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(IJEMRI)****Aging and Displacement: A Qualitative Study of the Lived Experiences of Elderly Internally Displaced Persons in Debre Birhan, Ethiopia**

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ABSTRACT

The present study explores the lived experiences and multifaceted challenges faced by elderly internally displaced persons (IDPs) residing in the Debre Birhan IDP camps in Ethiopia. The purpose of the study was to gain an in-depth understanding of the social, psychological, economic, and health-related hardships encountered by this in danger part of population. A qualitative phenomenological research design was employed to dig out the nuanced realities of participants. Data were collected through in-depth interviews with 23 elderly IDPs selected through purposive and snowball sampling technique. Thematic analysis was used and revealed five core themes: psychological distress, economic hardship, social isolation, deteriorating health conditions, and exploitation/abuse. The findings revealed that the elderly IDPs are disproportionately affected by displacement, with limited access to services and minimal coping resources. This study contributes to the limited body of literature on elderly IDPs in Ethiopia and offers vigorous insights for humanitarian agencies, policymakers, and social workers aiming to develop inclusive and responsive interventions.

Keywords: Internally Displaced Persons (IDPs), Elderly, Displacement, Ethiopia, Multifaceted challenges.

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Introduction

Internal displacement is mounting global humanitarian crisis with over 50 million people compulsorily displaced within their countries due to armed conflict, persecution, violence, and environmental disasters (Borkena, 2025, Jimenez-Damary, 2020, Scott and Salamanca, 2021). Currently Ethiopia is among the countries most affected by internal displacement, particularly in ethnically diverse and conflict-prone regions such as Amhara, Oromia, Tigray (Fekadu, Tesfaye, & Molla, 2023; Taylor & Kim, 2022, Regasa, Godesso & Lietaert, 2023). The Debre Birhan area hosts IDP camps, including “*Bakelo Camp*”, “*Woinshet Camp*”, and “*China Camps*”, collectively sheltering tens of thousands who fled violence and ethnic clashes (Getachew & Birhanu, 2023).

Internally displaced persons (IDPs) camps constitute a highly vulnerable subgroup due to the combined effects of aging and displacement-related hardships. Internally displaced elderly face compounded risks owing to physical frailty, chronic illnesses, limited mobility, and social marginalization (Deta & Fekadu, 2023, Ethiopia Protection Cluster, 2023). In spite of their numbers, elderly IDPs are often overlooked in displacement policies and humanitarian interventions.

Problem Statement

Although internal displacement in Ethiopia has been broadly documented, there remains a severe lack of focused research on the elderly IDP population in Debre Birhan camps. The exclusive psychosocial, economic, and health challenges they face have received scant academic and policy attention regardless of increasing elderly displacement (Ethiopian Human Rights Commission [EHRC], 2022).

Current research findings mainly aggregate IDPs as a homogeneous group, leaving a gap in considerate the specific vulnerabilities and lived experiences of elderly individuals (Doctors with Africa CUAMM, 2023, Panter-Brick et al., 2025). Currently most research conglomerates all displaced persons, lacking attention to age-related factors affecting social integration, health, and economic security (EHRC, 2022). There are limited explorations of how psychological distress, social isolation, and gender-specific risks intersect among older adults in Debre Birhan IDP camps. Thus, this study addresses these gaps by applying a phenomenological research design to understand thoroughly the distinct realities and multifaceted challenge of elderly IDPs.

Objectives of the Study

General Objective: This study aims to fill the knowledge gap by qualitatively exploring the lived experiences and challenges of elderly IDPs residing in Debre Birhan IDP camps.

Specific Objectives:

- To explore the psychological impacts of displacement on elderly IDPs
- To assess social and economic hardships experienced by elderly IDPs
- To explore access to healthcare and basic services
- To comprehend risks of abuse and exploitation

Significance of the Study

By focusing on the voices of elderly IDPs, this study offers crucial insights for policymakers, humanitarian actors, and local authorities. The study aims to facilitate the development of age-sensitive support programs especially in mental health, social protection, and healthcare that align with identified needs, thereby increasing the effectiveness of displacement responses (EHRC, 2022; World Health Organization [WHO], 2024).

