UNIVERSITY OF CAPE COAST

SOCIO-ECONOMIC CHALLENGES CONFRONTING REFUGEES IN THE

GOMOA BUDUBURAM REFUGEE CAMP

JOHN OCANSEY

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BY

JOHN OCANSEY

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DECLARATION

Candidate's Declaration

I hereby declare that this dissertation is the result of my own original work and that no part of it has been presented for another degree in this university or elsewhere.

Candidate's Name: John Ocansey

Signature:... Date:..

Supervisor's Declaration

I hereby declare that the preparation and presentation of the dissertation were supervised in accordance with the guidelines on supervision of dissertation laid down by the University of Cape Coast.

Supervisor's Name: Dr. Francis Enu-Kwesi

Signature:...................................... Date…………..

ABSTRACT

The general objective of the study was to examine the socio-economic challenges that confront refugees in the Buduburam camp. The specific objectives of the study was to ascertain the infrastructural situation, accessibility to formal education, employment situation amongst the refugees and the contribution of stakeholders to well being of refugees in the Buduburam camp

The study employed the cross-sectional design, and a systematic sampling approach was used in selecting the sample for the study. Purposive sampling approach was also used to select the organisations involved in activities related to the wellbeing of the refugees. Data were collected from both primary and secondary sources and analysed using Statistical Product and Service Solution (SPSS version 16). The results were presented in frequencies and percentages.

The key findings from the research included the poor state of infrastructure especially water and sanitation, roads, housing and schools. Access to formal employment was limited; and therefore, majority were employed in the informal sector. The study recommended, among others, that the UNHCR should collaborate with the host country to provide the needed social and economic infrastructure. The study also recommended that the schools should make use of national service persons and community teaching assistants to augment teaching staff. Regarding employment, the lead organisations should organise job and business fairs to encourage networking, and also organise informal classes in the dominant local languages. UNHCR is also advised to effectively play its oversight role in monitoring the activities of NGOs in the camp.

ACKNOWLEDGEMENTS

DEDICATION

To my family, friends, colleague workers, support staff at the Institute for Development Studies, Cape Coast and all loved ones.

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ACRONYMNS

AMS	American Medical System
CARE	Cooperation of Assistant and Relief Everywhere
CBO	Community Based Organisation
CBW	Children Better Way
DAFI	Albert Einstein German Academic Refugee Initiative
FAO	Food and Agriculture Organisation
GES	Ghana Education Service
HREA	Human Rights Education Association
INEE	Inter-Agency Network for Education in Emergencies
IOM	International Organisation for Migration
ISSER	Institute of Statistical, Social and Economic Research
LDALE	Liberia Disability Adjusted Life Expectancy
MOE	Ministry of Education
NADMO	National Disaster Management Organisation
NGO	Non Governmental Oganisation
OAU	Organisation of African Unity
OCHA	Office for the Coordination of Humanitarian Affairs
OPD	Out Patient Department
STWP	Small Town Waste Water Project
UN	United Nations
UNAIDS	United Nations AIDS

UNESCO	United Nations Educational, Scientific and Cultural Organisation
UNFPA	United Nations Fund for Population Activities
UNHCR	United Nations High Commission for Refugees
UNIDO	United Nations Industrial Development Organization
UNIFEM	United Nation Development Fund for Women
UNV	United Nations Volunteer
USA	United States of America
USCCBMRS	United States Conference of Catholic Bishops of Migration and Refugee Services
USCRI	United States Commission for Refugees and Immigrants
WFP	World Food Programme
WHO	World Health Organisation
WISE	Women's Initiative for Self Empowerment

CHAPTER ONE

INTRODUCTION

Background to the study

The phenomenon of displacement and for that matter refugee is an age long problem. It is in the light of the historical nature of the refugee crises that Fridtjof Nansen was appointed by the League of Nations as the First High Commissioner for Refugees in 1921 (Human Rights Education Associates, 2002).

According to Tete (2005), traditionally refugees fleeing war or political prosecution have been concentrated in camps which are mainly situated in rural areas. Their migration patterns could be rural-rural, urban-urban, rural-urban or urban-rural. Increasingly however, a substantial proportion of refugees moving into urban areas are in the following categorisation; those in camps and those waiting for resettlement. Those in camps and those on transit to resettlements to other countries "disappear" within the urban areas when their claims are rejected and others simply "disappear" from the camps into the urban areas for economic reasons.

According to UNHCR (2000), there are more than 14 million refugees in the world and an additional 21 million persons have been displaced within their own countries. It is also on record that the United States, Argentina, Australia, Brazil, Burkina Faso, Canada, Chile, Denmark, Finland, Iceland, Ireland, the

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Netherlands, New Zealand, Norway, Spain, and Sweden have resettlement programmes in place to assist refugees.

The survey again notes that each year in the United States of America, the President in consultation with congress sets the number of refugees to be allowed settle in the United States of America. Among the industrialised countries, the United States has consistently accepted the largest number of refugees. The short comings in the 1951 Geneva Convention led to the 1967 protocol relating to status of refugees which saw the geographical restrictions removed from the 1951 Refugee Convention (HREA, 2002).

Nairobi, Kenya's capital city is one such destination for refugees from the great lakes region and the horn of Africa. A greater number of refugees come from low income countries and this contributes over 80 per cent of the global refugee population. An estimated 50 per cent of the refugee population is living in camps while the other half are either living in urban areas or their area of settlement is unknown. The demographic profile of refugees differs significantly across regions, within countries and it also depends on the refugee situation they are in (Tete, 2005).

Thus the 1951 Geneva Convention (Article 1[2]) defined a refugee as any person who owing to well-founded fear of persecution by reason of race, religion, nationality, membership of a particular social group or political opinion is outside the country of his nationality and is unable or owing to such fear is unwilling to avail himself of the protection of that country of his former habitual residence as a result of such event is unable or owing to such fear is unwilling to return to it.

This convention covered only people who became refugees as a result of events occurring before 1st January 1950. Besides, a "well-founded fear" is rather subjective, as it can easily not be defined especially in situations where people flee to escape the ravages of war and where flagrant violations of human rights are part of everyday life (Kibreab, 1987).

Since the refugee crisis is a phenomenon with global implications the convention governing the specific aspects of refugee problems in Africa in 1969, accepted the definition given by the Geneva Convention, but expanded it to include persons compelled to leave their country not only as a result of persecution but also owing to: external aggression, occupation, foreign domination, or events seriously disturbing public order (HREA, 2002).

The varieties of different refugee movements are as complex as the situations which can create them. People have different perceptions of exactly what they consider to be a threat to them. In some situations the mere rumour of instability can be enough to impel people. In other situations people do not flee until they have been overtaken by violent conflict. In the African context, the line between political and economic repression can become blurred, many refugees could be classified as economic migrants. In other cases, ecological change can be the cause of mass migrations. This latter variation of migration is usually ignored by contemporary definitions (Tete, 2005).

As shown in the literature, determination of refugees is subject to various international and regional laws. In the African context, three important legal

instruments are considered, two from the United Nations and one from the African Context. Historically, it is evident that so many factors account for the emergence of refugees. This includes persons who resettle at places for the fear of being persecuted for reasons of race, religion, membership of a particular social group or political opinion or persons who flee their country to avoid torture or being killed during conflict or war (Jackson, 1999).

When refugees get to their new settlement, the right to abode and all other basic needs that make human life meaningful become a big issue. For instance, refugees faced challenges such as inadequate accommodation, poor healthcare, access to education and unemployment (Aspinall & Watters, 2010). It is in the view of the above hardships that international organisations such as the United Nations High Commission for Refugees (UNHCR), Non-Governmental Organisations (NGO's) and national governments have taken the issue of refugees as a major concern. Other organisations assisting in the effort to support refugees include the United States Conference of Catholic Bishops Office of Migration and Refugee Services (USCCBMRS), Amnesty International, Church World Service, Ethiopian Community Development Council, Episcopal Migration Ministries, and World Relief Organisation.

The enormous challenges faced by refugees led to the 1951 Geneva Convention. As of October 2001, 141 countries have signed the U N convention relating to the status of refugees. The convention includes an internationally agreed definition of who a refugee is and rights as a refugee. This convention is commonly referred to as the "Refugee Convention". The convention however,

imposes a major obligation on countries that have signed it –that of "non-refoulement". That is no country may deport or expel a person to a country where that person faces persecution, or risk of serious human rights violation.

Increasingly, the majority of current conflicts in the world involve disputes between political or ethnic groups within countries rather than wars between countries. Given this trend, the number of persons caught up in conflicts in their own countries and forced to leave their homes is likely to increase. Table 1 shows the ten largest groups of refugees in 2001.

Table 1: Number of refugees in ten largest groups in 2001

Country of origin	Main countries of asylum	Total number of refugees
Afghanistan	Iran/Pakistan	3,809,600
Iraq	Iran	554,000
Burundi	Tanzania	530,100
Sudan	Uganda/Ethiopia/D.R.Congo/Central African Republic	489,500
Angola	Zambia/D.R Congo/Namibia	470,600
Somalia	/Kenya/Yemen/Ethiopia/USA/United Kingdom	439,900
Bosnia-Herzegovina	Yugoslavia/Croatia/Slovenia	426,000
D.R. Congo	Tanzania/Zambia/Rwanda/Burundi/Congo	392,100
Vietnam	China/USA	353,200
Eritrea	Sudan	333,100

Source: Human Rights Education Association (HREA), (2002)

Statement of the problem

In early 2008, the refugees at the Buduburam camp staged a demonstration to demand better living conditions. Some of the demonstrators, especially women were purported to have gone naked in an attempt to attract the attention of the government of Ghana and other international bodies about the poor conditions in the camp. The consequence of their action was the deportation of some of the refugees to Liberia UNHCR was providing humanitarian assistance until June 2000 when it identified the camp as "self-sufficient" and as a result drastically decreased the funding. It is very clear that the problems faced by refugees in time of displacement are overwhelming (Kudzodzi, 2008).

These issues cut across all the social institutions such as educational, religious, marriage and family, economic, political and the health institutions (UNHCR, 2003a). Marx's statement that one's ability to perform successfully in the sub-structure enables him to gain access to the super-structure cannot be ruled out in this case (UNHCR, 2001). For this study the successful execution of roles assigned to the sub-structure (economic institution) is sufficient to give the refugees the needed comfort, though not in its totality. It is true that the number of refugees keep increasing with associated problems as well as the lost of human resource that could aid in development. From the foregoing, it is imperative to study the nature of the socio-economic challenges that confront refugees.

Objectives of the study

The general objective of the study was to examine the socio-economic challenges that confront refugees in the Buduburam refugee camp in Ghana. Specifically, the study sought to:

- Ascertain the infrastructure situation in the Buduburam camp (e.g. accommodation, family size, availability of potable water, electricity and health post).

- Determine refugees' accessibility to formal education.

- Appraise the employment situation in the camp.

- Assess the contributions of stakeholders (N.G.Os, UNHCR and government agencies) to the wellbeing of refugees.

- Make appropriate recommendations to stakeholders for policy formulation and implementation.

Research questions

In order to address these specific objectives, the following questions were posed.

- What is the state of infrastructure in the Buduburam camp?

- How do refugees access formal education?

- What is the employment situation in the camp?

- What are the contributions of the various stakeholders to the wellbeing of refugees?

Scope of the study

The scope of the study was confined to the socio-economic condition of refugees living in the Buduburam camp and excludes Ghanaians who reside in the camp. The issues discussed related to the state of infrastructure in the camp, accessibility to formal education, employment situation in the camp and the contribution provided by stake holders such as UNHCR, NGO's, international donor agencies as well as government agencies.

Significance of the study

Although the study is restricted to socio-economic challenges confronting refugees in Gomoa Buduburam refugee camp settlement in Ghana, the applicability and importance of the work is useful for creating awareness about the plight of refugees in West Africa in particular and other refugee camps in other parts of the world.

The results of the study could serve as a useful reference material for policy formulation and implementation for organisations such as UNHCR, HREA, UNIFEM, UNESCO, OCHA, CBOs, NGOs and other stakeholders who are involved in humanitarian activities around the world.

