

An exploration of protective mechanisms against problematic alcohol drinking among refugee youth in Bidibidi refugee settlement in Uganda

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ABSTRACT

Whereas research indicates that many forcibly displaced persons have an increased susceptibility to problematic drinking, not all refugees drink alcohol. This qualitative paper explores the mechanisms that discourage youth from engaging in problematic alcohol drinking in the Bidibidi refugee settlement in Northern Uganda. This article draws on in-depth interviews with fourteen refugee youth and eight key informants, including local leaders, social workers, religious leaders, humanitarian partners and government officials. Anchored on the eco-social environments in Bidibidi, this article presents individual, interpersonal and community-level perceived protective mechanisms that buffer problematic alcohol drinking among refugee youth. The study found that negative experiences associated with drunkenness, religious faith and moral values, peer and family support, sensitization, youth vocational skilling, sports and community bylaws are important mechanisms that help youth live to keep away from drinking. This study recommends a comprehensive community-driven approach that leverages partnerships with religious institutions, local leaders, and expands vocational or sports-based youth programs, while ensuring gender-inclusive outreach, that will be a viable pathway to reducing problematic alcohol drinking among refugee youth in Bidibidi and beyond.

Keywords: *Problematic alcohol drinking; Protective mechanisms; Eco-social environments; Refugee youth; Bidibidi, Uganda; Sub-Saharan Africa.*

INTRODUCTION

According to the United Nations High Commission for Refugees report (UNHCR, 2024), humanitarian crises are becoming more protracted globally. Such include armed conflicts and human rights abuses in Lebanon, Syria, Haiti, the Democratic Republic of Congo (DRC), Myanmar, Sudan and, in particular, South Sudan which continue to drive people out of their homes as per the UNCHR report. Nearly 130 million people were forcibly displaced worldwide as of June 2025 (UNHCR, 2025). Since 2013, the brutal conflict in South Sudan has forced millions of people out of their homes (UNHCR, 2025a; Nyadera, 2018). Bidibdi refugee settlement in Uganda shelters over 208,000 South Sudanese refugees, more than half of whom are women and children (UNHCR, 2024a).

There is extensive research that has been carried out on alcohol, including beer, wine, liquor and local brew, in refugee camps in Africa. In his study, Adelekan (2006) found widespread Busaa brewing and Changaa distillation in Kakuma refugee camp. Haddad et al. (2023) reports that Lutuku, Katata and Cinq'Cents among the most common homemade alcoholic beverages consumed in refugee camps in northern Zambia. Similarly, an earlier analysis from this study (Makoha & Denov, 2024) reported that numerous alcohol-brewing and drinking sites exist in the Bidibidi refugee settlement in northern Uganda. Moreover, increasing social and health ills among refugees worldwide, including increased levels of memory deficits, increased symptoms of depression, sleeping difficulties, suicide, cancers, ulcers, tuberculosis, and HIV/AIDS, are reported to be exacerbated by problematic alcohol drinking (Im & George, 2022; Kane & Greene, 2018; Otim et al., 2019).

The World Health Organization (WHO) report on Alcohol and Health (2024) highlights that the consequences of problematic alcohol drinking cut across the social, health, economic, and psychological spheres of life among refugee populations. Whereas Diese et al. (2022) note that it is an individual's choice whether to drink or not, Kalema et al. (2019) contend that the harms associated with alcohol are far-reaching, ranging from individual health risks to consequences for family, community, and the larger society.

Despite the increased vulnerability for problematic alcohol drinking among refugees, McCleary et al. (2016) and Mwanri and Mude (2021) found that not all refugees drink alcohol. This finding concurs with Weaver and Roberts (2010) who demonstrate in their review that some refugee youth avoided alcohol use. A comparative desk review by Kane and Greene (2018) on alcohol and substance use disorders among refugees in low and middle-income countries found a lower alcohol consumption rate for refugees than in non-refugee communities. Swahn et al. (2013) associate awareness of the implications of drunkenness with reduced alcohol drinking among youth in Kampala slums.

