most part of the day, their time is spent attending school. The United Nations agency (UNHCR, 2001; Taylor and Sidhu, 2012; IFRC, 2014) notes that schools play a great role in helping refugee learners to adjust and grow morally, regardless of the various psychosocial problems. While schools are recognized as playing a crucial role in helping refugee learners adjust and grow morally (UNHCR, 2001 ; Taylor and Sidhu, 2012; IFRC, 2014), in-depth knowledge of how schools support the psychosocial needs of refugee children in Malawi has received little attention (UNESCO, 2016). This gap in understanding is concerning, given the significant amount of time refugee children spend in school and the potential impact on their learning and wellbeing.

As such, there is a need for such a study to understand the role of the school in dealing with the psychosocial problems of "refugee learners" to appreciate the dynamics and interactions of these learners in schools.

1.6 Purpose of the study

The main purpose of this study was to understand the role of the school in supporting the learning wellbeing of the refugee learners with psychosocial problems at Dzaleka Refugee Camp.

1.7 Main Research Question

What is the role of the school in supporting the learning wellbeing of refugee learners with psychosocial problems at Dzaleka Refugee Camp?

1.7.1 Subsidiary-research questions

The following are the subsidiary research questions:

1. What are the psychosocial problems that affect the learning wellbeing of refugee learners at Dzaleka primary school?
2. How does the school support learning well-being of refugee learners with psychosocial problems in the refugee camp?
3. What challenges does the school face when supporting learners to deal with psychosocial problems?

1.8 Significance of the study

This study is significant because it contributes towards the body of literature in the sense that it unveil the psychosocial problems that affect learning wellbeing of the refugee learners in the refugee camp school, the role of the school in dealing with these problems and the challenges the school faces when supporting these refugee learners. The knowledge of these relationships will help inform and establish interventions which will help improve how schools deliver educational and psychosocial services when dealing with psychosocial problems in refugee learners. The findings of the study will provide insights for future research.

Additionally, it will help provide relevant information for policy makers and development partners such as the Ministry of Gender Children Disability and Social Welfare and UNICEF to develop and implement appropriate refugee children learning improvement strategies since, such efforts should be initiated on the basis of evidence-based research.

1.9 Definition of key terms

The following key terms used in the study are clarified below.

i) **Refugee learners:** These are learners attending education classes in a host country school or learning institution, which have been forced to leave their country of origin due to was, violence, conflict, or persecution (WFP and UNHCR, 2014).

ii) **Learning wellbeing:** Learning wellbeing refers to the physical, mental, emotional, and spiritual dimensions that enhance and influence learning in individuals (Awartani et al., 2008).

iii) **Psychosocial support:** Psychosocial support is defined as "a process of facilitating resilience among individuals, families and communities (IFRC Reference Centre for Psychosocial Support, 2009; 2014).

iv) **Psychosocial problems:** Psychosocial problems are the difficulties faced by individuals in their personal and social functioning areas (Timalsina et al., 2016). Individuals, in particularly refugees, are vulnerable to psychosocial problems due to situations during and after their transition (Timalsina et al., 2016).

v) **Primary School:** An educational institution providing basic education to children, typically between the ages of 5-14 years old. In the context of refugee education, a primary school serves not only as a place for academic instruction but also as a critical environment for social integration, psychosocial support, and the overall wellbeing of refugee children (Dryden-Peterson, 2015). It plays a vital role in helping refugee students adjust to their new surroundings, cope with trauma, and develop the skills necessary for their future.

1.10 Organization of the thesis

This thesis is organized into five chapters. Chapter one gives the background to the study and discusses the research problem and related research questions. The aim, objectives and the justification for the study are also outlined in this chapter. Chapter two reviews the literature and the theoretical framework relevant to the study. Chapter three gives the details of the design of the study and methodology used. Chapter four presents and discusses the results of the study. Chapter 5 presents the study's conclusions and recommendations based on the research findings.

1.11 Chapter Summary.

Malawi is among the host countries in Africa for an ever-increasing number of refugees around the world. Refugees flee their home countries to seek asylum from conflicts, wars, and other traumatic events that cause psychosocial problems affecting the livelihood of those concerned. Particularly, children are affected the most. It has been established that societies, including schools, have a role to play in providing support services to school-going refugee children. Owing to this information, this chapter has provided a background to the problem, as well as study objectives and research questions.

CHAPTER TWO

LITERATURE REVIEW

2.1 Chapter overview

This chapter presents the relevant literature on the role of schools in supporting the learning wellbeing of refugee learners with psychosocial problems. It also presents a review of similar studies conducted in various countries globally, regionally, and locally. The outline of the chapter is based on the main themes from the research questions and guided by the theoretical framework. Lastly, it discusses the theoretical framework that informed the study.

2.2 The Role of the School in supporting the learning wellbeing of refugees

Teachers are often the first people that refugee youth meet when they arrive in their new communities. In the lives of traumatized young refugees, teachers play a critical role. Target language and skill development programs will be more effective with better tools and support for teachers and staff in meeting the needs of refugee students through curriculum development, research into new approaches, professional development, and communication (Woods, 2009).

School is a place where refugee children can learn skills that will help them integrate, thrive, and support themselves in their new community. Schools can teach students more than just print literacy; they can also encourage the development of digital, health, and social literacy. Furthermore, schools provide a relatively safe environment for exploring and developing one's identity (McBrien, 2005). When refugee children

enter schools, they must quickly learn and retain a large amount of information to catch up with their peers. Access to social capital can also help them (Toohey, 2000). Schools are often one of the first points of contact for refugees in their new community, and they are responsible for providing a safe space for refugees to reconcile their own culture with that of their host communities (Woods, 2009). Following upheaval, schools can foster reconciliation and resilience by providing support for refugee youth and their families, including linguistic assistance. Schools can acknowledge and celebrate the diverse knowledge, lived experiences, and cultural histories of all students, including refugee students, by adopting a model of socially just education (Woods, 2009).

Pre-settlement and during-transit traumatic experiences can obstruct refugee youth's academic success and make it difficult for them to adapt to their new community (Yu, 2012). These difficulties can be mitigated by creating a safe environment in which students are encouraged to adjust to their new cultural environment and expectations while still maintaining ties to their roots (McBrien, 2005). Understanding and acceptance can improve the psychosocial wellbeing of refugee students and help them avoid alienation from their peers. Creating an environment that encourages these students to blend multiple aspects of their identities helps in their integration and facilitates their academic success (Gibson, 1997). Supporting them in maintaining ties to their homeland, heritage, and cultural knowledge allows them to gain the knowledge and skills they need to thrive in their new communities (Yu, 2012). Recognizing and building on refugee students' prior knowledge can help them succeed. Teachers, resettlement workers, and other professionals in schools, community centers, and libraries have come up with innovative ways to engage

refugee students' prior knowledge. Curriculum and ideas can be taught in ways that respect and validate refugee students' cultural practices, family ties, previous experiences, prior knowledge, and worldviews. In a Canadian elementary school, for example, an intergenerational bilingual story-telling program was started (Marshall and Toohey, 2010). Critical literacy instruction and student awareness were aided by engaging with these family stories. It also encouraged students to engage with their grandparents' knowledge, facilitating knowledge transfer and cultural understanding across generations.

2.3 Factors that promote learning

The ability to learn is influenced by a number of factors including the student's motivation, the learning environment, and the type of learning material used. Some of these factors are discussed below.

2.3.1 Physical factors

Many children today, from various socioeconomic backgrounds, are at risk of undernutrition, obesity, heart disease, and other chronic diseases as a result of a lack of physical activity and poor nutrition (Quendler, 2002). Furthermore, undernourished and untrained children have lower standardized test scores and are more likely to have difficulty concentrating, get sick, miss school, and fall behind in class (Quendler, 2002). According to Quendler, even moderate under-nutrition and complete lack of physical activity can have long-term effects on a child's ability to learn and school performance, while good nutrition and daily physical activity lead to improved scholastic performance, attention, concentration, school interest, and calmness in class. Furthermore, the implementation of nutritious breakfast programs is associated

with significant improvements in academic performance among schoolchildren (Quendler, 2002).

2.3.2 Mental factors

According to UNICEF (2011), mental health problems among young people are a major public health problem around the world. However, the same organization also states that prevention efforts can help prevent the onset and progression of mental disorders and that early intervention can reduce their severity. While untreated mental health problems in adolescents are linked to lower academic achievement, young people who have their mental health needs met function better socially, perform better in school, and are more likely to grow into well-adjusted and productive adults (UNICEF, 2011).

According to Sznitman et al., (2011), there is a lack of attention paid to emotional wellbeing in educational policy discussions, which is particularly troubling given growing evidence that many common early stressors lead to negative mental health outcomes that can interfere with academic achievement. They claim that path analyses show that a country's or state's adolescent emotional wellbeing is a strong predictor of educational achievement, and that emotional wellbeing is also a predictor of educational outcomes at the individual level (Stanton-Salazar, 2011). Their own research supports the idea that the emotional wellbeing of adolescents is linked to national and state educational achievement levels (Sznitman et al., 2011; Enriquez, 2011). Several educational and happiness researchers and theorists believe that there is a causal relationship between happiness and achievement.

2.3.3 Social factors

Antisocial behavior increases dramatically during adolescence (Kuther, 2000), a finding that is supported by numerous studies that report positive causal relationships ranging from positive social relationships and traits to achievement. Positive school climates, defined as the quality of teacher-student relationships and the overall atmosphere, can contribute to academic success (OECD, 2015). To improve student performance, the OECD believes that a culture of collaboration and peer learning must be fostered. According to the research reviewed by Blackman, et al., (2016) teachers who improved their relationships with their students and the method for collaborating with their classes positively influenced student achievement. Generally, the authors argue that to achieve or maintain an efficient learning environment, teachers must demonstrate qualities that support positive and open communication. According to a large number of studies using student interviews, students expected teachers to treat them fairly, with dignity, and with personal respect (Baskin, 2014). There have also been studies that show a link between how students are treated at school and their mental health, which influences their performance (Okoth and Tangelder, 2015; Kaplan et al., 2016).

2.4 Wellbeing conditions in the schools

Wellbeing conditions in the schools are vital in achieving the wellbeing of learners. This includes the physical and mental wellbeing of the learners, and their psychological and social wellbeing. The wellbeing of the learners is a central aspect of the learning process.

2.4.1 Physical conditions

There is a wealth of information available on the factors that influence physical wellbeing. Adolescent health problems and behaviors, in general, have an impact on physical development (WHO, 2014). Mental factors appear to have a significant impact on physical health. Negative emotions, for example, can wreak havoc on one's health, even making illness more likely (Helliwell et al., 2013). Depression is the leading cause of illness and disability among young people aged 15-19 years (UNICEF, 2011; WHO, 2014). On the plus side, there is plenty of evidence linking subjective wellbeing to physical wellbeing in people, resulting in reduced inflammation, a healthier cardiovascular system, a healthier immune and endocrine system, and a lower risk of heart disease, stroke, and infection susceptibility, and a faster rate of recovery, as well as increased survival and longevity (Helliwell et al., 2013).

The social environment or ethos of a school can contribute positively to physical and mental health (WHO, 2014), as evidenced by research reviewed by Blackman et al., (2016) who found links between social characteristics in school as experienced by students and severe medical symptoms. Furthermore, according to the WHO (2014), preventing adolescent deaths from interpersonal violence require combating negative attitudes and harmful behaviors among peers, as well as improving adolescents' knowledge and skills.

2.4.2 Mental wellbeing conditions

Most people agree that societies should promote the happiness of their citizens (Helliwell et al., 2012), and the recent focus on what is sometimes referred to as "the Happiness Industry" is evident in many western countries' governments' recent

attention to wellbeing, emotional literacy, social and interpersonal development, and the like in school curricula (Bailey, 2009). However, while mental wellbeing is an important factor in educational achievement, for example, the world unquestionably has much more to offer in terms of contributing to the mental wellbeing of adolescents worldwide. In all societies, mental health problems account for a significant portion of the disease burden among young people (UNICEF, 2011). Half of all mental health disorders begin by the age of 14, but the majority of cases go unrecognized and untreated, with serious consequences for mental health throughout life (WHO, 2014). According to Patton et al., (2012), mental disorders are on the rise during the holiday season.

