

Bhutanese Community Consultation Report 2018

CONSULTATION / 25 MAY 2015
REPORT FINALISED / MARCH 2018



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Written and Published by the NSW Service for the Treatment and Rehabilitation of Torture and Trauma Survivors (STARTTS)

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Information included in this report is gathered from many sources and the best effort has been made to record the source. Effort has also been made to update and revise the report to ensure that information is accurate at time of printing.

Published information about specific cultural practices was difficult to locate. Thus, the sources of all unreferenced sections were STARTTS Bhutanese clients, Australian Bhutanese Association (ABA) and the wider Bhutanese Australian community. This highlights the importance of social and anthropological research into the Bhutanese community.

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BACKGROUND TO THE BHUTANESE COMMUNITY

Situated between the emerging superpowers of India and China, the isolated Buddhist kingdom of Bhutan, hailed by some as ‘the last Shangri-La’, has generated one of the highest numbers of refugees in the world in proportion to its population. Since 1990, according to UNHCR¹, over 107,000 southern Bhutanese of Nepalese ethnicity, one sixth of the Bhutanese population, have been made refugees. They have been forcibly evicted, forced to flee persecution and repression, or expelled after being coerced into signing “voluntary” emigration forms. 25 years later and there are still approximately 18 thousand refugees living in refugee camps in Nepal waiting for re-settlement in other countries².

According to Minority Rights Watch, the name ‘Bhutan’ appears to have been derived from the Sanskrit phraseology ‘Bhu-Uttan’ meaning ‘High Land’³; Bhutan’s environment and geography confirm the reasons for such a name. Bhutan is small, mountainous and land-locked; a Buddhist kingdom located in the southern slopes of the eastern Himalayas, squeezed between India and China. Bhutan borders the Indian states of Arunachal Pradesh to the east, Assam and West Bengal to the south, and Sikkim to the south-west. To the north, Bhutan borders Tibet, ruled by China. The whole of the State is mountainous with the exception of a 13-16 km wide strip of subtropical plains in the south. Thimphu is the largest city of Bhutan and also its capital.

DEMOGRAPHICS

Population

Historically, sources have differed on Bhutanese population statistics. Official Bhutanese census figures are often seen as being inaccurate, for a variety of reasons. Official statistics state a population of **782,566**⁴ Bhutanese nationals.

Other reputable organisations state recent population estimates of **774,830**⁵ and **750,125**⁶.

Main languages

Sharchhopka 28%, Dzongkha (official) 24%, Lhotshamkha (Nepali) 22%, other 26% (includes local dialects and foreign languages)⁷

Main religions

Buddhism (official) – 74.7%, Hinduism – 22.6%, Other – 2.7%⁸

1 UNHCR (2015), *Resettlement of Bhutanese refugees surpasses 100,000 mark*. Available at <http://www.unhcr.org/news/latest/2015/11/564dded46/resettlement-bhutanese-refugees-surpasses-100000-mark.html>
2 Ibid.

3 Minority Rights Group International, *Bhutan*. Available at: <http://minorityrights.org/country/bhutan/>

4 Bhutan National Statistics Bureau, <http://www.nsb.gov.bt/main/main.php>

5 The World Bank, *Data: Bhutan*. Available at <http://data.worldbank.org/country/bhutan>

6 CIA World Factbook, *Bhutan*. Available at <https://www.cia.gov/library/publications/the-world-factbook/geos/bt.html>

7 CIA World Factbook (2005 estimate), *Bhutan*. Available at <https://www.cia.gov/library/publications/the-world-factbook/geos/bt.html>

8 Pew Research Center, (2010), *Global Religious Landscape 2010*. Available at <http://www.pewforum.org/files/2012/12/globalReligion-tables.pdf>

TIBET



Ethnic groups

Four main ethnic groups exist in Bhutan – Ngalong, Sarchop, Kheng and Nepali-speaking Lhotshampa.

Ngalongs, Sarchops and Khengs are all adherents to the Drukpa Kagyu school of Mahayana Buddhism, although each has a distinct identity as well. Ngalongs are people of western Bhutan and of Tibetan origin; they form the ruling and social elite. Dzongkha, Bhutan's national language, is derived from Ngalong speech and has been imposed on the entire country since 1988.

Sarchops are possibly the earliest settlers of Bhutan but they have their ethnic roots in Arunachal Pradesh and are of Indo-Mongoloid rather than Tibetan descent. Khengs are inhabitants of central Bhutan and may be indigenous people of Bhutan. All three groups are culturally integrated to some extent. Together they make up approximately 50% of Bhutan's population⁹.

Numerous other ethnic groups are present in Bhutan on a much smaller scale, including Adivasi, Birmi, Brokpa, Doya, Lepcha, Tibetan and Toktop. These smaller groups, though adding great diversity to Bhutan's ethnic make-up, represent approximately 10-15 per cent of the total population.

Nepali-speakers are a mostly Hindu ethnic group, predominantly based in the south of Bhutan and called Lhotshampa (literally 'southern border people'). Although no reliable figures are available, it is estimated by the CIA¹⁰ that prior to the eviction processes Nepali-speaking people comprised at least a third of the population of Bhutan. Despite Nepali speakers being such a significant proportion of the population, Nepali-speaking Bhutanese have been the victims of persecution in recent times.

BACKGROUND AND HISTORY OF THE REFUGEE CRISIS

Bhutan is a constitutional monarchy ruled by a hereditary monarch, His Majesty Jigme Khesar Namgyel Wangchuck. The King is both the Head of State and Head of Government, although since 1998 many of the powers have been transferred to a Council of Ministers. Bhutan is inhabited by four main ethnic groups (see above) including ethnic Nepalese Lhotshampas. They are mainly Hindus, and comprise immigrants of more recent origin - late 19th century onwards. According to the Canadian Bhutanese Society, during the late 19th Century contractors working for the Bhutanese government began to organise the settlement of Nepali-speaking people in uninhabited areas of southern Bhutan, in order to open those areas up for cultivation. The south soon became the country's main supplier of food. By 1930, according to British colonial officials, much of the south was under cultivation by a population of Nepali origin that amounted to some 60,000 people¹¹.

⁹ CIA World Factbook, *Bhutan*. Available at <https://www.cia.gov/library/publications/the-world-factbook/geos/bt.html>

¹⁰ CIA World Factbook, *Bhutan*. Available at <https://www.cia.gov/library/publications/the-world-factbook/geos/bt.html>

¹¹ Canadian Bhutanese Society (1999). Available at <http://www.cbsalberta.org/bhutan-overview/bhutanese-refugee>

With an annual growth rate of between 2 and 3% and continued immigration up to 1958, this population grew to its 1988 proportions. Many refugees claim that their ancestors came to Bhutan from eastern Nepal between 1890 and 1920, and many possess documents that support this claim. In 1958, Bhutan passed its first citizenship act and the entire Southern Bhutanese population, which until then had very little security in Bhutan, was granted full citizenship. Nationwide programs of development and modernisation commenced in 1961, and the economic importance of the south continued to grow as major hydro-electric power projects were established. However, southerners did not own land or settle permanently to the north, and there was very little interaction between the northern and southern populations until the 1960s. During the 1960s and 1970s, with the development of education, social services and the economy, many southern Bhutanese rose to occupy influential positions in the bureaucracy¹².

The roots of the crisis in southern Bhutan lie in the leadership's concern over the growing southern Bhutanese population, both as a percentage and in terms of real numbers. Perceiving the high numbers of ethnic Nepalis as a threat, a policy was initiated in the mid-1980s with the eventual goal of balancing the demographic pattern. The idea was to set right a perceived historical error of judgement – the grant of nationality in 1958 to ethnic Nepalis settled in the south¹³. The grant of citizenship in 1958 was by royal decree. The new citizens were not granted papers. There was no individual certification of grant of nationality because neither the government nor the people considered it necessary at the time.

In 1985, the government enacted a new Citizenship Act and began a census - each person was expected to prove he/she was domiciled in Bhutan in 1958 to qualify as a Bhutanese by registration according to the 1985 Citizenship Act. The government started with a fresh slate; the onus was on the individual to prove his or her credentials. Officials demanded tax receipts for exactly the year 1958, not even ones issued earlier would do ostensibly because a person may have left the country before 1958 and returned only after the cut-off year.¹⁴ In many cases, persons were unable to produce the documentation necessary, such as land tax receipts from 1958, to show residency nearly 30 years before.

In conjunction, the government began aggressive efforts to assert a national culture, to tighten control over southern regions, to control illegal immigration, to expel ethnic Nepalese, and to promote national integration. Beginning in 1989, more discriminatory measures were introduced, aimed at shaping a new national identity, known as Drukpa. Drukpa was based on 'One Nation, One People', which was used as a slogan to define the national identity. The traditions and customs of Ngalongs were imposed on the rest of the country. Measures included the adoption of western Bhutanese dress as the national dress which was to be worn at all times when anyone ventured out of their homes, and the end to instruction of Nepali as a second language (English is the medium of instruction in all schools¹⁵).

