

# Conflict-affected Karen Refugees from Myanmar: Reflections on their Resettlement in Hartford



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*Due to systemic violence and human rights violations in Myanmar, many ethnic minorities, including Karen, have fled the country. Many Karen refugees from camps in Thailand and Malaysia were resettled in the United States. Despite having access to multiple resources and opportunities, the Karen face challenges related to health, housing, education, employment, and culture. This paper aims to broaden our understanding of the needs and challenges of Karen refugees living in Hartford, Connecticut, through a qualitative, narrative-based research study. Lessons learned will help nongovernmental organizations, mental health professionals, and social workers to develop and implement programs and policies for refugee resettlement and integration in a culturally competent manner that is based on the values, strengths, and resilience of the refugee Karen community.*

**Keywords:** *Burmese refugees, Karen, Myanmar, resettlement, refugee, conflict*

## Introduction

During the past several years, there has been a rise in refugees across the world for several reasons, from religious persecution to civil war (Healy & Thomas, 2021). According to UNHCR (2021), by the end of 2020, there were 26.4 million refugees worldwide, with 4.2 million seeking asylum. Myanmar ranks in the top five countries from which refugees are displaced, with 1.1 million refugees from Myanmar globally. In the last 10 years, one out of every four refugees in the United States have been from Myanmar (Winn, 2017).

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Ethnic minorities constitute about 32 percent of the population of Myanmar (Refugee Council of Australia, 2021). Karen people are one of the eight main ethnic minority groups from Burma/Myanmar. The other ethnic groups are Chin, Kachin, Mon, Rakhine, Shan, and Wa. Burma's name was changed to "Myanmar" in 1989 by the military government. While most countries as well as the United Nations recognize "Myanmar" as the name, the United States continues to use "Burma" (U.S. Department of State, 2021).

An unelected military regime took over the country in 1989. Civil unrest since then has led to systemic violence, relocation, rapes, and forced labor of the Karen people (Grundy-Warr & Wong, 2002). The "Karen refugees have endured one of the longest civil wars in history involving armed resistance and widespread human rights violations" (Shannon, Vinson, Wieling, Cook, & Letts, 2015, p. 587). The Karen people are persecuted by the Burmese junta government, which has a history of oppressing ethnic Myanmar minorities. The Karen have endured a long civil war and forced relocation to refugee camps and urban areas of Malaysia and Thailand. Approximately 5,000 Burmese people had been displaced by 2020 (Refugee Council of Australia, 2021). According to UNHCR (2021), more than 77,000 Karen refugees are residing in Thailand refugee camps.

As part of the global resettlement of Karen refugees, the United States opened its gates for Karen refugees to settle in the country. Data from UNHCR (2021) indicate that from 2005 to 2021, 89,560 Myanmar refugees out of a total of the 91,809 verified refugee population were resettled in the United States from temporary shelters in Thailand. Karen refugees living in the United States face many psychosocial and economic challenges stemming from experiences of torture, trauma, and conflict within Myanmar/Burma (Bartholomew, Gundel, & Kantamneni, 2015).

Aside from the pre-migration and during-migration stress, refugees also face resettlement stress because of socioeconomic distress, loss of status, discrimination, incidents of violence and threats, and alienation (Lindencrona, Ekblad, & Hauff, 2008). Unemployment, lack of education, inadequate health services, and insufficient housing facilities all act as drivers of resettlement stress. Several research studies have highlighted the adverse impacts of resettlement stressors on refugee populations, including mental distress caused by the challenges of a new environment (Marshall, Schell, Elliott, Berthold, & Chun, 2005).

