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Bhutanese Health: Experiences of a Health Promoter

By Uma Devi Mishra

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Uma Devi Mishra Heartland Alliance Refugee Health Programs



Bhutan





Bhutan



Bhutan

Language: Dzongkha, Nepali, Khengkha, Sarchopkha and English

Religion: Buddhism, Hinduism and Christain

Ruled by a king named Jigme Khesar Namgyel wanchuk

Way of life: Farming

Festivals: Tshechu, Losar, Tihar and Dashain.

Population: Around 700,000

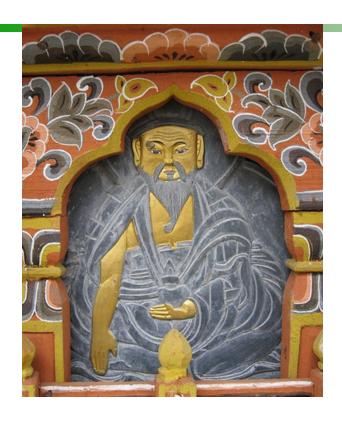
Over 100,000 are refugees.



Salient features

- Area: 18,147 sq mi
- Capital: Thimphu
- Population: 658000 (2007)
- Currency: Ngultrum
- Languages: Dzongkha (official), Nepali, Khengkha, Sarchopkha, English
- Religions: Buddhism, Hinduism
- Industries: Cement, wood products, beverages

History



- Early history is obscure
- A Tibetan monk,
 Shabdrung Nawang
 Namgyel, fought back
 Tibetans and introduced
 civic codes far back as
 1616
- Buddhism is the state religion
- Haven Wanachuk

History cont...

- Jigme Khesar Namgayl Wangchuk is the current king
- Nepali-speaking population migrated from Nepal through early 1930s (but Bhutan wants to believe this is not true!)
- The disease- and robber-infested south was allotted as the initial settlement areas



Ethnic Groups

- Ngalongs, Khengpas, Sharchops, Nepalese are the major groups in Bhutan
- Nepalese are primarily based in southern Bhutan, Sharchops in the east and Khengpas in the Central region



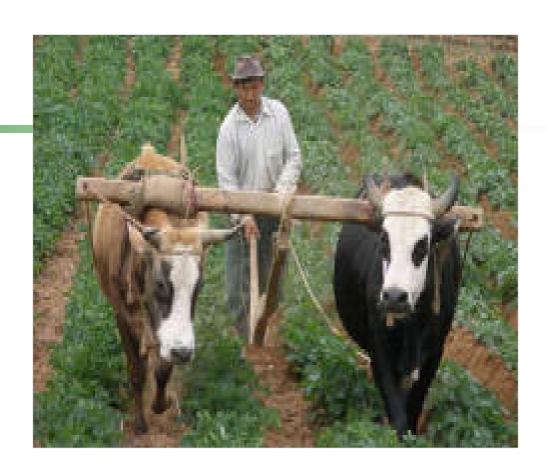


Population

- Conflicting figures appear on population
- Official number stands at around two million citizens
- Donor agencies agree the number is around 700,000
- Over 100,000 live in the refugee camps in Nepal

Way of life

- Subsistence farming predominant
- Livestock rearing

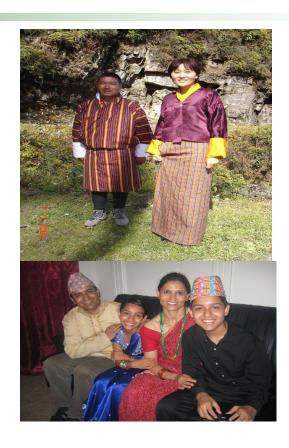


Culture and religion

- Buddhism as introduced by Shabdrung is the State religion
- Hinduism prevails, but the government does not always acknowledge it
- Christianity is gaining ground. Jesuit priests were the first to introduce modern education system in Bhutan
- Christianity is suppressed too
- State religious events get all the attention,

National Dress

- Male dress is called a Gho
- Female dress is called a Keera
- Ethnic Nepalese prefer to wear their own traditional dresses such as Nepali trousers and sari.



