



# **Hepatitis B assessments among the Tibetan Refugee Population**

**A REPORT**

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## Foreword

July 23, 2015

It gives me great pleasure that the Department of Health, Central Tibetan Administration is releasing a report titled “Hepatitis B assessments among the Tibetan Refugee Population” on World Hepatitis day, 2015. This report is based on the findings of the two important assessments which the health department, CTA has implemented since the last two years. The first assessment titled “*Hepatitis B Need Assessments –Bylakuppe Tibetan Settlement*” was a collaborative project between the Department of Health, CTA and John Hopkins University. This project was a cross sectional study done at Bylakuppe Tibetan Community in 2013 among a sample of about 2769 participants. The second assessment is titled “*Perspectives on Hepatitis B in Tibetan Refugee Communities*” was a collaborative project between the health department, CTA and primarily with University of Rochester and secondarily with University of Hawaii. This project was based on rapid qualitative methods and was implemented among a population of 296 individuals in Tibetan communities in Ladakh in 2014. Both these assessments were carried out with proper participants’ consent and ethical approval. We implemented these assessments to better understand the status of Hepatitis B among the Tibetan population not only in terms of the prevalence but also in terms of the community’s perspective regarding Hepatitis B.



On behalf of the Health Department, CTA, I would like to thank Dr. Christopher Hoffmann of John Hopkins University, who supervised the implementation of the Bylakuppe assessment and to John Hopkins University Center for Global Health for its funding support. I would like to convey my thanks to Dr. Timothy Dye of University of Rochester who supervised the implementation of the Ladakh Hepatitis B assessment and to Hershey Family Foundation for generously funding it. Most importantly, I would like to thank everyone; the researchers, concerned settlement offices, health and medical staffs of our department, and the community members; who have significantly contributed to the successful implementation of these two important Hepatitis B assessments.

It is my earnest hope and wish that these two assessments would play a pivotal role in strengthening the current Hepatitis B projects and in planning meaningful Hepatitis B control initiatives by the Health Department with the overall aim of reduction of burden of Hepatitis B among the Tibetan Community.

Sincerely,

Dr. Tsering Wangchuk (Kalon)  
Department of Health, Central Tibetan Administration