Most Burmese refugee adults in the United States have not received a proper high school education, and only a few refugees have a college degree (Fike & Androff, 2016). The refugees, especially older adults, have experienced hardships such as difficulty finding employment, obtaining driver's licenses, learning English, and becoming American citizens (Agbényiga, Barrie, Djelaj, & Nawyn, 2012). Young and emerging adults in the Karen community do somewhat better; many have become integrated into American society and have acquired skills that the community elders wish to gain. However, some of these young adults still struggle to fully integrate because of a lack of funding for higher education and

their responsibility to help older members of their families. The community as a whole struggles to find a balance between maintaining their heritage and cultural values and integrating into Western society, especially when different generations of Karen people are integrating at varying levels. Many also face loneliness and sadness because they have been separated from their family and community (Brough, Schweitzer, Shakespeare-Finch, Vronmans, & King, 2013).

This study aims to understand some of the risks, complexities, and issues associated with displaced Burmese refugees; helps broaden our understanding of the needs and challenges of the Karen refugee population living in Hartford; and examines some of the social issues affecting Karen refugees. The experiences and lessons learned from existing Karen refugees will help to develop and inform programs and policies that could assist future refugees in resettling in their new host country.

## Literature Review

The 1951 Geneva Convention and the subsequent 1967 protocol form the keystone of international refugee protection. Article 14 of the Universal Declaration of Human Rights recognizes individuals' right to protection from persecution by seeking asylum in other countries. Thus, refugee status confers certain rights to people who are unable to live in their home country due to a substantiated fear of violence, a notion upheld by the international community.

The United States has a long history as a global leader in resettling refugees seeking humanitarian protection from war, persecution, and other forms of human rights violations. However, the number of refugees entering the United States has fluctuated historically depending on global events and national priorities (Krogstad, 2019; Igielnik & Krogstad, 2017). From 2010 to 2020, the largest group of refugees entering the United States came from Myanmar (Burma), with 20.8 percent of 600,860 total refugees (Monin, Batalova, & Lai, 2021).

### Karen Refugees in the United States

In the 2000s, the US government initiated a refugee settlement program to resettle Burmese refugees from camps in Thailand to the United States (Hirsi, 2019). From 2008 onward, more than 117,000 Burmese refugees resettled in the United States, including more than 109,000 Burmese refugees from camps and urban areas of Thailand and Malaysia from 2008 to 2014 (Centers for Disease Control and Prevention, 2021).

The Burmese population in the United States has risen from 2000 to 2019 (Budiman, 2021). Minnesota, Texas, New York, and California have the largest numbers of Burmese refugees. Officially, the refugees from Myanmar are called "Burmese Refugees" by the Census Board, but they are mostly Karen Refugees (Hirsi, 2019).

### A Brief History of Karen Refugees

Karen and Burmese people have fought against each other for a long time. In World War II, while the Karen supported the British, the Burmese junta government sided with Japan. After the British left Burma, the Karen felt abandoned, and the Burmese junta government began persecuting them (Karen Organization of Minnesota, n.d.). In 1949, the Karen began their demand for self-determination and autonomous power (Rajah, 1990). The Karen insurgency also ignited during the same time. Heavy-handed repression by the junta government and fighting caused masses of Karen people to flee to the refugee camps in the neighboring border state of Thailand in the 1990s (Thansrithong & Buadaeng, 2017). The military junta government had been committing grave human rights violations against the Karen by burning villages, laying landmines, and making arbitrary arrests, along with executions, rape, torture, and forced labor (Grundy-Warr & Wong, 2002). The Karen National Liberation Army (KNLA), the armed wing of the Karen National Union (KNU), demands food, money, shelter, information, and recruits from civilians (Kenny & Lockwood-Kenny, 2011). It is the civilian population that suffers due to the protracted fighting between the armies of ethnic nationalities and the military government of Myanmar (Horstmann, 2011).

