![CHASE-i logo — Centre for Health and Social Economic Improvement](image)

South Sudanese refugees practice social distancing as they wait to access a food distribution. © UNHCR/Samuel Otieno

REFLECT in COVID-19

- REFLECT is an acronym for REFugee Lived Experiences, Compliance and Thinking.
- It is the Project name for research on **"Knowledge, adherence and the lived experiences of refugees in COVID-19: A comparative assessment of urban and rural refugee settings in Uganda"**.
- The study has a multinational focus covering refugees from South Sudan, Somalia, Eritrea, Democratic Republic of Congo (DRC), Rwanda and Burundi. One of the study objectives is to undertake a comparative assessment of COVID-19 impact in Uganda's nationally diverse refugee communities.
- Study sites are Kisenyi in Kampala, Kyaka II Refugee Settlement in Kyegegwa, South-Western Uganda + several (11) Adjumani Refugee Settlements in West Nile.
- The REFLECT Study is funded by Elrha/R2HC (Research for Health in Humanitarian Crises) and conducted by Makerere University.

- The study team comprises a multisectoral partnership with Co-Investigators from different institutions in academia, policy and programming or practice. Led by Makerere University, the Co-Investigators are from Gulu University, ACORD, LWF, NASWU and the Ministry of Health.

Background: The 21st century has presented us with complex challenges, including forced migration and infectious diseases. With forced migration comes the issue of heightened vulnerability for those in affected areas.

Uganda's open-door policy on refugee hosting has been internationally recognised as "the world's most compassionate" refugee policy. Inspite of this however, refugee communities continue to be disadvantaged on many fronts with poor socioeconomic and health outcomes.

The onslaught of COVID-19 devastated global economies, the dignity and wellbeing of many people. While we can safely assume that refugee communities are not an exception, they remain relatively closed in, with very little known about their experiences and outcomes in regards to COVID-19. This research is particularly important because the complex context in refugee settlements makes it nearly impossible to comply with known COVID- 19 prevention guidelines such as social distancing or frequent handwashing with soap (crowded household and WASH challenges respectively). Moreover, there are key distinctions across the different refugee nationalities hosted in Uganda and across settings – whether urban or rural refugee settlements.

Asylum-seekers from the Democratic Republic of the Congo wait for health screening near the border in Zombo, Uganda. © UNHCR/Rocco Nuri

Anurith, a 29-year-old asylum-seeker from the Democratic Republic of the Congo, sits with her children after undergoing a health screening near the border crossing in Zombo, Uganda. © UNHCR/Rocco Nuri

Refugee settings are already besieged with a socially disrupted existence, and the COVID experience could have catastrophic consequences in their context. Yet the extent to which refugee communities are aware of COVID- 19, have complied and are coping with the related preventive measures, remains largely unknown. Among many things, this study will establish whether the contextual specificities of diverse national urban and rural-based refugees have a bearing on awareness, feasibility, enforcement and compliance in regards to COVID-19 preventive measures. The REFLECT study is therefore timely and contributes to filling a key gap in knowledge, policy and programming around COVID-19 and refugee communities.

Research Strategy: Methodologically this is a mixed-methods assessment of COVID-19 in refugee communities. We shall assess knowledge and attitudes; explore local perception of risk and/or exposure; describe implementation; determine feasibility, adherence or compliance in light Uganda's national response toCOVID-19; identify existing systems and determine their efficacy.

Study Outcomes: Actionable recommendations for improving humanitarian outcomes. Study findings will contribute to optimal multidisciplinary and multisectoral approaches for behavioural change. Study findings will inform public health measures for present and future responses.

Anticipated study outcomes are many and will lead to deeper understanding of COVID-related sociobehavioural aspects in refugee settings. In particular:
- The effect and/or impact of current COVID-19 response on social behaviour. This can be used to better plan and effectively manage and/or support behavioural change campaigns in epidemic outbreaks. Specifically, we anticipate that study findings will be used to inform optimal implementation of COVID-19 preventive measures in refugee settings which remain largely unknown.
- Actionable recommendations for the infodemic challenge, myths and social behaviour – after community knowledge, attitudes and practices (KAP) in light of

COVID-19 are better understood. This will enable an appreciation of key gaps, risky behaviour and intervention points for knowledge and attitude shifts. This research shall profile local experiences on resilience, recovery and safe/healthy living in precarious times.

• Local innovations and improvisations in complying with prevention measures amidst difficulty (for both implementers e.g. healthworkers) and the community. This will bring out a more "strength-oriented" perspective and potential learning to be adapted in similar circumstances or other settings. This research shall also result in better understanding of negative coping strategies and means of addressing them.

• Existing community resources, networks and their effectiveness. These can be leveraged to improve the current COVID-19 response. It will also enable recognition and engagement of any previously excluded resource persons and structures - which will harness better compliance, monitoring and support for the national COVID-19 response.

• Using study findings, we shall develop models and frameworks useful for further research, policy and practice. And contribute to the existing [and relatively small/minority literature] body of evidence on sociobehaviour and epidemic outbreaks.

Project Team

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