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Katherine Amy Phillips

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INTERCULTURAL KNOWLEDGE AND SKILLS
IN SOCIAL SERVICE WORK WITH REFUGEES:
PERSPECTIVES FROM PROVIDERS AND
RECIPIENTS OF SERVICE

by

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A Dissertation
Submitted to the Graduate Faculty

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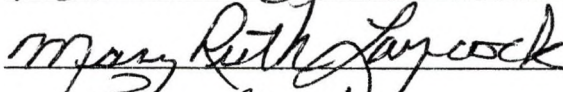

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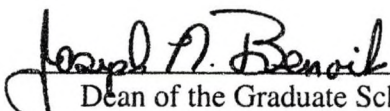
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Chairperson



This dissertation meets the standards for appearance, conforms to the style and format requirements of the Graduate School of the University of North Dakota, and is hereby approved.


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 Perspectives from Providers and Recipients of Service

Department Teaching and Learning

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Date July 6, 2004

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This work is dedicated to
the Research Consultation Team for hanging in there an entire year,

Kathy Gershman, my advisor, for being
the right combination of task master and cheerleader,

Dick DuBord for slogging through the first draft and for
getting me in academia in the first place,

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Maria, Michelle, and Anita
for supporting me through *both* of the big Ds.

ABSTRACT

This qualitative research study examined how social service providers and refugee recipients of public social services in a small city in an upper mid-western state described the intercultural knowledge and skills they felt were necessary for effective provision of services to refugees. The study sought to add to a body of knowledge related to the concept of “cultural competence,” a concept that has received increasing attention in human service fields over the past twenty years. Lum (1999) describes cultural competence as an outcome goal “related to the master of cultural awareness, knowledge acquisition, skill development, and inductive learning” (p. 12). Fong (2004) has added to the cultural competence literature by emphasizing the importance of migration context in work with refugees. Culturally competent human services are seen as necessary to combat ethnocentrism and to ensure culturally relevant services (Weaver, 2005).

While human service fields such as social work, counseling psychology, and nursing have extensively examined cultural competence in relation to their practitioners, very little has been written about the intercultural interactions of eligibility, or economic assistance, workers in the public social services. These individuals are frequently the gatekeepers for programs on which refugees heavily rely in their first months, or years, of resettlement. This study used grounded theory methodology to gather, analyze, and compare data from semi-structured interviews with county eligibility workers, county

social workers, former refugees, and providers from other human service fields (called “stakeholders” in the study).

The study found that county providers, both eligibility and social workers, relied on program policies and rules, their personal value systems, and a generic set of helping attitudes to guide their work with refugees. In contrast, stakeholders discussed an interplay of self awareness and relationship-building as primary skills in their intercultural work and refugee interviewees articulated a need for “human connection” in interactions with county workers. The findings indicated that county providers relied minimally on the professionally-defined knowledge and skills of cultural competence and that, in the absence of these skills, county programs and workers serve primarily to indoctrinate refugees into dominant American cultural norms and practices.

CHAPTER I

INTRODUCTION

Researcher's Personal Context

The qualitative research literature is replete with discussion of the person of the researcher in relation to her or his research (Meloy, 2002; Ellis & Bochner, 2000; Fine, 1998; Seidman, 1998; Duck, 1997; Rubin & Rubin, 1995; Maykut & Morehouse, 1994; Okely & Callaway, 1992). Maurice Punch (1998) points out, however, that aspects of the researcher that impact on the "politics of research," such as personality and institutional background, are not always clearly articulated by the researcher in the research process or in his/her report. I would like to briefly articulate some of those aspects up front so as to demonstrate some of the personal motivation for, or "the politics" of, this study.

Intercultural experiences and relationships, professional work in social services, exposure to progressive political and theological perspectives, and social movement involvements have come to define who I am, how I see the world, and what I choose to do professionally. Prior to teaching full-time in the social work department at an upper mid-western state university (my current employment) I spent approximately seven-and-a-half years at a family service agency in Camden, New Jersey working, sequentially, as a family therapist, program coordinator, and multi-program administrator. Over 70% of the families this agency served were African American or Latino. I often worked collaboratively with a variety of other public and private social service agency staff.

I spent all of the 1980s engaged in community education and organizing in what was then called “the peace and justice movement.” Most of my work involved education and advocacy around Central America-related issues. Also in the 1980s and concurrent to the community work, I received a Master of Arts in Latin American Studies from Vanderbilt University, a Master of Divinity from Union Theological Seminary in New York City, and a Master of Science in Social Work from Columbia University in New York City. In the late 1970s, I completed a Bachelor of Arts in Spanish at DePauw University in Greencastle, Indiana and then spent a year-and-a-half teaching third grade at an Episcopal school in La Ceiba, Honduras. I grew up the daughter of a United Methodist minister and he and my mother were progressive-minded and outspoken on many social justice issues over the years.

I helped start and am currently involved with two institutional- and community-based organizations (TOCAR--Training Our Campuses Against Racism, and the Justice Circle) that work to address institutional racism and promote racial justice and equal rights. In the courses I teach I try to help students develop their own cultural self-awareness and build the knowledge and skills for intercultural work in a variety of contexts.

I agree with Elsie Smith (1991), Cornel West (1993), Janet Helms (1992), Louise Derman-Sparks and Carol Brunson Phillips (1997), Beverly Daniel Tatum (1997), Rita Hardiman and Bailey Jackson (1992) and many others who contend that race and ethnicity continue to dramatically determine individual and institutional power and privilege in the U.S. and that the work to end racism is primarily the responsibility of those of us who are white. I believe that all forms of oppression are interlocking in very

complex ways and are manifested at the individual, institutional, and cultural levels. I believe that addressing social oppression and social problems is best done through collective inquiry and problem solving, with the full participation, and leadership, of those most effected by the problem. I try to think critically, I strive to be compassionate and kind, I am an energetic, big-picture kind of person, and I am proud to be a social worker with all the history, knowledge, values, and skills that accompany that designation.

It is this personal context that motivated my interest to examine the intercultural work of a group of county social service providers, both eligibility workers and social workers. I wanted to further my understanding of the concept of “cultural competence” so as to enhance my abilities as a social work educator and to contribute to my discipline’s body of knowledge around this concept.

The following section provides the study’s research question, defines terminology used in the study, and elaborates on the study’s rationale.

Research Question, Terminology, and Study Rationale

Research Question

One element in the justification of a research study is the project’s purpose or “substantive focus” – how the study offers significance to larger theoretical or policy issues (Marshall and Rossman, 1989). The purpose of this qualitative research project was to add the voices of study participants to a body of knowledge regarding the concept of “cultural competence” in the delivery of social services. Cultural competence speaks to the ability of social service practitioners and agencies to ensure culturally-relevant, client-centered outcomes in work with diverse populations. Cultural competence is a

process goal and requires, at minimum, ongoing development of cultural self-awareness, substantive knowledge of other cultures, and intercultural communication and interaction skills. National demographic trends and continuing overrepresentation of persons of color as public social service clients have placed cultural competence at the forefront of social service research, educational, and service agendas. Without cultural competence, social service providers and agencies are unable to effectively meet clients' needs, work collaboratively with diverse communities, and overcome institutional barriers to client self-determination and well-being.

The upper mid-western state in which the study took place has seen its own demographic changes and has, in fact, been the recipient of hundreds of resettled refugees over the last decade. I was curious as to how local public social service providers viewed their own intercultural knowledge and skills as they provided services to refugees. Minimal information exists in human services literature regarding the intercultural work of *non-social work social services* staff, such as eligibility workers. This study provides data from interviews with both county social workers and eligibility staff. The study also explored refugees' and community human service professionals' views on county services and what knowledge and skills they considered necessary to intercultural service work (community human service professionals were those social service providers outside the county system and are called "stakeholders" in the study). The study sought to answer the research question:

How do local county social service providers, community human service stakeholders, and refugee recipients of social services describe intercultural knowledge and skills in the context of social service interactions?

A more in-depth discussion of the rationale for this research focus will follow a section clarifying terminology used in the study.

Terminology

Social Services

Social services are those activities and programs designed to restore or enhance individual, family, or group functioning. In this broad sense, social services are often called “human services” and refer to both “universal services” used by everyone (education, health, public recreation, etc.) and services for those with special needs (economic assistance, child protection, counseling, subsidized housing, nutrition programs, childcare, etc.) (Kahn, 1979). But as Kahn (1979) points out, the “poor law” legacy of social services in the United States maintains an undercurrent of stigmatization, particularly toward those who need income assistance and

[t]he notion that all who receive financial relief may be assumed to require personal guidance and rehabilitation has died hard. Nor has there been easy and immediate acceptance of the view that social services may have something to offer people who are not poor. Yet anyone could see that public education activities are valid for all – and many viewed public health services in the same way.

Small wonder then that, in the United States, education and health were not termed “social services” and that other countries introduced the concept “social *welfare* services” specifically to identify programs for the needy and those in need of “help” rather than “service” – that is, those who were the objects of control or reform (p. 22).

Although Kahn wrote the above in the late 1970s, his contention regarding social services holds true today. Social services are generally seen as activities in response to special, not universal, needs, and while social services are utilized by persons across the socioeconomic continuum (especially services such as psychotherapy and child care), the term itself is generally reserved for those contexts such as “county social services” or a

detention center's "office of social services" that provide basic social support functions such as economic assistance, case management, information and referral, and group counseling. Community centers, hospitals, and churches may also have departments of social services and these departments generally offer services other than those considered universal. Depending on the service and its context, utilizing social services may still have a stigmatizing effect on people, hence terms like "welfare mom."

Social services may be provided in the context of private (for-profit or nonprofit) or public social service agencies. *Public* social services are those funded by tax dollars and provided by a public social service agency (such as a county agency providing economic assistance or child protection services or a state employment or job skills program). While public social service agencies provide a wide array of services to people across the socioeconomic spectrum, low-income individuals, persons of color, and refugees and immigrants are frequent recipients of public social services. This study primarily examined the experiences related to provision of *public* social services, although stakeholder experiences were also explored.

The terminology used in public social service agencies to describe the position titles of workers in the agencies varies according to job description and service department. Job titles may include, among others, eligibility worker, case manager, social worker, intake worker, etc. Although job titles will be referenced in the study, the generic terms "county provider," "county worker," or just "provider" are used to describe those study participants delivering county services.

Intercultural Experiences

Querio-Tajalli and Smith (1998) describe “culture” as “the prescribed norms of conduct, beliefs, values, and skills of a given society” (p. 205) and the field of communication routinely defines and discusses terms used to describe the dynamics that take place when people from different cultures interact: “intercultural,” “cross-cultural,” “interethnic,” “international,” and “transcultural” (Jandt, 2004; Thurlow, 2004; Lustig & Koester, 2003). The social service fields have placed less emphasis on defining terms and tend to use “intercultural” and “cross-cultural” interchangeably. My choice in the context of this study is the term “intercultural” which refers to one-to-one encounters between individuals of different cultural groups, as opposed to “cross-cultural” which generally refers to the examination of some concept across cultures (Jandt, 2004).

Cultural Competence

In the broadest sense, *cultural competence* has been defined as “respect for difference, eagerness to learn, and a willingness to accept that there are many ways of viewing the world” (Lynch & Hanson, 1992, p. 356). It is a term that has come into common use over the past twenty years in social work and other human service fields and refers to a capacity that has emerged as a hallmark of effective social service practice.

Cultural competence is discussed in the literature as a developmental issue for both individuals and organizations (and is also used in reference to communities). In other words, an organization as well as an individual can be viewed as culturally competent. In both cases, cultural competence is more of a process than an end result, with a commitment to continued learning and accountability to culturally diverse groups as central features of the process. There is a growing body of literature related to models,

problems, and characteristics of organizational cultural competence (Hyde, 2004; Nybell & Gray, 2004; Iglehart, 2000; Nash, 1999; Colon, 1996; Cross et al., 1989). The study outlined in the following pages primarily examines individual, not organizational, cultural competence.

Definitions of cultural competence generally reference the knowledge, attitudes, and skills necessary to work effectively in intercultural situations (Diller, 2004; Fong, 2004b; Lecca et al., 1998). Doman Lum, author and researcher on cultural competence in the field of social work, describes cultural competence as the area related to “experiential awareness of culture, ethnicity, and racism” (Lum, 1999, p. 12) and as an outcome goal “related to the mastery of cultural awareness, knowledge acquisition, skill development, and inductive learning” (p. 10). Table 1 shows examples of the most basic level of cultural competency in each of Lum’s four goal areas mentioned in the previous sentence.

Table 1. Examples of Lum’s Cultural Competencies

Cultural Awareness	Knowledge Acquisition	Skill Development	Inductive Learning
<ul style="list-style-type: none"> • Awareness of own life experiences related to culture • Contact with other cultures and ethnicities • Awareness of positive and negative experiences with other cultures • Awareness of own racism, prejudice and discrimination 	<ul style="list-style-type: none"> • Understanding of terms related to cultural diversity • Knowledge of demographics of culturally diverse populations • Knowledge of strengths of people of color • Knowledge of culturally diverse values 	<ul style="list-style-type: none"> • Knowledge of how to obtain client background • Use of self-disclosure • Use of positive and open communication style • Establishment of culturally acceptable goals • Assessment of stressors and strengths 	<ul style="list-style-type: none"> • Participation in continuing discussions of multicultural social work • Gathering new information on cultural competency and culturally diverse practice

(Lum, 1999, pp. 32-33)

This study examined how participants interpreted their intercultural experiences with individuals who are culturally different from themselves and what awareness, knowledge, and skills flowed from these experiences. It is important to note here that the phrase “cultural competence” was rarely used in the study either by the researcher or study participants. At the entry stage of the project, I was informed by agency administrators whose staff I would be interviewing that the term “cultural competence” carried with it the negative connotation of “cultural *in*competence” and that I might want to avoid terminology that would create defensiveness. I took their advice, and interviews with providers revolved around questions such as “what particular skills do you use in working with refugees that you do not use in working with American born clients?” or “if you were to speak to a class of social work students, what would you tell them they need to know about working with refugees?”

Refugees

The U.S. government uses a variety of designations to classify immigrants, i.e., people who have settled in the United States and who are currently, or were previously, citizens of other countries. Immigrants with U.S. citizenship are “naturalized citizens,” attaining citizenship after a period of legal permanent residency. Immigrants without citizenship fall into one of the following legal status groups:

1. legal permanent residents, who have permanent resident visas (“green cards”);
2. refugees...and other humanitarian admissions;
3. temporary residents (mostly with visas for employment or education) [although these individuals are also termed “legal nonimmigrants”]; and

4. undocumented immigrants, who do not have authorization to be living or working in the United States (Capps et al., 2003).

In the 1990s, between 1,070,000 and 1,525,000 immigrants entered the U.S. each year, and each year between 70,000 and 125,000 were refugees and asylees:

...foreign-born people granted legal status due to a “well-founded fear” of persecution in their home countries. Refugee status is granted before entry to the United States. Refugee status may be granted to a group of persons, although each individual must also qualify for the status. Asylees must meet the same criteria regarding fear of persecution. Unlike refugees, asylees usually arrive in the country without authorization (or overstay a valid visa), later claim asylum, and are granted their legal status while in the United States. After one year, refugees and asylees are generally eligible for permanent residency. Almost all “adjust” their status and become [legal permanent residents], although they retain certain rights – for instance eligibility for major federal benefit programs – by virtue of their designation as refugees or asylees (Capps et al., pp. 8-9).

For this study, I chose to focus on the intercultural experiences of providers, stakeholders, and refugees because of the large influx of refugees into the selected community in the ten years prior to September 11, 2001. Also, although the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 resulted in a dramatic decrease in the use of public assistance by refugees and other immigrant groups, refugees, unlike other immigrant groups, continue to be automatically eligible for and are significant users of public benefits due to the paucity of resources they have upon arrival (Fix & Passel, 2002; Hing, 1998; De Vita, 1996).

Study Rationale

The rationale for this study’s focus on cultural competence emerges out of the interplay of four factors that increasingly represent a challenge to social service systems, particularly in rural America: 1) increasingly diverse communities 2) overrepresentation of and discrimination toward racially, ethnically, and culturally diverse people in social

service systems, 3) the continued predominance of white service providers in those systems and 4) the ongoing struggle of social service agencies to define and provide culturally competent services. To underscore the study's rationale, the four challenges mentioned above are examined below in more detail.

Increasing Diversity

Census 2000 information has made it clear that the United States is an increasingly diverse country. Between 1990 and 2000, the U.S. Hispanic population increased by 58% and the non-Hispanic Black population experienced an increase between 16% and 21% (Hispanics now rival, 2001). Hispanics and African Americans together now constitute approximately 25% of the U.S. population. American Indian and Alaska natives constitute 1% of the population, Asians 4%, Native Hawaiian and Other Pacific Islanders .1%, and those self identifying as "some other race" or "two or more races" constitute almost 8% of the population (U.S. Census Bureau, 2000). Immigrant and refugee populations have significantly influenced these demographics. Amendment of the Immigrant and Nationalities Act in 1976 and passage of the Refugee Act in 1980 paved the way for seven million immigrants from Asia between 1970 and 1997 and also allowed for a substantial increase in immigrants from the Caribbean and Latin America (Balgopal, 2000). At present, one out of every ten people in the United States is foreign born, with 51% from Latin America, 25.5% from Asia, 15.3% from Europe, and 8.1% from elsewhere in the world (Fong, 2004). Immigrants constitute 22% of the current U.S. workforce (Diller, 2004), and as Mary Pipher portrays in her book The Middle of Everywhere (2002), refugees from war-torn places all over the world have become the newest neighbors in towns throughout the U.S. heartland.

Overrepresentation and Discrimination

As dramatic as the numbers above are, they are even more significant when considered in relation to statistics from social service systems. In 1996, 39.9% of African American children and 40.3% of Hispanic children were born poor (Cohen & Contributors, 2000). African American children represented 49% of children in foster care and group care in 1995 (Morton, 1999). Native American children are also overrepresented in substitute care, and all minority children in substitute care tend to stay there longer in comparison with white children in out-of-home care (Cohen & Contributors, 2000). A study of children in out-of-home care published in 1994 (Montalvo), showed that

Latino children under age 7 were found to be less likely to have service plans than any other group of children. African American and Latino children were least likely to have contact with family members, although there were family members interested in visiting the children. Latino adolescents were more likely to be assessed as having behavioral problems and most likely to be placed in group homes (Montalvo, 1994, quoted in Nash, 1999).

Families of color are also disproportionately represented among those receiving AFDC/TANF benefits (welfare assistance to families with dependent children). Between 1994 and 1999, representation of African Americans in the welfare population increased from 36.4% to 38% and Latino representation increased from 19.9% to 24.5% (U.S. Department of Health and Human Services, 2000, as cited in Reisch, 2002).

In addition to overrepresentation, social service systems may operate out of stereotypes and dominant ideologies that have the effect of discriminating against culturally diverse groups by providing culturally insensitive services or no services at all. Examples include paternalistic attitudes in which services are dropped into the

community by an outside entity, system gatekeepers who limit access to services, “model minority” myths that impede access to services, policies that do not take cultural family norms into consideration, and perceiving culturally diverse subgroups as homogeneous (Iglehart and Becerra, 1995).

Refugees and immigrants faced a rising tide of discrimination and racism in the 1990s, culminating in legislation denying them access to social services. In 1994, California voters approved Proposition 187 which denied social services and benefits to illegal immigrants and required social service agencies to report suspected illegals to the INS, and in 1996, the federal Personal Responsibility and Work Opportunity Act eliminated Supplemental Security Income and food stamps for legal immigrants until they became citizens (Balgopal, 2000). Later federal legislation began restoring benefits to selected legal immigrant groups (children, senior citizens, disabled individuals).

Predominance of White Social Service Providers

Congruent with the overrepresentation of culturally diverse children and families in the social services system is a predominance of white Caucasian service providers in the system (McPhatter, 1997; Proctor & Davis, 1994). Within the field of social work, current statistics show that 88.5% of social workers are white (NASW Standards for Cultural Competence) and there appears to be a waning interest in social work careers among students of color (Dumpson, 2001). Social service training programs and professional associations continue to emphasize diversity and cultural competence content and agendas, but without the additional perspectives, skills, and input that multicultural staff may offer, agencies are likely to perpetuate solely Eurocentric worldviews and approaches to services (“Eurocentric” here refers to a perspective

inherent to many North Atlantic societies which places highest value on the ideals of self-interest, individualism, secularism, the rule of law, and frequently the “Protestant work ethic”).

Social Service Systems Continued Struggle to Become Culturally Competent

Social service agencies, both public and private, continue to struggle to provide culturally relevant services. Weaver (2005) outlines a number of factors that agencies consider when seeking to develop their cultural competence: the demographics and cultural values of their clientele and whether or not services are accessible and culturally relevant to various client groups; the cultural self-awareness and intercultural skills of staff at all levels of the agency; agency structure, philosophy, and policies and their ability to be culturally responsive; agency understanding of the dynamics of prejudice and oppression and how those factors impact clients; the amount and quality of cultural trainings offered to staff, and; the physical environment and reception services of the agency and the overt and covert messages those aspects deliver to clients. Normally, however, cultural competence is often vaguely defined, rarely recognized as a defining feature of an agency’s services, infrequently the topic of staff trainings, and seldom the center-piece of staff meetings, supervision, and informal discussions between workers. Cultural competence literature and my own work experience and discussion with social service staff seem to suggest that there are several broad categories of explanation for this situation.

- *Low priority.* Developing cultural competence is too frequently seen as a matter of simply becoming more “understanding” and “sensitive” to those from other cultures (McPhatter, 1997). In this approach, cultural competence is viewed as a secondary

layer of knowledge and skills added on to the more primary knowledge and skill base of the field. Given the urgent priorities of much of social services work – ensuring child safety, meeting subsistence needs, preventing family violence, and brokering treatment for mental health issues and chemical dependency – cultural understanding and competence is often seen as secondary to more critical knowledge and skills. This attitude is also reinforced by the long-standing assumption in social services work that there exists a generic set of practice principles applicable to everyone regardless of ethnicity or color (Lum, 2000).

- *Staffing issues.* Public social service agencies are generally staffed by workers who do *not* have a degree in a field like social work that exposes them to beginning knowledge, values, and skills of cultural competence. Educational background data collected in 1988 on 5,000 child welfare workers in 16 states showed that 70% of those workers had college degrees in areas other than social work (Lieberman, Hornsby, & Russell, 1988). Later studies indicate that, when staff do not have social work training, turnover is higher and staff are not as prepared to provide quality service (Zlotnik, 1998). In order to increase the number of social work-trained staff in public child welfare programs, a number of states have inaugurated Child Welfare Scholar programs using federal Title IV-E funds. These funds allow state universities to provide scholarship funds to bachelor's and master's level social work students for training in child welfare curricula and carry an obligation to seek employment in public child welfare programs. These programs, however, are limited in number and have yet to dramatically increase the number of social workers actually working in public child welfare (Council on Social Work Education, 2004). It should also be

noted that trained social workers are probably most present in child welfare services. Other public social service programs such as economic assistance employ even fewer social workers.

Recruitment and retention of *diverse* staff continues to be difficult for many social service agencies and front-line service providers are not exposed to routine and effective cultural competence training opportunities (Berger, 1989). This may be particularly salient in relation to work with refugees. Refugees often present with conditions and cultural backgrounds which require special support and understanding: post-traumatic stress; limited, if any, English-language ability; expectations of American life based on movies and hearsay; limited or no experience of minority status based on race; varying levels of familiarity with the tools and practices of daily American life (use of a can opener, refrigerator, public transportation, etc.); gender role norms which conflict with American dominant culture practices and with public assistance work requirements; and intergroup ethnic differences and conflict about which American service providers have little or no knowledge. The public social service providers often at the frontline of addressing the survival needs of New Americans are generally not degreed human service professionals, are burdened with large caseloads, may operate out of socialized stereotypes of diverse peoples, and, due to agency budgetary constraints, receive little substantive, ongoing training related to intercultural skill development.

- *Concern about discrimination.* Some social service administrators are disinclined to acknowledge cultural differences and implement cultural competence trainings and

culturally relevant practices for fear they might be perceived to be condoning discrimination (Nash, 1999).

- *Lack of critical content.* Despite the social work theoretical literature discussing power and privilege in relation to cultural interactions (Diller, 2004; Anderson & Carter, 2003; Dhooper & Moore, 2001), cultural competence in practice is rarely defined and discussed within a critical framework, examining issues of institutional oppression and of power and privilege in intercultural relationships and service provision. Without this critical framework, mainstream institutions and white service providers do not recognize that dominant Anglo-European perspectives underlying the delivery of social services, and particularly individual and institutional racism, can be unhelpful to, if not actually destructive of, efforts by diverse groups to enhance their social well being (Samantrai, 2004). With cultural competence viewed primarily as sensitivity to others, little examination is given to individual and institutional prejudice and racism, thereby ensuring the attitudinal and institutional status quo.
- *Top-down orientation.* Cultural competence trainings and expectations are generally reinforced by administrative directives, not as a result of mutual and authentic commitment to developing cultural competence by a collaborative effort of social service staff, clients, and community stakeholders. The top-down imperative promotes little on-going, enthusiastic buy-in on the part of workers.

The four factors discussed above, along with advocacy by families and professionals of color (Lum, 2000), have spurred social service providers, researchers, and educators to place cultural competence at the top of the educational and service agendas. Without cultural competence both at the individual and institutional levels,

social service arenas risk ever-increasing numbers of children of color in out-of-home placements, frustrated and angry workers and clients, continued dependency on economic assistance programs, and replication of dominant-subordinate group relations within a system which purports to promote empowerment, self-determination, and a collaborative approach to service recipients.

But as in other disciplines and with other issues, the theoretical rubber has yet to entirely hit the practice road. While there is an ever-increasing body of academic literature on cultural competence (Weaver, 2005; Diller, 2004; Fong, 2004b; Samantrai, K., 2004; Anderson & Carter, 2003; Cohen & Contributors, 2000; Lum, 2000; Lecca et al., 1998; Lynch & Hanson, 1992), this study sought to determine if any of this information was making its way into a local public social services agency and how (or if) the agency's frontline staff articulate and use intercultural knowledge and skills for work with refugees. I also intend to use the findings from this study to improve my own ability to train social work students in culturally competent practice.

Public social service agencies cannot wait for federal or state legislation to mandate hiring of social workers trained in cultural competence nor can they rely exclusively on the efforts of the few diverse staff or community advocates who may push for culturally competent services. Social service agencies need to develop their own individual mandate, processes, and outcome goals related to developing and maintaining cultural competence at all levels of the organization. Ideally, these processes will include participation from recipients of service and community stakeholders so as to ensure the utmost relevance for the specific cultural communities being served. If agencies can generate internal commitment to cultural competence through use of in-house processes

for understanding and encouraging cultural competence, it is much more likely that cultural competence will exist in practice as well as theory.

Organization of Study

The following chapters are organized according to research design, findings from refugee, provider, and stakeholder data, and study summary and discussion. I am responding to the comments of seasoned qualitative researchers (Meloy, 2002; Padgett, 1998; Wolcott, 1990) who have demonstrated that qualitative reports typically allow more creativity in their structure than do quantitative documents. Toward that end, and following Harry Wolcott's preference, I will not be placing all relevant literature "into a chapter that remains unconnected to the rest of the study" (Wolcott, 1990, p. 17). Instead, relevant literature will be discussed in tandem with the study's findings, both of which will be present with raw data from interviews. The final chapter will summarize and discuss study findings and briefly review study limitations and future research directions.

CHAPTER II

RESEARCH DESIGN

This chapter will discuss the study's research design by describing the research strategy, research site and participant recruitment, data collection methods, data analysis and management, and methods for increasing the trustworthiness of the study.

Research Strategy

Marshall and Rossman (1989) offer a guide for the selection of a research strategy by matching strategies with study purposes. If a study's purpose is exploratory, explanatory, or descriptive, a qualitative strategy is probably in order. If the purpose is predictive, a quantitative strategy is appropriate. Since this study intended to explore and describe the perceptions of public service providers, refugees, and stakeholders in relation to intercultural experiences and skills, a qualitative research strategy was chosen. Five qualitative research strategies discussed by Creswell (1998) include biographies, phenomenological studies, grounded theory studies, ethnographies, and case studies. The strategy employed in this study was a grounded theory approach since the study aimed to develop "an abstract analytical schema of a phenomenon that relates to a particular situation" (Creswell, 1998, p. 56). In addition, grounded theory supports flexibility in development of the research question and methodology, and ultimately offers the possibility of further qualitative or quantitative testing due to the variables that emerge from the data (Creswell, 1998). The strategy also offers detailed procedures for gathering

and analyzing data and is "suitable for studying individual processes, interpersonal relations and the reciprocal effects between individuals and larger social processes"

(Charmaz, 1996, pp. 28-29). The basic methods of grounded theory include:

1. simultaneous involvement in data collection and analysis phases of research;
2. creation of analytic codes and categories developed from data, not from preconceived hypotheses;
3. the development of middle-range theories to explain behavior and processes;
4. memo-making, that is, writing analytic notes to explicate and fill out categories...;
5. theoretical sampling, that is, sampling for theory construction, not for representativeness of a given population, to check and refine the analyst's emerging conceptual categories; and
6. delay of the literature review (Charmaz, 1996, p. 28).

In addition to a grounded theory approach, I added a participatory element, a research consultation team, to the research strategy since my respect for critical educators and participatory research methods inclines me toward "research 'with' rather than 'on' people" (Heron & Reason, 2001). Participatory research (and its various relatives such as participatory action research, action science, and co-operative inquiry) has its origins in the work of Kurt Lewin (1946) and William Foote Whyte (1943) who involved "subjects" in their research projects. The methodology is also related to the critical education work of Paulo Freire (1970) in South America and Myles Horton (1990) in the United States. Researchers such as Stephen Kemmis and Robin McTaggart (2000), Ernest Stringer (1996), and many others (see Reason & Bradbury, 2001, for a collection of writings) have contributed to the developing theory and practice of participatory, and particularly action, research. In the last two decades, participatory research methods and critiques of the methodology have found their way into social service practice and

publications (Healy, 2001; DePoy, Hartman, & Haslett, 1999; Reese, Ahern, & Nair, 1999; Bargal & Schmid, 1992; Curtis, 1989).

Stringer (1996) notes that the common threads running through participatory methods are “processes that engage people who have traditionally been called ‘subjects’ as active participants in the research process [and that] result in some practical outcome related to the lives or work of the participants” (p. xvi). The five individuals who comprised the research consultation team were drawn from the three interview groups, and were interviewed as participants. Their contributions to the study were invaluable to me on a number of levels and were critical to the integrity of the project. Details about the work of this team can be found on pages 30-31 below.

With a specific research strategy chosen, grounded theory with a participatory element, and given Institutional Review Board requirements for detailing research methods, my research design was preconceived and fairly well structured going into the study. But qualitative research is, by nature, emergent rather than preordinate (Lincoln & Guba, 1985) so aspects of this study changed over time. Additional components of the design, and changes that occurred, follow below.

Research Site and Participant Recruitment

Four different groups of individuals participated in this research project: county social service providers; Somali and Bosnian refugees; community stakeholders (human service providers, such as employment counselors or medical social workers, who frequently worked with the same population of refugees as the county workers) and; five individuals who constituted my research consultation team (two county social service supervisors; one member of the Bosnian community, one member of the Somali

community, and a community stakeholder). Each of these groups will be discussed separately according to how they were recruited.

Public Social Service Providers

An upper Midwest county public social service agency with diverse refugee clientele was chosen for the research setting. For ease of reference, the agency is called Allen County Social Services, or ACSS, in the study. The town in which it is located will be called Plainsville. Allen County Social Services provides an array of services for refugees including cash assistance, food stamps, childcare financial support, energy assistance, housing referrals, and medical assistance. Indeed, ACSS and its programs can be a lifeline for refugees in their early stage of resettlement.