Organisation of the study

The work comprises five main chapters. The first section which is chapter one described a general introduction of the work. It deals with the background, problem statement, research objectives and research questions, significance and

organisation of the study. Chapter two provided a review of related literature and the theoretical framework for the study. Chapter three comprises the methodology used for the work and a brief description of the Gomoa Buduburam camp. Chapter four presents the findings from the study while the final chapter covered the summary, conclusions and recommendations.

CHAPTER TWO

REVIEW OF RELATED LITERATURE

Introduction

This chapter examines the various operational definitions relevant to the study, which will be closely linked with the relevant theoretical perspectives to be used. To this end, philosophical libertarianism and Rawls theory of justice will be discussed. In addition to this, related literature will be reviewed and will centre on issues of refugees as well as issues of socio-economic challenges that confront refugees.

Definition of refugee

The scope of the refugee problem is immense, and subsequently, the fields of research have been extensive. According to Malkki (1992), the label refugee has likewise emerged more recently in the field of geography. Academics and scholars have written about it for years and from different perspectives but it was only in the 1970's and particularly in the 1980's that the label "Refugee Studies" emerged in response to a call for the systematisation of the study of refugees (Skonhoft, 1998). Reviewing the areas of research to which geography has contributed, Black (1991) and Robinson and Black (1993) indicate that geography as a discipline of synthesis has much potential to offer in terms of explanations in various areas of refugee issues.

Indeed in geography, research on refugees in the third world has to a great extent focused on the causes of refugee migration as well as consequences of refugee movement and uneven development (Black 1991; Black, 1993). Black (1993) also advocates for the need to focus on the broader process of refugee migration arguing that "it cannot be seen as an isolated event either for the individual migrant or in a more general sense but as part of a wider process". Robinson (1993) cited in Brun (2003) also states that geographers have a passion for place, as well as space, a concern which can throw more light on topics such as why some individuals become refugees, while others do not, why some refugees eventually return, while others do not, and why refugees 'choose' the resettlement destination which they do.

Black (1993) points out that an understanding of the socio-economic and political processes under specific conditions of refugee migration is of theoretical interest to scholars and academics of varied fields of endeavour of which social policy and governance studies are no exceptions. Apparently, drawing on different theories from various sub-disciplines within geography can be rewarding in dealing with the complex issues involving refugee issues, especially as these have shown themselves to cover such a broad scope of areas.

Even though migration, voluntary or forced, has existed for ages, it was not until after the Second World War that attention was given to this phenomenon. The typology "refugee" was established as an international concept in 1951. Thus the UN 1951 Convention (Article 1[2]), defined a refugee as any person who owing to well-founded fear of persecution by reason of race, religion,

nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable, or owing to such fear, is unwilling to avail himself of the protection of that country of his former habitual residence as a result of such event is unable or owing to such fear is unwilling to return to it.

This convention covered only people who became refugees as a result of events occurring before 1st January 1950. Besides, a "well-founded fear" is rather subjective, as it can easily not be defined especially in situations where people flee to escape the ravages of war and where flagrant violations of human rights are part of everyday life (Kibreab, 1987). While the definition in the refugee convention has been used by international organisations such as the United Nations, the term continues to be misunderstood and is often used inconsistently in everyday language. Media stories, for example, often confuse refugees with people migrating for economic reasons and others displaced within their own country and do not cross an international border (HREA, 2002).

The reasons for persecution must be because of one of the five grounds listed in article 1 A (2) of the Refugee Convention: race, religion, nationality, membership of a particular social group or political opinion. To this end, persecution based on any other ground will not be considered (Article 1 A [2]). However, the five grounds listed in article [1 A [2] are:

- Race, which includes ethnic groups and social groups of common descent.
- Religion, which recognises people's identification with a group of common traditions or beliefs, as well as the active practice of religion.
- Nationality, which includes an individual's citizenship.

- A particular social group which is defined to include people with similar background, habits or social status.

- Political opinion which refers to ideas not tolerated by the authorities, including opinions critical of government policies and methods.

The above listed grounds were very restrictive not only in time, but also in space because they did not take into account the regional variations in refugee issues. Even though it is accepted as the valid, "official definition", its limitations have occasioned other additions. To cater for these variations, especially in Africa and Latin America and to address the problems specific to African refugees who were not covered by the UN Convention, the Organization of Africa Unity (OAU) passed a regional supplementary convention in 1969 (OAU Convention on Refugees 1969, Article1 [2]).

The OAU Convention on Refugees (1969) tried to overcome the definitional restrictions of the UN Convention by extending the definition of a refugee to include any person who, owing to external aggression, occupation, foreign domination or events seriously disturbing order in either part of or the whole of his country of origin or nationality is compelled to leave his place of habitual residence in order to seek refuge in another place outside his country of origin or nationality (Opoku, 1995; HREA, 2002). Closely linked to the various perspectives of the definition on the concept of refugee, is the various theoretical perspectives on which this study rest.

The definition of "refugee" in the Cartagena Declaration in 1984 is similar to that of the OAU Convention-including, as it does "persons who have

fled their country because their lives, safety or freedom have been threatened by generalised violence, foreign aggression, internal conflicts, massive violation of human rights or other circumstances which have seriously disturbed public order". The Cartagena Declaration is not binding on States. It is, however, applied in practice by a number of Latin American States and, in some cases, has been incorporated into domestic legislation. The Cartagena Declaration on refugees remains the most encompassing definition of a refugee to have emerged from Latin America (Gibney & Hansen, 2005).

The definition of refugee in the Cartagena Declaration in 1984 builds upon the refugee definition provided by OAU but adds to it the threat of generalised violence; internal aggression; and massive violation of human rights. Unlike the definition in the refugee convention by the OAU, a refugee must show a link between herself or himself and the real risk of harm; all applicants must demonstrate that "their lives, safety or freedom have been threatened". This demand is similar to the UN Refugee Convention, which requires individuals to show that they risk persecution as a particular individual rather than in general (HREA, 2002).

Theoretical issues

Creswell (2003) observes that theories "provide a lens to guide researchers as to what issues are important and the people that need to be studied". The major task of theory in any research is to aid the understanding of the research problem as well as its analysis.

The theoretical perspective for this work draws from a number of disciplines namely geography, philosophy and sociology. For the perspective in geography, the study is grounded within humanistic geography and the theoretical considerations are eclectic, building upon different theories from various sub-disciplines within human geography, such as space/place concepts and actor-oriented theories. For Limb and Dwyer (2001), this will serve as "a means of understanding people's (refugees') "elusive sense of place''.

Place is regarded as having both an objective characteristic of location and subjective experience of the individual. In both senses, this perspective is suitable for research in refugees in terms of their camp life, the solutions at their disposal and their perceptions on these issues. Action-oriented theories are also useful because they emphasise not the helplessness of refugees but, their resourcefulness and the possibility for them to succeed under enabling circumstances.

The concept of space and place

Simonsen (1996) indicates that social spatiality is the foundation of both space and place. Without engaging in the long drawn debate about the relationship between space and place in geography, the study draws on these with respect to their contribution in understanding refugee experience especially as they very much influence research and policy implementation. Geographical understandings of space and place as applied to refugee issues can on the one hand be essentialist and on the other hand constructionist.

Space and place are complicated and contested concepts in geography related to different traditions and worldviews (Brun, 2003). Brun (2003) understands space and place as closely connected and thus sees no fundamental differences in theorising about them.

Unlike many liberals and democratic socialists, libertarians reject all positive rights. They do not believe that persons in need have any right to assistance unless they have made contractual arrangements in advance for that assistance. The right to liberty provides a strong defence of the right to make such contractual arrangements if a contract partner can be found. Libertarians hold that once contracts are voluntarily made, the contracting partners have a strong moral duty to keep them (Simonsen, 1993).

The non-interference right to life is a right not to be killed or injured, not a right to receive food or even the means to produce food or the opportunity to work for wages. The non-interference right to liberty is a right not to be kidnapped or enslaved or prevented from mutually agreed-upon activities which do not harm third persons. The non-interference right to property is a right not to have one's legitimately acquired possessions stolen or degraded by the deliberate or negligent actions of others; it is not a right to be given possessions or resources so that one can avoid poverty or starvation (Brun, 2003).

Borrowing from sociology on the other hand, Rawls (1971) Theory of Social Justice has been adopted for this exercise. Rawls' theory of social justice is based on the social contract model, a model used to define moral conceptions. The term traditionally has been used in arguments associated with the nature of

political obligation. Because the arguments explain political and social cohesion as a product of an agreement among individuals, it makes these individuals conceptually vulnerable to political and social units. Rawls (1971) believes that justice is fairness, and through the social contract model, individuals produce social goods for social consumption. This however, enables every person to have enough goods and service. According to Rawls (1971), this is the bedrock for welfare provision. If justice is fairness, then it is very unfair on the part of selfish individuals who through their individualistic acts lead people into situations that could be described as unacceptable and uncomfortable.

When individuals compete for goods, the problem of distributive justice arises. This occurs due to the short comings associated with the use of market forces to redistribute goods and services. The resultant effect is inequality in access to critical life sustaining resources. Inequalities are sometimes redistributed by the market forces (Roemer, 1996). When these inequalities are redistributed, this redistribution must occur in the "original position of the social contract", a position when individuals make rational decisions to further self-interest based on conditions of fairness.

Rawls (1971) Roemer (1996) and Zucker (2003) elucidate these decision are made in the original position through the veil of ignorance. When decisions are made through the veil of ignorance, individuals will not know their class, social status, or natural assets (intelligence, strength and psychological traits) to ensure fairness. However, during this process it is assumed that individuals will understand basic facts about social life, take no interest in the advantages or

disadvantages of other people, and hence not be motivated by envy or sense of superiority. Hence if individuals are unidentifiable by class, social status, or natural assets, they will not shape principle, bargain with each other, or make decisions out of self-interest.

Challenges of refugees in host countries

Refugees describe their lives in their new countries as full of hurdles. The hurdles could best be described as socio-economic. These include the language barrier, challenges with health, education, securing employment opportunities and infrastructure. In addition to these issues, the case of adolescents and women were also reviewed.

Language Barrier

Language barriers are a fundamental hurdle for immigrants and refugees in this study and appear to stop them from making vital connections in their communities. Even daily tasks like taking a bus or grocery shopping can be overwhelming. One Arab immigrant from New Jersey described being unable to ask a simple question of an employee in a local grocery store and ended his story with: "So I cried, not for the food, but because I was unable to express myself in English" (Garret , 2006).

For instance, even where schools are available, language becomes a barrier. Robert Wood Johnson Foundation observed that language is a critical impediment for refugees schooling in the United States. According to the Robert Wood Johnson Foundation, most of the refugees that come to America do not

understand English and since the teachers are Americans, the students at the end of the day find it difficult to understand the lesson. The danger however, is that refugee children fall behind quickly at school and end up as drop-outs from the school system (Pascual, 2003).

Access to quality education

Children have an absolute right to education. This right applies without any discrimination whether children are at home, displaced, refugees or asylum seekers. 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 refugee children's lives through social interaction and gaining knowledge and skills for their future lives. The case for some refugees around the world is not a right but rather a privilege. 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 (Pascual, 2003).

Sommer (2002) observes that conflict can have a very direct negative impact on the supply and demand for education for boys and girls. State-run systems such as education collapse and schools infrastructure are destroyed. Schools can be targeted for attack, used as military bases or as places for finding new recruits. According to UNHCR (2003), during the Mozambique conflict in the 1980-90s, for instance, forty-five percent of schools were destroyed. The violence in East Timor destroyed between eighty percent and ninety percent of school buildings and infrastructure. This usually puts educational facilities far

beyond the allowable distance that should be covered to access school as provided by UNESCO's Inter-Agency for Education in Emergencies [INEE]. A study by Robert Wood Johnson Foundation edited by Garret (2006) reveals the truism of difficulties faced by refugees in accessing education in the United States of America.

Tete (2005) and Garret (2006) opines that in Ghana refugees are made to study using the same educational materials as their Ghanaian counterparts. This method is alien to the refugees and not really meaningful to them. In addition they also mention high school drop-out rate among the refugee community.