Due to persistent violence, conflict, and oppression, about 505,000 Burmese people were displaced by 2020 (Refugee Council of Australia, 2021). Most of the Karen refugees fled to Mae La, the largest refugee camp in Thailand, and border towns like Mae Sot. Many Karen refugees continue to live in refugee camps in Thailand. They feel safe there from the conflict in Myanmar and receive food rations, basic medical care, education, and shelter with the help of several community-based organizations (CBOs) (Kenny & Lockwood-Kenny, 2011). However, malnutrition, lack of access to adequate healthcare services, prevalence of mental health issues, and lack of access to higher education persist (Thailand Burma Border Consortium, 2009). In these camps, Karen leaders promote the language of collective identity and dreams of an independent homeland. Outside the camps, displaced refugees strive for survival, living rootless, mobile lives inside Thailand while trying to avoid the attention of the Thai authorities. The Thai media portrays these displaced people as outsiders transmitting anarchy from across the border and blames them for bringing diseases into the country and adversely impacting national well-being and security (Grundy-Warr & Wong, 2002). Thailand does not officially recognize the existence of refugees and considers the refugee camps as temporary places of shelter for the displaced (Caouette, Kritaya, & Hnin, 2000). These “temporary residents” thus do not have official rights to settlement or employment and cannot travel within Thailand; they must remain confined in refugee community areas as designated by the Thai authorities (Grundy-Warr & Wong, 2002).

### Resettlement of Karen Refugees in the United States

Repatriation of the Karen refugees to their home country remains unfeasible, as Myanmar’s junta government has remorselessly continued to commit atrocities

on civilians, forcing a mass migration as its people flee (UNHCR, 2006). The full integration of Karen refugees into Thailand tends to create the perception of economic and security challenges there. Resettlement of the Karen refugees in third countries has thus become a last resort. Hasom Utkan, the UNHCR representative in Thailand, says, “Resettlement is one valuable way of ending protracted refugee situations when the other two durable solutions—voluntary repatriation or local integration—are not possible” (UNHCR, 2006).

Although resettlement brings considerable benefits and more opportunities for a better life and well-being for some Karen, the majority of them are being left behind, where they remain deprived and face scarcity of services due to the drain of skilled and educated individuals from the camps (Banki & Lang, 2007). Most Karen who have managed to leave Myanmar and Thailand have resettled in the United States, Britain, Sweden, Finland, Norway, and the Netherlands (UNHCR, 2006).

The Karen refugees resettled in the United States have done so under the United States Refugee Assistance Program (USRAP). The US government considers them members of a politically designated nationality deserving special humanitarian aid and assistance. Most screening processes are conducted by the US government and its various agencies, and voluntary organizations provide the refugees with basic domestic support such as food, shelter, and cash assistance. Upon arrival, these organizations also help the refugees find employment for an initial time (Brick et al., 2010).

The 1951 Geneva Convention confers the right to public education, economic opportunities, health care, housing, and social security to refugees. Yet the Karen people still face challenges related to health, housing, education, employment, and culture. Most Karen refugees in the United States work for minimum wages, live in small accommodations, face the constant threat of relocation, and at the same time struggle to maintain their cultural values, traditions, and practices (Kenny & Lockwood-Kenny, 2011). Language and cultural barriers, along with a lack of interpretation services, often lead to inefficient communication with healthcare providers, difficulty in learning at schools, and hardship in finding employment opportunities (Centers for Disease Control and Prevention, 2021; Hirsi, 2019; Kenny & Lockwood-Kenny, 2011).

Karen refugees may also face physical ailments and mental health issues from the trauma caused by torture, suffering, sleep deprivation, beatings, solitary confinement, rape, forced labor, and displacement (Culture Care Connection, n.d.; Williams, 2014). Of Karen refugees screened in Minnesota in 2014, 27.4 percent reported having experienced torture directly and 51.4 percent reported secondary exposure to torture (such as a family member who was tortured) (Culture Care Connection, n.d.).