Within ACSS, staff are divided into units according to the services they facilitate or provide. The majority of refugee clientele comes into contact with those individuals known as "eligibility workers"-- staff who determine an individual's eligibility and amount of support for programs such as food stamps, childcare, medical assistance, cash assistance, and energy assistance. It was this group of workers that I was particularly interested in interviewing because of their contact with refugees and because little has been written in the human service literature about how this group of providers views and carries out its work with diverse clientele.

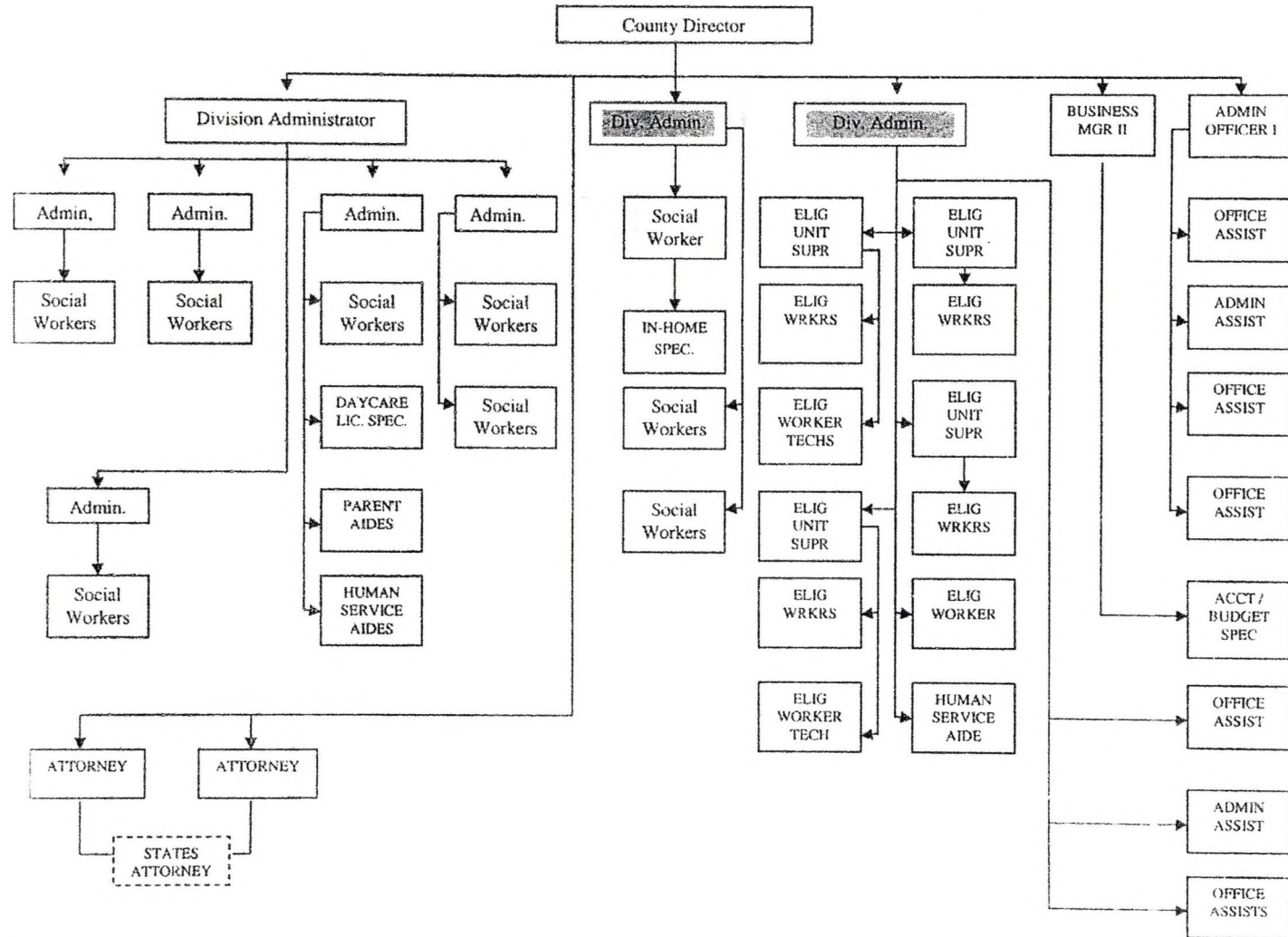
To gain access to the county agency and its staff, I first approached the primary gatekeeper of the organization, the agency director. I discussed the purpose and methodology of the study with the director and once the director granted permission for the study, I met with the agency director and division administrators at an administrators' meeting to discuss the study and to ask for an administrator to volunteer her or his

division for the study (from which I would solicit volunteer participants). This overt approach to research site access is consistent with ethical practices of qualitative research and also ensures support for the study (Maykut & Morehouse, 1994; Becker, 1970, as cited in Maykut & Morehouse, 1994).

Although I was planning on interviewing workers from only one division (and hoping that at least one would volunteer!) two administrators volunteered units from their divisions (see Figure 1 below for the ACSS flow chart. The two administrators who volunteered their divisions are highlighted). One of these administrators oversees the economic assistance division that contains four eligibility units whose staff determine eligibility for public assistance programs and carry out some case management tasks. Direct service staff in these units carry the title “eligibility worker,” “eligibility worker technician,” or “eligibility worker supervisor.” This administrator offered me access to staff in all four of the eligibility units. Employees of this division are not required to hold a bachelor’s degree, although some do, and one holds a master’s degree. None holds a social work degree. With the exception of one Native American and one Hispanic employee, all staff in the division are white. Two of the eligibility units meet independently each month and two meet jointly each month.

The other administrator oversees the adult services division which contains three units whose staff provide home and community based services to clients. The staff in these units carry the title “social worker” or “in-home care specialist.” This supervisor offered me access to one of the home-based social work units. The unit contains seven workers, all white, all licensed social workers. This unit has its own monthly meetings.

Allen County Social Services



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Figure 1. Allen County Social Services Flow Chart

The two division supervisors also volunteered to be on the research consultation team. Although the study was now somewhat larger than I had originally anticipated, access to both eligibility staff and social work staff offered an opportunity not only to gather information about intercultural knowledge and skills, but to compare information gathered from workers trained in the social work field with information from those with other educational backgrounds (the eligibility workers).

I attended four unit meetings (3 eligibility and 1 home-based) in which I discussed the study's purpose and methodology with each unit's workers and answered their questions. (Prior to the meetings, I had asked the unit supervisors to acknowledge their support for the study and to encourage staff to participate. They did so. I also asked for and received the supervisors' permission to attend future meetings.) In these introductory meetings with staff, I explained that I was interested in learning what knowledge and skills they had developed through their work with refugee clients and that I hoped to use the research project to improve my ability to train social work students. I also reviewed informed consent procedures, stating that their participation was voluntary and that they could withdraw from the study at any time. I explained that their signed consent would be acquired and that practices of confidentiality would be maintained in the study through the use of pseudonyms and by the fact that access to taped interviews was limited to relevant institutional review boards. I also informed them that they would receive no compensation for their interviews. As Seidman has pointed out (1998), this issue of reciprocity can be of concern to researchers since the researcher seems to be gaining the most from the research relationship. I told the staff that their participation

would contribute to an expanding knowledge base regarding intercultural experiences and skills and that they might find participation enjoyable and possibly informative.

After discussion of the study, questions and answers, and asking their permission to attend future meetings (which they gave), I distributed a form on which workers could provide their names and contact information if they were willing to be interviewed (see Appendix A). This purposeful sample selection (Maxwell, 1996) was employed rather than random sampling since, as is the case with qualitative studies, I was looking for depth of information from a particular group of people rather than representativeness for generalizability purposes (Padgett, 1998). From the three eligibility unit meetings, and out of 33 eligibility workers, 19 signed up to participate, with four of these later declining to be interviewed. A total of 15 eligibility workers were interviewed. From the home-based unit and out of seven possible social worker participants, all seven agreed to be interviewed. Four eligibility worker supervisors also agreed to be interviewed as well as the two division supervisors who were also on the research team. Two office assistants volunteered to be interviewed, but one later declined. The other office assistant was interviewed. A total of 29 individuals from the county agency became study participants – 20 eligibility staff, eight social work staff, and one office assistant.

From the information provided on the contact sheets distributed at unit meetings, I emailed or phoned individual workers to arrange interviews. It was at this point that some workers declined to participate. With those who agreed to be interviewed, I offered to meet them at a time and place that was convenient to them. All provider participants chose to meet during the work day in their offices.

Refugees

After the two administrators volunteered their divisions for participation, I met with them together and again explained the purpose and methodology of the study and asked about refugee demographics in their respective divisions. They informed me that approximately 10% of eligibility clients were refugee and approximately 5% of home-based clients were refugees, with Bosnian and Somali groups comprising a large share of these percentages. I chose these two groups to interview and because of their client status with the county and state, I applied for and received permission to conduct the interviews from the Institutional Review Board of the North Dakota Department of Human Services.

I hoped to interview refugees with wide variance of characteristics, (professional status, length of time in the U.S., family size, etc.), but I also chose to eliminate the additional interpretive level that comes with translation services by only interviewing those individuals who spoke English. This would make interviewing easier for me, but would minimize the variance continuum.

My original approach to acquiring Somali and Bosnian participants was to ask an ACSS provider, at the end of my interview with her/him, if they had Somali or Bosnian clientele to whom they could refer me. I explained to providers that my purpose in interviewing refugees was to better understand refugee impressions of the helping process. With those providers who said they did have refugee clients I might interview, I asked them to contact the client first and I gave them a script they could use when speaking with refugee clients. The script included the statement that refugee clients would be offered a \$10 gift certificate to the local mall in exchange for being

interviewed. (I developed and provided the script after one provider I interviewed early in the process suggested this idea.)

Although several providers told me they had refugee clients I might be able to interview, my original recruitment method resulted in only three refugee names being passed on to me. Two of these individuals declined to be interviewed and the third agreed to an interview but declined to sign the consent form at the time of the interview. I do not know all the reasons why this recruitment method failed, but, frankly, I'm glad it did. Interviewing refugees who were directly referred to me by their county workers might not have resulted in the most open of interviews, even though I was guaranteeing confidentiality. It was a flawed method to begin with. After change of procedure approvals from the IRBs, I acquired refugee participants via stakeholder referrals, and snowball sampling (Kuzel, 1992; Taylor & Bogdan, 1984). Two of the refugee participants were also members of the research team. Basically, my sampling strategy changed from "maximum variance" to "convenience" (Lincoln & Guba, 1985) but I believe the interviews I received were informative and moved the research forward.

A total of 12 individuals were interviewed resulting in ten usable interviews (one interviewee, the same one mentioned above, declined to sign the consent form although he talked with me for 20 minutes. The second individual was a refugee but not Somali or Bosnian. She was the friend of and present at an interview I had with a Somali individual. She contributed to the conversation but I did not ask her to sign a consent form and have not used her data in the analysis.) One of the Bosnian interviewees was not a refugee but had come to this country after marrying a refugee, whom I also interviewed. Both individuals wanted to participate in the interview so they both signed

consent forms and were interviewed jointly. The refugee participants in this study might more accurately be referred to as *former* refugees since when I interviewed them they had been in the United States long enough to qualify for legal permanent resident status. But since I was interested in their experiences with county social services as resettled refugees, I continue to use the designation “refugee” for the participants in this study.

All refugee participants were adults with varying levels of English proficiency and all, except one, were interviewed in their homes or places of work at times they selected. One Bosnian participant chose to come to my office to be interviewed. All were offered, and accepted, \$10 gift certificates to the local mall.

Stakeholders

“Stakeholders” were individuals in the community who also provided some type of human service to refugee groups thereby having a stake in the adjustment of refugees and in the work of the county agency. The one exception was an individual who did not provide direct service to refugees but worked with other county clients through a community-based program. Stakeholders included individuals from the educational system, health system, employment assistance system, refugee resettlement system, family services, and mental health system. Stakeholders were recruited using a purposeful sampling approach since I wanted to hear the perspectives of individuals from the different systems just listed. Out of the nine stakeholders interviewed, two were individuals I already knew of and wanted to interview. The other seven were individuals I met at county provider meetings (they were present as guests) or were recommended to me by providers I interviewed or by members of the research consultation team. Except for one individual whom I interviewed at my house, all stakeholders were interviewed at

their offices and at times convenient to them during the work day. Stakeholders were not offered remuneration for their interviews.

Research Consultation Team

Recruitment of research consultation team members was also purposeful given my interest in having team members drawn from the participant groups. Additional selection criteria included availability and willingness to meet monthly, ability to speak English, and interest in the purpose of the study. As mentioned earlier, the two ACSS division supervisors who volunteered their divisions for participation in the study also volunteered to be on the team. Their history of and current roles in provision of services, and their agency gatekeeping functions, made them appropriate team members. The stakeholder member of the team was a provider from a private, non-profit family service agency and she routinely worked with ethnically diverse individuals, although not refugees, who were also county clients. I knew her from some collaborative work we did in the community, I respected her as a professional, and she accepted when I asked her to be on the team. The Somali and Bosnian representatives on the team were recommended to me by social workers in the community who knew these individuals to be active in the community on behalf of refugee issues and who might be interested in this project. I approached them and to my pleasure they accepted.

Team members each signed a consent form (Appendix D) and the team met twelve times, almost monthly, for one to one-and-a-half hours over lunch that I provided, from October 9, 2002 to February 23, 2004. Not all team members could make every meeting, but between three and five members, excluding myself, attended each meeting.

I gave a \$10 gift certificate for each meeting to two members who used their own time from work to attend.

In the beginning stage of the project, team members reviewed interview questions I planned to use and made recommendations of additional questions. The Somali and Bosnian team members reviewed the Somali and Croatian consent forms to ensure their accuracy, and members of the team recommended potential refugee and stakeholder interviewees. When I began analyzing interview data, I explained the coding, category, and theme development process to the team and for several meetings they read portions of interview data and we discussed emerging categories and themes. Given their familiarity with interview data, their questions and comments offered validation of the developing analysis.

Data Collection Methods

Data collection took place through standard grounded theory mechanisms -- observation, interviews, and document analysis (Strauss & Corbin, 1998; Charmaz, 1996; Corbin & Strauss, 1990). The details of each method used are outlined below.

Observation

Observation involved "event observation" of ten staff meetings between October 2002 and August 2003 (ten hours and 15 minutes total), and eight "setting observations" (ten hours, 30 minutes total) in the agency's second and fourth floor client waiting areas between November 2002 and December 2003. The primary purpose of both types of observations was to gather additional information that might inform the interviewing process.

I observed three meetings of the home-based unit and seven meetings of the eligibility units. I arranged attendance at meetings with unit supervisors ahead of time and in my first unit meetings I again introduced myself and explained the purpose of the study and informed meeting participants that I would be taking notes to help me remember meeting content and to inform my interviews with staff. This explicit recording approach to field notes is recommended by Emerson, Fretz, and Shaw (1995) as part of the process of creating honest relationships with study participants. Each meeting usually lasted approximately one hour, with most unit staff present (some of whom were my interviewees, some of whom were not) and with the unit supervisor facilitating the meeting. Meeting agendas revolved around announcements about new community programs, staff issues, or changes in policies or guidelines, problem-solving related to policies, and guest participants discussing new programs or client-related issues (such as mental health issues or dealing with client non-compliance with program policies). In the first meetings I attended, I participated as “complete observer,” moving to “observer-as-participant” (Burgess, 1984, as cited in Waddington, 1994) in the second and third meetings as everyone became more comfortable with my presence and as I occasionally asked questions or responded to questions they asked me.

My field notes from these meetings ranged from “jottings” to almost “full field notes” (Emerson, Fretz, & Shaw, 1995) depending on my interest in the topic being discussed. In one conversation dealing with refugees, I took eleven pages of notes, occasionally noting verbatim comments. The field notes were primarily descriptive in nature—who was in the room, topics discussed, summaries of what was said—but, as is recommended (Emerson, Fretz, & Shaw, 1995; Maykut and Morehouse, 1994; Taylor &

Bogdan, 1984), I also documented my own thoughts, feelings or questions, bracketing these observations in the midst of the other notes.

I also took field notes during the eight waiting room observations. All of these observations took place in the morning or mid-day and all, except two, took place in the first or second week of the month when, as I was told by receptionist staff, the waiting area is particularly busy because of reporting deadlines. In these observations, I sat in a row of chairs that provided me a view of the entire waiting area and, while pretending to be "waiting" and taking notes on a book I held, I observed and made notes on the comings and goings of people, their demographics (or my guess at it), and their interactions with each other and with agency staff. I also drew pictures of the physical space and the objects in it and made notes on décor, reading material available, posters, and other such objects. Occasionally I kept track of the amount of time someone waited to be seen or bracketed a question to myself.

When I first began observing, on a couple of occasions a staff member would recognize me and come over to say hello and chat a minute. When asked if I were waiting for someone, I said that no, I was just observing. During future observations, if staff saw me they might smile and wave, but the word must have passed around that I was observing, because no one came over to chat (or they were just too busy!). On one occasion, a non-staff person I knew came into the waiting room, recognized me, came and sat beside me and we chatted until he went in to talk to someone. At no point did either of us ask the other what we were doing there. Besides these instances, I had no other interactions while observing the waiting area.

Interviews

In addition to observations, exploratory, open-ended interviews were conducted with provider, refugee, and stakeholder participants. I contacted each participant via phone or email and arranged a time and place to meet that was convenient for the participant. Each participant was interviewed once, for one to one-and-a-half hours, with one interview lasting approximately two hours. Seidman (1998) points out that a 90-minute interview accommodates both sufficient time to gather data and is the outer limit of the average attention span.

Although there is no hard-and-fast rule regarding what constitutes a sufficient number of interview hours for a grounded theory study (Strauss & Corbin, 1998), I believe that the data analysis shows that the approximately 43 hours of provider interviews resulted in "theoretical saturation" (Strauss & Corbin, 1998). While more refugee and stakeholder interviews would be useful to fill out the perspectives of these groups, analysis of the data does offer contrasting and complementary perspectives to the provider data, which was the point of interviewing refugees and stakeholders.

At the beginning of an interview, I discussed informed consent with the participant, providing a consent form for the participant to sign (see Appendices B-D) which detailed the researcher's context, the purpose of the study, study methodology, potential risks to the participant, rights of the participant (such as withdrawal), audio taping of the interview, and contact information for individuals to whom the researcher is accountable. Bosnian and Somali participants were given consent forms in English and an abbreviated version in either Somali or Croation (see Appendices E and F). Consent forms had been translated by the Minnesota Translation Laboratory at the University of

Minnesota in Minneapolis. The Somali and Bosnian members of the research consultation team reviewed the translated consent forms before I used them and confirmed that they accurately reflected the wording and intent of the English consent form.

All aspects of the informed consent statement were discussed with participants, and I encouraged them to ask questions, which I answered. Each participant was asked to choose a pseudonym to be used for labeling audiotapes, notes and memos, and in the final report. Participants were told that no identifying information (hometown, high school name, etc.) would be used in the final report. After the first interview, each participant was sent a copy of her/his signed statement of informed consent. Although controversy exists regarding the viability of informed consent in qualitative research, particularly in ethnographic research (Punch, 1998), informed consent is a necessary ethical requirement for most qualitative research and also lays the groundwork for an honest, substantive interview relationship (Christians, 2000; Seidman, 1998; Rubin & Rubin, 1995).

I began each interview by gathering information about the individual's background and life trajectory, leading up to a discussion of current aspects of the individual's life. With the assistance of the research consultation team, I developed an "interview guide" -- several main categories of questions -- (Patton, 1990, as cited in Maykut & Morehouse, 1994) but I was mainly interested in encouraging spontaneity and a conversational dynamic (Rubin & Rubin, 1995). This dynamic generally involved me asking main questions, probes, and follow-up questions (Rubin & Rubin, 1995). In this way, the interviews were formatted in a semi-structured nature, allowing me the flexibility to

gather as much "rich" data as possible. The interview guide for county providers and stakeholders contained questions such as:

- "Please tell me where you were born and raised and something about that town or area."
- "What were the ethnic backgrounds of your parents?" "What can you tell me about your family history?"
- "Did you have much interaction with different cultural groups when you were growing up?" "When was your first encounter with someone from a different ethnic/racial group?" "What was that like?"
- "What do you do at this job?" "What do you like most/least about it?"
- "Tell me about the first time you worked with a refugee."
- "What have you learned about the different refugee groups?" "What have they taught you?"
- "What particular skills do you use in working with refugees that you do not use in working with American born clients?"
- "Tell me about the most challenging situation you've had in your work with refugees and how you handled it."
- "If you were to speak to a class of social work students, what would you tell them they would need to know about working with refugees?"
- "If you were on a committee that was using \$5 million to enhance your work and your agency's work with refugees, what would you recommend the money be used for?"
- "If you were on an orientation team in Germany or Kenya that was providing orientation to Bosnians or Somalis who were preparing to come to this country, what would you say to them to prepare them for Plainsville?"
- "In your opinion, what do refugees most need in order to adjust to life in this community?"
- "What is your perspective on the effectiveness of the social service system in its work with refugees?"

The interview guide for refugees contained questions such as:

- "Please tell me about the place where you were born and raised."
- "How did you happen to come to this country?"
- "What was life like, in [your home country], before you moved here?"
- "What was life like, in [the refugee camp or host country]?"
- "What was your impression of the United States prior to living here?"
- "What did you think of Plainsville when you got here?"
- "How is life different here than in [name of home country]?"
- "What has been most difficult about adjusting to life in this community?"
- "Tell me about your experiences of applying for assistance and getting help from different agencies."

- “If you were to give a training to people who work at Allen County Social Services or at other agencies, what tips would you give them about how to best do their work in providing services to New Americans?”
- “If you were going to come to one of my classes and talk to students about how to be a good social worker in working with people from other cultures, what would you tell them?”
- “If you were going to go to [Germany or Kenya] to talk to other [Bosnians or Somalis] who were getting ready to come to this country, what would you want to tell them to be prepared for?”
- “Do you hope to return to [home country] or do you want to stay in this country/community?”

Each interview was transcribed by a transcriber I employed who signed a statement of confidentiality regarding the content of the interviews. I sent a copy of the transcribed interview to each participant with a note asking that the participant respond with any corrections or comments. I made myself available to each participant for conversation and/or follow-up interviews regarding the transcribed interviews. Only one interviewee, a Bosnian participant, called me after receiving the transcription with a request to change his pseudonym, which I did.

Document Analysis

The third method of data collection was agency document review. Document analysis combined with observation, interviews, and the researcher's own field notes and memos reflects a data collection principle known as "triangulation" -- collecting information with a variety of methods from a variety of sources (Fine, Weis, Weseen, & Wong, 2000; Maxwell, 1996; Denzin, 1970).

In addition to agency manuals, I had also planned to review the case files of agency refugee clients that I interviewed. But as mentioned above, recruitment of refugees did not take place via referrals from county providers, and since several of the refugees I interviewed were not currently receiving public assistance, I decided against

case file analysis. Instead, I focused exclusively on agency manuals and I borrowed copies of the adult services and economic assistance units' policy and procedures manuals (six manuals total) from the division administrators on the research consultation team.

As Patton (1990) notes, program documents serve as a source of information about program history and activities and can further inform the researcher's interviewing and observational processes. I was interested in both purposes but particularly the former since I wanted to understand what official protocols, trainings, etc. the agency provided, and viewed as important, in relation to work with refugees. It became apparent rather quickly, however, that the manuals were designed exclusively to offer detailed guidance to workers related to carrying out basic job functions including determining client eligibility for programs, when to sanction or terminate a client, when to "cure" a sanction, and other particular job responsibilities. In reading the manuals, I found myself getting bogged down in language such as the following:

'Eligible beneficiary' means a resident of this State who:

- a. (1) is aged; or
(2) is at least eighteen years of age and is disabled or blind:
- b. Has applied for and is eligible to receive benefits under Title XIX of the Social Security Act [42 U.S.C. 1396 et seq.], provided that an individual who was eligible to receive benefits under Title XVI of the Social Security Act [42 U.S.C. 1381 et seq.] and who was receiving benefits under Title XVI before January 1, 1995, is not ineligible because that individual is not eligible to receive benefits under Title XIX (North Dakota Department of Human Services, 2001).

My appreciation for the demands of workers' jobs grew with each manual I read and I reacted with horror when one of the ACSS staff on the research consultation team asked me if I were ready for my quiz on one of the manuals. But beyond the definition of

a refugee, pictures of federally-issued alien identity cards, the use of interpreters, and details of refugee program eligibility, there was no information about intercultural knowledge and skills or particular sections on program philosophy or approaches in working with culturally diverse people. Because of the technical nature of the manuals, and what was *not* in the manuals related to refugees, the manuals served primarily as a reinforcement of the theoretical schema developed through the coding process of provider interviews. In other words, the latent content of the manuals (Guba & Lincoln, 1981) became as much a part of the triangulation process as the manifest content.

Data Analysis and Management

As Miles & Huberman (1994) have summarized, "data management and data analysis are integrally related. There is no firm boundary between them" (p. 45). In order to acknowledge this relationship, I made every effort to organize and maintain data in such a way as to ease the process of data access and analysis. The general structure for this process involved an interplay of: taping and transcribing interviews; organizing, labeling, and filing interviews, field notes from observations, memos, and coding material, and; engaging in the grounded theory analysis process of "constant comparison" (Glaser & Strauss, 1967; Strauss & Corbin, 1998).

In a grounded theory approach, the researcher is engaged in a praxis of research and analysis, allowing analysis to inform and build the research and vice versa, with this dynamic forming the infrastructure of theory development. At the core of data analysis is coding, the "fracturing" of data into conceptual categories (Strauss, 1987, as cited in Maxwell, 1996). Corbin & Strauss (1990) and Strauss & Corbin, (1998) outline a coding process that involves generating categories through "open coding," linking categories

through "axial coding," and developing theory through "selective coding." Throughout the data gathering and coding process, "theoretical sampling" is taking place -- gathering data based on emerging concepts and evolving theory (Strauss & Corbin, 1998). Building theory involves developing categories "in terms of their properties and dimensions -- and then later relating categories through hypotheses or statements of relationships" (Strauss & Corbin, 1998, p. 121). The researcher attempts to "saturate" categories by asking questions of interviewees until no new information in a category emerges during the coding process (Charmaz, 2000; Creswell, 1998; Strauss & Corbin, 1998). In the midst of the process of data gathering, comparing data, coding, and relating categories, the researcher is writing memos -- notes on thoughts, interpretations and ideas for additional questions (Strauss & Corbin, 1998; Charmaz, 1996). The entire process and the documentation it generates requires a well-organized filing and cross-referencing plan involving both the use of hard copy and computer files. In this study, data storage and management took the forms of:

- hard copies of signed consent forms, transcribed interviews, memos, audio tapes, codings, and field notes, all placed in labeled files and kept in locked file cabinet A in the researcher's office;
- a hard copy of the list of interviewees and their pseudonyms kept in locked file cabinet B;
- transcribed and coded interviews stored on a computer hard drive and floppy discs locked in file cabinet A; and
- drafts of and final report stored on computer hard drive and floppy discs.

Analysis of interviews of all three participant groups followed the grounded theory method outlined above, with all analysis done manually. Transcriptions averaged approximately 30 pages in length, single-spaced, with some as long as 50 pages. Every page of each transcription contained a right-hand margin of two to three inches which was used for recording codes.

My coding process with transcribed interviews began with open coding (Strauss & Corbin, 1998), the process of “unitizing” the data (Maykut & Morehouse, 1994; Lincoln & Guba, 1985) into conceptual pieces which then become the basis for larger conceptual categories. I looked for units of meaning as they naturally emerged and coded the unit in the right-hand margin, using either my own words for the code or applying an “in vivo code,” a word or phrase actually used by the participant (Strauss & Corbin, 1998; Charmaz, 1994). Although Strauss and Corbin (1998) advocate a line-by-line analysis in the initial coding process, I found that units of meaning emerged without this level of analysis and often in direct relation to my line of questioning in the interview. Depending on the richness of a particular block of data, a typical interview page contained anywhere from two to ten codes, usually in the form of a phrase which labeled the unit of meaning emerging from a line, a paragraph, or a larger portion of data. Most codes met Lincoln’s & Guba’s (1985) criteria for useful codes—that they be relevant to what the researcher needs and that they have stand alone meaning.

At the beginning of the open coding process for each interview group, I selected three to five pages from three to four interviews in each group and brought the pages to research team meetings. Any identifying information was marked out on the pages and pages were chosen based on wanting to give the research team a representative sampling

of data from each interview group. I would also provide pages containing specific information about which I wanted their feedback and thoughts (their response to perceptions being given, their confirmation of particular facts or processes, etc.). In the open coding stage, I explained the coding process to team members, gave them the interview sections to read and asked them to write down any codes they thought of in the margins of the interview sections. This process generated discussion about concepts and themes that were emerging from the interviews and gave validity to the later analytic process from which categories, themes, and theory emerged, which were also discussed with the research consultation team.

The Allen County Social Services providers were the first group of participants to be interviewed (this was necessary, in my original plan, in order to develop a pool of refugee participants who would be referred to me by providers. I also wanted to fully explore and understand provider perspectives before comparing those perspectives to refugee and stakeholder perspectives). I began coding after interviewing approximately five to seven providers (the timing of my coding was often dictated by the schedule and timing of my transcriber) and the process of “constant comparison” (Oktay, 2004; Strauss & Corbin, 1998; Glaser & Strauss, 1967) between interviews early on revealed a recurrence of concepts and themes between providers. Memos I wrote in the early stage of interviewing reflected a curiosity about these concepts and themes and also reinforced and informed my line of questioning. This is consistent with Strauss’ and Corbin’s description of memos as records that “contain the products of analysis or directions for the analyst” (p. 217). A memo of December 5, 2002, contains the question to myself about whether the varying levels of public assistance eligibility lead refugees to believe

that providers have more individual flexibility in making decisions than they actually do. This was a line of questioning I then pursued in later interviews. Three memos from early 2003 contained reflections on how “the system” and “rules and regulations” were emerging concepts related to the factors that influence provider interactions with refugees. These concepts played a key role in the later coding process and theoretical schema.

As mentioned above, the set of interviews from each participant group was coded according to the unitizing process. (I coded each group separately, from open coding to theory statements.) After marginal coding, individual codes were transferred to individual 3x5 cards which were labeled with the participant’s pseudonym and interview page number from which the code came. I then followed Lincoln’s and Guba’s (1985) categorizing process that involved grouping cards according to their “look alike/feel alike” qualities. As groups of cards developed, I reviewed the groups and removed, added and regrouped cards until no more grouping possibilities seemed to be necessary. A “miscellaneous” pile inevitably developed and these cards were not used at all. Fortunately, the total number of these “outliers” was only 3-7 cards per group. Such a low number probably indicates no serious problems with the categorizing process (Lincoln & Guba, 1985).

After grouping cards, I read through each group and assigned the group a name according to the concept category the cards reflected. This was mostly quite easy to do since categories had already begun to emerge in the coding process. Codes and categories were then typed into a computer file. Codes and categories for each participant group can be seen in Appendices G through I.

Particularly in the case of ACSS provider data analysis, the categorizing process was made easier by the fact that category “saturation” (Strauss & Corbin, 1998) occurred fairly quickly in the interviewing and coding process. I interviewed a total of 28 providers and by the time I was at my twentieth interview, I began to realize that nothing new was emerging in the interviews. Interview data were easily falling into categories I had already begun to identify. Figures 2-4 on the following pages contain diagrams showing sample codes, categories, themes, and theoretical statements that emerged from data analysis of all three interview groups. As can be seen in the Appendices, some categories were more “filled out” than others. Because I interviewed fewer refugees and stakeholders than providers, I feel the categories generated from refugee and provider data had varying levels of saturation. Categories with larger numbers of similar codes, such as the refugee categories “Perceptions of Social Services” and “Culture Shock” (see Appendix H) were fairly well-defined categories. But other categories might require more interviewing and “theoretical sampling” (Charmaz, 2000; Strauss & Corbin, 1998) in order to further understand their properties. For example, the refugee category “Personal Initiative” points to the perspective that individual hard work and fortitude is what determines a refugee’s adaptation and success. Returning to the field to sample around this hypothesis would help generate theory regarding the interplay of systemic support and individual factors in refugee adaptation. My research time frame and my primary interest in interviewing refugees and stakeholders about their perceptions of public social services prevented me from fully developing all categories.