According to Helliwell et al., (2013), the public is told and generally believes that greater economic growth is the key to greater happiness. Helliwell et al., (2013) also indicated that research evidence has consistently shown that other factors are stronger and more consistent predictors of subjective wellbeing. Generally, economic, social, psychological and ethical factors help explain the differences in measured life satisfaction between individuals and nations (Helliwell et al., 2013). According to the authors, social factors such as educational initiatives could have a significant impact on happiness levels: "After the baseline has been met, happiness varies more with the quality of human relationships than with income." Other policy objectives should include "building a strong community with high levels of trust and respect, which the government can influence through a decent education for all" (Helliwell et al., 2012).

Protecting adolescent mental health begins with parents, families, schools, and communities, according to UNICEF (2011). There is a lot of empirical evidence to back up our intuition that good friendships contribute to happiness (Noddings, 2003).

She also mentions that social scientists believe that companionship is the single most important factor in generating a subjective sense of happiness. According to Helliwell et al., (2012), the same few variables measuring material, social, and institutional factors account for about 80% of intercountry differences in subjective wellbeing, with all of these supporting factors are stronger in the high-ranking countries. When comparing the top four to the bottom four countries, people in the top four are much more likely (95 percent vs. 48 percent) to have someone to call on in times of trouble (Helliwell et al., 2012).

In addition to the influence of social factors on mental health, mental factors have positive effects on mental health. Happiness has the potential to generate positive snowball effects in society, according to Helliwell et al., (2013). According to the authors, research shows that people who are happier are more likely to spread happiness to those around them, resulting in happier networks with up to three degrees of separation, and individuals who are surrounded by happy people are more likely to be happier in the future (Helliwellet al., 2013). Present happiness is also important for future happiness (Noddings, 2003). This agrees with a study by Bredmar, (2014), who interviewed 19 primary school teachers about their work-life experiences. One finding was that even after an actual event, when the teacher recalls the event; instances of experienced happiness have positive emotional consequences.

Physical wellbeing is also related to happiness, according to Helliwell et al., (2012), and they discovered that it has a significant impact on happiness. Although mental health problems are the most important explanatory variable for misery, the latter has a significant impact on happiness (Helliwell et al., 2012) and is thus more important than income or unemployment for adults (Helliwell et al., 2013). Regular physical

activity is linked to improved mental health, such as a reduction in anxiety and depression symptoms (Ekkekakis, 2015).

2.4.3 Social wellbeing conditions

One condition that has been linked to social wellbeing in various ways is mental health. According to Helliwell et al., (2013) happy people are more sociable and have better social relationships. In a review of previous research, they discovered that children who are placed in experimental settings in a positive mood have more social skills and confidence in social behavior than those who are not. The researchers discovered a strong relationship between subjective wellbeing and social behavior, such as being a better friend, colleague, neighbor, and citizen, as well as the fact that people are more sociable when they experience frequent positive emotions. Happiness improves social relationships in two ways: it increases sociability and improves the quality of social interactions (Helliwell et al., 2013).

Happier people have better and better-quality friendships and family relationships (Helliwell et al., 2013). In their review, the authors discovered that happy participants spent approximately 25% less time alone and approximately 70% more time talking when they were with others, and that happy participants engaged in fewer small talk and more substantive conversations compared to their unhappy peers.

While there is evidence that mental wellbeing is associated with social wellbeing, Patton et al., (2012) argue that few previous reports have thoroughly addressed the measurement of protective factors in the social contexts of child and adolescent development. According to the authors, such protective factors are not only important determinants of adolescent health, but they are also aspects for which evidence for

prevention is frequently available. More comprehensive approaches, they argue, would include relevant social determinants of health (Patton et al., 2012).

According to research on the relationships between moral reasoning and behavioral competence, lower levels of moral reasoning in adolescent students predict perceptions of low behavioral competence, which is also associated with engagement in risky behavior (Kuther, 2000). Furthermore, higher moral reasoning quality has been found to correlate with a lower tendency to delinquent behavior in adolescents, as well as fewer criminal offenses and behaviors (Beerthuizen et al., 2013; Palmer, 2003; Raaijmakers et al., 2005). Educating students to develop their moral reasoning is also important, according to Senland and Higgins-d'Alessandro (2013), in order to "promote mutually rewarding relationships".

2.5 Psychosocial problems that affect refugee learners' learning wellbeing

Hamilton et al., (2000) observe that every refugee child has experienced some degree of trauma due to disruptions in their families, communities, and school, multiple losses, and the ongoing and complex reunification and resettlement issues. Refugee children exposure to crises and or negative events have serious impacts on a child throughout their lifespan, including emotional and social development of the children as well as their capacity to adapt to new conditions in a host country (Bronfenbrenner,1979). According to Hamilton et al., (2000) and Sveinbjörnsdottir (2017), symptoms of such events may manifest at particular development stages or significant events in an individual. According to the National Child

Traumatic Stress Network (2017), the effects of trauma can produce a high level of emotional upset, disruptive behavior, or an increase in absences. Trauma can produce

extreme stress and can impede concentration, cognitive functioning, memory, and the manifestation of physical symptoms (National Association of School Psychologists, 2015).

Additionally, the Association for Children's Health (2017) states that children or young people who have witnessed a traumatic event are at risk of developing post-traumatic stress disorder (PTSD). Children with PTSD often have persistent, intrusive frightening thoughts and memories of the experience. They may exhibit some of the following symptoms or behaviors: nightmares, flashbacks, headaches, stomachaches, irritability, impulsiveness, anger and hostility, difficulty in concentrating, avoidance, overwhelming sadness or hopelessness, and a fear of certain places, things, or situations that remind them of the event. According to the Minnesota Association for Children's Health (2017), PTSD is diagnosed if the symptoms last more than one month. Symptoms usually begin within three months of the trauma, but occasionally not until years after. The severity and persistence of symptoms vary greatly among students affected by PTSD. Symptoms can come and go and a child's mood can change drastically, which can make it difficult for teachers to intervene or refer students. Some students may act younger than their age and exhibit clinginess, impulsivity, aggression, and impatience (Minnesota Association for Children's Mental Health, 2014).

The most common mental health diagnoses associated with refugee populations' included Post Traumatic Stress Disorder, major depression, generalized anxiety and panic attacks

(Refugee Health Technical Assistance Center, 2017). It is estimated that between 10% and 40% of settled refugees suffer from major depression and PTSD. Children and adolescents have higher rates of PTSD (between 50% and 90%) and major depression (between 6% and 40%) (Patel and Prince, 2010). A comprehensive study of Cambodian refugee children revealed significant mental health challenges within this group (Sack et al., 1993). Nearly half of the children were diagnosed with a major psychiatric disorder, with Post-Traumatic

Stress Disorder (PTSD) being the most prevalent, affecting 40% of the participants.

Depression was also common, present in 21% of the children, while anxiety affected 10 %. Many children experienced multiple disorders simultaneously, highlighting the complexity of their mental health needs. The research also uncovered a concerning pattern: children who had experienced PTSD showed increased vulnerability to stress from subsequent traumatic experiences. This finding suggests that early trauma may sensitize individuals to future stressful events, potentially creating a cycle of ongoing mental health difficulties. The study by Sack et al. (1993) provides valuable insights into the long-term mental health impacts on refugee children, emphasizing the need for sustained support and intervention.

2.6 Schools' role in supporting refugee learners with psychosocial problems

The worldwide rise in the number of refugees and asylum seekers suggests the need to examine the practices of the institutions charged with their resettlement in host countries. The role of one important institution that is the school, can contribute to the successful resettlement of refugees with psychosocial problems **(**Taylor and Sidhu 2009). A vital aspect of care for refugee children is in primary prevention, and as

such, schools are uniquely placed to undertake such work. The goals of primary prevention can include enhancing resilient behaviors in children; schools offer an excellent framework for this, as well as monitoring of academic progress, and behavioral and social adaptation. (Yule, 2000; Pynoos and Gordon, 2001; Williams and Westermeyer, 1986; Howard and Hodes, 2000). Schools provide a place to learn, facilitate the development of peer relationships, and help provide a sense of identity (Wood et al., 1993; Mortimore, 2001). In particular, for refugee children, schools can play a vital part in their integration by becoming an anchor, not only for educational but also for social and emotional development, and as an essential link with the local community for children and parents. One of the key protective factors in influencing this outcome is the school that acts as a stable social support (Werner and Smith, 1982). This support helps develop children's resilience by enhancing their individual competencies, in turn adding to their self-worth and sense of control over their environment.

Healthy, cognitive and emotional development of children and adolescents is promoted by a secure environment and opportunities for learning. Education provides a vehicle for rebuilding the lives of refugee children, through social interaction and gaining knowledge and skills for their future lives. For some, the alternative is depression and idleness, and for others, a range of anti-social activities and the thought of revenge through a renewal of arm conflict (ACNUR, 2001).

Students with PTSD will often regress and are unable to utilize the previously acquired skills. Their capacity to learn may decrease. According to Tull (2017), people with PTSD struggle with memory and attention problems. It also explains that they tend to have problems remembering words (verbal memory), facts, and specific

details of past events. Tull (2017) further states that the individual may also have difficulties with concentrating and can be easily distracted, making it difficult for the individual to pay attention when performing a task. Individuals with PTSD can also exhibit high levels of anxiety and can be a contributing factor of learning difficulties (Tull, 2017). Tull (2017) also explains that when a person is feeling very anxious, it can interfere with the way his/her brain encodes information into their memory, thus making it harder for them to remember even the smallest of details. However, identifying potential areas of interventions may enhance psychosocial problem management among the refugee children in schools.

It is important that educators are aware of these symptoms and establish instructional strategies or classroom accommodations. The Minnesota Association for Children's Mental Health (2014) offers the following suggestions: establish a feeling of safety and acceptance within the classroom; provide consistent and predictable routines, try to eliminate stressful situations in the classroom, and incorporate large muscle activities into the day. For educators, it is important to understand the effects of trauma and the manifestations that it can present. Being aware of these symptoms may help understanding the deep impact trauma can have on traumatized students, specifically refugees and immigrants. A traumatic event can have lasting effects on a child and can interrupt school routines and the learning process (National Child Traumatic Stress Network, 2017).

In a closely related study focusing on the challenges of youth marginalization in Africa, Sommers (2005) voiced the need for the provision of adequate societal support in the development of youth within the African continent. The role of communities and society in the development of youth is reminiscent of the African

proverb: “It takes a village to raise a child”, which loosely translated, means that the broader contextual environments such as communities and societies within which young people are growing up, are major contributors to the psychosocial wellbeing of such individuals (Taylor, 2011). The recent work of Koen (2012) and Khumalo (2011) provided much evidence of the socio-demographic variables that influence the wellbeing and mental health of families and individuals of African descent. The

UN Inter-agency Standing Committee Guidelines on Mental Health and Psychosocial Support in Emergency Settings underscore the importance of schools as a part of the holistic psychosocial response necessary to assist war-affected youth. The supporting literature also suggests that being in school, under the right conditions, can promote the psychosocial recovery of refugee children. Schools can play a fundamental role in supporting refugee children and youth in dealing with psychosocial transitions. A key way to support the psychosocial recovery and wellbeing of refugee children and youth at school is to incorporate interventions, such as psychosocial support (PSS) and social and emotional learning (SEL) activities, into curricula or school-based activities (Save the Children, 2015). These approaches help teach refugee children how to regulate strong emotions and deal with traumatic stress reactions, such as concentration problems and flashbacks, which is critical for refugee children and youth who have survived war violence.

School and individual therapeutic interventions must be interlinked to reconstruct a sense of social belonging in a way that validates the cultural identities of refugees. Consequently, both schools and families must adapt and create a safe environment to support the child’s transition. Recovery from trauma can only occur in the context of relationships; it cannot occur in isolation (Herman, 1992). Therefore, the

empowerment of the young person in these social contexts is vital. All attempts to facilitate the refugee child's healing process through therapeutic interventions should match the social and cultural context and include culturally sensitive activities. It is therefore important to obtain cultural knowledge relative to particular conflicts, learning and emotional or behavioral problems. Therapy also must recognize any healthy and constructive components of cultural bereavement. This is essential to the healing process.

