

MEANINGS AND UNDERSTANDINGS OF WELLBEING: AN EXPLORATION OF SOMALI REFUGEES' CONCEPTIONS OF HUMAN WELLBEING

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ABSTRACT

Although there is a substantial body of literature on human wellbeing, there is no universally agreed-upon meaning and understanding of the concept. This article explores the meanings and understandings which Somali refugees in Kampala, Uganda attach to the concept. Drawing on 14 in-depth individual interviews and seven focus group discussions with 70 Somali refugee study participants in Kisenyi, I argue that wellbeing is mainly understood in terms of having access to objective elements that result in having a good or comfortable life. Objective elements can be seen to represent human needs with respect to Doyal and Gough's theory of human need. These objective elements were discussed as prerequisites for having a good life. They include peace and security, health, education, employment and housing. Adequate access to these objective elements is perceived as fundamentally important in promoting and guaranteeing human wellbeing.

Keywords: meaning of wellbeing, human needs, Somali refugees, conceptions of human wellbeing



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INTRODUCTION

According to Scott (2012, 12) '[i]t is well established that wellbeing is multi-dimensional and complex, and sensitive to both cultural and individual interpretations'. Indeed Diener, Lucas and Schimmack (2009) and Gough, McGregor and Camfield (2007) go further to argue that the meaning and nature of wellbeing is not agreed upon, and that the concept has many meanings. They argue that this is because 'wellbeing is still a novel category in applied social science, such that no settled consensus on its meaning has yet emerged' (Gough et al. 2007, 5). It is important therefore, to explore the meanings Somali refugees attach to the concept of wellbeing since there is limited research on this topic. This will increase the body of research on human wellbeing and will contribute towards the harmonisation of literature on human wellbeing by developing an agreed-upon meaning and understanding of wellbeing. Furthermore, exploring the meanings and understandings Somali refugees attach to wellbeing also highlights what entails human wellbeing. This is important since achieving wellbeing is the final goal of any human undertaking, and is thus desirable and good (Diener et al. 2009). Similarly, understanding the meaning of human wellbeing will aid NGOs' efforts in designing service packages and policies for refugees in Kampala, since the Government of Uganda (GOU) expects urban refugees to be self-reliant in relation to their human needs (GOU 2014; UNHCR 2014). Changing NGO policies is especially important, given that Gough et al. (2007) argue that the purpose of policies developed by governments and agencies is to enable people to achieve wellbeing.

In this article I argue that Somali refugees in Kampala understood human wellbeing or living well mainly in terms of having adequate access to objective elements. The identified objective elements are similar in some respects to some of the human needs identified by Doyal and Gough (1991). They include peace and security, health, education, employment and housing. Adequate access to these elements is what the participants considered as living well. The elements were perceived as both means and ends to living well.

The article starts with a brief review of literature on human wellbeing. This section examines the meaning of wellbeing and three dominant approaches to understanding wellbeing. This is followed by a description of the methodology for data collection used in this article. This section is in turn followed by a discussion of meanings and understandings that Somali refugees attach to the concept of wellbeing. The section specifically discusses the meaning of living well and the prerequisites for living well. The article ends with the conclusion and implications of the study. It is noted that objective elements (see below) are fundamentally and instrumentally important if Somali refugees are to live well in Kampala. It is important to note from the onset that the terms 'wellbeing' and 'living well' are used interchangeably in this article since they carry similar meanings.

THE MEANING OF WELLBEING

Although there is substantial literature on human wellbeing, refugees included, there is no universally agreed-upon meaning of the concept. McGillivray and Clarke (2006, 3) recognise this, suggesting that ‘human well-being, however, is an ambiguous concept’. The term is used differently in the different disciplines (psychology, economics, development studies, philosophy, sociology and anthropology). In addition, there are different terms used interchangeably with wellbeing, such as quality of life, capabilities, welfare, human development, standard of living, living well and life satisfaction (McGillivray 2007; McGillivray and Clarke 2006; Veenhoven 2006). However, McGillivray (2007, 3) in reference to Gasper (2002) and Travers and Richardson’s (1997) works states: “‘well-being’ is a concept or abstraction used to refer to whatever is assessed in an evaluation of a person’s life situation or ‘being’”. The use of the word ‘abstraction’ recognises that wellbeing means and measures many and sometimes different things.