Theoretical Framework

The study is primarily based on Life Course Theory, Vulnerability Theory, the Activity Theory of Aging, and Ecological Systems Theory, which together provide complementary insights into the complex and multidimensional challenges experienced by elderly internally displaced persons (IDPs).

Life Course Theory

This theory suggests that aging is an ongoing process shaped by historical, social, and environmental factors throughout life. For elderly internally displaced persons, displacement represents a major life event that disrupts their established social roles, financial stability, and health patterns. Elder (1998) suggests that negative experiences during pivotal stages of life, such as being forcibly displaced during old age, can significantly impact long-term well-being and the ability to cope. This framework illustrates how previous disadvantages and present challenges of displacement combine to influence the psychosocial, economic, and health outcomes of older adults.

Vulnerability Theory

Vulnerability theory highlights how structural and situational factors heighten the risk of harm, exploitation, and marginalization. Older internally displaced persons (IDPs) face a "dual vulnerability," stemming from both age-related challenges and the instability of displacement.

This theory emphasizes an awareness of psychological distress, economic hardship, social isolation, abuse, and restricted access to essential services (Chambers, 1989). It highlights elderly IDPs as a group significantly affected by systemic neglect and advocates for policies that specifically address their multiple vulnerabilities.

Activity Theory of Aging

The Activity Theory of Aging (Havighurst, 1961) suggests that successful aging is associated with preserving roles, relationships, and active involvement in social activities. Displacement undermines these roles, depriving elderly individuals of their social status, means of livelihood, and connections across generations. This disruption sheds light on the participants' experiences of social isolation, diminished dignity, and marginalization.

Ecological Systems Theory

Ecological Systems Theory highlights that individual welfare is influenced by complex interactions within the microsystem (family, friends), mesosystem (community connections), exosystem (organizations, support services), and macrosystem (cultural values, government policies) (Bronfenbrenner, 1979). This framework emphasizes how displacement concurrently affects these systems: separation from family ties, weakened community connections, insufficient institutional assistance, and cultural standards, norms that undervalue older adults amplify their susceptibility

Collectively, these theoretical viewpoints offer a multifaceted perspective for comprehending the difficulties encountered by elderly IDPs in general and it could work for the research topic under study.

Conceptual Framework

The conceptual framework of this study integrates literature and empirical evidence regarding the experiences of elderly IDPs. The structure of the framework consists of four essential elements:

- **Conflict and Forced Displacement:** Factors like armed conflict, property destruction, and coerced migration displace elderly people from their residences and social settings.
- **Loss of Family, Assets, Source of Income, and Responsibilities:** Displacement brings significant upheaval, such as being apart from relatives, disruption of economic functions, decline in social standing, and elimination of communal roles typically held by older individuals.
- **Mediating and Moderating Factors:** The degree of distress among the elderly is influenced by intervening variables like humanitarian and governmental assistance, the robustness of social networks, existing cultural standards, and personal coping strategies. These elements can either mitigate or amplify the effects of displacement.

- **Elderly Outcomes:** The combined effects of displacement and loss result in various difficulties, such as emotional suffering (trauma, grief), social seclusion (marginalization in camps), financial struggles (dependency and poverty), health deterioration (inadequate medical care, malnutrition), and increased vulnerability to abuse and exploitation.

This framework highlights the intricate and interconnected nature of issues faced by the elderly, showing that results are not consistent or predetermined but influenced by structural disparities and the social resources at hand. The framework therefore offers a detailed guide for comprehending not just the challenges that exist but also the reasons for their persistence and ways they can be alleviated through policy and humanitarian efforts.

Literature Review

International Context

Around the world, elderly PDI are disproportionate burdens for physical, cognitive and social vulnerability. Research has pointed out that psychological disorders, trauma, including injuries, anxiety, depression, and PTSD, are common in emotional older adults (Fekadu et al., 2023; WHO, 2024). Social isolation occurs as a result of family separation, loss of public networks, and alienation in camps that exacerbate mental health outcomes (Getachew & Birhanu, 2023). Economically elderly IDPs often exposed for poverty and lack of livelihood

opportunities, limiting access to food, evacuation and health care (IDMC, 2020). Additionally, older women are at higher risk of abuse, negligence and operational under travel conditions (Borkena, 2025). Quality research at the international level emphasizes the importance of understanding this life experience for effective adaptation of humanitarian interventions are thus needed (Lopez and Smith, 2017; Miller and Brown, 2023).