Traditional Bhutanese Dress



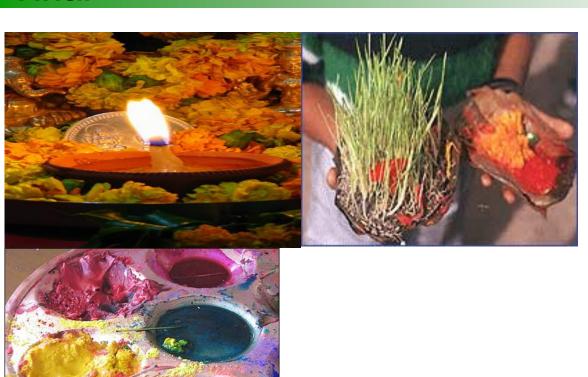


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Festivals

<u>Tihar</u> Dashain

Tsechu, Lhosar





Discriminatory policies

- Bhutan formulated discriminatory census policies in 1988
- Southern Bhutanese were asked to produce proof of stay prior to 1958 or else risk losing citizenship
- This policy left many without citizenship despite having lived in Bhutan for over seven decades
- Peaceful protests followed in early 1990s
- Royal Bhutan Army was sent to the villages
- Innocent people tortured, imprisoned

Discriminatory policies cont'd

- People were let out of prison only on condition of leaving the country
- Thousands fled the repression
- Landed in Nepal as refugees

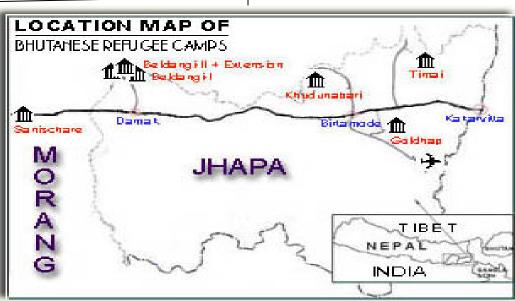
Refugee camps

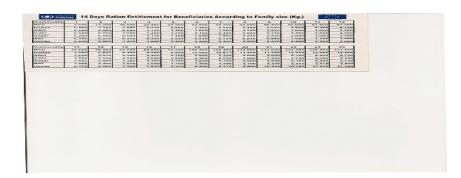
- 100k+ Refugees settled in two eastern districts in Nepal: Jhapa and Morang
- Seven (7)
 UNHCR administered
 refugee camps



Location







Life in the camps

- Congested accommodations
- Small huts allocated to each family
 - Lutheran World Service provides material support such as bamboo sticks and plastic roof for building huts
- Basic sanitation and health facilities
 - Save the Children UK
 - Association of Medical



Camp Life







Life in the camps...

- Limited ration/food allowance
 - Provided by WFP
- Aid-assisted schools in each camps
 - CARITAS Nepal provides education in the camps



Health in the Camps

- Basic sanitary conditions
- Pit latrines
- Malnutrition
- Limited awareness of personal health/hygiene
- •Skin diseases (e.g.,ringworm) and intestinal parasites problematic



Health continued...

- Blood pressure, Type 2 diabetes, elevated cholesterol are chronic health issues
- Dental hygiene, vision/eye-related issues are prevalent
- Awareness of reproductive health gaining ground

Health in Camps cont'd

- Limited access to medicines
- Drug resistance relatively high
- Gastroenterological problems (gastritis, GERD)
- Non-specific complaints (head, back aches)





Health Services in Camps

- Health workers (CMA, MA, MDs) could access medicine from the pharmacy
- Families often shared medicine with other sick adults or children
- Patients did not need appointments at health clinics and were free to see any doctor, no "primary physician" for the individual or family
- Health screening and basic medicine were free of charge

My Experiences in Camp

- Early 90's, it was common to see 10-20 bodies carried out of the camps for burial services each day
- Most of the deaths were due to dysentery, cholera, typhoid, malaria
- I had typhoid fever twice and lost 10-15 kg within
 4-5 months of being in the camp
- Limited number of trained health professionals in the camp in the beginning and health issues were increased each day

Education

- UNHCR helped establish refugee schools from preprimary till the tenth grade
- Formal education was aimed at children and adolescents
- The district education office monitored grade eight examinations
- Nepal's Ministry of Education conducted board exams for the tenth grade students
- Most adults had no exposure to any kind of education before coming to camps

