

## Rohingya Refugees in the United States

The 2024 [Presidential Determination on Refugee Admissions](#) focuses on expanding the resettlement of key populations of concern, including the Rohingya people.

For over half a century, Rohingya living in Burma (Myanmar) have experienced high risks of human rights abuses, including systemic discrimination, persecution, extortion, over-taxation, identity/citizenship rights denial, theft, arbitrary imprisonment, restricted movement, forced labor and slavery, assault, torture, rape, murder, and arson. Islam is the principal religion of the Rohingya people and a central factor in their persecution in Burma, which is predominantly a Buddhist country. The United Nations has described the Rohingya as “the most persecuted minority in the world.”

In 2016 and 2017, the Burmese government launched a military campaign in the northern Rakhine State, the state that most Rohingya call home, which led to the displacement of more than 700,000 Rohingya. Currently, one million Rohingya refugees reside in Bangladesh, most living in the Kutupalong Refugee Camp, the largest refugee camp in the world, or outside of it in makeshift camps. The conditions are dire with insufficient shelter, extreme heat, lack of clean water and appropriate sanitation, and insufficient food.<sup>i</sup> This situation was made even worse by a May 2023 cyclone that hit the area causing widespread destruction, worsening an already fragile infrastructure.<sup>ii</sup>

Rohingya people have also fled to Malaysia, Thailand, India, Pakistan, Indonesia, Saudi Arabia, and Australia. Rohingya are considered illegal immigrants in these countries and generally are not afforded citizenship or residency status. Without documentation, Rohingya are subject to exploitation, unable to work legally, move freely, and access healthcare and education.

In the past, most Rohingya refugees resettled to the United States have come from Malaysia, with a smaller number coming out of Thailand. However, in 2024, Rohingya refugee arrivals have started to come from Bangladesh. A large percentage of Rohingya have resettled in Wisconsin, with many others going to Indiana, Illinois, and Texas.

Exposure to violence, protracted displacement, persecution, pressured adaptation, and poverty contribute to mental health concerns and conditions in Rohingya individuals, children and families. Numerous studies show high levels of depression and anxiety symptoms, as well as Post-traumatic Stress Disorder.<sup>iii, iv, v</sup>

### Considerations for Mental Health Service Providers

The Rohingya people have experienced decades of repression, state-sponsored abuse, and ethnic cleansing. Most Rohingya in the U.S. have a high prevalence of traumatic exposure along with significant daily stressors related to resettling in a new country, which may contribute to or compound mental health symptoms and conditions. However, most Rohingya may not benefit from mainstream mental health services in the U.S. due to conflicting

priorities, stigma, language barriers, and differing explanatory models. Factors to take into consideration include but are not limited to the following:

- **Priorities.** The top priorities for most newly arrived Rohingya families are income generation and educational attainment for children.<sup>vi</sup> Adults in the U.S. will need to work quickly to pay for housing and meet basic needs. Long-denied access to educational opportunities, parents are often focused on school enrollment and academic achievement. Providers should recognize that unless mental health symptoms are debilitating, they are unlikely to be a priority. Therefore, connecting families to resources, helping them navigate critical systems, and providing information so they can make informed choices may be the first step in decreasing stress and distress.
- **Stigma.** Mental health problems are often not discussed or disclosed within the Rohingya community due to a high-level of stigma and shame.<sup>vii</sup> When talking about mental health concerns, providers should be cautious about the language that they use. Providers should talk about symptoms and avoid diagnostic terms. For instance, “feeling sad” instead of “depression.” Thoughts of suicide, which are reported to be common among Rohingya people in Bangladesh due to hopelessness about the future, are often not disclosed due to the strong prohibition against suicide in Islam.
- **Communication.** The Rohingya language is primarily a spoken language, with a high rate of illiteracy in the Rohingya population due to education discrimination. Ideally, information should be conveyed orally through in-person, audio, or video means, given low literacy. Providers should avoid using Burmese as the language of communication with Rohingya refugees. Although many Rohingya speak Burmese, interpreters who use that language may be part of ethnic groups that the Rohingya view with fear or suspicion. Rohingya refugees who resided in Malaysia and Thailand may also speak Malay and Thai.
- **Explanatory Models.** The Rohingya conceptualize mental health differently than Western mental health models. Instead of the Western concept of mind/body, the Rohingya view the self as having a brain, mind, soul, and body.<sup>viii</sup> Many Rohingya believe that mental health symptoms, particularly those that involve disassociation or psychosis, are due to spirit possession, spells, or black magic.<sup>ix, x</sup> There is also a high degree of somatization, including functional impairment, headaches, backaches, and other pain-related symptoms. What people believe causes these issues has a direct line to what they think will relieve or heal an issue. Therefore, many Rohingya may find “talk therapy” or psychotropic medication ill-placed to resolve symptoms. Providers should consider aligning with clients' explanatory models and referring them to community healers, religious leaders such as Imams (Islam), and primary care physicians as indicated, while encouraging or teaching coping skills and working with clients to eliminate daily stressors.