## **Methodology**

As part of the Karen Refugee Project (KRP), the University of Connecticut Center for International Social Work Studies (CISWS) collaborated with the Hartford

Public Library to conduct this exploratory qualitative research study. KRP worked closely with Karen refugees living in the Asylum Hill neighborhood of Hartford. Data were collected through 50- to 80-minute-long in-depth, semi-structured qualitative interviews with twelve (n=12) Karen community participants ranging in age from 18 to 29 years old. This narrative-based qualitative study explored the complex experiences of Karen Project Refugee adults and emerging adults who are struggling to recreate family and community in the United States. Many were resettled to Connecticut from refugee camps in Thailand, where they first settled after fleeing from violence and persecution in Myanmar. The objectives of this project were two-fold: (1) to interview Karen adults about their integration process and (2) to gain an understanding of how social workers, NGOs, and resettlement agencies can provide effective support services to the refugees.

A further purpose of this study was to develop an understanding of the integration processes, family relationships, and future aspirations of young Karen adults. Furthermore, the needs of the Karen community were identified through assessment of their lived experiences, with a focus on their educational and employment opportunities as well as family life. The findings are helpful in formulating informed and evidence-based policies for refugees.

### Data Collection

In 2017, the Principal Investigator along with two student researchers conducted interviews with Karen Project refugees residing in Hartford, Connecticut. Through a narrative-based approach of qualitative design, twelve (n=12) Karen community participants ranging in age from 18 to 29 years old took part in in-depth, semi-structured interviews that were audio recorded. All interviews were conducted in English and lasted from 50 to 80 minutes. A questionnaire was also administered to collect demographic data from participants. The interviews were designed and used specifically to capture Karen refugees' experiences of resettlement, family life, and the connections to their heritage and country of origin, as well as to better understand their future employment and educational opportunities. This research was granted IRB approval by the University of Connecticut, Protocol # H17-074, titled "Strengthening the Karen Refugee Community through Qualitative Research."

All participants were asked to sign a consent form that helped to not only explain the role and responsibilities of the researchers but also the purpose and the process of the study. Participants were reminded that they could discontinue or withdraw from the study at any time without penalty. Each participant was given \$20 in cash, and their travel and parking expenses were also covered.

### Sample

The sample for this study was collected using the snowball sampling method. Snowball sampling is a data-collection technique that is often used in research

studies targeting hard-to-reach populations (Goodman, 2011). Snowball sampling enables participants to help recruit other participants by providing information about those participants' locations (Rubin & Babbie, 2008). Karen refugees 18 to 29 years old living in Hartford, Connecticut, for more than 5 years were recruited using snowball sampling and English-only flyers. Study participants were interviewed at the Hartford Public Library in Hartford. Participants invited others they thought might be interested in talking with researchers about their experiences. Each participant also filled out forms that collected certain demographic data. Of the 12 Karen refugee participants, eight identified as female and four identified as male. The majority of the research participants lived in the Asylum neighborhood of Hartford, Connecticut and had lived there for at least 6 years.

Collected data were stored in a locked file cabinet in the Principal Investigator's office after it was anonymized by substituting numbers for names. These data were destroyed after being transcribed.

### Data Analysis

This study used a semi-structured interview guide. Semi-structured interviews allow the researcher to identify any themes that may develop during the interview process and improvise follow-up questions depending on the responses from the participants (Kallio, Pietilä, Johnson, & Docent, 2016; Rubin & Babbie, 2008). The research team ensured that the questions were open-ended. All interviews were transcribed verbatim by student researchers who also were careful to make any notations to capture physical expressions, gestures, and/or emotional reactions. Transcribed interviews were then organized and entered into the qualitative data analysis tool NVivo for analysis. Below is a sample of the interview questions:

1. How did refugees feel when leaving the camp? How did they and their family adjust to American culture? (Initial Integration)
2. What was their experience with the American education system? How effective were teachers and administrators in accommodating their education level? To what degree did the language barrier influence this experience? How did peers react? (Education)
3. How and to what degree have familial relationships changed since they relocated to the United States? Have cultural values and practices been upheld or moderated to some extent? How have family members of all ages adjusted to the change? (Family and Culture)
4. What career services and work opportunities are available? How was the application process? Has the language barrier affected the scope of available jobs for anyone in the family? (Work/Income)
5. Are there any future goals they or their family members wish to achieve? What resources are needed to obtain these goals? (Future Aspirations)