Just as categories became evident in the open coding process, so did relationships between categories. The process of making connections between categories is known as

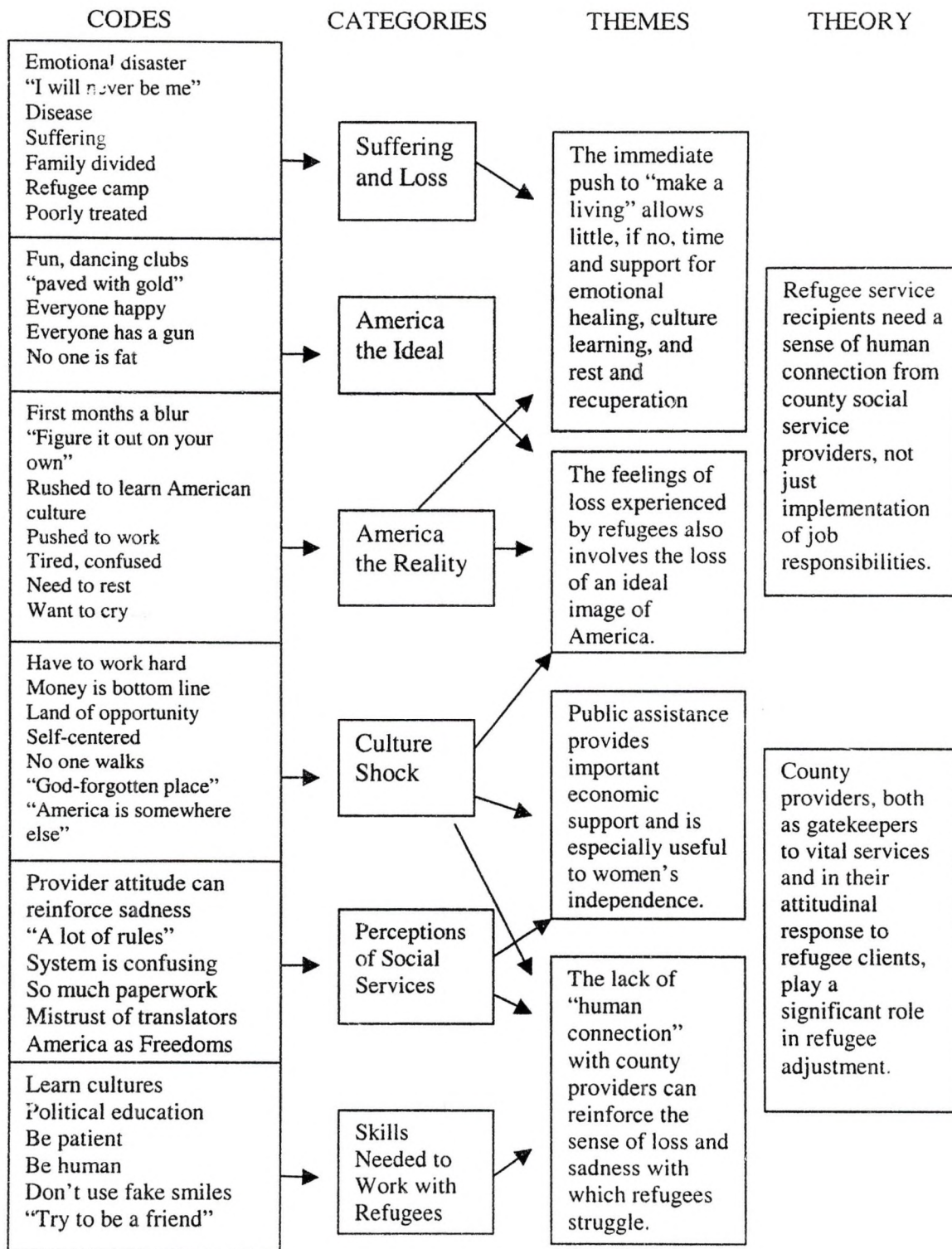


Figure 2. Refugee Data Analysis

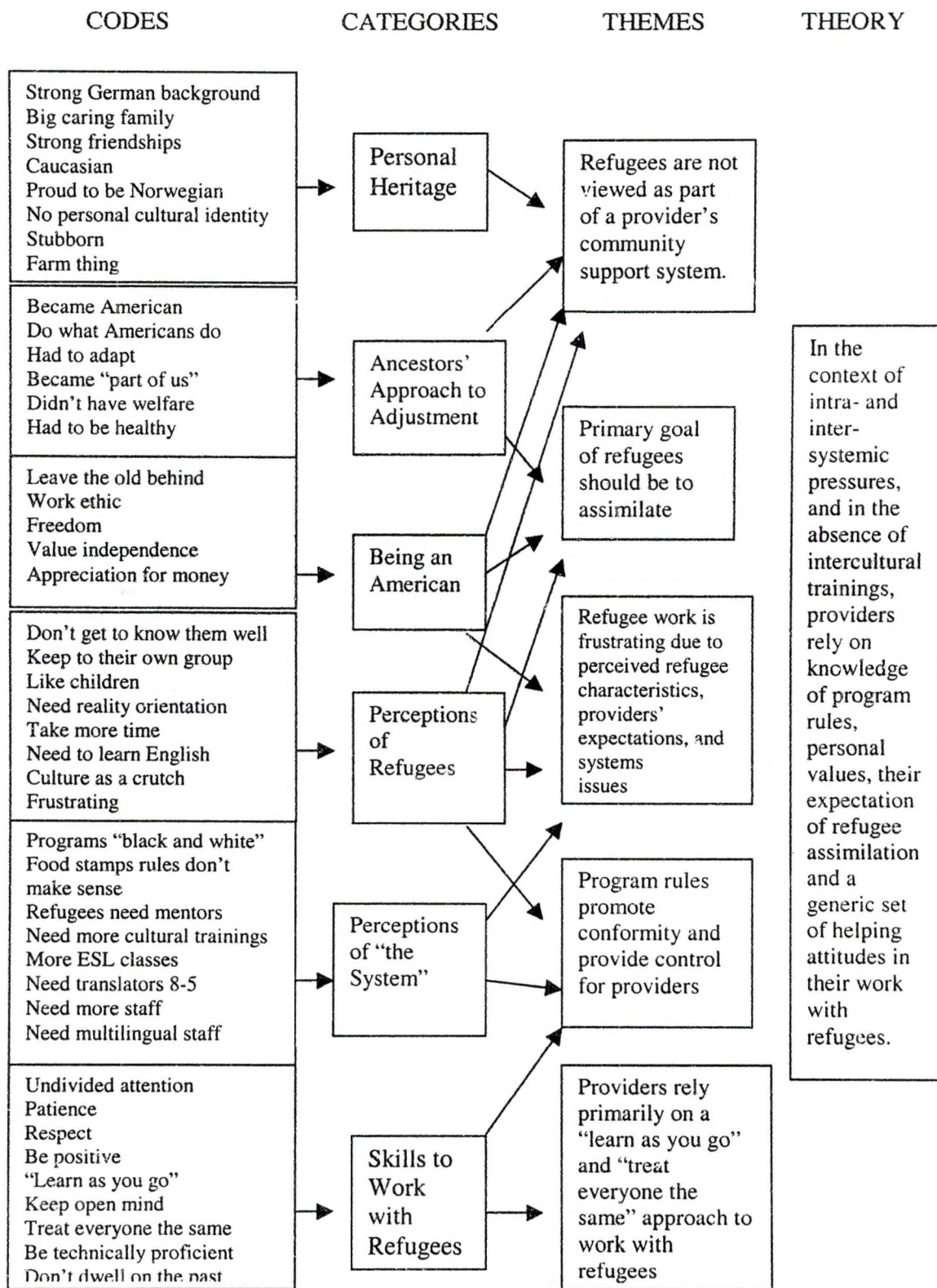


Figure 3. ACSS Provider Data Analysis

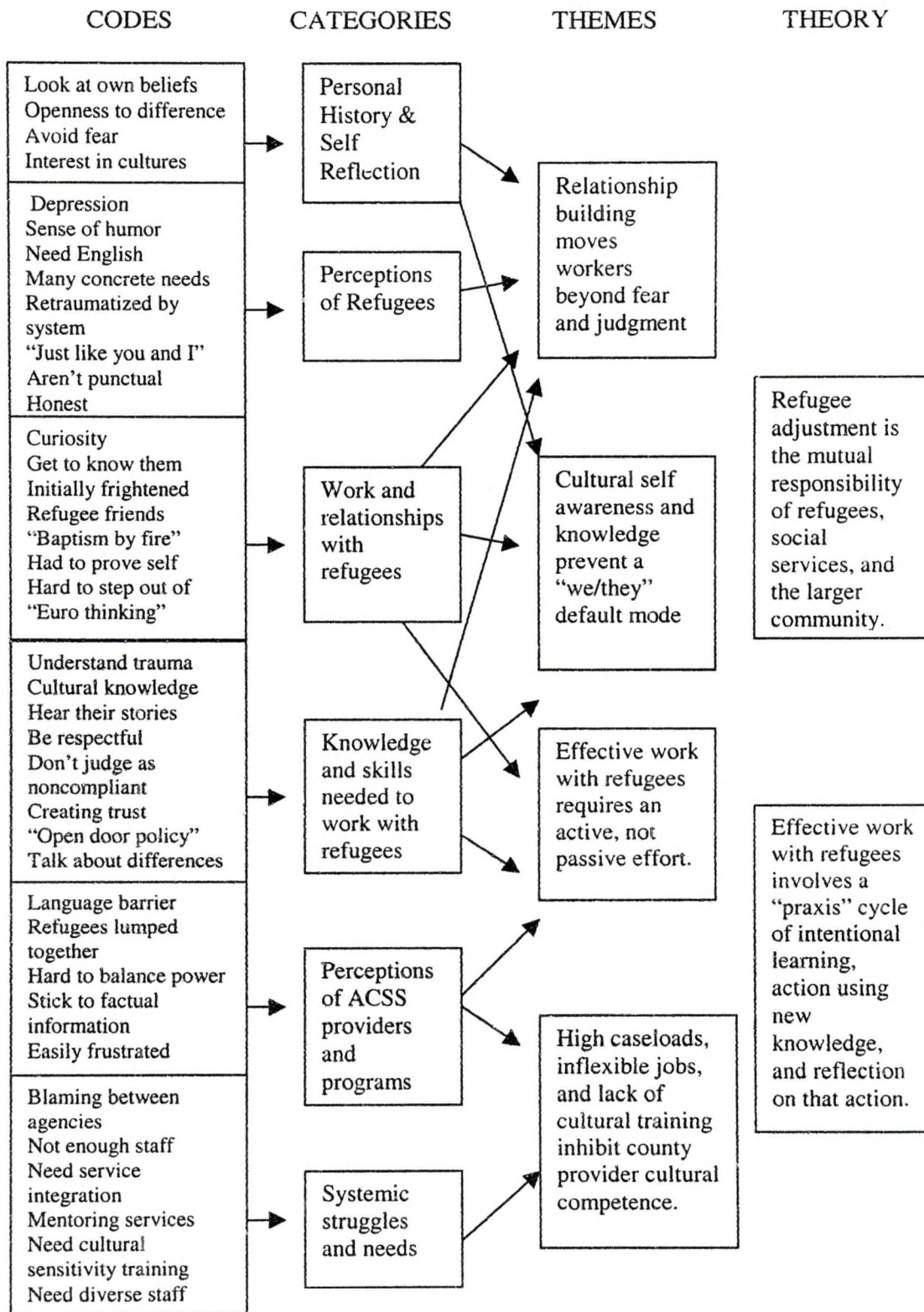


FIGURE 4. Stakeholder Data Analysis

axial coding (Strauss & Corbin, 1998; Abramson & Mizrahi, 1994) and allows the researcher to examine the “properties” and “dimensions” of categories, answering who, what, where, when, and other questions about categories. The data is reviewed for answers to these questions or additional interview questions are asked in order to acquire answers. In order to confirm the relationships I and research team members saw emerging, and to generate additional relationships, I took 24”x18” newsprint sheets and, at the top of each sheet, I wrote a question designed to fill out a category, i.e., to gather additional property or dimensional characteristics. For example, during the provider data analysis process, one sheet asked the question “why do providers use the words they do to describe refugees?” Under the question I wrote answers to the question based on the provider codes. I then color-coded each answer according to the category of answer. Green answers related to systems issues, pink answers related to characteristics of refugees as perceived by providers, yellow answers referred to characteristics of the providers themselves. Through this process I began to recognize the various factors impacting on providers interactions with refugees, and relational statements (Strauss & Corbin, 1998) began to surface or were confirmed. Through axial coding of all three data groups, I developed relational statements and themes drawn from the data of each group.

The final piece of the coding process is what Strauss and Corbin (1998) refer to as selective coding. In this step, relational statements and categories are integrated and organized into a theoretical scheme. A relational matrix is often a useful tool in this process and with the provider and stakeholder data, I used matrices to help me conceptualize the relationship between different thematic structures and articulate a central theory statement. The matrices are discussed and reproduced in Chapters 4 and 5.

The results of data analysis were taken to research consultation team meetings and discussed with team members. Thankfully, team members affirmed that relational and theory statements seemed to flow logically from what raw data and open coding they had been exposed to.

Trustworthiness

The criteria for evaluating qualitative studies have been the subject of much discussion in qualitative literature. These discussions have taken place in contexts ranging from examining "scientific method vs. fieldwork" (Wolcott, 1995) to comparing theoretical paradigms such as positivism, postpositivism, critical theory, and constructivism (Lincoln & Guba, 2000). Janesick (2000) calls for moving beyond "the trinity of psychometrics" (validity, generalizability, and reliability), and Lincoln and Guba (1985) promote usage of "alternative terms" that are more reflective of qualitative approaches (e.g. "credibility," "transferability," "dependability"). Following Lincoln & Guba (1985), Padgett (1998) and others (Kincheloe & McLaren, 1998; Maykut & Morehouse, 1994), I am using the term "trustworthiness" as the heading for this section which describes my efforts to enhance the rigor and credibility of the study.

Padgett (1998) articulates three broad threats to trustworthiness in qualitative studies: reactivity (the impact of the researcher on the environment); researcher bias (viewing and acting on the research processes through the lens of one's own belief system), and; respondent biases (respondents providing erroneous or distorted information). Although it is impossible to completely eliminate these threats, I relied on four common procedures often used in a variety of qualitative methods to enhance trustworthiness (Maykut & Morehouse, 1994):

1. data triangulation;
2. an audit trail;
3. use of a research team; and
4. member checks.

Data triangulation refers to the use of two or more sources of information to support a particular perspective. As mentioned in the analysis section above, I relied on observations, interviews, and document analysis as different sources of data in the theory building process. My field notes and memos, though not voluminous or individually extensive, also served to corroborate developing themes.

The audit trail (Janesick, 2000; Padgett, 1998; Maykut & Morehouse, 1994; Lincoln & Guba, 1985) is an effort to document the research process so that others may review your strategy, procedures and decisions. Although not all of my notes and documents are labeled, dated and organized according to categories (Lincoln & Guba, 1985), I do have a four-drawer, locked filing cabinet containing labeled folders of interview audiotapes, transcribed interviews, agency documents, field notes and memos, coding materials, signed consent forms, notes on literature, methodological outlines, and copied journal articles. While all of these materials cannot be displayed in the body or appendices of this report, they are available to any researcher so inclined to look at them and I feel they are a solid documentation of my research methods and findings.

The research consultation team served as an important check on my process throughout the study. They helped me develop interview questions, they recommended interviewees, they examined portions of interviews and suggested and responded to my coding and thematic decisions, and throughout the year we worked together, we engaged

in rich conversations related to interview content and larger issues emerging from the study. I took notes during our meetings and also recorded all of our conversations for later reference if I needed it.

Member checks (Padgett, Mathew, & Conte, 2004; Taylor & Bogdan, 1984; Lincoln & Guba, 1985) is the process of verifying research findings with study participants. All or a portion of participants are given coded and/or interpretive material and asked for their responses and feedback. Member checks provide the researcher an additional opportunity to enhance the credibility of the study and may also direct the researcher toward additional or corrective lines of inquiry. In this study, I held a meeting for each county unit in which I had conducted interviews. All interviewees from each unit were invited to attend. Approximately half of the interviewees attended the meetings and in one meeting, two stakeholders I had interviewed were also present. In the meetings, I summarized primary themes that were emerging through the coding process and I asked questions to further fill out those themes. I was also asked by the two division supervisors to present my findings at a meeting of the entire staff of both divisions that would include providers who had not been interviewed. In all of these presentations, those present were responsive to my presentations, and while they asked few questions of me, no one expressed concern about being misrepresented by my interpretations of the interview data.

Through their membership on the research consultation team, I was also able to engage in member checks with an additional stakeholder and two of the refugee interviewees. I did not, however, engage in member checks with the other six stakeholders or the remaining eight refugee participants. The primary reasons for this

were the pressures of time and money – wanting to conclude the study and having no funds remaining for interviewee remuneration. This may represent a flaw in the methodology of the study, but I believe the member checks with county providers and with the research team as a whole are more relevant to the purpose of the study.

A Comment on Literature Review

The general consensus among qualitative theorists is that literature reviews are best undertaken *during* or *after* data collection, not before as with quantitative studies. The main reasons for this, as Smith (1996) summarizes, are that the researcher can never quite be sure what themes may emerge from the process, and knowledge of existing literature may bias the researcher. Strauss and Corbin (1998) agree with this reasoning, although they point out that technical and non-technical literature can be used fruitfully as an analytic tool during the research process for filling-out emergent categories, enhancing sensitivity, stimulating questions, and other purposes.

I began examining literature after the data collection process had begun, and undertook a more intensive literature review after data collection and analysis was complete. In this way, the literature was both a supplement to the research process and a comparative and evaluative mechanism for the analyzed data. However, as mentioned at the end of Chapter 1, I have chosen to incorporate relevant literature into the following chapters in which findings are discussed, an approach I hope will be mutually supportive of both the literature and the voices of study participants.

CHAPTER III

FINDINGS FROM REFUGEE PARTICIPANT DATA

This is the first of three chapters that outline the study's findings. I have placed refugee findings first since they discuss the experiences, beliefs, and needs that refugees may bring to their encounters with county social service staff. The next two chapters then present findings from ACSS provider and stakeholder data. In all three chapters, interview portions are used to highlight findings. In these segments, I occasionally removed repeated words or sentence fragments where these deletions did not change the meaning of the quotation. At times I collapsed different portions of an interview into a single section where a similar topic was separated by an unrelated topic. All interviewee names are pseudonyms chosen by study participants.

This chapter begins with a brief picture of refugees nationally and in the state where the study took place. This section is followed by a brief description of the refugee participants and then subsequent sections detail data categories and thematic findings.

Refugees Nationally

"A refugee is a person who has fled his or her country of origin because of a well-founded fear of persecution based on race, religion, nationality, political opinion or membership in a particular social group" (Cultural Orientation Project, 2004b). The number of refugees worldwide is in the tens of millions. Balian (1997, as cited in Bemak, et al., 2003) estimated approximately 26 million refugees in 1997 and the U.S.

Committee for Refugees, in its World Refugee Survey at the end of 2000, counted 14.5 million refugees and asylum seekers and at least 20 million internally displaced people around the world (Pipher, 2002). In cooperation with the United Nations Commissioner for Refugees, and under the auspices of the Bureau of Population, Refugees, and Migration of the Department of State, the United States accepts more refugees for resettlement than any other country in the world. Since the 1980s, most refugees in the U.S. have arrived from the Middle East, Latin America and the Caribbean, Southeast Asia, Africa, and Eastern Europe. In 2000, the top three countries of origin were the former Yugoslavia, the former Soviet Union, and Somalia (Patrick, 2002). Although it continues to maintain its status as the number one resettlement country, U.S. refugee resettlement annual ceilings have declined from a peak of 142,000 in 1993 to 70,000 in FY 2002 (Patrick, 2002).

Upon arrival in the United States, most refugees receive reception and resettlement support from voluntary agencies, known as VOLAGS, who have contracts with and receive funding through the U.S. Department of State. VOLAGS are private, non-profit groups that provide services to refugees for a minimum of 30 days, with some continuing to offer support for several months. Services include providing furnished housing, orientation sessions, case management, and provision of federal cash assistance. While these volunteer agencies receive federal funding, their grants fluctuate based on the number of refugees they are serving in their catchment area in any given year. The agencies rely heavily on private donations and on the support of any affiliated religious organizations. VOLAGS responsible for refugees in the United States are:

- Church World Services

- Episcopal Migration Ministries
- Ethiopian Community Development Council, Inc.
- Hebrew Immigrant Aid Society
- International Rescue Committee
- Immigration and Refugee Service of America
- Lutheran Immigration and Refugee Services
- United States Conference of Catholic Bishops, and
- World Relief Refugee Services.

In collaboration with each other and in consultation with the Department of State, VOLAGS decide how many and which refugees will be settled where based on an agreed upon formula which takes into account the number of refugees already settled in a location, family reunification issues, availability of translation services, and other factors. The VOLAGS tend to work closely with local public social services staff, personnel in other human service systems, and the general public in order to facilitate the reception and resettlement of refugees in a particular community.

The upper mid-western state in which this study took place experienced a dramatic increase between 1990 and 2000 in the number of refugees and immigrants who have settled in the state. This was due primarily to the national increase in refugees and to the fact that one of the above VOLAGS has a resettlement office in the state. After September 11, 2001, however, refugee numbers dramatically decreased in the state, as they did nationwide. Table 2 below shows the numbers and ethnic backgrounds or country/continent of origin of the state's refugees and non-refugee immigrants from 1990 through 2003. The yearly numbers reflect the consequences of civil strife or political

persecution in various parts of the world, with conflict in the Balkans, Somalia and the Sudan resulting in large numbers of resettled refugees in the state in the late 1990s. Of

Table 2. Refugee and Immigrant Arrivals by Country in Study's State, 1990-2003

<u>1990 -- Total 179</u> Vietnam 133 Ethiopia 13 Cambodia 6 Africa 27	<u>1995 -- Total 419</u> Armenia 13 Bosnia 105 Zaire 1 Cuba 59 Haiti 28 Croatia 4 Iran 8 Iraq 11 Kenya 3 Kuwait 1 Liberia 4 Russia 19 Somalia 6 Sudan 67 Togo 5 Ukraine 4 Vietnam 79 Yugoslavia 1 Central Africa Republic 1
<u>1991 -- Total 202</u> Vietnam 126 Kurdish (Iraq) 34 Eastern Europe 32 Africa 10	<u>1996 -- Total 334</u> Bosnia 124 Iraq 6 Armenia 11 Cuba 29 Somalia 127 Ethiopia 1 Sudan 19 Vietnam 6 Kurdish 3 Russia 8 (Iraq)
<u>1992 -- Total 479</u> Vietnamese 129 Africa 1 Kurdish (Iraq) 230 Iraq 2 Eastern Europe 2 Armenia/Soviet Union 104 Central America 1 Afghanistan 10	<u>1997 -- Total 448</u> Bosnia 68 Vietnam 16 Cuban 7 Russia 1 Iraq 2 Ethiopia 4 Somalia 57 Sudan 6 Kurdish 43 Unspecified 244
<u>1993 -- Total 360</u> Vietnam 134 Kurdish (Iraq) 81 Iraq 23 Armenia/Soviet Union 75 Africa 28 Bosnia 19	<u>1998 -- Total 582</u> Armenia 4 Bosnia 321 Bolivia 1 Burundi 10 Cuba 19 Cyprus 1 Djibouti 17 Ireland 22 Other 1 Israel 9 Kuwait 8 Liberia 7 Nigeria 15 Czechoslovakia 5 Turkey 5 Seychelles 6 Vietnam 18 Togo 3 Somalia 23 Sudan 70 Ukraine 4 United Kingdom 13
<u>1994 -- Total 380</u> Vietnam 73 Cambodia 2 Bosnia 119 Cuba 6 Haiti 66 Iraq 49 Kurdish (Iraq) 22 Armenia 29 Africa 14	<u>1999 -- Total 672</u> Albania 118 Armenia 5 Burundi 1 Cuba 9 Haiti 1 Iran 8 Israel 8 Other 5 Nigeria 19 Sierra Leone 5 Pakistan 14 Somalia 56 Serbia 3 Sudan 119 Vietnam 1 Afghanistan 9 Bosnia & Herzegovina 296

Table 2. Continued

<u>2000 -- Total 695</u>		<u>2002 – Total 62</u>	
Zaire 1	Cuba 12	Afghanistan 5	
Haiti 2	Other 10	Somalia 8	
Iraq 4	Ireland 5	Serbia 9	
Israel 1	Kuwait 16	Sudan 3	
Somalia 49	Serbia 17	Bosnia & Herzegovina 37	
Sudan 114	Tamil 3		
Tajikistan 5	Ukraine 10		
Togo 2	Vietnam 1		
Yoruba 2			
Bosnia & Herzegovina 441			
<u>2001 -- Total 305</u>		<u>2003 – Total 106</u>	
Albania 1	Cuba 6	National origin breakdown unavailable	
Zaire 3	Somalia 24		
Sudan 78	Vietnam 2		
Bosnia & Herzegovina 191			

Source: Local refugee and immigrant resettlement agency, 2004

the 5,223 refugees and immigrants resettled in the state between 1990 and 2003, 4,099, or approximately 78%, were resettled in the county where the study took place.

In conversation with the two county providers on the research consultation team, I was informed that I might have the most success acquiring study participants from the Bosnian and Somali communities since those groups had significant representation as county social service clientele. These were the two groups I drew from for refugee interviews.

Refugee Participants

As mentioned in Chapter 2, I conducted twelve interviews with New Americans, ten of which resulted in usable data – five Bosnian and five Somali. There were four women and one man in each group and the ten interviewees ranged in age from early 20s

to early 70s. Nine of them had been in the United States for six or seven years with the tenth in the country only nine months. All had come from financially secure, comfortable lives in their homelands and all, except one, left their homes and countries due to the violence of civil strife, arriving in the United States with virtually no possessions or financial resources. All five Somalis and one Bosnian lived in refugee camps outside their countries prior to resettlement in the United States. All had some level of English proficiency, although in the case of two interview sessions in which two participants were interviewed jointly in each session, one participant in these sessions provided some translation for the other participant when necessary. All had experienced catastrophic disruptions in their lives and all, except one, were currently, or had formerly been, clients of Allen County Social Services.

Findings

Appendix G contains the complete set of refugee data codes, categories, and themes. Figure 5 below again presents a sampling of those elements to demonstrate the data analysis process. I consider the six categories shown in Figure 5 to be the most significant in contributing to thematic and theoretical findings. These categories were: *Suffering and Loss*; *America the Ideal*; *America the Reality*; *Culture Shock*; *Perceptions of Social Services*, and; *Skills and Services Needed to Assist Refugees*. From these primary and other secondary categories emerged the following themes:

1. *The immediate push to “make a living” allows little, if no, time and support for emotional healing, cultural learning, and just rest and recuperation from the trauma and experiences of being a refugee.*

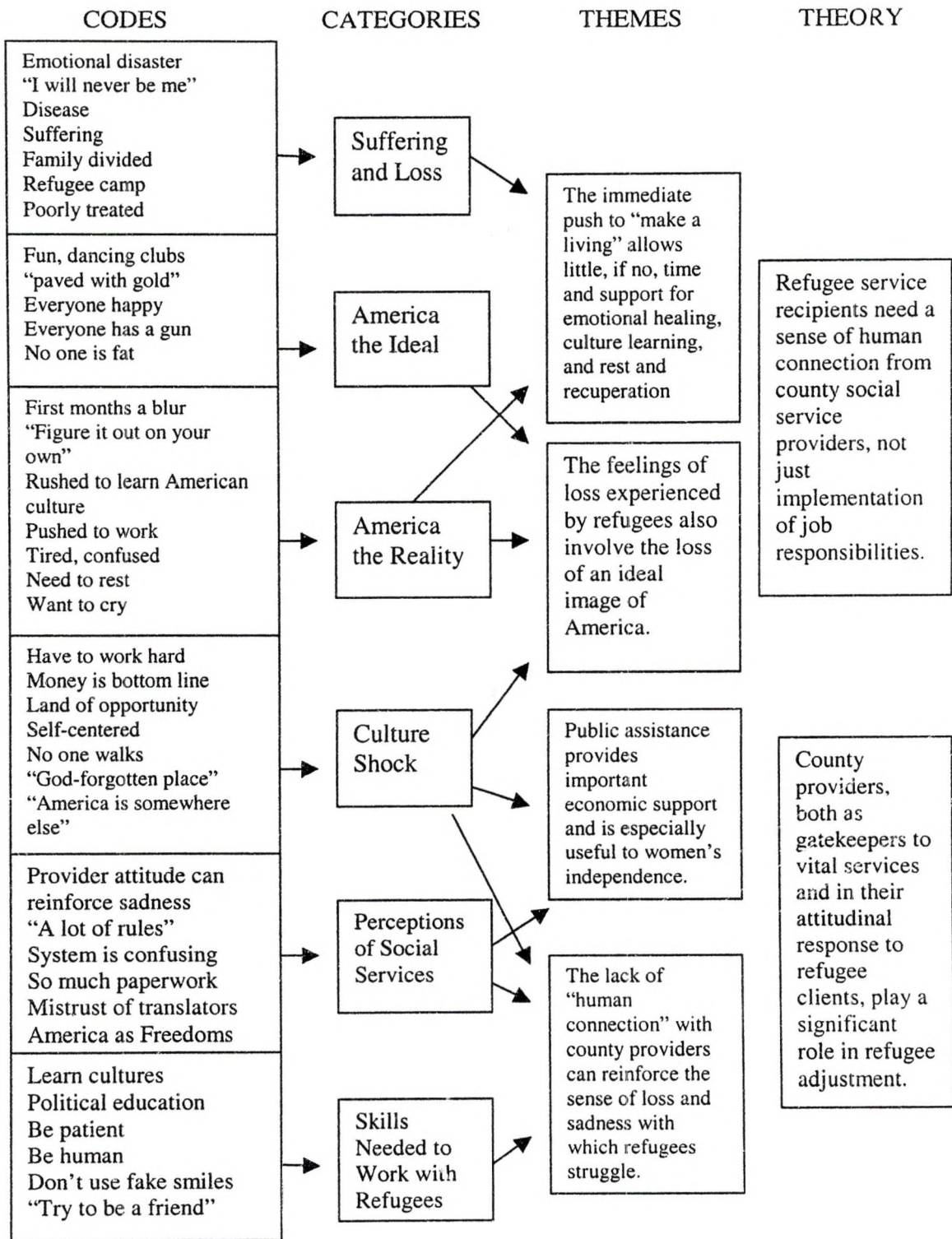


Figure 5. Refugee Data Analysis

2. *The feelings of loss experienced by refugees also involve the loss of an ideal image of America.*
3. *America means hard work, feeling cultural alienation, and being pushed to accept American values, but also means experiencing new-found freedoms.*
4. *Public assistance provides important economic support and is especially useful to women's independence.*
5. *Personal initiative, especially in learning English, is important to success, but the expectation to conform to public assistance work requirements can work against that personal initiative.*
6. *Refugee participants often perceive ACSS providers to be more influenced by rules and policies than by compassion and cultural understanding.*
7. *The lack of "human connection" from providers can reinforce the sense of loss and sadness with which refugees struggle, particularly in the early stage of resettlement.*

In the sections that follow, each of the primary categories will be discussed to demonstrate the grounding of thematic and theoretical findings. The two statements of theory that emerged from the refugee data analysis process are presented at the end of the chapter.