The guidelines for humanitarian assistance recommend actions to address problematic drinking (Sphere, 2018). However, empirical evidence that informs the monitoring and prevention of alcohol use-related challenges among refugee youth in Uganda is lacking. A few studies conducted in Uganda focus on schools and the local Ugandan population (Emyedu et al., 2017; Swahn et al., 2018). Therefore, little is known about protective mechanisms that counteract problematic drinking among refugee youth in Uganda. Moreover, Uganda hosts the largest refugee population in Africa (UNHCR, 2025). It is against this backdrop that this article undertakes to explore perceived mechanisms that discourage problematic drinking among South Sudanese refugee youth living in Bidibidi refugee settlement in northern Uganda.

For this study, problematic drinking is defined as a pattern of drinking that has the potential to harm an individual's health, interpersonal relationships, and ability to work, study or participate in daily activities. Protective mechanisms are defined in line with Newcomb & Felix-Ortiz (1992, p. 281) as "influences or factors that prevent, limit, or reduce problematic drinking and those that may counter, buffer, neutralize, and interact with risk factors within or across time" to discourage young people from drinking.

The article presents one of the few empirical studies that explore protective mechanisms in discouraging war-affected South Sudanese refugee youth from engaging in problematic drinking. This study further addresses a significant gap in the current literature on mechanisms that buffer against problematic alcohol drinking in refugee contexts. Exploring protective mechanisms can generate insights into building resilience among refugee youth in Bidibidi. Such insights can also inform the development of effective alcohol prevention measures and health promotion strategies in Bidibidi and other refugee settlements. These study findings can stimulate more vigorous debates around this critical but often neglected issue.

Krieger's eco-social perspectives informed this article to illuminate the participants' social and ecological perceptions regarding their experiences with alcohol in a refugee settlement setting. (Krieger, 2001; Krieger, 2012). Eco-social theory conceptualizes the social patterning of individual health as the result of interlinked social, cultural, and ecological forces. The eco-social theory also offers unique insights into structural and political dimensions that may result in social stigma, stress, anxiety, and shape youth alcohol drinking experiences (Krieger, 2012). The eco-social theory's focus on spatiotemporal pathways is relevant for understanding protective mechanisms that discourage problematic drinking among refugee youth who primarily live in settlement environments characterized by elevated exposure to marginalization, stigma, stress, anxiety and poverty (Makoha & Denov, 2024; Saleh et al., 2023). Notably, youth are at a sensitive life-course developmental stage characterized by less developed coping strategies, reduced social power, and lower self-efficacy (Adaku

et al., 2016; Tol et al., 2020); eco-social theory allows us to draw these elements out for analysis in relation to protective mechanisms against problematic alcohol drinking among refugee youth in Bidibidi.

METHODS

This article draws on a more extensive qualitative study (Makoha, 2021) that explored forced displacement and problematic alcohol drinking among South Sudanese refugee youth in the Bidibidi settlement. Bidibidi refugee settlement was established in 2016 in Yumbe district, spanning 250 square kilometres in the eastern part of the district, extending southward from the South Sudanese border and overlapping into the Moyo district along the western bank of the Kochi River, and hosts over 208,000 South Sudanese refugees (UNHCR, 2024). Hinged on the critical paradigm (Bhaskar, 2013), a qualitative case study design was employed to allow a triangulated, nuanced exploration of symbolic practices, meaningful beliefs, and perceptions of South Sudanese refugee youth and the key stakeholders working with them regarding problematic alcohol consumption in a refugee settlement context.

Recruitment

Recruitment and data collection occurred during the COVID-19 pandemic. The Principal Investigator (PI) worked closely with a social worker from the Office of the Prime Minister's outpost at Base Camp in Bidibidi refugee settlement. Although the social worker had solid existing relationships with potential youth participants, these relationships did not affect the findings, as the social worker only shared the study flier and recruitment materials with them and collected contact details from those interested in participating. After the social worker provided a list of potential youth participants and their contact information, the PI independently followed up to recruit for the study.

Considering the anxiety-provoking experiences associated with forced displacement, the PI independently conducted an initial phone screening to exclude youth with emotional difficulty. The Refugee Health Screener RHS-15 was used to assess the youth's emotional state. The youth were asked the following three yes/no questions during the phone screening. 1. Are you currently receiving any professional mental health services? 2. Do you have difficulty remembering past events (including cognitive challenges)? 3. Do you have sleep disturbances, feeling sad, angry or depressed when discussing your past experiences? Youth who replied yes to any of the three questions were excluded from the interviews.