Despite this absence of a universal definition, researchers seem to agree that there are two types of wellbeing, that is, objective wellbeing and subjective wellbeing (Diener et al. 2009; Gasper 2004; Gasper 2007a; Gough, McGregor and Camfield 2007; Nevarez 2011; Veenhoven 2006). For instance, Gasper (2004, 2) maintains: ‘well-being is an umbrella concept that embraces both subjective well-being and objective well-being’. Gasper (2004) however cautions careful use of the terms ‘objective’ and ‘subjective wellbeing’. To him, both terms refer to what is being measured (external/non-feelings as opposed to internal/feelings) and how it is being measured (experts’ reports as opposed to self-reports) (Gasper 2004; Veenhoven 2006). Objective wellbeing (OWB) refers to measuring aspects of human life independent of one’s values, feelings and preferences. It looks at what is considered to be of value to human life, regardless of the feelings of the person experiencing the conditions (Gasper 2007a; 2007b; Diener et al. 2009). For instance, physical health, living conditions, social ties and education are valued aspects of OWB (Nevarez 2011). The objective aspects of wellbeing can either be measured objectively (using, for instance, life expectancy, longevity, morbidity and income per capita), without involving the persons concerned (Gasper 2007b; Veenhoven 2006) or subjectively through self-reports by the persons concerned giving their evaluations – satisfaction or dissatisfaction (Gasper 2007a).

Subjective wellbeing (SWB), on the other hand measures the internal state of a person’s wellbeing. It is concerned with positive and negative affect (happiness/feeling) and life satisfaction (Gasper 2007b; Triandis 2000). Helliwell and Putnam (2005) contend that happiness has to do with people’s evaluation of their short-term experiences as determined by feelings or moods, while life satisfaction has to do with long-term experiences. Although affect/happiness can be measured by impartial outsiders using relatively objective measures such as someone’s level of concentration and smiles, SWB has been significantly studied using self-reports,

whereby the persons concerned are asked to make judgments about their life (feelings and satisfaction) (Diener and Suh 1999; 2000; Diener et al. 2009).

Despite the wide agreement on the OWB and SWB conceptualisations of wellbeing, different approaches are used to explain the conditions that result in wellbeing, and measuring OWB and SWB. Galtung (2005) distinguishes five approaches to wellbeing, which comprise the peace-based approach, development approach, health-based approach, human rights approach and the Buddhist approach. However, there are many alternative formulations, some with similar ideas, such as the capability, goal, utilitarian, universal psychological, basic human values and basic needs approaches (McGillivray 2007; Nevarez 2011). This article focuses on three dominant approaches utilised in development studies – the utilitarian approach, the capability approach and the theory of human need.

The utilitarian approach (UA) is grounded in the hedonic (pleasure) philosophy of wellbeing. According to Nevarez (2011), it is the dominant approach in economics and public policy to wellbeing. Utilitarianism maintains that human behaviour is motivated by the pursuit of utilities or satisfaction, and that the more utilities one consumes, the higher one's happiness or wellbeing (Gasper 2007a; Nussbaum 2011). Utility is understood in terms of desire fulfilment, pleasure and happiness (Gasper 2002; Sen 1990), all of which revolve around feelings and enjoyment. Income is the metric used to measure utility (Gasper 2007a; Phillips 2006) because it is assumed that it increases consumption, and consumption increases utility. Measures such as gross national income and Gross Domestic Product (GDP) or Gross National Product (GNP) per capita are common measures of wellbeing under this approach (McGillivray 2007; Sen 1990). It measures wellbeing in terms of the individuals' income vis-à-vis the cost of goods and services in a particular society. For instance, if a country's GDP per capita is high, it is assumed that people in that country enjoy higher levels of wellbeing than people in countries with low GDP per capita.

On the other hand, Sen's capability approach (CA) is an alternative to the utilitarian approach since it puts human beings at the centre of any human efforts and undertakings (Nussbaum 2000; Sen 1990). Grounded in Aristotle's tradition of the human good (eudaimonia), CA focuses on human flourishing (Scott 2012). The central difference between CA and UA is that the former does not focus on how satisfied one is or how much one has, but on what one is actually able to do and be (Nussbaum 2011; 2000; 1995). CA considers human life as being made up of various doings and beings, together called functionings (Robeyns 2005; Stewart 1996; Wolff and De-Shalit 2007). According to Sen (1990; 1993), these functionings can vary from elementary functionings such as escaping mortality and morbidity, being adequately nourished, sheltered, etc., to complex ones such as achieving self-respect, community participation, being socially integrated, and appearing in public without shame among others.