Suffering and Loss

It is not surprising that suffering and loss emerged as a major category in the data analysis since refugees generally experience multiple traumas, from the events which caused them to leave their countries, to refugee camp life or a hostile host environment, to the shock of a new culture when resettled. There is a substantial body of literature

related to the suffering and trauma caused by war and ethnic conflicts (Lennon, 2000; Punamaki, 2000; Silove & Franzc, 1999; Mertus, Tesanovic, Metikos & Boric, 1997). Mooren and Kleber (1999) developed a list of “war stressors” which they categorized according to:

- Personal Stressors – ongoing threat of being killed; loss of spouse and/or child; loss of relatives, friends, colleagues; loss of home and personal property; being maltreated or tortured; loss of future resources;
- Social Stressors – shattered trust; alienation among people; unemployment; disruption of families due to migration; loss of parenting prerogatives;
- Cultural Stressors – destruction of historical legacies; destruction of mosques and churches; destruction of landscape; change of original communities; and
- Political Stressors – lack of optimism about the future; no improvement of economic situation; no change of leadership; and witness of large-scale violation of human rights (p. 199).

These types of stressors are common to refugee pre-migration experiences, regardless of refugee cultural or national background (Bemak et al., 2003). Many of these stressors were experienced by study participants and discussed by them in their interviews. Some went into more detail than others, but it was clear that the experiences that led to their status as refugees would have a life-long impact on them. In the following interview excerpt, Lily, Bosnian interviewee, talks about the experiences that led to her refugee status during the war in the former Yugoslavia.

...[M]y war started...April, I think 1991. When war started, you know, there's nobody on TV who's going to come up and say, "well, today war started." No, they won't do that. You just see those awful scenes on TV how tanks are going

over cars, how people are getting killed....I as a younger person, I couldn't believe. My parents, they might remember some things....But I as a youngest member...I couldn't understand how human being can...act as animal. And I always said that in animal world where there is a rule, who is stronger will survive. And during a war, there is no rule in anything. So when war started, what first happened was....[the town] was under Serbs command. First what they did is they put barriers so there was no where to go in or out. So first of all we have no supplies. They cut everything. So there were some people who used to come to that little town and offering to put out some money, you know, breads and oils and whatever we needed....So when they cut off roads, military started to move in, Serbs military, Milosevic military. So what we did, place where we used to live, it was kind of flat but surrounded with mountains, high mountains. So what all those people did, we run into the mountains and woods. So I spent with my son, four months [in the mountains]....he was two years old...[and] we were in the mountains.

Amy: Where did you live?

Lily: We...that was not life. I would not call that life. That was surviving, just surviving....we noticed that they were bringing military, and so now and then they would send us a bomb in middle of place where we lived so to just get us scared or something....So when they started sending bombs then we moved into the mountains. How we lived....you know there is lots of woods. So during the day we would set a fire. All the women, they would go down and if they would find some living stock such as chicken or cow, you know, bring the milk or something. But we were deep, deep, deep in the mountains.

Amy: Were your parents with you also?

Lily: My parents was with me, but my problem was everybody were running away from us because I had a, from me actually, because I had a little child and child gets you know scared or stressed out and starts crying. And he sees that I am running, you know, you are running like a crazy to save your life. And it is mountain. It is cold. And it's so, you know, how can I say, it's not fast. Yeah, you have to walk good two hours to get to middle of it....And people you know running away from you because if child starts crying then they will know where you are at. Enemy will know where you are at....So actually me and my son were in the middle of nowhere....So we slept four months without bathing, without bed, without pajamas, without coffee, without anything that was a base. Like for three or four days, that's why you did not even eat. And my son would have couple of crackers during the day and milk that some woman brought from her cows down the road and things like that....And you would not stay in just one place. You moved through that mountain. It's like you move fifteen miles and you have to move during the night, not daylight, during the nighttime. So pretty much, after those four months, I was looking like a zombie (Lily laughs)....you don't know what you are talking about, you don't know nothing, you just have that survival instinct, just to survive, nothing else.

Amy: How did you survive? What kept you going?

Lily: I don't know what kept me going. I just, I remember first time when I went up, I remember how my heart was beating so bad. How I felt nauseated. How I felt shaky. How I felt lost. How I wanted to kill myself, I just wanted to kill myself. ...you can't understand and you cannot accept that this is happening. You can't accept that this is happening, you just can't. And you come to the point that there is no way, you know....actually you have to deal with it or kill yourself. There is just two choices, nothing else. So I think that was maybe a breakdown that I had. You know, accepting it, how it is, and then living it. My only motivation was to survive, I was thinking about my child. And I always said, if I did not have my son, I don't know where I would be. I don't think that I could mentally survive. And have, you know, this little creature that I have to take care of if nobody will. If I will not nobody will. They would just leave him there. I felt responsible for him. So yeah, that was happening those four months.

Rose, a Somali interviewee, and her family nearly lost their lives during the civil war that left her country without a centralized government. In the excerpt below, she talks about the experience of having armed gunmen invade their home and demand their belongings.

...And my dad he got money there. Everything was nice. We...have nice life there but the war change it. They took all our money. They took everything from us....They try to kill my sister....We are eight women there. Five girls, seven actually. Me and my mom and than all five girls. They come to our house. They have knife. They have gun. They try to kill me. The told me go to my room. I went to like this kind of room. They close the door and my young sister and old sister they went to the other room and my mom. They said, "I know your dad has money. I know you have gold, everything. Give me that money. Tell where is that money, your dad's money." And I said, "I don't have, I swear. I don't have anything. Somebody took it." He do like [makes noise with tongue]. And I was scared. So the gun up there [makes shooting noises]. I was trying to die. I was like, come on. I said "wait, wait, wait, don't kill me." And they told me if I'm not telling them, they going to go with them, because they are girls. They can do sex with them. They hurt her with knife....And I said "Please don't kill them. Don't kill my young sisters. If you want money, go, we going to give you." So talk to mama, I said, "Please give it to them. You have the gold. Please give it to them. We don't need the gold." My mom, she said, "I don't have it." I said, "yes, you have it. Give it to them right now." So my mom, she said, "Okay, okay." She give it to them. They took my husband's clothes. My dad's clothes. My brother old clothes. They took the gold. They took the money. I think...a lot of different thing they took it. When they left our house, they say "don't go anywhere. Stay here. We going to come back." And I say, "okay, we stay." And I told my mom, "Don't go." And she say, "no, we can go. We can run [from] this house." We

don't have shoes.... We go outside.... We went to my sister, my old sister and her husband. My sister, she was crying. We left there, we go back, we have two houses, we go another house.... We walk. All children and myself and my mom. We get big, big problem there.

After fleeing their countries and prior to resettlement in the United States, interviewees either spent time at a host country refugee camp or in a town or city in another country. This migration process is consistent with the resettlement trajectory of most refugees who are often forced to flee their homeland to another country before permanent resettlement elsewhere. Life in countries of first asylum often presents an additional set of stressors including continued separation from family and friends, fear of discovery by authorities, lack of understanding of systems and laws, language barriers, racism and religious intolerance, and denial of employment (Minnesota Mainstream Social Work Training Team, no date). Refugee camps offer a particularly difficult life. Conditions in camps, often located in isolated parts of the country, are generally overcrowded and unhygienic with high risk of disease and overtaxed health services (Olness, 1998; Cravens & Bornemann, 1992; Sughandadhirom, 1986). Refugee camps could also be especially difficult places for women as was documented in Kenya in 1993 by Wulf (1994 as cited in Olness, 1998):

Overall, conditions of the camps were described as relatively good in 1993. However, the heat, dust, flies, and refuse piles reinforced an unrelenting impression of hardship....there were still many infectious diseases in these camps. Tuberculosis remained common, for example. The birth rate was high and facilities for women at high risk of pregnancy were very limited. Women leaving the camps to gather firewood were frequently raped by roving bandits, young men from the camps, or members of the Kenyan army and police force assigned to protect the camps. Somali women who were raped were then abandoned by their husbands and husbands' families if they became pregnant (Olness, 1998, p. 228).

In the case of study participants, several interviewees experienced similarly harsh conditions in refugee camps or were subject to difficult conditions in a host country prior to resettlement in the United States. In her comments below, Alma, a female Bosnian interviewee, talks about life in a refugee camp. She and her sister went to the refugee camp with no other family or friends when they were both under the age of 14. They lived in the camp for four years.

...And so where we lived in the refugee camp there is no conditioning. And ...like there's 112 degrees there and it's always year round there's dust. And so you know, heart attacks, a lot of things happen when people, you know in the heat it's really bad. And the winters were really harsh, you know, it was windy, it was cold. And you would have to wash everything outside in this kind of an area. I mean you had like eight showers...I think because it was a military base, you know. It was...really old. And so it's like this big room where like 50 women going at the same time and take a shower. It was kind of scary, I mean, to experience. But then later on they built showers for us. Eight showers for five thousand people. So basically your day is to get up in the morning and to wait in line for two hours to get a breakfast. Which was probably food that's been stored in warehouses. Like Jell-O, you know, it's been stored in warehouses for years in these big cans. And...they poured this stuff, it's like, you know...it was like a cafeteria but the food was just horrible and the bugs and oh....And then you get tea...and it's horrible tea.

The father of Faiza, a female Somali interviewee, made a comfortable living for his family as a government employee. But with the onset of civil war, he fled the country since, as Faiza recalled, people who worked for the government were targets for opposing forces. He left the country by himself and his family had no idea where he went. Faiza and her mother and sisters lived a difficult life in Somalia for two years until they all left for a refugee camp in Kenya. Below, Faiza talks about an enemy of all refugees at the camp – mosquitoes.

...Kenya and Somalia, we have different weather, and they have a lot of mosquitoes. And the thing, when you are new from another country and you don't have the shots, if you go to Kenya you catch malaria right away...because

of the mosquitoes, and they can kill you easily. And at the beginning when the people came in 1992, nobody knew about mosquitoes. But the [Kenyan] citizens they know, they take shots every year and they know how to protect themselves. But we were new and a lot of people died from, our people, from the malaria. Without knowing how to save themselves and survive or what to use, what kind of shot to use. In Somalia, it's very sunny and a lot of ocean. We're surrounded with ocean. So not much mosquito. Only in the farm, you know. And when you to the farm you will see mosquitoes but it's not harm like with Kenya. Kenya's mosquitoes...in Mombasa it's the worst....One of my sister, she catch malaria right away and I took her to the doctor and they give her some medicine. They give her another medicine to treat her not to vomit. So that medicine she took a lot. She didn't know, you know....And she overdosed herself with that medication.

Despite their experiences of suffering and loss, the interviewees not only survived, but continued planning and dreaming of a better life elsewhere. The category *America the Ideal* emerged from the interview data as a result of participants discussing their hopes for the future, particularly upon learning that they would be resettled in the United States.

America the Ideal

When asked about their images of the United States prior to resettlement, all of the refugee participants talked about perceptions based on what they had seen in movies or in magazines. They had preconceived notions that all U.S. citizens led wealthy, comfortable lives or that violent crime was rampant, or both. These views of American life are not uncommon among pre-settlement immigrants and refugees (Baptiste, 1993). Books written to assist immigrants and refugees with their adjustment in the U.S. such as *Americanization of New Immigrants: People Who Come to America and What They Should Know* (Singh & Gopal, 2002) and *Immigrants and Refugees: Create Your New Life in America* (Mikatavage, 1998) acknowledge these types of preconceptions and attempt to either correct them (you *can't* get money easily, "acquiring money in America

requires work,” Sing & Gopal, p. 21) or explain them (“most Americans honestly believe that America is the best country in the world [and] they view other countries as somehow inferior” Mikatavage, p. 11). Some research indicates that immigrants and refugees may also view a resettlement country in the best possible light in order to minimize anxiety about migration (Richardson, 1968) or as a more general “defense against a transitory crisis” (Hulewat, 1996, p. 130). It was my impression that when interviewees were discussing their pre-migration images of America, they were articulating stereotypes as well as their hopes and fears about their future.

Jessica, a young Bosnian woman, had lived for a while as a refugee in Germany before coming to the United States with her family. Her comments reflect a teenager’s dreams about America:

...You know, you always see the movies and how people live in the United States. And I know, like in Germany everyone’s dream is to come to the US one day, and just, you know, see it and live here.

Amy What did you think it was going to be like?

Jessica: You know, like those huge cities and all...I don’t know, fun, I guess... dancing, all those huge clubs and stuff....

Ayaan, a female Somali interviewee, also based her impressions of America on what she had seen in movies. One movie in particular stood out for her.

...I remember one movie that I really liked and I thought like it would be like the teenage life and happiness. [It was] called *The Last American Virgin*. It’s not necessarily being like intercourse doing it but it’s like lifestyle of student and pizza delivery and the friends. That’s what I thought. And it was beautiful.

The two male interviewees, one Bosnian, one Somali, discussed their ideal images of America as a land of wealth and opportunity, but they also believed America to be a violent place. Mike said that movies taught him that America was a place of “high crime,” mostly committed by African Americans. Ifirahs, the Somali interviewee, was

particularly struck by how Native Americans were treated in the movies he had seen. His image of America was as a lawless place where people killed indiscriminately.

... Because it's enough that I see everything in American movies. They kill each other, they do bad things and they like to kill people. And Indian, Native Indian, they say, "every time the white man is making big trouble. He need to take all your own and he want to kill you and want your land."...Because the idea I had that everyone America has gun in his house and kill whoever want to kill. I never thought that everything is under control government. Nobody can do everything; just that this is fake movie. But I have seen, it was fake but I thought that this is truth. America, if you go to, you die....

All the interviewees knew that their images of the United States had been exaggerated, but they nevertheless had seen America as a land of wealth and abundance, their hope for the future. As Alma put it, "you couldn't wait to be in one of those [planes] to go to America. This unknown...and beautiful country." As they talked about their arrival and resettlement in the United States, however, a different perspective on America began to emerge. The following two sections discuss the data categories *American the Reality* and *Culture Shock* which detail this different view of America. In *American the Reality*, participants realize that the public assistance they received upon arrival was double-edged – necessary for their survival but not affording them the time and support needed for physical and emotional recuperation. *Culture Shock* discusses interviewees' confrontation with mainstream American values and norms that were confusing and frustrating, but which also pointed to liberating new-found freedoms.

American the Reality

As is common with refugees in general, the refugee participants in this study arrived in the United States with minimal financial resources. If they arrived with no families or friends to greet them, they were also without social networks and the support

and assistance that go along with them. Upon arrival in Plainsville, interviewees, if not met by family, were met by staff of the local refugee resettlement agency and provided a place to live, food and cash, and orientation meetings. While interviewees acknowledged and appreciated the material support they were provided, they freely discussed the stress, grief, and physical and emotional exhaustion that were common upon immediate arrival. Literature related to the early-arrival-stage of resettlement offers substantial discussion of refugee emotional experiences such as grief, guilt, anger (Bemak, et al., 2003; Drachman & Ryan, 2001; van der Veer, 1998; Gonsalves, 1992; Lin, 1986). Very little is mentioned, however, about the physical needs and just sheer exhaustion that many refugees struggle with upon arrival. The interviewees in this study seemed to articulate their most immediate needs as rest, a comfortable environment, and just time to recuperate both physically and emotionally. Lily offered an emotional account of being reunited in Plainsville with her family after being separated from them for six years. Her time in the mountains with her son and the subsequent years of internal displacement and the struggle to survive had left her physically and emotionally exhausted. All she wanted was to “rest her soul:”

...Oh, my god. It was just...it was that hugging and crying. You know, there's always a different type of crying. And this was from the bottom of your soul from your heart. You know, everything built up. I could not recognize my brother because he was a little boy when I left him and now he was almost adult. I couldn't recognize none of them....Everybody hugging you, kissing you, like they understand you, what you went through. You know at some point you feel fine, that you do have somebody to rely on and somebody who understands even if you don't say nothing. All those strange people and you don't have to explain nothing to nobody. That's how it feels, how you feel in those moments. You don't have to explain nobody nothing....I just cannot describe. So anyhow we moved into apartment together with my parents. It was two bedroom apartment and...What I wanted for me was I wanted to be with my parents for first ten days. Just to look

into their eyes, just to rest my soul. Nothing else....I felt like grandchild, you know, that I needed somebody to take care of me....

But the anticipation of America as a place of refuge, a place of comfort and wealth, was quickly replaced by the reality of the resettlement experience once interviewees landed in their new home. In addition to dealing with the psychological and emotional trauma of the loss of life as they had known it, they were immediately confronted with the shock of having to learn a new language and a new culture. The orientation process they received from the local resettlement agency felt rushed and overwhelming, and although the resettlement agency also provided assistance in the form of housing, orientation, and monthly cash grants, known as "refugee cash," refugee participants needed the services of Allen County Social Services for longer term financial and medical assistance (as well as food stamps, day care, employment assistance and other forms of aid). Along with most forms of public assistance, however, comes a work requirement, and the refugees in this study found themselves forced to find a way to make a living while simultaneously trying to learn a new language, understand a new culture, and recover from incredible suffering and loss. The push to work was confusing for interviewees, particularly since it was connected to public assistance policies they did not understand and because they often felt pushed into labor for which they were overqualified. Their own educational and employment accomplishments were often not adequate for comparable jobs in this country. America, the Ideal, was rapidly becoming America, the Reality.

Mike, a Bosnian interviewee, talked about the push to work as potentially inhibiting refugees from doing two things he saw as most enabling refugees to flourish,

learning English and going to school for an education in a field that would allow them to advance.

...I think when refugees arrive...they are completely lost in this first month. But like, they're like, next two weeks they'll try to find them a job. "Go to work, go to work, go to work." Well, okay, you know, you have to pay your apartment next month. You have to do this, you have to do that. But we understand that but like...it's hard I think...they should...have to learn English. You have to go to school....But like right away they're like, "okay, let's look for a job." And then even you don't like that job maybe but you have to work.

Additional views on the work requirement were expressed by several interviewees. Mike and Ifirahs both said that in the early stage of resettlement they saw the requirement to take whatever work was available as part of a larger effort to ensure a cheap labor force for the United States. Ifirahs made an interesting comparison to slavery:

And sometimes you think, okay, I was listening, America, they have slaves. Why they do all this because I'm slave. Because they're paying my food, they're paying my house, they're paying my medical, they're paying everything. So that means I'm slave. Just that they bring me here to work. That's it. I don't have future.

Lily had also wondered about refugees being a source of cheap labor, but because she was expected to work at a beef processing plant, she had also speculated that psychology theories were motivating the work requirement:

... I'm going to take myself for example....after all that trauma that I went through...when you come into this country, every refugee try to forget what they went through.... And I'm taking my own personal experience, after three days being here, offering me to go to work for [the beef processing plant]? Like I do not see much blood to that time, like I didn't see much killing and things like that?... "how do I feel as a person?" "Am I scared?" first of all. Nobody is going to ask me that. Nobody ever. "You are here. You're parents are here. You should go to work." So this whole perception was, you know, it's wrong, it's totally wrong.

Amy: So what did you say when they said, "here's this job at [the beef processing plant] and you've got to get over there and apply"?

Lily: Nothing. I will take it. You have to take it because they told me “if you don’t take it you will lose your TANF and you will lose your food stamps.... So how much is [the work requirement rules] applicable to refugee who came third day? How much is applicable to refugee who is here six months to tell them you will lose your TANF or Food Stamps if you don’t go to work?... And your recuperation is, like I said, maybe they went through theory, “let’s make them busy so they don’t have time to think about it”? Maybe, I don’t know. Or maybe they were looking for cheap working people? I don’t know what it is.

Culture Shock

The disconnect between what interviewees needed and/or expected in their new community and what they actually experienced resulted in what is frequently described as “culture shock.” Furnham and Bochner (1986) describe culture shock as “psychological reactions to unfamiliar environments” (p. iii) and they discuss research that attempts to correlate a number of variables with the extent and intensity of psychological responses to migration, reviewing, for example, Morrison’s (1973) list of variables:

1. Personality of migrant
2. Life experiences
3. Cultural background
4. Reasons for leaving old environment
5. Reasons for moving to new location
6. Stress of moving
7. Attitude of environment to migrant
8. Homogeneity of immediate environment
9. Fulfillment of expectations and aspirations
10. Personality of migrant (as cited in Furnham and Bochner, pp. 106-107).

Furnham and Bochner (1986) also review literature that relates migration culture shock more generally to negative life-events, quality and quantity of social-support networks, and value differences. While Morrison’s list of variables is interesting for speculating on the degree of culture shock an individual might experience, the three explanations for culture shock mentioned in the prior sentence would indicate that refugees in particular could be expected to experience significant culture shock. And culture shock is often

magnified by the realization that language barriers, public assistance requirements, or lack of U.S. educational credentials, frequently result in having to accept low-wage jobs and a subsequent lower social status than to what one was accustomed in the home country (Nah, 1993; Aroian, 1990).

The participants in this study certainly expressed a cultural dissonance related to work requirements. As mentioned in the previous section, confusion over why New Americans were not given more time and assistance in learning English before being required to work led to the speculation that America was interested in refugees as a cheap labor source. But in addition to the pressure to work, they also felt the pressure of conforming to mainstream American practices and norms such as living a fast-paced, highly scheduled life and having minimal contact with one's neighbors. Their responses to these pressures were sometimes confusion, sometimes anger, sometimes retreat, all of which were consistent with reactions in the early stages of resettlement (Gonsalves, 1992).

The interviewees were astute observers of American culture and even after being in the country for several years, they still found the cultural differences amusing, disconcerting, or frustrating. They viewed Americans as materialistic and compelled to buy things they did not need, unable to budget their money, controlled by their appointment books, and obsessed with work. They remembered their surprise at seeing so many people outside running. Rose noted that this was not what people did outside in her home town in Somalia:

But like in here you never see people walking. Here just people run, doing exercise only. So it confused, what's going on here? So in my country, when you finish like lunch...you come in the house, you come to wherever you want

to....You can take shower. You change the clothes. Go outside. Everybody they come outside. Every neighbor they come outside. They going [for] coffee or, they make coffee or tea....So they going be there, they going to talk about two hours there. So we see like that, so we come here. That's why [refugees] are confused.

Alma, a Bosnian interviewee, made note of the pressures she and other refugees had felt to learn English and become American. Comparisons were sometimes made between refugees and the ancestors of the local population.

...I think that refugees are rushed a bit too much to learn about American culture or to learn how to live an American way, and to become Americans, you know. "You're here and you have to learn English." I heard that many times, you know. "Well, now you're here." "[M]y grandparents came here, they had to learn English. They built this country. You have to do the same thing." Well, yeah, that's what I want, that's my goal too. But I can't do that in an instant minute, you know, in a New York minute as they say.

Alma also felt that it was difficult to make interpersonal connections with people, that formal communication styles and the focus on work was contradictory to her own culture's emphasis on interpersonal relationships and enjoying life outside work.

You know, I still struggle with the...communications and how people communicate. You know, I want affection. I'm very affectionate person, you know. And so..."let's talk person to person," you know. But it's hard, it's hard....like my whole life is based on a script like that somebody wrote and says, "...get up in the morning. Get your son dressed. Have a breakfast. Go to work. Come back. Cook. Clean. Go to work."...from what we're used to at least in Mediterranean countries, you know, enjoy life first. Work is...it is important, it is a big part of life. But it is not the most important thing. It's like, "okay, why can't we get together and have coffee?"....and like even here at my work, what we do is we make coffee in the morning. And ask me how was my night, or how was my weekend. You know, let's be humans instead of, you know robots or something. And so, yeah, that's still...I still struggle with that fast tempo how things are, and everything's by appointment, you know. Everything...my whole life is my schedule book, you know.

Mike echoed the sense of social disconnection noted by Alma above. He found it odd that Americans did not seem to interact as much with neighbors, extended family, and friends as was the norm in his home country. As Mike points out, having

relationships with neighbors is important to building trust with people you may need to rely on for help.

And a big also cultural shock here is...you can live 20 years in someplace and you will barely know your neighbor....that's like a big cultural shock. In Bosnia, your first neighbors are almost important like your family, because those are people that are first next to you and they going to help you. And you just want to build relationship where you can trust, you can have friends come over.

Although life in their new home was seen as fast-paced, programmed, filled with constant work, materialistic, and not characterized by the informal, neighborly and familial interactions to which many interviewees were accustomed in their homelands, interviewees also expressed appreciation for the cultural differences that meant certain freedoms to which some of them were unaccustomed. Hard work meant making money to earn a comfortable life style and, especially for women, America could mean freedom from restrictive sex roles and the freedom to make choices and have opportunities. Financial independence is particularly important for refugee and immigrant women who may become victims of domestic violence when they take on new roles (Ong, 1996), when spousal roles become reversed, or when the stress of adjustment results in anger (Gonsalves, 1992). Rose spoke for several of the female interviewees when she talked about these new-found freedoms.

...in Africa...women she didn't go job....She...stay home, she take care of kids. In America you are free. And you can go job....you can have decent kind of apartment. Like when you went and you see Kenya, if are refugee and you want apartment, you don't have anything....You can't buy furniture wherever you want. You can't. Everything is expensive....I like working. I don't like to stay home because...if you married and you stay home and you take care of the kid, the man is working. I can't ask everyday money, "give me money, I need money." It's very hard to ask the guy....Now I'm driving. I have my own car. And my young sister have car. She try to drive the car but she didn't get the picture ID....[In Somalia] if you want to buy your own place, you can't because you're a woman. You're supposed stay home and take care of kids. Man is doing

whatever he wanted....But I respect my husband. You're supposed to respect your husband but whatever I want, I can do here. I'm free.

In the context of cultural conflict and learning about life in Plainsville, the interviewees in this study articulated the importance for them of learning English and taking personal initiative. Newly arrived immigrants generally retain use of their native language in their homes (Portes & Rumbaut, 1996) and many even resist learning English for fear of losing their cultural identity (Bemak et al., 2003). But consistent with research on refugee perspectives on English acquisition (Haines, 1988), the interviewees in this study expressed the opinion that speaking English is the single most important skill for successful resettlement. When asked what they would tell other refugees about adjusting to life in America, they inevitably responded that learning English was the first priority. They saw English not only as critical to material survival, but also as necessary for personal development, relationship building, and self defense in the face of family struggles such as domestic violence and in relation to a cultural system that often seemed antagonistic toward them. Plainsville in general, and private sector employers in particular, were seen as not having much patience with non-English speakers. Alma went so far as to say that it was her anger with people that she felt were lying to her and "ripping her off" that motivated her to learn English. As she put it, she learned English "to express myself. To express my anger."

In addition to learning English, taking personal initiative was also a primary theme in the interviews when participants discussed what enabled them to survive and thrive in their new home. They felt self improvement and individual motivation were keys to success, particularly in the context of a system which valued these qualities.

Mike and Mikki, Bosnian interviewees, talked about people they knew who still did not speak English after living in the United States for several years. They saw this as a lack of motivation on the part of the individual, a failing that would keep them from professional mobility.

...In order to succeed here and to get around, to get things done you have to know basic English. Here you have a lot of people living here for seven years. They still don't know nothing, you know.

Mikki: Actually they don't want to.

Mike: Yeah, they don't want to.

Mikki: It's not about social worker, it's not about [the resettlement agency]. It's about them....And that's another problem. It's their problem. ... if you want to learn something, you will...I know some people they just say, "I don't want to speak any English ever in my life."

Mike: Yeah.

Mikki: "And that's it. Because I'm Bosnian." Now, that's stupid. You know, because you want to learn something in your life. It doesn't matter.

Mike: "I don't need English here," you know, "I can work and make some money." Hell, yeah, you can work in factory...

The categories of *Suffering and Loss*, *America the Ideal*, *America the Reality*, and *Culture Shock* outlined the migration trajectories--physical, emotional, and psychological--of the refugee participants in this study. All participants had similar notions of America prior to resettlement, all experienced as overwhelming the push to work and to fit in to American culture, and all articulated the importance of learning English, personal initiative, and the value of the freedoms that America afforded them. While the necessity of the public assistance for survival was acknowledged, the work requirement was seen as extremely stressful given their need for rest and recuperation. It was also seen as inhibiting the ambitions of refugees to return to school or to spend their time learning English and understanding the expectations of American culture. Data from the foregoing categories contributed to the development of the following themes:

1. *The immediate push to “make a living” allows little, if no, time and support for emotional healing, cultural learning, and just rest and recuperation from the trauma and experiences of being a refugee.*
2. *The feelings of loss experienced by refugees also involve the loss of an ideal image of America.*
3. *America the Reality means hard work, feeling cultural alienation, and being pushed to accept American values, but also means experiencing new-found freedoms.*
4. *Public assistance provides important economic support and is especially useful to women’s independence.*
5. *Personal initiative, especially in learning English, is important to success, but the expectation to conform to public assistance work requirements can work against that personal initiative.*

The above themes speak to general participant observations about their new life in America and begin to touch upon their encounters with Allen County Social Services. The following categories, *Perceptions of Social Services*, and *Skills Needed to Work with Refugees*, emerged from data that dealt more specifically with participant interactions with the larger social service system and with ACSS providers specifically.

Perceptions of Social Services

As users of the services offered by the county system and by other agencies, the interviewees had thoughts on their interactions with providers, the larger social service system and had recommendations for improving the system in its ability to help refugees adjust. Some of their comments were directed at particular agencies such as ACSS or the

refugee resettlement agency, other comments were focused on “the system” in general and referenced the whole network of human services with which refugees interfaced.

Comments were made about the need for the system to help and encourage refugees to learn English as quickly as possible, to extend and improve the orientation process, and to employ more diverse workers in social services, although one interviewee felt that same-culture workers would keep refugees from learning English and hamper self sufficiency. There was a general consensus among the interviewees that refugees, particularly recently arrived refugees, needed long-term concrete assistance with learning the skills of daily living. They needed mentors and coaches to show them how to shop, cook, use appliances, to help them learn about laws, taxes, driving, apartment leases and a host of other arenas of life. Participants also saw a need for ongoing cultural learning on the part of providers, and talked about prejudice and discrimination against New Americans continuing to be a problem in the larger community.

They acknowledge the difficulties related to translation services and the need for skilled and trustworthy interpreters. They saw the need for an improved English Language Learning (ELL) system to encourage and support New Americans’ efforts to learn advanced, not just survival, English and while they acknowledge the importance of personal initiative on the part of refugees, they saw the need for long-term mentors and “coaches” to ensure successful adjustment. This need for long-term support was emphasized by Lily who said that she knows people who, after six or seven years, still do not speak English and are confused about how to get help.

...it’s not even enough five years intensive case management for one refugee....[I know] people who are in the United States six years, seven years....they don’t understand English, or they don’t know where to go, or they scared of paperwork,

how to do it and stuff like that. They somehow need to have somebody to hang on to, to trust.

In the context of their recommendations for system improvement, refugee participants provided critiques of both the local private, non-profit resettlement agency and Allen County Social Services. They saw the resettlement agency as not providing the kind of intensive mentoring that refugees need for quite some time after their arrival. ACSS was seen as understaffed and the workers underpaid. This situation prevented providers from being able to spend the necessary time with refugee clients and, as Jessica pointed out, it made it difficult for clients to get emergency service:

[They need to] maybe add more workers....Because many time people have to wait a long time to get an appointment. And if they just got laid off and they just wanted Food Stamps for one month and then they don't get in until, you know, a while, it's kind of hard for them to survive.

Interviewees also saw the county system as a confusing array of rules and requirements involving a lot of paperwork. On the positive side, however, the rules could be a comfort in that they delineated clear expectations and, when followed, ensured a financial safety net. Ayaan spoke about her appreciation for this latter feature of public assistance:

...when I got pregnant here...and my husband he has...his uncle here that raised him. And he didn't want to let go of that life style. Like he had to stay with his uncle. And he wanted to stay with him with that too. And I felt like I want to have my own family and I was pregnant....And I was working full time. And I had no problem financially but I was bleeding and the doctor advised me to stop working....And I need too my privacy. And then I was not getting the help so I had to go to Section Eight....And I get my own apartment and I decide to have a little bit separation from my husband to him learn if he needs me or needs the single lifestyle. And then I had my son and I decided to go back to work. But that time I was on Section Eight and Food Stamps and medical assistance and cash assistance. And it was good. They helped me honestly. They helped me when I needed mostly.

