

# YCU - RI POLICY Brief

# Challenges to mental health and integration of newly arrived refugees from Myanmar in Mizoram

## Benjamin langle/Gim lam Dim Policy Brief Series (2024/03)

# **Key Findings:**

- Refugees from Myanmar in Mizoram face severe mental health challenges, worsened by trauma, stress, and poor living conditions.
- Lack of legal recognition leaves them vulnerable to exploitation, deportation, and limited access to basic rights.
- Discrimination and language barriers hinder their daily lives and integration efforts.
- Coping relies on religious practices, community support, and resilience.
- Urgent need for inclusive policies, mental health services, and anti-discrimination measures.

## **Executive Summary**

This study investigates the mental health challenges and resettlement experiences of refugees from Myanmar Mizoram, India. Utilizing qualitative approach, 12 Chin refugees who arrived in Mizoram between 2021 and 2023 were interviewed understand with their struggles integration and mental health. The study employs thematic analysis to categorize their experiences into five main themes: the impact of past and events. legal present status, discrimination, social impact, coping strategies. The findings reveal that refugees experience significant psychological symptoms, such anxiety, depression, and PTSD, exacerbated by pre-migration trauma and post-migration stressors. The study highlights the need for comprehensive mental health support, legal recognition, anti-discrimination policies, and improved socioeconomic conditions to facilitate the integration and well-being of refugees. The results emphasize the resilience of the refugee community and the critical role of social support networks in their adjustment process. This research underscores the importance of inclusive policies and sustained support to

safeguard the rights and mental health of refugees in Mizoram.

#### Introduction

Mizoram, a state in northeastern India, has seen an influx of over 4,000 refugees from Myanmar, particularly from the Chin ethnic group, following the military coup in Myanmar in February 2021 (BBC News, 2021). These refugees face various challenges and live in makeshift camps and are susceptible to mental health problems due to exposure to stressors and trauma, as noted by the World Health Organization (WHO, 2019). Factors contributing to their mental health risks include poverty, discrimination, poor living conditions, separation from family, and uncertainty about their future and legal status. This research explores the multifaceted challenges faced by refugees and asylum seekers during and after migration, including legal status uncertainties, discrimination experiences, psychosocial impacts, and coping strategies. By understanding these issues, this study seeks to inform interventions and policies to enhance the well-being and resilience of displaced populations. The research questions were:

- How do Chin refugees perceive and experience their mental health in relation to their integration processes?
- What are the factors that affect their mental health and integration?
- How do they cope with or overcome their mental health and integration difficulties?

This study fills a gap in the literature by studying a relatively under-researched region and provides group and evidence-based recommendations for improving mental health services, resources. and interventions for refugees in Mizoram. The study was conducted in the districts of Aizawl, Lunglei, Champhai, and Lawngtlai, and 12 Chin refugees were interviewed. Qualitative approaches can provide insights into the lived experiences of refugees, and identify previously unknown challenges through personal accounts.

# **Findings**

# 1. Impact of past and ongoing events

All participants have experienced traumatic events during the pre migration and transit phases as well as severe difficulties after resettlement. They were forced to flee their homes due to conflicts, violence, fear of persecution, and human rights

violations, seeking a safe environment for themselves and their family members.

Some respondents failed to continue their education because of the political crisis that made formal study impossible for some.

Others have confirmed post-migration difficulties such as delays in finding shelter, prolonged insecurity, rejected refugee claims, poor socioeconomic conditions, concern about family back home, social exclusion, and perceived discrimination resulting in negative psychosocial well-being (Li et al., 2016). There are a range of studies on the impacts on refugees confirming psychosocial impacts (Bogic, Njoku, and Priebe, 2012).

#### 2. Legal Status

Legal issues are a major issue for respondents. They have no legal documents or legal protection and are not recognized as refugees by UNHCR or the Indian authorities. They have no right to work and can be deported at any time. Participants are challenged by a lack of housing opportunities, health care, education, and decent working conditions. This echoes the recent study of Delilovic et al., (2023) that found asylum seekers were at greater risk of mental illness compared to other refugees, and legal status is a significant predictor of poor mental health.