However, since Sen attaches much importance to freedom to choose one's functionings, the emphasis of CA is on capabilities (Robeyns 2005). This is because capabilities provide individuals with the opportunity to choose (Stewart 1996). The capability of a person is seen as the alternative set of functionings a person can achieve and from which he/she chooses the best combination. Capability reflects a person's ability to choose from the various sets of combinations of functionings or ways of living. Wellbeing, according to CA, is measured in terms of one's capability to achieve valuable functionings. It is an assessment of the different constituent elements of beings and doings (Nussbaum 2000; Sen 1990, 1993).

A third approach to human wellbeing is the theory of human need (THN). THN approaches human wellbeing in terms of objective (independent of individual's feelings) universal human needs (Doyal and Gough 1991). The existence of objective universal needs is explained using a four step, relational approach starting with universal/final goal, through basic/primary needs and intermediate needs to societal preconditions (Clark and Gough 2005; Gough 2003; Gough, McGregor and Camfield 2007; Lavers 2007). According to THN, needs refer to particular universal goals that are relevant to all human beings in order to avoid objective harm. They are different from wants, which are viewed as individuals' preferences in relation to their cultural environment (Clark and Gough 2005; Gough 2003). THN defines objective harm as a fundamental disablement of one's pursuit of valued goals. This harm could be explained as impairment to social participation. This is because THN maintains that individual goals (private or public) are achieved through social interaction with others. The final goal is to avoid serious objective harm, in other words, minimal disablement of social participation (Clark and Gough 2005; Doyal and Gough 1991; Gough 2003). In order to avoid serious objective harm, THN identifies two basic needs – physical health and autonomy – that must be optimally satisfied if one is to achieve one's goals in life (Doyal and Gough 1991; Gough 2003).

Physical health is a basic need because for human beings to do well in their daily activities they must have good physical health, which includes manual, mental and emotional abilities (Clark and Gough 2005). Lack of physical health or interference with it means that human beings' ability to carry out practical tasks will not be successful. Autonomy as a basic need considers human beings' ability to initiate action, to formulate goals and strategies for achieving these goals (Clark and Gough 2005). THN maintains that in order to optimally satisfy these two basic needs, one has to minimally satisfy 11 intermediate needs. Doyal and Gough (1991) define intermediate needs as objects, activities, relationships, goods and services that satisfy the primary needs. They are universal because they share universal satisfier characteristics. The intermediate needs include nutritional food and clean water, protective housing, a non-hazardous work environment, a non-hazardous physical environment, safe birth control and child-bearing, appropriate health care, security in childhood, significant primary relationships, physical security, economic security,

and appropriate education (Doyal and Gough 1991; Gough 2003). Despite primary and intermediate needs being universal, the specific satisfiers to the intermediate needs vary from one society or culture to another. In this formulation, the four societal preconditions that must be satisfied in order for societies to survive and flourish are production, reproduction, cultural transmission and authority (Doyal and Gough 1991).

Although the above approaches to wellbeing share some similarities and overlap in some instances, they also differ from one another. Given the differences between the approaches to wellbeing, it is therefore important to explore the meanings and understandings Somali refugees attach to the concept of wellbeing. This is because, as indicated initially, wellbeing means different things to different individuals and cultures (Diener et al. 2009; Scott 2012). It is important to establish whether Somali refugees understand wellbeing in terms of happiness, capabilities, human needs, a combination of the three or in a way that differs from the three approaches. Do they perceive it as either subjective, objective, both, or differently? Somali refugees' discussion of wellbeing is important in that it highlights the important elements that should be included in the services delivered to them by NGOs, or what the primary focus of their undertakings and actions should be in order to achieve their wellbeing. However, before discussing the meanings and understandings Somali refugees attach to wellbeing, the research context and methods are described.