12 Canadian Bhutanese Society, (1999) Available at <http://www.cbsalberta.org/bhutan-overview/bhutanese-refugee>

13 Mittra, S. & Kumar, B. (eds.) (2004), *Encyclopaedia of Women in South Asia: Bhutan*, Gyan Publishing House.

14 Ibid.

15 Ibid.

During this period, citizenship became a highly contentious issue. Requirements for citizenship were first formalised in the Citizenship Law of 1958, which granted citizenship to all adults who owned land and had lived in the country for at least 10 years. However, in 1985 the new citizenship law significantly tightened requirements for citizenship and resulted in the denaturalisation of many ethnic Nepalese. The Marriage Act of 1977 had prescribed that only children born of Bhutanese fathers, not either spouse as before, would be considered citizens. The 1985 Citizenship Act tightened this requirement further and required both parents to be Bhutanese for citizenship by birth. Applied retrospectively and in tandem with the 1958 tax receipt stipulation, the government could declare tens of thousands of legal southern Bhutanese as non-nationals¹⁶. A person born in Bhutan in 1959 suddenly became an illegal resident during the 1988 census when either parent could not prove his/her presence in the country in 1958, the cut-off year.

Attempts by southern Bhutanese to persuade the government to review the census implementation were unsuccessful. Youth became agitated and began to express dissent. This gave the government an excuse to become more aggressive and overtly discriminatory. The 'One Nation, One People' policy was adopted. A green-belt plan was unveiled that threatened to make a third of all southern Bhutanese homeless. When the people reacted by rising up in mass protests all over southern Bhutan, the government began a massive crackdown. Thousands were arrested and among them hundreds detained and tortured for years without trial¹⁷.

The 1985 Citizenship Act also provides for the revocation of the citizenship of any naturalized citizen who "has shown by act or speech to be disloyal in any manner whatsoever to the King, country, and people of Bhutan." In even more draconian measures, the government declared that anyone who had left Bhutan to assist friends and family in their exodus would also have their citizenship revoked and "...such people's family members living in the same household will also be held fully responsible and forfeit their citizenship."

Outraged by what they saw as a campaign of repression, ethnic Nepalese mounted a series of demonstrations, sometimes violent, in September 1990. The protests were spearheaded by the newly formed Bhutan People's Party (BPP), which demanded full citizenship rights for ethnic Nepalese, the teaching of Nepali language in the south, and democratic reforms. Characterising the BPP as a "terrorist" movement, the authorities cracked down on its activities and ordered the closure of schools, clinics, and development programs in southern Bhutan. Many schools in the south were reportedly turned into Army barracks. There were credible reports that many ethnic Nepalese activists were beaten and tortured while in custody, and that security forces committed acts of rape. There were also credible reports that militants, including BPP members, attacked and killed census officers and other officials, and engaged in bombings. Local officials took advantage of the climate of repression to coerce ethnic Nepalese to sell their land below its fair value and to emigrate¹⁸.

¹⁶ No author, (2002), *Bhutan: USA International Business Publications*, Int'l Business Publications.

¹⁷ Mitra, S. & Kumar, B. (eds.) (2004), *Encyclopaedia of Women in South Asia: Bhutan*, Gyan Publishing House.

¹⁸ Mitra, S. & Kumar, B. (eds.) (2004), *Encyclopaedia of Women in South Asia: Bhutan*, Gyan Publishing House.

EXODUS

Starting from a small group of dissidents who escaped the crackdown launched by the authorities, the refugee community grew as security forces plundered and terrorised villagers in the south following the protest demonstrations of September-October 1990. The exodus peaked during the first half of 1992 when the government initiated a campaign of systematic expulsion by forcing people to sign "voluntary" emigration forms before deporting them¹⁹. The flood of refugees eventually stopped, but not before a hundred thousand had been forced to leave Bhutan. Just as people had suddenly mysteriously "volunteered" to leave in droves, there were no more "emigrants" - the government had met its target of reducing its southern population by a third.

According to Amnesty International, entire villages sometimes were evicted en masse in retaliation for an attack on a local government official, forcibly signing "voluntary migration forms" as they left under threat of torture and imprisonment²⁰. By August 1991, 2,500 refugees were already camped illegally in Nepal, with a steady stream still coming from Bhutan. The UNHCR began providing food and shelter in September of that year, and by year's end, there were 6,000 refugees in Nepal. The number swelled to approximately 86,000 by June 1993²¹, when the UNHCR began individual screening of refugees. The flow slowed considerably thereafter; there were no new refugee arrivals from Bhutan to the camps during the year. Much of the increase since 1993 is the result of births to residents of the camps. An additional 15,000 refugees, according to UNHCR estimates, are living outside the camps in Nepal and India²².

Since 1994 the governments of Nepal and Bhutan have met sixteen times at ministerial level to discuss a resolution to the crisis, with no concrete results. Bhutan has resisted Nepal's calls for international engagement in the talks. India has maintained throughout that this is a bi-lateral issue between the two governments²³.

In 1998 the Bhutanese government began a process of resettling landless people from northern Bhutan onto the lands owned and previously farmed by the refugees. In the same year, 219 relatives of so-called 'anti-nationals' (refugee activists) were dismissed from government service. Those Southern Bhutanese remaining in Bhutan have continued to face severe and sustained discrimination amounting to persecution²⁴.

In 2000, under increasing pressure from the international community to find a solution, Bhutan and Nepal agreed to commence a pilot screening of the refugees in one of the camps, to establish their status. In 2001, the 12,173 inhabitants of Khudunabari camp (about one eighth of the total population in the refugee camps) were screened by the joint Bhutanese-Nepalese verification team²⁵. No monitoring by UNHCR or any independent

¹⁹ Ibid.

²⁰ Amnesty International (1994), *Bhutan: Forcible exile*. Available at <https://www.amnesty.org/download/Documents/184000/asa140041994en.pdf>

²¹ Minorities at Risk Project (2004), *Chronology for Lhotshampas in Bhutan*. Available at <http://www.refworld.org/docid/469f386a1e.html>

²² No author, (2012), *Bhutan Country Study Guide Volume 1 Strategic Information and Developments*, IBP Inc.

²³ *The Politics of Bhutan: Change in Continuity*, Thierry Mathou http://himalaya.socanth.cam.ac.uk/collections/journals/jbs/pdf/JBS_02_02_09.pdf

²⁴ Ibid.

²⁵ Human Rights Watch (2007), *Last Hope: The Need for Durable Solutions for Bhutanese Refugees in Nepal and India*. Available at <https://www.hrw.org/report/2007/05/16/last-hope/need-durable-solutions-bhutanese-refugees-nepal-and-india>

third party was allowed. The results of the process were announced in late 2003: 75% of those screened were found to be eligible to return to Bhutan; however the return was bound by special conditions such as re-application for the citizenship after spending 2 years in the closed camp in Bhutan. The refugees expressed their frustration and in the ensuing scuffle, Bhutanese members of the verification team were injured. They returned to Bhutan and the process leading to any repatriation has since stalled.

In 2005 at a press conference in New Delhi, the Bhutanese king declared that many of those who departed the country in 1991-92 were Nepalese or Indian citizens who came to the country after the enactment of the 1958 Citizenship law but were not detected until a census in 1988. Additionally, the Bhutanese Government also claimed that many persons registered in the camps as refugees may never have resided in the country. According to the UNHCR, the overwhelming majority of refugees who have entered the camps since screening began in June 1993 have documentary proof of Bhutanese nationality²⁶. However, the Government maintained that many ethnic Nepalese left the country voluntarily, thus renouncing their Bhutanese citizenship.

In February 2005 the Nepalese government declared a state of emergency in regards to the refugee situation. In 2007 the UNHCR launched one of its largest and most successful resettlement programmes. Since 2007 more than 100,000 refugees from southern Bhutan have been allowed to restart their lives in third countries – predominantly in US, but also in Canada, Australia, New Zealand, Norway, Denmark, the Netherlands and the UK²⁷.

LIFE IN REFUGEE CAMPS IN NEPAL

There were 7 refugee camps in south-eastern Nepal: Sanischare, Beldangi I, II, II Ext, Khudunabari, Timai and Goldhap with the total population around 108 000²⁸. At the end of 2015, according to UNHCR, 84,800 Bhutanese refugees have been resettled in third countries. Just two camps remain, housing approximately 18,000 refugees. UNHCR estimates that 10-12,000 of those refugees will remain in the camps, with resettlement solutions continuing for the remainder²⁹.

According to a Department of Immigration and Citizenship (DIAC) report the camps are clean and presentable. People live in basic huts with earth floors or plastic tents. In general, the families are large and so there is no privacy in the huts. Sanitation is adequate and a regular supply of drinking water maintained. The camps are fringed by banana trees. Primary food supplies include rice, pulses, vegetable oil, sugar, salt and vegetables³⁰. Families also grow vegetables to supplement their food rations and use solar cookers. Spicy chillies are blended with vegetables to flavour much of the cuisine. Chilli and curry dishes are very common. Diet is influenced by religion. Since the Bhutanese refugees are Hindus they don't eat beef and in many cases are vegetarian.