Tete (2005) further states that, of the school drop-out rate among refugees, the case for females is higher than that of their male counterparts but however did not explain what accounts for the high drop-out rate for females but however, mentioned that scholarship opportunities are made so flexible to encourage girls to go to school since the UNHCR educational policy is female centred. Also the population of females are higher than the males but it is not equally true that the enrolment figures for females are higher than that of their male counterparts.

Many people believe that teenage pregnancy, infant betrothal, and child labour account for some of the factors responsible for keeping females in the kitchen. In addition, one major problem with educational system is overcrowding in refugee schools and this is not peculiar to the refugee schools alone but a problem of schools in urban areas in the host country (Tete, 2005).

Another major challenge with schools around refugee areas is the lack of facilities like the libraries, urinals among others. With increasing population,

more pressure on educational infrastructure, most school authorities concentrate on providing classrooms rather than libraries; where libraries exist in public schools they are under-stocked (MoE, 2009). The access to these educational infrastructures must be addressed since it relates to the human right dimension of education as stated in the 1951 convention (Nicolai 2003; Garret, 2004).

The lack of bilingual teachers and aids, interpreters and counsellors who can work with struggling or traumatised refugees is a serious set-back for quality education.It is impossible to calculate the immense costs that are incurred by depriving refugees of education. A refugee who goes without education cannot look forward to a more productive and prosperous future. A refugee who is unable to attend school or a vocational training course is more likely to become frustrated and involved in illegitimate or military activities. A refugee who remains illiterate and inarticulate will be at a serious disadvantage in defending his or her human rights (Pascual, 2003; Garret, 2006).

Access to employment

The picture is not very different with regards to employment. Language barrier often constrains refugees from gaining employment in the host countries. Garret (2006) observes that language is a serious barrier in securing a job in a foreign country. Similarly, Tete (2005) also observes that the inability of refugees in Ghana to speak the local Ghanaian languages makes it difficult for them to secure jobs. Another barrier in securing a job in some countries is the lack of identification or social security numbers, residence permits as well as work permit. In some developing countries, these are sometimes overlooked but in

developed countries it is strictly observed. As stated by Garret (2006), one needs to be a legal immigrant to find a better job. Thus, refugees engage in all manner of dubious acts to secure a job. Some refugees borrow papers to enable them obtain a job.

Colick-Perker and Tilbury (2007) in investigating employment opportunities for refugees in Australia found that there were high levels of unemployment among skilled refugees, massive loss of occupational status among skilled refugees, persistence of a segmented labour market, where racially and culturally visible migrants and refugees in particular, despite their skills levels, are allocated unattractive jobs, loss of human capital to host country and a wastage of skills currently in short supply. Also some respondents who were doctors were driving taxis and teachers cleaning offices another difficulty was the non-recognition or part recognition of qualifications, lack of accessible referees, lack of soft skills such as a cultural knowledge, difficulties in getting promoted and getting the necessary qualification.

In Ghana the job situation is worsening and is partly as a result of limited start up capital available to entrepreneurs and difficulties in setting up new businesses in Ghana. The limited job situation in Ghana has been said to be compounded by the tradition of recruitment, which is based on nepotism which leads to recruiting from one's family or networks without necessarily creating equal opportunities. As indigenes suffer this faith refugees would have a much more difficult task of securing jobs (ISSER, 2009).

Access to transport infrastructure

Infrastructure is also another set-back for refugees in foreign lands. Many refugees complain of poor roads, housing, and health facilities. According to Garret (2006), transport is seen as a key problem in turning their lives around. It is observed that in almost every location immigrants and refugees have limited transportation options. It is further stated that getting themselves to and from work and their children to and from school are their biggest concerns. Many immigrants walk long distances sometimes late at night before they get to their camps.

However, it has also been observed that many refugees rely on family and friends for means of transportation. In general most refugees with the exception of the urban and peri-urban refugee population suffer from transportation and communication barriers (Krause, Mathews, & Mutambo, 2002). Apart from roads refugees also need toilet facilities since they are very essential to the sanitation issues in refugee camps (UNESCO, 2004).

Housing is also one of the most urgent and immediate issues of refugees as they move from their original homes to largely unknown geographical areas. As a basic necessity of human life, housing challenges would have to be resolved as quickly and sustainably as possible since it has backward and forward linkages with their health (UNDP, 2002).

Challenges of refugees in accessing healthcare

Burgess (2004) observes that the growing number of immigrants and refugees in the United States of America presents enormous challenges to western bio-medical practice. While there are multiple challenges for every potential patient, people of foreign-born background encounter unique barriers when attempting to benefit from health care. These include difficulties in cross-cultural communication, disparate health practice beliefs and limited cultural awareness on the part of the provider.

While there is an effort to acknowledge and address linguistic and cultural barriers, learning by trial and error remains the most common form of education on the current American Medical System (AMS). Refugees and immigrants may have difficulty developing trust and respect for physicians as well as western medicine. Without some means of communicating medical history of current needs, personal health practices and beliefs this population is prone to medical mistakes (Burgess, 2004).

Poon (2004) affirms the issues on language barrier as stated by Burgess (2004) by observing that all new refugees who arrived in the United States of America were confronted with a new life in an unfamiliar country where they do not speak the host language. Poon (2004) further notes that the depression and the inability to concentrate make it difficult for refugees to even learn to speak the host language. Also in cases where the patient cannot speak the host language then the health worker needs to rely on the services of an interpreter. The health

workers need to operate 'within the cultures' of refugees which is not only difficult but also expensive.

Berthold (2004) observes that victims of torture frequently have multiple psychological needs some of which are; reconnection to a sense of meaning and purpose in life, focus on working through the significant losses and the trauma they experienced and establishing a sense of safety. Berthold (2004) is also consistent with the position of Poon (2004) on "working within cultures" by saying it should not be assumed that a western approach to treatment will work with torture survivors from other cultures, particularly given that more than ninety percent are not familiar with western psychotherapeutic concepts. These challenges make access to healthcare by refugees a mirage if not difficult.

Berthold (2004) further states that victims may have never heard of specialised therapist in refugee issues since similar professionals may not exist in their homeland or it may be stigmatised if they seek professional psychiatric help. In addition it may be considered a taboo or shameful to discuss one's problems with someone who is outside the family or who is not a respected elder or a spiritual leader particularly when the problems involve sensitive issues such as sexual torture.

Berthold (2004) acknowledges the need to be familiar with the traditional approaches to healing in the culture of survivors as well as assessing the extent to what the victims believe in these approaches. It can be very helpful to collaborate with a cultural consultant or indigenous healer while empowering the survivor as the expert. Berthold observes that practitioners typically increase their

effectiveness when they seek to understand the worldview and system of meaning of the person and their explanation for their distress.

Refugees are reluctant to use family planning methods due to the losses these communities have suffered from the ongoing conflicts in their countries. Generally, there appears to be a good level of awareness concerning the prevention of sexually transmitted infections including HIV/AIDS. However, perception of risk differs within the refugee population. Although there are numerous suspected HIV/AIDS cases, there are few diagnosed patients and still a persistent skepticism about the existence of the disease. Other concerns include untreated sexually transmitted infections causing sterility, male circumcision practices and lack of compliance with infection treatment protocols. With regard to services and supplies, condom availability is inconsistent, community distribution systems are not in place and voluntary counseling and testing services are not widely available or accessed (Krause et. al, 2002).

Liberian refugees' health and access to healthcare

As a result of lack of access to health services for over a decade, Liberia's Disability Adjusted Life Expectancy (DALE) has dropped to thirty-four years. Given their limited access to health care, it is important to note that the immunization rate for this population is likely to be very low. Liberians make a distinction between the physical basis of illness such as bacterial infection, virus and other bacterial infection. Many Liberians as well as many other Africans believe that illnesses are the result of being cursed, targeted by evil spirits,

sorcery, or taboo violation. In many cases, western forms of treatment will be combined with indigenous forms.

The 2007 World Refugee Survey Report produced by the United States Commission for Refugees and Immigrants (USCRI) notes the link between migration, resettlement, and health burdens. The report highlighted that pre-migration exposes refugees to so many dangers such as infectious parasitic diseases, physical trauma and malnutrition. Post-migration and resettlement of refugees increases susceptibility to chronic diseases, stressors of resettlement, racism, unemployment and crime. It is also evident that most states accepting refugees for settlement do not take note of the peculiar ailments of refugees (USCRI, 2007)

According to Tete (2005), health care provision has been one of the most unstable albeit important areas of concern for many refugees in Ghana. Healthcare facilities are not in good shape and even maintenance is a challenge. The least said about staffing the better since doctor patient ratio is very discouraging. It is an obvious thing to see one doctor attending to many patients. This situation cannot be said to be discriminatory since doctor to patient ratio in developing countries is about 1: 50,000 (WHO, 2004).

Challenges of adolescent girls and boys

United Nations Fund for Population Activities (UNFPA) (2002) report states that when conflict erupts, the risks associated with adolescence increase for boys, but multiply for girls. Adolescent girls are target for sexual violence and

exploitation and yet their experiences and needs are often not acknowledged in the policy and programme interventions which make divisions between children and adults. Adolescence is a tricky time of identity formation, of experimentation, but also of vulnerability. Inadequate responses to the needs of adolescents in conflict situations risk marginalising a large section of the population, whose skills, energy and involvement are vital for post-conflict reconstruction.

Pascual (2003) opines that there are many hundreds of thousands of adolescents living in refugee camps and settlements or internally displaced whose security has been shattered violently and who have lost or have been separated from friends and family members. For girls who are pregnant, already mothers, and who are heading households may have limited access to educational services and resources.

Machel (1996) highlights the gaps in provision of education for adolescents, and subsequent reports document the merely sporadic initiatives for them. In most contexts, resources have been focused on primary education, meaning that adolescents miss out. Adolescent girls in Northern Uganda reported that families and communities prioritise boys' education over girls, and that girls' education is valued less by parents because girls are expected to marry, leave the family and live in their husband's household.

As Sinclair (2001) points out, in an emergency situation it is much easier to organise classes for younger children than for older youth. It is hard for any child that dropped out of school to pick up studies again, but for adolescent girls and young women it can be particularly so. They may have had less schooling in

the first place, and so may have to restart with children embarrassingly smaller and younger than themselves. Education may not be seen as a priority for older girls, and specific interventions are required to overcome such barriers.

Dropping out of school can also be a significant issue for adolescent girls. In conflict situations, the economic and social pressures on adolescent girls to give up their education can be intensified, due to, for example, early pregnancy and lack of parental supervision and involvement, and scarcity of resources. In a study on primary schools in Guinea, although girls represented almost 50 percent of students in early grades, they make up only 34 percent of those who complete the cycle at Grade 6 (Rhodes, Walker & Martor, 1998).

The figures for school retention through Grade 5 in some post-conflict countries where statistics are available indicate the extent of the issue within crowded, stressful and under-resourced camps, where women and girls are particularly vulnerable to sexual violence, pregnancy, HIV/AIDS, and sexually-transmitted diseases (UNESCO, 2002).

The reasons for parents to keep their daughters at home rather than in school are lack of sanitary supplies, early marriage, household responsibilities and frequent movement from one location to another. In some camps there are teenage pregnancy rates of 50 percent, and these young women may be isolated and marginalised, shunned by both other girls and older women. UNHCR is aware of the need for intensified efforts to promote female participation in education. A campaign to recruit more female teachers and classroom assistants will ensure

that girls receive sanitary supplies, that parents are sensitized, and that girls' scholarships are made available (UNHCR, 2002).

Reproductive health services for adolescents are limited and ad hoc at best. There are nascent efforts by non-governmental organisations to establish youth friendly centres, youth anti-AIDS clubs and use of peer educators among the adolescent population. However, adolescents are clearly a sexually active population and are particularly vulnerable (Krause et al., 2002)

The UNHCR (2002) report highlighted the need for girl refugees' to have equal access to formal and informal education including vocational training at all levels. The report further suggested that learning environment should be created to provide physical security, emotional stability, and protect them against possible sexual exploitation and abuse by the military through recruitment.

Tete (2005) notes that it may however be easier for international agencies to provide education to displaced populations than for devastated government departments to provide for those who stay behind. The quality of education for refugees may actually be superior and enrolment rates far higher than in countries of origin. The female refugees of Afghanistan descent in Pakistan had far better educational opportunities than girls in Afghanistan.