RESEARCH CONTEXT AND METHODS

The data used for this article is part of a larger research project (PhD) which started in 2012 at the School of Social Sciences, The University of Melbourne. The project title is *Acculturation and wellbeing of refugees: a study of Somalis in Kampala-Uganda*. Fieldwork for this project was carried out between July and December 2013 using qualitative approaches. Data was collected from Somali refugees living in Kisenyi, a slum in Kampala. This is because most Somali refugees in Kampala live in Kisenyi (Omata 2012). Fourteen and 56 study participants were recruited to participate in an in-depth individual interviews and focus group discussions respectively. The participants were of both genders and aged 18 years and older. Children were perceived as incapable of understanding the study questions. The participants were recruited based on their willingness to participate in the study. These were recruited with the help of three Somali refugee leaders who introduced the researcher to potential study participants. However, the decision on who should be recruited into the study was taken by the researcher. This was done in order to avoid recruiting participants who were friends, relatives and colleagues of the leaders, and to have a mix of participants.

In-depth individual interviews were carried out at various places in Kisenyi, which were convenient for the study participants. The researcher conducted

individual interviews with five female and nine male Somali refugee participants with the assistance of interpreters. Individual in-depth interviews were used as a method of data collection because, as Boeije (2010) and Marshall and Rossman (2006) argue, they provide an opportunity for the study participants to discuss the study issues in their own words. This fits especially well with a study which considers the participants' meanings and understating of wellbeing. The female participants were fewer than male participants because male potential study participants showed more willingness to be recruited for the study than females.

In addition to the individual interviews, seven focus group discussions (FGDs) were carried out with Somali refugees. Four of the FGDs were carried out at Kyaggwe primary school, one at Refugee Hope and two at a house in Kisenyi. With the exception of the two FGDs at a house in Kisenyi with only male participants, the rest of the FGDs had a combination of both female and male study participants. Although it was originally planned to have gender segregated FGDs, potential female participants were unwilling to participate in FGDs conducted by a male researcher without male Somali refugees. They asserted that this was for religious reasons. Each FGD had between seven and nine participants. The number of male participants recruited for FGDs was more than the female participants for similar reason as for the individual in-depth interviews. Like the individual interviews, FGDs were also carried out with the help of interpreters. Data was collected using an FGD guide, and the researcher moderated the FGDs. FGDs were used as a method of data collection because this study considers meanings and understanding of wellbeing at a group level, and not at the individual level. The group context, that is, the presence of others, and views of group members have effects on individual participants' views and behaviours (Boeije 2010). This results in collection of data which is not about the experiences and opinions of the individual participants, but about the group as generated through the FGD interaction (Green and Hart 1999; Hennink, Hutter and Bailey 2011; Morgan 1997). All the interviews and FGDs were audio recorded.

NVIvo 9 was used to develop themes, subthemes, categories and subcategories. This process started with developing codes (names) for the main research issues and ideas during literature review, data collection and preliminary data analysis. Through comparing the codes for similarities and differences, data was grouped into categories and subcategories. Themes and subthemes were developed by comparing categories and subcategories (Boeije 2010; Glesne 2011; Strauss and Corbin 1998).

DISCUSSION OF THE FINDINGS

All the study participants were asked about what they understand by living well. From the data analysis, two themes were identified – the definition of wellbeing/living well and the prerequisites for living well. This first section discusses the meaning of wellbeing. The second section focuses on the prerequisites for living well. Pseudonyms are used for quotes from the participants in individual interviews.

Definitions of Wellbeing according to study participants

Unlike the literature on wellbeing (Gasper 2007a; McGillivray 2007; McGillivray and Clarke 2006) which suggests that wellbeing has multiple meanings, all study participants defined living well in terms of having access to certain elements and services or basic necessities of life. These elements were considered as means for having a good or comfortable life. The elements used in the definitions include peace and security, employment and businesses, health and health care, education, housing, social support, food, financial/economic security, having a relationship with God, and marriage. All these elements are objective in nature. For instance, Abdu in an individual interview defined living well as follows:

I would say like having peace and having work so that you can live a good life. The fundamental things are peace, work and housing. If you have these things, we would say that that man is living a comfortable or good life. Although there are many things needed but these are basic for a good life.