After each interview, the research team engaged in triangulation and debriefing, which are helpful in practicing reflexivity, gaining fresh perspectives, reflecting upon biases, and bringing rigor to the research process (Padgett, 2017). Researchers discussed their observations, gave feedback, and offered new ideas.

## **Findings**

### Language Barrier and Its Impact

The language barrier was identified as the most prevalent obstacle to Karen refugees. Only the basics of the English language were taught in the refugee camps. In the United States, Karen refugees faced difficulty in navigating daily life situations, such as understanding road signs, seeking help from the locals, and comprehending information related to public services. Students had difficulties comprehending materials and content in English. The lack of interpretation services in healthcare systems made accessing services difficult because of ineffective communication with healthcare providers. Further, many respondents reported experiencing hardship in finding employment opportunities due to limited English language proficiency. Based on their experiences, refugees believe that to survive, learn, work, and thrive in the United States, learning English is imperative. Most participants and their family members who migrated together were taking or already taken English-learning classes. Many learned English at the Hartford Public Library through English as a Second Language (ESL) classes, which were beneficial in acquiring the language skills needed for job interviews, learning at school, etc. The teachers in ESL classes were reportedly helpful and responsive to the needs of the learners.

### Sociocultural Challenges and Adjustments

Migrating to a new land and settling down as refugees, the Karen people faced several challenges in adapting and adopting the new American culture. The participants of this study reported the contrasting cultural and social norms of Burma, Malaysia, and Thailand on one hand and the United States on the other. They also expressed their shock and awe at experiencing the new culture as well as their appreciation for the values of the new socio-cultural environment.

At schools, a few participants reported that the seating arrangement in classrooms did not use gender segregation like in schools in Thai refugee camps. (One observed that while boys and girls studied in the same classroom in the refugee camps, they sat in different rows.) Further, language barriers in the classroom adversely impacted their smooth integration. One participant mentioned facing bullying in the school. While many adult Karen participants struggled and/or continue to struggle with the English language, their children, who have received education in American schools, are comparatively well-versed in English. They can understand and speak English well. This has an impact on their relationships



with older family members, who witness the effects of acculturation on young and emerging Karen adults.

The study found that while the Karen refugees make efforts to follow their traditions and cultures, including celebrating their festivals and cooking Burmese cuisine, they also try to adopt the traits of the American culture, including working in nontraditional jobs, making friends outside their immediate community, sharing their life experiences, and continuing to use resources and opportunities offered through the Hartford Public Library: taking ESL classes, advancing computer skills, and preparing for citizenship tests.

Most participants emphasized a lack of freedom of choice and movement while they lived in camps. They cherish the newly acquired freedoms of America and the values of open-mindedness, access to educational opportunities without barriers of age and gender, and the voices of youth in decision-making. One participant noted:

[I]t was so different back in the camp. I feel like we were like in jail. You have no choice to go out and you can't go to the museum or on trips. We couldn't speak to some of the adults and staff because of the culture but here we are open minded.

Having fled violence and persecution, refugees in camps live a life of fear and insecurity. For some Karen refugees, the United States provides an opportunity to live a fuller life with more safety, stability, and independence. The participants characterized the decision to migrate to the United States as positive, worthy, and fruitful. They appreciated the opportunities for education and employment, which will have long-term benefits for the refugee families.

In a nutshell, Karen refugees have been making several socio-cultural adjustments as they settle in the United States. However, they believe that the struggles they face are necessary for building a life in America. They acknowledge that the American way of life is different from life in Myanmar, Thailand, and Malaysia, but American values, rights, and freedoms, and the ample opportunities in the United States, are a benefit.