26 US Department of State (2002), Country Reports on Human Rights Practices: Bhutan. Available at <http://www.state.gov/j/drl/rls/hrrpt/2001/sa/8228.htm>

27 UNHCR (2015), *Resettlement of Bhutanese refugees surpasses 100,000 mark*. Available at <http://www.unhcr.org/news/latest/2015/11/564dded46/resettlement-bhutanese-refugees-surpasses-100000-mark.html>

28 Ibid.

29 Ibid.

30 Department of Immigration and Citizenship (2007), *Bhutanese Community Profile*. Available at https://www.dss.gov.au/sites/default/files/documents/11_2013/community-profile-bhutan.pdf

There are schools in the camps and therefore access to education is good. Some students go outside the camps to attend school – depending on their parents' ability to pay school fees in private Nepalese or Indian schools. Most children aged 5 to 17 attend refugee managed primary and secondary schools. Nepali and English are spoken languages in class.

All camps offer some skills development training for women including cotton weaving, tailoring and reading centres. Many of the camps have a Bhutanese Centre for non-formal education, particularly for language classes in Nepali, English and Dzongkha. There is also some vocational training for vulnerable groups.

All of the camps have primary healthcare centres but hospital facilities are limited with visiting doctors. More serious cases are referred to hospitals outside the camps. A UNHCR supported hospital provides voluntary counselling and testing services in all the camps. Intensive care is given to elderly tuberculosis patients and malnourished children under 5. Clinical services are in place to educate residents about HIV and AIDS and sexually transmitted diseases.

RELIGIOUS BELIEFS

The majority of Nepalese Bhutanese are Hindus with some minorities practising Buddhism or Christianity. Religion is interwoven into daily life, and distinctions between the sacred and the secular are less defined than in many Western cultures. Prayer and performing religious rituals are important parts of daily life. Daily worship (puja) is usually performed every morning after bathing but prior to eating and it is usually done in home shrines³¹. Hindu religious values, such as a belief that the cause and effect chain of karma shapes destinies, unite the majority of Nepalese Bhutanese. Because the majority of the population adheres to Hinduism, they accept their place within the caste system. The person's family name often indicates the caste to which he or she belongs. Traditionally, the caste system created a social hierarchy that dictated the person's place in society, his/her choice of spouse, as well as other social relationships. Caste also influenced choice of profession and role in society. For example the religious teachers and leaders are members of the Brahmin caste and have many responsibilities in the community, including overseeing ceremonies, weddings, baby-naming, death rituals, teaching the next generation of leaders, and providing regular prayers to members of the community.

With the speed of modernisation, the Nepalese Bhutanese society has been growing more open and liberal; among those living in Bhutan, the remnants of the caste system are now confined mostly to the older generation. In the refugee camps in Nepal, and now also in Australia, caste gradually stopped being an 'issue' for some people, mostly younger generations. However among others, an active awareness of caste still has social and behavioural consequences.

INTERPERSONAL RELATIONSHIPS

The Bhutanese community is very tightly knit and people remain close throughout the life cycle. Family represents the highest priority with the average family size around 3-4

³¹ Michaels, Axel (2004). *Hinduism: Past and Present*. Princeton: Princeton University Press.

children. Living arrangements typically include many members of an extended family, often up to 3 generations, where the younger generation typically takes responsibility of caring for the elderly. Within the family, there are strong bonds of love and obligation. A daughter-in-law is obligated to care for her in-laws (regardless of their age or state of health) from the moment she joins the family. This tradition is fading with the transition to life in the refugee camps, and now with the new life in Australia; the demands of work on the younger generation make it difficult to care for elders in traditional ways. However, respect and courtesy will still define this relationship.

The elders in the community command deep respect and affection. Very often family issues, health problems, and financial issues are first discussed with the elders in the family. The elders, in turn, may decide to involve additional community elders to deal with the situation and/or find solutions to the problems. The community is generally patriarchal in structure; sons are expected to take care of their parents and provide for them financially and emotionally.

The interpersonal relationship and the close-knit community structure has a significant impact in keeping the community healthy, including minimising mental health issues. It is also mutually beneficial with the seniors receiving the care they expect as is traditionally practiced while they remain a source of guidance and moral support for the rest of the family, and the community more broadly. This will be quite challenging for the first generation when they move towards retirement. They will have similar expectations, but their children growing up in Australia may adopt a more individualistic approach. For instance, they may be less inclined to support their parents or have parents live at home in an extended family structure.

The community's flagship program is a monthly community gathering (it is called a gathering and not a meeting to stress its informal nature where everyone is welcome). It involves a balanced agenda which includes information sharing, informal catch up, entertainment and other activities as needed. This is an example of how the Australian Bhutanese Association (ABA) Sydney is proactively addressing potential issues including isolation and mental health.

CULTURAL PRACTICES

MARRIAGE

Traditionally, marriages took place between members of the same caste and were arranged by the parents. They often involved children as young as 7 or 8. The weddings were great celebrations with families spending up to a month preparing food and drink, including rice, lentils, sweet bread, and a special kind of pickle. The wedding celebration occurred at the home of the bride and included prayers and rituals led by priests. The bridegroom brought clothes, jewellery, and a bead necklace to the bride's home, signifying her married status. After the wedding, the bride travelled to the bridegroom's home for a few days. Then she returned home until she reached the age of 15 or 16, at which time she moved permanently into the home of her parents in law.

There have been many changes in the Nepalese Bhutanese community especially since modern development was introduced in Bhutan in the 1960s. The tradition of arranged child marriage has faded due to changing social norms, improved education for girls

and young women, Western influences, displacement and refugee status³². Many young people are choosing their own partners, and improved secondary and tertiary education, which was available to the refugees in the Nepal refugee camps, has resulted in career and personal choices that are quite different from those available in traditional Bhutanese society. These changes impact on the family dynamics, including gender roles and the complex systems of duties and responsibilities not only within the core family unit but also extended family ties.

GENDER ROLES

Traditionally, women participate in equal measure to men in the hard labour associated with farming and other work outside of the home. In addition, women are the primary caregivers for the children in the family and are expected to do virtually all the housework and cooking. An exception is the four-day period during each month, at the time of the woman's menses, when she is expected to rest. Because she is considered unclean during this time, she may not touch, prepare, or serve any food or drink, and there is a widely held belief that any fruit tree touched by a menstruating woman will become sick and cease to bear good fruit. During this time, other women in the household may take over her work, men may cook and clean, or, where economically feasible, the family may choose to pay a woman from outside the family to prepare meals and help keep the house in order.

In Australia Bhutanese women and men are adapting to the new way of life, with women and men sharing family and household responsibilities and women studying and working outside the home.

CHILDREN

After giving birth, a new mother traditionally rests for periods ranging from a couple of weeks to a few months depending on family situation. During this time, she will stay with the baby and nurse the baby, but she does not perform any work or prepare any food. In the Hindu tradition, on the eleventh day the child is named, and a purification ritual, which consists of sprinkling a holy mixture of cow's urine, yoghurt, milk, a seed named til, and grass on the mother and her home, will be performed by a priest. After this time, the mother will return to work. Infants are typically breastfed exclusively for the first six months of their life. At six months, solid food (usually rice) is started, a transition called pasni. When babies begin crawling, they are massaged with mustard oil and are placed in the sun to give them strength. Children are generally taught by "guidance" – explanation and example – and are rarely subjected to physical punishment. At the age of 7 for girls and 8 or 9 for boys, the formal transition to adulthood occurs. Girls are given their first sari before puberty and take increased responsibility for household work. Boys, particularly those in higher castes, receive a symbolic holy thread from a priest in their community. At that time, the priest formalises the teaching a boy has received from his parents: he tells the boy never to tell lies, to be studious, never to steal, and to respect his elders. The receipt of the holy thread and teachings has traditionally been taken very seriously and marks the transition from boyhood to manhood. Grandparents and older children may increasingly take on responsibilities of childcare while the mother and father work outside the home.

32 Maxym, M. (2010) *Nepali-Speaking Bhutanese (Lhotsampa) Cultural Profile*. Available at: <https://ethnomed.org/culture/nepali-speaking-bhutanese-lhotsampa/nepali-speaking-bhutanese-lhotsampa-cultural-profile>

NUTRITION AND FOOD

Many Bhutanese, like most other Hindus, were traditionally vegetarians but this is no longer the case. Staple foods include rice and lentils, known as dal. Meals are generally eaten together as a family and they are offered to everyone who happens to be in the house, including friends and visitors. The kitchen of the home is traditionally considered a sacred space and should not be entered without permission. The caste system is at the root of this belief, intended to keep persons of lower caste from entering.

DEATH AND RELATED PRACTICES

Death and the grieving process are particularly significant for the Bhutanese community. As Hinduism preaches the concept of reincarnation, Bhutanese believe that their soul will come back in another form based on the karma a person accumulated during his / her life. At the time of death, members of the deceased person's immediate family spend thirteen days in formal mourning. This can be challenging for those who are employed and do not have bereavement leave. The deceased person's sons traditionally isolate themselves in one room of the house and are not allowed to mingle with other people. They will refrain from eating salt or meat, and generally will limit their intake to one meal of plain rice per day. The women in the immediate family will engage in similar rituals, but they must be separated from the men. The ritual mourning activities are believed to assist in the purification of the deceased family member's soul, allowing a smooth transition to heaven, where he or she will await reincarnation. Bhutanese believe that if mourning is not performed properly, there is a risk that the deceased person's spirit will not be able to make the transition to the afterlife and will remain on earth in the form of a ghost to disturb the living.