## Resources

[Culture, Context and Mental Health of Rohingya Refugees \(UNHCR\)](#)

[Rohingya Backgrounder \(Cultural Orientation Resource Exchange\)](#)

---

<sup>i</sup> [Status of Rohingya in Refugee Camps of Bangladesh: A Review Study](#)

<sup>ii</sup> <https://www.unrefugees.org/news/rohingya-refugee-crisis-explained/#Monsoonseason>

<sup>iii</sup> <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2777507>

<sup>iv</sup> <https://osf.io/preprints/osf/3vgsq>

<sup>v</sup> <https://www.iomcworld.org/open-access/mental-health-condition-of-the-children-in-humanitarian-crisis-a-study-in-rohingya-kutupalong-camp-98882.html>

<sup>vi</sup> <https://reliefweb.int/report/bangladesh/education-and-income-generation-rohingya-refugees-must-be-top-priorities-say-oxfam#:~:text=Refugee%20children%20and%20parents%20tell,lack%20access%20to%20educational%20services.>

<sup>vii</sup> <https://www.hindawi.com/journals/mij/2023/6128286/>

<sup>viii</sup> [https://journals.lww.com/invn/fulltext/2019/17020/challenges\\_and\\_opportunities\\_for\\_rohingya\\_mental.11.aspx#:~:text=Many%20Rohingya%20believe%20that%20mental,healers%20are%20known%20as%20Oboidu.](https://journals.lww.com/invn/fulltext/2019/17020/challenges_and_opportunities_for_rohingya_mental.11.aspx#:~:text=Many%20Rohingya%20believe%20that%20mental,healers%20are%20known%20as%20Oboidu.)

<sup>ix</sup>

[https://journals.lww.com/invn/fulltext/2019/17020/challenges\\_and\\_opportunities\\_for\\_rohingya\\_mental.11.aspx#:~:text=Many%20Rohingya%20believe%20that%20mental,healers%20are%20known%20as%20Oboidu.](https://journals.lww.com/invn/fulltext/2019/17020/challenges_and_opportunities_for_rohingya_mental.11.aspx#:~:text=Many%20Rohingya%20believe%20that%20mental,healers%20are%20known%20as%20Oboidu.)

<sup>x</sup>

[https://journals.lww.com/invn/fulltext/2019/17020/challenges\\_and\\_opportunities\\_for\\_rohingya\\_mental.11.aspx#:~:text=Many%20Rohingya%20believe%20that%20mental,healers%20are%20known%20as%20Oboidu.](https://journals.lww.com/invn/fulltext/2019/17020/challenges_and_opportunities_for_rohingya_mental.11.aspx#:~:text=Many%20Rohingya%20believe%20that%20mental,healers%20are%20known%20as%20Oboidu.)

<sup>x</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6998923/>