Another male participant in one of the FGDs had this to say about living well: 'it depends on each person's beliefs. For instance, for me I can define living well as having a big flat or house, driving a car, work and a beautiful wife.' However, he continued:

Look, the best living standard that I believe in is first of all: you should have health, secondly you should have enough money, you should have a job also, you must have a good house that you can live in, you should be able to pay bills for your family, you should be able to help people whether Muslims or Christians and other human beings.

A female participant in another FGD defined living well as follows:

The good life is to work and make business, and one should have education. All human beings need to have businesses so that they are able to pay school fees for their children. Also, peace and health are the most important things in life.

Like Diener et al. (2009), Gasper (2010) and McGillivray (2007), the findings suggest that defining wellbeing involves evaluation of an individual's or group's life situation. The study participants focused their evaluations on access to objective elements that result in having a good life. For instance, a person who has access to these objective elements lives well, whereas a person who does not have access to them is not living well. This means that, unlike researchers such as Diener et al. (2009), Gasper (2004), (2007a) and Veenhoven (2006), who argue that human wellbeing is both subjective and objective, Somali refugees mainly perceive wellbeing as objective in nature. In fact, the good life meant having access to these objective elements, as Abdu's quote above illustrates. This also shows that unlike Veenhoven (2006; 2012) who argues that a distinction should be made between opportunities for a good life and the good life itself, in the present study opportunities for a good life and the good life itself

are seen to be one and the same thing. It is important to point out that this does not necessarily mean that the participants do not attach any subjective meanings to the concept; since there is a likelihood of appreciation of the objective elements. This appreciation of the objective elements, as the above quotes show, is subjective.

When these elements are analysed according to Doyal and Gough's (1991) theory of human need, seven of the elements used in defining living well are clearly related to Doyal and Gough's primary and intermediate needs, as discussed in the literature review section above. This suggests the centrality of human needs in promoting human wellbeing. It means that these objective elements are fundamentally important for Somali refugees to live well in Kampala. In fact, the elements were understood as basic necessities of life. This gives the impression that the elements, as Braybrooke (1987), Doyal and Gough (1991), Reader (2005) and Wiggins (1998) argue, are required by Somali refugees so as to avoid objective harm. Put positively, these elements are required by Somali refugees so as to function normally.

Furthermore, given that seven elements out of 10 used in the definition are related to Doyal and Gough's seven intermediate needs (nutritional food and safe water, protective housing, health care, economic security, a non-hazardous work environment, education and physical security), wellbeing is a universal concept. This is the case since Doyal and Gough (1991) argue that their human needs (basic and intermediate) are universal in nature. Therefore, wellbeing applies to all human societies, regardless of the differences in cultures and location.

Although Somali refugees' understanding of wellbeing can be understood as universal because of the seven elements related to Doyal and Gough's intermediate needs, it is also specific and particular in nature. For instance, four intermediate needs (security in childhood, safe birth control and child-bearing, significant primary relationships and a non-hazardous physical environment) identified by Doyal and Gough were not mentioned at all by the study participants. On the other hand, three elements (social support, a relationship with God, and marriage) not mentioned by Doyal and Gough (1991), were discussed by some participants. These elements are important in understanding the meanings of wellbeing for Somali refugees; since Somali refugees are living in a society which is still religious and values communal living. Therefore, such elements are considered as important prerequisites for living well. Indeed Divakalala (2008), in a study on wellbeing in Sri Lanka found that religion or practicing one's religion was perceived as part of wellbeing. The implication of this is that, in order for human beings to have complete wellbeing, both universal and context specific elements must be considered.

It is important to note that, unlike literature on the capability approach, which prioritises freedom to choose one's functionings, as indicated in the literature review section, the study participants' definitions focused on having adequate access to the mentioned elements. There is no concern about who decides the access to the objective elements. However, the FGD participant's argument in the second quote

that wellbeing ‘depends on each individual’ gives the impression that choice or freedom to choose may be a component of human wellbeing. Furthermore, the study participants did not engage in discussions of happiness or pleasure while defining Somali refugees’ wellbeing, as the utilitarian approach would lead us to anticipate, as indicated in the literature review section.