HEALTH

The more educated and/or higher socioeconomic status members of the Bhutanese community tend to prefer Western medicine to traditional, but this preference is not universal, and it is not uncommon to try one pathway first and then the other if the first does not achieve the desired results. The practice of using home remedies to deal with illness is very common. Many times people will try one or two home remedies and seek external medical help only if their symptoms worsen or do not resolve. Examples of common home remedies include basil for the treatment of cough, colds, and certain kinds of pain; garlic, turmeric, ginger, and cardamom for stomach pains; and heated mustard oil for massages to relieve muscle pain in the elderly. Traditional healers or shamans are called dhami-jakhri. Sickness is generally seen as an imbalance of passions or a result of the influence of evil spirits, and the dhami-jakhri focus their attention and prescriptions on re-establishing balance to bring about cure. Hindus who are ill may also seek the assistance of a priest to perform a cleansing ritual called a puja.

BHUTANESE COMMUNITY IN NSW

The Bhutanese resettlement program started in 2007 when a number of Bhutanese refugees started settling in the US. Since then other governments including Australia have started resettling Bhutanese refugees. During 2008-09, 616 visas were granted to Bhutanese in line with the Australian government's commitment, announced in November 2008, to resettle up to 5,000 Bhutanese refugees from Nepal over coming years. By early 2018, over 5,000 Bhutanese have been resettled across the country including Sydney, Albury, Wodonga, Melbourne, Adelaide, Hobart, Launceston, Brisbane, Cairns, Perth and Darwin.

State of residence Arrival Dates: from 01 Jan 1991 to 31 Dec 2017

South Australia	Tasmania	New South Wales	Queensland	Victoria	Western Australia	Australian Capital Territory	Northern Territory	Invalid/Unknown	Total Arrivals
1551	930	680	650	565	410	293	43	3	5125

According to the settlement database of the Department of Immigration, 95% of the Arrivals to Australia from Bhutan speak the Nepali language whilst only 2% speak the Dzongkha language and less than 1% speak the Hindi language.

99% of the community born in Bhutan has arrived in Australia since 2008.

According to the Australian Bureau of Statistics (2011), in NSW Blacktown has the largest number of migrants from Bhutan.

Main Language Arrival Dates: from 01 Jan 1991 to 31 Dec 2017

Nepali	Dzongkha	Hindi	English	OTHER	Unknown	Total
4113	422	48	34	46	460	5125

Bhutanese refugees predominantly practise the Hindu religion. After experiences of strict restrictions in Bhutan they are very concerned about having the right to freely practice their religion. In regards to family set-up, the extended family is very important. Traditionally marriages are arranged on the basis of family and ethnic ties although it is now more common practice to choose a partner based on mutual attraction. The newly married couple would live with the parents who had the greatest need for help³³.

The refugees coming out of the camps in Nepal to start a new life in Australia are a diverse group of people. Many have spent 20 years in the camps with limited educational and work opportunities so they may lack work skills and experience. In many cases their English is very limited. Some refugees have experienced torture and trauma in Bhutan or violent and traumatic events during their lives in refugee camps and thus may present with symptoms of post traumatic stress disorder (PTSD), depression, anxiety or other mental and physical illnesses.

Feelings of displacement, confusion, grief, loneliness and lack of control over life choices may be present. Additionally, a life lived in the limbo of refugee camps with an uncertain future and very limited resources puts great strain on relationships – some families may struggle with domestic violence and drug and alcohol issues. On the other hand, these

³³ Personal reflection - STARTTS Counsellor allocated to Bhutanese Community

challenges have taught many of them resilience and the ability to find inner resources even in the most difficult circumstances. This is often reflected in the counselling room – not only pain but also the ability to keep going, to not give up, to search and to heal.³⁴

COMMUNITY ASSETS

The Bhutanese Community in Sydney decided early on to work from a strengths-based approach incorporating community assets, rather than from a deficit model. They made this choice to ensure that new arrivals can build upon their strengths, the community can increase its own ability to meet the needs that service providers can't always meet, and to actively engage its members in becoming fully engaged with the Australian system as a citizen rather than as a service recipient.

The community acknowledges that there are some areas where they may need support from time to time and seek to work with service providers and other relevant organisations from a partnership and mutual benefit framework.

Below are the results of a recent asset mapping activity undertaken by the community highlighting their strengths.

Relilience	Perseverance	Hope and aspiration
Skills that people bring with them		
Volunteering	Teaching	Community work
	Cooking	Painting or drawing
	Child care	Healthcare
	Carpentry	Masonry
	Farming	
Communication skills	Organisatoin skills	Entrepreneurial skills

Source: Dhungel, O; Strength based approach to refugee settlement and community development.

What is going well in the community?³⁵

The community is adapting and integrating well in the new environment

- Collaborative effort in everything we do as a community. Regular community get togethers and community support for each other
- Community-run English classes to assist those who need additional support – Flagship program
- Effectively run community programs such as regular cultural and religious activities, Annual Bhutanese Day, Annual Sports Day, Art classes and other activities
- Participation in wider community activities such as Harmony Day, Seniors Week, International Women's day
- Most youth engaged in education or work
- Youth activities including cultural programs and sports helping to keep youth positively engaged
- Socialisation groups and activities for elders

³⁴ Ibid.

³⁵ Dhungel, O; Survey of the Bhutanese community in Sydney, September 2013

INTERPRETATION OF MENTAL HEALTH AND ITS IMPLICATIONS IN CULTURALLY SENSITIVE CLINICAL PRACTICE³⁶

According to the Nepali Ethnopsychological model of the Self, the Person (*maanchhe*) is composed of the four parts: the physical body (*jiu* or *saarir*), the heart-mind (*man*), the brain-mind (*dimaag*), and the spirit (*saato*). To understand the interaction between the individual parts of the personal self is crucial for healing and mental health treatment.

In a brief overview: The *physical body's* sickness and pain lead to worries in the heart-mind and consequently worries in the heart-mind lead to bodily pain, headaches, stomach upset (*gyastrik*), numbness and tingling sensations (*jham-jham*). As a result, weak physical body and weak heart-mind lead to weak brain-mind. The *heart-mind* is the container of memory and emotions. Traumatic memories and intrusions are seen as wounds or sores on the heart-mind (*manko gaau*), while worries and anxiety are understood as thoughts playing in the heart-mind (*manmaa kura khelne*). The *brain-mind* is the organ of cognition, attention and social regulation. When working properly, it is monitoring the heart-mind by inhibiting socially inappropriate desires and actions. When not working properly, it becomes overpowered by intense emotions leading to mental illness. The most feared consequence of the impaired brain-mind / heart-mind functioning is the loss of the spirit (*saato*). The *spirit* is crucial for vitality and health and it is closely connected to the world of ancestors. Trauma, sudden fright or curse can 'dislodge' the spirit (*saato jaane*). As a result, the person becomes extremely weak and vulnerable to supernatural and physical maladies, leading to development of life threatening diseases, including psychosis and severe mental illness.

The personal self is part of the *social self* (*ijjat*) that operates interdependently on the family (*pariwaar*), which includes the extended family, and the spiritual world, especially connections with one's ancestral deities (*kul devta*). The social self is maintained by good functioning of the brain-mind. Dysfunctional brain-mind causes loss of the social self, leading to marginalisation and social death (*bejjat*) of the person.

In summary, sickness (both physical and mental) is seen as an imbalance or inadequate functioning of the components of the self and as a result of external attacks, such as evil spirits. Traditionally Bhutanese would seek help from shamanic healers (*dhami-jhankri*) who perform rituals to call back the lost spirit, to clean it from its wrong associations, to heal the physical body, to calm the heart-mind emotions and to stimulate the brain-mind functions. Their practices and prescriptions are aimed at re-establishing balance of the compartments of self in order to bring about cure.

Incorporating the concept of sickness from the Nepali ethnopsychology model into the modern psychotherapy modalities creates a culturally accepted psychotherapy practice.

Within that context, both Bhutanese client and clinician translate traditional and western models of healing into mutually acceptable language. This provides a culturally meaningful explanation for the suffering, sets the content of therapy and the outcome criteria, and also creates the hopeful expectancy in the client that the relationship with the healer/ psychotherapist will bring about change.

36 Kohrt B., Maharjan S., Timsina D. and Griffith J. (2012) *Applying Nepali ethnopsychology to psychotherapy for the treatment of mental illness and prevention of suicide among Bhutanese refugees*. Available: <http://onlinelibrary.wiley.com/doi/10.1111/j.2153-9588.2012.01094.x/full> Accessed 19/03/2015

ADAPTING WITH THE SHIFT FROM COMMUNITY CARE TO SERVICE ECONOMY – MOVING FROM COLLECTIVE TO INDIVIDUALISM³⁷

For the Bhutanese community, as with other newly arrived refugees and migrants who generally come from a community based support system, the availability of a wide range of ‘services’ and ‘service providers’ can be overwhelming. Services and professionals are available to look after various needs of the new arrivals under the humanitarian program. People are often referred to service providers irrespective of their needs. They are then referred to one or more of the services offered by the service provider and the institutionalisation begins by being referred to additional services. It is the institutionalisation of issues that could otherwise have been dealt with within communities. This would also free up resources to be used in areas where they are needed most.