In a study of psychosocial wellbeing of children in an African context, Melato, Van Eeden, Rothmann, and Bothma, (2017) described psychosocial wellbeing as a widely used term which was defined in different ways. These authors pointed to the fact that academic and social programming theories described psychosocial wellbeing as an encapsulation of multiple factors such as the mental, economic, spiritual, social, as well and physical health of human beings (Shah, Yezhuang, Shah, Durrani, Shah, 2018). The term was originally used to address developmental changes, which young people go through as they are growing up, i.e., psychological, emotional, and social developmental changes (Duncan and Arnston, 2005). However, this traditional description was treated as limiting, and the importance of an all-inclusive definition, which would incorporate all the dimensions of human functioning that contribute to global wellbeing, was highlighted. Such dimensions included, for example, feelings of belonging, secure relationships, and freedom to express love, anxiety, hopes and desires without fear of abandonment, discrimination or isolation (Shah et al., 2018). Of particular importance for research is to consider the interconnected nature of the relationship between a person to his/her family and community, especially when working with participants of African descent (Sommers, 2001, 2002, 2005). As noted

by Shah et al., (2018), this relationship has a major impact on the psychosocial development of young people, and the design of new frameworks and research efforts should take this into consideration. Furthermore, Evans (1999) found that the general wellbeing of youth is a complex, multifaceted, systemic process that includes the personal, relational as well as collective contexts within which the young people exist. The collective context referred to variables such as healthy early childhood development, conducive to supportive environments and the facilitation of autonomy, support and empowerment, which were also identified as positive determinants of wellbeing in young people (Rousseau and Guzder, 2008; Wellman and Bey,2015).

2.7 Challenges schools face when supporting refugee learners dealing with psychosocial problems

Host country schools encounter significant challenges when supporting refugee learners and addressing their psychosocial problems. When there are gaps in understanding the resettlement histories of refugee children, these students often struggle with their sense of belonging, relationships with teachers, and access to adequate academic and psychosocial services (Dryden-Peterson, 2015). In the United States, language barriers, privacy concerns, cultural misunderstandings, and stereotypes frequently result in these histories being hidden from teachers and staff (Dryden-Peterson, 2015; Melaku, 2016). Most schools fail to focus on the pre-arrival conditions of refugee learners, with little attention given to their previous educational experiences (Nickerson et al., 2014).

The failure to scale up mental health interventions in schools significantly impacts their ability to support refugee children, as indicated by several studies (Valtonen, 2008 ; Chang-Muy and Congress, 2015; Robila, 2018). Scaling up psychosocial

interventions, including task shifting - transferring tasks from specialists to less specialized workers like teachers - can greatly assist schools in supporting learners with psychosocial problems (Robila, 2018). Schools without accommodating and inclusive curricula often see increased issues of bullying and depression among learners, highlighting the importance of an inclusive curriculum (Hek, 2005).

Emotional and behavioral difficulties, which are part of psychosocial problems in refugee learners, are considered special needs (McBrien, 2005). Schools lacking special needs provisions, including specialized teachers, face challenges in addressing these issues. This gap in special needs provision and specialization may lead to an underrepresentation of learners with such problems and affect how they are assisted in a school setup (Rutter, 2003 ; Hek, 2015). At an Afia refugee camp, lack of trust among refugee community members and insufficient support from donor agencies were identified as major challenges affecting teachers (Melaku, 2016). Adequate financial support is critical for providing relevant psychosocial support services, and schools with limited resources face significant challenges in supporting learners with psychosocial problems.

2.8 Theoretical framework

There are a considerable number of theories used by researchers to model behavioral patterns in refugee children and explain their psychosocial problems in a school setting. For the purposes of this research and the depth of issues proposed for study; the social support theory is used to underpin the research.

2.8.1 Social support theory

The social support theory was initially developed in the disciplines of sociology and epidemiology. Researchers have used this theory on the observations of the health-enhancing and health-limiting qualities of social relationships. The generic term 'social relationships' usually refers to one of the following three dimensions: (a) social integration or isolation, that is, the existence, type, or quantity of social relationships such as marriage and/or participation in voluntary organizations; (b) social network, that is, the structure of social relationships, including factors such as size and density; and (c) social support or the functions of social relationships, for example, emotional, instrumental, appraisal, and informational (Gonzalez et al., 2005).The theory has not been widely used to apply to refugee children. However, the theory best explains the link between the existence or quantity of individual's social contacts and social support. Researchers frequently consider three aspects of social support: (a) the quantity or availability versus the quality or adequacy of support; (b) the source of support, formal or contrived and informal, received from spouse, relatives, friends, neighbors, co-workers, professional caregivers, teachers (c) the perceived availability or actual occurrence of social support. Drawing from this theory, the research focuses on the perceived influences of the school, teachers, peers, and volunteers in promoting the psychosocial support needed to support each learner's learning and wellbeing. According to Gonzalez et al., (2005), the main issues concern how social relationships function, regardless of the specific dimension of interest.

2.9 Chapter Summary

This chapter has provided a discussion of relevant literature on psychosocial problems affecting refugees, the role that schools play in supporting the learning wellbeing of

concerned learners, as well as the challenges that schools and teachers face in providing support to these learners. The literature emphasizes the importance of schools in providing a holistic approach to supporting refugee learners. It highlights the need for culturally sensitive interventions, inclusive educational practices, and the integration of psychosocial support within the school environment. The review also underscores the complex, multifaceted nature of psychosocial well-being and the importance of considering the interconnected relationship between individuals, their families, and communities, particularly in African contexts. The chapter also reveals the theories on learning wellbeing and psychosocial support. The Social support theory has also helped the study give more reflections on the different urgings presented by scholars in general.

CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

3.1 Chapter overview

This chapter addresses the following aspects: research paradigm, research design and methodology, context and location of study, target population, sample size and sampling technique, research ethics, data collection techniques, and finally issues of data analysis.

3.2 Research paradigm

A paradigm is described as a set of beliefs or assumptions about reality, which forms the foundation of a particular worldview (Morgan, 1980; Mertens, 2012). As Patton (2002) observed, a paradigm is a worldview or a way of understanding the complexities of the real world. The paradigm employed in this study is the interpretive paradigm, which is rooted in the philosophy of interpretivism or social constructivism.

The interpretive paradigm is characterized by the following fundamental assumptions: Ontology (nature of reality): Reality is subjective and socially constructed. Multiple realities exist based on individuals' experiences and interpretations (Creswell, 2013). Epistemology (relationship between the researcher and the known): Knowledge is gained through understanding the meaning of the participants' experiences. The researcher and participants co-create understandings (Denzin and Lincoln, 2011). Methodology (how we gain knowledge): Qualitative methods are primarily used,

focusing on in-depth interviews, observations, and analysis of texts. The aim is to understand and interpret human behavior rather than to generalize or predict causes and effects (Neuman, 2014). Axiology (role of values): The researcher acknowledges that research is value-laden and biases are present. These values and biases are actively reported in the research (Creswell and Poth, 2018).

This interpretive framework guides the research process, emphasizing the importance of understanding the subjective experiences and meanings attributed by the participants. It recognizes that knowledge is constructed through the interaction between the researcher and the researched, and that findings are context-specific rather than universal laws (Schwandt, 2000).Within the interpretive paradigm, as Bryman (2016) notes, researchers have the opportunity to develop an idiographic understanding of participants' experiences and the meanings they attribute to particular situations within their social reality. This approach aligns well with the current study's aim to understand the real-world experiences of refugee learners in their camp environment.

The interpretive perspective of this study is complemented by insights from positive psychology, which focuses on the scientific study of human strengths and virtues (Seligman and Csikszentmihalyi, 2000). This combination allows for a nuanced understanding of the life tasks and developmental challenges faced by refugee learners identified with psychosocial problems. While traditional developmental psychology often viewed adolescence and early youth as periods of emotional turmoil (Lerner and Steinberg, 2004), the strength-based approach within positive psychology emphasizes the importance of recognizing and building upon individuals' unique talents, skills, and coping mechanisms learned from life events (Epstein, 2012).

This interpretive, strength-based approach aligns with the paradigm's ontological and epistemological assumptions. It acknowledges the multiple, socially constructed realities of refugee learners and seeks to co-create understanding through in-depth exploration of their experiences. Methodologically, it emphasizes asking questions that illuminate what enables refugees to achieve wellbeing, resilience, and positive development (Simich and Anderman, 2014), rather than focusing solely on deficits or challenges.

By integrating the interpretive paradigm with elements of positive psychology, this study aims to provide a rich, contextualized understanding of refugee learners' experiences, highlighting their strengths and adaptive capacities within their unique social and cultural contexts. This approach recognizes that knowledge is co-constructed between the researcher and participants, and that findings will be deeply rooted in the specific context of the refugee camp environment.As the primary research instrument in this study, the researcher employed an interpretive approach, recognizing that the process of collecting and interpreting data is inherently interactive and contextualized (Creswell and Poth, 2018). The interpretive paradigm acknowledges that research is a co-constructive process between the researcher and participants, aimed at understanding lived experiences within specific social contexts (Denzin and Lincoln, 2011).

In line with this paradigm, this study sought to understand the experiences of refugee learners in their camp environment, focusing on their strengths and adaptive capacities. This approach aligns with the strength-based school of thought, which is grounded in positive psychology (Seligman and Csikszentmihalyi, 2000). The

underlying assumption is that individuals, including refugee learners, possess inherent abilities to navigate adversity by drawing upon their strengths and virtues.

3.3 Research Design

This study adopted an interpretive, single case study design. Specifically, it employed an instrumental single case study approach (Stake, 1995; Yin, 2018), which is well-suited to exploring complex phenomena within their real-life contexts. This qualitative research focused on providing a detailed account of a single case to gain an in-depth understanding of the experiences of refugee learners with psychosocial problems in a specific camp setting.

A case study is a strategy of inquiry in which the researcher explores a bounded system (a case) over time, through detailed, in-depth data collection involving multiple sources of information (Creswell and Poth, 2018). In this study, the case is defined as the particular refugee camp and its educational support system for learners with psychosocial problems. Case study research uses multiple data collection methods. These data collection methods are focus group discussions, in-depth interviews, observations, personal reflection journals, and documents. Any of these data collection methods can used be when they help answer research questions. Additionally, data analysis approach in case study research begins with a holistic description and search for themes shedding light on the case. The focus of the report of case study research is the description of the context and operation of the case or cases. It also provides a discussion of themes, issues, and implications (Johnson and Christensen, 2004). This study used a case study of the Dzaleka Refugee Camp. With special focus on one of the primary schools in the refugee camp.

3.4 Research Methods

This study employed qualitative methodologies. Qualitative methods are designed and used to capture social life as it is experienced by participants (Kumar, 2005). According to Bernard (2006), qualitative methods are ideal for such studies due to their flexibility, which allows researchers to interact with study participants more effectively. According to Biggerstaff (2012), qualitative research play a role in facilitating our understanding of some of the complexity of biopsychosocial phenomena and thus offers exciting possibilities for psychology in the future. Maree, (2007) describes qualitative research as research methodology, which aspires to understand human processes, socio-cultural contexts underlying behavioral patterns and, most importantly, explores the "why" questions in research. Additionally, the main characteristic of qualitative research is to see the world through the eyes of the participant so that the phenomena can be described in terms of the meaning that they have for such participants (Maree, 2007).

3.5 Study location and Context

The Dzaleka Refugee Camp is located in Dowa District, central region of Malawi. By 31 January 2019, 38,297 refugees and asylum-seekers were resident in the camp. UNHCR (2014) reported that the camp was host to 9500 children and young people. The camp is the largest camp in Malawi, hosts refugees originating from 9 different countries, mainly in the Great Lakes Region. The great majority are from the Democratic Republic of Congo (DRC), Rwanda, and Burundi. A significant proportion of inhabitants are in a protracted situation, having been in the camp from five to ten years or even more.

