Turn Inward to Keep the Flame Burning

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A few months after the devastating 2015 earthquake in Kathmandu, Nepal, a group gathered in a church basement for a potluck fundraiser for victims. Their curries, casseroles and cookies bespoke those in attendance – church congregants, employees of organizations serving refugees, and members of the Bhutanese-Nepali refugee community.

Informal speeches about the earthquake's destruction followed the meal, along with an introduction to the Bhutanese-Nepali refugee community. Its history stretches back more than a century, when farmers emigrated from Nepal to settle the rich farmland of southern Bhutan, where they maintained their Nepali language and culture. As the farmers became more prosperous, the Bhutanese government perceived the group as a political threat and expelled them violently. Between 1990 and 1993, 100,000 people fled to six refugee camps in eastern Nepal. Life in the camps was tough and dangerous, with families crowded into simple wooden homes and cooking over smoky open fires. Food was scarce and disease common. Nongovernmental organizations helped provide basic housing and medical care. The community prioritized education, including the teaching of English, in anticipation of higher education for some youths in neighboring countries and resettlement for all in an unidentified future homeland.

Remarkably, the refugees succeeded in living peacefully together in the camps for a quarter century, respecting one another's Hindu, Buddhist, and Christian faiths. Elders continued to think of themselves as Bhutanese. young adults as Bhutanese-Nepali, and children as Nepali, reflecting their experience of homeland. When asked if they miss anything from those arduous years, refugees describe the tropical climate and singular flavor of vegetables grown at the base of the Himalayas.

Starting in 2007, the Nepalese government, working with the United Nations High Commission for Refugees and several countries, began resettling this community. The United States accepted 60,000 Bhutanese-Nepali refugees. Rhode Island ultimately welcomed 283 of these individuals,

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ranging from newborns to nonagenarians. Some of them became my primary care patients. Over the years, the community in our state has dwindled to a few families, as most Bhutanese-Nepalis have migrated to join family members in states like Ohio where job prospects in companies such as Amazon are brighter.

The potluck ended at dusk with an invitation to create a circle of candles symbolizing solidarity with those suffering in Nepal. We cleared the tables and exited to the parking lot. Each person received a lighted candle



Statue of Liberty crown and torch.
[NATIONAL PARK SERVICE]

and stepped forward to help form the healing circle.

Best-laid plans had not included the brisk wind blowing that night. Organizers scurried about trying to keep the candles burning, only to have them blow out. What was meant to be a peaceful, reflective finale to the evening soon took on a frantic tone.

Then something shifted in the crowd. Spontaneously and without speaking, the Bhutanese-Nepali guests guided us to turn inward, creating small circles of five or six people. Our arching bodies shielded the candles. The crowd morphed into a large circle of small glowing circles, akin to flower petals. The flames remained lit. In my small cluster we all smiled, hands and faces warmed by candlelight. In their instinctive understanding that we must work together as a community, the Bhutanese-Nepali guests had not only helped us keep our collective lights burning but demonstrated that joining together would also nurture our own inner flames. For some, this offered a poignant introduction to the Bhutanese-Nepali refugees. For me, it was a reminder of how much I have learned from working with patients from this community as their primary care physician.

From the outset I have been struck by how this group of Hindus, Buddhists, and Christians respect one another



and support their spiritual differences while focusing on the shared primary goal of their community's wellbeing. As Bhutanese-Nepali patients universally offer the simple greeting of clasped hands, direct eye contact, a smile, and "Namaste," I have learned to open the exam room door, put down my computer and papers, and respond in kind, experiencing a moment of calm and connection, a feeling I strive to bring to other patients.

As I have worked through their medical needs as refugees - screening for infectious diseases, including malaria and tuberculosis, and overseeing the immunizations required for a green card, I have encountered the standard diseases of aging like hypertension, diabetes, and cancer. I have also found conditions seen in patients who have been victims of war or experienced the accidents of daily living commonly encountered in under-resourced areas of the world: the sequelae of gunshot wounds, an unrepaired hip fracture, scars from the goring of a bull, and burns caused by loose clothing ignited near an open fire. Patients have also revealed their psychological wounds - an elderly man's distant, shameful memory of his homesick teen bride from an arranged marriage leaving him to return to her family, and a mother's anguish when her daughter of 18 eloped to marry her boyfriend in a different state. The most common challenges relate to resettlement in a new country and ongoing separation from loved ones remaining in home countries and refugee camps, many in harm's way.

The Bhutanese-Nepali community has also reminded me of the power of gathering to celebrate important life milestones. Several days after the birth of a baby, or at the time of a marriage or death, community members gather to pray, eat, and catch up with one another. Each family brings a simple gift, a household item, or an envelope with a \$20 bill. To keep elders vital, every morning families bring them to a rotating series of homes, so the seniors can enjoy one another's company while

their children and grandchildren attend work and school. When a loved one is hospitalized, family members work out a schedule so that night or day, the patient is never alone. The same occurs during the vigil for a dying person and then at the funeral. On these occasions, the community swells as relatives and friends resettled elsewhere arrive from Vermont, Pennsylvania, Ohio, and Iowa to share in this passage, offer support, and help defray the costs of a new baby, marriage, or funeral. Families open their apartments and bedrolls to these travelers. I have been honored to participate in these celebrations as cherished patients have entered and left this world and passed through seminal moments in between. On every occasion, I have left feeling uplifted by the community's generosity and caring and more in touch with the flame within. All these customs have been challenged by the pandemic, but here too, I have been impressed to see the care that affected family members have taken to protect and support one another and their willingness to curtail the traditional get-togethers to avoid spreading COVID-19.

It has been equally remarkable to observe community members pull together to find housing and work, learn to drive, help children succeed in school, and otherwise pursue the American dream – a firsthand reminder of the energy and motivation that refugees and immigrants contribute to our nation. With the backdrop of these powerful lessons from the Bhutanese-Nepali community and other refugee and immigrant patients, I find the unremitting efforts of our current leaders to solve our complex immigration problems by decreasing the number of refugees sponsored by the United States, dismantling the overseas infrastructure that makes resettlement possible, impeding the process of obtaining a green card, and making these newcomers feel unwelcome not only repugnant but also baffling.

People who have survived violence, years in the harsh limbo of a refugee

camp, and the endless unknowns that accompany immigration have a depth of understanding that seeds compassion and the courage, resilience, and inventiveness to move forward. Our nation stands to gain much from welcoming communities like the Bhutanese-Nepali refugees.

These days, I often imagine the Statue of Liberty being pulled off her pedestal and heaved into a dumpster, along with the powerful symbols of freedom, opportunity, and hope she embodies. We stand at a crossroads. Shall we choose to follow our better angels or our worser trolls? To those who would steer us toward the darker path, I say, "Give us your tired, your poor, your huddled masses yearning to breathe free,"3 for they can offer new perspectives, remind us of our shared humanity and finest ideals, and demonstrate the power of turning toward one another to light and nurture the flame within our communities and ourselves. .

References

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Disclaimer

The views expressed in this commentary are solely those of the author.

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