Other consequence of this approach is a move towards individualism and individual rights. In many instances, children no longer see the need to listen to and obey their parents since they feel that they are provided for by the government. If they have issues at school, they are often referred to “Counsellors” or service providers. This is in stark contrast with the community-based environments that the refugees generally come from.

In a traditional community setting, it would involve working first within the family; parents or guardians and the host community can help resolve issues and nip them in the bud, particularly with cultural nuances. Early on they learn about their rights without equal emphasis on their responsibilities. These circumstances can lead to the erosion of family discipline since individuals feel that they can access the ‘service’ they require in the market rather than work on building relationships, listen to family elders and opt for care from the family or the community.

Resettled Bhutanese refugees in Australia and overseas have reported that the shift from collectivism to individualism, institutionalisation of issues and the ‘loss of control’ that senior family and community members feel has a major impact on individuals and in communities including serious mental health issues.³⁸

In discussing psychosocial well-being of Bhutanese refugees, Pulla³⁹ notes that culture is a significant coping factor in resilience-building and the use of community initiatives in combating psychosocial ill-health. He cites comments from Dhungel as well as Chase⁴⁰ on similar strategies employed by Bhutanese refugees in managing the issues that lead to psychosocial ill-health, namely a lack of sense of community, social exclusion, and other issues of resettlement including language difficulties, lack of financial stability, and cultural shock of moving from collective living to a more individualistic lifestyle. He further refers to Chase’s findings on the positive impacts of community group activities in improving mental health and well-being. While not removing the need for specialist mental health services, they certainly contribute to the reduction of risk of mental illness and psychosocial ill-health.⁴¹

37 Dhungel, O, Seeking Refuge, Finding Sanctuary – A success story of refugee settlement (yet to be published)

38 Kohrt B., Maharjan S., Timsina D. and Griffith J. (2012) *Applying Nepali ethnopsychology to psychotherapy for the treatment of mental illness and prevention of suicide among Bhutanese refugees*. Available: <http://onlinelibrary.wiley.com/doi/10.1111/j.2153-9588.2012.01094.x/full> Accessed 19/03/2015

39 Pulla, Venkat et al (2016), *The Lhotsampa People of Bhutan – Resilience and Survival*, Palgrave Macmillan, p.160

40 Chase, L. (2012). *Psychological Resilience among Resettled Bhutanese Refugees in the US*. *Forced Migration Review*, p.40, 47.

41 Kenneth D. Keith (2011) *Cross-Cultural Psychology: Contemporary Themes and Perspectives*, Blackwell Publishing.

OVERVIEW OF STARTTS SERVICES TO THE BHUTANESE COMMUNITY

STARTTS is an Affiliated Health Organisation and a state-wide service. It was established in 1988 and at present employs over 200 staff. STARTTS has offices in Carramar, Fairfield, Liverpool, Auburn, Blacktown, Coffs Harbour, Wagga Wagga, Newcastle and Wollongong with a significant clinical outreach component. STARTTS staff speak over 25 languages and STARTTS clients come from over 60 refugee communities with highest numbers from Afghanistan, Iraq, Burma and various African countries at present. STARTTS subscribes to a bio-psycho-social systemic approach where trauma impacts on all levels of the social system, thus requiring interventions on corresponding levels.

STARTTS services include counselling and psychotherapy, psychiatric assessment and treatment, physiotherapy, youth programs, Families in Cultural Transition (FICT) programs, legal service, variety of health promotion and community development programs, excellent training and clinical consultancy services for service providers working with our client group and wider policy and research work.

STARTTS offers services to individuals, families and communities from refugee backgrounds that are culturally sensitive and relevant. STARTTS employs skilled staff from a wide variety of cultural and linguistic backgrounds, including bi-cultural workers who work exclusively with their community. Interpreters are used by workers who don't speak the language of the client.

Staff are regularly updated about the socio-political and cultural backgrounds of our main client groups and the implications for service provision at STARTTS, via regular presentations throughout the year, and a suite of fact sheets prepared in-house.

Staff receive training in cultural competence which uses our specially adapted workshop package which incorporates the impacts of torture and other traumatic experiences, and refugee resettlement into the cultural competence framework.

STARTTS has strong and positive relationships with communities from refugee backgrounds and works closely alongside them to ensure that our services are culturally relevant. The community consultations are a formal way of achieving this. Individual counselling, group interventions and other types of support offered to communities by STARTTS, incorporate culturally relevant interventions that are centred on the client's worldview and are based on a solid knowledge of refugee trauma-informed and culturally competent practice.

COUNSELLING AND GROUP INTERVENTIONS

STARTTS offers short and long term-term trauma counselling. Depending on the clients' needs, the exact length of counselling and the time it takes varies. Clients can be referred at any time following arrival in Australia. There are no restrictions related to Visa class in terms of accessing counselling.

STARTTS is a specialist service for refugee and humanitarian entrants, and is sensitive to individual and cultural expressions of psychological distress. Furthermore, the counselling

is confidential and can be conducted by either a bi-cultural or generalist therapist, with many therapists having a refugee background themselves.

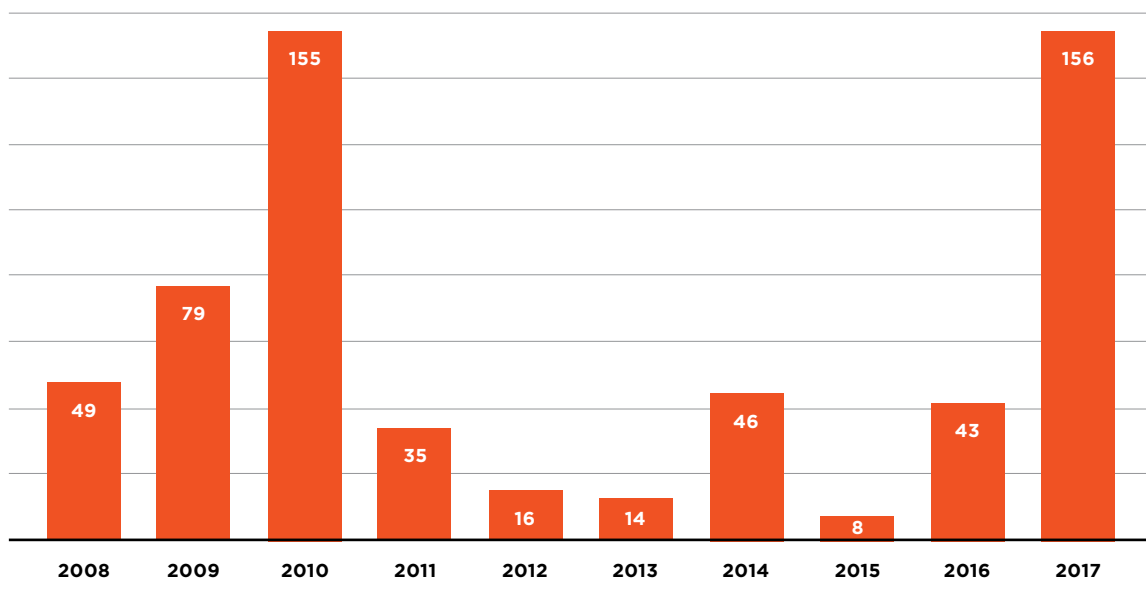
STARTTS' main work with the Bhutanese community prior to the consultation process beginning was primarily through STARTTS' counselling services and the Families in Cultural Transition (FICT) program.

STARTTS has seen a total of 395 clients from Bhutan for individual counselling and held 9 Bhutanese FICT groups and 2 OPICT (Older People in Cultural Transition) groups for the community.

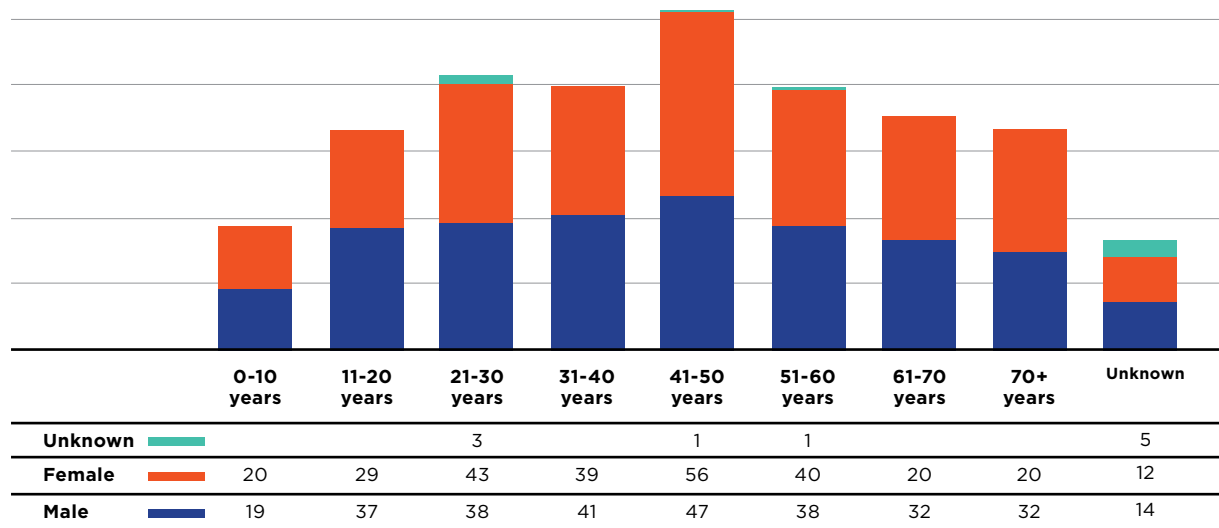
The STARTTS youth program has supported various Bhutanese initiatives, including in 2014 the 3 day National Youth Event in NSW, and in 2016 STARTTS supported Bhutanese sport teams to attend the National Sport Event in Albury. The relationship between the community and STARTTS continues to develop, and other support and cooperation continues on a request basis.