In Iran, girls' enrolment increased fivefold over the last five years and this access to quality education is cited as a reason for the estimated 3.5 million Afghan refugees remaining in Pakistan and Iran (UNHCR, 2002). Refugee women teachers too have benefited professionally, receiving quality training. Strategies are now being developed to ensure that these women's experiences and

qualifications are recognised, and that they can become leaders in educational reconstruction in Afghanistan.

In long term protracted refugee situations, it is important to ensure that local populations have access to the same quality of education and other services available to refugees. In northern Uganda, for example, specific interventions to promote education for local women and girls are required, as done to Sudanese refugees living in the area (Tete, 2005). Unless given specific attention, women and girls tend to be marginalised from humanitarian aid and are less likely to benefit from different interventions because of multiple barriers to their participation. Many will be busy with domestic, agricultural and income-generating responsibilities and less visible as they are kept close within families (Nordstrom, 1999).

Domestic violence exacerbated by alcohol and drug use or abuse is reported to be the most common form of violence. Most health facilities lacked protocols to manage the consequences of rape. Victim Support Units are in place at some camp police stations but it is not clear that the units' staff are adequately trained to care for victims of violence. Cooperation of Assistant and Relief Everywhere (CARE) is initiating gender-based violence prevention projects in two camps and other organizations have expressed interest in pursuing programming (Krause et al., 2002).

In conflict and crisis situations, traditional concepts and values are challenged and divisions between adulthood and childhood often become much more blurred thus making the linkages between education for women and girls

especially important. Early marriage and early pregnancy are features of many conflict situations and this has a significant impact on girls' education leading to early drop out. Unless given specific attention, adolescent girls are often ignored and their particular needs are not acknowledged (Tete, 2005).

As conflict makes living conditions more difficult, dangerous and uncertain, tentative educational and other rights-based gains made by women may be reversed. The Kosovo conflict of 1989-1999 and the Serbian Government policy in the 1990s for example, greatly restricted the freedom of movement of Kosovo-Albanian women. Not only did many women lose their jobs, but also accessing education became increasingly difficult and curricular standards fell (UNFPA, 2002).

Beyond physical and sexual vulnerability, attention should also be given to the psychological impact of conflict. Women and girls live with multiple traumas and the memories and fears of destruction, killing, suffering and sexual abuse (Save the Children US, 2003). These traumas can make it hard to concentrate and to learn, especially in formal programmes which may fail to acknowledge and help them to come to terms with their experiences.

Remedies to challenges of refugees

In investigating refugees and employment, two main ways have been identified as improving the services that are provided refugees and migrants; these include the work on the programmes that serve this population, restructure or expand them or develop new programmes in key areas. Programmes regarding legal status fear of discrimination, poor transportation and targeting refugees

directly in the formulation and implementation of public services and learn the communication methods that are most valued by this population. Regarding communication, host nations and organisations could also create more activities for immigrants and refugees youth, provide information on legal rights, information on starting new business, use of family and friends and in-language media to promote interaction among refugees in host countries.

(Collick-Perker & Tilbury, 2007)

In Ghana, the UNHCR is sanctioned to promote self reliance and local integration for those unable to return. The office also sought to promote self-reliance projects, facilitate the voluntary repatriation of Togolese refugees, find durable solutions for refugees in Krisan settlement and help the Government maintain a positive protection of the environment. They have implemented projects including the social counseling, psychological support and treatment and sexual and gender based domestic violence. Adolescent health services were also provided with sanitary pads. Technical assistance through tools and seeds were also provided (UNHCR, 2007).

There was also preventive education of girls, approval of nineteen schools at the Buduburam site among others. For health needs, camp based refugees received basic health care and others were referred to hospitals outside the camp when necessary. Food was being provided for twenty-five percent of total camp population. Refugees were provided with income generation activities under the Women's Empowerment and Economic Development Project (UNHCR, 2007).

It was reported that the sanitation situation in the Buduburam camp remained below acceptable standards. The UNHR also facilitates the collection and disposal of solid waste in the camp and terms of water supply, UNHCR has provided boreholes. The UNHCR also provided funding for repairs of houses when damaged especially during floods and also ensures that some refugees are sheltered in rented apartments as well as with family and friends (UNHCR, 2007).

Summary of literature

From the review of relevant literature, it became clear that the concept "refugee" was established as an international concept in 1951 by the United Nations Convention. The Organisation of African Unity (OAU) also passed a regional supplementary convention in 1969. This convention seeks to address the concerns of African refugees that are not covered by the UN convention 1951.

The basic tenets of refugee issues are fundamental human rights and the right to be respected or non interference rights. It is observed that refugees face challenges of accessing education, healthcare, employment and all other social amenities of human survival. Language difficulties were also noted by both Tete (2005) and Garret (2006). The 2007 World Refugee Report also notes that refugees suffer from the global burden of diseases. Despite the continuing efforts by UNHCR, NGOs and other partners to cater for the needs of refugees, there is the need for an extensive research on the socio-economic challenges health, housing, shelter and integration of refugees to formulate programmes and policies to address their needs.

CHAPTER THREE

METHODOLOGY

Introduction

This chapter comprises discussions on the procedures used in the collection of the data for the study. It covers description of the study area, study design, population, sample size, sampling procedures, data collection techniques, data and sources, and the framework for the analysis of the data.

The Gomoa Buduburam Camp

The study area is the Buduburam refugee camp. The camp is about nineteen kilometres west of the capital city, Accra. According to the political demarcation Gomoa Buduburam is located in the central region of Ghana. The camp was set up in 1990 and originally catered for 13,000 Liberians who needed refuge as result of the Liberian civil war. Since then it has grown to host a large number of Liberians and their dependants. Some returned home but came back later to Ghana citing continued insecurity in their country and have made Ghana their permanent country.

From 1997 to 1999 UNHCR shifted its focus from humanitarian support to voluntary repatriation. Some 3,500 refugees were assisted to repatriate but the vast majority decided to stay at Buduburam. Due to the re-intensification of the conflict in Liberia in early 2000 and the civil unrest in Côte d'Ivoire the numbers

of refugees at Buduburam have increased. Ghana hosts the largest refugees in West Africa, with more than 35,000 refugees and asylum-seekers on its territory at the end of 2007.

The main groups were Liberian refugees in the Buduburam settlement which make up seven-six percent of refugees. Refugees of various nationalities in Krisan settlement (4%), Togolese refugees with host communities in the Volta region were sixteen percent and urban refugees and asylum seekers in and around Accra were four percent (UNHCR, 2007).

According to the UNHCR Global Report (2007), Ghana hosts the second largest settlement of Liberian refugees and most of them based at the Buduburam Refugee Settlement which has over 26,600 residents at the moment. Out of this number forty-three percent of them are below 18 years and fifty-three percent constitute women.

Spatially, the Buduburam camp is divided into twelve zones, ten of which are in the main camp area and two on the other side of the main road from Accra. Beyond the entrance to the camp is the main square which is surrounded by small stalls. In the middle are the UNHCR notice boards which are checked regularly in hope of resettlement placement in the United States of America. Around the main square are the principal public amenities such as the camp clinic.

The two main streets leading from the square are lined with small shops, stalls, bars, video clubs and internet cafes. In addition to the official camp zones, there are also four "Gaps": areas outside of the officially recognised organisation of the camp. Mostly young people who came without parents or other relatives

inhabit the Gaps. Together they form a sub-culture based heavily on black American youth culture and Rastafarian identity. The Gaps tend to be shunned by most people in the mainstream camp.

Study design

The study employed the cross-sectional descriptive design. The cross-sectional design studies units from various portions of the study population on a one time basis. The design is appropriate to ascertain the prevalence of a phenomenon across a target population (Kumar, 2005). The descriptive aspect of the design helps the researcher to thoroughly explore, discuss and explain relationships among variables within the population being studied (Sarantakos, 2005). In this study, the design helped the researcher to explore, discuss and explain variables related to socio-economic conditions of refugees at the Buduburam camp such as education, employment, health, and general livelihood conditions.

Population of the camp

The estimated refugee population in the Buduburam Camp as at 2007 was 26,600. The majority (99.7%) were Liberians and the rest (0.3%) comprised of refugees from La Côte d'Ivoire, Sierra Leone, Togo. These figures are not stable due to the constant in and out flows of refugees. Women comprise 53 percent of the population (UNHCR-Ghana, 2007).

According to the camp manager, the statistics of refugees with special attention to age and sex of the refugees and asylum seekers in the camp as at 2003, indicate that there were 1,988 male and 2,040 females between the ages of 0-4 years at the camp. Children between the ages of 5-17 years were 6,602 males and 7,479 females respectively. This brings the total number of children below 17 to 18,109 of which 8,590 were males. Of these, there were about 300 unaccompanied and separated children.

A survey conducted in 2003 indicated that there were more than 300 children less than 17 years who were not in school. The exact figures are hard to come by due to various logistical problems associated with counting the actual numbers present in the camp at any point in time. The figures provided by the camp manager, however, suggest that the youth constitute a sizeable proportion of the population with females in the majority.

Target population

The target group for the study comprises Liberian refugees residing in the Gomoa Buduburam camp and who are eighteen years and above. The selection of that age group was necessary due to the investigator's belief that refugees from age eighteen and above could better express themselves on the issues the investigator is interested in. Also in the constitutions of Ghana (Chapter seven, Article 42) a person aged 18 years with sound mind is expected to vote. These views greatly informed the researcher decision to select people with age 18 and above.

Sample size and sampling procedure

In order to determine a representative sample for the study, the table for determining sample size (Sarandakos, 2005) was used for a household of 8867 hence the sample size arrived at was 302 households. However, due to resource constraint a sample size of 150 respondents was used. The systematic sampling procedure was employed in the selection of household because of the homogeneity of the population and also to ensure that each element in the population have a known and equal probability chance of being selected.

The household interval was derived from dividing N (which is total household population) by n (which is number of sampled household). Hence K = 8867/150 which is 59, so every 59th house was chosen after a random starting point between 1 and 59. Hence if the random starting point is 23, the subsequent households were then determined using the interval of fifty-nine. The researcher visited each of the selected household to identify one person who was 18 and above years to be interviewed. This became necessary because most of the refugees did not stay in their cubicles, so any adult (from 18years and above) that the researcher met in each selected household was interviewed.

Data collection technique

Data was collected on issues relating to the state of infrastructure facilities in the refugee camp, healthcare, and access to formal education and employment from both primary and secondary sources. The study employed both close and open ended questions to solicit for primary data from respondents. Also secondary

data were sourced from annual reports, research works, journals and other relevant literature relating to the study.

The questionnaire was divided into five main sections; the first section comprised demographic data which sought to obtain respondents' details such as age, sex, marital status, and educational status. The second section was aimed at healthcare delivery, the third section elicited information on the state of infrastructure in the refugee camp, the fourth section sought to ascertain the employment situation in the refugee camp and the fifth section sought to find the level support from non-governmental organisations. In addition to the questionnaires, interview guides were prepared and administered to the stakeholders' example (WISE, UNHCR, NGO's and NADMO).

These organisations are concerned with the welfare of refugees in the camp. Based on the concerns of these stakeholders, the researcher observed the social facilities available at the camp such as health post, nature of roads, school structures, toilet facilities and cubicles/bedrooms in the town. The development of economic/business activities at the camp was also observed to explore the viability of employment avenues.

Ethical considerations

Ethical considerations were observed especially in primary and secondary data collection. In primary data collection, respondent's consents were asked before they were interviewed. The purpose of the study and how data collected would be applied was also explained to each respondent. Respondents were

assured of the confidentiality of their responses. In addition, the sources of all the secondary data used were duly acknowledged.

Fieldwork

The field work began on 15th August, 2007 and ended on the 22nd September, 2007. The researcher together with two trained research assistants visited the sampled respondents. Respondents who could read and write were given the questionnaire to complete. Some of the questionnaires were, however, administered as interview schedules to respondents who could not read and write. The self-administered questionnaire given to the respondents took a longer time to retrieve. That notwithstanding, all the questionnaires were retrieved.

Field challenges

The researcher encountered some challenges during the field. These included household members being absent at the time of visit which necessitated several visits to those households before data was collected. This resulted in some resource constraints, especially financial resources, which were over stretched.