But the rules could also motivate jealousy and frustration because the rules seemed to offer more benefits to some clients over others. Jessica talked about how difficult it was for some refugee families to understand that the size of the family or who was working in the family and many other factors dictated the size of a monthly public assistance grant. Since the program forms were all in English, it could also be difficult for clients to understand how to fill out the forms and what to do with them. And when unknown translators were present, either in person or through a translation phone service, refugees often felt uncomfortable, wondering whether the person could be trusted to keep their information confidential. Faiza talked about this as “1+1=11” -- once you share information about yourself to one other person, the potential is great for many other people to know that information. Faiza went on to say that mistrust of translators combined with talking about sensitive issues and the embarrassment of not speaking English presented a significant barrier to people getting assistance with serious issues such as domestic violence.

...the people who work for the company of the translation, they know it's confidential, this thing they shouldn't say in public or they shouldn't express or whatever, you know. But still for the client who wants assistance, cannot satisfy. It's a lot of pain and why another person have to say what you want to say. And why do you have to let another person know what's your problem, what kind of pain you have. What kind of English you have or if you have some family problem and you go to social service, somebody else knows your income and your everything....It kills your self esteem. It brings you down...[Y]ou can have a family problem and come to your worker and say, “I have some problem with my husband. I this and this and this. He told me this, my kids say this.” All that situation, you know, the client won't feel confident to say in front of [another person] ...that's why we don't open up outside. We don't talk about our problems. Most of the people, “how are you doing?” “Good.” “What are you doing?” “Okay, okay.” “When are you going to send me whatever I'm supposed to get?” “Fine.” And they leave without discussing about their own problems....And they want to avoid that as much as they can avoid. So that's why we don't have any help from domestic violence, anything happens home,

nobody will say. The kid's fight, nobody will say any violence that happens at home. Everybody keeps quiet because they don't want anybody else to know their business....

In addition to their concerns about trustworthy interpreters and confusing rules, interviewees wanted to be treated fairly and held to the same rules as everyone else.

ACSS providers were seen as friendly people and committed to applying program rules objectively and fairly, but they were also viewed as not particularly prepared for intercultural work and as difficult to connect with on a human level. Alma compared social service work to being a "shrink," saying that before you can really help someone, you need to get inside them:

...I don't think that social services had much information or knowledge about, at least [when I came], about a Bosnian population, or Somali population. You know, how to serve them best. [T]o be able to serve somebody or to work with somebody you have to know something about the people that you serve. You know, it's like when you go to the shrink. You know, he tries to go, "what's deep down under there?" to figure out what's wrong or what's causing you to be depressed....And so to be able to know how to work with that population or any foreign population that comes into country, you need to know something about them....I've been to places or like in a group of people who can't even locate my country on a map. Yet they think that they have a right to judge me. I think that's just stupidity....[America] has so much resources, so much ability, selling the technology and everything, and how people know so little about other cultures [and] about what's outside the United States?

Faiza spoke for several participants when she talked about the brusque reception she sometimes got at ACSS. She wondered why providers seemed angry or mean and she commented that they seemed trained in how *not* to greet people:

...The thing is you will feel the person who is your worker is paying whatever that they are giving you from their own pocket. Their behavior, how they make themselves mean and mad, something like that....[M]aybe you think they are giving you from their pocket....I mean, okay, we are refugees, we're new, we don't know nothing, we come sometimes without no appointment. We are walking from our house. We have some leaking problem. Nobody treats us good. They just behave bad. "Why did you come here without appointment?"

This and that. ... You go to see a caseworker. "I didn't receive my money this month. What happened?" Something like that. "What can I buy, how can I pay my rent?" "Oh, you know, I don't have anybody to explain to me. Why don't you go back to your house? When I get translator, I'll let you know"... Maybe they are trained that way. It's like 20 people behaving the same?

Amy: Trained what way?

Faiza: To not greet the people. [To be] rough.

Skills Needed to Work with Refugees

When asked about what makes a good county provider or about what social work students need to learn in order to work effectively with New Americans, interviewees consistently responded that what refugees most needed from social service providers, particularly in the early stage of resettlement, was understanding, patience, and compassion. Understanding meant having knowledge about the cultures of their clients and moving beyond an ethnocentricity that prevented genuine curiosity about and appreciation for other countries and cultures. Understanding also meant providers knowing enough about their own culture to understand and not merely judge differences between cultural attitudes and behaviors. Patience and compassion meant offering a humanness in the service interaction, using interpersonal skills that demonstrated authentic appreciation for the other person as a human being. Interviewees talked about wanting to be treated with respect and kindness, as friends or as family members. They wanted their pain and grief to be met with understanding and support. They were not asking for therapy or social relationships, but merely to be treated as the providers themselves would want to be treated. Faiza called it putting "yourself in the other person's shoes:"

The good worker is the one who really, as a human, put yourself in the other person's shoes. How about if you were the one who came today and get that assistance? How about if you are the one who left this country? If you leave this

beautiful country and you leave your language and you leave your dignity and the culture and everything, and you went to another country...with a new culture, new language, new everything, how would you feel? Emotionally already it's disaster inside. You are adjusting, you want to know the language, you are struggling to get yourself together. To dress the same like other, to cut your hair like others. And just to fit in the system. Before you do that if you see some people mistreating you it interrupts your mind. It's like whatever I try it's not working....a lot of friends of mine always say, "everything I do, it's not worth it. It's the same issue. I will never get financially independent. I will never be free. I will still be getting assistance. I will never be okay. I will never be me." And the person who's feeling all that pain...is already have low self-esteem. Already have a lot of pain dealing with that problem. So to come to social worker who doesn't understand the meaning of why that person is there it's not... You treat that person as human being. How about if you get bankrupt tomorrow...And you need help. The first thing that you need is the worker, the social worker. The first person that you feel that you want to cry on your shoulder and you want to tell whatever pain that you have. And if that person is not polite enough to understand, it's not worth it.

The participant comments above seem to be reflecting a core condition related to being a refugee in a new country – lack of social connectedness. Unlike other immigrant groups who may come to the United States to join family or friends, refugees often arrive with no support network in place (Baptiste, 1993). And if individuals are arriving from societies that emphasize "allocentricism and interdependence" among family members and with the larger community (Balgopal, 2000), the lack of social support can be particularly difficult when trying to adjust in a society that emphasizes independence and self-sufficiency. In this situation, refugee clients may look to providers, regardless of the provider's function or the service being provided, as potential members of their support network. Research on the relationship between refugee clients and service providers has indicated that some individuals or groups may avoid the assistance of outsiders due to cultural traditions (Horowitz, 1998), and experiences of war, torture, and flight may result in some refugee clients responding to survivors with caution or suspicion (Behnia, 2004).

But many New American clients are receptive to helping professionals and actually look for ways of personally connecting with the helper so as to make the helping relationship as understandable and productive as possible (Timberlake & Cook, 1984). Bahnia (2004) found that:

[b]ecause the client and professional are often strangers with no previous history of trust, some proof of identity is necessary to certify the trustworthiness of the professional. The initial encounter is, therefore, a stage in which the prospective client assesses the professional by evaluating whether it is possible to trust the other as a professional to whom confidential information can be disclosed. In this early stage, the client seeks information about the professional's competence, honesty, and attitude (p. 30).

In this search, the client is also observing the provider's environment, appearance, and manner and may ask questions that require self disclosure on the part of the provider, all for the purpose of gaining information to build trust and to be able to see the provider as a caring individual (Bahnia, 2004). The participants in this study also talked about their own "search" in interactions with ACSS providers, observing a provider's body language, facial expressions, how they were greeted, and whether or not the provider was able to make them feel comfortable.

In Russell's and White's study (2001), social workers and immigrant and refugee clients were interviewed about their experiences of the helping relationship. Both social workers and clients emphasized the importance of bridging cultural gaps between worker and client and workers discussed their efforts "to engage with clients in non-traditional ways and to promote a bicultural orientation with their clients" (p. 85). Clients in the Russell and White study voiced their appreciation for the sensitivity with which they were approached by workers, but simultaneously valued the authority of the workers because of the benefits it provided them.

The perspectives of this study's participants seems to be in line with the research mentioned above in that participants appreciated the professional roles that providers played in providing assistance necessary for resettlement adjustment, but also wanted proof of the humanness behind that assistance. This "proof" was needed not only to encourage a willingness to disclose information but also for validation that there were caring, compassionate people in the social network of participants' lives. For Alma, it seemed that providers sometimes hid their humanness behind paperwork:

You know, it's that whole thing about paperwork.... And as long as I follow the rules, I'll be okay....[O]ne of the things I would like to say or a message that I would like to give out is take time. Try to figure out, try to get some time, sit down and just be human. If you do, if you approach somebody as a human they are going to respond to you that way. If you approach somebody as an intimidated person with some paperwork in front of you with the paperwork that needs to be signed because you have to be accountable to your supervisor, well, you're not going to go far with that. You know, of course how do we balance all that? It's difficult but it's not impossible.

The data from the above *Skills Needed* category, in relationship with data from the *Perceptions* category, led to the development of the following themes:

6. *Refugee participants often perceive ACSS providers to be influenced more by rules and policies than by compassion and cultural understanding.*
7. *The lack of "human connection" from providers can reinforce the sense of loss and sadness with which refugees struggle, particularly in the early stage of resettlement.*

These themes, along with the other five mentioned earlier, provide an overview of this study's refugee participants' perceptions of their pre-migration experiences, American life, and their encounters with social services. Thematic relationships generated the following two theoretical statements:

- Refugee service recipients need a sense of human connection from county social service providers, not just implementation of job responsibilities; and
- County providers, both as gatekeepers to vital services and in their attitudinal response to refugee clients, play a potentially significant role in refugee adjustment.

These statements offer a response to the research question, “How do local county social service providers, community human service stakeholders, and refugee recipients of social services describe intercultural knowledge and skills in the context of social service interactions, and what factors enhance or inhibit such knowledge and skills?” Refugees describe intercultural knowledge and skills as the ability to project a humanness in the service interaction. Being treated with respect, kindness, and patience was necessary, but the human connection required an understanding of them and their cultures, a willingness to interact in an informal, friendly way, and the ability to show something of one’s self besides the professional role. It seemed to be the participants’ perspective that what inhibited this humanness was a lack of cultural understanding and a reticence to see beyond the professional role. Interviewees acknowledged, however, that systems issues such as overwork, underpay, and understaffing were factors in this dynamic. In many ways, the findings from refugee data point to Lum’s cultural competencies discussed in Chapter 1. Self awareness, knowledge of other cultures, an open communication style and ongoing cultural learning are all features of cultural competence, and seem to be what this set of interviewees believed necessary, and actually exhibited themselves.

The next chapter details the findings from provider data, with the following chapter discussing stakeholder data findings.

CHAPTER IV

FINDINGS FROM ALLEN COUNTY SOCIAL SERVICES PROVIDER DATA

This chapter discusses findings from interviews with Allen County Social Services providers, both eligibility workers and social workers. Throughout the chapter, findings are compared to the literature of various disciplines related to refugees and immigrants.

There is a substantial amount of literature related to the impact of changing social policy and public opinion on refugees (Tumlin & Zimmerman, 2003; Hood, 1998; Padilla, 1997; Maio, Esses, & Bell, 1994), the growth, distribution, and impact of immigrants and refugees in the U.S. (Capps, Passel, Perez-Lopez, & Fix, 2003; Fix, Passel, & Sucher, 2003; U.S. Committee for Refugees, 2000; De Vita, 1996; Drachman, 1995), refugee resettlement and integration (Singh & Gopal, 2002; Fix, Zimmerman, & Passel, 2001; McCubbin, Thompson, Thompson & Fromer, 1998; Mikatavage, 1998; Portes & MacLeod, 1996; Potocky, 1996a, 1996b), and health and mental health intervention with refugees and immigrants (Bemak, Chung, Chi-Ying & Pedersen, 2003; Nader, Dubrow, & Hudnall Stamm, 1999; Loue, 1998; van der Veer, 1998; Williams & Westermeyer, 1986). In addition, there is a growing body of literature specific to social work with refugees and immigrants, from the general cultural competence perspective (see Chapter 1) and specific to family and mental health services for refugees/immigrants (Fong, 2004; Drachman & Ryan, 2001; Balgopal, 2000; Christensen, 1992; Ryan, 1992;

Edleson & Roskin, 1985; Timberlake & Cook, 1984). But research related to the intercultural experiences and perspectives of public assistance eligibility staff is virtually nonexistent. An index review from 1990-2004 of the journal *Social Service Review*, a premier peer-reviewed journal covering a wide array of social welfare issues, found only eight publications related specifically to immigrant and/or refugee issues, six of which were book reviews. A new journal inaugurated in 2002, *Journal of Immigrant and Refugee Services*, examines immigrant and refugee concerns in human services but thus far its articles have focused on those *receiving* rather than those *providing* services.

What resources do exist related to eligibility work with refugees are primarily oriented toward how to improve service from a management and policy perspective (Epstein & Mohn, 1992; Ivry, 1992; Le-Doux & Stephens, 1992; Mullins, 1990; Vu, 1990). The fact that eligibility workers are generally not viewed as part of the social work profession (or any other human service discipline) no doubt explains the lack of research related to these public assistance workers. I find this an unfortunate gap in the social work literature since eligibility staff are gatekeepers of many services refugees use and since social workers so often rely on the information of eligibility staff and vice versa. As Ginger, one ACSS interviewee put it, "One thing I always like to tell social work students...and it doesn't have anything to do with refugees, but when they become social workers, and no matter what setting they're in, they need to be friends with their financial [eligibility] workers".

Because of this paucity of research related to eligibility workers' perspectives, most of the literature referenced below will draw on the available research from a variety

of disciplines including, but not limited to, sociology, intercultural communication, immigration studies, and social work.

Twenty of the twenty-eight county providers I interviewed were born and/or raised on farms or in small towns in a state in the upper Midwest. The other eight were from larger towns or cities in surrounding states. The group contained both female and male interviewees ranging in age from mid-20s to mid-50s. They were all white, with the majority of German, Scandinavian (Norwegian or Swedish), and/or Irish heritage, and with a few also declaring some Italian, Dutch, Russian, English, or French Canadian ancestry. Fifteen had college degrees, three had master's degrees. Their years of employment in social services ranged from just under one year to over 30 years. Each provider was interviewed once, with each interview averaging one-and-a-half hours in length. All provider names used in interview portions are the pseudonyms chosen by providers. Pseudonyms do not necessarily match the genders of interviewees.

Findings

Appendix H contains the complete set of ACSS provider data codes, categories, themes, and theory presentation. Figure 6 below presents again the data analysis process. From the data codes, six primary categories emerged: *Personal Heritage; Ancestors' Approach to Immigration; Being an American; Perceptions of Refugees; Perceptions of "the System;"* and *Skills to Work with Refugees*. Through the axial coding process, the following themes were developed:

1. *A sense of connectedness to family, neighbors, and community is important to providers and frequently comes from a small town or farming background. With*

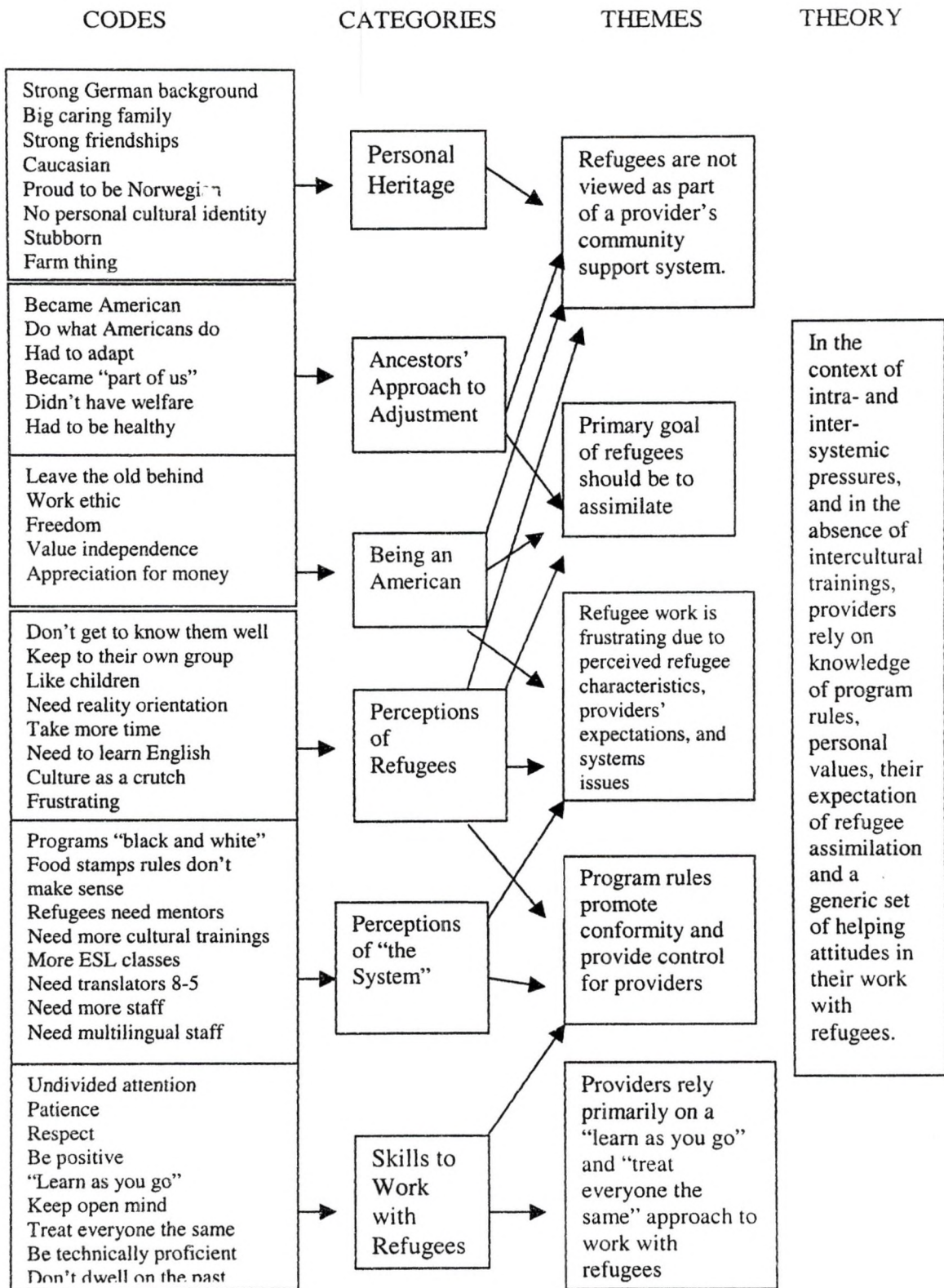


Figure 6. ACSS Provider Data Analysis

the language barrier, different customs, and reliance on the social service system, refugees are not viewed as part of a provider's community support system.

2. *The primary goal of refugees should be to "assimilate," and "become American."*
3. *Language is the biggest barrier to service provision.*
4. *Program rules are viewed as creating a fair playing field, promoting conformity, and are the default mode to help providers feel in control.*
5. *Work with refugees is viewed as frustrating due to an interacting set of variables related to perceived refugee characteristics, providers' value system, and larger system's issues.*
6. *While cultural knowledge is acknowledged as useful to avoid offending refugees, providers rely primarily on a "learn as you go" and "treat everyone the same" approach to interaction with refugees.*

Each of the themes above will be supported by discussion of data categories below. The theory statement, supported by a relational matrix, will be presented at the end of the chapter.

Personal Heritage

I started each ACSS provider interview with questions about childhood, ethnic heritage, and educational and employment histories. Farm and small town life figured prominently in many responses and the life styles and value systems derived from that life. They saw themselves as having grown up with a strong sense of morals and ethics and around community members who felt, as one interviewee put it, "accountable to each

other.” Several interviewees talked about the hard work in which they and their families engaged, the ubiquitous presence of extended families, and the care taking and mutual sense of responsibility that were present in families and small communities. They talked about the requirement of older siblings to be responsible for younger siblings and that teachers and neighbors were always on the watch when parents were not. One interviewee, Jim, talked about the pride he had growing up in a farming community and how glad he was to have been a part of “the farm thing.”

...I look back on some of those things with pride, even though I'm not farming anymore. I'm glad to have had the chance to be a part of that for a while. And just the spirit of it. You know, I didn't really start thinking this way until probably this job. After I put the farm thing behind me.

The interviewees viewed their farming communities or hometowns as homogeneous places, with extended family, neighbors and community members mostly drawn from the same ethnic groups as themselves. Although the Scandinavian temperament was verbalized as not particularly affectionate or emotional, there was nevertheless an understanding that support would be there when needed. The homogeneity of hometowns helped create a sense of community, comfort, interdependence. One could rely on people so much like oneself. And homogeneity minimized conflict. Diversity could be a source of potential tension that could jeopardize the ease of relationships and helping that comes with sameness. Cindy talked about how religious differences could create tension:

...I think diversity can create a lot of tension and lots of problems....I mean it's pretty easy...to help others when you feel like they are kind of like you and part of your family. But if it's different people, you're nervous, you're scared, you're apprehensive about others that aren't as similar as you....There is still a lot of differences whether you want to admit it or not with people and with cultures....[I]t is harder when there's the different values and religions and all

that...you can just look at it real simply. If you have a town where everybody's Lutheran you're probably not going to have too many problems fighting about religion. Okay, then if you have another different town where there's Lutherans and Catholics, you're going to have different opinions. But that's not saying whether it's good or bad. It's just more complicated.

While homogeneity could reinforce comfort and community, some interviewees recognized that monocultural communities were also places that could promote cultural insensitivity and where diverse people were, at best, objects of curiosity, and at worst, victims of prejudice and discrimination. One interviewee noted that in her home town exchange students from other countries would create "a stir" and were always "under the microscope." Several interviewees talked about the prejudicial comments towards ethnically diverse people that they heard from their parents and other community residents and that culture, race and other forms of differences were not often discussed in their homes. Growing up, some interviewees were exposed to Hispanic migrant workers during the summer months, but they noted that there was very little interaction between permanent residents and migrant workers. One interviewee talked about what she described as the "ignorance" of community residents who viewed the Hispanic workers as untrustworthy and prone to stealing. Theo reflected on the games he played as a child and how he and his friends were unaware of the inappropriateness of some of the words they used in these games:

... You know, when I think back on some of the terms we used, they would be viewed now as being insensitive and insulting. But what I realize was, at that time we used those terms without realizing that they were that way. We really didn't have pictures of people. I mean we played tag at night. It wasn't "Oli oli oxen free" it was "All nigger babies come home."

Ancestors' Approach to Immigration

Interviewees were aware of their own ethnic and cultural backgrounds and many discussed what history they knew of their parents, grandparents or great-grandparents immigration to this country. As children, some heard German or Norwegian or Russian spoken in their homes, but the languages, food, and practices of earlier generations were only minimally carried on in the adult lives of the interviewees. When asked how they described themselves culturally or ethnically, most responded by referring to themselves as "American," with one or two adding "Caucasian." The interviewees recognized that they were generally two or three generations removed from their first-generation European relatives and that this distance contributed to a lack of specific ethnic identity, but some also attributed their "American" identity to the commitment of their first-generation relatives to be American and to adopt American ways. As Becky put it:

...My dad's from Germany....he really liked it out [in that part of the state] because...the climate and stuff was so much like where he was raised in Germanyonce my dad came over to the United States he pretty much said "I'm going to be a citizen now." And he kind of wanted to forget the past....I guess my dad probably instilled it into me or whatever that I'm an American now. I'm going to do what Americans do. He kind of forgot some of the old German ways.

Their ancestors approach to immigration and adjustment in America was a topic discussed by several interviewees. Immigrant relatives were seen as coming to this country to start a new life and as one interviewee noted, at the time of her ancestors' immigration, she believed there was a requirement that immigrants be healthy and arrive with some amount of money. Interviewees believed that their ancestors maintained aspects of their cultural practices but that their main approach to adjustment was to "become American" and this meant working hard, learning English, and leaving the old

behind. One interviewee, Allie, viewed the United States as a country full of immigrants who had to learn to adjust and that Americans, and particularly those from the kind of state she lived in, were just generally skilled at adjusting to the vagaries of life. She also made connections with her grandparents' immigration and had a particularly colorful image to describe her view of the adjustment process:

...My grandfather came from Norway but he did not keep his native language and he did not keep his Norwegian ways. Not to say that he would not maybe had liked to. But it wasn't what you did...I think we're a country who has had to learn to deal with that stuff. I mean, if you're from the farm, you don't take a tractor into town with you...we have to adjust to whatever happens. It's like living in [this state], the weather changes, you do what needs to be done because the weather has changed. You put on a coat, you do the things you need to do for your car. [I]f you don't adjust to it you have a certain problem. I just think that's the way we are.

Being an American

Since so many of the interviewees described themselves as American or talked about their ancestors becoming American or about the need for refugees to become American, I asked what it meant to be American. They articulated various customs or characteristics related to "being an American" including following laws, acting appropriately in public, having high morals, knowing your neighbors, getting married, being materialistic, and having freedoms. But most of all, being American meant working hard, being independent, and not expecting to have anything given to you. These attributes were mentioned so frequently they seemed to be viewed as the hallmarks of "Americanness." Pat referenced the "boot strap" metaphor:

...Well, I think in the American culture...we really value independence. And that sort of pulling yourself up by your boot straps. You know, strong work ethic and those sorts of things.

The work ethic was referenced repeatedly as a characteristic that places the United States apart from other countries. Interviewees speculated that some refugees and immigrants came from socialist countries where they did not have to work for certain things, such as health insurance. Or they speculated that having been in a host country where they were not allowed to work motivated refugees to expect the same thing in this country. One interviewee talked about Americans working three and four jobs and conjectured that this was probably not a good thing, that so much work caused people to spend too much time away from their families. This individual also spoke wistfully about a particular European country where she thought they worked less and enjoyed life more. But all agreed that America was about hard work. Paul spoke for most interviewees when he talked about this American value:

... Well I think America's values are you work hard to get where you've got to go...and I think actually the American ideal is not handed to you on a platter but you work for it. I think that's how America started, people coming over here and working. And I think that's basically what it is.

The views on American values expressed by providers are a reflection of the long-standing American majority culture ideologies of individualism, self-sufficiency, future orientation and the work ethic. These ideals are often in contrast to the values of collectivism and a past and present orientation characteristic of other groups' cultural beliefs. As many authors have noted, this contrast can lead to misunderstanding and social service ineffectiveness, particularly if providers are unaware of how their cultural value system informs their attitudes, behaviors, and judgments and impacts on their service relationships (Breton, 1999; Maio, Esses, & Bell, 1994; Siegel, 1994). In this study, both social workers and eligibility workers were able to articulate components of

their value system, but the extent of this analysis in relation to refugees seemed to be the expectation that refugees should adopt these same values, if they had not already. This lack of reflection on contrasting values could be a result of my own lack of direct questioning about differing values and/or could be a result of providers having insufficient education about or interest in the cultural values and norms of refugee groups. In any case, providers placed much more emphasis on refugees learning and adopting American values than on examining their own values or learning about the value systems of refugee groups. The next section goes in to more detail on this point.

Perceptions of Refugees

The idea of their ancestors “leaving the old behind,” “being an American” or “learning American ways” was a theme interviewees drew on when they talked about what New Americans, present day immigrants and refugees, needed to do in order to adjust to life in American communities. In fact, words or phrases like “fit in,” “blend in,” “adapt,” and “adjust” were frequently used in reference to refugees and in relation to the interviewees’ ancestors as models of adaptation and adjustment. The providers seemed to be articulating an assimilationist perspective in relation to refugees, with one provider, Ashley, using this exact word:

...I don't feel that I am oblivious to any of their cultures or customs, however, I do feel that to a point, I hate to say this, but I think to a point that they might need to assimilate some. I don't think that they should expect to come here and then be taken care of on the grounds [of their religion], or their beliefs that a female shouldn't work....[A]ssimilation means....maybe the generation's got to hop, and with their children that will eventually happen but those that just come directly over here, and are unwilling to change or try something different, you know, that's where you run into problems, you know.

As proposed by Mayadas and Elliott (1992), assimilation is one of four modes of integration for newcomers, the other three being accommodation, adaptation, and alienation. Assimilation represents high economic and cultural integration in the host society, accommodation reflects economic but not cultural integration, and adaptation represents cultural integration but denial of economic integration. Alienation is the condition of those groups who are culturally segregated. Assimilation to “Anglo conformity” is a perspective which Ramakrishnan and Balogpal (1995) describe as a dominant, and historical, American ideology. It is a perspective toward newcomers to the U.S. frequently referenced in the literature about immigrants and refugees. Kuo and Tsai (1986) note that host country majority groups often believe that assimilation enhances refugee well-being and Bochner (1986) discusses the continuing appeal of assimilation for dealing with cross-cultural issues (especially, he says, since genocide and legal segregation are no longer acceptable). Schmid (2001) relates how public assimilationist pressures have limited second language instruction in public education and Potocky (1996a) demonstrates how the U. S. Refugee Act of 1980 has as a latent goal the assimilation of foreign cultures. One of the provider interviewees, Rachel, reflected the feelings of other providers when she articulated frustration with New Americans who did not seem to want to fit in, learn English and get to know the majority group members of the community:

...And I was thinking, I guess if you're going to come over here and...you sort of are more begging for everything in a way, then at least become part of us or at least understand who we are too...I mean, keep your culture, there's no problem with that. I have no problem with that, but yet learn where you are too...Find out who we are. Find out who we are. Learn to communicate with us, that we at least can communicate with you. And then try to be a productive member. These people...some of them not all, like I say, some, just want to come over and just

get what we have and not really seem to want to then be a part of us. Well if you want to be a part of us, you've got to be a part of us. [S]o I guess I would say to them, "Why do you want to come over here?"...because I mean, our ancestors and...the people that came over, they became a part of us. [We] still have Germans [here] that speak German and do their culture and stuff but yet they've become part of us too. So I mean, you don't have to lose your culture to do that.

Certainly many providers interviewed in this study were reflecting a widespread and deep-rooted belief that full economic and cultural integration of refugees was the best method of ensuring acceptance by the majority culture and refugee "psychosocial effective[ness]" (Gonsalves, 1992) in their new homeland. This perspective, however, is at odds with the views of some immigrants who view "becoming an American" as problematic since it may threaten group safety and solidarity (Baptiste, 1993) or represent a potential loss of cultural identity (Horowitz, 1998).

In concert with an assimilationist perspective, the "clannishness" of refugees was a source of mixed feelings for providers. Consistent with research that shows the importance of ethnic enclaves for balancing adjustment stress (see Kuo & Tsai, 1986, for a review of this research) providers understood the importance of ethnic communities to refugees' survival needs. But they also viewed "clannishness" as a "crutch" and not helpful to refugee adjustment, a view not uncommon in public opinion (Kuo & Tsai, 1986). "Clannishness" or keeping to their own prevented refugees from "fitting in," from being community members that providers, community members themselves, could rely on or build relationships with, as was traditional in the communities in which they grew up. Paul talked about the need for refugees to become Americans so they could "participate in society" for the good of the whole community:

...[To be successful here refugees need] to make up their minds that they were going to be an American when they come....Learn the language, learn the culture.

You're going to have your own little subcultures or your own...well like the certain things that we do with Christmas or whatever that are basically Norwegian. But for the most part you have to fit into the main culture of America. So if you're coming over to America to resettle because you don't want to live in this country you're at anymore because you're being persecuted or whatever, then be willing to become an American.

Amy: And what does that mean to be an American?

Paul: Oh, boy, that's hard.

Amy: I know.

Paul: Be an American....as far as being an American is just, you know, you live over here and you participate in the society as it is here....for the good of the whole country, for the good of the community.