With funding from the UNHCR, and many other partners, education at the camp is run by the Jesuit Refugee Services, who offer services for pre-school children less than 5 years old, primary education targeting 6 to 14-year old's, secondary education is offered to 13 to 18-year old's, and adult and vocational programs for out-of-school youth. About 5000 attend primary school and approximately 700 attend secondary school. Close to 15% of Malawian children from the surrounding communities also access education services in the camp (GoM, 2014). For this study, the research focused on the primary school in the camp, this is because it is the only school accessible to the refugee learners.

Refugee education in Malawi is mainly provided at Dzaleka Refugee Camp with the support of Jesuit Refugees Services (JRS), an education partner to UNHCR. In 2020 the pre-school had enrolled 1,454 (33.2 per cent), whilst the primary schools had enrolled 4,747 (47.7 per cent), and the Secondary School had enrolled 1,285 (29.7 per cent). UNHCR also supported vocational and skills training under Professional and Post- Secondary Education where 62 (16 females, 46 males) refugee students enrolled in the Digital Inclusion Program. To promote access to tertiary education for refugees, 47 (20 female and 27 male) students were supported with university scholarships under German Government DAFI Scholarship Program.

UNHCR was engaged with the Ministry of Education, UNICEF, and other education stakeholders with a view to advocate for inclusion of refugee education into the national education system. 300 refugee children were enrolled in Light of Hope Public Primary School and Ubuntu Pre-School under the management of Moravian Humanitarian Development Services and a Brazilian NGO both operational partners to UNHCR.

The COVID-19 pandemic necessitated UNHCR's collaboration and partnership with national actors which had positive outcomes. Some of the key achievements were inclusion of refugees in the national Education COVID-19 Preparedness and Response Plan and into GPE's COVID-19 response accelerated grant fund. As a result of the foregoing, refugee schools and teachers benefited from post-COVID recovery interventions and successfully re-opened schools on dates appointed by the Government.

Despite efforts made by the operation, gross school enrollment in the refugee schools still stood at 37%. Net primary school enrollment is 32% against 84% in the national schools. (Malawi: UNHCR Fact Sheet, August 2020).

3.6 Target populations

Participants to the study included refugee learners, school staff, and school management committee members at the primary school in the refugee camp. While the focus of this research was the refugee learners who have reported having and or displaying psychosocial problems, school staff like teachers were relevant to the researcher in triangulating information about the psychosocial problems of their learners.

3.7 Sampling Procedure

The study being qualitative, the researcher used purposive sampling to identify research respondents based on multiple stages of interface with individuals at the camp. Purposive sampling is atechnique used for identifying and selecting information-rich cases to make the most efficient use of limited resources (Patton, 2002). In qualitative research, purposive sampling is commonly used to identify and

select information-rich cases related to a phenomenon of interest. This entails locating and selecting individuals or groups of individuals who are particularly knowledgeable or experienced about a topic of interest (Cresswell and Plano Clark, 2011). Subsequently, study participants were selected for their roles, and membership, as well as position in the school.

3.7.1 Demographic characteristics of the study respondents

The researcher, conducted individual interviews with participants who agreed to take part in the survey at the Dzaleka refugee camp school, which included refugee learners, teachers, and school management committee members. Tables 2 through to 4, shows the survey distribution process among participants, as well as their demographic characteristics.

Table 1: Demographic characteristics of learners by gender and age (N=35)

	Frequency	Percentage
Gender		
Female	18	51.4
Male	17	48.6
Age		
Under 15	11	31.3
16-20	22	62.9
21-30	2	5.8

Table 2: Demographic characteristics of teachers by gender and age (N=5)

	Frequency	Percentage
Gender	-	-
Female	1	20
Male	4	80
Age	-	-
21-30	1	20
41-50	4	80

Table 3: Demographic characteristics of SMC members by gender and age (N=5)

	Frequency	Percentage
Gender		
Female	3	60
Male	2	40
Age		
31-40	2	40
41-50	1	20
Over 50	2	40

Table 4: Study's measurement data

Research questions	Methods	Source	Data collected	Type of analysis
What are the psychosocial problems that affect the learning wellbeing of refugee learners?	Qualitative (In-depth interviews)	Learners, Teachers, School Management committee	Learner demographics, learner psychosocial problems, learner behavior	Descriptive Narrative
What role does the school play to support the learning wellbeing of refugee learners with psychosocial problems in the refugee camp?	Qualitative (In-depth interviews)	Learners, Teachers, Documents,, School Management committee	Psychosocial interventions, School curriculum, Teacher capacities	Descriptive
What challenges does the school face when supporting learners to deal with psychosocial problems?	Qualitative (In-depth interviews)	LearnersTeachers, Documents, School Management committee	Challenges	Descriptive Narrative

3.8 Data collection techniques

Qualitative data come in a vast array of forms such as photos, maps, open-ended interviews, semi-structured interviews, questionnaire, teachers' diary entries, members of the school community, observations, document analysis, etc.

The researcher simplified such data into two major categories: field research (including observation, in- depth interviews) and documentation, and historical-comparative research. Information was collected by using semi-structured questionnaires (individual in-depth interviews: Appendix 2 to 5), as well as observations (observation checklist: Appendix 6). Interviews were conducted at the Dzaleka Refugee camp.

3.8.1 Information and data variables management

The research used the following variables and analyses during the study (Table, 4).

3.9 Data analysis techniques

According to Harawan (2012), data analysis approach in case study research begins with holistic description and search for themes shedding light on the case. It also provides a discussion of themes, issues, and implications (Johnson and Christensen, 2004). Thus, data in this study involved qualitative thematic analysis. According to Bruan and Clarke (2006) , thematic analysis is "a method for identifying, analyzing, and reporting patterns (themes) within data". It involves looking for and identifying common threads that run through an entire interview or set of interviews (DeSantis and Ugarriza, 2000). Thus, it was ideal for this study because it allowed for a subjective interpretation of the data collected providing relevant information.

Microsoft Excel 2019 package was used to develop descriptive statistics where were presented in the form of percentages. The NVivo 12 software was also used for data management and organization to simplify the data analysis process. NVivo is a data management tool designed to help qualitative researchers who work with very rich text-based data and need to perform deep levels of analysis on small or large volumes of data (Trigueros et al., 2018). In this study, NVivo was used to identify themes in the collected data and categorize the data based on the established themes. The purpose of the investigation, as expressed through the research questions and objectives, guided the identification of these categories or themes.

Qualitative data were analyzed based on the content described by the study participants and a consensus on thematic categories. To ensure trustworthiness; once the themes were identified, the researcher verified these with willing participants to ensure credibility, and this process is known as member checking (Creswell, 2008). Furthermore, literature control was conducted; research findings are discussed as related to the context of the Dzaleka refugee camp context; and compared with previous studies conducted on the prevalence of psychosocial problems and the educational wellbeing of refugee learners (Theron and Theron, 2010). The literature is used as a means of data validation, by identifying the findings, which are unique to this study, those findings in the literature that are not evident in this study, as well as findings, which are common in this study and in previous research (Burns and Grove, 2005).

3.10 Limitations

The language barrier was also an issue to consider, due to the different languages spoken at the camp, conducting the interviews required that the participants and

researcher could understand each other using a common language such as 'English' ,thus the researcher used languages that could be understood by the participant, and allowed common understanding between them. Additionally, because the study was conducted during the Covid-19 pandemic, there were health concerns for the Covid-19 pandemic for participants; there was alsolimited time allocated for the interviews , which together with the sensitive nature of interviews also affected the interviews process; this also significantly increased the costs for the study.

3.11 Research ethics

Every researcher is responsible for ensuring the safety and wellbeing of their research participants and must obey to all the relevant ethical guidelines when conducting research (Habnurawan, 2012). For each interview, oral consent was sought from the respondents and participants, much so that the whole process was consensual. Permission to conduct the research was first sought from responsible authorities including the Ministry of Home Affairs and Dzaleka Refugee Camp, and an introductory letter about the research was obtained from the University of Malawi, Chancellor College.

Respondent's anonymity was considered in the course of administering interviews. In the sense of confidentiality, participants were assured that their personal identities would be removed or changed from the written data and presentation of the analysis (Esin, 2011). Thus no identifiers were used, and respondents were assigned codes. Before the interviews, the researcher explained the independence of the research and that the data obtained would only be used for the research and academic purposes.

3.12 Chapter summary

In this chapter, an outline of the research methodology used to arrive at the results of the study objective and research questions. The study's participants included, school teachers, school management committee members and concerned learners at the primary at the Dzaleka refugee camp. Purposive sampling was used to identify study participants (learners) through interactions with school staff. The researcher also considered the limitations and ethical issues in the data collection process. Additionally, the chapter also discusses the data analysis techniques used in the study.

CHAPTER FOUR

FINDINGS

4.1 Chapter overview

This chapter presents the findings of the study, using the specific research questions as outlined in chapter 1. The main research question of the study was to find out what role schools play in supporting refugee learners who have psychosocial problems that affect the learning wellbeing of learners at the Dzaleka Refugee Camp. The findings are presented based on themes drawn from the responses to the research questions of the study.

4.2 Psychosocial issues among refugee learners affecting learning wellbeing

The first research question sought to gather, if concerned learners were having psychosocial related problems at the school. The study established that indeed concerned learners were showing signs of psychosocial problems. The teachers reported that they witnessed learners who were having difficulty managing their emotions that some externalized their emotions, and others internalized them. *'I have seen learners who seem to be disconnected from the world and feel that their lives are meaningless'* (Teacher B). Another teacher also explained that 'there *are learners who display a lack of concentration in class, and they often disrupt learning by distracting other learners and teachers'* (Teacher A). Tables 5 to 7 present some responses of the learners regarding their experiences.

Table 5: Responses to the question on psychosocial problems experienced by concerned learners (N=35)

What psychosocial problems do you experience?	Frequency	Percentage
Uneasiness	16	45.7
Helplessness	14	40
Fatigue	11	31.4
Impairment of Concentration	3	8.6
Mental and cognitive reservation	1	2.9

Regarding the experiences of the learners concerned (Table, 5), a majority (45.7 %) indicated that they felt uneasiness, closely followed by helplessness (40%). Fatigue was also reported in the affected learners (31%). It is obvious from this finding that the learners experience feelings of uneasiness, helplessness, fatigue, impaired concentration, and mental and cognitive reservation.

Table 6: Responses to question on how often concerned learners felt distressed/disturbed/ upset (N=35)

How often participants during last two weeks felt distressed/disturbed/upset		
	Frequency	**Percentage**
All the time.	3	8.6
Most of the time	9	25.7
Some of the time	14	40
None of the time	7	20
Don't know	2	5.7

Although it is evident that only a few learners indicated that they felt these emotions all the time (8.6%), other learners indicated that they felt these feelings some of the time (40%) to the question on how often in the last two weeks before the survey had the concerned learners felt distressed/ disturbed/ upset (Table, 6). Overall, it is established that the participating learners were experiencing these feelings, except for a few other learners.

Table 7: Responses to questions on the feeling of uninterest of the learners concerned with things they used to like (N=35)

How often participants during last two weeks felt uninterest in things used to be liked		
	Frequency	**Percentage**
All the time.	2	5.7
Most of the time	10	28.6
Some of the time	17	48.6
None of the time	5	14.3
Don't know	1	2.9

Regarding the feeling of uninterested in things that were used to be liked by learners, the study found that almost half (48.6%) indicated that they felt this some of the time, while others indicated most of the time (28.6%) and all of the time (5.7%) (Table, 7). Discuss

Table 8: Responses to question on concerned learners feeling of severe upset and avoidance of places/conversation/people (N=35)

How often participants during last two weeks felt severely upset and avoided places/conversations/people		
	Frequency	**Percentage**
All the time.	1	2.9
Most of the time	9	25.7
Some of the time	15	42.9
None of the time	8	22.9
Don't know	2	5.7

With regards to the question about whether concerned learners had in the two weeks before the survey that they felt severely upset and avoided places/conversations with people. Similarly, almost half (42.9%) the concerned learners indicated that they felt this way some of the time, while only 2.9% and 25.7% indicated all of the time, and most of the time, respectively (Table, 8).