Ethiopian Context

In Ethiopia, internal displacement is primarily due to war, ethnic conflict, land conflicts and crisis, causing recurrent large-scale population movements (Borkena, 2025; Taylor & Kim, 2022). Intensive displacements of conflict and instability have been experienced in the Amhara region, where Debr Birhan is located (Fekadu et al., 2023). Humanitarian researches show that PDI camps often lack adequate medical services, water supply, sanitation and protection. The Ethiopian Human Rights Commission (EHRC) has announced the negligence of PDI among older people in policy implementation and programming (EHRC, 2022). Existing Ethiopian studies highlight the need to seek quality to understand the difficulties associated with older adults, psychosocial and well-being.

Methodology

Research Design

This study used a qualitative phenomenological design to explore how elderly IDPs interpret and make sense of their experiences. Entrusting that phenomenology is particularly suitable for uncovering the subjective, lived realities of individuals, and lets for deep exploration of emotional, social, and existential dimensions of displacement and lived experiences of IDPs.

Study Setting

Debre Birhan is found in Amhara region Ethiopia. Following the frequent ethnic conflict in Ethiopia, Debre Birhan becomes a key site for IDP resettlement. As of 2024, there are over 25,000 IDPs residing in three officially recognized camps in and around the city (“*Bakelo Camp*”, “*Woinshet Camp*” and “*China*” camps). All the camps face resource shortages, with inadequate shelter, insufficient medical services, and irregular food distribution (Fekadu et al., 2023; Deta & Fekadu, 2023). Even though elderly form a significant portion of the population, often they are living without family support.

Participants

For the present study participants were selected using purposive and snowball sampling techniques. Impartial and important inclusion criteria included age (60 years and above), displacement due to ethnic conflict, and present-day residence in one of the Debre Birhan IDP camps. The final sample consisted of 23 participants (13 men and 10 women) ranging in age from 60 years old to 77 years old. All of the participants had been displaced for over three years and originated from some zones of Oromia Regional State and North Shewa zone, Amhara Regional State.

Data Collection

In-depth interviews were conducted using semi-structured interview guide. The interviews focused on experiences of psychological wells, social relationships, economic situations, health status, and vulnerability. Data saturation was carried out after 23 interviews indicating that no new themes emerged (IDMC, 2020).

Data Analysis

For this study thematic analysis was used to analyze the data. Transcripts were read multiple times to gain familiarity, followed by initial coding. These codes were then grouped into categories and more refined into overarching themes. The researcher did not use any software. Because of access of getting relevant software I use manual methods to organize the data and maintain consistency in coding. Eventually,

major themes related to psychological distress, social isolation, economic hardship, health issues, and abuse risks were mapped and further analyzed for sub-themes (IDMC, 2020).

Ethical Considerations

The researcher for the present study received ethical clearance from the Debre Berhan University institutional review board. Besides, verbal and written informed consents were obtained. The researcher clearly informed that participants have a right to withdraw at any time if they feel any unease conditions.

Findings

Psychological Distress

According to the interviews, the elderly IDPs were in severe psychological suffering. Numerous participants reported recurring trauma symptoms, such as seeing attacks, losing family members, and having their homes destroyed that were connected to violent displacement episodes. A woman interviewee whose age is 63 years old bitterly stated that *“My beloved and hard worker son was killed by gunmen in front of me for no reason only because of his ethnicity. For longer time I had not remembered anything following such incident”* Reports of symptoms like intrusive recollections, nightmares, ongoing worry, depression, and emotional numbness were common. Some talked about how the constant insecurity and uncertainty in the camps had made them feel gloomy and depressed about the future. Because there were few readily available mental

health services in the camps, these psychological issues frequently went untreated. The result of the present study goes in line of a research findings of (Bekeko et al., 2025) stated that women IDPs, who often shoulder caregiving burdens experience even higher levels of psychological distress, relating gendered trauma and vulnerability to mental health outcomes in displacement contexts. Besides, findings of the present study align with Vulnerability Theory which emphasizes an awareness of psychological distress, economic hardship, social isolation, abuse, and restricted access to essential services (Chambers, 1989).

