

# Finding Family Health Solutions within the Bhutanese Refugee Community

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## Why are there refugees from Bhutan?



Students in the refugee camps (photos: C. Tiwari)

- Nepali Bhutanese are of Nepalese origin. This population first began to migrate to southern Bhutan in the 1600s, primarily for economic reasons.<sup>1</sup> The majority speak Nepali and practice Hinduism, whereas Bhutan's official language is Dzonghka and the state religion is Buddhism.<sup>2</sup> The Bhutanese government, ruled by a monarchy, accepted this migrant group. In fact, starting in the 1950s, the Nepali Bhutanese were increasingly recognized and integrated into traditional Bhutanese society.<sup>3</sup>
- The 1980s brought a dramatic change, with increasing government concerns over the extent of immigration and the cultural distinctiveness in the southern region.<sup>3</sup> The new government policy "One Nation, One People" enforced cultural uniformity, resulting in fear among the Nepali Bhutanese. By 1991 as many as 90,000 had fled to Nepal for protection.<sup>4</sup>
- Permitted to remain in Nepal as refugees but not welcomed into Nepali society, the Nepali Bhutanese set up self-managed camps in southeastern Nepal in 1990, with the United Nations High Commissioner for Refugees (UNHCR) soon offering assistance.<sup>1,2</sup>
- Over the next 18 years, many factors such as the long duration of life in the camps, political instability in surrounding Nepal, and the uncertainty of returning home or safely going elsewhere created stressors that resulted in mental health and other social challenges that are well documented in the literature.<sup>4,8</sup>



A wedding in the refugee camp (photo: C. Tiwari)

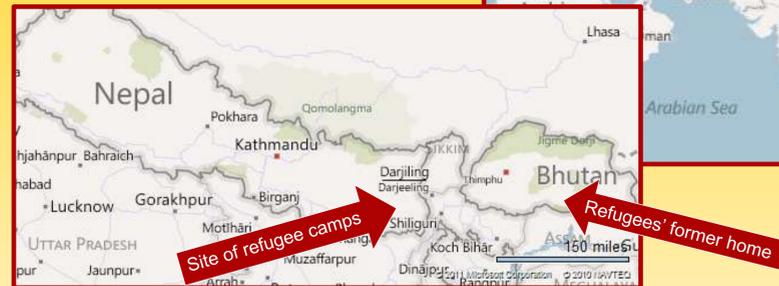
## How have Bhutanese refugees come to the United States?

- After years of attempted negotiations between Nepal and Bhutan facilitated by the UNHCR, it became clear that the Nepali Bhutanese refugees would not be allowed either to assimilate into Nepali society or to be repatriated to Bhutan. In 2006, the United States offered to accept 60,000 refugees, with other countries committing to smaller numbers.<sup>1</sup>
  - Since 2008, the Nepali Bhutanese refugees have remained the third highest group to be resettled in the US each year; and as of 2010 the #1 refugee group resettled in Pima County.<sup>9,10</sup>
- Refugee resettlement in Arizona includes limited financial assistance for up to 8 months; moderate case management support from the resettlement agency for 3 to 6 months; and health insurance coverage by the Refugee Medical Assistance Program (RMAP) for 8 months.
- The resettlement experience for many refugee groups is often characterized by a lack of information and understanding about health care services in the new country, as well as significant language and cultural challenges.
- For the Bhutanese, the first refugee arrivals in 2008 and 2009 were more

likely to speak English than those who have recently arrived. The Bhutanese are frequently characterized as a very cohesive group, willingly providing social support for their entire community.



President of BMAAT (photo: K.A. Heckert)



Maps retrieved from www.nationalgeographic.com

## How did the research team gain entry to the Bhutanese refugee community?

- Upon learning of the high numbers of Bhutanese refugees in Tucson and receiving funding to work with the research mentor, the research assistant implemented a large scale background search about Bhutanese refugees and health; searched previous students' work with refugees for an understanding of how the UA had worked with this community before; and attended the 2011 Arizona Refugee Resettlement Conference to better understand the resettlement process.
- The research mentor contacted La Frontera, an organization that has well-established ties with the refugee communities in Tucson, and received an introduction to the president of the Bhutanese Mutual Assistance Association of Tucson (BMAAT). BMAAT is a recently registered 501(c)3 community organization in Tucson.
- In response, the BMAAT president invited the UA team to a regular community meeting of this group. The BMAAT president explained the UA research team's interest in women's health, followed by an open discussion in Nepali. Both men and women identified a number of priorities for women's health. Additionally, the UA team had the honor of being invited to the Bhutanese community's annual celebration of Deshain, a traditional festival. After this remarkable event, the vice-president of BMAAT mobilized a group of women, including his sister who is a recognized traditional healer in the community.
- Subsequently, a group of Bhutanese women covering a wide span of ages, English language proficiency, and employment status; some single, some married, with children and without; met with the UA team to continue the conversation about women's health. Meanwhile, the UA team attended meetings with the International Rescue Committee and others to further understand the resettlement process and to identify available resources.
- Throughout this process, the Bhutanese refugee community has identified numerous concerns for women's health, including:
  - Lack of health insurance
  - Limited access to preferred contraceptive methods
  - Cultural barriers to achieving a level of comfort in expressing personal women's health needs
  - Lack of awareness and knowledge about cervical cancer screening
  - Challenges to patient-provider communication
  - Limited English language proficiency



Bhutanese refugee family in the United States (photo: K.A. Heckert)

## What's next?

- Work with the women's group to build cohesion and commitment to work together
- Identify community (and other) assets and women's health priorities
- Create a plan of action and funding strategy that will enable the Bhutanese refugee community to participate actively in the improvement of women's health outcomes



Deshain festival (photo: D. Demers)

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