The learners expressed that they experienced psychosocial issues and were unable to point them out. However, they also identified other psychosocial issues, which affected there learning wellbeing. These included, the adjustment to the new environment, feeling of not belonging, lack of support from home, lack of activities and interests, and feeling isolated.

4.3 Role of schools in supporting the wellbeing of learners

The second research question of the study aimed to determine the role of the school in supporting concerned refugee learners in coping with psychosocial problems. The study's findings from the interviews showed that the school provides general and targeted psychosocial support—home visits, referrals, involvement in and out of class, and relationship building—to help concerned students deal with psychosocial issues and enhance their learning wellbeing. The school's teachers and members of the school management committee also provided this support.

4.3.1 Home visits

The individual interviews with the learners, SMC members and teachers all revealed that the concerned learners, are sometimes visited in their homes to talk and offer them counselling together with their parents. This is done to provide guidance to parents and/or guardians on how they can help the learner's right in their homes. Interview 3, with SMC member said that:

> "*We have had cases reported to us, and where necessarily have gone to the children's homes to consult with their parents, and offer some guidance*" (SMC member C, Female member).

Similarly, an interview with a concerned learner, revealed that:

> *'Since I'm the young one at home, when the SMC members visited, they talked to my elder sister to allow me time to rest and focus on my studies.'* (Learner P, Female learner).

Through the home visits, teachers and SMC members provide the learners support academically, psychosocial, and socially; It is also established that through the visits the concerned learners are given due importance by the school. It is also appreciated that some of the concerned learners are not equipped with the necessary skills and knowledge to manage their psychosocial problems, and learning tasks at home. According to most learners, the home visit by teachers brings them to the learning environment. The home visits by teachers help other family members to understand learning, learning environment, learning strategies and how to communicate with the learners with psychosocial problems. The home visit by the teachers also helps to solve some of the psychosocial issues that may arise from the homes. This is important because, it is critical to understand that parents and guardians have their own problems that they themselves cannot help unless they are trained to cope with it, which extends to the learners.

These findings also reveal that the parents and teachers and SMC members are a great source of support to students who are facing learning difficulties due to psychosocial challenges.

4.3.2 Referrals

The findings of the study also revealed that the school also makes referrals of learners to the psychosocial support unit at the camp for counselling. Teachers who did not receive any psychosocial training would also refer to teachers who have received training on psychosocial problems. However, the teachers indicated that they do not have specialized health training and they refer some cases of concerned learners to the camp experts.

'I had a case once, and I referred it to a fellow teacher" (Teachers A, Male teacher).

'We *have referred some cases to the psychosocial support unit'* (SMC member E, Male member).

4.3.3 In-class and off-class engagement

From the interviews, some teachers revealed that they have tried to engage positively with the concerned learners in class by giving them special attention. For example, a teacher may pair up concerned learners with other active learners to get them to pay more attention in class.

"*Out-side classes during extra curricula activities, we try to ensure that concerned students take part in sporting activities that they enjoy*" (Head teacher A)

Additionally, the teacher may give the concerned learners an opportunity to ask questions or raise concerns during class. However, most of the teachers shared that they have limited influence over the concerned learners, as they tend to withdraw or show little interest in classroom activities. This highlights the need to develop strategies that can be used by teachers to improve the engagement of their learners with the school setting.

4.3.4 Building relationships.

Through the interviews, the study has also established that the teachers have built positive relationships with the learners. One learner mentioned that "*My teacher always used to encourage me in class, and advised me to refrain from engaging in*

bad behaviors; I have since stopped as I felt the teacher loved me" (Learner AB, Male learner).

4.4 Satisfaction with the support received

The researcher further asked the concerned learners about whether they were satisfied with the support that they received from the school. Almost three-quarters (73%) reported that they were satisfied with the support that they received from the school. From the responses, the answers indicated that through the support the school was providing, some of these learners were benefiting and had made significant progress with their learning. When the teachers were asked to provide evidence of whether the support that the school provided was improving the learners learning wellbeing; The teachers also indicated that some learners that were not doing well in class had improved in their participation in class and their performance during exams had improved significantly. For example, there were students who would not pass any exam, but with the support of the teachers, they had passed most of the exams and scored higher marks. The SMC members indicated that they appreciated the role that psychosocial support was playing in improving the performance of the learner at school and wanted it to be prioritized to help the concerned learners. They indicated that concerned learners school behavior and performance has adjusted for the better.

> *'The concerned learners have shown an improvement in class performance, previously in continuous assessment exercises the concerned learners used to score low marks but now there is tremendous improvement which is a positive indicator". (*Teacher A, Male teacher).
>
> *"Yes, because our children are exposed to many things when they go home, the support definitely makes it better"* (SMC member C, Female member).

4.5 Challenges facing the school in providing psychosocial support

The third research question was to determine the challenges that the school faced in supporting learners in dealing with psychosocial problems. The study established that the school lacked trained personnel (teachers), lack of funds, and the disappearance of leaners, had no structured routine, and lacked specialized curriculum material.

4.5.1 Lack of trained personnel

From the interviews, the study established that the lack of trained personnel was affecting the quality of support provided to the concerned learners. Among others, only three teachers at the school are trained in psychosocial issues, and only one teacher is a Special Needs Education (SNE) teacher. This shortage of teachers, for instance, causes a lack in teaching methods that improve learner's wellbeing.

> *'Communication is the biggest challenge since the school has a shortage of SNE teachers, so we have only one'* (Teacher B, Male teacher).

4.5.2 Lack of funds

The study also established that the school lacks funds to implement some of the much-needed interventions to provide psychosocial support to learners. The schools do not have the sufficient funds to provide a conducive environment at the school. From the researcher's observations, it was observed that the school does not have the proper structures to provide a conducive environment for good learning wellbeing.

'The *school does not have enough resources'* (SMC member D, Male member)

> "*Due to lack of funds, it becomes difficult to assist accordingly*" (SMC member A, Male member)

4.5.3 Leaving of learners

The study has established that another challenge that the school has been facing is the leaving of concerned learners. Through interviews, it has been revealed that some of the learners concerned will opt to drop out of school. Other students are still at the camp, while others have moved on to other countries, for example, South Africa. This has prevented the school from reaching out to the concerned learners, as some are difficult to follow up.

> *"Psychosocial workers sometimes find it difficult to conduct follow ups as some concerned learners leave for another country, especially South Africa"*
>
> (SMC member C, Female member)

4.5.4 No structured routine

The evidence from the interviews also revealed that the school does not have a structured routine for working with the concerned learners. A teacher responded, mentioning that "*There is no established structure to conduct guidance and counseling to learners with psychosocial trauma, hence such help is not given often*". According to responses from the questionnaire, if the school had a structured routine the teachers would just follow the guidelines. All responses (100%) indicated that the school did not have a structured routine that directed how it dealt with psychosocial issues among learners. Thus, teachers will have to make decisions depending on the concerned learner, about whether they counsel them themselves or refer them to experts.

4.5.5 No special curriculum material

The study has also established that the school did not have a special curriculum for promoting mental health among the concerned learners. This is apart from the extracurricular sporting activities that the school offers. Similarly, this agrees with the earlier finding that the school does not have recreational books and other play materials that could be used to create a conducive learning environment for learners.

> "*The school does not have special curricula material and personnel to handle the mammoth psychosocial problems among refugee learners".* (Teacher C, Female teacher)

4.6 Chapter summary

The chapter has offered the qualitative and descriptive analysis of the study. The study has observed that the concerned learners do experience forms of psychosocial problems. It has also been established that these psychosocial problems are perceived to affect the learning wellbeing of the learners, and has affected their class performance. The school has a role in supporting these concerned learners through several interventions, including engaging of learner's directly and where necessary making referrals. It was also observed that although the school supports these concerned learners, there are still challenges which challenge and undermine these efforts. Such challenges include the lack of trained personnel and lack of finances. The study findings and discussions provide an explanation of these psychosocial problems, the role of the school, and challenges faced in providing psychosocial support to learners.

CHAPTER FIVE

DISCUSSION

5.1 Chapter Overview

This chapter provides a discussion of the findings presented in Chapter Four, interpreting the results in light of existing literature and theoretical frameworks. The discussion is structured around the main themes that emerged from the research questions: psychosocial issues affecting refugee learners, the role of schools in supporting learner wellbeing, learner satisfaction with support, and challenges in providing psychosocial support. Each section examines the implications of the findings, drawing connections to previous research and considering the broader context of refugee education and psychosocial support.

5.2 Psychosocial Issues among Refugee Learners Affecting Learning Wellbeing

The findings of this study reveal a range of psychosocial issues affecting refugee learners at Dzaleka Refugee Camp, including uneasiness, helplessness, fatigue, impaired concentration, and mental and cognitive reservation. These results align with previous research on refugee children's mental health and educational experiences (Zipfel et al., 2019; Harrap ,2016; Fazel et al., 2012; Hoot 2011; Tyrer and Fazel, 2014; Keating and Ellis, 2007). For instance Keating and Ellis (2007), indicated that refugee learners in primary schools who have psychosocial problems have shown relatively severe cases of uneasiness and discontent in class. Zipfel et al., (2019) in

their study also found that learners had been displaying their emotions externally by engaging in fights with other learners, and disturbing classes. Harrap (2016) reported that teachers in refugee camp schools observed that learners with psychosocial issues were often isolated from the rest of the class, often quiet, withdrawn, and found it difficult to connect with others. From these findings, it is evident that the wellbeing of the learners concerned is affected, and therefore, their participation and performance in classes will be compromised. In his study, Hoot (2011) explained that other learners having psychosocial problems had dropped out of school, as they could not concentrate in class.

The high prevalence of uneasiness (45.7%) and helplessness (40%) among the surveyed learners is particularly concerning. These feelings can significantly impact a child's ability to engage in learning activities and form social connections, which are crucial for academic success and overall wellbeing (Pastoor, 2015). The experience of fatigue (31.4%) reported by learners may be attributed to the ongoing stress of displacement and adaptation to a new environment, as well as potential sleep disturbances common among refugee populations (Bronstein and Montgomery, 2011).

The findings also indicate that a significant proportion of learners experience distress, loss of interest in previously enjoyed activities, and avoidance behaviors. These symptoms are consistent with post-traumatic stress disorder (PTSD) and depression, which are frequently observed in refugee children (Derluyn and Broekaert, 2007; Kia-Keating and Ellis, 2007). The cyclic nature of these experiences, with many learners reporting symptoms "some of the time" or "most of the time," suggests a chronic state of distress that may fluctuate but persists over time.

The psychosocial issues identified in this study have significant implications for learning wellbeing. Impaired concentration and mental reservation directly affect cognitive processes essential for learning, while feelings of uneasiness and helplessness can undermine a student's self-efficacy and motivation to engage in educational activities (Pastoor, 2015). Moreover, the avoidance behaviors reported by some learners may lead to social isolation and reduced participation in school activities, further compromising their educational experience and social integration.

These findings also underscore the complex interplay between psychosocial wellbeing and learning among refugee students. They highlight the need for a holistic approach to education that addresses both academic and psychosocial needs, as advocated by researchers such as Tyrer and Fazel (2014) and Pastoor (2015).

5.3 Role of Schools in Supporting the Wellbeing of Learners

The study has revealed that schools play a multifaceted role in supporting the wellbeing of refugee learners through various interventions, including home visits, referrals, in-class and off-class engagement, and relationship building. These findings align with the growing body of literature emphasizing the importance of schools as key sites for psychosocial support and intervention for refugee children (Tyrer and Fazel, 2014; Sullivan and Simonson, 2016).

5.3.1 Home Visits

The practice of home visits by teachers and School Management Committee (SMC) members represents a significant effort to bridge the gap between school and home environments. This approach aligns with ecological systems theory (Bronfenbrenner, 1979), which emphasizes the importance of connections between different settings in

a child's life. By engaging with families in their home environment, educators can gain a more comprehensive understanding of the learners' challenges and provide contextualized support.