Below are some graphs relating to STARTTS work with the community.

STARTTS Bhutanese Clients by year of referral



STARTTS Bhutanese Clients by Age and Gender



Where do our Bhutanese clients reside?

LGA	Clients
Albury	116
Blacktown	272
Campbelltown	7
Liverpool	10
Northern Beaches	1
Parramatta	22
Penrith	74
Ryde	4
Wagga Wagga	4
Wodonga	43
NFIA (No Further Info Available)	30
Total	582

FAMILIES IN CULTURAL TRANSITION

Families in Cultural Transition (FICT) is a group-based psychosocial education program that aims to assist refugees and people from refugee-like backgrounds to anticipate and manage their settlement and changing family dynamics during the period of cultural transition. It is one of STARTTS' foundation programs that has assisted groups over many years to increase their social connections and understand Australian systems and way of life.

FICT is run by two trained bi-cultural facilitators in the community language of the participants.

The bi-cultural facilitators bring participants from their community together to take part in the FICT sessions in community locations. Each module is three hours long and is delivered at a time and place to suit participants. The ten modules cover practical,

conceptual and emotional issues that refugees are likely to face as they make the cultural transition to life in Australia.

The modules are: Introduction and Settlement, Support Services, Money, Trauma and Healing, Families, Children, Gender, Youth, Employment and Enjoying the New Environment.

Since 2013 we have supported 12 Bhutanese FICT groups and 5 OPICT groups. STARTTS has trained 9 FICT facilitators with 4 of those people also being trained to deliver OPICT.

COMMUNITY CONSULTATIONS AT STARTTS

For STARTTS purposes, a community consultation is a range of processes in which STARTTS seeks the views, opinions and input of a refugee community on:

- torture and trauma related health and settlement issues
- STARTTS services and programs, and
- how STARTTS can continue to provide relevant and appropriate services to the refugee community consulted.

As practiced at STARTTS, community consultations are an ongoing process, rather than a series of isolated events. Consequently, STARTTS utilises a number of formal and informal community consultation and participation strategies. Formal community consultations involve organising a gathering of key community leaders, STARTTS clients and former clients, and community members from a particular community.

During a formal consultation, STARTTS staff present an overview of the service and facilitate discussions with the community focusing on their experiences of trauma, their understanding of counselling, their needs and strengths, and how STARTTS services can be made as appropriate as possible. Finally, a plan of action is decided, which will be implemented by STARTTS and/or other relevant stakeholders. The plan of action is usually disseminated to all participants, thus ensuring transparency and accountability to the service users.

PURPOSE OF CONSULTATIONS

The purpose of the consultation is to ensure that STARTTS' services are accessible and equitably provided to communities through:

- STARTTS developing a relationship and building trust with the community
- STARTTS developing a knowledge base of the community, including needs, priorities, issues, strengths, resources, culture, structure, understanding of counselling and mental health
- Increasing the community's awareness of STARTTS and other relevant services
- identifying potential training needs for STARTTS staff
- identifying potential STARTTS staff recruitment needs
- identifying barriers of access to STARTTS services
- identifying future directions for engagement with the community – for example, further consultations, projects, strategies and development of an action plan.

GOALS OF THE CONSULTATION

The goals of the consultation were to:

- provide information on STARTTS' services and how they have worked with Bhutanese individuals, families and communities
- formally document feedback about STARTTS and channel that into future planning
- explore and document any other issues significant to the Bhutanese community.

PROCESS OF STARTTS CONSULTATIONS WITH BHUTANESE COMMUNITY

The consultation process began in 2014 with the establishment of a group of Bhutanese community leaders from the Association of Bhutanese in Australia (ABA) Sydney and STARTTS staff members

During the process STARTTS was briefed by ABA Sydney about its strength-based bottom-up approach to refugee settlement. It included an annual planning process through workshops for different segments of the community – youth, women, elderly and others. The goal was to identify opportunities as well as current and potential issues.

The community's focus was on identifying the skills and strengths of the new arrivals and leveraging them to address any issues and work in partnership with other service providers to fill any gaps that the community could not do itself.

Over a period of 12 months STARTTS worked with ABA and participated in a number of joint activities to better build the relationship between organisations.

A formal consultation was held on 23rd May 2015 in Blacktown.

CONSULTATION PROGRAM

STARTTS Bhutanese Community Consultation Meeting (23/5/2015) Alpha Park Hall, Blacktown

2.30 – 2.35pm	Introduction – Gary Cachia
2.35 – 2.50pm	Presentation about STARTTS – Jasmina BajraktarevicHayward
2.50 – 3.00pm	Speech from Community President – Om Dhungel
3.00 – 3.20pm	Cultural performance - Lucky Lartey
3.20 – 3.30pm	Presentation about Counselling – Adriana Seifertova
3.30 – 3.35pm	Talk about STARTTS youth activities – Lina Ishu
3.35 – 4.30pm	Small Group discussion
4.30 – 4:45pm	Small Group reporting session
4.45 – 4.55pm	Final discussion – Jasmina Bajraktarevic-Hayward
4.55 – 5.55pm	Vote of Thanks – Om Dhungel

GUIDING QUESTIONS FOR THE CONSULTATION

These questions (and their order) were used as a guide for the facilitated discussion with the different groups.

1. STARTTS Services

What do people in your community think about STARTTS?
When are people referred to STARTTS, and why?
What happens after people are referred?
Are there any barriers to people from your community being referred to STARTTS, and if so, what do you think they are?
How can STARTTS remove or reduce those barriers?
What aspects of STARTTS' work is your community satisfied with, and why?
In what ways can STARTTS improve its services to your community?
What additional services or activities do you suggest STARTTS could provide to support your community?
How can STARTTS work more effectively with Bhutanese community organisations?

2. Counselling

In your community, who helps people when they experience sadness or when they do not feel well emotionally?
How would you describe counselling?
How can we explain counselling so that members of your community understand it better?
How can we change what we do so that it is more appropriate for the community?
What is health?
What is mental health?

3. Community issues relevant to STARTTS

What do you perceive to be the greatest strengths within your community?
What are some of the difficulties torture and trauma survivors in your community are experiencing at the moment?
How has the community tried to address these difficulties?
Apart from STARTTS, are there other agencies working with the community to address these issues? If so, which agencies and what are they doing?
Which of these strategies have worked most effectively, and which have not?
How did your community's strengths help with those difficulties?
What can STARTTS do to help with the community's initiatives?
If everything was well with your community, how would you know? What would you see?
How would people interact? What resources would there be within the community?

SUMMARY OF FINDINGS

The following items were raised across the different groups and are included in the workplan.

1. Awareness of STARTTS Services and feedback on service received

Whilst many of the participants were generally aware about STARTTS counselling services, there was limited knowledge of the ability to also access the range of STARTTS services after the initial engagement they may have had with STARTTS.

"I only thought that STARTTS provided counselling."

"Not many people know they can contact STARTTS again for help."

It was suggested that STARTTS should ensure structures and information are in place to facilitate self-referrals. There was also a concern that new arrivals may not have information about STARTTS services.

"Most people who arrived longer ago knew more about STARTTS because they have received services when many new arrivals may not have received services."

Overall, feedback about STARTTS was positive with primary focus of feedback being STARTTS counselling services.

"I have been with STARTTS for five sessions, it was very helpful."

"STARTTS Counsellor was very helpful for me, her advice and information was very useful."

"I received support from STARTTS over 5 years ago, STARTTS has always helped."

"Counselling was good, it helped me sleep."

"Most people benefited from counselling, the FICT program and the youth program."

The participants appreciated an opportunity to learn about STARTTS services during the consultations and have requested further information sessions covering various aspects of STARTTS services as well as psychoeducational content highlighting the benefits of counselling. Request was also made for translations of STARTTS psychoeducational materials.

2. Feedback on FICT

Participants praised the Families in Cultural Transition program as a helpful intervention but suggested modifications including ensuring that gender specific groups are made available to Bhutanese clients if required and that STARTTS should consider developing children and youth versions of FICT. An additional modification would be the inclusion of information about rights and responsibilities in the Australian context. The participants suggested that this would be an important element of both adult and youth/children's FICT. Young people expressed concerns about family violence and the impact of cultural transition on families.

