









USAID'S HEALTH EVALUATION AND APPLIED RESEARCH DEVELOPMENT (HEARD) PROJECT



The Journey of Life: A psychosocial support intervention for conflict-affected populations

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Importance of Caregiver and Child Wellbeing

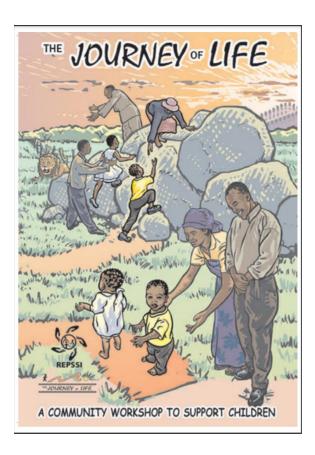


- Adult and child refugees often experience high levels of psychosocial distress
- Mental and physical healthcare services in refugee settings are limited
- Psychological stress of caregivers disproportionately affects children
- Social environments play a major role in the wellbeing of children and adolescents

Caregivers and community members have the ability to mitigate the challenges faced by children in the face of displacement and adversity







Intervention Description

Journey of Life engages caregivers to improve their own mental health, caregiving knowledge, and skills to support children.

Program developer: REPSSI, adapted by WUSTL and

TPO Uganda

Number of sessions: 12

Number of participants per group: 10





Implementation Strategy

- Journey of Life training for social workers
- Community mobilization activities
- Weekly field staff meetings
- Biweekly team meetings
- Feedback sessions with staff and translators
- Field note audit and feedback
- Direct observations







Evaluation plan



Hybrid effectiveness-implementation quasiexperimental waitlist control design

Quantitative and qualitative methods to examine the following:

- Effect
- Feasibility
- Acceptability
- Implementation





Study Design

Inclusion Criteria

- Kiryandongo settlement residents (male and female)
- 18 years or older with caregiving responsibilities for at least one person under age 18 during baseline data collection

Data Collection

- 27 data collectors from Kiryandongo were recruited from across ethnic groups, received 2-weeks of training
- TPO Uganda staff worked with village health teams (VHTs) to advertise the program
- All participants provided written consent
- Data collected in Juba Arabic, Dinka, Nuer, and Acholi languages

Measures of Interest

- Primary: Mental Distress (Kessler-6)
- Secondary: Social Support (Medical Outcomes Study), functioning (WHODAS), Warmth and Affection subscale (PARQ), Undifferentiated Rejection (PARQ), attitudes toward Violence Against Children (VAC subscale of the Child Protection Index)





Descriptive Statistics (N=1137)

| Variable | % | n |
|---------------------------------|--------|-----|
| Age | | |
| 18-25 years old | 8.90% | 101 |
| 26-35 years old | 35.86% | 407 |
| 36-45 years old | 38.33% | 435 |
| 55 or older | 16.92% | 192 |
| Income source | | |
| Farming | 37.74% | 428 |
| Business or salaried employment | 5.56% | 63 |
| Cash from INGOs | 49.47% | 561 |
| Remittances or no income | 7.23% | 82 |
| School attainment | | |
| Never attended school | 48.19% | 546 |
| Less than primary | 31.16% | 353 |
| Primary or higher | 20.65% | 234 |
| Number of children in care | | |
| None | 3.96% | 45 |
| 1-2 children | 16.71% | 190 |
| 3-6 children | 55.15% | 627 |
| More than 6 children | 24.19% | 275 |

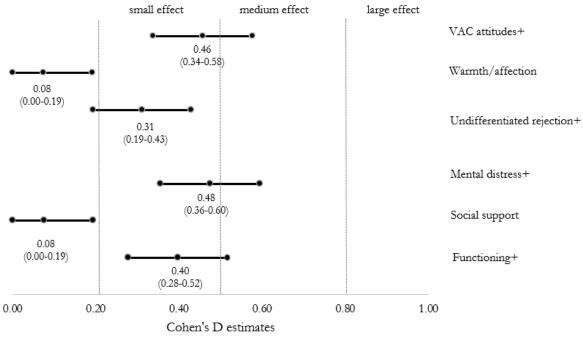
| Variable | % | n |
|-----------------------------------|--------|------|
| Years in Uganda | | |
| Three or less years | 5.39% | 60 |
| Four to ten years | 85.62% | 953 |
| More than 10 years | 8.98% | 100 |
| Intervention Group | | |
| Intervention | 52.34% | 593 |
| Waitlist Control | 47.66% | 540 |
| Gender | | |
| Male | 7.54% | 85 |
| Female | 92.46% | 1042 |
| Experience of food insecurity (pa | | |
| No | 17.37% | 197 |
| Yes | 82.63% | 937 |
| Originating from South Sudan | | |
| No | 3.96% | 45 |
| Yes | 96.04% | 1092 |
| Married or cohabitating | | |
| No | 30.17% | 343 |
| Yes | 69.83% | 794 |





Programmatic Outcomes: Effectiveness

Forest plot of intervention effects, adjusted, baseline subtracted by endline scores







Findings: Implementation



FEASIBILITY

- Recruitment: 1,323 participants
- Retention: 76% of participants attended at least 10/12 sessions
- COVID-19 related challenges
- Extended delivery of intervention

ACCEPTABILITY

- Participant satisfaction
- Determinants (barriers and facilitators)





Community Action

Through the intervention, community developed strategies to promote child protection.

Examples of action plan ideas include:

- Savings groups
- Community gardening
- Pooling resources to hire a tutor for their children
- Managing community disputes
- Speaking to others about how to support and talk to children





Next Steps

Encouraging uptake

Publications

- Baseline
- Effectiveness
- Implementation science
- Field report

Dissemination workshops

- Field-level intersectoral workshops
- Organizational workshops
- National meetings





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