### Trauma as a Refugee

Many Karen refugees had to separate from their families, relatives, and friends, some of whom were not alive anymore. Some participants remained connected to their friends and relatives via social media, but a few could not reach out to their loved ones since there was no internet service in many Burmese villages. Some also expressed anguish about having insufficient resources to visit their siblings. One participant was unaware of the whereabouts of his siblings.

Many participants described the violence and persecution in Burma that caused their displacement to Thai refugee camps. Fear and constant threats to life made them cross the border. Although nearly all participants expressed their

satisfaction with migrating to the United States for a better life, one also shared that she dreamt about her old life and felt nostalgic about her country and culture.

Tackling the everyday challenges of life in a new country can be stressful, and individuals and families tend to develop coping mechanisms. Some leaned on religion, while some resorted to substance use. While reporting about her father's alcoholism, which adversely impacted their family, a participant noted:

[W]hen we were in Thailand [my father] would hang out with us but like when he go to work he would come back really late but he still with us he don't really drink a lot. But here when everything changed. 'Cause the beers are like low . . . the price are low.

Another participant described her experience of being harassed by the police and landlord; when her house windows were broken, and she reported it. Feeling unsafe and harassed in a new land can be extremely stressful and traumatizing, particularly for refugees who have fled violence and unsafe conditions.

One key concern highlighted by the participants was their aspiration for US citizenship. Several participants seemed desperate to obtain citizenship and repeatedly mentioned it. It seemed to be a cause for concern and stress for many participants, particularly for the older persons who had limited formal education, less English language proficiency, and were intimidated by the test requirements. The participants recognized the importance of gaining citizenship, so their quest for integration became a priority.

### Religion as a Coping Mechanism

A recurring theme throughout most of the interviews was how faith and beliefs acted as a source of resilience during challenging circumstances. Belief in God helped refugees trust the process and accept hardships as part of their journey. One participant mentioned, "You don't have to worry about it. This can change your life and just trust in God. And have faith in yourself too because you coming to a new world." Most of the participants believe in Christianity and go to the church.

While religion helped them cope with their hardships, adhering to their religious traditions sometimes caused ambivalence. One participant shared her experience of finding her spouse, who belonged to a different faith, and how the church would not approve of her interfaith marriage.

### Role of Catholic Charities in Resettlement

Catholic Charities played an instrumental role in helping refugees overcome the significant barriers to resettlement. Participants said Catholic Charities was the only agency that supported them in multiple ways, starting from the time they first landed in the United States. They helped arrange accommodation and obtain

social security cards and health care, and they supplied much-needed items and provisions such as clothes, furniture, other household items, and vouchers for transportation.

Having identified the English language as a crucial barrier for Karen refugees, Catholic Charities also helped establish a partnership with the Hartford Public Library to provide ESL classes. This helped refugees to learn at school, access job opportunities, and comprehend information about services. One participant shared that Catholic Charities also helped them find a job and prepared them for job interviews. The social workers from Catholic Charities ensured that the Karen refugees and their families attained a sense of stability and had adequate support in establishing their lives in the United States.

## **Discussion**

### Implications for Social Work Practice

Throughout this study, we had the opportunity to learn about the values, strengths, and resilience of the Karen people, as well as the various obstacles they face and overcome in order to successfully integrate into a new country and a new culture. On analyzing the qualitative interviews with Karen refugees about their resettlement in the Hartford community, we found many valuable implications that apply to social work practice.

