



The Health of Refugees from Bhutan

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Twenty percent of Bhutan's population is currently displaced and living in refugee camps, neighboring countries, or finding asylum with resettlement. The government's ethnocentric policies have led to direct discrimination and persecution, forced relocation, and extensive human rights violations of the population of Nepalese ethnic origin, the Lhotshampas. Since the early 1990s over 100,000 refugees from southern Bhutan have fled to Nepal and approximately 25,000 have independently found asylum in India. Victims of racially motivated forced eviction, Bhutanese currently make up the largest generation of refugees per capita in the world. Having suffered traumatic and violent acts of what is described as ethnic cleansing; refugees have little hope for repatriation in the near future. Presently, overcrowded refugee camps in Nepal have begun to present not only health and sanitation concerns, but serious safety and security issues as well. Many refugees are now fleeing camps to India only to find themselves unprotected and displaced yet again.

Primary Causes of Bhutanese Refugees' Health Concerns

- Severe chronic malnutrition and vitamin deficiencies, particularly Vitamin A, contribute to a diminished immune system.
- Substantial mental health burden due to forced displacement and extensive traumatic experiences, including murder, torture, physical and sexual violence.
- Gradual reduction of much needed services in refugee camps, such as health, education, and basic needs assistance.
- Complete lack of oral and dental health care present the most prevalent personal health problems faced.

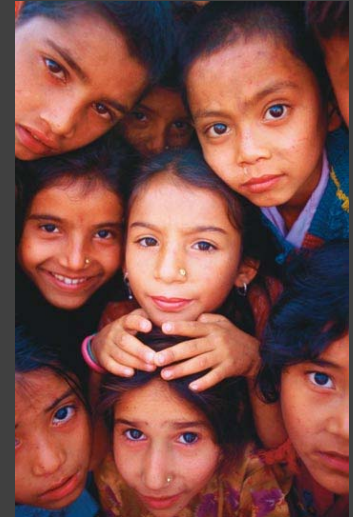
Health Problems as They Transition to America

Bhutanese refugees generally approach medical care from an emergency perspective versus that of preventative health care measures. Encouragement and education relating to preventative care is critical for continued treatment of the health problems with which they arrive, as well as for increased self care and use of services now available to them. Poor living conditions in camps affecting food, water and sanitation contribute to severe malnutrition and the need for education on proper nutrition. Many Bhutanese are vegetarian and the necessity of eating a vitamin-rich balanced diet is even greater. Traumatic pre and post-migration experiences require mental health to receive special attention as high rates of depression, generalized anxiety and post traumatic stress disorders, as well as some psychiatric disorders are common. Persistent oral and dental conditions from a lifetime without care tend to present unique challenges when serious problems are often not covered by their insurance but require immediate attention. Additionally, traditional gender roles that influence one's independence and empowerment are often challenged as many women may be required to be responsible for their own care and well being for the first time in their lives. Cultural and language barriers make the shock of navigating the U.S. healthcare system very difficult and overwhelming.

Additional Resources

U.N. High Commissioner for Refugees: www.unhcr.org/country/btn

World Health Organization: www.who.int/countries/btn



MAJOR HEALTH ISSUES EXPERIENCED BY BHUTANESE REFUGEES

- Vitamin A Deficiency
- Anemia
- Tuberculosis
- Night Blindness
- Dysentery
- Mental Health Disorders
- Japanese Encephalitis
- Malnutrition
- Malaria
- Respiratory
- Measles
- Dental Health
- Reproductive Health

International Rescue Committee
www.theIRC.org