Home visits also serve to empower parents and guardians, providing them with guidance on supporting their children's education and psychosocial wellbeing. This is particularly crucial in refugee contexts, where parents may be dealing with their own trauma and adjustment issues (Dryden-Peterson, 2015). By fostering stronger school-home connections, these visits can create a more supportive and consistent environment for learners, potentially mitigating some of the psychosocial challenges they face.

5.3.2 Referrals

The referral system described in the findings demonstrates an awareness of the limitations of school-based support and the need for specialized interventions in some cases. This approach is consistent with best practices in school-based mental health services, which emphasize the importance of collaboration between education and health sectors (Fazel et al., 2014).

However, the reliance on referrals also highlights potential gaps in school-based psychosocial support. The need for frequent referrals may indicate a lack of capacity within the school to address more complex psychosocial issues. This underscores the importance of building capacity among teachers and school staff to provide first-line psychosocial support, as advocated by INEE (2016) and other organizations working in refugee education.

5.3.3 In-class and Off-class Engagement

The efforts to engage learners both within and outside the classroom setting reflect an understanding of the importance of creating a supportive and inclusive school environment. Strategies such as pairing concerned learners with more active peers and encouraging participation in extracurricular activities align with research on fostering resilience in refugee children through positive school experiences (Pastoor, 2015; Tyrer and Fazel, 2014).

These engagement strategies can help to counteract feelings of isolation and disconnection reported by many learners. Participation in sports and other extracurricular activities, in particular, has been shown to have positive effects on the psychosocial wellbeing of refugee children, providing opportunities for social connection, skill development, and positive experiences (Nathan et al., 2013).

However, the reported limited influence of these strategies on some learners highlights the challenges of engaging students experiencing significant psychosocial distress. This suggests a need for more targeted, trauma-informed approaches to classroom management and pedagogy (Sullivan and Simonson, 2016).

5.3.4 Building Relationships

The emphasis on building positive relationships between teachers and learners, as well as among peers, is a crucial aspect of the school's support role. This aligns with attachment theory and research on the importance of supportive adult relationships for children who have experienced trauma and displacement (Betancourt and Khan, 2008). The reported improvements in behavior and academic performance attributed to these positive relationships underscore the potential of schools to serve as a

stabilizing force in the lives of refugee children. By providing a sense of continuity, safety, and belonging, schools can play a critical role in promoting psychosocial wellbeing and resilience (Pastoor, 2015). The extension of these relationships to include school leadership and collaboration with NGOs demonstrates a whole-school approach to supporting learner wellbeing. This holistic strategy is consistent with best practices in school-based mental health promotion and intervention (Fazel,et al., 2014).

5.4 Satisfaction with Support Received

The high level of satisfaction (73%) reported by learners regarding the support they received from the school is an encouraging finding. It suggests that despite the challenges and limitations identified, the school's efforts are having a positive impact on many learners. This aligns with research indicating that school-based interventions can significantly improve the psychosocial wellbeing of refugee children (Tyrer and Fazel, 2014; Sullivan and Simonson, 2016).

The reported improvements in class participation and exam performance among supported learners provide tangible evidence of the link between psychosocial support and academic outcomes. This supports the argument that addressing psychosocial needs is crucial for improving educational outcomes among refugee learners (Pastoor, 2015).

However, it is important to note that satisfaction with support does not necessarily equate to the resolution of psychosocial issues or the achievement of optimal wellbeing. The 27% of learners who were not satisfied with the support received warrant further investigation. Understanding the reasons for their dissatisfaction could provide valuable insights for improving support strategies.

Moreover, the reliance on self-reported satisfaction and teacher observations of improvement, while valuable, highlights the need for more systematic and objective measures of psychosocial wellbeing and academic progress. Future research could benefit from incorporating standardized assessments of mental health and academic achievement to more rigorously evaluate the impact of school-based support.

5.5 Challenges in Providing Psychosocial Support

The challenges identified in providing psychosocial support to refugee learners at Dzaleka Refugee Camp reflect broader issues in refugee education and mental health services globally (UNHCR, 2019). These challenges have significant implications for the effectiveness and sustainability of school-based psychosocial support.

5.5.1 Lack of Trained Personnel

The shortage of teachers trained in psychosocial support and special needs education is a critical barrier to providing effective support. This aligns with global trends in refugee education, where teacher training and capacity building are consistently identified as key challenges (INEE, 2016; Mendenhall et al., 2015). The lack of specialized personnel not only limits the scope and quality of psychosocial support but also places additional stress on untrained teachers who may feel ill-equipped to address complex psychosocial issues.

As has been indicated, learning is also linked to the experiences of the learners, and how well their teachers are supporting them. Having more teachers who are trained to assist and support learners with psychosocial problems could serve as a good resource for the school, and improve the learning wellbeing of concerned learners (Earnest, 2006). The social support theory also supports this assertion. From the viewpoint of

the learners, being able to perceive the importance and help received from the teachers is essential for their development and moving towards healing and improved learning.

This challenge underscores the need for comprehensive teacher training programs that incorporate modules on psychosocial support and trauma-informed pedagogy. Such training should be ongoing and integrated into regular professional development activities to ensure that teachers can respond effectively to the evolving needs of refugee learners (Winthrop and Kirk, 2005).

5.5.2 Lack of Funds

The financial constraints reported by the school have far-reaching implications for the provision of psychosocial support. Limited funding affects the school's ability to create a conducive learning environment, provide necessary materials, and implement comprehensive support programs. This challenge is consistent with the broader issue of underfunding in refugee education globally (UNHCR, 2019).

The relationship between learning wellbeing and the lack of a good environment for learning can be explained in terms of the social support theory. According to this theory, learning wellbeing may be influenced by the perceived availability or actual occurrence of social support. Thus, with reduced funding, more learners may shy away from attending the school, a situation that may rob the concerned learners of a positive learning environment provided by the other learners. For better learning wellbeing, the school environment must fulfill certain aspects that make the concerned learners feel supported. Furthermore, the research has indicated that the

satisfaction of support predicts psychological and learning wellbeing (Mokgele and Rothmann, 2014).

The lack of resources for play materials and appropriate infrastructure directly impacts the school's capacity to provide a nurturing environment that promotes psychosocial wellbeing. This highlights the need for increased investment in refugee education, with a specific focus on holistic support that addresses both academic and psychosocial needs (Dryden-Peterson, 2015).

5.5.3 Leaving of Learners

The reported leaving of learners, whether due to dropout or onward migration, presents a significant challenge to providing consistent psychosocial support. This issue reflects the complex and often unstable nature of refugee situations, where families may move frequently in search of better opportunities or due to changing circumstances (Dryden-Peterson, 2015).

Similarly, this can be explained by the social support theory. Thus, higher levels of learning wellbeing are supposed to mirror the fulfillment of the support systems available to the learners at the school. Having less of the support system may result in learners dropping from school. Besides this, it could be explained that the learners are no more motivated by the support systems available to them to continue with school.
This is because to access the support system at school, learners need to be recognized at the school as learners. This is impossible if the learners are not present in the school. This is where the need for support systems arises, which follow up on the learners who are absent from school. In this way, the support systems ensure that the learners do not feel stigmatized, and continue to access the support systems at school.

This, however, is not possible for the majority of refugee learners, as they are not yet completely integrated into the school. As a result, they miss out on the support systems that are offered at school, which ultimately results in them dropping out. When a learner is absent from school, the support systems at school cannot recognize the learner as a student. This makes it difficult for the support systems to provide the learners with the support that they need.

The difficulty in following up with these learners highlights the need for more robust systems to track student movement and maintain continuity of support. It also underscores the importance of creating strong, supportive school environments that encourage regular attendance and reduce the risk of dropout (INEE, 2016).

5.5.4 Lack of Structured Routine

The absence of a structured routine for addressing psychosocial issues is a significant gap in the school's support system. Without clear guidelines and procedures, the provision of psychosocial support may be inconsistent and dependent on individual teacher initiative. This lack of structure can lead to missed opportunities for early intervention and support.

Taking the underlying concept of routines into account can assist in explaining how the absence of a routine may affect the learning wellbeing of concerned learners. Having no routine entails that the support system available at the school is not uniform and cases of concerned learners are treated differently every time. If we also consider the social support theory, it goes to show that the available support may not be adequate to fulfill a significant change in the lives of the concerned learners.

Furthermore, other concerned learners may not be discovered in time, and support may be provided too late.

This point towards the importance of having a structured routine in schools to ensure that the most vulnerable learners are doing the most they can with the support they receive. This will also help to ensure that the concerned learners are not excluded or unsupported. It will also ensure that learners with psychosocial issues are discovered and provided with the needed support in a timely manner. This will have a positive impact on the learning and wellbeing of the concerned learners. School officials and teachers can direct concern learners to the available support system at the school. It should also be noted that school policies, like “No child left behind”, could also be used as a reference when making decisions regarding the concerned learners. For example, if a concerned student is not in school, the school official or teacher could follow up with the concerned.

Developing a structured routine for identifying and supporting learners with psychosocial needs should be a priority. Such a routine could include regular screening, clear referral pathways, and scheduled follow-up procedures. This would align with best practices in school-based mental health services, which emphasize the importance of systematic approaches to identification and support (Fazel et al., 2014).

5.5.5 Lack of Special Curriculum Material

The absence of a specialized curriculum and materials for promoting mental health among refugee learners is a significant limitation. This gap reflects a broader challenge in refugee education: the need for contextually appropriate, culturally

sensitive materials that address the unique needs of refugee learners (Mendenhall et al., 2015).

Additionally, the social support theory may be used to explain the relationship between concerned learners learning wellbeing and psychosocial problems. Having a special curriculum may assist in bringing familiar concepts such as culture, which are important aspects of their identity. Here, having no special curriculum may mean that the school is lacking materials that could promote mental health and support the integration of the concerned learners. It can be inferred therefore, that the need for special learning materials is required in a school setting that has refugee learners.

The need for a special curriculum in refugee camp schools is critical to the wellbeing of the concerned learners. It is important to provide the concerned learners with the necessary learning materials that could help them overcome the psychosocial problems. This will ensure that they could be on par with the other learners in the school and have an opportunity to be successful. This could also reduce the risk of them dropping out of school.

Thus, developing a curriculum that integrates psychosocial support with academic content could provide a more holistic approach to refugee education. Such a curriculum could incorporate elements of social-emotional learning, stress management techniques, and cultural affirmation, all of which have been shown to promote resilience and wellbeing among refugee children (Sullivan and Simonson, 2016).

CHAPTER SIX

CONCLUSION AND IMPLICATIONS OF FINDINGS

6.1 Introduction

This chapter presents the conclusions, implications, and interpretations of the study findings on the role of schools in providing psychosocial support to refugee learners at Dzaleka Refugee Camp.

6.2 Study conclusions

The study was designed to establish the roles of schools in providing psychosocial support to refugee learners with psychosocial problems. Based on the findings, the study concluded that:

1. Refugee learners at the Dzaleka refugee camp school are affected by various psychosocial problems, expressed both internally and externally. These include uneasiness, helplessness, fatigue, and cognitive impairment.

2. The school provides targeted psychosocial support to concerned learners through various means, including home visits, referrals, and in-class and off-class engagement.

3. The support provided has helped improve the learning wellbeing of the learners, leading to improved behavior and class performance.

4. The school faces significant challenges in providing effective psychosocial support, including lack of funds, trained personnel, and specialized curriculum materials.

5. There is a need for additional support to enhance and improve the school's capacity to support learners with psychosocial needs.

6.3 Study Implications

The findings of this study have several implications for improving psychosocial support for refugee learners:

1. Teacher Training: There is a clear need for comprehensive, ongoing training for teachers in psychosocial support and trauma-informed pedagogy.

2. Resource Allocation: Increased funding is needed to create conducive learning environments and provide necessary materials for psychosocial support.

3. Structured Support Systems: Developing clear routines and procedures for identifying and supporting learners with psychosocial needs should be a priority.

4. Curriculum Development: There is a need for specialized curriculum materials that integrate psychosocial support with academic content.

5. Community Engagement: Strengthening connections between schools, families, and community organizations can create a more comprehensive support network for learners.

6. Monitoring and Evaluation: Implementing systematic methods for tracking learner progress and evaluating the impact of support interventions is crucial for improving program effectiveness.

