

Teeth on the Move

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For people on the move, teeth can also be a reason for stigmatization, as local residents do not recognize any problems with access to running water or teeth brushes on the migrants' journey. Sarah Horton and Judith C. Barker point to this in their text, using the example of Mexican migrants in the United States. Their oral health is affected by several factors, and one of the most important is the fact that many Mexican migrants do not have access to health insurance because they work in low-paid jobs, mostly as fieldworkers (Horton and Barker 2009: 788). As noted by Sarah Horton and Judith C. Barker (2009), migrants are thus seen as people with common health problems, including oral diseases, which some US residents associate with poor oral hygiene and "backwardness." That is why, in the US, hygiene has become an important criterion for health workers in determining the "suitability" of candidates for citizenship. Children are also stigmatized because of oral diseases, as demonstrated in the case of a group of children from Mexico, described by their school doctor as problematic due to oral diseases.

The student fieldwork undertaken in **Bihać** in March 2022 was my first experience of researching how migrants lived. But I certainly didn't expect that my attention would be drawn to their teeth. I began to think about them because of the statements from volunteers and the local population. I found their fascination with the teeth of migrants and their amazement at the whiteness of their teeth interesting. One of the local interlocutors even mentioned teeth when talking about why she herself helps people on the way, something along the lines of "how could I not help them, look at that smile and those beautiful white teeth." Based on such statements, I decided to pay more attention to this topic. The teeth, however, quickly told a much bigger story.

From observing the migrants we met during our stay in Bihać, I realized that "beautiful" and healthy teeth are important to them. Among their **garbage** and on the floors around squats, I noticed a large amount of toothbrush wrappers and empty toothpaste, which indicated their frequent use. Unfortunately, I didn't have many opportunities to talk about teeth on the field itself. Nevertheless, the topic came up a few times, for example in a conversation with an eighteen-year-old Pakistani who was stuck on the border between Bosnia and Herzegovina and Croatia three years ago. Sha. (referred to by the abbreviation "Sha." for the purpose of protecting personal data) was cordial and optimistic, and above all he liked to talk about his friends, which he found among the people on the move, the volunteers and the local population. His friends represent an important support network for him and help him in his daily life. Among other forms of help, they provide him with the opportunity to practice good hygiene and thus the conditions for brushing his teeth. Sha. lives in a so-called **jungle squat**, in one of the dilapidated buildings, where a large group of people live at the same time. Our interlocutor lives in a squat with seven other people. Since these are dilapidated buildings, they do not have access to running water, so he brushes his teeth at his friends' houses, or brings a canister of water to his squat. He fills these canisters at his friends' houses, or volunteers deliver the canisters to him. He also emphasized that brushing his teeth is very important to him, which is why, on average, he brushes them three times a day. It could be argued that for Sha., in a way, brushing his teeth means preserving his dignity and resisting the severe structural obstacles that people encounter along their journey.

In addition to hygiene, he also takes care of his teeth by eating a healthy diet. For example, he tries to avoid sugary foods. However, Sha. mentioned that he loves chocolate too much to give it up for the sake of his teeth. He also added that his friends, especially other migrants he met on the journey, often reprimand him not to eat so much sugary food because he has to take care of his teeth. According to him, three of his teeth had to be pulled out because of this habit, despite the fact that he is only eighteen years old. Dental health problems for people on the move can also be related to the experience of migration itself. The unavailability of medical assistance can also be a big problem, which is discussed in the following paragraph.

In their work, which is based on field research carried out in Slovenia, Jaka Matičič and Urška Živkovič claim that dental problems are "the most common health problems reported by applicants for international protection, and one of the biggest challenges in providing adequate dental services is communication" (Matičič and Živkovič 2017: 30). They state that there are many reasons behind the frequent oral diseases, including inadequate nutrition. They also note that migrants without a regulated status, asylum seekers and other immigrants without a formalized employment relationship in Slovenia are only entitled to emergency dental care: "which in practice means that the diseased tooth is either extracted or is otherwise ground, but without a filling. An open tooth represents further possibilities for toothache and general poor health of the applicant" (Matičič and Živkovič 2017: 30).

They highlight this issue as the reason why migrants, or in this case, applicants for international protection, often do not seek dental care:

They know that they will receive nothing but pain pills until the pain is so bad that they have to have their tooth pulled out. In Slovenia, the health insurance of applicants for international protection only covers life-threatening conditions. Dental problems, however, regardless of their cause or level of pain, are treated in the same way: "It's always the same story. The dentist opens and cleans the tooth, makes a temporary filling, which falls out after a few days. When the pain returns, you visit the dentist again, and in the end that tooth is pulled out" (Matičič and Živkovič 2017: 30).

In Bihać, one of the local supporters of people on the move mentioned a dental office that offers help to people on the move even with less urgent dental ailments. They justify this by saying that they "take the Hippocratic Oath seriously."

Teeth also tell us about the migration experience of Ahmad, an asylum seeker in Slovenia. His teeth had to be extracted as a result of a ten-year search for asylum and five years of legal battles against deportation from Slovenia. Ahmad's story is presented to us in an article by Jelka Zorn, linking Ahmad's dental problems with stress and trauma resulting from the experience of migration and the threat of deportation (Zorn 2021: 11). According to Zorn, his teeth were presented as evidence in court, in a lawsuit against the Government Office for the Support and Integration of Migrants filed because his rights as an asylum seeker were curtailed, as they prevented him from staying in an asylum center. At the same time, Ahmad's teeth also serve as a small reminder of the solidarity that migrants sometimes receive on their journey. His friends collected money for a new prosthesis, which a dentist implanted for free.

During my research, teeth turned out to be a much more important topic than it seemed at first glance. They tell us more about the person and their life and migration experience. Urgent medical assistance and stigmatization based on teeth also reveal a lot about the society in which an individual finds themselves. Thus, teeth can really tell a lot of stories.

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Literature

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