An important value that many of the Karen people held was that of their faith. Many of them identified their faith as a protective factor throughout the stressful time of relocation and assimilation. Moreover, Catholic Charities was critical in providing a support system. Hence, faith-based interventions in refugee resettlement and integration can be utilized. Psychospiritual interventions, drawing from the intersection of religion, mental health, and trauma-focused support, can be helpful, particularly for a population displaced by violence and conflict (Martinez & Sarmiento, 2022). United States Institute for Peace (n.d.) notes several measures through which nongovernmental aid organizations can assist conflict and trauma-affected communities with religiously informed psychosocial support. This includes facilitating safe spaces for refugees to continue their religious practices, incorporation of faith-sensitive engagement in mental health services, and involvement of faith-based organizations and religious leaders in policy decisions. There is a “pressing need to bridge the gap between religious actors, mental health professionals and other government and nongovernment actors tasked with the psychosocial support of displaced populations” (USIP, n.d.). Because Western mental health interventions are perceived as contradictory to many refugees’ cultural values and traditions (French & Fitzgibbon, 2018), collaborations between faith-based organizations and social workers providing mental health support can be effective.

Many participants emphasized the importance of family and community and mourning the communities that they lost after relocating to the United States.

It is apparent that family—and community in general—is important to the Karen people, as they come from a collectivistic culture and a close-knit society. Social workers should note that family system approaches may be much more beneficial and effective with this population than they may be for populations from an individualistic culture. Family-based psychosocial interventions can improve the emotional well-being of all family members by focusing on improved family context and functioning. Bunn et al. (2022) identify three components of family-based interventions for refugee populations: (1) mental health (anxiety and stress management, behavior activation, and psychoeducation of child and parent), (2) family processes and functioning (education on child development, family communication skills, family goal settings, family narrative, problem-solving, family roles and identity, identification and activation of family strengths, and positive parenting skills), and (3) displacement and resettlement contexts (education on adjustments and acculturation issues, social skills training, and resource navigation).

Forced migration and resettlement in a different country can be traumatic for the affected population. A number of Karen refugees endured some form of trauma either in the refugee camps, in their transition to the United States, or resettling in Hartford. Thus, a trauma-centered and trauma-focused approach to therapy services can be useful. “Trauma-focused cognitive-behavioral interventions help clients to discuss painful memories and reduce anxiety to a more tolerable level, and to increase their ability to modulate emotion and behavior” (Levenson, 2017, p. 106). The ability to discuss painful memories and reduce anxiety is key when working with a population that has extensive painful memories stemming from their traumatic histories and high anxiety levels from their recent transitions. However, there is a note of caution about cultural applicability of Western trauma-focused models to non-Western populations (Bracken, 2002). Counseling services can be more specific depending on the values, strengths, and resilience of the Karen community resettled in the United States.

At the macro level, social workers can engage in community organizing and partnering with Karen self-help refugee groups to enable the resolution of issues at the grassroots level (Fike & Androff, 2016). Since the language barrier is a major concern identified by the participants, there is a need for interpreters, particularly in clinics and hospitals. Self-help and volunteer groups can provide support. Social workers can reach out to state departments and agencies to ensure information on government services is available for the refugees in their vernacular language so that they do not feel uncertain, confused, and/or scared navigating through the various systems of a new country. Further, school social workers can assist educators in engaging in inclusive practices by developing an understanding that there are children who may not be well-versed with the English language and may need additional support and resources for learning. Classroom activities for better integration of children from different countries, ethnic groups, and religions, can make education more inclusive.

## Conclusions

This study lends insight into the challenges, needs, and aspirations of the Karen refugees residing in Hartford, in light of which programs and policies on resettlement and integration vis-a-vis Karen refugees as well as other refugee populations can be shaped or reshaped. The findings of this study can be useful to nongovernmental organizations providing aid and assistance to the refugees; they can cement the gaps in supporting the Karen refugees based on the inferences of this study. There is a need for programs that correspond with the cultural beliefs and norms of the community. Tailor-made solutions for each refugee community can be more effective than a one-size-fits-all approach. Social workers can play a major role in effectively delivering services by ascertaining the cultural appropriateness of psychological interventions, engaging in cultural competency training, and initiating collaborations to break down language and cultural barriers in accessing services.

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