Prerequisites for Living Well

As indicated in the section on the participants’ definition of wellbeing, the objective elements used in the definitions were considered as prerequisites for living well. This means, as indicated earlier, that having access to these elements and a good life are seen as the same thing. Put differently, the means to the good life and the end (the good life) are the same. According to the findings, it is very hard to differentiate between the means to the good life and the good life itself. This is contrary to Veenhoven’s (2006; 2012) argument regarding the importance of distinguishing between them. In addition, this finding also suggests the importance of these elements to human life. Somali refugees are only likely to achieve the end, that is, the good or comfortable life, by accessing the means, that is, the objective elements/prerequisites. Specifically, the participants discussed peace and security, education, health, employment and housing as important prerequisites for living well. Each of these is discussed in detail below.

Peace and security

According to the participants, peace and security are the most important prerequisite for human wellbeing. This element is related to Doyal and Gough’s (1991) intermediate need of physical security. However, unlike Doyal and Gough who focus on absence of violence and criminality, peace and security includes the absence of war/violence, freedom of movement and choice, law and order, and psychological peace/security or peace of mind. This is related to other literature such as Barash and Webel (2002), Brunk (2012) and Galtung (2012) – who argue that peace includes both negative (absence of war/violence) and positive (harmony, love, gentleness, freedom, etc.) aspects. For instance, Cortright (2008, 13) argues that ‘in African traditions peace means order, harmony, and equilibrium, not merely preventing war.’

The participants argued that the only way one’s life can be safe and guaranteed is by having peace and security. When one has life, then one is able to do other things or have other undertakings that are fundamental to living well; such as starting a business, going to work and studying. In fact, the participants argued that the search for peace and security is the reason why Somali refugees migrated from Somalia to Uganda. For instance, when asked why peace and security were the most important prerequisites for living well, a male youth participant in one of the FGDs responded:

‘peace is the most fundamental one because if you get peace, everything will be easy to get. A business will come and employment will come your way’. A female participant in another FGD replied: ‘because where there is lack of peace, you can’t sleep well, you can’t work well and you can’t learn well. So peace is the most essential thing that all human beings need.’ A male participant in another FGD explained:

We came from Mogadishu because of absence of peace. We used to be happy with our lives. We used to have health and we used to go to schools. But we don’t have peace there now, one is not safe and one can’t go to school. So, to me peace comes first.

The study participants’ consideration of peace and security as the most important prerequisite for living well could be due to the fact that Somali refugees come from a war-torn country, which has not known peace for over two decades. They have real-life experience of the effects of the absence of peace on human life, especially limiting one’s engagement in practical tasks that promote living well. This finding means that one can only pursue other goals important to one’s living well in an environment perceived as peaceful and secure. This is related to Doyal and Gough’s (1991) argument that physical security enhances one’s autonomy, especially social autonomy, as discussed above in the introduction to the concept of wellbeing.

However, peace and security seem not only to include objective peace, but also psychological/subjective peace when one’s needs are adequately satisfied. For instance, Hadijah (a Somali refugee) in an individual interview, while arguing for the importance of peace, commented: ‘yes, food comes under peace because if you don’t have food or you don’t have nutritional food, you can’t get peace. Peace starts in the inner part of the body.’ This means that apart from peace and security being both an objective and subjective element, it is also a broad element, encompassing other elements such as nutritional food, health and financial or economic security.

Education

The study participants also considered education as a very important prerequisite for living well. Similar to Doyal and Gough (1991), the participants argued that education is important because of the role it plays in the development and expansion of one’s autonomy and skills acquisition. Educated individuals are perceived as having a better understanding of their environment or world, and as such can act independently of others. They can also easily engage in intercultural communication, compared to uneducated ones. This is because education is considered important in enabling individuals to acquire language and communication skills. In addition, as in Divakalala’s (2008) research on wellbeing in Sri Lanka, education was perceived as important because it prepares human beings for future employment. Educated people stand better chances of getting employment than the uneducated. Through employment, one can earn an income, which enables them to take care of one’s

family's needs such as providing food, education, health care and housing. For instance, when asked why education was considered very important, a young male participant in a FGD responded:

It is important because whether you are from Somalia, Uganda or any other country, an educated man (person) can easily communicate with other human beings from different backgrounds.

Another male participant in another FGD observed, 'education is important because when a person is educated, he can understand everything. He doesn't have to follow others. He can do thing on his own and his way.' Maimuna in an individual interview, however, defended the importance of education in this way:

The most important thing to me is education; education is the key in the entire world. Without education, no work, no travelling, nothing else you can have. When you are educated, you can communicate in English, and others will understand you. But when you are ignorant, you can't do a single thing for yourself; you are like a dead person.