6.4 Limitations and Future Research

This study provides valuable insights into the role of schools in supporting the psychosocial wellbeing of refugee learners. However, several limitations should be acknowledged:

1. The study focused on a single refugee camp, which may limit the generalizability of findings to other contexts.

2. The reliance on self-reported data and teacher observations may introduce bias and limit the objectivity of the findings.

3. The cross-sectional nature of the study does not allow for the assessment of changes in psychosocial wellbeing over time.

Future research could address these limitations by:

1. Conducting comparative studies across multiple refugee settings to identify common challenges and effective support strategies.

2. Incorporating standardized measures of psychosocial wellbeing and academic achievement to provide more objective assessments of program impact.

3. Implementing longitudinal studies to track changes in learner wellbeing and academic performance over time.

4. Exploring the perspectives of parents, community members, and other stakeholders to provide a more comprehensive understanding of the support ecosystem for refugee learners.

5. Conducting advanced research on aspects around similar topics, preferably in areas of clinical support.

6. Focusing on studying the benefits, barriers, and opportunities for providing psychosocial support among refugee learners from primary to secondary school education.

7. Conducting quantitative research that could present numerical data and statistics on the roles and importance of psychosocial support to refugee children, allowing for greater generalizability of findings.

6.5 Conclusion

This study highlights the critical role that schools play in supporting the psychosocial wellbeing of refugee learners at Dzaleka Refugee Camp. Despite significant challenges, including resource constraints and a lack of specialized personnel, the school has implemented various strategies to address the psychosocial needs of learners. The high levels of satisfaction reported by learners suggest that these efforts are having a positive impact.

However, the study also reveals substantial gaps in the current support system, including the need for more structured routines, specialized curriculum materials, and comprehensive teacher training. Addressing these challenges will require a concerted

effort from educational authorities, NGOs, and the broader refugee support community.

The findings underscore the importance of adopting a holistic approach to refugee education that integrates psychosocial support with academic instruction. By strengthening school-based support systems and addressing the identified challenges, it is possible to create more nurturing and effective learning environments that promote both the educational achievement and psychosocial wellbeing of refugee learners.

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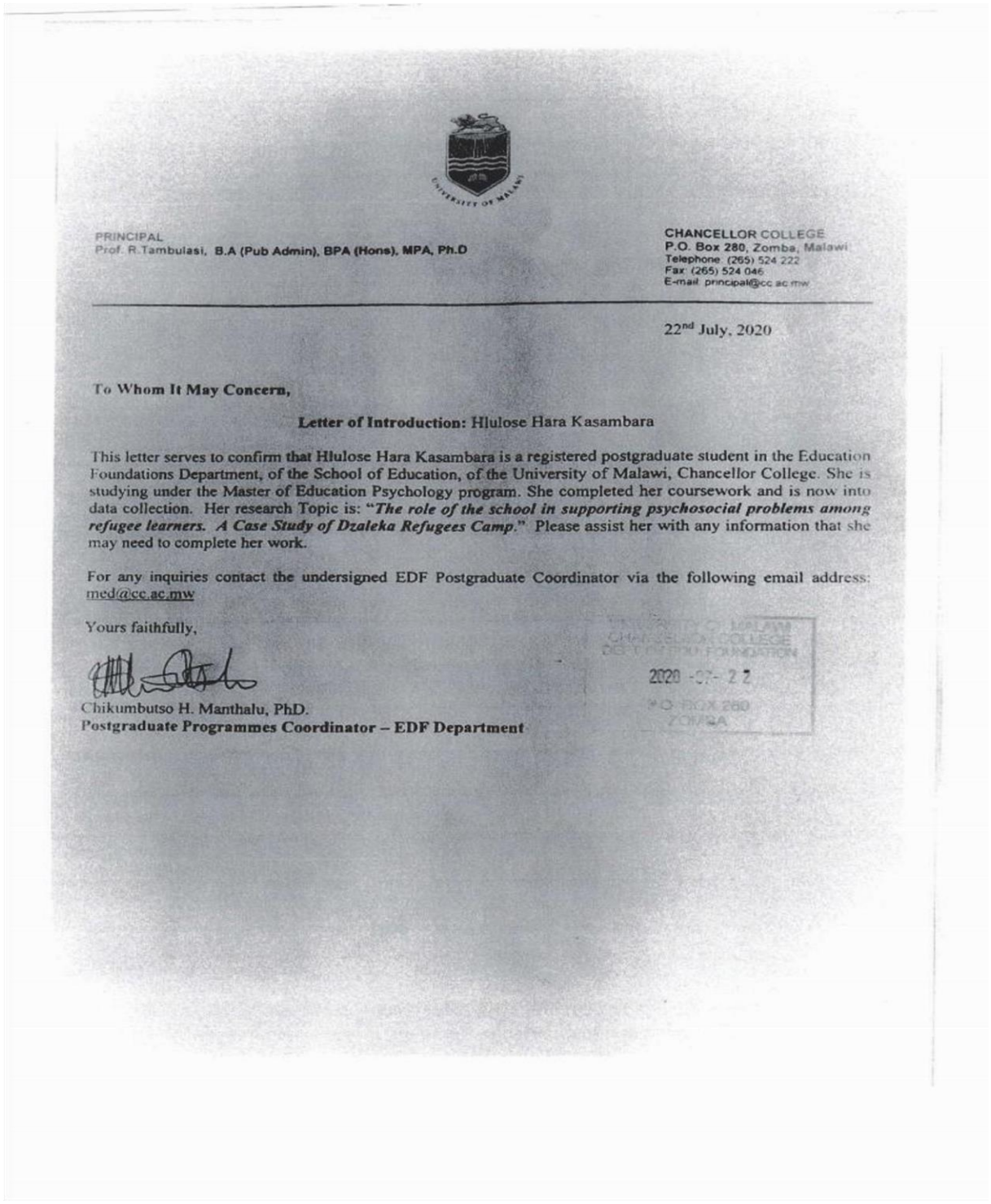
APPENDICES

APPENDIX 1: LETTER OF INTRODUCTION



PRINCIPAL
Prof. R.Tambulasi, B.A (Pub Admin), BPA (Hons), MPA, Ph.D

CHANCELLOR COLLEGE
P.O. Box 280, Zomba, Malawi
Telephone (265) 524 222
Fax (265) 524 046
E-mail principal@cc.ac.mw

22nd July, 2020

To Whom It May Concern,

Letter of Introduction: Hlulose Hara Kasambara

This letter serves to confirm that Hlulose Hara Kasambara is a registered postgraduate student in the Education Foundations Department, of the School of Education, of the University of Malawi, Chancellor College. She is studying under the Master of Education Psychology program. She completed her coursework and is now into data collection. Her research Topic is: "***The role of the school in supporting psychosocial problems among refugee learners. A Case Study of Dzaleka Refugees Camp.***" Please assist her with any information that she may need to complete her work.

For any inquiries contact the undersigned EDF Postgraduate Coordinator via the following email address: med@cc.ac.mw

Yours faithfully,

UNIVERSITY OF MALAWI
CHANCELLOR COLLEGE
DEPT OF EDU FOUNDATION
2020 -07- 22
P.O. BOX 280
ZOMBA

Chikumbutso H. Manthalu, PhD.
Postgraduate Programmes Coordinator – EDF Department

I

APPENDIX 2: QUESTIONNAIRE FOR LEARNERS

I am a Master of Education Psychology student at the Chancellor College, University of Malawi carrying out a study on the role of school in supporting learning wellbeing of refugee learners with psychosocial problems.

Kindly respond honestly and accurately to questions that I will ask you. Any information that you provide will be treated with utmost confidence and will not be used for any other purpose other than which pertains to this research. You do not need to indicate your name, thank you.

1. Please indicate your age bracket?

   6-10 ( ) 11-15 ( ) 16-20 ( )

   Over 20 ( )

2. Gender? Male ( ) Female( )

3. Level of education?

   Lower Primary ( ) Upper Primary( )

4. Would you describe yourself to me in a few words?

5. Do you have any word that describes uneasiness/ distress?

6. Is this feeling widespread in the school?

   Yes ( ) No ( )

7. Do you have a temporary feeling of this kind?

Yes ( ) No ( )

8. What causes it?

9. Have you received services/ help with your situation?

Yes ( ) No ( )

10. From whom have you received?

Teachers ( ) Nurses ( ) Volunteers ( ) Others ( )

11. How do you cope with this aside from receiving help or services?

12. To whom do you refer to/ talk to, in case you are feeling this way?

Parents ( ) Teachers ( ) Peers ( ) Nurses ( ) Volunteers ( )

13. Do you think school has helped you manage?

Yes ( ) No ( )

14. What is your experience with other children- learners?

Negative ( ) Positive ( )

15. Do you enjoy school?

Yes ( ) No ( )

16. Do you have friends at school?

Yes ( ) No ( )

17. With whom do you usually play with?

18. Have you ever been absent in class?

Yes ( ) No ( )

19. If yes, why were you absent?

20. Do you like coming to class/ school?

Yes ( ) No ( )

21. Which subjects do you like most? Mention any three

22. Why do you like them?

23. Which activities do you like to do? Mention as many as you like.

24. What do you look forward to doing daily at the school?

25. How do you see your teachers, are they a good influence on you?

Yes ( ) No ( )

26. How do you see your peers, are they a good influence? Explain?

Yes ( ) No ( )

27. Have you ever been in a fight at school?

Yes ( ) No ( )

28. Do you use drugs?

Yes ( ) No ( )

29. What are your plans after school?

Thank you for your cooperation.

APPENDIX 3: QUESTIONNAIRE FOR TEACHERS

1. Please indicate your age bracket?

26-30 ( ) 31-35 ( ) 36-40 ( )

41-45 ( ) 46-49 ( ) Over 50 ( )

2. What is your Gender? Male ( ) Female( )

3. Level of academic qualifications?

Secondary ( ) Diploma ( ) Graduate ( )

Post-graduate ( ) Other (*Specify*) ……

4. Please indicate your teaching experience 1 -5 years ( ) 6 – 10 years ( )

11 – 15 years ( ) over 16 years ()

5. Are there any psychosocial problems concerning the children- can you list them please?

6. What have you observed to be the greatest challenge in these children?

7. What do you think needs to be done to improve?

8. How would you rate the classroom performance of these children?

Good ( ) Poor ( ) Intermediate ( )

9. In the past 1 year, have you given any psychosocial support?

Yes ( ) No ( )

In the past 1 year, have you had to engage with learners showing psychosocial behavior problems?

Yes ( ) No ( )

10. How do you engage them?

Mention their names several times through a class ( )

Repeat Sentences to them ( )

Use interactive learning ( )

Have separate lessons with

them ( )

11. How do you think that helps?

Yes ( ) No ( )

12. Have you done any interventions with development agencies?
Yes ( ) No ( )

13. Is there a structured routine in place?

Yes ( ) No ( )

14. What do you think is the role of the school in helping these children?

15. Have you received any special training on site/ at teaching school?

Yes ( ) No ( )

16. If yes, What kind of training?

17. What is your experience with these children? Explain.

Positive ( ) Negative ( )

Thank you for your cooperation

APPENDIX 4: QUESTIONNAIRE FOR HEAD - TEACHER

1. Please indicate your age bracket?

26-30 ( ) 31-35 ( ) 36-40 ( )

41-45 ( ) 46-49 ( ) Over 50 ( )

2. What is your Gender? Male ( ) Female( )

3. Level of academic qualifications?

Secondary ( ) Diploma ( ) Graduate ( )

Post-graduate ( ) Other (*Specify*) ……

4. Please indicate your teaching experience 1 -5 years ( ) 6 – 10 years ( )

11 – 15 years ( ) over 16 years ()

5. Are there any psychosocial problems concerning the children- can you list them please?

6. What is the makeup of your curriculum?

7. Does it include psychosocial problems addressing materials?

Yes ( ) No ( )

8. What other programs do you have in place?

Cultural heritage showcases ( )
Sports ( ) Drama ( )

Other *(Specify)* …….

9. What are the challenges facing the school / teacher/ learners to better be supported in dealing with psychosocial problems?