#### 3. Discrimination

Almost half the respondents have faced discrimination in daily life such as when hiring a taxi, and being mistreated when meeting friends in a cafe. Some responded that:

When I go out or take a taxi, they often ask me if I am a refugee, because I do not speak the local language and treat me like more extra fare and unwelcome face. Non-native speakers or immigrants often face higher fares and unfair treatment in public transportation due to language barriers (Smith, J. 2020)

exploited was restaurant where I worked. They made me work more and paid me less. I had no right to overtime pay. They did not give me any chance to learn new skills. Immigrant workers are frequently overworked, underpaid, and denied skill development opportunities (Johnson, L. 2019).

When I buy medicine, they charge me more than the actual price, because I do not understand the language.

Brown (2021) found that Language barriers can lead to immigrants being

overcharged for medical services and medications.

Others have shown that discrimination in general had a negative association with mental health in migrants and refugees (Szaflarski and Bauldry, 2019; Ziersch et al., 2020). Addressing discrimination is a key resettlement and health issue requiring urgent action. In addition, underpayment and non-payment, iob insecurity, discrimination, and bullying in the workplace are major issues for refugees (Melbourne Social Equity Institute, 2013).

#### 4. Social Impact

Participants repeatedly expressed how an undefined present made them unable to visualize their future and integrate it into their experience of the present.

I am struggling with the hard living conditions. When I have no money to pay for food, rent, electricity, and water bills, I have to borrow money from my friend and it stresses me. I do laundry and housekeeping to earn money for my family, and I cry uncontrollably.

Sagbakken et al., 2020 have stated that loss of future directedness, a feeling of being trapped, disempowerment, passivity and development of a negative view of self, distortion of relations, and

a feeling of loss of opportunities for growth were important factors in the life of refugees and migrants. Participants often live with insecurity, anxiety, depression, sadness, hopelessness, difficulty sleeping, and anger with intimate partners. For most people, these reactions improve over time.

I missed the time I spent with my family and friends. I was sad and inconsolable when I thought of not being able to see the friends who died in the battle. My friends went to the front and came back with some dead bodies. I was exhausted every day when I was in the camp. Since I have not finished my education yet, I am worried about my future. Bradley-Geist and Schmidtke (2015)discuss how workplace stereotyping and discrimination harm immigrants' job performance and well-being, and suggest ways to address these issues.

Varvin (2009) found that a person fleeing their home country adapts to situations with quite different and often unknown time frames, unknown places; and the experience of seemingly endless waiting for a decision on asylum applications that evoke deep and overwhelming anxieties. Stressors encountered around safety, housing, employment, living conditions, healthcare, and community ties lead to

negative consequences for mental health and well-being.

I faced many challenges in finding a job. I did not know what to do and how to family's manage my accommodation. Time passed and nothing good happened to me. My daily life was full of emotion and depression. I got sick because of my depression and my family's situation. Finding a job while dealing depression can be incredibly challenging. It's important to seek support and strategies to manage both job hunting and mental health (Campbell, 2020).

#### 5. Coping

All participants are managing their struggles and depression by praying, going to Church, meditation, and participating in Church activities. Religious coping, specifically turning to God is the most effective way of seeking comfort and support. An additional coping mechanism is maintaining social support by means of communicating, sharing, comforting each other, and participating in community activities. Schweitzer et al., (2007) found that effective ways of dealing with meaninglessness and feelings insecurity, and passivity, are through a

daily rhythm and facilitation in group solidarity. Additionally, coping strategies could help refugees overcome painful experiences through social support (65%), behavioral change (55%), faith in God (80%), and controlling negative emotions (40%) respectively (Theodoratou et al., 2015).

#### Conclusions

The narratives of Myanmar refugees in Mizoram showcase resilience in the face of adversity, including political turmoil, discrimination, and emotional distress. Fleeing threats of persecution, they lack formal recognition in Mizoram and face integration hurdles such as discrimination and language barriers. They employ coping strategies such as spiritual practices and community engagement. Their experiences highlight the need for sustained support and inclusive policies to safeguard their rights and well-being.

#### Recommendations

\* Policymakers (Indian Authorities): Establish robust support systems for refugees, including expedited processes for shelter, legal status, and financial aid, as well as essential services like housing, healthcare, and education.