Social Isolation

One important theme that surfaced in the current study was social isolation. Deep feelings of loneliness brought on by family separation during relocation and the disintegration of social support systems were expressed by participants. Elderly individuals, who traditionally depended on their families and communities for identity and social support, expressed a decline in social standing and less engagement. A male participant whose age is 67 years old explained that *“While he had been in his former home place he would be busy in dispute resolution and social welfare activities such as marriage arrangements for newly coupled individuals”* Many elderly people's physical limitations, such as mobility problems that made it difficult for them to move around the camps and inside, made this isolation even worse. A widow interviewee whose age is 62 years old desperately stated that *“Because of*

her husband assassination she was segregated as from the community” All most all women interviewees in displacement contexts emphasized further levels of marginalization as a result of cultural norms that limit their social interaction. The finding of the present study is supporting the findings of (HelpAge International, 2018) which revealed displacement alterations older people's roles and lessens their influence and informal support networks, increasing their vulnerability and dependence on formal assistance. Besides, Panter-Brick, Eggerman, and colleagues (2025).

Uncovered that displacement causes a breakdown of social support networks and community roles critical to elders' identity and wellbeing, escalating mental distress and social exclusion. The findings of this research also support Activity Theory of Aging (Havighurst, 1961) which suggests that successful aging is associated with preserving roles, relationships, and active involvement in social activities. However, displacement undermines these roles, depriving elderly individuals of their social status, means of livelihood, and connections across generations. This disruption sheds light on the participants' experiences of social isolation, diminished dignity, and marginalization.

Economic Hardship

Economic hardship was overwhelming among elderly IDPs. All elderly desperately conveyed extreme poverty, with limited access to foodstuff, adequate shelter, and other basic necessities. All

interviewees revealed that they are dependence on humanitarian aids though aids were often insufficient or inconsistently distributed. All participants of the current study disclosed that they lacked viable livelihood opportunities due to their age, physical capacity, and lack of resources.

Because of absence of resources such as land, oxen cows, horse elderly displaced people could not be productive. Rather they become totally dependent on humanitarian aids to satisfy their economic interest. A male interviewee whose age is 61 years old bitterly stated that *“All my cattle, goats, horse, donkey, and sheep are taken by gunmen. Other assets such as coffee, honey bee hives, sugar cane, are left for those who did not cultivate them properly”* All participants uncovered that the inability to contribute economically or meet daily needs severely affected their sense of self-worth and dignity, escalating psychological and social difficulties.

The present study align with the findings of Dereje (2019) who highlighted the severe psycho-socio-economic problems faced by Ethiopian IDPs, such as trauma, unemployment, marginalization, and lack of access to financial resources. These difficulties are directly linked to the lack of land, assets and income generation capacity, particularly because of the age and physical imitations of elderly migrants. It supports also the research findings of (Humanitarian Action, 2021) which uncovered sever economic damage among IDPs and host households. There were widespread looting and

destruction of assets such as cattle, crops, homes, and machinery by perpetrator forces. This devastation contributed to widespread food insecurity and lack of basic necessities, severely upsetting displaced elderly who cannot rebuild livelihoods effectively for their later career. The findings of this study support Vulnerability Theory that older internally displaced persons (IDPs) face economic hardship, social isolation, abuse, and restricted access to essential services (Chambers, 1989).

Health Issues

Chronic well-being questions were highly raised by internally displaced elderly in all camps, and these conditions were frequently annoyed due to lacking approach to character healthcare. Many participants stated endure non-able to be contracted diseases to a degree hypertension, diabetes, arthritis, and incessant respiratory ailments like asthma or bronchitis.

Unfortunately, these things commonly faced uneven or complete lack of approach to essential drugs and routine health listening, that are critical for directing specific unending illnesses efficiently. Tentative clinics inside the camps were overwhelmed and harshly under-resourced, accompanying a limited number of healthcare pros sidelined to meet the increasing demand for care. This situation signified that routine check boosts, deterrent care, and follow up situations were frequently neglected. Moreover, the challenges of transportation on account of extreme costs, weak infrastructure, or protection

issues further limited locals' ability to inquire wanted healthcare services outside the camp scenes, place more specific care might have happened applicable.