Data processing and analysis

Data collected from the field were edited and coded. The questions were presented in modules to reflect the various objective of the study. The Statistical Product and Service Solutions (SPSS, version 16) was used in analysing the data. The data from the questionnaire and interviews went through the process of

editing, coding, and cleaned before data inputting. The results of the study was

analysed and presented using tables, frequencies and percentages.

CHAPTER FOUR

RESULTS AND DISCUSSION

Introduction

This chapter involves discussions on the findings of the study in accordance with the set objectives. The presentation is in two parts; the first part covers the profile of respondents and which include age, sex, and marital status, number of children, educational level, religion and occupation. The second part focuses on the objectives which include infrastructure situation in the camp,' accessibility to formal education, health care and the contribution of stakeholders to the wellbeing of refugees.

Profile of respondents

The respondents in this study were between the ages of 18 and 60. This category of age group is the working population. However, majority of the respondents were below 30 years; and since the camp was set up in 1990, this means that those below age thirty were mostly brought up in Ghana. Table 2 confirms Save the Children US (2003) concerns about issues related to the youth and adolescents. Sixty percent of the respondents were single, twenty-nine percent were married, three percent were separated whilst four percent of them were widowed. This is almost the same as the proportion of young people in the camp.

This confirms the findings similar to Kibread's (1983) observation that most people flee from war after a partner is either conscripted or killed during the war.

Table 2: Marital status of respondents

Status	Frequency	Percent
Single	90	60.0
Married	44	29.3
Divorced	4	2.7
Separated	5	3.3
Widowed	6	4.0
Non response	1	0.7
Total	150	100

Source: Field data, 2007

The next background issue that was analysed is sex. Out of the 150 respondents, seventy-two percent were females, while 27.3 percent were males. This finding is consistent with Martin's (1992) observation that more men than women fight during wars and more women than men often find themselves as refugees outside the war zone.

The majority (52%) of the respondents had three children or less as shown in Table 3. This shows that majority of the refugees have small family size. The study revealed that thirty-three percent of the respondents had no children and these comprised mostly men and women who were in the senior high school. Also twelve percent of the respondents had between 4-6 children, while three percent had more than seven children.

Table 3: Number of children of respondents

Number	Frequency	Percent
7+	4	3.0
4-6	18	12.0
3 or less	78	52.0
None	50	33.0
Total	150	100.0

Source: Field data, 2007

Another background issue analysed was occupation. The various occupations mentioned cut across all the sectors of the economy emphasising the diversity of the refugees. It was also revealed that 36% were students. Tete (2005) was of the opinion that refugees find it difficult to secure jobs in the formal sector hence they engage in self employment. The findings from the study confirm that of (Tete, 2005) as majority of the respondents were engaged in self employment.

The field data (as in table 4) shows that some of the respondents were traders, artisans, and hairdressers. However, (6.7%) were teachers while (2.6%) were unemployed as shown in the Table 4 on page 47.

Table 4: Occupation of respondents

Occupation	Frequency	Percent
Student	54	36.0
Dressmaker	7	4.7
Artisan	9	6.0
Labourer	1	0.7
Trader	34	22.7
Teacher	10	6.7
Hairdresser	12	8.0
Doctor	1	0.7
Pastor	1	0.7
Carpenter	2	1.3
Engineer	1	0.7
Secretary	2	1.3
Footballer	1	0.7
Unemployed	4	2.6
Total	150	100.0

Source: Field data, 2007

Regarding their religious affiliation, majority (91%) of them were Christians. The reason may be that Christianity is the dominant religion in Liberia and since all the respondents were Liberian refugees one expects Christianity to dominate. Also 4.7% and two percent were Muslims and Traditionalists

respectively whilst 2.6% belonged to no religion. The distribution of respondents with respect to religion is shown in Table 5.

Table 5: Religion of respondents

Number	Frequency	Percent
Christian	136	90.7
Muslim	7	4.7
Traditionalist	3	2.0
None	4	2.6
Total	150	100.0

Source: Field data, 2007

As indicated in Table 6, majority (53.4%) of the respondents had resided in Ghana for seven or more years, twenty-five percent of the respondents had resided in the country for three or less years while 21.3 percent of the respondents had lived in Ghana between four and six years. The period of residence is necessary as this will provide more background to the issues under consideration.

Table 6: Years of residence

Years	Frequency	Percent
7+	80	53.4
4-6	32	21.3
3 or less	38	25.3
Total	150	100

Source: Field data, 2007

State of infrastructural situation in the Buduburam camp

A number of questions were posed to assess the state of infrastructure in the Buduburam camp. The questions centred on health care, water and sanitation, roads, electricity and schools. These are supposed to be basic facilities that every town should have access to. This was to find out gaps if any or similarities as outlined in Sommers (2002), Burgess (2004) and Tete (2005). The findings on the state of infrastructural situation are discussed below.

Healthcare

Respondents were first asked to indicate the number of health post, in the camp. This question was necessary because the researcher wanted to find out if respondents were aware of the existence of these facilities and whether they access them. Majority (80%) of the respondents indicated that there was one, but a few (7.3%) reported that there was more than one health post. There were however, some private clinics in the camp but respondents admitted that these private clinics charge very high fees for the services they provide.

Respondents' access to health varied with respect to the time one spent at the clinic and also the services provided. Regarding the time spent, respondents said it depended on the sickness and the services required as shown in Table 7.

However, with respect to normal out-patient department (OPD) respondents were of the view that patients spend a minimum of 30 minutes to a maximum of one hour as shown in Table 7. These observations are not different from the nationwide situation. The findings are also similar to those of Tete (2005), who described healthcare seeking challenges as an unstable situation.

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Table 7 which is below gives a further explanation to the time spent by patients at the OPD.

Table 7: Time patients spend at out-patient-department

Time in hours	Frequency	Percent
Three or less	38	25.3
Between four and six	32	21.3
Seven or more	80	53.4
Total	150	100

Source: Field data, 2007

Services Provided By the Health Post

Respondents were asked to identify the health services they normally accessed. Among the health care services that the respondents normally accessed were OPD, consultation, injection/dressing, pharmaceutical and gynaecology. After the identification of these services, respondents were asked to indicate their degree of satisfaction with these services. The Likert scale was used and respondents' choice of response was scored on a scale of 0-4. The Likert scale was used as follows:

0 - Not sure:

1 – Very unsatisfactory

2 - Unsatisfactory

3– Satisfactory

4 – Very satisfactory

It can be deduced, however, from the scale that a score of 0 indicates that respondents are not sure about the existence of the service. A score of more than 0 but not more than 2.5 also means that respondents are not satisfied with the service while a score in excess of 2.5 indicates that respondents are satisfied with the services. The details of respondents' satisfaction with health care services are presented in the discussions that follow. Out of the 150 respondents, 101 indicated their level of satisfaction for OPD services, whereas some respondents were not satisfied with the OPD services provided, others were satisfied. Table 8 shows respondents' satisfaction with OPD services.

Even though some respondents indicated their dissatisfaction for OPD services about 36.6 percent were satisfied (20.8%) of the respondents were very satisfied with OPD services. On the whole, a mean score of 2.53 on a 1-4 scale indicate that respondents were satisfied with OPD services. However, 24.8 percent of the respondent were of the view that OPD services was very unsatisfactory

The respondents were asked on their satisfaction and they indicated that, they are treated promptly and discharged when there were not many patients. Additionally, the OPD staffs were readily available friendly and prepared to attend to them. This corresponds with the reported basic health services that were provided for refugees free of charge at the camp (UNHCR, 2007).

Table 8: Satisfaction with out-patient-department services

Level of satisfaction	Frequency	Percent
Very unsatisfactory	25	24.8
Unsatisfactory	18	17.8
Satisfactory	37	36.6
Very satisfactory	21	20.8
Total	101	100.0

Source: Field data, 2007

Medical consultation is one of the services provided by health centres. With respect to this service, patients or people consult experts for vital advice pertaining to their illness or diseases. Respondents were asked to indicate their satisfaction with respect to consultations at the health centres. There were 105 valid responses and the details are presented in Table 9. The more (50.5%) were satisfied with the consultancy services provided. However, (17.1%) accounted for the respondents who said the consultancy services were very unsatisfactory. Also a minority (8.6%) of the respondents were very satisfied with the consultancy services. A mean score of 2.5 showed that respondents were satisfied with the consultancy services provided by the health post.

Table 9: Satisfaction with consultancy services

Level of satisfaction	Frequency	Percent
Very unsatisfactory	18	17.1
Unsatisfactory	25	23.8
Satisfactory	53	50.5
Very satisfactory	9	8.6
Total	105	100

Mean score   2.5

Source: Field data, 2007

With regards to injection and dressing, the 105 responses received, varied according to respondents' satisfaction of the services rendered as shown in Table 10. Those who responded to this question had actually used this service.

Table 10: Satisfaction with injection and dressing services

Level of satisfaction	Frequency	Percent
Very unsatisfactory	17	16.2
Unsatisfactory	22	20.9
Satisfactory	47	44.8
Very satisfactory	19	18.1
Total	105	100

Mean score   2.64

Source: Field data, 2007

Responses from Table 10 show that respondents have varied perceptions about the injection and dressing services provided by the health posts in the

Buduburam camp. The more (44.8%) of the respondents were satisfied with the injection and dressing services of the health post, while (8.6%) nineteen were very satisfied. On the whole a mean score of 2.64 indicate that respondents were satisfied with injection and dressing services.

The researcher asked the respondents to indicate the degree to which they were satisfied with the pharmaceutical services provided by the health posts. Some of the respondents were not satisfied with the pharmaceutical services, but others were very satisfied. Table 11 shows the satisfaction with pharmaceutical services details.

Table 11: Satisfaction with pharmaceutical services

Level of satisfaction	Frequency	Percent
Very unsatisfactory	18	17.1
Unsatisfactory	25	23.8
Satisfactory	53	50.5
Very satisfactory	9	8.6
Total	105	100

Source: Field data, 2007

The majority (50.5%) and the minority (8.6%) who have patronised pharmaceutical services provided by the health post were satisfied and very satisfied with the services respectively. Others (17.1%) were very unsatisfied, while (23.8%) were unsatisfied with pharmaceutical services. On the whole a mean score of 2.50 indicates that respondents were satisfied with pharmaceutical services provided by the health posts.

Another service provided by the health posts is gynaecological service. This service is mostly available in hospitals but some of the respondents were not sure about the availability of such services in the clinics in the Camp. Some of the respondents were not aware of this service and so could not indicate the extent of their satisfaction. In spite of this, thirty percent out of eighty percent of respondents were female and were very satisfied with the gynaecological services provided by the health posts.

Table 12 shows the extent to which respondents were satisfied with gynaecological services provided by the health post in the Buduburam camp. Among those who were sure of the gynaecology services, thirty said they were very satisfied while nine said they were satisfied with the services. A mean score of 2.4 (on a scale of 1-4) shows that respondents who had patronised gynaecology services were generally unsatisfied with the service as shown in Table 12.

Table: 12 Satisfaction with gynaecology services

Level of satisfaction	Frequency	Percent
Very unsatisfactory	32	38.1
unsatisfactory	13	12.5
Very satisfactory	30	35.7
Satisfactory	9	10.7
Total	84	100.0

Mean score 2.44. Source: Field Data

On the whole it became evident that respondents were satisfied with the healthcare (except for gynaecological services) in the Buduburam camp even

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though some of the healthcare services provided in the area needed improvement. This is in contrast to the findings of Tete (2005) that refugees in camps are not satisfied with the healthcare facilities provided. The general satisfaction, expressed by the refugees, with healthcare services they had been receiving was in line with report by the UNHCR, Ghana (2007), which reported a good health service provision to the refugees in the country.

Water and sanitation

Water and sanitation is essential for the wellbeing of every individual. As a result the researcher found it necessary to determine the state of water and sanitation in the camp. Respondents were asked to indicate the main source(s) of water they use in the camp. The result indicates multiple sources of water for the people in the camp. Out of the one hundred and fifty-eighty multiple responses 80 (50.6%) referred to tanker water while 32 (24.1 %) relates to pipe borne water. Nine (5.7 %) and four (2.5%) responses related to borehole and mechanised well respectively. Table 13 shows the multiple responses regarding sources of water.