Youth participants aged 18-25 years (8 young men and 6 young women) of South Sudanese origin who had resided in the Bidibidi refugee settlement for at least 1 year prior to the interview date were recruited (hereafter referred to as youth participants). However, only youth who passed the phone screening and could understand English were recruited for

interviews. Additionally, key stakeholder informants, men (n=7) and women (n=1) who had been actively working with the youth in the settlement for 6 months or more prior to the interview, were selected to participate in this study (hereafter referred to as key informants). Both youth participants and key informants were purposively selected for interviews. Sudanese refugee youth, comprised active alcohol users (n=5) and non-active alcohol users (n=9), and key informants included refugee welfare officials (n=2), Community development workers (n=2), educators (n=2), a health worker (n=1), and a counsellor (n=1), all working closely with the youth in Bidibidi, and this study altogether involved 22 participants.

Data collection

Although the interview guide exposed all the youth to similar questions, non-active alcohol users were probed for more insights on the protective mechanisms that buffer problematic drinking and active alcohol users were probed to provide more information on the risks that influence problematic drinking. Drawing on their personal, community and experiences working with the youth on diverse programs in Bidibidi, key informants provided more profound insights into problematic drinking among refugee youth. Youth interviews lasted approximately 60 minutes, while KII interviews were between 60 and 90 minutes to gain an in-depth understanding of the mechanisms that discourage refugee youth from problematic alcohol drinking.

Analysis

All interviews were audio-recorded and transcribed verbatim by the PI. Transcripts were read multiple times to identify codes related to protective mechanisms, and the data were coded using NVivo 12. To identify codes related to protective mechanisms, the transcripts were read multiple times to identify conceptual phrases from participants' narratives. A coding frame with twenty categories was developed and shared with the research collaborator for review to address any discrepancies. Codes were then grouped into three major themes: individual, interpersonal, and community-level mechanisms and eight subthemes, as detailed in the findings section. To ensure reliability, the themes were reviewed by the social workers, key informants, and some of the youth who participated in the study.

Ethical Considerations

McGill University Research Ethics Board (III) provided ethical approval for this study. Permission to conduct research in Bidibidi refugee settlement was also obtained from the Office of the Prime Minister (OPM) in Uganda. Before data collection commenced, permission was obtained from the Arua Refugee Desk Office and the office of the Bidibidi settlement commandant. Participation in this study was entirely voluntary, and informed non-coercive participant consent was obtained prior to the interview. All necessary steps

were taken to protect participants from any risks. The Principal Investigator (PI), a trained social worker, addressed distress directly when it arose during the interview and referred participants to resources within the settlement as needed. The following section thematically details mechanisms that discourage problematic drinking among refugee youth in Bidibidi.

RESULTS

This section presents the key findings of the study. The themes are categorized into perceived individual, interpersonal and community-level mechanisms.

Individual-level protective mechanisms

While participants discussed protective mechanisms at an individual level, two subthemes included avoiding drinking due to the negative experiences whenever drunk and commitment to religious faith or moral values.

Negative experiences whenever drunk

Some youth reported that they had several negative experiences whenever they drank alcohol, for instance, feelings of hangover, vomiting, and other health-related complications. Some youth also narrated incidents of negative sexual behaviour, such as rape, unprotected sex, and defilement, that happened because of intoxication. Other young adults recalled having heated misunderstandings with parents, relatives, and neighbours in the settlement. Some youth reported that they chose to stop drinking after realizing how they offended family, friends and community members while drunk. Other youth narrated that they used to drink a lot but stopped after realizing several health complications. Among the health challenges associated with drinking alcohol are ulcers, digestive complications, loss of appetite, and loss of body weight. A youth participant narrated that:

“I used to drink a lot before understanding how dangerous drinking alcohol can be to an individual’s overall well-being. I lost my appetite for food, and I became very skinny. People started talking about me that I am going to die... one day, while drunk, I assaulted my brother when he tried to force me to eat food... You see this scar on my face? It is from fighting. So, I chose to stop drinking because of all these.” [Refugee Youth Male 1].