Francis talked about her own initial impressions of providing assistance to refugees and her expectations that assistance to refugees meant their providing assistance in return:

Well, you know, initially when I started working in social services we never had such a thing as refugee assistance. And I think it was probably Carter or Reagan's administration where all of that was developed. And I thought, "Why are all these people coming over here when we can't even take care of our own people?" That has always been my thought about refugee assistance. Now I don't mind having them here. I don't mind helping them. Only if they help me back. Because there's a lot of resistance too...they think that they...need everything and they want it done for them all the time. And they can't learn the self sufficiency message.

The resettlement experiences of their ancestors, the influence of their own backgrounds, and the consequent beliefs about the norms and values related to being an American strongly influenced provider perspectives about refugees and work with refugees. Axial coding with data from the foregoing categories resulted in the following themes:

1. *A sense of connectedness to family, neighbors, and community is important to providers and frequently comes from a small town or farming background. With the language barrier, different customs, and reliance on the social service*

system, refugees are not viewed as part of a provider's community support system; and

2. *The primary goal of refugees should be to "assimilate" and "become American."*

In addition to expectations of assimilation, some providers had difficulty reconciling in their own minds the fact that refugees received benefits for which U.S. citizens, people in their own community, were not eligible and that maybe taxpayers' money was better spent on Americans first. Allie, like Francis above, spoke for several other interviewees when she stated the following:

... I have real questions about why are we bringing people over here when...in our very own country we have people who are going hungry and who do not have accessibility to the very same programs that we can put somebody in from another country. I find it real frustrating that we can bring a 65 year old lady over here from Africa and put her on medical assistance and give her money from the SSI program that she's never paid a dime in, you know....[W]e can't save the world. I mean it's wonderful that you can save 20 people maybe. But do we have 20 people here who are not getting help because those people are? You know, do we have other places that we should be putting our money?

The perception that refugee benefits detract from the financial support American citizens is consistent with what Padilla (1997) describes as a "growing concern that immigrants are a drain on the economy because of high welfare use and because they take jobs away from U.S.-born citizens and depress wages" (p. 598). The concern about economic drain has led to immigration control strategies such as withdrawal of public benefits for immigrants under provisions of the 1996 welfare reform legislation (Balgopal, 2000; Tumlin & Zimmerman, 2003). Padilla notes, however, that this drain is not substantiated by research, and Drachman and Ryan (2001) cite research demonstrating that, in fact, immigrant-produced revenue in the U.S. outpaces the costs of immigration.

In addition to the perception of refugee benefits being unfair, providers also carried out their work with refugees in the context of negative attitudes toward refugees on the part of their family and friends, non-refugee clients, the larger community, and co-workers. One interviewee talked about dealing with a school secretary who had received applications from several Muslim families for holiday presents from a Holiday Gift Bureau run through ACSS and the schools. The secretary complained to the provider that the children should not be receiving presents because they were not Christian and because the Muslim kids got to open their presents before Christmas. Other providers talked about how they frequently heard prejudicial comments about refugees from white clients particularly around the issue that refugees are eligible for some benefits that native-born Americans are not.

Attitudes toward immigrants may be informed by a number of factors. Hood's and Morris' 1998 article reviews research that suggests that individuals with higher levels of education have a more liberal view of immigration policy (Hoskin & Mishler, 1983; Starr and Roberts, 1982; Moore, 1986), and a more favorable view of undocumented individuals (Espenshade & Calhoun, 1993). Hood and Morris (1998) also noted the following research which suggests that gender and age play a role in attitudes toward immigrants with Citrin, Reingold, and Green (1990) finding females somewhat more ethnocentric and Hoskin and Mishler (1983) and Espenshade and Calhoun (1993) finding more negative attitudes towards immigrants and migrants in older adults (Starr and Roberts, 1982, and de la Garza, et al., 1991 found no significant difference in female and male attitudes toward immigrants). Providers in this study were aware of the prejudicial attitudes around them and, consistent with findings from cross-cultural interaction

research (Brislin, 1986), providers struggled with their own socialized attitudes toward “the other,” particularly if that other was of a different color. The following lengthy excerpt details one provider’s conversation with a Somali client around racial identity.

...And I have to laugh at one of my Somalian clients right now. We were filling out a form and she wrote on it that she was white. And I had to tell her that she wasn’t white, she was black. And that was really difficult. She’s a lighter skinned Somalian and I had to say, “No, you’re not classified as white, you’re classified as black.” And it was hard, you know, that was really hard to classify her by a color, when in her mind she thought she was white.

Amy: Why was that hard for you?

Polly: Because I don’t think it should make any difference what race we are.

Amy: Well, then if it doesn’t make a difference...

Polly: But it does. It does on the government forms, it makes a difference. It’s not me, but the government forms say you have to put a check what color here, you put a check on what race you are.

Amy: What would have happened if you had just let her put white?

Polly: It wouldn’t have made any difference.

Amy: So why did you tell her to put black?

Polly: I’m not even sure. I’m not sure. Program, the condition, I’m programmed and conditioned that this is what...you know.... [pause]

Amy: Just to push a little bit more here. If you said it doesn’t make a difference what color we are...why did you feel bad telling her to put black down?

Polly: Because I guess I was programmed by work to have to do that.

Amy: ...there’s a lot of other things that you are probably programmed to do that don’t make you feel bad to have to tell people to do.

Polly: Because in her mind she thought she was white. And like destroying her myth, destroying her self image kind of thing by saying, “You’re not white, you’re black,” you know.

Amy: Is that shaming or a negative thing to be black?

Polly: Maybe, maybe in her mind. I don’t know.

Amy: Did she feel bad about having to change it?

Polly: No, she just said she didn’t know which she was, she just thought she was white. You know, she thanked me for telling her that she was black....

Amy: So you felt bad but she didn’t feel bad about it?

Polly: She didn’t feel bad, yeah.

In the context of language and cultural differences and socialized attitudes toward outsiders, refugees presented a particular challenge to the service provision process and words frequently used by providers to describe refugees or work with refugees included:

rude	demanding	dread	take more time
scary	irritating	different	uncomfortable
frustrating	angry	fear	drain on system
intimidating	high maintenance	difficult	out of control

There were very few positive words used to describe refugees and very little reflection on the trauma they had experienced, their migration experiences, their cultural backgrounds, or any positive impact of refugees on the Plainsville community. This dearth of positive comments may be the result of my own lack of questioning about positive attributes of refugees. Nevertheless, providers often described refugees as pushy, demanding, and angry and Bosnians in particular were viewed as having a sense of entitlement to services and public support.

In her study of Soviet Jews who had immigrated to the United States, Hulewat (1996) posited a continuum of adjustment related to the early stage of dependence on the service system and identified four groups in this continuum: the highly motivated “help me get started” group, the more dependent “take care of me” group, a controlling “you must do it my way” group, and a fourth group with problems such as illness and depression in addition to resettlement issues. While Hulewat approaches her analysis from a psychological point of view (seeing successful resettlement as primarily an overcoming of the defense mechanism “splitting”) her characterizations of the “take care of me” and “you must do it my way” groups as approaching services with a sense of ingratiation, entitlement, or anger, was similar to the portrayal of many refugees by providers. Anna talked about her perception of Bosnian clients:

It seems...and this is just my experience...they've been very difficult to work with. Very demanding....And I think part of that is where they come from. That we don't understand it....I mean, all the war. I mean that has to affect them. And I guess I've tried to keep that in the back of my mind when I work with them. I

mean the way they've come across to me as like what I've described as just angry and intense and whatever...it's very difficult to work with...Because we really don't [come] across that a lot. And maybe we don't know how to deal with it.

Amy: Okay. How do you deal with it?

Anna: Oh, just the best you can, I guess.

Ashley commented that some refugees seem to have a sense of entitlement and she speculated that "the system" was to blame for this:

A lot of [the refugees], I think, you know, they were brought over and one of the first things they were introduced to was us. This is where you get your money; this is where you get your food stamps. So...that's what they're entrenched with, you know, they're entitled to this...You see that a lot, the sense of entitlement. The "how are we supposed to eat?" or "how are we supposed to do this?" They feel that they're entitled to these programs. And I don't know whose fault that would be. I guess that's...you know, the system.

What the above providers articulate has been documented elsewhere by helping agencies that have experienced refugees as demanding and angry (Ivry, 1992; Stutz, 1984; Handelman, 1983; Brodsky, 1982).

Refugees often have difficulties with agencies set up to help them...Many agencies report that the refugees studied tended to be very demanding, displaying an attitude that they should be compensated for their unjust suffering and fortitude. They continually complained of not receiving enough (Rogg, 1974, as cited in Stein, 1986, p. 15).

But an understanding of such attitudes is furthered by research on refugee resettlement behavior which shows that refugees may be transferring their anger at their former persecutors onto agencies (Stein, 1986), using methods employed in their home countries (Belozersky, 1990, as cited in Ivry, 1992) or viewing agencies as "hostile bureaucracies" (Taylor & Nathan, 1980, as cited in Stein, 1986) staffed by unfeeling workers who are more interested in humiliating than helping them (DeVoe, 1981; Keller, 1975). In this study, explanations for refugee anger or demands ranged from emotional stress related to trauma, as with Anna above, to unfulfilled refugee expectations based on

experiences in other countries, to ethnic characteristics, particularly in relation to ethnic Roma or all Bosnians. Providers often referred to refugees as a group and rarely made distinctions between different ethnicities or nationalities, most likely because this information was not required for program forms.

Work with refugees was made all the more interesting by the different smells, foods, clothing, and home décor with which workers were presented. Several providers mentioned what they thought was the strong smell of garlic, spices, or incense in refugee homes or that accompanied refugees to their agency appointments, and they also noted that non-refugee clients occasionally commented, or complained, to providers about these smells. When asked what she had learned about the various refugee groups who had come to Plainsville, Francis responded:

Well, unfortunately, the Somalis eat too much garlic....It permeates out of them. It's probably not a good thing but I can always tell when one's coming down a hallway. It's like perfume, you know, or cologne. It's really interesting.

Some providers who made home visits were intrigued by refugee food and décor and enjoyed these new experiences, but the different environments could also be intimidating or disconcerting. Providers talked about not being sure whether to take their shoes off in someone's home, or to have their heads covered, and not being clear about who all the people were in the home. Home visits often meant being offered food or drink, even entire meals and this presented a particular quandary since sometimes providers were not sure what they were being offered or they were just not hungry. They commented that to refuse food or drink might be offensive but they sometimes relied on interpreters to help them avoid eating. Suzie gave an example of this situation.

...I don't think we should try to cater to each group. I mean, "I want to be treated this way because I'm Swedish and don't treat me like a Norwegian." You know, that's not going to work....I think we just do our best and try to be sensitive. My Vietnamese family always tried to feed me. And I was told, "yes, it's rude to say no." I finally told the interpreter, "I don't want to eat. I don't. I don't feel comfortable." And I guess rude or not, I'm not going to do it for them because I'm not going...to eat a meal at my Norwegian clients. I'm going to say no too.

Amy: What made you feel uncomfortable about always being expected to eat?

Suzie: Well...you come out here, you want to get your stuff done and you want to get out...go. You don't want to...sit there drinking a whole can of coconut milk...I think it might have been coconut milk. But it was a whole big can. It was not very good. And they had bought cakes that were from the Oriental store...which maybe was better because at least I knew they were...I hope they were clean....I got by sometimes with sharing. We'd cut it in half or I'd have a little bit...because in a way it was partly that they were putting out their best stuff as an honor or whatever....

Amy: So the interpreter was willing to go ahead and interpret you not wanting to eat the food.

Suzie: Yeah. I think she told them something like I had just eaten, or just had coffee or you know....got me out of it in a nice way

The encounters with food, décor, and social settings described above and providers' accompanying feelings of intimidation and discomfort are consistent with the anxiety and uncertainty that frequently characterize intercultural interactions. The intercultural communication literature is replete with discussions of uncertainty/anxiety factors and reduction strategies (Lustig & Koester, 2003; Ting-Toomey, 1999; Bennett, 1998; Gudykunst, Kim & Yun, 1992; Wiseman & Koester, 1993) and most authors agree that the uncertainty and anxiety derive from simply being confronted with a novel situation. Archer (1991) describes these confrontations as "culture bumps" and suggests that if not understood and analyzed, these points of difference can result in or reinforce stereotypes. This analysis process is also referred to as mindfulness (Ting-Toomey, 1999; Wiseman & Koester, 1993; Gudykunst, Kim & Yun, 1992). Strategies for minimizing uncertainty and anxiety are generally categorized as passive, active, or interactive:

Passive strategies involve quiet and surreptitious observation of another person to learn how he or she behaves. Active strategies include efforts to obtain information about another person by asking others or structuring the environment to place the person in a situation that provides the needed information. Interactive strategies involve actually conversing with the other person in an attempt to gather the needed information (Lustig & Koester, 2003, p. 284).

Authors stress that culture plays a role in the choice of strategies employed, with some cultures preferring the passive approach while others may prefer the active strategy. Learning about other cultures, using self disclosure (Lustig & Koester, 2003, Ting-Toomey, 1999), being mindful of stereotyping and categorizing, and depersonalizing “culture bumps” (Archer, 1991) are recommended approaches to reducing anxiety and improving intercultural relationships. These approaches are very consistent with the strategies outlined in the social work cultural competence literature (see Chapter 1), and in the context of social work with refugees, Brodsky (1982, as cited in Ivry, 1992) recommends a professional informality characterized by warmth, genuineness and concrete expressions of care. There were few provider participants who articulated an active approach to their intercultural interactions, mostly through gathering information with the use of the internet or through reading materials on other cultures, and one or two providers adopted an interactive approach by carrying on cultural learning conversations with clients. But most providers seemed to prefer a passive approach to managing intercultural interactions. There seemed to be very little use of personable conversations and self- disclosure with refugees, and providers’ cultural learning was mostly confined to that information which would prevent offending a client. This passive approach may in some way be a reflection of the cultural values of the providers own ethnic heritages (primarily Scandinavian and German) which are often characterized as emphasizing

emotional restraint, personal boundaries, and social reserve (Midelfort and Midelfort, 1982; Winawer-Steiner & Wetzel, 1982).

Dependence on social service systems is commonplace for refugees who frequently arrive in their resettlement countries with virtually nothing in the way of money or material goods. Yu and Gusukuma (2001) note that many refugees may even arrive in a state of inertia due to the “forced dependency” they experienced during their long waits in refugee camps. In this study, dependence on social services was seen by providers as a potential obstacle to refugee integration and so much of refugees’ lives were potentially filtered through the social services system that some providers reflected on their own significant role managing the lives of refugees, almost as parents taking care of children. One provider spoke of sometimes needing to speak with them as if “talking to a sixth grader.” Two other providers referred to their work as parenting, knowing when to be nurturing and when to be a disciplinarian. Anne commented that working with refugees sometimes felt like “you’re there to manage their lives not their case” and Sassy hypothesized that their reliance on public assistance created a dependency relationship with ACSS:

...just looking at it from the outside and hearing stories from people here, maybe it’s they don’t quite get it yet....I mean you wouldn’t let a baby go at eight months on their own....They hang on to our system here because I think it’s comfortable....even if they can let go they don’t want to yet.

Limited English proficiency was seen by providers as the biggest barrier by far to reducing system dependency and to refugee adjustment and self sufficiency. This conclusion is supported by a substantial body of literature which has correlated English proficiency (in the United States) with accessing resources (Bemak et al., 2003),

economic stability (Haines, 1988), social integration (van der Veer, 1998; Scheinfeld, Wallach, & Langendorf, 1997), mental health (Williams & Westermeyer, 1986), and a general sense of “fitting in” (Mikatavage, 1998). But just as significant for providers was the fact that the language barrier hindered *their* ability to explain program rules and policies. In other words, it made doing their jobs all the more difficult. As one interviewee commented,

...It's just very difficult, very difficult when...some of the New Americans can't speak our language at all or just a little. It just makes social work and our jobs so much harder.

Because of the language barrier, interpreters, either hired by the agency or client family members, were essential to the communication process and sometimes served as cultural bridges between client and worker, explaining different cultural norms or inter- or intracultural dynamics. Providers had mixed feelings about interpreters, expressing their appreciation for the service and wishing for greater availability of interpreters, but also expressing concern about confidentiality and interpreter bias, mistrust in the accuracy of translation, and frustration with the time consuming nature of the translation process.

The providers' experiences with and concerns about interpreters are highly consistent with what has been written about the use of interpreters in the context of work with refugees. Van der Veer (1998) and others (Bemak et al., 2003; Dubrow & Nader 1999; Marshall, Koenig, Grifhorst, & Van Ewijk, 1998; Lindy, 1996) discuss the various factors that contribute to successful, or harmful, interpretation including the interpreter's facility with both languages, her/his behavior and attitude, gender, the cultural or political differences between client and interpreter, and the fact that the refugee experience and

post-traumatic stress may create distrust or in general inhibit the communication process, particularly if the interpreter is him/herself a refugee. In addition, interpreters in the social service arena are most often part-time staff who may or may not have formal training in translation, are often unfamiliar with social service programs and are temporary workers (Le-Doux & Stephens, 1992). Many of these factors were present in the provider comments and axial coding of language and interpreter data produced the following obvious theme:

3. Language is the biggest barrier to service provision.

In addition to language barriers, providers also speculated that refugee experiences in their home country or other countries prevented refugee understanding of laws and U.S. practices and influenced refugee interaction with providers. The language barrier, third country experiences, and perceived cultural differences were often sources of confusion, anger, frustration, and a sense of helplessness for providers. Providers felt that refugees could not understand program rules, could not understand why they had to work if America was such a rich country, and some felt that refugee clients would often intentionally not report income and other necessary information accurately. Tony expressed her opinion that often refugee clients just do not understand what to report and how to report it:

...coming here for the first two weeks, no one that I spoke to spoke English. So it was really interesting to learn more about their cultures. I had been going to things and learning about them because I think it does raise some questions but a lot of that is just the language barrier and their not being able to clearly ask the questions that they need to. It's harder to explain the program and what their responsibilities are. We find out a lot of that is that they're not reporting [changes in income, employment status, etc.]. And I think, depending on the workers, some think they're not reporting because they choose to. And I think it's probably in the majority of the cases they're not sure what they need to report or how to report

it. Especially if they have no one to interpret for them. You know, I get phone calls on my...caseload where I play the voice mail over and over and over trying to understand what they're saying or what they're asking....I usually try to call later in the afternoon when adult children, or, you know, high school children are home because at least there's someone [who can speak English].

For a couple of providers, language differences, refugee perceptions of workers, and refugee reliance on social services brought into sharp relief the power they had in the lives of refugees. Becky talked about having to explain to one refugee client that she herself was not responsible for the food stamp increase the client had received, even though the client insisted that Becky was wonderful and had unilaterally made the increase happen. Another provider, Noel, talked about needing to feel in control of the provider/client interaction and that sometimes refugees, with their "lack of facial expressions" were hard to read and that made her nervous and feel out of control. The policies and rules helped her maintain a sense of control, however, and she realized those rules gave her power, power that she tried to manage "with grace:"

...They're posturing, their stature, their lack of facial expressions, you know, their zombie persona. And it can be intimidating.

Amy: Is that particularly true for some groups more than others?

Noel: You know, I can't answer that because I don't distinguish my groups....I don't know how to read them. And that makes me nervous because I don't know what's going on. (Noel laughs.) Giving up control I guess is part of it. And I like to be in control....In those particular instances I end up defaulting to going by the book and just basic policy....To maintain control we will stick with policy. "This is what you need to do. This is when you need to do it."

Amy: Is that an experience that you also have with just as many American clients or does it seem to be particularly the case when you feel it with refugees?

Noel: It's with New Americans that I feel it more....and the other part is, I'm going to contradict myself, sometimes it's too much control and I don't want it. I don't want to be responsible for all this. But they give me more power than is really mine....I think they believe that we can really work miracles for them. And...all I can do is simply determine what their Food Stamps benefit is going to be and if they can get Medicaid coverage....You know, and it's very limited to their big picture. But I would say that 90% of the New Americans that I've worked with are the most grateful people out there. Because I think they do think

we work miracles and that's really a compliment. But it also tells me how probably what little they have. (Both laugh)...With all of them there's still a level of power that I have that I have to manage, I guess, with grace.

Amy: Meaning what?

Noel: Meaning that I can't take advantage of it. And I need to put myself on the other side of the desk....And I like to laugh. I have to laugh otherwise I would go insane.

Perceptions of "the System"

Although the two workers above articulated a sense of individual power due to their positions, more common in the provider interviews was the idea that real power laid outside them in the program policies and rules they carried out. Indeed, program rules were viewed as the mechanism which ensured fair treatment of all clients and which providers relied on for objectivity and control. Theo commented that rules could be used to claim objectivity but he felt that there was more subjectivity in the carrying out of rules than was acknowledged:

...Rigid rule is the lifesaver of eligibility. It's the one that a worker can use to testify to something, "I don't have anything against you, the rule made me do it," you know, my personal investment is gone....but what I'm realizing...is that people start to think they can be subjective with regard to rules. You know, you cannot add this column and come to a different number for client A than you did for Client B. This column always adds up the same. And you've got a lot of rules. We've got a million ding-dong rules.

Program rules were even seen as an Americanizing force, encouraging self-sufficiency, a work ethic, and training refugees in the behaviors necessary to dealing with bureaucracies. Especially in the sense of encouraging self-sufficiency and breaking a cycle of welfare dependency, the providers were carrying out the mandate of the Refugee Act of 1980 which views a refugee as "economically integrated, or self-sufficient, if he or she is not receiving welfare benefits (Potocky, 1996b, p. 245). Jim described it in the following way:

... [the public assistance program] is really an attempt to change human behavior. That's what we are trying to do. I think that's a good thing... Whether it's permanent or whether it's really happening, we don't know, but your behavior has to conform to certain rules. The reason we do that is because we think you are going to be a better person for it and not only you but chances are the next generation. That's really what it's for... So you try to break the cycle if there is a cycle.

Axial coding of the data related to program rules and perceptions of refugees resulted in the following theme:

4. *Program rules are viewed as creating a fair playing field, promoting conformity, and are the default mode to help providers feel in control.*

But the rules that provided a sense of control and that guided interactions with clients simultaneously tied the hands of providers and were viewed as overly restrictive, sometimes inhibiting the kind of supports clients needed. Each program had a different set of eligibility criteria so the policies were difficult to explain and difficult for refugees to understand. The rules and policies were frequently changing, especially in the Food Stamp program, and this was a source of confusion for providers and clients alike. Since confidentiality was a top priority, one client could not be told why another client was getting a higher level benefit, leading to the assumption that providers had unilateral decision making authority. Lack of flexibility in program policies was articulated as a problem in meeting both refugee and non-refugee clients' needs. Pat talked about state budget cuts resulting in emergency response systems being removed from the homes of clients that did not live alone, even though the other household member may work outside the home. The public assistance work requirement was seen as unreasonable for some clients who spoke a language or dialect for which there was not even an interpreter available, and Anna talked about gaps in services being frustrating for her and her clients:

...something we hear a lot is that we should provide some social activities, recreational things....Like, if somebody needs help getting to the toilet. You know, they can't do that on their own. Well, then they can't go to a movie. So we should be able to go with somebody to a movie, or pay for an escort to a movie so that when that person needs to go to the toilet, there is somebody there to help them. We hear things like that. Or shopping for clothes. They can't shop for themselves. They can't put clothes on and off on a daily basis certainly they're not going to be able to do that in Kohl's or wherever they go. So, they want an escort to go with them. Well, we can't do that. So, those are the sorts of things we hear. There's gaps.

Amy: And your feeling about that is what?

Anna: (Laughs) We are supposed to look at all informal support. Whether it be family, a church, can the store help you get clothes on and off? I don't know....I think we just need to search for every request that we get and maybe there's something out there. Maybe not.

Amy: And if it's not there?

Anna: If there's absolutely nothing there, then maybe...

Amy: You think that the guidelines maybe should have a little more flexibility to them?...

Anna: Maybe....As a very, very last resort, I guess.

Amy: How often do you get those kind of complaints...?

Anna: Probably weekly.

“The system” in general was a source of frustration for workers who often felt overworked, stressed, and uninvited to offer input or recommend changes in programs that controlled them and their clients. Ginger talked about the frustration of working in a bureaucracy and having little or no control in that system. As she put it, “we implement rules that come to us from [the state capitol]. And they react to federal rules. So by the time it trickles down to us you wonder who came up with this stuff?” In addition, providers felt overworked and stressed with their large caseloads. One provider I spoke with reported having a caseload of over 300 clients. A half day off planned for one unit in which the group was given the chance to engage in a fun activity together was viewed with suspicion and resentment since time away from work would just increase the work load.

Providers' frustrations with the rules, "the system," and attempts to explain both to refugees may be the logical byproduct of national resettlement and public assistance policies which, at best, are questionable in their ability to ensure true economic integration for refugees and other immigrants. A study by Fix, Zimmerman, and Passel (2001) examining economic and social integration of immigrants in the U.S. found that:

- between 1996 and 1999, natives' median wages rose more than 50% faster than immigrants' (p. 22);
- immigrants are less likely to hold jobs that carry employer-provided health insurance than natives and the gap *widened* slightly between 1996 and 1999 (p. 23);
- in 1997, the poverty rate among immigrant children was more than double that of non-Hispanic whites' (p. 26);
- *half* of limited English proficient (LEP) children attend schools in which a third or more of their fellow students are also LEP. This means that they are going to schools that are not just ethnically and economically segregated, but linguistically isolated as well (p. 27); and,
- noncitizen families are more likely to be poor (under 200 percent of the federal poverty level) than citizens' (59 versus 39 percent), but noncitizen families used fewer public benefits than citizens both before and after welfare reform (p. 31).

In addition, Tumlin's and Zimmerman's study (2003) of immigrant welfare recipients in three cities found that:

- many immigrants remaining on the [welfare] rolls have significant barriers to work, including lower education levels and less work history than natives;

- immigrants on TANF are less likely to be working than natives and more likely to be working in occupations that provide little opportunity for speaking English, gaining skills, and achieving self-sufficiency; and
- many job-training programs have English language requirements, which limit access for immigrants who do not speak English well (p. 2).

The last three points above are particularly similar to the issues raised by providers related to refugee integration. Providers seemed to be pointing to the fact that public assistance programs were mostly geared toward economic support rather than real self-sufficiency. Although refugees are guaranteed Refugee Cash Assistance in their first eight months (if they did not qualify for TANF), public benefits such as Supplemental Security Income, Temporary Assistance to Needy Families (TANF), Food Stamps, and Medicaid are then limited to their first five or seven years in the country (depending on the program and if they meet regular program eligibility requirements). In addition, assistance after those time periods is determined on a state-by-state basis (Fix & Laglagaron, 2002) and, as mentioned earlier, eligibility requirements vary from program to program. The time limits and the eligibility requirements are sometimes not sufficient for individuals who are still struggling with the language barrier, cultural learning, and post-traumatic stress. Although writing in 1988 in the age of AFDC (Aid to Families with Dependent Children, TANF's predecessor), Haines' analysis of the U.S.' refugee resettlement program, still carries validity today:

In the United States...the financial assistance that refugees almost inevitably need for some period after arrival is tied in structure, benefit levels, and administrative procedures to the AFDC...programme – a programme whose eligibility criteria and benefit levels vary widely among the states. What the refugee programme adds to this normal provision is reimbursement of state costs...and a special

refugee cash assistance programme which is, in effect, if not in explicit construction, a federally provided equivalent to an AFDC unemployed parent programme. Thus refugee cash assistance is constructed as a mainstream maintenance programme rather than as a special transitional assistance programme for a unique population. Such financial aid is only one part of a complex provision of assistance and services through multiple funding channels; multiple grant awards within those channels; a unique mixture (and sometimes overlap) of public and private sector involvement; complicated federal, state, and local relationships; and more detailed congressional interest than would seem to be justified by the programme's size (p. 203).

Interestingly, despite their eagerness for refugees to adopt American values and become independent community members, many providers recognized that refugee support is probably a long-term endeavor requiring institutional and community commitment to refugee integration. Their emphasis on substantive and long-term orientation, English-language training, and employment almost exactly mirror the recommendations from Vietnamese refugees to Montero and Dieppa (1982). These refugees' suggested a three-phase resettlement program focusing first on "comprehensive orientation to American life and culture" including "help in everyday coping skills such as shopping, opening bank accounts, and applying for various licenses," then a six-month intensive English course with follow-up and, finally, job training and a focus on employment that allowed for advancement (Montero & Dieppa, 1982, p. 80). ACSS providers strongly felt that the local resettlement agency was understaffed and ill-equipped to provide this kind of long-term and comprehensive support. A kind of resentment was articulated regarding the providers' experience of having refugees "dumped" on them very soon after their arrival. In addition to arranging for basic cash and food stamp benefits, providers were often responsible for helping refugees find adequate housing, living-wage jobs, and childcare. And although ACSS made efforts to

better facilitate service access by having job service and mental health intake workers on site, there was still a sense that services were not well integrated, requiring clients to go through several intake processes and visit numerous program sites in order to access services which they may or may not be able to acquire or be motivated to pursue. This is consistent with research on services to refugees that has shown that such services are fragmented (Padilla, 1997; Potocky, 1996a). In addition, ACSS providers viewed the transportation system as inadequate to refugee needs and with the dearth of available and reliable interpreters in all institutions, “the system” was seen as a frequent frustration for everyone. In this milieu, Nah’s (1993) idea of an effective “multiservice center for immigrants, run in full cooperation with all immigrant communities...equipped with bilingual helping professionals who represent various ethnic groups” and providing “cultural translation and mediation services” (pp. 294-295) would be a blessing indeed.

The following theme emerged from axial coding related to data from the categories *Perceptions of “the System”* and the previously discussed categories:

5. *Work with refugees is viewed as frustrating due to an interacting set of variables related to perceived refugee characteristics, providers’ value systems, and larger system’s issues.*

In addition to perceptions of the social services system in relation to refugee work, some providers also voiced opinions about the relationship between refugees and the larger community. Their discussions of community receptivity to refugees offered mixed messages. Some interviewees felt that the community was generally accepting of refugees, others felt that prejudice and discrimination toward refugees was a problem. Some recognized that both perspectives existed in the community. Providers that had an

opinion on community receptivity generally acknowledged that refugee adjustment was in large part tied to their acceptance by community members and institutions. Medical facilities that did not provide interpreters or businesses that were insensitive to cultural practices or that required English proficiency as a condition of work were viewed as barriers to refugee integration. These perceptions are in line with research that shows that “the context that receives immigrants plays a decisive role in their process of adaptation, regardless of the human capital the immigrants may possess “ (Guarnizo, 1992; Rumbaut, 1992; Zhou, 1992, as cited in Portes & MacLeod, 1996, p. 257). Context can refer to government and societal support for labor market integration (Bailey & Waldinger, 1991; Light, 1984 as cited in Portes & MacLeod, 1996), school context (Portes & MacLeod, 1996), and community prejudice (Richardson, 1968; Schmid, 2001; Williams & Berry, 1991). While providers placed the weight of adjustment on the shoulders of the refugees themselves, their comments about community institutions and community members indicated that they did believe that the community bore some of the responsibility for refugee adaptation.

Skills to Work with Refugees

In the context of demanding jobs, high caseloads, frequently changing rules and guidelines, and no control over any of these factors, what knowledge and skills did providers use in their work with refugees? When asked about what intercultural knowledge and skills they had received training in or had developed, there seemed to be one recurring answer: treat refugees like everyone else. Suzie commented that this was the best approach since there were so many different cultures represented in ACSS’s clientele:

It's probably good to know about their culture, you know, and a little bit of the differences. But there's so many different cultures, I think we just have to treat people as people. And I don't think we can try to treat Somalians as Somalians and Sudanese as Sudanese....I mean if we try to do that we'll all go crazy trying to keep track of the differences. Maybe be aware that there's differences. Treat them as people and they'll treat us as people, hopefully.