Adult Education

- Informal classes were started for adults in Nepali
- Adult learners were not too enthusiastic about English classes, which were not popular
- In the light of male-dominated households, women's participation was minimal compared to that of men's
- Few students even managed to get into formal classes after successfully completing their 10th grade, which is considered a board exam

Training

- Vocational training offered in camps
 - BRAVVE A Bhutanese body aiding victims of violence runs vocational training programs such as sewing, basic computer training, embroidery painting, weaving, and gardening, hair-cutting in the camps



In Summary

- Refugees have been living in the camps for 17 years
- Resettlement in various countries is increasing
- Resettlement is a second chance for us; we really appreciate all the assistance given to us for rebuilding our lives.
 According to UNHCR, the United States, with 27,926, has accepted the majority of

Nepal to Chicago

- I arrived with my two children and husband on May 13th 2008, through World Relief Chicago.
- We were the second Bhutanese family to come to Chicago.
- Some of my challenges upon arrival were finding grocery stores and clinics for health screenings.
- My first job was in a hotel as a room attendant. I worked there for three months.



Heartland Alliance Refugee Health Programs

 Hired in November, 2008 as a health promoter/interpreter with five resettlement agencies and two health clinics

Role of a Health Promoter

- Give health education individually (home visit) or in a group
- Work together with resettlement agencies
- Work weekly with the refugee nutritionist
- Remind new families about the need to make and be on time for health appointments
- Remind them about medical provider instructions/orders
- Educate individuals on how to take their medicine appropriately

Barriers During Health Screening

- Culturally it is not appropriate to ask several health questions to the male doctors by female clients
- Refugee patients tell physicians they understand their medical diagnosis, but in reality, they relay on me to explain in a way they understand
- I often visit families at home to enforce the message of the doctor using pictures

Commonly Noted Health Issues in the U.S

- TB, high blood pressure, parasites
- Elevated cholesterol, gastritis, asthma, body pain
- Mental health?

Reccurrent Problems

- Awareness of general hygiene
- Making health appointments
- Value of time
- Using prescriptions as directed
- The need for health insurance and public aid for health services

Thank you!

I would like to thank the resettlement agency for giving opportunity to land In US for better future. Thanks Heartland Alliance for choosing me as Bhutanese health promoter and I am so happy with all staff.

Also I am enjoying my job.



Rice	1	2	3	4	5 1	9	7	8	9	10	11	12
	6.600	11.200	16.800	22,400	23.000	33.600	39.200	44.800	50,400	56,000	61.600	67,200
ulses	c.560	1.120	1 680	2.240	2.500	3.360	3.820	4.480	5.040	5.600	0.160	6.720
ws	0.280	0.560	0.840	1.120	1.400	1.680	1.960	2.240	2.520	2.800	3.080	3.360
7-011	0.350	0.700	1.050	1,400	1.750	2.100	2.450	2.800	3.150	3.500	3.850	4.200
ugar	0.280	0.560	0.840	1.120	1.400	1.680	1.560	2.240	2.520	2.800	3.080	3.360
alt	0.105	0.210	0.316	0.420	0.526	0.630	0.735	0.840	0.945	1.050	1.155	1.260
nilito	0.490	0.980	1.470	1.960	2.450	2.940	3.430	3.920	4.410	4.900	5.390	5.880
ommodity	13	14	15	16	17	18	19	20	21	22	23	24
ice	72.600	78.400	84.000	89.600	95.200	100.800	106.400	112.000	117.600	123.200	120.800	124,400
ulses	7.280	7.840	8.400	8,360	9.520	10.080	10.6-17	11.200	11.760	12.320	12.880	13.440
WG	3.640	3.920	4.200	4.480	4.760	5.040	5.320	5.600	5.880	6.160	6.440	.6.720
7-011	4.550	4.900	5.250	5.600	5.950	6.300	6.650	7.000	7.350	7.700	8.950	8.400
Sugar	2.640	3.920	4,200	., 4.480	4.760	5.040	5.320	5.600	5.880	6.160	6.440	6.720
Salt	1.385	1.470	1.575	1.630	1.786	1.880	1.005	2.100	2.206	2.310	2.416	2.520
Inilito	6.370	6.860	7.350	7.840	8.330	8.820	9.310	9.800	10.290	10.780	.11.270	11.760