Religious faith or moral values

Some youth see religion as a significant mechanism helping them to abstain from drinking. Some youth reported primarily adhering to prescriptions against alcohol. Participants from the Muslim denomination considered drinking alcohol a deviation from Islamic tenets

and punishable by Allah. Citing Islamic laws, as outlined in the Quran, some participants reported that it is sinful to drink alcohol. A youth participant reported as follows:

“I am a Muslim, so in our faith, it is not allowed for us to drink alcohol. So, if you have that faith, you must know that drinking alcohol is condemned.In that case, I am not drinking alcohol. Therefore, I can say it is my faith that has guided me to keep away from drinking alcohol” [Refugee Youth Female 5].

Some youth perceived that they avoided drinking alcohol because of their faith in a higher power itself. Some youth expressed a belief in a higher being that controls their everyday lives and in an afterlife. A youth participant expressed that:

“.... For a long time, I have been stopping and resuming drinking, but when my friend took me to church, my life changed. The holySpirit touched me. He says your body is the temple of Christ. Therefore, I am encouraged to live in a way that pleases God. Moreover, most of the things we find in the bible and the bible itself rebuke drunkenness.” [Refuge Youth Male 4].

Some participants also believed that a sense of community built around places of worship helped them avoid alcohol drinking. Some youth reported that the religious community provided significant support to youth, parents, and caregivers in Bidibidi. For example, some devoted Christians or Muslims commonly serve as guardians or foster parents to unaccompanied minors in the settlement. At places of worship, ascription included regular and frequent participation in church activities, such as bible study, singing practice, prayer meetings, youth meetings, and counselling sessions. Some participants affiliated with Evangelical Christianity reported that their pastors often visited them at home for prayer and guidance.

Overall, spiritual and religious beliefs played a key role in promoting responsible behaviour among the youth living in the Bidibidi refugee settlement. Religious teachings have kept many observant young people away from problematic alcohol drinking, as some youth relied on their respective religious denominations for spiritual strength and healing from challenging displacement experiences.

Interpersonal level protective mechanisms

Three subthemes regarding interpersonal protective mechanisms include support from family and friends with constructive ways of spending time, sports activities, and sensitization on the dangers of problematic drinking.

Support from family and peers

Some youth mentioned that they were encouraged to stay away from alcohol by their families and peers. Some youth recognized the importance of creative leisure activities, such as sports, recreational pursuits, and computer training, in shaping their career paths and securing a sustainable future. Similarly, some youth leaders mobilized their peers to form groups that supported one another, fostering collective resilience and a sense of belonging and ultimately becoming prominent future leaders of South Sudan. For example, a female youth narrated that:

“Previously, we had our group, Amazing Child Protection Services.... Every weekend, I would go with my friends to discuss things with the children. Moreover, we discussed topics such as alcohol, early marriage, fighting, stealing, and how to advise the community. In 2019, when the group was active, the youth were not drinking alcohol too much [...]. Due to COVID-19 and lockdown measures, young people had nothing to do and could drink alcohol a lot.” [Refugee Youth Female 3].

Based on this observation, some youth participants were displeased with their peers who drank excessively, negatively affecting their health, relationships, and ability to fulfil their responsibilities.

Sensitization on the dangers of problematic drinking

Participants also agreed that sensitization and counselling play a significant role in discouraging young people from drinking. Some youth explained that an understanding of the possible harm and consequences associated with problematic drinking enabled them to avoid alcohol. Participants also reported that counselling and sensitization meetings organized by some stake holders helped some youth to change their alcohol drinking behaviour to become more responsible. Participants reported that organizations such as “GOAL Uganda” provided alcohol education services to the youth. On the other hand, some participants expressed frustration, citing the closure of several partner organizations as a hindrance to various youth sensitization and counselling activities in the settlement. A participant reported that:

“I used to drink a lot and all types of alcohol. However, since I got advice from GOAL Uganda on the likely consequences of drinking... I stopped drinking alcohol.” [Refugee Youth Female 1].

Participants emphasized the importance of awareness campaigns in helping the youth to stay away from alcohol. However; some participants observed that youth sensitization programs are primarily provided by organizations targeting girls in the settlement. Consequently, boys received less sensitization and exposure to information regarding alcohol. Participants noted that such boys could still influence the girls to drink.

“I want to disagree with some partner organizations; these operating partners whose youth sensitization programs primarily target girls. Now they are dealing with girls, how about the boys? Girls are getting services, but the boys are left out. At the end of the day, the very boys are spoiling the girls who are service beneficiaries.” [Key Informant Male 2].