Workers in all programs acknowledged that their formal training in cultural awareness was limited. They occasionally referenced presentations given at their agency by a local diversity organization but these presentations were not routine, did not build on each other, and did not seem to make a lasting impression. Providers struggled to remember what the topics or content of the presentations were. Those with social work training felt that their education had not really prepared them for work with diverse groups and that during their education they often got more diversity content from disciplines other than social work (such as multicultural studies or anthropology). A few providers had personal travel experience that put them into contact with diverse groups and these individuals talked about how they felt that these experiences made them more receptive to and curious about people different from themselves. But overwhelmingly, providers articulated a "treat everyone the same" and "learn as you go" approach to working with refugees. "Treating everyone the same" seemed to be strongly informed by the environment of standardized rules and regulations and was no doubt reinforced by providers' personal values, limited time to spend with clients, and agency norms. It also meant interacting with all clients using a generic set of attitudes which included showing respect, being patient, giving undivided attention, being positive, keeping an open mind, showing compassion, and helping clients understand what was expected of them. Jill put it this way:

I don't know if there is anything so different. I think, you know, you want to treat them just the same as anybody else. You know, the language barrier of course is always [there] you know, so you want to be careful that they understand and give them an opportunity to ask questions....[You] treat people with respect and dignity. I don't think you should have a stigma or, you know, be racist... they just want the same services.

One provider explained the “learn as you go” approach as a response to lack of cultural training and as a result of just the effort to keep up with whatever group of clients is brought in for resettlement:

...we don't understand their culture. We don't understand that some cultures give their daughters away at 16 and marry them off or I don't even know if they marry. Sold off to another family. You know, we don't understand the women walking behind their men in the Somali culture, the Muslim...I mean, we don't understand the headdress, we don't accept things like that easily.

Amy: So you're saying that they're not getting enough education...or you all are not getting enough education about their cultures?

Sassy: They never have.

Amy: The workers?

Sassy: They never have. It's just an expected part of their job....they don't believe in training here....you kind of learn as you go. If there's refugees coming in, this is what you'll hear by email or maybe a memo or something “we have 80 coming in, in the month of March.” And I have never heard any of these people getting any training on [how] to accept these people. How to talk to them, how to address them....I know that they've had [the resettlement agency] here and I know that they do that quite often but I don't think...they're here to train, they're here to say, “we have so many people in, this is where they are coming from” and maybe say a little bit about themselves. But I don't think they say enough. I don't think there is any training.

Amy: Have you received any training since you've been here?

Sassy: No....not any cultural or refugee or anything like that. But then again, there hasn't been the influx that they've had in the past....

Amy: Is [training] something you would recommend ...?

Sassy: Oh, I definitely would. I definitely would. Especially after hearing stories here. I definitely would. These people shouldn't have to go into it blind either. But they do.

In the absence of ongoing cultural diversity trainings and professional or personal relationships with individuals from the various client groups, providers relied on “on the job training” for cultural learning, and the purpose of cultural knowledge was primarily to

avoid offending clients. Developing intercultural knowledge and skills seemed to have less priority than encouraging and helping refugees understand and learn the knowledge and skills related to “being an American” and this required treating refugees the same as other clients. One provider remarked that *not* treating refugees the same could result in their wanting special treatment elsewhere:

...I think they are treated just like everyone else is. But I think that’s the best we can do for them. If we start treating them special then they expect to be treated special no matter where they’re at, you know. So I think treating them just like everyone else is certainly the important thing.

The foregoing discussion related to *Skills Needed to Work with Refugees* provides grounding for the thematic finding:

6. *While cultural knowledge is acknowledged as useful to avoid offending refugees, providers rely primarily on a “learn as you go” and “treat everyone the same” approach to interaction with refugees.*

Interestingly, the emphasis on treating everyone the same was often paired with the realization that refugees had unique needs that required the larger human services system to respond in unique and substantial ways. Although providers expressed no urge to engage in systemic advocacy, they had detailed suggestion for systems change. One provider saw the need for more case managers who could make home visits, other providers mentioned the need for family mentors and more case aides to teach daily living skills. Several mentioned the necessity of a better public transportation system and the need for more interpreters throughout institutions in the community. English classes offered at different times of the day and with more flexible attendance requirements was mentioned. More day care services and additional housing for large families was

discussed. The providers seemed well versed in the concrete needs of refugee clients. And there was also a consensus about the need for more staff at ACSS. As Fran remarked, more staff was needed because “caseloads are too high for the time it takes to deal with the people and still feel like you are being courteous and not rushing.”

But interviewees also paired their “one size fits all” skill set and the “learn as you go” method with a list of suggestions for what they themselves needed in order to enhance their abilities to work with refugees. They wanted to treat everyone the same, but some also wanted to acquire more cultural knowledge and intercultural skills. A few commented that if there were more workers, their caseloads could be smaller and they might have a little more time to spend with their clients or there might be more space in their daily schedule to attend a diversity training or visit a cultural center. Patricia had a very specific example of why cultural trainings would be helpful:

Training would be good. Because, you know, for instance, like when I was talking to the Bosnian gal and I told her that I just thought that her jewelry was just gorgeous, I did not realize that I was asking her to give me something...I think constantly learning more would be nice. It would be wonderful if we had someone on staff who was preparing to deal with all that. If we had someone who just had all knowledge about different cultures....

Despite the interest in cultural trainings, the “treat everyone the same” approach seemed to be characterized by a professionalism that required a strict boundary between worker and client. Some providers articulated that it would be considered prying to ask refugee clients questions about themselves beyond what was needed for accessing services. And only two providers mentioned discussing their own personal lives with refugee clients. Also, it was a rare provider’s office that did not have the desk positioned between provider and client and it was also uncommon for offices and waiting rooms to

display culturally diverse items. An office was clearly a reflection of the personal tastes, and culture, of the staff person to whom it belonged. The professional boundary, both physical and interactional, may also have been a protective mechanism for providers since clients in general and refugees in particular could often express anger at the worker over program rules and decisions. In one eligibility meeting I attended, a discussion took place around the fact that if a client fails to follow through with their work plan as developed with job services staff, job services notifies the eligibility worker whose responsibility it is to potentially apply a sanction against the client. In other words, eligibility workers not only facilitate reception or termination of benefits based on their own program rules, but also have the power to sanction clients based on their noncompliance with related programs. Clearly, the coercive power of providers may mitigate any inclination to build relationships.

The social work and intercultural communication literatures, however, place a particular importance on the building of relationships for effective intercultural interactions and intercultural service provision. As mentioned earlier in the chapter, self disclosure is a key strategy for opening a channel of communication and minimizing anxiety. Hulewat (1996) emphasizes relationship building in order to "set the tone" for future contact, particularly since the refugee client often relies on the helper to assist her/him with the stages of resettlement. Timberlake and Cook (1984) discuss the relationship in the context of their research with Vietnamese refugees, recommending that social workers understand the nature of helping relationships from the client's perspective so as to not add further distress to the client:

The professional helping relationships must also be in keeping with the Vietnamese tradition of a personal helping relationship tailored to meet individual need. Thus, in the tradition of settlement work, the social worker becomes intimately associated with many aspects of refugee families and communities in the process. In the process, the social worker assumes either the traditional family role or the community role of helper, with its concomitant duties. These duties create obligations to invest one's self and one's time in ways that often go beyond the usual professional demands. Once engaged in a refugee's support network, the social worker becomes part of a rigid role system, which entails the expectation that role relationships remain the same through time and space, in periods of crisis and peacefulness. Time-limited and work-oriented professional behavior is not understood by Vietnamese refugees. Neutrality and objectivity tend to be translated as disinterest, coldness, disrespect, and even betrayal. Given their emphasis on harmony, Vietnamese clients have difficulty discussing their problems and sharing their feelings and concerns. Too early a focus on the personal inner world often results in abrupt and premature withdrawal from the social work process. By the same token, too abrupt an exit by the social worker from a refugee's support network may be interpreted as betrayal of trust or disloyalty. Thus, unless the termination process is carefully worked through, their newest loss may undo the benefits achieved (pp. 111-112).

Having an understanding of the culture of a minority-status client can be quite a daunting task, particularly for those who work with immigrants and refugees coming from a variety of ethnic, national, and cultural backgrounds. For Fong (2004a), cultural competence with refugees requires not only an understanding of the cultural orientation of the refugee client, the host community and cultural points of conflict between the two, but also requires using refugee cultural values as strengths in a solution-focused process that empowers clients. Fong additionally articulates cultural competence with refugees as "culturally competent *contextual* practice" since the following contexts, at minimum, need to be considered with most refugees and immigrants:

- Context 1: The homeland situation
- Context 2: The departure from the homeland
- Context 3: The arrival experience in refugee camps or first site
- Context 4: The initial landing in the United States
- Context 5: The current home environment in the United States
- Context 6: The continuous places lived in the United States... (p. 49).

The considerations above may be most relevant to social work staff who, in contrast to eligibility workers, often have more frequent, and personal (i.e., home-based) access to clients, and who are mandated by the job title to engage in more extensive and multi-level assessment and intervention with clients. However, both sets of workers might benefit from the opportunity to understand the broader contexts of refugee lives, to engage in intercultural learning and relationship building with refugee clients, and to base their work on the products of those processes. It would be helpful if policy decisions and institutional structures, as well as individual provider motivations, would allow that to happen.

Thematic Relationships and Theoretical Finding

The data discussed above reflect provider perspectives about three primary overlapping systems in relation to county social service provision: the provider system, meaning the workers themselves with their histories, values and identities; the refugee system, perceived both as a homogeneous group and as discrete subsystems, and; the social services system, including both the providers' agency and other systems in the community. Perspectives on each system contain paradoxical elements that seem to produce a tension both within and between systems. Providers acknowledge and appreciate their own immigrant heritage but struggle with the presence of the new immigrants and question these diverse groups' ability and willingness, like their own ancestors, to become Americans. They have a strong sense of community membership and of the associated responsibilities of mutual aid, but also articulate some of the xenophobic urges in the larger community to not provide aid to the New American

community members. They have well-developed identities as representatives of a social services system whose programs are meant to benefit all who qualify, but they are also tax payers and struggle with the feeling that their tax dollars might be better spent on "our own" first. They recognize the cultural differences of their clientele and, particularly if they have social work training, they acknowledge the importance of "starting where the client is at," but they have been exposed to very little information about the various cultural groups and tend to downplay the significance of culture in their interactions with clients. Their primary approach to working with refugees, indeed all clients, is to treat everyone the same, but they worry about offending clients from other cultures and express the need for cultural awareness trainings.

In provider perspectives on the refugee system, they sometimes talk about refugees as a homogeneous group, unclear as to nationality and the inter- and intragroup differences, yet have opinions and perspectives on particular groups. They comment that refugees have often come out of traumatic circumstances, that their adjustment to a new life in a new country is a long-term process, and that the amount of support and guidance that refugees need is comparable to that of a child, but they also articulate the need for refugees to become self sufficient and independent as quickly as possible. They see many refugee clients as appreciative and motivated individuals but may also see refugees as needy, pushy and time consuming.

Perspectives on the larger social services system also contain paradoxes. Within their own system, program rules, policies, and guidelines are seen as offering a level playing field for all clients, but some of the rules are seen as unfair and unhelpful to refugees, particularly those clients with limited English ability. Program rules confer

power on providers, enabling them to make decisions about who is and who is not eligible for benefits, yet providers also feel disempowered and overwhelmed in the face of constantly changing rules, large caseloads, and service fragmentation. Providers understand the long-term service needs of refugee clientele, but their system, and other services, provide only short-term support, geared toward economic stability rather than true self sufficiency. Providers can enumerate the rules they consider to be unfair or unhelpful to refugee stability, but they feel no capacity to provide input into the system and they articulate no urge or ability to advocate on behalf of change.

These paradoxical perspectives reflect and reinforce intra- and intersystemic tensions, all placing pressure on the individual provider in her or his work with refugee clients. If caseloads are high and rules are changing, there is little time to get to know clients and for intercultural trainings. Refugee needs and demands coupled with short-term supports and unfair rules create worker frustration and a reinforced perspective that refugees need to work harder at becoming American. Limited intercultural training and experience maintains a homogeneous perspective about refugees and a one-size-fits-all approach to intercultural interactions.

Providers' context can also be examined in relation to the refugee perspectives discussed in the previous chapter. Both groups acknowledge the need for more county workers in order to create more space and time for the helping interaction. Both see a need for ongoing cultural learning on the part of providers, and both believe that prejudice and discrimination against New Americans continues to be a problem in the larger community. Both acknowledge the difficulties related to translation services and the need for skilled and trustworthy interpreters. Both would like to see an improved

ELL system to encourage and support New Americans' efforts to learn advanced, not just survival, English. Both underscore the necessity of long-term, substantive orientation. Both acknowledge the importance of personal initiative on the part of refugees, but both also see the need for long-term mentors and "coaches" to ensure successful adjustment.

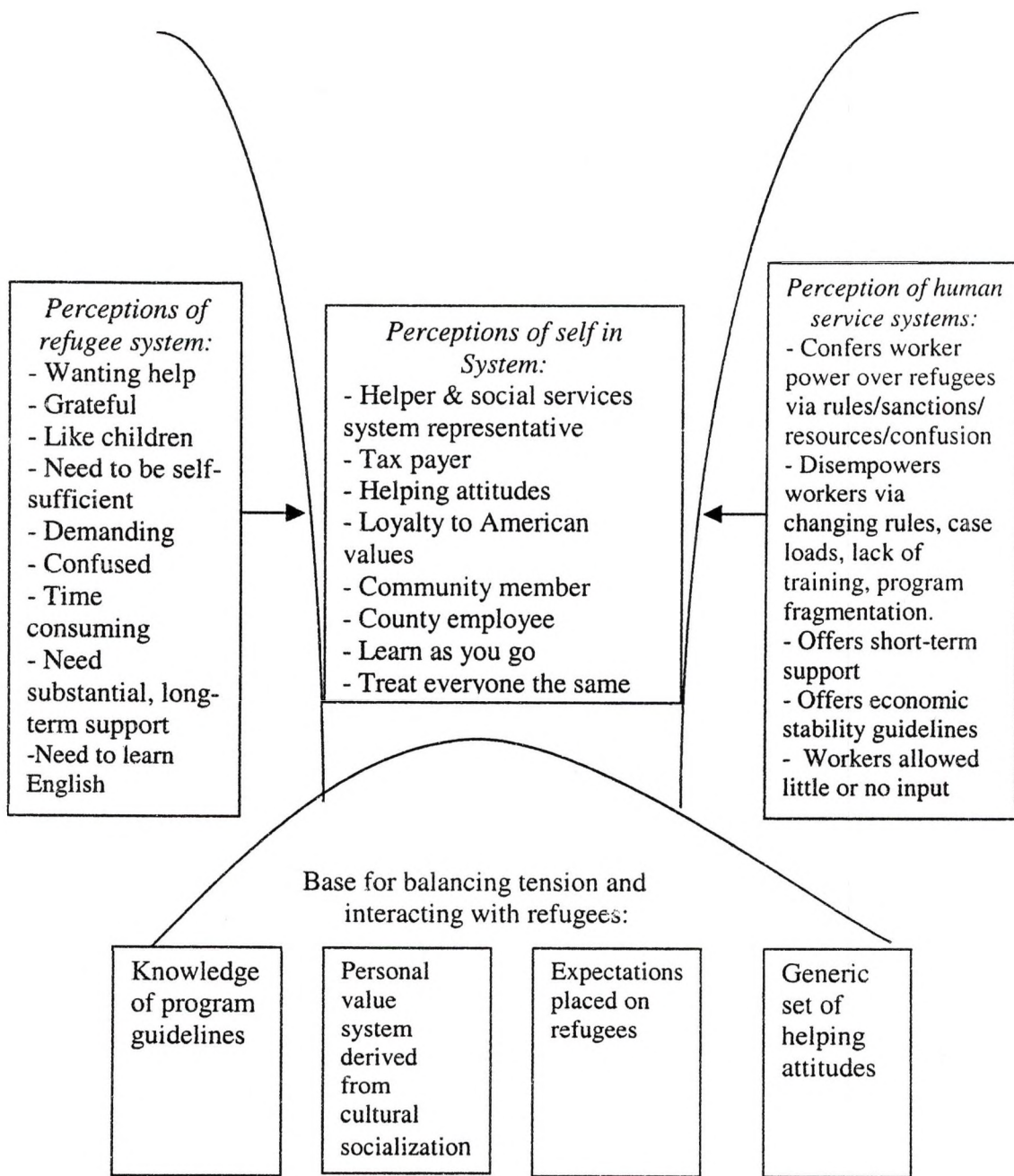
Where they most differ seems to be in how they view their relationship with each other and their expectations related to acculturation. Providers see their roles as employees of the county, implementing rules and policies with fairness and respect for all clients. In-depth knowledge about a client's culture of origin or traumatic history is generally not required for service eligibility so asking questions about these areas is seen as prying and potentially offensive. In addition, with large caseloads and demanding work, social conversations with clients about their lives is a luxury that providers feel they cannot afford. Providers acknowledged the importance of the public assistance safety net for refugee clients, but they see adjustment as ultimately being the responsibility of the individual client and that adjustment is best pursued by "becoming American."

The refugee participants, on the other hand, expressed a need and expectation for providers to understand their individual cultures, since those cultures inform who they are as people. And they expected providers to be approachable, caring, and interested in them since such characteristics would help ease the pain of their loss and struggles with resettlement. They knew they were expected to become American and they were more than willing to take on the responsibility of learning English, working, and becoming financially self-sufficient. But there were other American features that they were not so willing to adopt, such as social self-sufficiency, lack of warmth and physicality in social

interactions, routine disconnectedness from family, friends, and neighbors, and national ethnocentrism. They also expressed more of an interest than did providers in seeing New Americans employed in social services.

Interestingly, what providers articulated as frustrating characteristics of many refugees (reticence to learn English and become American, clannishness and unapproachable as community members, and slowness to become self sufficient) were the very things that the refugee participants in this study were *not*. It may be the case that interviewing additional or a different group of New Americans might reveal more similarities with the providers' descriptions, but it is my assumption that refugee groups and the majority of Plainsville residents have similar hopes and aspirations for their lives and that New Americans have important lessons about life and living that might be important for the Old Americans to learn.

In summary, the participant providers in this study, with or without social work training, carry out their work with refugees in an environment of systemic tensions and without ongoing intercultural trainings or significant extraprofessional intercultural experiences. In this context, providers rely on their knowledge of program policies and rules, their own personal value systems, their expectations of refugees for conformity, compliance, and assimilation (which derive from program rules and personal values systems), and a generic set of helping attitudes as a base for balancing the tensions and interacting with refugees (see Figure 7 below for a relational matrix of this assertion). This base of action does not contain the wide-ranging set of knowledge and skills related to cultural competence as outlined by authors in the social work literature and discussed



Theoretical statement: In the context of intra- and intersystemic tensions and pressures, and in the absence of intercultural training, workers rely on a base of action comprised of knowledge of program policies/rules, personal values, expectations placed on refugees for conformity, compliance, and assimilation (from program policies/rules and personal value system), and a generic set of helping attitudes in their work with refugees.

Figure 7. Thematic Relational Matrix and Theoretical Statement

in Chapter 1. This absence does not necessarily denote ineffective service delivery in relation to refugees, but does beg the question of how much more effective service delivery and refugee adjustment would be if providers had the opportunity, and were inclined, to engage in ongoing intercultural trainings and experiences. The findings described in this chapter also potentially reinforce the idea that, in a monocultural service context and with program rules and majority culture personal values as the primary framework for intercultural service provision, providers in the social service system, and their agency, serve as important transmitters of dominant cultural norms and values.

The areas of similarity and dissonance between county provider and refugee client perspectives will next be placed in comparison to the perspectives of stakeholders -- human service professionals in the larger community who also work with county clients.

CHAPTER V

FINDINGS FROM STAKEHOLDER PARTICIPANT DATA

The group of nine individuals whose perspectives are discussed in this chapter all work in some area of human services in the community in which the study took place. Their work in the fields of healthcare, mental health, K-12 education, employment services, and resettlement services brought them into contact with county social service providers and all of them except one worked directly with New Americans.

All the stakeholder interviewees were women, in their mid-20s to mid-40s and eight of the nine were white with a predominance of German, Scandinavian, and Irish heritages. One interviewee was Native American. Eight were born and raised in the upper mid-western state in which the study took place and one was from a neighboring state. Their years of work in their respective fields ranged from two years to over thirty and with the exception of one interviewee, they all provided direct service to clients. They all had bachelors' degrees in human service fields such as psychology or social work, and three had masters' degrees, also in human service disciplines. The names used in the interview portions below are the pseudonyms selected by the interviewees.

Findings

Figure 8 below offers an overview of the data analysis process for this set of interviews (stakeholder codes and categories can be found in Appendix I). As with the prior two chapters, discussion of data categories will be the primary vehicle for

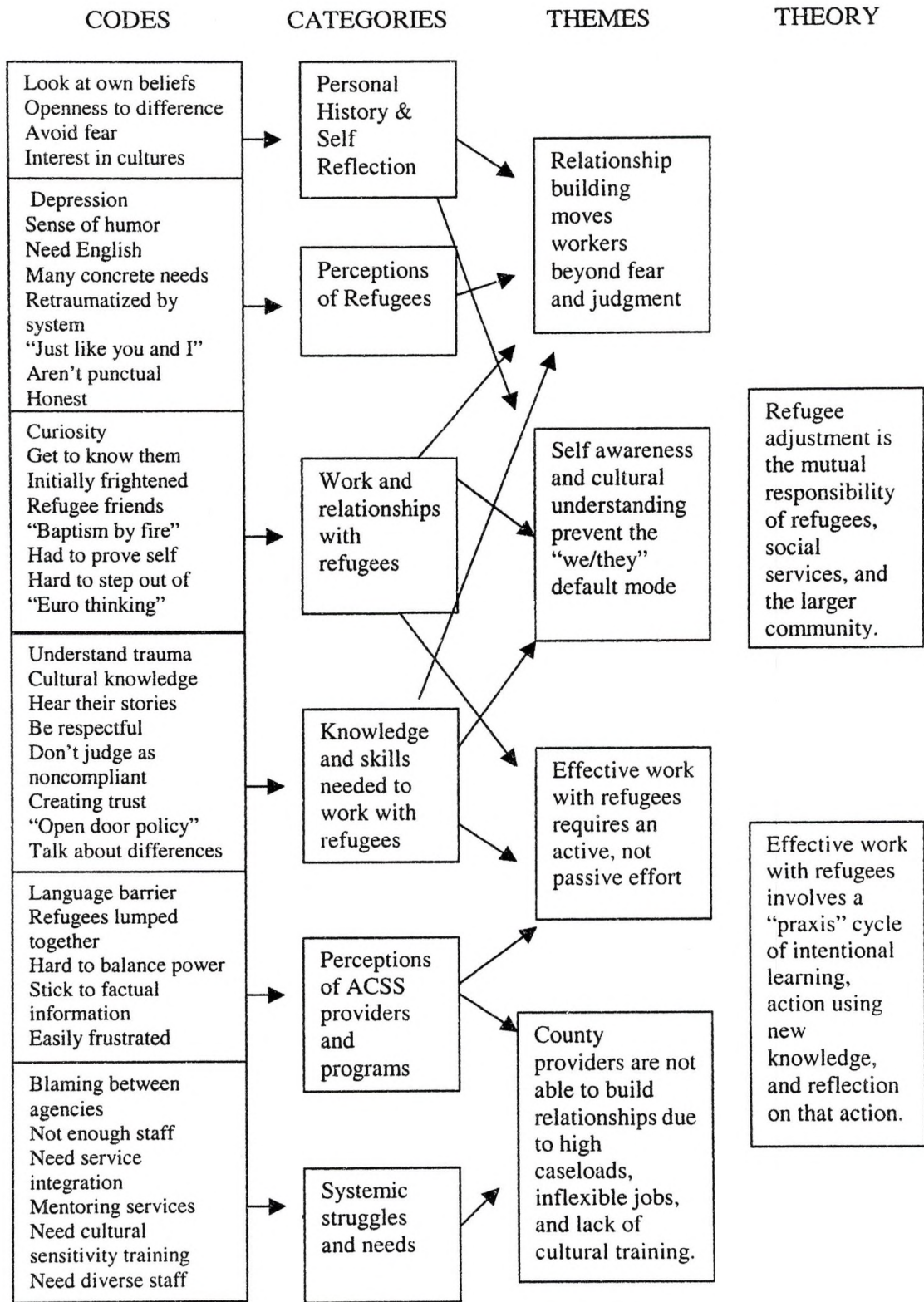


Figure 8. Stakeholder Data Analysis

presentation of findings. A thematic relational matrix and theoretical statements are offered at the end of the chapter. Primary themes that emerged from axial coding were:

1. *Building relationships with refugees moves stakeholders beyond fear and judgment;*
2. *Cultural self awareness and knowledge prevent a “we/they” default mode;*
3. *Effective work with refugees and refugee adjustment requires active effort on the part of the worker (cultural learning, building relationships, advocacy), not just a passive mental attitude of respect;*
4. *High caseloads, inflexible policies and rules, and lack of cultural understanding inhibit county provider cultural competence.*

As with provider and refugee participants, interviews with stakeholders began with questions about their individual backgrounds, education, and work history. The following data category emerged from those discussions.

Personal History and Self Reflection

With the exception of the interviewee with American Indian ancestry, the participants came out of the same ethnic backgrounds as the ACSS provider participants and had very little connection in their adult lives to the cultural elements of their own ethnicities. They felt they had had relatively sheltered upbringings, especially in terms of exposure to diverse groups and, like the providers, had been strongly influenced by the values and norms of the communities in which they grew up. Nevertheless, they had gravitated toward study of and work with diverse groups as a result of some combination of education, travel, and particular life experiences. One interviewee, Joy, talked about her initial encounters with refugees through a church she belonged to:

In churches that we had belonged to, on two different occasions we sponsored refugees....And both times I became very involved with the process of it. And I think that was the biggest...introduction because I personally got to do all the stuff....It used to be that churches pretty much took care of refugees coming inAnd...there's still a big strong emphasis on churches supporting. But as more refugees came in and more money was given to take care of those refugees, it got less and less involvement from churches [and more by the resettlement agency]...It's still the greatest and best way to resettle refugees. But at that time we just did everything, not for them, but everything with them, in terms of getting to know them, being their support. Even the first family, we brought in 42-year-old women and her about 20-year-old daughter. And this 42-year-old woman ended up marrying a 42-year-old farmer in the community.

The interviewees moved very quickly in the interviews to talking about how work with refugees had made them think more about their own cultural heritages and one interviewee noted that such work seemed to provide some fulfillment that would not have been there otherwise. As Abigail put it, working with diverse groups made her realize her own lack of cultural connection and a need to feel more "full" in that regard:

I always feel that I'm just kind of empty in that area. And...I want to feel full. I work with a lot of different ethnic groups and they have this really strong history and they know what's gone on in their country and they know how their ancestors got here and they know all these things. Where I don't really know all that.

In addition to promoting interest in their own cultural heritage, relationships with refugees had challenged their own belief systems and influenced their personal philosophies. They talked about looking for similarities instead of differences, avoiding fear as an excuse for not interacting with people, being open to differences, and understanding that a "we/they" attitude can prevent self-reflection and relationship building. Cultural self-reflection and personal philosophy development was not, however, merely a result of having exposure to refugee individuals. Stakeholders had developed relationships with refugee individuals and had become knowledgeable about

refugee backgrounds, experiences, and cultures. The flexibility that their jobs offered them in terms of time to get to know refugee clients and/or coworkers and the quality of those relationships seemed to inform their perceptions of refugees and their work with refugees. These factors, along with a pre-existing interest in diversity as informed by travel, education, and personal experiences may account for the similarity in perspectives that stakeholders had in relation to refugees and the knowledge and skills stakeholders felt were necessary to their work. The following two sections look at such knowledge and the stakeholders' perceptions of their work and relationships with refugees.

Perceptions of Refugees

Stakeholder interviewees had some similar observations as county providers regarding the need for refugees to learn English, work hard, and to be willing to interact with members of the dominant culture. But stakeholders had also gained extensive insight into and knowledge about the history, cultures, and current struggles of refugees. They talked about the inclination of some refugee groups to maintain a strong communal boundary against the larger community, about refugee basic needs and mental health issues, about intergroup prejudices and struggles with changing gender roles, and refugee resilience and self advocacy. Stakeholders' knowledge about New American lives seemed to mitigate any inclination to offer facile and broad-sweeping recommendations for refugee adjustment. They gave detailed descriptions of the persecution that some refugees had experienced, they talked about the different ethnic and religious groups present in the Bosnian community, and one stakeholder discussed the prejudices between two African groups and the terms they used to describe each other. Stakeholders seemed to have too much knowledge of and appreciation for refugee cultures to suggest that

assimilation was the preferred path to success. Tammy talked about the “deep meaning” for why refugees are here and that having that understanding was necessary to working with refugees:

...I think that a huge part of being able to work with, for example a refugee from Somalia, is you have to understand what went on in Somalia. Why are they here? What was life like in Somalia? What were some of the politics that led to the situation so that you can understand that the reason for their coming isn't because they wanted to come and take advantage of our welfare system or of our abundance of whatever. There's a very deep meaning for why they are here. Bosnians are a really good example. There are three different, very different ethnic groups from Bosnia. And we bring them here and we say they're Bosnians and we're going to treat them all like Bosnians. And they're very different. And their experiences were very different. And their conflicts were very different. And the reasons they are here are very different.

Interviewees also acknowledged that the road to their new perspectives was not always smooth and that work with refugees had been challenging as well as rewarding.

Work and Relationships with Refugees

Despite their expressed interest in cultural diversity, intercultural interactions and particularly initial experiences with refugees, were challenging. This group of interviewees had jobs that allowed them the opportunity for more than formal, superficial relationships with refugee clients and some interviewees even had New American colleagues, friends or family members. Nevertheless, cultural differences proffered the usual issues related to intercultural understanding, language barriers, and confrontation with one's own biases related to differences. The interviewees had clear recollections of their first encounters with refugees. Differences in attire, difficulty in understanding heavily accented English, eating different food, feeling uncomfortable, and the challenge of understanding differences in cultural norms were common elements in their stories. Abigail, a community worker with diverse groups, talked about struggling to be allowed

to help a group of African women cook for a community event. They saw her as not experienced enough with their dishes and when she cut her finger with a knife on her first attempt, it was quite a while before they let her assist with food preparation. Another interviewee, Tammy, worked in an office with colleagues who were Bosnian and Somali. She remembered one of her first days on the job and the mixed feelings she had about listening to them talk in their own languages:

...when I first started working here I didn't have an office or desk for two months. So when I finally got my office and my desk, I shared an office space with a Bosnian interpreter and a Somali refugee coordinator. And one afternoon...she was at the phone speaking Somali and he was on the phone speaking Bosnian and you know, I had never been exposed to that before. And I was just like, "Oh my God." And I just quit typing on the computer and just sat there and waited until they got off the phone. And then I just talked to them about that was just the weirdest thing that I have been through. I said, "You two could be sitting there talking about me and I have no clue." To have two different languages and two just different cultures on either side of me, it was just like the coolest thing....they're two of the people that I consider the most important people in my life. And they were very open to my openness and my honesty....Because they were so used to being uncomfortable with us, to have someone actually say this makes me uncomfortable or to show some interest or to want to learn about their language and their culture, they were very receptive to it and very open to it.

Megan laughed when she told the story of the first time she realized that a group of refugee women she had been working with were "just like you and I:"

....[I sat in on a refugee workshop] and I happened to be sitting by the table of the Somali women. And for the first time, and it's almost embarrassing because I had been working with them for a while, I realized they are funny people. They have their own personalities. They joke around. I mean they are hilarious. And I never saw that side of them....Partly because, typically you do your business. We don't get personal with clients and joke around and those kinds of things. But we had this workshop, it was a relaxed thing and...the speaker did something goofy or whatever...and they said this joke and they started laughing. And so you realize that they are just like you and I. They just have the language barrier.

