The State of Healthcare for Bhutanese Refugees in South Philadelphia: Challenges & Progress

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Who the Bhutanese Refugees Are [1]
- Mid-19th Century: Nepalese farmers recruited to work farmlands of Southern Bhutan (called Lhotshampa, or “southerners”)
- Lhotshampa retained Nepali and Hindu customs, but lived in peace with the Drukpa (Buddhist elite) majority for many years
- 1989: “One Nation, One People” policy of ethnic cleansing: Drukpa culture imposed on all Bhutanese
- Torture, sexual assault and murder forced over 130,000 Lhotshampa to flee Bhutan
- These refugees spent decades of their lives in camps in Nepal (many still remain there)
- Over 68,000 have resettled to the USA, many coming to South Philadelphia [2]

Transition to Life in the USA [3]
- Refugees must be approved by UNHCR in order to be resettled in a third country [4]
- Resettlement Agencies (NSC, LCFS, HIAs) provide legal, social and health services to refugees in transition
- Immediately upon arrival: hot meal, money, transportation from airport, furnished housing
- First 10 days: social security card, welfare benefits, referrals for employment & ESL classes
- First 30 days: doctor visit, children enrolled in school
- Refugee Medical Assistance provides healthcare coverage for eight months
- After this time, refugees are often left uninsured and without many viable healthcare options.

Healthcare Challenges for Refugees
1. Lack of English proficiency
   - Difficulty with navigating public transportation
   - Trouble scheduling/cancelling appointments
   - Hard to utilize insurance services (such as requesting an interpreter)
2. Failure of healthcare offices to provide language services
   - Refugees cannot communicate at physician’s office
   - Effective delivery of healthcare impossible
3. Complexity of US healthcare system
   - Insured: confusing co-pays, referrals, networks, etc.
   - Uninsured: City health centers have 5 month backlog
   - ER if no other option — massive bills (unable to pay)
4. Medical Assistance Shortcomings
   - Must fit into category to qualify for Medical Assistance
   - Few options for chronic conditions if “not sick enough:” high blood pressure, eye care, hearing, etc.
5. Employment
   - Undesirable jobs (ex: meat-packing) provide low pay, no benefits, and few workers’ rights

Healthcare Resources for Refugees
1. Center for Refugee Health- Jefferson Family Medicine
   - Great for insured refugees (except Keystone)
   - Provides language services
2. Refugee Health Partners (RHP) - Houston Clinic
   - Once monthly, free acute care clinic for all comers
   - In-person interpreters
   - Advocacy, Pharmacy, & Education services
3. Existing Bhutanese Community
   - Supportive network shares language, culture, etc.

How to Improve Bhutanese Refugee Healthcare Moving Forward
1. Eliminate language barriers:
   - Report providers who fail to provide language services
   - ESL classes- continue & expand
2. Support all existing programs
3. Improve sustainability of current resources: funding for BAO-P

- New community organization started by Bhutanese refugees of South Philadelphia in January 2013
- Goal = organize and unify the Bhutanese refugee community, provide services to community members
- Community Center in South Philadelphia
- ESL classes, Citizenship classes, Nepali language classes, religious services, dance classes (Nepali and hip hop), elder meetings, youth empowerment, yoga, etc.
- RHP now operating new BAO-P Clinic once monthly, to provide healthcare for more Bhutanese community members
  - In-person Nepali interpreters; Advocacy, Pharmacy, & Education services; convenient location

References