Sports or recreational activities

As observed during the fieldwork, sports and recreational centres in Bidibidi provide opportunities for youth to engage in constructive discussions. Participants also noted that, although most recreational facilities were initially constructed for minors under 18, young adults are allowed access. For instance, youth often used the football and netball pitches in the evenings, on weekends, and on holidays.

“...Some recreational centers and service points are created within the settlement where youth can spend time. Innovation centers, perhaps, offer the internet with numerous learning and constructive programs that youth can participate in. I think these developmental activities are the key things that I have seen keeping the youth away from alcohol” [Key Informant Male 4].

On a typical day of the week, especially from around 4:00 pm to 5:00 pm, boys and girls of all ages often gathered at various sports grounds within the settlement. While the youth entertained themselves with their unique athletic abilities, older people were seen taking positions for a better view to cheer on the action. Sport is a leisure activity that brings different ethnic groups together as a unified society but also requires players to maintain sobriety. Some youth participants emphasized self-restraint, moderation and abstaining from alcohol drinking because of their affiliation with soccer clubs in Bidibidi. One refugee youth participant mentioned that:

“... I play for the Bidibidi United soccer team, and with football, you must be sober all the time. We have our team regulations that prohibit drinking alcohol. I see many boys are leaving alcohol and joining sports activities here in Bidibidi”
[Refugee Youth Male 2].

Community-level protective mechanisms

Three sub-themes regarding community-level perceived protective mechanisms include community bylaws, education and vocational skills training, and strengths within host communities.

Community bylaws

Key informants reported that bylaws on alcohol have been implemented in different zones of Bidibidi. For example, if a person committed an offence under the influence of alcohol, they were liable to perform community service in the settlement, such as cleaning health centres and water sources or trimming vegetation along roads. In this way, some youth were dissuaded from drinking alcohol after seeing peers having to perform such punishment. However, some youth stopped drinking alcohol to avoid the possibility of public shame. One of the key informants reported that:

“... In Zone 2, we have set up specific rules and regulations. When we identify that you drink excessively or at inappropriate times, you are liable for punishment. If you drink and assault someone, then you face the law. You will understand how to behave when drinking. For your information, many youths have positively changed through the implementation of some of these bylaws and regulations”
[Key Informant Male 2].

Additionally, participants mentioned that refugee youth who committed criminal offences (such as assaults, stealing, rape, and malicious property damage) while intoxicated were usually reported to the police. Some youth participants indicated that after witnessing the arrest of their friends with whom they used to drink, they decided to quit drinking alcohol.

Education and vocational skills training for the youth

Youth participants reported that school-going youth not only have less time to loiter in the trading centres but also fear being seen drinking. Such youth can also avoid bad company around the villages in the settlement. Participants noted that older youth benefit from hands-on vocational training, for example, at the Ebenezer Global Youth Training Centre or the Yoyo Vocational Centre (refugee initiatives for youth skill training in Bidibidi). Participants also felt that due to the shortage of qualified vocational instructors, these centres often enrol few learners. Additionally, participants reported that vocational skills training offers youth hope of gaining meaningful employment and an opportunity to take on leadership roles.

Employment and leadership roles come with responsibilities that keep young people busy. For example, one youth participant mentioned that:

“I went to Ebenezer for ICT [Information and Communication Technology] training, basically Microsoft applications. The program kept me engaged throughout the six months. Moreover, I was offered a bursary, and after training, I started working. I now have a job in Bidibidi ...laughs.” [Refugee Youth Male 8].

Strengths within the host communities

Refugee youth reported that their relationships with host communities are vital factor in coexistence. Refugees generally perceived their interaction with host communities as peaceful. Key informants also reported that settlement leaders, particularly Refugee Welfare Councils (RWCS), often collaborated with local host community leaders, such as Local Councils (LCs), to promote peaceful shared use of resources, including schools, recreational spaces, health facilities, and markets. Additionally, participants noted that the majority of the surrounding host communities in Bidibidi are Muslim and condemn the consumption of alcohol.