Table 13: Sources of water

Source	Frequency	Percent
Tanker water	80	50.6
Pipe borne water	38	24.1
Mechanised well	4	2.5
Borehole	9	5.7
Manual well	13	8.2
Stream/spring/river	14	8.9
Total	158	100.0

Note: Multiple responses.

Source: Field data, 2007

Table 13 shows the sources of water available at the Buduburam camp. Responses received indicate that majority of them used water supplied by water tankers. Respondents paid between Thirty Ghana cedis (GH¢30.00) and Sixty Ghana cedis (GH¢60 .00) for a tanker depending on the source. Some parts of the town had access to pipe borne water and this is a major source of water as indicated by 24.1 percent of the responses. Other sources of water were streams, rivers, spring, manual well, borehole and mechanised well. Regarding the adequacy of water, respondents said they do not get adequate water and the quality of water they use was bad. The respondents who said that the quality of the water that they use was poor indicated that the water was not well treated. Some of the respondents said that the water they use has a bad taste. Other explanations given include the bad smell of the water and its salty taste.

Toilet facilities in every community are very essential and individuals and communities try to put up one (UNESCO, 2004). In well planned (elite) communities, it is believed that almost every household will own its toilet facility. However, the issue of public toilets come into play in less endowed communities. In the beginning the camp was set up temporarily and because of this the Government of Ghana put up public toilets for the refugees to use. Over 60 per cent of the total respondents indicated that these facilities are the only public toilets in the camp. Some (29.3%) said they use the bush regularly while others (10.7%) said they occasionally use the bush as a place of convenience. However, respondents were not happy about the state of these public toilets which they said was bad.

Roads and electricity

Roads and electricity are very important for every community. Roads link one community to the other and businesses and economic activities thrive on electricity (power). One hundred and forty three respondents out of 150 were of the view that the road network in the area, with the exception of the Cape Coast – Accra road, was bad. They said that they spend a lot of money on transportation. Regarding respondents' access to electricity, almost all the respondents said that they used to have regular supply of electricity. They however, commented that when the rationing of electricity started in the middle of 2006, the camp received irregular supply of electricity. There was also no alternative power available to most of the respondents' homes even though some said that they use private generators as a complementary source of power.

Shelter and refugees

Shelter is one of the basic necessities of human life (UNDP, 2002). As a result, respondents were asked to indicate whether bedrooms were readily available and if so how many persons occupy a room (the detail is shown in Table 14). Respondents said that bedrooms available to the refugees were inadequate as some (28.7%) of the refugees were crowded in single rooms. It also became evident that some of the refugees have legally acquired land and are living in their own apartments. However, respondents said the number of persons per room depended on the availability of rooms and the size of the room.

Table 14: Persons per bedroom

Number of persons	Frequency	Percent
2 or less	37	24.7
3 – 4	34	22.7
5 – 6	32	21.3
7 or more	43	28.7
Non responses	4	2.6
Total	150	100

Source: Field data, 2007

Table 14 shows the number of persons per bedroom at the Buduburam camp. Forty three of the respondents said there are seven or more persons per bedroom. Other responses given varied from 2 or less to between five and six persons per bedrooms. The findings on shelter do not give a clear view of overcrowding as pointed out explicitly by Tete (2005), that overcrowding in

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bedroom is typical of many refugee camps. This view point might need some further investigation in a different study.

Refugees' accessibility to formal education

This part of the analysis tried to give an interpretive picture of the educational access in the camp. It examines the availability of educational institutions, infrastructure and human resource. This is to address the human right dimension of education as stated in the 1951 convention and also discussed by Garret (2004) and Nicolai (2003). Access to education, especially basic education is the right of every child. Article 12-30 of the Refugee Convention demands that refugees have the right to education. However, accessibility to formal education depends on the availability of schools.

Sixty percent of the respondents admitted that there were enough schools in the camp and their children also have access to the schools. These respondents indicated that the maximum distance from home to school was five kilometres, which conforms to the minimum standards described by UNESCO's Inter-Agency for Education in Emergencies [INEE] (2004) and the Education in Emergencies discussed by Nicolai (2003). Their concern was that the public schools in the area do not offer quality teaching, so these respondents (over 60 %) preferred to send their children to the private schools which according to them were expensive.

Almost all respondents (142) mentioned that there were two basic schools in the camp which were both private. However, other schools, both private and

public, exist outside the camp. The public schools were four, while only one private school was identified outside the camp. This shows that access to education in and outside the camp was not a problem, since there were schools available in and outside the camp that easily accommodated children as discussed by the UNHCR (2007) in their Global Report.

Average enrolment per class stood at sixty. This does not allow for any meaningful teaching and learning, since that is a very large class size as compared to the national average of 35 pupils per class (MoE, 2009). In effect pupil teacher interaction cannot be said to be very good since the teacher has a lot of pupils to attend to. This then goes a long way to affect the quality of students' turn out from schools. The teacher pupil ratio stood at one teacher to sixty pupils (1:60). This means that teacher pupil interaction will be sacrificed due to the large number of pupils the teachers have to manage as compared to the 1:35 national average.

Questions pertaining to the facilities in the schools centred on school buildings, library, sports, sanitation (toilets and urinals) and furniture. Generally, the study revealed that the state of many school buildings were bad. Some of the reasons attributed to the bad states of school building were that the roofs leak anytime it rains, the classroom sizes were not up to standard and the materials used for the building were sub standard. However, the nature of school facilities in the camp is not a peculiar one. The situation at the camp is an example of what happens in almost all rural schools in Ghana (MoE, 2009).

Library facilities are supposed to aid academic work in every educational institution. Some of the respondents (140) said some of the schools, especially the private ones, have very good libraries with adequate textbooks. These respondents, however, maintained that the public schools do not have such facilities and the few that have libraries do not have adequate books. This phenomenon is not different from what the MoE (2009) reports that libraries are under-stocked in most public basic schools in Ghana.

It is mandatory that public schools in Ghana take part in sporting activities which are organised every year. This requires that schools should have sport facilities to take care of the physical needs of the pupil. Respondents were divided with respect to the state of sports facilities in the schools. The findings showed that public schools have adequate sports facilities which included fields of play, footballs, jerseys, and volley balls as discussed by INEE (2004) as minimum standards. The private schools did not have playing field due to the high cost of land in the study area.

With respect to sanitation in the schools, most of those visited did not have toilet facilities, but there were urinals, which is against the MOE/GES standards as well as UNESCO standards for running schools in emergency areas. The problem of inadequate toilet and urinal facilities were peculiar to the public schools. The researcher also asked questions on the state of furniture in the schools. According to the respondents, most of the furniture in the schools were in a bad state and needed maintenance. Others indicated that the furniture were not comfortable and needed redesigning.

Availability of classrooms and enrolment

On visit to the schools, it became evident that no classroom had a pupil population of less than sixty, an indication of high pupil teacher ratios. It was also revealed that the available classrooms per school varied from an average of five for Junior High School to ten for primary. It is important to note that some of the schools had as many as twenty classrooms in the case of public schools.

UNHCR (2009), in their Global Report, stated that access to basic education was facilitated for all refugee children and some 5,500 were enrolled in school, with approximately half of them being girls. Initially, one school was constructed and supplied with furniture for 500 children and handed over to the Ghana Education Service. The report also stated that another two schools were constructed in 2003 and 2004 by the UNHCR and managed by an implementing partner until 2009 when they were also handed over to the Ghana Education Service.

The Global Report further discussed sponsorship for 'special children' and pointed out that sixteen vulnerable refugees (eight boys and eight girls) were assisted with education (UNHCR, 2009). According to the Global Report, some 70 students were sponsored by the Albert Einstein German Academic Refugee Initiative (DAFI) and three students were supported at the post-graduate level under the DAFI scholarship programme. More than 60 refugees were helped to pursue vocational training. In Buduburam, a capacity building workshop was organized for some 60 teachers in collaboration with the Ghana Education

Service. These discussions indicate that access to basic education for refugee children was provided to ensure that the children access their rights to education.

Employment situation in the camp

This section is devoted to employment situation in the camp. It further draws a linkage between the finding and relevant literature reviewed. Every individual has the right to employment and this right can take the form of self-employment or wage employment. Like all individuals, refugees do have the right to self and wage employment. Garret (2006) identified access to employment as one of the major problems facing refugees.

In the work of Colick-Perker and Tilbury (2007) employment for refugees take the forms of being an employee in formal organisations, employee in private enterprises, and self employment. They also pointed out that refugees get jobs through various avenues including formal methods of advertisements in the print and electronic media, through door to door knocking and through community networks. The thoughts of Colick-Perker and Tilbury (2007) reflect in the very few refugees who managed to get job from the Buduburam camp as discussed in the following sections

Respondents were first asked to comment on the availability of jobs in Ghana. With the exception of two who said jobs are available if one holds the required skill, experience and qualification, all the respondents said jobs are not readily available in the country. This is a confirmation of the nationwide situation of jobs in Ghana. The limited job situation in Ghana has been said to be

compounded by the tradition of recruitment, which is based on nepotism, which leads to recruiting from one's family or networks, without necessarily creating equal opportunities (ISSER, 2009).

In spite of the worsening job situation in Ghana (ISSER, 2009) partly as a result of limited start up capital available to entrepreneurs and difficulties in setting up new businesses in Ghana, the UNHCR (2007) Global Report suggests that almost 1,000 refugees were trained in various professional skills and refugee-managed training facilities were assessed and used for the training programmes. Those who passed examinations and received certification were provided with start-up tools and equipment as well as small business management training to help them become self-reliant and improve their livelihoods

In spite of the opportunities created among the refugees, only thirty five of the respondents had actually sought employment and out of this number only five were successful. The reasons given by those who were not successful included their non Ghanaian status, their inability to acquire resident and working permit and limited vacancies. In spite of these problems, some of the refugees have learnt trades in Ghana and are now self-employed as pointed out by the UNHCR (2009) Global Report.

Based on the above reasons for failure to secure jobs, respondents were asked to describe the job market. The majority (69.2%) of the respondent said that getting a job in Ghana is very difficult. The position of the majority of the conform to that of Colick-Perker and Tilbury (2007), who have explained that refugees normally find it difficult to get jobs in their host countries irrespective of

their qualifications, skills, and experience because of visible discriminations. Other respondents said that jobs do not exist in Ghana. A few of them said refugees' accessibility to jobs depends on their ability to speak the local language while some simply described the job situation as discriminatory.

The findings are also similar and consistent with those of Tete (2005) and Garret (2006) that refugees' lack of proficiency in required languages is a barrier to employment and better life and this keeps them in the informal sector. Data collected on occupation confirmed that majority of the refugees were engaged in the informal sector.

Table 15: Classification of Occupation of Respondents

Category	Occupations	Frequency	Percent
Formal Sector	Doctor, Secretary, Teachers and Engineer	15	16.3
Informal Sector	Traders, Dressmakers, Carpenters, Hair Dressers, Casual Workers	77	83.7
Total		92	100

Source: Field data, 2007

Their occupational classifications showed that the majority (83.7%) of the respondents who were employed work in the informal sector this included hairdressers, dressmakers, casual workers, carpenters and traders and (16.3%) were in the public and private formal sectors which included Engineers, Doctors, Pastors and Secretaries.

Contribution of stakeholders to the wellbeing of refugees

The body responsible for refugees is the United Nations High Commission for Refugees (UNHCR). Discussions and literature indicate that UNHCR's operation in Ghana, including operations in Budumduram, aimed to maintain a favourable protection environment by safe-guarding asylum and pursuing local integration simultaneously with facilitated voluntary repatriation and the strategic use of resettlement (UNHCR, 2009).

The multifaceted approach employed by the UNHCR. office in the pursuit of local integration, as well as the active engagement of civil-society organizations and local government structures, ensured that although the Ghana Refugee Board was non-functional proactively after the 2008 national elections in Ghana, progress was made in expanding the self-reliance of refugees.

UNHCR worked with nine implementing partners (five national NGOs and four government agencies). It also worked with other multinational organisation such as FAO, UNAIDS, UNFPA, UNIDO, OCHA and WFP in the context of thematic interventions and the United Nations Development Assistance Framework (UNDAF) as well as in contingency planning and emergency preparedness. Close collaboration was also maintained with donor missions.