The more extensive camp environment still acted a significant act in infuriating strength problems. Poor cleanliness abilities, containing inadequate approach to clean water and decent waste disposal, supported the spread of catching afflictions and complicated the administration of incessant environments. Overcrowding in makeshift shelters increased the risk of respiring contaminations and made it troublesome for things accompanying compromised fitness to prevent uncovering.

Nutritional deficiencies were extensive, as restricted food chance and weak diet kind weakened invulnerable schemes and belittled the body's ability to combat ailment or cure from existing environments.

A male interviewee whose age is 74 years old bitterly stated that *"Milk and meat had been available while I had been in my home place at least for festivals and holidays. Nonetheless, in the IDP camps I could not get even enough food for survival. Lack of adequate food highly threaten my health status"*,

The emotional stress of dislocation, uncertainty, and routine struggles donated to tangible health decline, accompanying many things experiencing fatigue, cavity, or tension that further hindered their ability to take care of themselves. Collectively, these determinants

created an endless loop that deepened the burden of incessant illness and formed a big challenge for reconstructing overall health effects inside the camp community.

The finding of this research highly supports the findings of Panter-Brick et al. (2025) also revealed that emotional stress of displacement, uncertainty, and daily survival challenges. In addition, the finding of this research aligns to Life Course Theory which uncovers forcibly displacement during old age influences the psychosocial, economic, and health outcomes of elderly displaced people (Elder, 1998).

Abuse and Exploitation

The vulnerable internally displaced elderly are exposed for severe abuse, neglect, and exploitation. Elderly mothers in IDP camps frequently face verbal abuse, material neglect, and lopsided approach to essential aid and resources. These gendered exposures manifest two together within classification units where aged mothers may be marginalized or wanting care and across the more extensive camp society, apparent by danger and shortage of resources.

The lack of correct guardianship mechanisms or gripe channels leaves these elderly exposed and cannot be avoided. Conditions in many IDP camps, to a degree overcrowd, poor cleanliness, and restricted healthcare, further compound their risk. Older women and men are commonly missed in care programs despite covering profound threats, containing tangible abuse and exploitation. Barriers to a degree restricted

flexibility, communication troubles, and public isolation create newsgathering abuse disputing, leading to under recognition of their needs and agony.

Evidence from diversified humanitarian studies highlights in what way or manner disturbed old women and men frequently continue neglect and discrimination. A male one who is interviewed old 70 bitterly established, “... *faces uninterrupted neglect and vituperation, even from those supposed to take care of them. In this camp, skilled is no one to count on for help, no guardianship, and the shortage of resources method elderly is continually last in line for aid.*”

This proof underlines the severe realities applicable for elderly who are excessively vulnerable to abuse in IDP camps.

The critical lack of guardianship, linked with the mental and tangible toll of dislocation, creates an area of exposure that demands urgent consideration. Strengthening guardianship methods, including approachable complaint procedures and society located support tailored to elderly, is essential for discussing these rampant risks and reconstructing their security and wellbeing in camp surroundings.

The present research further shows that widely held hurtful assumptions can lead to public ignoring of another and tangible violence. Moreover, public functions traditionally filling a place elderly, containing caregiving, concede possibility become dull or undervalued, leaving ruling class private and at risk. Without

appropriate safeguards, containing specific care services and all-embracing society support structures, elderly remain at risk of taking advantage and abuse in alien camps.

The findings of this research strongly support the research findings of Böcker and Hunter (2022) who uncovered widespread social isolation, and exposure to abuse and neglect among elderly displaced persons. It also goes in line with the research findings of Dereje (2019) who revealed that internally displaced persons in Ethiopia face discrimination, marginalization, and lack of institutional support. Especially the elderly face neglect and abuse.

The findings of this research also supports the research findings of Ethiopian Human Rights Commission (EHRC) reports that dictated older persons in Ethiopia are exposed to psychological, physical, sexual, financial abuses, and abandonment. Due to the lack of adequate complaints and protection mechanisms elderly who are not protected are largely marginalized in IDP camps. Besides, the findings of this research support Ecological Systems Theory (Bronfenbrenner, 1979) which highlights displacement concurrently affects family ties, weakened community connections, insufficient institutional assistance, and cultural standards that undervalue older adults amplify their susceptibility.