DISCUSSION

This study explored protective mechanisms that discourage refugee youth from engaging in problematic alcohol drinking in Bidibidi refugee settlement. In the context of forced displacement, it is important to note that some youth directly or indirectly experienced multiple challenges during the war, in transit, and upon resettlement in Bidibidi (Makoha & Denov, 2024; Nyadera, 2018). Previous studies (Logie et al., 2022; Vasic et al., 2021; Roberts et al., 2011; Weaver & Roberts, 2010) show that war trauma and protracted displacement exacerbate vulnerability to problematic drinking. Despite increased susceptibility to problematic alcohol drinking in displaced contexts, the study findings revealed that some refugee youth in Bidibidi mobilized important mechanisms at the individual, interpersonal, and community levels to avoid problematic alcohol drinking. Similarly, McCleary (2017) found that Karen refugees from Burma are more resilient in overcoming harmful alcohol use by rebuilding community structures and bonds that were previously destroyed by conflict and forced displacement. In the same line, Mwaniri and Mude (2021) established that individual and environmental characteristics can promote or inhibit alcohol use among forcibly displaced populations.

The findings of this study reveal that some youth could not continue drinking when they recall their past experiences with alcohol, including intoxication, hangover, self-inflicted injury and digestive complications. The Uganda Youth Development Link (2008) also

found that such negative experiences with alcohol motivated some youth to stop drinking. Findings further show that religious faith and strong moral values are important mechanisms for self-control, helping some youth to reflect on their alcohol drinking behaviour. Religion was viewed as a protective mechanism (as seen in Christian and Islamic traditions), as a positive belief in a higher power, as well as the community built around places of worship.

To some youth in this study, religious teachings underline the importance of faith and spiritual growth that help them avoid drinking. These findings are consistent with those of Hasanovic and Pajevic (2010), who established that a higher index of religious moral beliefs can control problematic drinking among war-affected populations. In the same line, Debnam et al. (2018) and Lindert et al. (2022) highly link spirituality with reduced alcohol drinking among Syrian refugees.

The findings of this study also demonstrate that having a network of supportive peers and family deters some youth from drinking. Both sets of participants stressed that parental guidance and supervision help to model family behaviour and reduce exposure to risky environments in the settlement, including alcohol drinking sites. Denov and Shevell (2020) also observe that a family environment that encourages open conversations about stress, peer pressure, and responsibility is a strong protective factor for young adults. Thus, family and peer support can help refugee youth develop coping skills to resist external influences. In the same vein, Kim et al. (2002) note that a strong family environment can reduce youth susceptibility to risky forms of peer influence, including substance use.

Participants in this study demonstrate that awareness of the dangers of alcohol drinking keeps some youth from drinking. Similarly, Swahn et al. (2013) found an association between alcohol-related education and reduced drinking among youth in Kampala. As the UNHCR (2019) discusses, access to information promotes mental health and psychosocial growth among displaced persons. The United Nations Commission on Narcotic Drugs' annual report (2024) and researchers Dosunmu and Odesanmi (2025) emphasize the importance of sensitization in the prevention of drug and substance abuse. While educational and information campaigns are crucial for making informed decisions, a limited understanding of the possible consequences of drinking and the lack of support for male youth remain a riddle in the settlement. Due to targeted service delivery, some participants felt boys received fewer sensitization services compared to girls in the settlement. Moreover, Agblorti et al. (2024) note that differential targeting in service provision affects refugees' integration. In essence, equal access to services and information is imperative for curbing problematic drinking among youth in Bidibidi.

Interview data from this study suggest that sports activities keep youth away from alcohol. In Bidibidi, sports and recreational activities often serve as a form of psychosocial therapy and unity. Bidibidi Performing Arts Centre provide platforms for creative expressions to promote healing and social cohesion among diverse South Sudanese refugee ethnic groups. These findings are consistent with Kasirye (2015), who demonstrated that peer-led art prevention programme activities, including soccer, music, and drama, protect youth from alcohol and drugs. The United Nations Office on Drugs and Crime (UNODC) report (2002) also demonstrates that sports activities are reliable measures for reducing idleness and serve as constructive leisure among disadvantaged populations.

Key informants, in particular, from this study highlighted the significance of community bylaws, including age restrictions on alcohol consumption, designated drinking times, and defined penalties, in mitigating problematic drinking. Similarly, researchers including Massawe et al. (2022) and Paschall et al. (2012) note that community bylaws serve as an essential buffer against problematic youth drinking. The Constitution of the Republic of Uganda (1995) and the Uganda National Alcohol Control Policy (2019) prohibit the sale and consumption of alcohol by persons less than 18 years of age. However, interviews revealed limited implementation of such policies in the refugee settlements. Thus, community-led committees comprising elders, local leaders, and youth representatives can be established to oversee compliance with existing regulations.