Discussions with the UNHCR revealed the following classification as its implementing partners:

Government

- Ghana Education Service
- Ghana Health Service

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- Ghana Refugee Board

- National Disaster Management Organization

NGOs:

- Assemblies of God Relief and Development Service

- Christian Council of Ghana

- Right to Play

- National Catholic Secretariat

- Women's Initiative for Self-Empowerment (WISE)

Other multinational organisations:

- FAO

- IOM

- OCHA

- UNAIDS

- UNFPA

- UNICEF

- UNIDO

- UNIFEM

- UNV Programme

- WFP

- WHO

The government bodies worked mainly on securing the legal environments for the refugees. For example, the Ghana Education Service (GES) partnered to

ensure that the standards of education provided on the camps were at par with regulations governing education service provisioning. The GES also ensured that there was adequate supervision in the schools at the camp. The GES mainly collaborated with the UNICEF and other agencies on educational issues concerning refugee children at the Buduburam camp.

The Ghana Health Service supervised medical conditions and outreaches launched at the camp. They collaborated with the WHO and other agencies to ensure the provision of health service delivery to the refugees at the camp. The Ghana Refugee Board until its dissolution was in charge of policy framework concerning Ghana's position on hosting refugees. They worked together with all the stakeholders for monitoring purposes, but particularly with the UNHCR on issues of programming and implementation. The National Disaster Management Organisation also worked together with the Ghana Refugee Board as well as the UNHCR to help establish the camp.

Interviews with the WISE and NADMO indicated that they have worked with the UNHCR in the implementation of several programmes in the areas of education, child protection, HIV/AIDS education, health seeking of refugees, maternal health issues, general health education, environmental sanitation, skills training, psycho-social counselling, reproductive health matters, and general livelihoods.

The respondents also mentioned organisations, agencies and bodies that were responsible for their welfare in the camp. The stakeholders they mentioned as responsible for the welfare of refugees include Children Better Way (CBW),

Vision of Hope, Women of Glory, Aming Training Centre and New Liberian Women. Others include Respect Ghana, World Vision, Catholic Relief Agency, Christian Council of Ghana, and Movement for Progression. Other stakeholders were identified by their acronyms and they include ALP, WISE, and PCO. Respondents could not give the full meaning of these organisations.

In their views, the stakeholders helped them in diverse ways. Some of their support was monetary and others were in kind such as school uniforms, religious materials, sanitation, counselling, food and medicare, scholarships and computer training. Respondents however, were of the view that some of the Non Governmental Organisation used them as baits to make money. The respondents stated that when the money is given to the organisation they do not use the money for the intended purpose. The respondents advised stakeholders, especially NGOs to use monies for the intended purpose, give financial support to start business, offer scholarships, and concentrate more on children rather than staffs of the organisation. Some of the respondents also indicated that they received help from churches. According to them, some churches gave them money and food, supported their children in their education, provided spiritual help and counselling, clothing and loans.

The respondents claimed that the United Nations High Commission for Refugees is the legal institution responsible for the welfare of refugees, but they had mixed feelings about the role of UNHCR in addressing the refugee problem. Respondents were asked to indicate whether they receive help from UNHCR. About (85.5%) of the respondents said they do not receive help from UNHCR.

They however, admitted that they used to receive food and money from the agency. Some indicated that they were receiving a monthly support of a bag of maize and a gallon of cooking oil. In addition to the provision of food for refugees, the UNHCR keeps records on refugees, repatriates, resettles and reintegrates them, provides aid to the aged and the disabled, award scholarships, protects refugees and counsels' refugees. This is similar to the findings of Tete (2005) which indicates that refugees are supplied with food, shelter, and even money.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Introduction

This chapter presents the summary of the findings for the study in relation to the specific objectives. It also present the conclusions for the study, and provides recommendations to stakeholders who will help improve the socio-economic challenges of refugees in the Buduburam camp. The summary conclusions and recommendations are presented in subsequent sections.

Summary

The study examined infrastructure and employment situation of refugees', accessibility to formal education and the contributions of stakeholders to the wellbeing of refugees. The study used a multi stage sampling procedure to generate the sample size. A sample size of 150 respondents was drawn from the population by the use of a systematic and convenience sampling methods. Interviews were also conducted in organisations involved in refugee issues. The study made use of both quantitative and qualitative data in presenting the analysis.

The first objective sought to ascertain the infrastructural situation in the Buduburam camp. This comprised of healthcare, roads, electricity, water and sanitation, as well as shelter. The following issues were revealed:

- The rooms were overcrowded with 72.7 percent of respondents sleeping in rooms that have over three to six occupants and also 28.7 percent of the respondents were more than seven in a room. Power supply to the refugee camp was also irregular.

- The road network within the refugee camp was very poor with the exception of the Accra to Cape Coast road which runs through the the camp. This has led to the high transportation cost in the camp.

- There was low level of accessibility to potable water and pipe borne water supply is also irregular. About 50.6 percent of the respondents get their water from tanker services at a high cost which ranges between Thirty Ghana cedis (GH¢ 30.00) to Sixty Ghana cedis (GH¢ 60 .00).

- Also sanitation problems included lack of proper drainage and sewerage systems and lack of proper refuse management. These conditions were similar to what occurs nationwide. Access to toilet facility was poor the majority (60%) use public toilets while the rest (40%) use the bush as places of convenience.

The discussion of refugees' access to formal education yielded the following issues:

- Access to schools was good however, parents preferred to send their children to private schools because they claim the quality of teaching in the public school is poor. The libraries were poorly stocked, inadequate furniture and leaky roofs which ends school sessions abruptly any time it rains.

- The school in the refugees camp lacked trained teachers and also classrooms were limited resulting in high teacher to pupil ratio (1:60) which is far more than the national average (1:35). The classrooms were overcrowded and therefore affected teaching and learning, and ultimately the performance of the students.

- However access to health facilities is good and the refugees in the camp were satisfied with most of the services provided except for gynaecological services. The services include the OPD, Injection and dressing and pharmaceutical services.

In the assessment of the employment situation among the refugees at the camp, the following issues emerged:

- There were no employment opportunities in the formal sector for the refugees. Out of the 35 of those who had sought formal employment, only five were successful. This is however not peculiar to only refugees, but it is a nationwide problem.

- Also about forty-forty percent of the respondents were involved in the informal sector. These were self initiated businesses since getting formal employment is difficult.

- Language barrier was also a limiting factor to refugees' access to employment in Ghana. Some positions required that the applicant be fluent in a specific local language. It was reported that recruitment process was based on networks even when positions were advertised.

The assessment of stakeholders' contribution to the well being of refugees was the third objective and main findings were:

- The UNHCR which is the main body responsible for refugees collaborates with civil society organisations to ensure the well being of the people. Areas of support identified include scholarships, food, counselling, loans, education and Medicare.

- The UNHCR on the other hand was responsible for the provision of food for refugees, keeping records on refugees, repatriation, resettlement and reintegration of refugees, provision of aid to the aged and the disabled, awarding scholarships, protection and the counselling of refugees.

- The findings also revealed that the stakeholders provide support in areas such as monetary, school uniform, religious materials, sanitation and computer training.

- On the other hand some respondents also pointed out that some of the Non Governmental Organisations who to receive funds from other donor organisations sometimes misapply it.

Conclusions

It can be concluded, based on the findings that the Buduburam camp had some social and economic infrastructure which was reflective of the condition in other parts of the host country. Road infrastructure within the camp, water and sanitation infrastructure were also bad. Access to health infrastructure was good and respondents were satisfied with the medical services provided.

In terms of access to formal education, the refugees were also responding to the poor condition in public schools, and have been utililising the private schools which were thought to be better in teaching. These schools were thought to be expensive by the refugees. Infrastructures at the schools were bad and it included; bad classroom conditions, inadequate library books and furniture, small classroom space among others. In addition to this there was the inadequacy of trained teachers leading to high teacher to pupil ratio.

The assessment of employment showed a lack of employment opportunities in the formal sector for refugees. The experience of the refugees in their job search in the Ghanaian formal sector was a reflection of the situation nationwide. The respondents however reported the limiting factors to be language barrier and the lack of network in the Ghanaian environment.

The UNHCR together with other stakeholders provided wide range of services including: food, religious materials, sanitation, counselling, medicare, scholarship and computer training. Some NGOs however, used the conditions at the camp as the basis to source for funding and when funds get transferred, they are misapplied.

Recommendations

- Based on the findings and conclusions, it is recommended that the UNHCR should collaborate with the host country to ensure that there is access to potable water in the camp. The UNHCR should also collaborate

with the World Bank to replicate one of the Small Town Water Project (STWP) in the camp.

- The Waste Management Departments of the Awutu Senya District Assembly should engage other waste management organisations in the country to assist in the sanitation situation in the camp.

- Furthermore UNHCR should collaborate with UN Habitat and Habitat for Humanity to assist the refugees with building materials to enable them build or expand their current living spaces.

- In order to ensure that refugees are protected from institutional abuse, the UNHCR should perform its oversight role in monitoring the activities of local NGO's working with refugees. The CBOs in the camp should also provide the watchdog role in protecting right and promoting the welfare of the community members.

- The Ministry of Education and the Awutu Senya District Assembly should support in the provision of educational infrastructure in the camp. Also intervene for local language teachers to be posted to the public schools in the camp to help the school children learn the local language in schools.

- The refugees who are unemployed should apply to the Ghana Immigration Service for work and resident permits to facilitate their access to employment opportunities. The refugees should also engage the Ministry of Employment and Labour Relations to enhance their chances of getting employed.

- The professionals among the refugees should contact the professional bodies such as the Ghana Medical Association, Ghana Institute of Engineers, and Ghana National Association Teachers to enhance their chances of being employed.

- The refugees should create and maintain networks in the various sectors of the economy. This can be done by organising forums for interactions with the formal sector players, especially the private sector. Programmes such as job fairs should be organised in collaboration Ministry of Employment and Labour Relations to enhance their employment opportunities.

These recommendations, when implemented will ensure that the wellbeing of refugees is secured and promoted in the host country which will lead to normal and fulfilling lives.

REFERENCES

Aspinall, P., & Watters, C. (2010). *Refugees and asylum seekers: A review from an equality and human right perspective.* Equality and Human Rights Commission. Manchester.

Armstrong, A. (1990, July/August). Evolving approaches to planning and management of refugee settlements: Tanzania experience. *Existics, 343,* 195 - 204.

Berthold, M. (2004). Torture survivors: Unique health & mental health issues. *Refugee Report, 25*(2).

Black, R. (1991). Refugees and displaced persons: A geographical perspective and research directions. *Progress in Human Geography, 15*(39), 281 - 298.

Black, R. (1993). *Geography and refugees: Patterns and processes of change.* London: Belhaven Press.

Brun, C. (2003). *Finding a place: Local integration and protracted displacement in Sri-Lanka.* Department of Geography, Norweigian University of Science and Tecnology (NTNU), Trondheim.

Burgess, A. (2004). Health challenges for refugees and immigrants. *Refugee Report, 25*(2).

Colick-Perker, V., & Tilbury, F. (2007). *Refugees and employment: The effect of visible difference on discrimination.* Murdouch University.

Cresswell, J. W. (2003). *Research design: Quantitative, qualitative and mixed method approaches* (3rd ed.). London: Sage Publications.

Elsass, P. (1997). *Treating victims of torture and violence.* New York: New York University Press.

Essuman-Johnson, A. (1994, 5-9 January). *Ghana's response to the Liberian and Sahelian refugees influx.* Paper presented for the 4th IRAP conference on refugees. London, Oxford University.

Essuman-Johnson, A. (1996). Refugees and migrants in West Africa. *Faculty of Arts and Social Sciences Bulletin, 1*(1).

Garret, K. E. (2006). *Living in america: Challenges facing refugees.* New York: Lake Snell Perry Mermin/ Decision Research.

Gibney, M. J., & Hansen, R. A. (2005). *Immigration and asylum: From 1900 to the present.* Santa Barbara: ABC Clio.