Another female participant in a FGD discussed the importance of education to living well as:

Without education nothing can work out in life. If you don't have education, you are like a blind person because you can't see where the world is going. You can't communicate, and if you can't communicate, then that means you can't work, no matter what kind of skills you have. To me, in my opinion, the main priority is education.

From this finding, education is considered a priority prerequisite for living well because of the role it plays in reducing ignorance, as a means to other elements for living well such as employment and economic/financial security, and acquiring skills for successful communication, especially intercultural communication. However, it is also possible that Somali refugees appreciated the role of education in interpersonal and intercultural communication because of migrating to Uganda, where they live with people of different cultures. For instance, it is likely that Somali refugees who are not educated have observed that educated Somali refugees easily engage in intercultural communication compared to them.

Health

The participants also considered health as one of the most important elements for living well. This is related to Doyal and Gough (1991), who argue that physical health is one of the basic elements required for human beings to avoid objective harm. Health included being free from physical illnesses and injuries. The participants argued that no human being can survive without health. In fact, health was considered a priority element because of its ability to enable individuals to participate in carrying out other elements/tasks considered important to living well, such as education and

work. This resonates with Doyal and Gough's argument that individuals should have good physical health if they are to carry out their daily tasks, since poor health negatively affects their manual, mental and emotional abilities. However, health was also prioritised because of the financial costs of ill-health, especially paying bills for health care services. For instance, Hadijah, in an individual interview, when asked why health was important to living well responded: 'health is also important because there are no hospitals that provide health services free of charge.' On the other hand, a male participant in one of the FGDs argued: 'I said health because without health, nobody can exist or you may not survive.' A female participant in another FGD pointed out:

Because I don't want to die; I am still young. If your health is not good, you are not able to do many things; you are not able to go to your studies. If you have health, you can work, and then you will not need any other thing.

Unlike Doyal and Gough who discuss both the primary need of physical health and the intermediate need of health care, the participants only discussed health. For Doyal and Gough, it is the intermediate need of health care (preventive, curative and palliative services) which satisfies the primary need of physical health. However, it can be argued that the participants' views of health as absence of illnesses and injuries, and its role in avoiding costs related to poor health have a preventive element embedded in them. For instance, for one to avoid incurring costs related to poor health, one has to engage in preventive actions, behaviours and lifestyles. In addition, since the participants argued that poor health has financial costs in terms of hospital bills the participants are aware of the curative services available, and therefore they are part of their conception of health.

Employment

The participants also pointed out employment/work as another important element required in order to live well. The element of employment includes either being employed by others or starting up one's own business enterprise. Like it is argued in Divakalala's (2008) research on wellbeing in Sri Lanka, the Somali refugee participants considered employment as a prerequisite for living well because it guarantees financial/economic security, which is very important in meeting or securing other elements of living well such as food, education and housing. Economic/financial security ensures one's financial independence and ability to secure living well elements without financially depending on others. For instance, Hamid, in an individual interview, when asked why he considered employment as a priority element for living well responded – 'with work you will be able to take care of yourself.' On the other hand, a female participant in one of the FGDs explained:

The reason why we are talking about this (employment) is that no human being can live without a job or a place where he/she can work and get money to pay the rent bills or school fees. Even if you make and sell tea on the street, that can be a business. So if I don't go to work, where will I get house rent and school fees? Whatever the work may be (kind/type), it is important.

Like the other elements already discussed above, employment is a priority element because it leads to the satisfaction of other elements required in order to live well. This element is related to Doyal and Gough's (1991) intermediate need of a non-hazardous work environment. Although they are related, the finding however does not focus on non-hazardous work, but just on the availability of work. This could be because Somali refugees live with limited resources, and therefore they are more concerned with earning a living rather than with non-hazardous work. I would argue that in most cases people think and talk of hazardous work when they have alternatives, and they can live well even without having a job. Therefore, non-hazardous work is likely to be more of a Western concept because people in Western countries have alternatives in terms of work and sources of livelihood such as welfare programmes. However, Divakalala's (2008) research in Sri Lanka (a non-Western country) shows that the participants perceived wellbeing to mean secure jobs, which meant decent jobs, adequate income, job satisfaction and jobs respected by the community, etc. This suggests that non-hazardous work is not limited to Western societies only.