Discussion

The results of this study closely match findings from international research that highlight the multiple challenges faced by elderly people who have been displaced. Mental health issues caused by trauma and continuous stress are supported by global evidence showing that older internally displaced persons (IDPs) frequently experience serious psychological burdens that are often unnoticed or not addressed in displaced communities (WHO, 2024,).

Research findings of (UNHCR, 2019) confirm that displaced older adults face heightened mental health burdens including depression, anxiety, cognitive decline, and trauma-related stress. The strong sense of social isolation seen in this group is linked to the loss of traditional support networks and the disruption of established social roles, which increases their sense of being excluded and raises mental health risks. This evidence goes align with the studies of Pieterse & Ismail (2003) that showed older displaced persons face social disintegration as family and community support erode, increasing risks of exclusion and loneliness.

Financial difficulties and the lack of access to work opportunities add to the suffering of the elderly, reflecting a broader failure in the way humanitarian aid is distributed, as it often focuses more on groups that are seen as more capable of contributing to the economy. The current findings resonate to the studies of UN Expert Group on Ageing (2019) that confirmed elderly IDPs suffer

from poverty and insufficient access to work or livelihood opportunities that led to exacerbating economic vulnerability.

The health issues identified in this study confirm well-known challenges in managing long-term illnesses in settings with limited resources, where weak healthcare systems worsen conditions that are common among older people. The documented cases of abuse and exploitation of elderly women point to important gender-related aspects that are frequently ignored in policies and responses related to displacement. The findings of this research are supported by international researches. Studies conducted by Norwegian Refugee Council (2023); and UNHCR (2024) uncovered that challenges in accessing sufficient healthcare and handling chronic conditions because of systemic weaknesses in displacement settings worsened health status of elderly displaced people.

Conclusion

Elderly people who have been displaced internally in the Debre Birhan IDP camps encounter many complex and connected problems that negatively affect their physical, mental, and social health. Their situation highlights a critical need to tackle unmet mental health needs, widespread social loneliness, serious economic hardship, limited access to healthcare, and exposure to abuse, especially for older women. Existing humanitarian efforts do not adequately acknowledge or address the specific needs of elderly IDPs, which continue

patterns of neglect and exclusion. The findings of this research align with both the theoretical framework and the conceptual framework in that elderly displaced people suffer from psychological distress, health problems, economic hardship, social isolation, abuse, and restricted access to essential services.

Hence, in order to effectively respond to these issues, there must be a unified and comprehensive approach that focuses on programs tailored to the needs of older people and considers gender differences. It is also important to have inclusive protection measures and support for long-term economic stability. These actions are vital not only for protecting the dignity and rights of older displaced individuals but also for making displacement responses more effective and compassionate. A dedicated effort towards this vulnerable group will greatly improve the fairness and responsiveness of humanitarian efforts in Ethiopia and other regions facing similar displacement situations.

Recommendations

- Create and carry out specific mental health and psychosocial support programs for elderly internally displaced persons, which include counseling for trauma and group support led by peers.
- Increase access to healthcare within the camps, making sure those long-term illnesses are managed effectively and that services are designed to be accessible for those with limited mobility.

- Support initiatives that help elderly individuals reintegrate into society by rebuilding community connections and involving them in the decision-making and activities of the camp.
- Develop programs that provide income and financial help, designed to match the abilities and challenges of the elderly, in order to lower poverty and reduce their reliance on aid.
- Implement measures to protect against abuse and exploitation, especially focusing on the safety and rights of elderly women in displaced populations.
- Include specific measures related to the elderly in the monitoring and collection of data on displacement, to ensure their needs are clearly understood and considered in the development of policies and programs.

Strengths and Limitations

The strengths of this study involve gathering detailed qualitative data from a marginalized and properly unseen group, offering valuable insights into the everyday experiences of elderly internally displaced persons. However, the research has some limitations, such as a limited number of participants and a geographic focus that is confined to Debre Birhan, which may restrict the ability to apply these findings to other situations involving displacement.

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