HREA. (2002). *Study Guide: Refugees and displaced persons.* Cambridge: Retrieved from http://www.unfpa.org/index.php?doc_id=418

ISSER. (2009). *The state of the Ghanaian economy.* ISSER. Accra: University of Ghana.

Kibreab, G. (1987). *Refugees and development in Africa: The case of Eritrea.* New Jersey: The Red Sea Press.

Krause, S., Mathews, J., & Mutambo, J. (2002). *Assessment of refugees for reproductive health in Zambia.* New York: WCRWC.

Kudzodzi, W. (2002). *March 13th refugees protest.* IRIN Africa. Retrieved from http://www.irinnews.org/Report.aspx?ReportID=77264

Kumar, R. (2005). *Research methodology: A step by step guide for beginners .* London: Sage Publications.

Limb, M., & Dwyer, C. (Eds.). (2001). *Qualitative methodology for geographers: Issues and debates.* London, New York: Oxford University Press Inc.

Machel, G. (1996). *Impact of armed conflict on children: Report of the expert of the Sectary.* United Nations, New York.

Malkki, L. H. (1997). National geographic: The rooting of peoples and the territorialisation of national identity scholars and refugees. *Cultural Anthropology, 7*, 24 - 44.

Martin, S. F. (1992). *Refugee women and world development series.* London and New Jersey: Zed Books Ltd.

Nicolai, S. (2003). *Education in emergencies: A tool kit for starting.* Save the Children. United States of America

Nordstrom, C. (1999). *Girls and war zones in engendering forced migration.* New York and Oxford: Berghan Books. Retrieved April 14, 2009, from http://www.isim.georgetown.edu/publications/2005_Refugee_Women.pdf

Opoku E. A. (1995). Refugee movements in Africa and the OAU Convention on refugees. *Journal of African Law. 39* (1).

Pascual, M. (2003). *Key aspects of education of refugee children: Refugee Camp.* Geneva: UNHCR.

Poon, J. (2004). Working from within the cultures. *Refugee Reports, 25*(2).

Rawls, J. (1971). *A theory of justice* (Revised ed.). Cambridge: Harvard University Press.

Rhodes, R., Walker, D., & Martor, N. (1998). *Where do all our girls go? Female dropout in the ITC Guinea primary schools.* New York: International Rescue Committee.

Robinson, V., & Black, R. (1993). *Geogrphy and refugees.* New York: Bellhaven Press.

Roemer, J. E. (1996). *Theories of distribitive Justice.* Cambridge: Harvard University Press.

Sarantakos, S. (2005). *Social research.* New York: Houndmills.

Save the Children USA. (2003). *State of the world's mothers 2003.* Connecticut: Save the Children. United States of America

Simonsen, K. (1996). What kind of space in what kind of social theory? *Progess in human geography , 20*(4), 494-512.

Sinclair, M. (2001). *Learning for a future: Refugee education in developing countries.* New York: EPAU, Health and Community Development Section, UNHCR.

Skonhoft, C. G. (1998). *Coping in adversity: A study of Burundian and Rwandan Hutu refugees during flight and exile in Tanzania.* Department of Geography, Norwegian University of Science and Technology (NTNU), Trondheim.

Sommers, M. (2002). *Children, education and war: Reaching education for all objectives in countries affected by conflict.* Conflict Prevention and Reconstruction Unit. Washington DC: World Bank.

Tete, S. Y. (2005). *Narratives of hope, displacement narrative of Liberian refugee women and children in Gomoa - Buduburam.* Norwegian University of Science and Technology, Trondheim.

UN Convention on Status of Refugees. (n.d.). *Conference of plenipotentiaries on the status of refugees and stateless.* Summary Record 35th Meeting. Travaux, Paris.

UNDP. (2002). *Human development report 2002.* New York: Oxford University Press.

UNESCO. (2002). *Mainstreaming the culture of peace.* Paris: UNESCO. Retrieved May 10, 2009, from

http://www.unesdoc.unesco.org/images/0012/001263/126398e.pdf

UNESCO. (2004). *Fresh tools for effective school health.* Paris: World Education Report. Paris: UNESCO

UNFPA. (2002). *Gender based violence in Kosovo: A case study.* New York: UNFPA. Retrieved February 14, 2009, from http://www.google.com.gh/search?tbo=p&tbm=bks&q=UNFPA+%28200 2%29+Gender+based+violence+in+Kosovo:+A+case+study+New+York:

UNHCR. (2000). *World Refugee Report.* New York: United Nations.

UNHCR. (2002). 3rd Track - 4th Session. *Global Consultations on International Protection.* Geneva: United Nations

UNHCR. (2003). *Protecting refugees - questions and answers: Basic information about UNHCR.* Retrieved May 15, 2009, from http://www.unhcr.ch/cgi-bin/texis/vtx/print?tbl=VISITORSandid=3b0280294

UNHCR. (2004). *Ghana, A Profile.* Accra: UNHCR.

UNHCR-Ghana. (2007). *UNHCR Global Report-Ghana.*

UNHCR-Ghana. (2009). *UNHCR Global Report-Ghana.*

United Nations. (2003). A forum co-sponsored by the Brookings Institution and the Migration Policy Institute. *UN International Migration Report.*

USCRI. (2007). *World Refugee Survey 2007.* Arlington: USCRI.

WHO. (2004). *World Health Report 2004.* Geneva: WHO. Retrieved May 12, 2009, from http://www.who.int/whr/2004/media_centre/en/index.html

Zucker, R. (2003). *Democratic distributive justice.* New York: Cambridge University Press.

APPENDIX A

QUESTIONNAIRE FOR HOUSEHOLDS

UNIVERSITY OF CAPE COAST

INSTITUTE FOR DEVELOPMENT STUDIES

This questionnaire is designed to examine the socio-economic challenges that confront refugees as part of the requirements for a M.A in Governance Studies. The information that will be generated by this questionnaire will be treated with anonymity and confidentiality. Please be assured that the information you will provide will be used for only the intended academic exercise.

Please complete as fully as possible by ticking where appropriate

PERSONAL DATA

1. Age: 18-30   31-40   41-50   51-60   61 and above

2. Sex: (a) Male   (b) Female

3. Marital status   (a) Single   (b) Married

              (c) Divorced   (d) Separated

4. Do you have children?   (a) Yes   (b) No

5. How many children do you have? ....

6. Occupation..

7. What is your religious affiliation?

   (a) Christian   (b) Muslim   (c) Traditionalist   (d) None

8. How long have you been residing here? ....

9. What is the highest level of education you have attained?

(a) Secondary (b) Tertiary   (c) Others (please state).............................

AVAILABLE INFRASTRUCTURE

1. How many clinics or health posts do you have in the Camp? ....

2. How many hours (minutes) do you spend anytime you visit the clinic/health

post? ....

3. Which of the following services are provided by the health posts/clinic?

(a) O.P.D.   (b) Consultation   (c) Injection/dressing

d) Pharmaceutical (e) Gynaecology   (f) Others.   Please specify.............

4.   How satisfied are you with the services provided.

SERVICES	PLEASE TICK THE APPROPRIATE ANSWER
O.P.D.	(a) Not Sure ( ) (b) Unsatisfactory (c) Fairly satisfies ( ) (d) Very satisfied ( ) (e) Satisfied ( ) (f) None ( )
Consultation	(a) Not Sure ( ) (b) Unsatisfactory ( ) (c) Fairly satisfied ( ) (d) Very satisfied ( ) (e) Satisfied ( ) (f) None ( )
Injection / Dressing	(a) Not Sure ( ) (b) Unsatisfactory ( ) (c) Fairly satisfied ( ) (d) Very satisfied ( ) (e) Satisfied ( ) (f) None ( )
Pharmaceutical	(a) Not Sure ( ) (b) Unsatisfactory ( ) (c) Fairly satisfied ( ) (d) Very satisfied ( ) (e) Satisfied ( ) (f) None ( )
Gynaecology	(a) Not Sure ( ) (b) Unsatisfactory ( ) (c) Fairly satisfied ( ) (d) Very satisfied ( ) (e) Satisfied ( ) (f) None ( )

5. Which of the following sources of water is or (are) available in the camp?

   i. Pipe borne water   ii.   Mechanised well

   iii. Borehole   iv. Well (manual)

   iv. Steam, Spring, river

6.   How would you rate the water situation in the Camp?

(a)   Adequate   (b)   Inadequate

7.   How would you describe the quality of water?

(a)   Good   (b)   Bad

7b   Please explain the answer to question (7)...

8.   What toilet facilities do your people in the Camp normally use?

....

9.   How would you describe the toilet facility?   (a) Good (b) Bad

10.   How would you describe the access roads to the Camp?

   (a) good   (b) very good   (c) bad

11.   Do you have regular supply of electricity?

   (a) Yes   (b) No

12.   What other sources of power do you have access to ....

13.   Do you have schools in the camp?   (a) Yes   (b) No

14.   If yes do your children have access to educational facilities in the Camp?

15.   How Many teachers are in each basic school?

   (i)   J.S.S.   ....

   (ii) Primary   ....

   (iii) Nursery   ....

16.	Do the teachers use teaching aids in teaching? (a)	Yes	(b)	No

17.	If yes describe the teaching aids they use ....

18.	How many hours do people spend in school per day? ....

19.	How many people occupy a room at the Camp? Please specify ....

ASCERTAIN THE EMPLOYMENT SITUATION IN THE CAMP

1.	Are jobs generally readily available		(a)	Yes	(b)	No

2.	Have you sought employment?		(a)	Yes	(b)	No

3.	If yes, were you successful		(a)	Yes	(b)	No

4.	If you were not successful, were you given any reason?

	(a)	Yes	(b)	No

5.	If yes, what were some of the reasons given? ....

How would you describe the job situation in Ghana ....

STAKEHOLDERS (DUTY BEARERS)

1.	Are there NGOs that assist you to improve on your living standards?

2.	If Yes, complete the table on page 89.

NAME OF NGO	TYPE OF NGO LOCAL /FOREIGN	TYPE OF SUPPORT (IF CASH SPECIFY AMOUNT)	SUGGESTION FOR IMPROVEMENT OF SERVICE

3.   Do you receive help from formal institution?

       If yes, list the Institution and type of support

INSTITUTION	TYPE OF SUPPORT (IF CASH SPECIFY AMOUNT)

4.   Do you receive support from churches?   (a)   Yes   (b)   No

      If Yes indicate the type of support...

5. What is the role of UNHCR in the camp in general and also in improving your

    economic situations.

6.   Please indicate the quantum of support you receive from UNHCR

Cash ....

Other support..

EDUCATIONAL LEVEL OF CAMP MEMBERS

1.   Did you attend school in Ghana?   (a)   Yes   (b)   No

2.   If yes where did you attend school ....

3.   How would you describe the educational level in the camp

      (a)   available   (b)   Not readily available

4.   How many kilometres does one have to travel to access basic

      education ....

5.   How many basic schools do you have in the Camp?

6.   How many teachers are in each basic school?

FACILITY	GOOD	BAD	EXPLAIN
SCHOOL BLOCK (BUILDING)			
SANITATION (TOILETS & URINE)			
LIBRARY BOOKS			
SPORTS FACILITIES			
FURNITURE			

9.   How many pupils do the school have?

10.   How many classrooms are there in each school?

11.   What is the average classroom measurement?

12.   Who run these basic schools in the Camp?

      a. UNHCR   b. Local NGOs   c.   Government   d. Others

7.   Do the schools have adequate facilities?   (a)   Yes   (b)   No

8.   How will you rate the following facilities?

APPENDIX B

INTERVIEW GUIDE

REFUGEE RELATED ORGANISATIONS

UNIVERSITY OF CAPE COAST

INSTITUTE FOR DEVELOPMENT STUDIES

This Interview Guide is designed to examine the socio-economic challenges that confront refugees as part of the requirements for an ma. in governance studies. The information that will be generated by this questionnaire will be treated with anonymity and confidentiality. Please be assured that the information you will provide will be used for only the intended academic exercise.

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1. Name of Organisation...

2. Role in Refugee Activities

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3. Major Activities Undertaken

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4. Challenges of Refugee Relating to Organisation's Activities

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5. Recommendations to Challenges

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....

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6. Names of Collaborators and Areas of Collaboration

Name of Collaborating Organisation	Area of Collaboration