3. Youth issues

Adult participants felt that whilst most young people are adapting well, support was recommended to continue to assist the youth to adapt to Australia in a healthy and positive way, especially as they juggle two cultures.

Young people identified a number of ways they are involved with their own and wider community including the monthly art program, school holiday activities and various sports (soccer, volleyball, cricket). There was a clear indication that there are some very active young people in Bhutanese community and that they were happy to take initiative to support their peers. They identified a number of strengths they felt they had including sporting skills, visual and performing arts, mathematics and literacy. These strengths could be harnessed to develop peer support initiatives.

The process for collaboration between STARTTS and Australian Bhutanese Association would include a meeting between STARTTS Youth Team and ABA Youth Sub-committee to develop a joint strategic plan for the next 3 years.

“Broadly, taking a holistic approach, ABA Sydney intends to work with STARTTS to develop a medium-term plan for youth development. In consultation with the community, due consideration will be given to how the youth development plan fits into ABA’s strategic direction and how to involve and engage the wider community.”

It was suggested that grants focusing on Bhutanese young people should be sought with STARTTS providing auspice function until ABA develops the capacity to manage and acquit grants. Some projects that required funding included youth camps, sporting activities and some form of drug and alcohol education for both young people and their parents.

Young people also suggested they were interested in learning more about time management and being involved in projects focused on performing and visual arts (classes, events and competitions), mixed media and Bollywood dance. They also expressed an interest in meeting with and development of joint initiatives with other communities. Further, they suggested that tutoring/homework help and employment initiatives would be useful.

4. Working with STARTTS and new project ideas

ABA expressed a wish to continue to work collaboratively with STARTTS to develop and deliver projects aimed at further enhancing their community’s capacity and empowerment. However, the community’s own strength and capacity were highlighted.

“When the community was smaller it was more reliant on service providers. Now that it has grown larger it has become more self-supporting and less reliant on service providers.”

Some of the projects identified by the participants in various small groups included:

1. Assistance with setting up community radio and an on-line newsletter.

2. Group therapy/physical exercise group for men who have survived torture and with a male counsellor. During the consultations, 9 men disclosed having been imprisoned and tortured. They shared some of the challenges they faced such as physical pain, insomnia, anxiety and tension. An interest was expressed in access to information about STARTTS body focused therapies such as acupuncture and physiotherapy.

"We want programs about how to sleep better, how to relax."

"My whole body aches, the hospital said nothing wrong but it still aches."

"I want to know how acupuncture can help as many people don't know what acupuncture is."

"I am scared of acupuncture as all I know its needles, can STARTTS explain it in a video or presentation?"

"Can STARTTS provide physiotherapy for more than three sessions?"

3. Women's group focusing on physical and mental health, pain and recovery, nutrition, parenting, STARTTS and other services. Need for child minding was highlighted to ensure access. The group would also hold a camp/residential activity incorporating yoga, dancing, cooking and sightseeing activities.

4. STARTTS support for Bhutanese community to access a bigger community garden particularly as this was identified as a strategy to reduce isolation among older women.

5. Income generation

As with most new communities, the Bhutanese requested more assistance with employment and business activities, particularly for new arrivals and men. There was also an interest in social enterprise-style activities involving cooking and/or sewing. A potential collaboration with the Social Outfit was explored. Employment support activities suggested by the participants included job readiness and skill development programs.

"It is difficult staying at home with no work of any kind available after completing compulsory English classes."

6. Interpreters

Participants discussed specific difficulties with interpreters, in particular that there was a limited number of linguistically appropriate interpreters and difficulties with the testing process. Nepali interpreters from Nepal were not considered linguistically appropriate due to a different dialect spoken in Bhutan. The participants also argued that NAATI testing used Nepali from Nepal as the standard thus disadvantaging Nepali speakers from Bhutan attempting the test.

7. Awareness of Rights and Responsibilities in Australian context

There was a strong emphasis on needing to learn about rights and responsibilities in the Australian context as well as about Australian legal system and specific areas of law. The participants agreed to discuss what specific areas they were interested in and inform STARTTS about the content of legal information sessions they may wish to pursue for their community.

8. Social isolation and geographic dispersion

Social isolation was highlighted as a challenging issue for Bhutanese community particularly for women and torture victims. This was compounded by geographical dispersion of the Bhutanese community. Maintenance of connections among Bhutanese across Australia was considered of high importance by the participants.

“Our community is spread across few suburbs in Western Sydney and it is difficult for older women to socialise”

“Many people have cars but the elderly need assistance with transport.”

“Many victims of torture are illiterate and we need more social activities and outings to break down isolation”

In the context of the discussion in point 4, the participants requested STARTTS to support the community to run outings for the isolated elderly and victims of torture. The community agreed to provide a list of names of people interested in participating in social support activities, including a list of potential places to visit and if possible a person who has a bus license or is willing to be supported to obtain a bus license and drive to these outings on a voluntary basis.

9. Settlement and health challenges

Two specific challenges were shared by the participants:

1. Problems with physical health and body pains in general (mixed ages). This was compounded by limited access and cost of body focused therapies.

“My doctor sent me for physiotherapy for the pain but when it runs out I can’t afford to pay for more.”

“My doctor gave me medicine to help me sleep, it is good for a short time but not long time.”

2. Difficulties with learning English language and various challenges associated with the language barrier. Of a particular concern was illiteracy in both English and first language.

RECOMMENDATIONS AND WORKPLAN

STARTTS Services including Counselling

Item Raised	Strategy	Who By	When By
Awareness of STARTTS services and feedback on service received particularly limited knowledge of the ability to access the range of STARTTS services post settlement service provision and the initial engagement.	STARTTS to provide more information on the range of STARTTS programs including the bio psycho social approach to trauma recovery and have this information translated.	Counsellor/Project Officer allocated to the community. STARTTS management regarding translations.	Began 2016
	<p>STARTTS individual counselling and body centred referral pathways/ intake process for the new and re-referral for previous clients (support of the self referral) to be supported.</p> <p>STARTTS to address this through information sessions.</p>	<p>Counsellor/Project Officer allocated to the community. Blacktown DS Team Leader.</p> <p>Initiated with the Bhutanese community worker from SydWest who will help clients complete referral forms.</p>	Began 2016
	<p>STARTTS to organise pain management and other psycho education groups and sessions for men including sessions on</p> <ul style="list-style-type: none"> - Counselling - Trauma - Acupuncture - Bio-psycho-social assistance <p>A group therapy/physical exercise group for men who have survived torture. Male counsellor needed for that.</p>	Counsellor/Project Officer allocated to the community to follow up and the most appropriate counsellor to run the men's group is allocated.	Began 2016. Men's group currently running.
	STARTTS to establish a women's group with child care included if required, focusing on physical & mental health, pain and recovery, nutrition, and parenting. STARTTS and mainstream service provision and incorporates outings.	Counsellor/Project Officer allocated to the community.	Began 2016. Women's group currently running.

Item Raised	Strategy	Who By	When By
	STARTTS to research and provide information about local community gardens to the community and support community's access to the garden.	Counsellor/Project Officer allocated to the community in conjunction with CS team.	Information available on www.communitygarden.org.au/ Further steps to be taken to progress this item.
FICT feedback	STARTTS to recruit and train female Bhutanese FICT facilitators to run women only groups if required.	FICT Team and Counsellor/Project Officer allocated to the community.	Began 2017
	STARTTS to develop Youth FICT and update the Settling-In so that it can be provided to Bhutanese children and young people via local schools.	FICT, Youth and School Liaison Teams. Clinical and Research Services Coordinator overseeing updating of Settling In.	Began 2017
	STARTTS to consider a modification to FICT to include information about rights and responsibilities in Australian context. Or, Bhutanese FICT Facilitators to be equipped to deliver the Human Rights workshops developed by University of NSW.	FICT Team	Human Rights training for FICT Facilitators booked. Further discussion with the community leadership about running the program to follow.
Youth issues	STARTTS to assist ABA to develop a three year action plan for the youth group aligned with the broader community plan.	Communities in Cultural Transition Project Officer and Youth Team.	During 2018-19 planning cycle
	STARTTS Youth Team to collaborate with ABA to implement youth activities. STARTTS to auspice funding on behalf of ABA to deliver new initiatives.	Youth Team and Counsellor/Project Officer allocated to the community.	During 2018-19 planning cycle