Another finding from this study indicates that formal schooling equips youth with structured daily routines, future aspirations, and social networks that discourage engagement in risky behaviours, such as drinking. According to the Uganda Youth Development Link (2008), the Ministry of Education and Sports has regulations prohibiting alcohol consumption among schoolchildren. Findings also show that youth vocational practical-skills programs, such as tailoring, welding, mechanics, and carpentry, enhance employability and create pathways to income, thereby reducing reliance on alcohol as a coping mechanism. In their study, Tulibaleka and Kavuma (2025) argue that vocational training brings transformative economic change among refugee youth in Uganda. Given the ongoing reduction in humanitarian assistance, participants felt that agricultural extension services in crop and livestock farming can offer youth meaningful opportunities for engagement, household food security, and economic contribution. Collectively, these perceived mechanisms reduce idleness, build resilience and protect youth from the social and health risks of problematic alcohol drinking.

Limitations of the study

There are three main limitations noted in this study. First, acknowledging that excluding youth with mental health challenges and those who did not speak English might have resulted in recruitment bias, limiting other potential youth from participating in this study. Second, this study is qualitative and involves a small number of participants; therefore, the findings cannot be generalized to all refugee youth living in Bidibidi refugee settlement. Finally, interviews were conducted during the COVID-19 pandemic period. Thus, travel and congregation restrictions may have prevented potential participants from attending in-person interviews.

CONCLUSION

This paper sheds new light on a wide range of strategies that could help South Sudanese refugee youth avoid problematic alcohol drinking in Bidibidi refugee settlement. Together with evidence from previous research, the findings can spark further discussions to counter, address, mitigate, reduce and buffer problematic drinking among war-displaced populations. The findings reveal that despite increased vulnerability for problematic alcohol drinking, some refugee youth mobilize essential strategies to stay away from alcohol. The support from family and friends, negative experiences whenever drunk, sensitization of the dangers associated with drinking, faith or religious beliefs, youth vocational skilling, community bylaws and sports activities are essential mechanisms for keeping youth away from drinking.

Individual-level protective mechanisms can inform relevant interventions aimed at optimizing personal health and well-being. However, it is equally important to incorporate initiatives that mitigate structural vulnerabilities for young people. South Sudanese youth are not independent of the social constructs of their families, their settlement environment, and the broader host communities with whom they reside. Given the society's role in promoting physical, social and economic well-being, it is crucial to incorporate community-level protective mechanisms in addressing problematic drinking among refugee youth.

Therefore, an integrated collaboration of multiple stakeholders, including refugees themselves, host communities, partner organizations and the government of Uganda, is crucial for addressing problematic drinking among refugee youth. Extending vocational skills training and sports-based youth programs, and ensuring gender-inclusive outreach, can help achieve greater success in preventing problematic drinking among refugees in Bidibidi. This study also suggests that future research would consider refugee settlements with culturally diverse refugee populations to provide concrete recommendations for practice.

In light of the findings above, this article highlights that reducing problematic drinking among youth in Bidibidi requires an integrated community-centred approach. Therefore, this article proposes that establishing strong partnerships among refugee youth, religious institutions, and local community leaders can strengthen prevention and intervention efforts to promote responsible drinking and provide culturally sensitive counselling. Secondly, expanding vocational skills training and sports-based programs for the youth can build pathways to economic self-reliance and offer meaningful alternatives to foster social connections. This is because recreational activities can help address some of the root causes of problematic alcohol drinking among refugee youth. Thirdly, adopting gender inclusive outreach services is critical given the fact that men, women, and youth experience and influence alcohol related behaviours differently. Thus, tailored outreach programs that engage women, men, and youth can improve awareness, reduce stigma and strengthen individual, family and community resilience. These strategies can lead to safer, healthier and more supportive environments for the youth in Bidibidi.

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Declarations (if any)

- i. Declaration of interest: The authors declare that they have no conflict of interest.
- ii. Artificial Intelligent Declaration Statement: The authors declare that no artificial intelligence (AI) tools, systems or technologies were used in the conception, writing, editing, analysis and interpretation of this manuscript. The authors further declare that this manuscript is an original work, has not been previously published and is not under consideration for publication elsewhere.

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