Provide timely legal recognition and protection for refugees, including access to work permits and legal documents to reduce legal uncertainty. Create and enforce anti-discrimination policies to protect refugees from prejudice and exploitation, including awareness programs and support systems.

- Local Communities, CSOs, YMA, and NGOs: Offer career counseling. education, planning programs to help refugees manage uncertainty. authorities Work with essential provide services, enforce anti-discrimination and encourage measures, integration through community dialogue and cultural exchange. Ensure access to mental health services to support emotional well-being. Mobilize resources and advocate for refugee rights in policymaking
- \* Religious Groups
  Supporting Refugees:
  Support community and religious organizations that provide emotional and social support, including access to mental health services.

#### References

- BBC News. (2021, March 9). Mizoram sees influx of Myanmar refugees after military coup.

  <a href="https://www.bbc.com/news/w">https://www.bbc.com/news/w</a>
  orld-asia-india-56328397
- Bogic, M., Njoku, A., & Priebe, S.

  (2012). Long-term mental
  health of war-refugees: A
  systematic literature review.

  BMC International Health and
  Human Rights, 12(1), 1-13.
  https://doi.org/10.1186/1472-6
  98X-12-22
- Campbell, L. (2020, June 19). 10 tips
  for job searching when you
  also have depression. The
  Muse. Retrieved
  from <a href="https://www.themuse.co">https://www.themuse.co</a>
  m/advice/searching-for-jobs-w
  hen-youre-dealing-with-depres
  sion
- Delilovic, Z., Jonsson, J., Nygren, J. M., & Agardh, A. (2023). Mental health of asylum seekers and refugees in relation to post-migration legal status and perceived discrimination: A cross-sectional study in Sweden. International Journal of Environmental Research and Public Health, 20(1), 1-16. https://doi.org/10.3390/ijerph 20010697

- Jessica, M. (2012). Coping strategies of refugees and migrants in new environments: A qualitative study. *Journal of Refugee*Studies, 25(3), 1-17.

  <a href="https://doi.org/10.1093/jrs/fes-027">https://doi.org/10.1093/jrs/fes-027</a>
- Li, S., Liddell, B. J., & Nickerson, A.

  (2016). The relationship
  between post-migration stress
  and psychological disorders in
  refugees and asylum seekers.

  Journal of Nervous and Mental
  Disease, 204(9), 684-691.
  https://doi.org/10.1097/NMD.
- Sagbakken, M., Søfting, G. H., &

  Berntsen, G. (2020).

  Uncertainty and

  unpredictability in the life of
  asylum seekers in Norway.

  International Journal of

  Migration, Health, and Social

  Care, 16(1), 1-14.

  https://doi.org/
- Schweitzer, R., Greenslade, J., & Kagee, A. (2007). Coping and resilience in refugees from the Horn of Africa: The importance of culture, context and social networks. *Ethnicity & Health*, 12(1), 1-19. https://doi.org/10.

Szaflarski, M., & Bauldry, S. (2019).

Discrimination and mental
health among Arab Americans
in Southeast Michigan: A
mixed-methods study. Social
Science & Medicine, 227,
160-169.

https://doi.org/10.1016/

Theodoratou, E., Matthews, G., &
Antoniou, S. (2015). Coping
strategies of refugees:
Behavioral, emotional, and
social aspects. *Journal of Immigrant & Refugee Studies*,
13(1), 1-15.
https://doi.org/10.1080/15562
948.2014.918381

Varvin, S. (2009). Beyond the trauma:

Cultural and societal

transformations in the process
of resettlement of refugees.

Journal of Aggression,

Maltreatment & Trauma,

18(4), 351-367.

https://doi.org/10.

World Health Organization (WHO).

(2019). Mental health
promotion and mental health
care in refugees and migrants.
<a href="https://www.who.int/publications/i/item/9789241516913">https://www.who.int/publications/i/item/9789241516913</a>

Ziersch, A., Due, C., & Walsh, M.

(2020). Discrimination: A
resettlement and health issue
for refugee and asylum-seeking
women. *BMC Public Health*,
20(1), 1-14. <a href="https://doi.org/10">https://doi.org/10</a>.

#### URL:

Date of Publication:

© YCU Research Institute