STARTTS Services including Counselling

Item Raised	Strategy	Who By	When By
Geographic isolation	Support Bhutanese national and state-based events.	Community Development team and Counsellor/Project Officer allocated to community	Ongoing
	Support ABA youth to run soccer tournaments between Sydney and rural locations	Youth Team	Ongoing. One event supported.
	Support ABA youth to run soccer tournaments between Sydney and rural locations	Youth Team	Ongoing. One event supported.
	STARTTS to assist ABA with the establishment of a Community Radio and National Newsletter. This could involve working with SBS to explore potential of setting up a Bhutanese program.	CiCT Project Officer and Counsellor/Project Officer allocated to community	To commence upon community's request.
Work with ABA to seek and attract funding grants.	ABA and STARTTS to develop and deliver projects aimed at further enhancing community capacity and empowerment. At first this may involve STARTTS auspicing the projects for funding.	Community Development/Project Officer and Counsellor/Project Officer allocated to community.	To commence upon community's request.
Income generation	STARTTS to promote employment and pathway to employment opportunities to the community as those opportunities arise.	Enterprise Facilitator, Community Development/Project Officer and Counsellor/Project Officer allocated to community	Ongoing as opportunities arise
	STARTTS to promote the Enterprise Facilitation project to the community members.	Enterprise Facilitator	Initial promotion occurred and assistance provided on request
	Link Bhutanese community to SSI Enterprise Facilitation Project.		
Interpreter issues as per the report	STARTTS Policy Officer to meet with ABA to clarify the issues and develop strategies to address the issues.	Policy Officer and Community Service Coordinator	Began 2017

Item Raised	Strategy	Who By	When By
Lack of knowledge of Australian legal system	ABA to identify legal issues community needs to learn about and approach Bridge to Justice to determine and approach the most appropriate presenter/s.	Bridge to Justice	ABA to identify issues and approach STARTTS and Bridge to Justice.
Limited ability to travel outside of the local area especially for the elderly and women.	STARTTS to support the community through the provision of logistical support. For example, access to STARTTS bus and other community transport.	Community Development/ Project officer and STARTTS Fleet Manager	Ongoing as requested
	STARTTS to provide support to community volunteers who are willing to drive groups to obtain the bus licence.	Counsellor/Project Officer allocated to community, Community Development/ Project Officer and STARTTS Fleet Manager	On demand

Notes from discussion groups

SUMMARY OF THE LEADERS' DISCUSSION GROUP

Facilitator: Jasmina Bajraktarevic-Hayward
Co Facilitator/Scribe: Om Dhungel

Possible STARTTS support indicated:

- 1 They want to meet with the youth sub-team to do a plan of STARTTS/Bhutanese youth related collaboration for the next 3 years. They would like STARTTS to auspice them for some grants until they develop the capacity to do so themselves. They would like camps, sport and some form of drug and alcohol intervention. They also want more involvement in STARTTS youth program activities
- 2 ABA is taking their soccer team down to Albury in early July. STARTTS allocated funds toward this.
- 3 They are interested in community radio and newsletter. I have directed them to Ajak for a) his experience with community radio, b) access to a consultant who can help them with the on-line newsletter design.
- 4 Showed interest in a social enterprise/cooking – Jasmina provided Oms number to the enterprise facilitator who said he would make contact.
- 5 The community requested a group therapy/physical exercise group for men who have survived torture and a male counsellor was needed for that.
- 6 Policy issues re: interpreter recognition and testing.
- 7 They would like occasional legal info sessions - will let us know the topics and dates and I am to see if Anne is available or can organise someone if she is not.
- 8 They love FICT and think every new arrival should have FICT but they think women should have access to women only groups. They also think we need FICT for kids and youth, held separately from parents so that it is age appropriate. They would also like discussion of responsibilities as well as rights to feature in both adult and youth/child FICT.

SUMMARY OF THE WOMEN'S DISCUSSION GROUP

Facilitator: Adriana Seifertova

Co facilitator/Scribe: Franka Bosnjak

Approximately 30 women of different ages were involved in this discussion group. From the beginning, facilitators explained to the group participants: purpose of the discussion, discussion process and reasons for note taking, safety and confidentiality matters.

Themes of discussion:

- Isolation; community spread across few suburbs in Western Sydney, difficult for older women to socialise
- Problems with physical health, body pain in general (mixed ages)
- Struggle with verbal communication in English despite attending English classes
- Difficulties of staying at home, no work of any kind available (after completing compulsory English classes)

Possible STARTTS support indicated:

- Women's group focusing on physical & mental health, pain and recovery, nutrition, parenting. STARTTS and mainstream service provision. (Need for child care during the group meetings).
- Women's Camp (2-3 days) incorporating yoga, dancing, cooking and sightseeing activities.
- STARTTS individual counselling and body centred referral pathways/intake process for the new and re-referral for previous clients (support of the self-referral process initiated with the Bhutanese community worker from SydWest who will help them to fill the referral forms & STARTTS to address this on the information sessions in June at MCC).
- Need for bigger community garden (gardening and meeting point for older women).
- STARTTS enterprise project engagement (sewing) in cooperation with the Social Outfit NGO.

SUMMARY OF THE MEN'S DISCUSSION GROUP

Facilitator: Manuel Morantes
Co facilitator/Scribe: Gary Cachia

STARTTS Services

Quotes from discussion

- Most people knew about STARTTS
- The knowledge was at different levels
- New arrivals may not know as much about STARTTS as more established people
- Most people who arrived longer ago knew more about STARTTS because they have received services when many new arrivals may not have received services
- When the community was smaller it was more reliant on service providers. Now that it has grown larger it has become more self-supporting and less reliant on service providers
- There are more relatives here now to support new arrivals
- "Been with STARTTS for five sessions, it was very helpful"
- "Adriana was very helpful for me, her advice and information was very useful"
- Went to STARTTS for two sessions and was told doesn't need counselling
- Most people benefited from counselling, the FICT program and the youth program
- Thankyou to STARTTS this is a good opportunity to learn about the other services and support STARTTS provides
- Received support from STARTTS over 5 years ago, STARTTS has always helped
- Only thought that STARTTS provided counselling

Counselling and treatment services

- 9 people disclosed being victims of torture
- Counselling was good, it helped me sleep
- My doctor gave me medicine to help me sleep, it is good for a short time but not long time
- We want programs about how to sleep better, how to relax
- My whole body aches, the hospital said nothing wrong but it still aches
- Not many people know they can contact STARTTS again for help
- Some people didn't know that counselling can help
- We need the services again
- Want to know how acupuncture can help as many people don't know what acupuncture is
- My doctor sent me for physiotherapy for the pain but when it runs out I can't afford to pay for more
- I am scared of acupuncture as all I know its needles, can STARTTS explain it in a video or presentation
- The language barrier makes it hard to access
- Many people have cars but the elderly needs assistance with transport
- Can STARTTS provide physiotherapy for more than three sessions

Community issues, relevant ideas and strategies suggested to STARTTS

We need more information sessions on

- 1 Counselling
- 2 Trauma
- 3 Acupuncture
- 4 Bio Psycho Social assistance

- STARTTS should work with ABA on information sessions
- Alpha park hall and Saturdays may be useful venue
- May be better not on the 4th Saturday of the month as it makes it a long day
- We have many illiterate people who need help

- 1 Can STARTTS assist with English classes for illiterate people?
- 2 Can STARTTS assist with skills development programs?
- 3 Need job readiness courses and programs
- 4 We need 'learn to learn' programs

- Many victims of torture are illiterate, we need more social activities and outings to break down isolation
- Need more group activities and outings
- Need more access programs
- STARTTS needs to work with ABA as ABA knows us and can make services better

Possible STARTTS support indicated:

- 1 STARTTS to provide more information on the range of STARTTS programs including the bio psycho social approach to trauma recovery and have this information translated
- 2 STARTTS to organise pain management and other psycho-education groups and sessions for men including sessions on
 - a. Counselling
 - b. Trauma
 - c. Acupuncture
 - d. Bio Psycho Social assistance
- 3 STARTTS to support the community to run outings for the isolated elderly and victims of torture
- 4 The community to provide a list of names of people interested in participating in social support activities, including a list of potential places to visit and if possible a person who has a bus license or is willing to be supported to obtain a bus license and voluntarily drive for the men's outing

SUMMARY OF THE YOUTH DISCUSSION GROUP

Facilitator: Lina Ishu

Co Facilitator/Scribe: Shaun Nemorin

Age of participants: 11-18 years old

Current involvement within community and wider:

- Art program facilitated monthly on Saturday
- School Holiday activities
- Sport
 - Soccer: boys and girls
 - Football
 - Volley Ball
 - Cricket

What are you good at:

- Soccer
- Football
- Cricket
- Drawing
- Singing
- Maths
- Literacy

Things you want to learn:

- Time management
- Mixed Media
- Music
- Bollywood dance

Who you talk too:

- Teachers
- Coach
- Mother
- Family
- Friends
- TAFE counsellor – language issues, drop off, courses, bullying, study

What do you do during spare time:

- Play iPad
- Footy
- Run around the house
- Play with friends at the park
- Homework
- Shopping
- Social media-games, Skype
- Sport training

Challenges:

- Drinking problem
- Family Violence effects the whole community

Future events:

- Employment
- Dancing workshop
- Youth Festival
- Singing workshops
- Youth events
- Tutoring
- Paper plane competition
- Singing competition
- Events with other communities

STARTTS support indicated:

The STARTTS youth team have agreed to:

- 1 Work on an action plan with the community
- 2 Will run and support art workshops in school holidays
- 3 Will provide soccer support
- 4 Will incorporate the community more into youth activities

Action plan

Broadly, taking a holistic approach, ABA Sydney intends to work with STARTTS to develop a medium term plan for youth development. In consultation with the community, due consideration will be given to how the youth development plan fits into ABA's strategic direction and how to involve and engage the wider community.

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