School

10. Have you done any interventions with development agencies?

11 As a school do you have a plan/ strategy for addressing psychosocial problems of
Yes ( ) No ( )

12. From a long-term perspective, what do you think are the main structural psychosocial support systems to be established?

children?

Yes ( ) No ( )

Thank you for your cooperation

APPENDIX 5: QUESTIONNAIRE FOR SMC

1. Please indicate your age bracket?

26-30 ( ) 31-35 ( ) 36-40 ( )
41-45 ( ) 46-49 ( ) Over 50 ( )

2. What is your Gender? Male ( ) Female( )

3. Level of academic qualifications?

Secondary ( ) Diploma ( ) Graduate ( )

Post-graduate ( ) Other (*Specify*) ……

4. Have you discussed issues of psychosocial problems among learners?

Yes ( ) No ( )

5. If not, why not?

6. Have you had cases reported to you?

Yes ( ) No ( )

7. Do you think it is necessary to have psychosocial problems to be prioritized?

Yes ( ) No ( )

8. Have you done any interventions with development agencies?

Yes ( ) No ( )

Thank you for your appreciation

APPENDIX 6: OBSERVATION CHECKLIST

1. Recreation activities at the school

2. General environment at the school

3. General environment in class?

4. How are learners responding to questions?

5. Tone of the learner's responses?

6. Tone of the teacher's responses?

7. Learner's memory of things discussed already?

APPENDIX 7: REQUEST FOR PERMISSION TO COLLECT DATA AT DZALEKA REFUGUEE CAMP

Hlulose Hara Kasambara
Chancellor College
P.O. Box 280
Zomba

12th October 2020

The Secretary for home Affairs and Internal Security.
Private Bag 331
Lilongwe 3.

Dear Sir,

REQUEST FOR PERMISSION TO COLLECT DATA AT DZALEKA REFUGE CAMP.

I Write to request for permission to collect data on the '**Role of the school in supporting psychosocial problems among refugee learners**' at Dzaleka Refugee Camp.

I am Hlulose Kasambara, a Masters student in Education Psychology at the University of Malawi, Chancellor College and this is in fulfilment of my research topic.

Attached please find my introductory letter from the college.

Yours faithfully,

Hlulose Hara Kasambara.

0993732481/0888336444

APPENDIX 8: PERMISSION LETTER FROM MINISTRY OF HOMELAND & SECURITY

Telephone: (265) 01 789 177
Fax (265) 01 788 104

Communication should be addressed to: The Secretary for Homeland Security

In reply please quote No:
MINISTRY OF HOMELAND SECURITY
PRIVATE BAG 331
CAPITAL CITY
LILONGWE 3
MALAWI

Ref. No.HA/2/50

14th October, 2020

Ms. Hlulose Hara Kasambara
Chancellor College
P.O. Box 280
ZOMBA

Cc: The Camp Manager
Dzaleka Refugee Camp
P.O. Box 16
DOWA

Dear Madam,

REQUEST FOR PERMISSION TO COLLECT DATA AT DZALEKA REFUGEE CAMP

I refer to your letter dated 12th October, 2020 on the above subject matter.

I am pleased to convey Government approval for you to proceed and collect data on the "Role of the school in supporting psychosocial problems among refugee learners" in Dzaleka Refugee Camp.

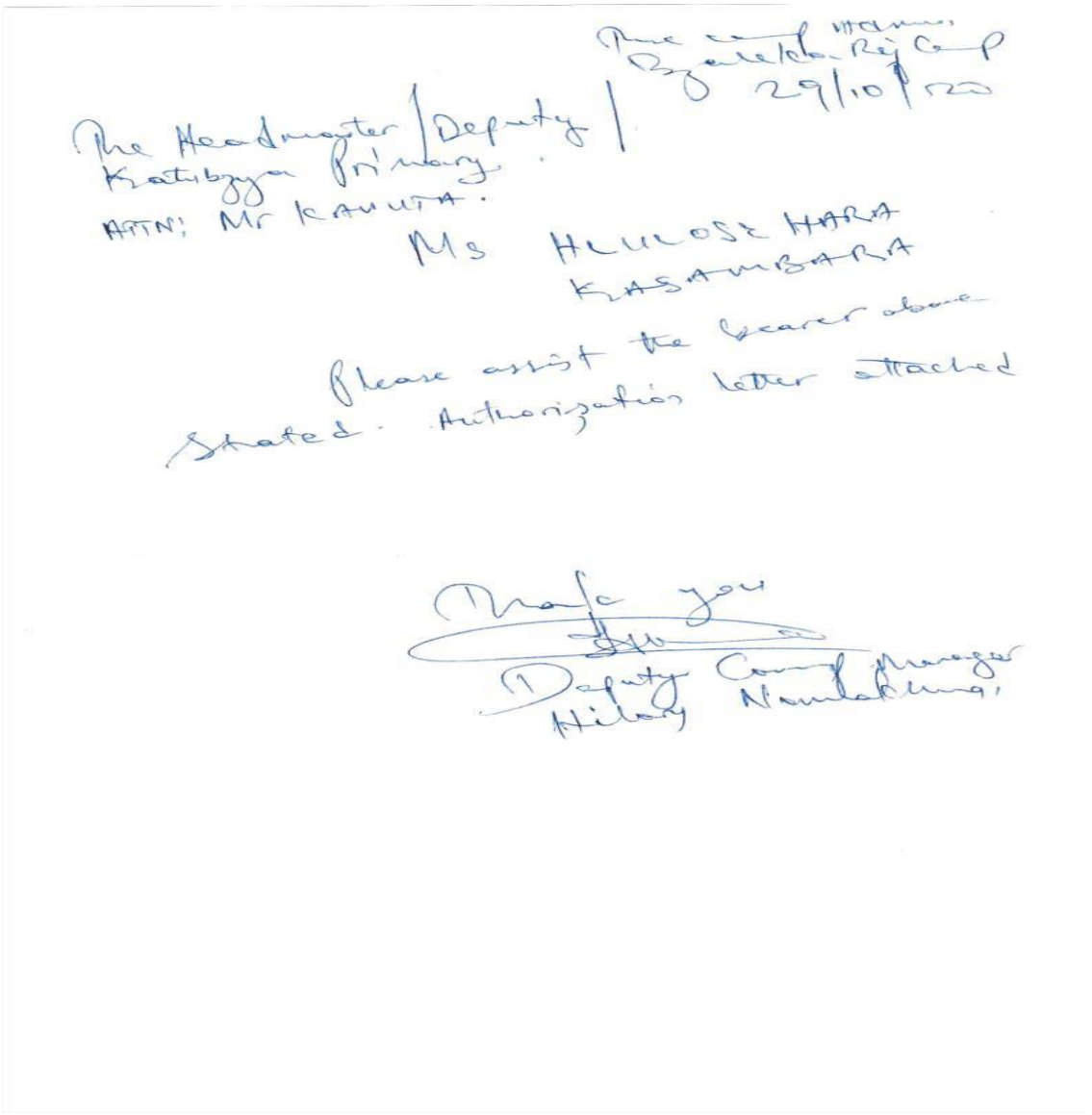
By copy of this letter, the Camp Manager is requested to assist you accordingly and ensure that you align your activity to the existing rules and regulations.

I look forward to your successful fulfilment of your research topic and trust that you will share the findings with this office.

Yours faithfully,

Dr. Hudson Mankhwala
For: SECRETARY FOR HOMELAND SECURITY AND COMMISSIONER FOR REFUGEES

APPENDIX 9: LETTER FROM DEPUTY CAMP COMMANDER, DZALEKA CAMP



The Headmaster / Deputy /
Kwatubyya Primary
ATTN: Mr KAMUTA.

The Camp Manager
Dzaleka Ref Camp
29/10/20

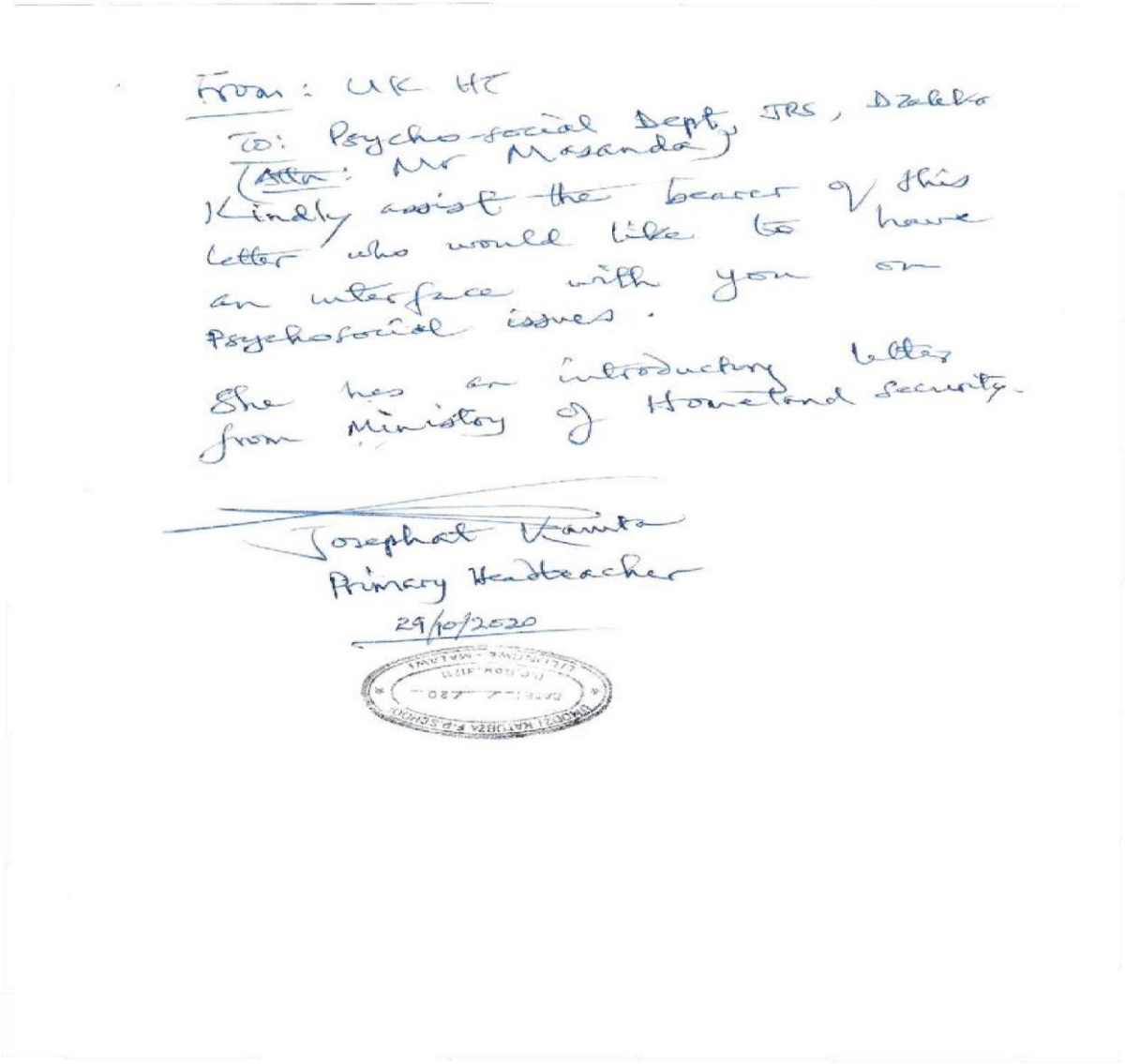
Ms HELLOSE HARA
KASAMBARA

Please assist the bearer above stated. Authorization letter attached

Thank you

Deputy Camp Manager
Hilary Nsimbatinga

APPENDIX 10: LETTER FROM JOSEPHAT KAMITA, PRIMARY HEADTEACHER



From: UK HT

To: Psycho-social Dept, JRS, Dzaleka

Attn: Mr Masanda

Kindly assist the bearer of this letter who would like to have an interface with you on Psychosocial issues.

She has an introductory letter from Ministry of Homeland Security.

Josephat Kamita
Primary Headteacher
29/10/2020