The finding that peace would be useless without one having employment that can guarantee economic/financial security so as to meet other necessary elements implies that peace is a broad concept/element. As discussed above, it is not a mere absence of war or violence, but it also includes a psychological aspect which results from adequate satisfaction of other basic necessities of life such as food, education, housing and health care. Therefore, peace has many determinants, including the satisfaction of other living well prerequisites. In addition, the finding means that human needs are interrelated, interactive and interdependent (see Max-Neef 1991). Therefore, for one's wellbeing to be guaranteed, all and not some human needs must be adequately satisfied.

Although the participants did not mention financial security as one of the most important prerequisites for living well, as Doyal and Gough (1991) do, it can be argued that it is covered under employment. This is because employment was an important prerequisite due to the fact that it guarantees financial security. This means that employment is one of the means of ensuring financial security. The resultant financial security was for ensuring that one buys goods and services considered as key to living well. Therefore, one can argue that financial security is part of Somali refugees' understanding of wellbeing. In any case, Doyal and Gough argue that financial security is an intermediate need because it guarantees one's standard of living. This finding, as indicated earlier, also shows the interrelatedness of human needs.

Housing

Lastly, a participant discussed having housing as another important prerequisite for living well. This element is similar to Doyal and Gough's (1991) intermediate of protective housing. The participant argued that having housing ensures that one does not become homeless. In addition, it also ensures that one has health, which is important for living well. For instance, Hadijah, asked in an individual interview about the most important elements for living well, replied, 'housing is also a very important thing because if you don't have anywhere to sleep, you will be like street people. You need to sleep well in order to be healthy'. Although Hadijah identified housing as a prerequisite for being healthy, it is not clear how housing contributes to this. However, housing, according to Doyal and Gough (1991), ensures that one is protected against environmental, physical and social inconveniences. This may include harsh environmental risks such as heat, rain and cold, dangerous animals and lack of privacy.

CONCLUSION

The findings of this study have implications for humanitarian practitioners/workers, policy makers and institutions engaged in the protection of refugees. First and foremost, if Somali refugees' wellbeing is to be promoted, the objective human needs identified should be part and parcel of the protection services delivered to refugees, especially by NGOs, since the Government of Uganda and United Nations High Commissioner for Refugees (UNHCR) are not expected to provide material assistance to urban refugees in Uganda. It is through having adequate satisfaction of these human needs that Somali refugees can live a good life. This will result in avoiding situations where refugees have asylum, but cannot live well. This is because these objective human needs are a prerequisite to living well; they are basic necessities of living well (Braybrooke 1987; Doyal and Gough 1991; Wiggins 1998). Therefore, they should be treated as a priority component of urban refugee protection. This will result in refugee protection promoting refugees' living well. Also, all the identified needs should be satisfied adequately since these needs are interrelated and interdependent (Max-Neef 1991). Non-satisfaction or inadequate satisfaction of some of the needs negatively affects the rest of the needs, which adversely affects refugees' living well.

While designing services in general and refugee services in particular that are aimed at satisfying human needs, practitioners, policy makers and institutions should use both available human needs literature and group-specific views – simply because some of the needs that were identified by the participants as prerequisites to living well are also discussed by Doyal and Gough. This suggests that some human needs are universal, applying to all human beings regardless of culture, location and displacement status. However, in order to promote holistic wellbeing, group specific

views should be included. This will ensure that particular and specific prerequisites are included in the services. These particular and specific prerequisites are not universal needs, but are important to living well. This is especially the case since Scott (2012) argues that human wellbeing varies according to culture.

Lastly, wellbeing scholars need to be persuaded that although wellbeing elements/prerequisites may vary from one society/culture to another, wellbeing mainly focuses on an evaluation of an individual's or group's life situation. It focuses on both the means to the good life and the good life itself. These two things are inseparable; since an individual cannot have the good life without the means to the good life. The fact that the means are important to having the good life is the reason why the participants mainly defined and understood wellbeing in terms of objective elements. However, this does not mean that subjective elements were totally absent, since the participants were appreciating the role of objective elements, which is subjective in nature.

BIOGRAPHICAL INFORMATION

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