The interviewees talked about having jobs that allowed them the time to get to know their New American colleagues and co-workers. Several commented that this was

different from the jobs of ACSS eligibility workers since ACSS provider caseloads were high, they were focused on program guidelines and did not have the time, or necessarily the inclination, to get to know their clients. The stakeholders' opportunity to work closely with New Americans and to get to know them as people often resulted in the development of close relationships, if not friendships, which in turn motivated enhanced cultural self awareness and increased interest in cultural learning. The process of relationship building seemed to promote a sense of personal investment by stakeholders in the lives of refugee clients and a mutual collegiality with New American colleagues. Megan mentioned that the goal of her program is to build relationships with clients so that they feel comfortable discussing barriers to self sufficiency and that she enjoyed chatting with all clients, whether they were on her caseload or not. Kathy talked about a group of women painting her arms with various designs, a cultural tradition that Kathy compared to using make-up or fingernail polish. Tammy discussed her friendships with refugees and how it motivated her toward more cultural learning and better understanding of different cultural practices, making her a better social worker. Interviewees viewed the adjustment of refugees to their new lives as not solely the responsibility of refugees but as the *mutual* responsibility of refugees, human service personnel and the entire community.

The development of relationships and the concomitant appreciation for cultural differences is common among people of different cultures who interact frequently with each other (Ellison & Powers, 1994, and Powers & Ellison, 1995, as cited in Hood & Morris, 1998; Useem & Useem, 1967 as cited in Brislin, 1986). In Williams' and Berry's (1991) discussion of acculturation, which they defines as "the changes that groups and

individuals undergo when they come into contact with another culture” (p. 633), the authors observe that providing service to groups that are undergoing an acculturation process

requires the adoption of a cross-cultural perspective, including understanding and accepting the culture of the acculturating group on its own terms (rather than treating it as a “minority” group)...[and recognition] that many of the acculturation phenomena arise as a result of the interaction between the two groups in contact (rather than residing solely in the acculturating group) (p. 633).

The stakeholder interviewees seemed to be making the effort to adopt this “cross-cultural perspective” and they recognized that intercultural interactions were having an acculturative impact on themselves as well as on their New American clients and friends. Lucille, who worked in the public school system, noted that her relationships with refugee families helped her realize her own “Euro thinking” and the judgments that might go along with that:

[talking about working with refugee children]: ...that was hard for me, to step out of that Euro thinking and to give them more opportunities to learn from a common experience. ... And then how do you not make judgments from your Christian EuroAmerican background? Okay, so this family does not want their daughter playing basketball because they do not want her to show her arms. But in America we do. Is that really my judgment call? So there is a lot of thinking you need to do because again they want what’s right for their child. And they have a different set of rules.

Their relationships with New Americans also motivated some stakeholders to engage in advocacy on behalf of refugee clients, both within and outside their agencies. They described programs to meet client needs that they had helped start, interagency collaboration to improve service integration in which they had been involved, and efforts to make their services more culturally sensitive. They were also willing to confront prejudice against New Americans as espoused by associates or other people in the

community. Tammy in particular talked about encounters she had in her circle of acquaintances:

....[my husband and I] go to these things with these people he works with and I still hear idiots say, "Oh those damn foreigners. I went to [the south side of town] and it's just full of foreigners. Why did they have to come here?" And I just get up and leave or I have to fight.

Amy: What do you say?

Tammy: I say, "That is truly one of the most ignorant things I've heard you say." And then I'll go on to explain that "you should maybe get to know them. You should maybe talk to them. Maybe you should do some reading on why they ended up here. Maybe you should learn the facts about whether or not they are still on public assistance or medical assistance. Maybe you should learn the facts about how they are impacting our community. The fact that they are taking jobs that other people wouldn't take. They are paying taxes. They are buying homes. They are doing everything that we think they should do. Maybe you should learn those facts before you should say something like that."

Renee, whose husband is Arab American, recalled an encounter with a co-worker soon after September 11, 2001:

I was in the break room up [at the hospital] and one of the nurses had floated down from the floor and she didn't know that my significant other was [middle eastern]. And she said, "Oh, I think all those Arabs should be sent up to a camp." I said, "Oh really." She goes, "Yes. For their safety of course." And I said, "So what would I do with my house until that is settled?" She goes, "Why would you go?" I said, "Because I have one in my home." She goes, "Oh, well, you'd stay behind and he'd leave." I mean, at what point does she realize how stupid she's sounding?...Apparently it just dawned on her, all of the sudden she goes, "I think it's time to go back to work."

The findings regarding stakeholder relationship-building, cultural self awareness and understanding, and their active engagement with and on behalf of refugees, resulted in the following theme developments:

1. *Building relationships with refugees moves stakeholders beyond fear and judgment; and*
2. *Cultural self-awareness and knowledge prevent a "we/they" default mode.*

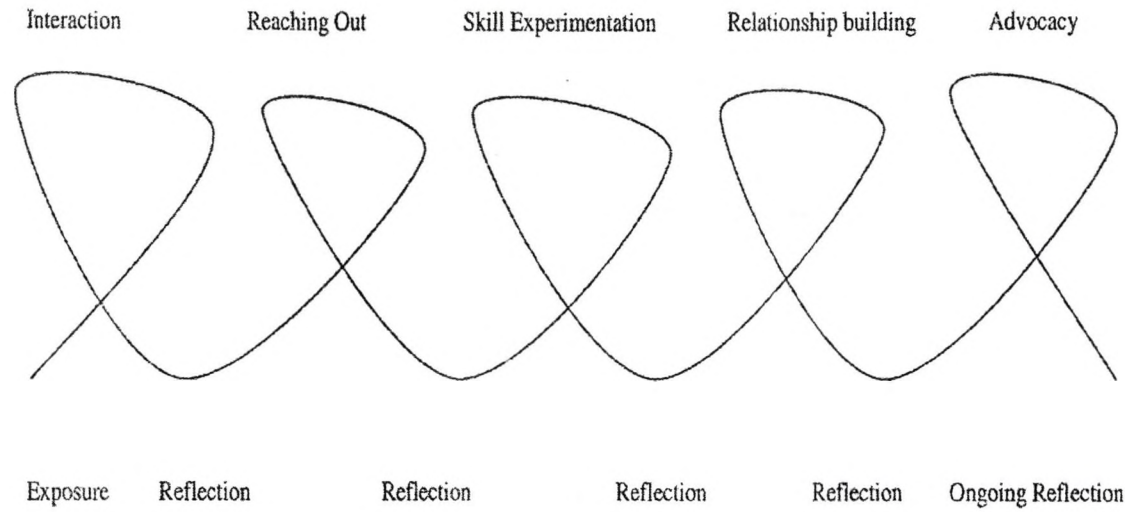
The cultural knowledge, self awareness, and relationship building that occurred through their work and personal relationships with New Americans informed stakeholders' perceptions about what skills and knowledge are most effective in working with refugees and diverse groups in general. The following section provides findings on this topic.

Knowledge and Skills Needed to Work with Refugees

Stakeholders' views on intercultural knowledge and skills indicated that such skills and knowledge were closely tied to their own processes of personal growth and acceptance of cultural differences. The interviewees seemed to be articulating the idea that the more personal reflection and cultural learning in which they engaged, the more skills they acquired and the more effective they were in their work with refugees. This effectiveness then in turn provided more information for reflection and skill development and more aptitude at relationship building and more inclination to advocacy. This "praxis cycle" of intercultural work seemed to be supported by and anchored in their educational backgrounds, personal interests in diversity, and flexible work environments (see Figure 9 below for a conceptual diagram of this cycle). Words commonly used by stakeholders in reference to their work with refugees included:

understand	create	learn	build
hear	engage	accept	empathy
listen	support	know	reach out
talk	respect	teach	take initiative

Through these words, the interviewees articulated knowledge, attitudes, and skills that they felt were particularly helpful in their work with refugees. Knowledge referred to



Base upon which work with refugees takes place:

Human Service Education

Interest in diverse cultures

Flexible Job

Figure 9. "Praxis Cycle" of Stakeholder Work with Refugees

cultural learning, including understanding of one's own cultural frame of reference; attitudes related to the willingness to learn, to make mistakes, and to take the initiative in building trust and relationships, and; skills included the ability to connect on a personal level, to be flexible and creative, and to advocate on behalf of refugee clients. Cultural learning included continuing to develop an understanding of:

- the history and politics of refugee homelands;
- the personal journey of refugee clients;
- intragroup differences and conflicts;
- family forms, roles, and relationships;
- refugee perspectives on government, social and particularly mental health services, and on receiving help;
- cultural norms related to diet, clothing, and hospitality; and
- one's own world view and cultural practices and how those impact personal and professional relationships with diverse individuals.

Cultural learning also meant learning and using a few words from the language of the groups with which one is working.

Some of the attitudes and skills discussed by stakeholders were similar to those articulated by provider interviewees and included listening and being respectful, honest, open minded and nonjudgmental. But stakeholders were also interested in engaging on a human level and saw building relationships with refugee clients as important to the helping process. They articulated the following as important skills and attitudes:

- openly talking about the differences between one's own and refugee cultures and doing so from a standpoint of learning and not judgment;

- not being afraid of making mistakes and avoiding fear as an excuse for not helping;
- having an “open door” policy and not giving up when clients appear to be “non-compliant;”
- being “ready for anything” and not shocked or shut down by differences;
- not assuming one knows what’s best or what’s needed but taking the time to gather information and fill a need in a culturally appropriate way;
- collaborating with colleagues, refugees, and other services to start or improve services for refugees; and
- being excited and interested in learning about other cultures and willing to self disclose about one’s own.

Lucille spoke to the issue of not being afraid to make mistakes in interactions with culturally different groups, that she had made many mistakes, but she did not allow that to be an excuse to not help someone.

You know, I guess...To not be afraid of the new. And not to be afraid to make mistakes...I've made tons of mistakes. But not to use that as an excuse not to help your neighbor.

She also reflected on how easy it is for community members to be fearful of others who are different and the need to overcome this fear.

I do see a lot of people, you know, kind of pulling away from things that are different, students that are different. And just because it just doesn't feel as safe and it isn't as easy and yet [as this community changes], we need to be more open to our neighbors and to the people that we meet in the grocery store and you know, every bus driver that we meet...because they are part of our community.

Diane, who worked in the mental health system, also gave an example of community residents shying away from those who seem different and how alienating that can feel to New Americans.

I [know someone] who's going to school right now actually, beauty school, but is finding that other students don't reach out at all. And in fact, she feels really quite alienated. And some things like, oh, she brings fish for lunch one day and so all the other students were upset about that, because of the smell...she's Vietnamese and a very, very lovely person and yet because of the language barrier [I don't know] that many people would even reach out...people are so fearful of not being able to understand or having the person not understand them....But sometimes I think it's worth that awkward moment in order to learn about that person. And also I guess, just judging from this person's experience, you don't realize how alienating it is to be such a minority.

The knowledge, attitudes, and skills discussed by stakeholders are in many ways consistent with the characteristics of culturally competent practice outlined by Lum (1999) in Chapter 1 and by other authors. These authors underscore the need for: self examination about one's own cultural frame of reference and feelings and beliefs about diverse groups (Weaver, 2005; Lum, 2000; Bapiste, 1993); ongoing cultural learning about diverse groups (Fong, 2004; Lum, 1999); skills for engaging and working with diverse groups (Fong, 2004; Lum, 2000; Lum, 1999), and; a willingness to advocate both for individual clients and for system changes (Weaver, 2005; Russell & White, 2001; Iglehart & Becerra, 1995; Timberlake & Cook, 1984). Stakeholders recognized not only the usefulness of culturally competent abilities in their own work, but stressed their importance in all areas of social service activity.

The following theme emerged from axial coding of data from the categories *Work and Relationship with Refugees* and *Knowledge and Skills Needed to Work with Refugees*:

3. *Effective work with refugees and refugee adjustment requires active effort on the part of the worker (cultural learning, initiating and building relationships, advocacy), not just a passive mental attitude of respect.*

Despite stakeholders' locations within various systems and different years of experience, they had similar perspectives on ACSS and other systems' effectiveness in assisting refugees. The following section details the findings from two categories.

Perceptions of ACSS Providers/Programs and Systemic Struggles and Needs

For the most part, stakeholders felt their own organizations afforded them the time and flexibility necessary to engage and work with refugees and they felt that human service systems, including ACSS, had improved over the last several years in their ability to respond to refugee needs (although stakeholder interviewees each had critiques of the others' agencies!). The improvement was due, in their opinions, to the progress that comes with experience and to the fact that refugee numbers had decreased in the last three years, giving everyone a little more breathing room and time to regroup. But stakeholders also had observations of continuing problem areas and recommendations for improvement both at ACSS and other community systems.

Stakeholders commented that ACSS and all refugee-serving agencies should offer ongoing opportunities for staff to continue to enhance their cultural sensitivity and understanding. They emphasized that all agency caseloads should be low enough to ensure the time and attention that refugee clients need. Stakeholders acknowledged that work with refugees is time-consuming and demanding, particularly because of the language barrier, but they also noted that at ACSS, high caseloads, lack of cultural understanding, and exclusive focus on program rules and policies resulted in staff who seemed cold, insensitive, and prejudiced. They recommended that any new workers hired should be aware of their own cultural frame of reference and should have developed cultural sensitivity.

Consistent with refugee comments, some stakeholder interviewees felt that refugees were rushed to learn English, find jobs, and fit in. Megan's comments reflect the notion that the system could be more accepting and supportive of where refugees are when they first come to this country and that not speaking English and not having jobs does not represent "a disability."

...I think we need to accept the fact that refugees are here, refugees are coming and get over it. So, we know they're here. Now let's make the best of it. If you had no legs, I would never say, "get up and run." If you don't know English...why are we so quick to say "Oh, learn the language. Get a job." Same thing. It is not a disability. But it is a limitation that they have that we need to work through. And they're not going away so let's make the most of it.

But services were mostly categorical in nature and also consistent with comments from refugee and from provider study participants, stakeholders felt that public social services most often did not have the flexibility in policies and rules to take various cultural, language, and life experience differences into consideration. As Julie noted, this lack of flexibility results in expectations of client abilities that may not be realistic. If the client cannot meet these expectations, s/he may be "sanctioned" [receive some form of program restriction]:

[In the employment assistance programs, they seem to say] "Okay, here's what you need to do, one, two, three, bong. If you don't do it you're sanctioned. Thank you goodbye here's your paperwork." To stop and think "my goodness this person has never worked. They might not even know how to interview a prospective day care or day care person. They might not even know the questions to ask, what to look for." So to maybe even provide someone to help them in that process or to allow them a little more time to do it and to get a job and [learn] interviewing skills. And I think somewhere in there they're supposed to have that. Maybe through [employment services] they eventually get there. But I have clients who don't even get that far...because they already feel that they're being judged, this is a million hoops I'm going to have to jump through. They're put off by, "Boom, boom, boom, boom, boom. You do this, you do this, you do this, boom, boom, boom. In this time frame. If you don't do it you will be sanctioned. Boom, boom, boom, boom, boom, boom, boom." It's almost

overwhelming... "Oh you don't have a car? Here's a bus pass" which is good but she also has a two year old to lug around to go to these interviews to look for applications in the dead of winter on the bus....and no family, no support system. So not even, "Too bad, so sad." None of that is ever addressed or looked at....And the more you jump through their hoops then I think there are more supports. But you have to jump through a lot of hoops on your own. And I think they call it showing initiative. If they show enough initiative to get to this level, then there is child care assistance, there is other things. You know what I mean? It's almost like you get the prize and...then you will get a check helping you out with this if you do this.

Diane articulated a similar theme but went on to say that without culturally relevant services, New Americans may actually be "retraumatized" by the system.

You know, some of them who were in Iraq told me about the abuses and the Afghani clients that I've worked with who tell me about how they were abused and, you know, I don't think you can ever underestimate what that is to a human being to have experienced those things. And so then coming here...they almost feel like they are victims again, I think, retraumatized I suppose, by our systems that we have and by our demands that we have of them which, you know, for our culture it's understood but for theirs I don't think it is many times.

Amy: How do you see them being retraumatized by the systems that we have here?

Diane: ...I think believing you're going to be in a safe place and that you will have shelter and food is just...conducive to mental health. And when you don't have that I think it brings up some of those other issues, old issues, for some of them not too old, but again this whole idea of being a victim of the system. So for some people I think it recreates some of those feelings.

Stakeholders recommended that agency administrators take the lead in promoting a multicultural, ethnically sensitive environment by hiring culturally competent staff, featuring multicultural artwork, and by advocating for program and systems changes that might further facilitate refugee adjustment and success. They felt that bicultural staff were necessary in social service agencies, that the refugee orientation process through the local resettlement agency should be longer, and that additional mentors and daily living coaches would be useful for refugee clients. They saw a need for an enhanced mental health system that could more adequately respond to ongoing and emerging refugee

mental health needs. They recognized that refugee clients are frequently confused and overwhelmed by computer systems, paperwork, and a fragmented service system that shuffles them back and forth between agencies. They did acknowledge, however, that steps had been taken to better integrate some services and to provide some “one-stop-shopping” for clients. They suggested that services become most effective when agencies are communicating and collaborating, and that front-line staff from different systems should have opportunities to meet, talk, and make recommendations.

Stakeholders’ comments on the importance of multicultural agency environments and integration of services are consistent with research and policy recommendations emphasizing these components. Breton (1999), Lecca, et al. (1998), and Nah (1993) make the case that increased diversity in human services and minimized fragmentation enhances outcomes for clients and is more cost effective for agencies. Padilla (1997) recommends use of trained bilingual staff and integration of traditional healing methods in order to increase use of mental health services and Yu and Gusukuma (2001) also note that higher rates of minority staff in mental health facilities result in increased use of those services by similar minority groups. The stakeholders’ recommendations and those of researchers indicate that system changes that would facilitate service use by refugees would advance refugee adjustment and integration in their host communities which, in the long run, minimizes use of public services.

In regards to larger community issues, stakeholders commented that the public transportation system was inadequate for refugee client needs, as bus lines and schedules often did not match client schedules and work sites. Also, some businesses in the community were seen as reluctant to hire refugees because of the language issue and

cultural practices, and public schools and ELL were still overcoming obstacles to effectively serving all children and adults. Their concern about these larger systems issues is in line with what provider and refugee interviewees also said about barriers in the community. Their perspectives reflect a need to take a systemic approach (Kelley, 1994) which first focuses on concrete services, social supports, and problem resolution.

In general, interviewees saw human service systems and the community in general as having made strides in positively responding to refugee residents, but they also were eager for the community to continue to improve its systems, to work at overcoming bias and discrimination, and to include refugees in the process of program and system development. Data from the categories discussed above produced the following theme:

4. High caseloads, inflexible policies and rules, and lack of cultural understanding inhibit county provider cultural competence.

The foregoing thematic findings in conjunction with additional axial coding resulted in the following theoretical statements. These statements represent stakeholder responses to the study's research question and offer a comparison to those theoretical statements derived from refugee and provider data.

- Refugee adjustment is the mutual responsibility of refugees, social services, and the larger community.
- Effective work with refugees involves a "praxis cycle" of ongoing intentional learning, action using new knowledge, and reflection on that action.

The following chapter will offer a summary of the study's findings and discuss study limitations and implications.

CHAPTER VI

SUMMARY, DISCUSSION, LIMITATIONS AND FUTURE DIRECTIONS

Summary of Findings

This grounded theory research study sought to answer the question “How do local county social service providers, community human service stakeholders, and refugee recipients of social services describe the intercultural knowledge and skills needed in the context of social service interactions?” The study took place in “Plainsville,” a small city in an upper mid-western state, and the core of the study involved interviews with twenty eight county eligibility workers and county home-based social workers from “Allen County Social Services,” the local county social service agency. Ten New Americans and nine non-county human service professionals (called “stakeholders” in the study) from the community were also interviewed.

The study intends to add to a body of knowledge on cultural competence in social service provision and to enhance my own ability to teach cultural competence in social work courses. Findings from the data analysis process indicate that the three groups of interviewees had similar perspectives on the local social service and community context of refugee resettlement. In their descriptions of intercultural knowledge and skills, however, the refugee and stakeholder findings were similar to each other but differed from those of providers. Findings are summarized below.

All three groups identified similar stressors of resettlement for refugees and the struggles of social services and other community systems to assist with resettlement and respond to those stressors. The language barrier, culture shock, and the expectation of immediate employment from public assistance work requirements were viewed as primary stressors for refugees. Interviewees acknowledged that, in response to refugee resettlement and its stressors, social services and other community systems had improved in their effectiveness since the late 1990s when refugee numbers were high. The reduction in nationally-admitted immigrants since September 11, 2001 and efforts at system changes contributed to the improvement. But all three groups discussed continuing service gaps and barriers including, but not limited to, program rules and policies that were inflexible in the face of cultural and language differences, an English Language Learning system that did not effectively meet the needs of refugees, an insufficient number of professionally-trained interpreters, an inadequate public transportation system, and above all and particularly in the county eligibility program, an inadequate number of staff in general and of bilingual/bicultural staff in particular. All three groups identified low staff numbers and high caseloads in the county system as a significant barrier to effective service provision to refugees. In the face of these systemic struggles, interviewees recommended ongoing collaboration between program representatives to enhance service integration, systemic support for refugee-initiated self-help programs, training and use of additional interpreters, and, most recommended by the stakeholders and refugee interviewees, development of culturally relevant programs through hiring of bicultural/bilingual staff, ongoing provision of cultural trainings, and development of culturally responsive program policies.

All three interview groups recognized the presence of prejudice and discrimination against refugees in the community. The provider and stakeholder groups in particular talked about xenophobic comments they overheard from co-workers, clients, family members and others in the community. The refugee interviewees felt that community residents often did not understand, or even have an interest in learning about, refugee cultures and that the pressure for refugees to “become American” was prevalent.

All three groups also emphasized the importance of personal initiative and learning English for refugee economic independence and self-sufficiency. Learning English was seen as the first and most important skill for refugees to develop although it was acknowledged in all three groups that learning advanced English was sometimes difficult in the face of work requirements and an ELL system that did not always match refugee schedules and English language levels. All three groups noted, however, that personal initiative strongly contributed to the motivation and speed of learning English as well as to integration into the community in general. Interviewees in all three groups also noted that the extent of personal initiative exercised by any one person was contingent on a number of interacting factors such as mental health issues, the amount of social support in the person’s life, stage of resettlement, and the type of reception the person receives from service personnel or other community members.

Within these areas of commonality and the social service and community contexts they reflect, the three interview groups articulated similarities and differences in how they described intercultural knowledge and skills in social service interactions. An overview of the thematic and theoretical findings from each group is discussed next.

County social service providers carried out their work with refugee clients in relation to how they viewed refugees, how they saw themselves, and how the social service system dictated their work. Each of these areas contained contradictions and stressors. Refugees were viewed primarily in their role as clients and were seen as deserving of resettlement assistance, often grateful for that assistance, and as exhibiting varying levels of individual initiative. On the other hand, refugees were also seen as demanding, time-consuming, often confused about what was required of them, and needing long-term concrete supports. County workers saw themselves as dedicated service providers, but they also saw themselves as taxpayers and were concerned about refugees receiving public assistance that could go to Americans. They believed in the small town value of mutual aid, but they did not see most New Americans contributing to that mutual aid system. The social service system invested providers with power by virtue of their gate keeping function, but they were also disempowered by the quantity and changing nature of policies and rules, deadline oriented work, the fragmented, short-term, and often inadequate nature of resources they offered or brokered, and by the lack of input they had into the system for which they worked.

In the context of these contradictions and stressors, and in their intercultural interactions, county providers took the position that no particular intercultural knowledge and skills were necessary in their work with refugees. They believed that the helping relationship was best implemented through adherence to policies and rules and via fair and respectful treatment of all clients. Although providers acknowledged the presence of systemic barriers to refugee adjustment, they believed that refugees themselves had primary responsibility for their adjustment and that adjustment would occur most easily

through refugees “becoming American.” “Becoming American” meant adopting the values and norms that providers saw as inherent to American culture such as speaking English, working hard, being self sufficient, and making contributions to the good of the larger community. This summary of provider perspectives is reflected in the following themes that emerged from analysis of provider data:

- 1. A sense of connectedness to family, neighbors, and community is important to providers and frequently comes from a small town or farming background. With the language barrier, different customs, and reliance on the social service system, refugees are not viewed as part of a provider’s community support system.*
- 2. The primary goal of refugees should be to “assimilate,” and “become American.”*
- 3. Language is the biggest barrier to service provision.*
- 4. Program rules are viewed as creating a fair playing field, promoting conformity, and are the default mode to help providers feel in control.*
- 5. Work with refugees is viewed as frustrating due to an interacting set of variables related to perceived refugee characteristics, providers’ value system, and larger system’s issues.*
- 6. While cultural knowledge is acknowledged as useful to avoid offending refugees, providers rely primarily on a “learn as you go” and “treat everyone the same” approach to interaction with refugees.*

From the above themes and further data analysis, the following theory statement was developed:

- In the context of intra- and inter-systemic tensions and pressures, and in the absence of intercultural training, workers rely on a base of action comprised of knowledge of program policies/rules, personal values, expectations placed on refugees for conformity, compliance, and assimilation (from program policies/rules and personal value system), and a generic set of helping attitudes in their work with refugees.

Refugee study participants, in their conversations about being on the receiving end of social services, also expressed the need for fair and objective application of rules and policies and the need to be treated with respect and courtesy. But they also wanted the helping relationship to be characterized by something more, by a human connection that allowed time for informal conversation, a sense of genuine caring, and flexible availability of social service staff. They acknowledged that refugees had personal responsibility for their adjustment, but they also wanted Allen County Social Services and other systems in the community to be more supportive of refugees' own adjustment pace, efforts, and personal aspirations. They saw knowledge of diverse cultures as an important tool in social service work and they viewed "being human" as a primary skill in that work. The following themes were produced by analysis of refugee data:

1. *The immediate push to "make a living" allows little, if no, time and support for emotional healing, cultural learning, and just rest and recuperation from the trauma and experiences of being a refugee.*
2. *The feelings of loss experienced by refugees also involve the loss of an ideal image of America.*

3. *America means hard work, feeling cultural alienation, and being pushed to accept American values, but also means experiencing new-found freedoms.*
4. *Public assistance provides important economic support and is especially useful to women's independence.*
5. *Personal initiative, especially in learning English, is important to success, but the expectation to conform to public assistance work requirements can work against that personal initiative.*
6. *Refugee participants often perceive ACSS providers to be influenced more by rules and policies than by compassion and cultural understanding.*
7. *The lack of "human connection" with county providers can reinforce the sense of loss and sadness with which refugees struggle in the early stage of resettlement.*

In addition to the themes listed above, the following statements of theory were developed through additional analysis of refugee data:

- Refugee service recipients need a sense of human connection from county social service providers, not just implementation of job responsibilities; and
- County providers, both as gatekeepers to vital services and in their attitudinal response to refugee clients, play a significant role in refugee adjustment.

Stakeholders' perspectives were similar to those of refugees' in that they also saw cultural knowledge as important to social service work. For stakeholders, cultural knowledge included both cultural self-awareness and knowledge of other cultures.

Cultural understanding allowed for more effective assessment and intervention activities and also enabled the development of intercultural relationships. From those relationships came further cultural awareness which enhanced intercultural work, motivated advocacy,

and enabled further relationship-building. Stakeholders felt that refugee adjustment was a joint responsibility between refugees, human service providers, and the wider community. This summary of stakeholder findings is based on the following themes that emerged from data analysis:

1. *Building relationships with refugees moves stakeholders beyond fear and judgment;*
2. *Cultural self awareness and knowledge of other cultures prevent a “we/they” default mode;*
3. *Effective work with refugees and refugee adjustment requires active effort on the part of a human services worker (cultural learning, building relationships, advocacy), not just a passive mental attitude of respect;*
4. *High caseloads, inflexible policies and rules, and lack of cultural understanding inhibit cultural competence on the part of county providers.*

From the themes and additional data analysis, the following statements of theory emerged:

- Refugee adjustment is the mutual responsibility of refugees, social services, and the larger community; and
- Effective work with refugees involves a “praxis cycle” of ongoing cultural learning, action using new knowledge, and reflection on that action.

Table 3 below compares the theoretical findings from the three interview groups. Each of the findings is labeled with a descriptor that for me seems to best summarize the relationship of each group’s findings to the research question.

Table 3. Comparison of Theoretical Findings

Provider Theoretical Finding	Refugee Theoretical Findings	Stakeholder Theoretical Findings
“Be American”	“Be Human”	“Be in Relationship”
In work with refugees, county providers rely on knowledge of program policies and rules, personal values, expectations for refugee assimilation, and a generic set of helping attitudes.	County providers play a significant role in refugee adjustment and refugee service recipients need to feel a human connection with county providers.	Refugee adjustment is seen as the mutual responsibility of refugees, social services, and the larger community and effective work with refugees involves a praxis of cultural learning and relationship building.

Findings from all three study groups provide additional ideas into the nature and development of cultural competence in the provision of social services. These ideas, as well as my own thoughts on the study, will be discussed next.

Discussion

Chapter 1 provided a brief discussion of cultural competence from the social work literature and examples of Lum’s (1999) basic competencies related to cultural self-awareness, cultural knowledge acquisition, intercultural skill development, and inductive learning were listed (see Table 3 below). In Chapter 4, Rowena Fong’s (2004a) framework for culturally competent contextual practice was mentioned in which she details the various contexts that need to be considered when working with refugees and immigrants:

- Context 1: The homeland situation
- Context 2: The departure from the homeland
- Context 3: The arrival experience in refugee camps or first site
- Context 4: The initial landing in the United States
- Context 5: The current home environment in the United States
- Context 6: The continuous places lived in the United States...(p. 49).

Table 4. Examples of Lum's Cultural Competencies

Cultural Awareness	Knowledge Acquisition	Skill Development	Inductive Learning
<ul style="list-style-type: none"> • Awareness of own life experiences related to culture • Contact with other cultures and ethnicities • Awareness of positive and negative experiences with other cultures • Awareness of own racism, prejudice and discrimination 	<ul style="list-style-type: none"> • Understanding of terms related to cultural diversity • Knowledge of demographics of culturally diverse populations • Knowledge of strengths of people of color • Knowledge of culturally diverse values 	<ul style="list-style-type: none"> • Knowledge of how to obtain client background • Use of self-disclosure • Use of positive and open communication style • Establishment of culturally acceptable goals • Assessment of stressors and strengths 	<ul style="list-style-type: none"> • Participation in continuing discussions of multicultural social work • Gathering new information on cultural competency and culturally diverse practice

(Lum, 1999, pp. 32-33)

Using Lum's and Fong's practice frameworks as a comparative device, Lum's competencies and Fong's contextual knowledge were reflected in refugee and stakeholder findings. Refugee participants discussed the need for social service providers to understand refugee histories, cultures, and experiences as refugees, thus emphasizing the importance of their contexts. Refugees wanted to be known in their totality, not just as "refugees" or as "New Americans." In this sense, they were asking that social service providers acquire knowledge about refugee values, beliefs, strengths, and talents. Refugee interviewees also wanted to feel a "human connection" with providers. They wanted to feel welcomed, to be able to chat informally with providers, and to learn something about the person from whom they were receiving assistance. Essentially, they were asking that providers use the skills of cultural competence as reflected in Lum's typology.

Stakeholders also stressed the importance of understanding refugee contexts, of acquiring cultural knowledge, and of using culturally competent skills. In addition, they reflected the competencies of cultural self-awareness through discussions of their own “EuroAmerican” perspectives, feeling conflicts between their own values and those of refugees, and through confrontations with American ethnocentricity in others.

In the ACSS provider data, however, Lum’s and Fong’s frameworks were minimally reflected. It should be noted that findings from county social worker and eligibility worker data were the same. There was no basic distinction in how they described the knowledge and skills they used to work with refugees. In both groups, there were one or two individuals who expressed cultural self-awareness and who said they had made efforts at cultural knowledge acquisition. But as a group, their approach to refugee clients involved treating everyone the same by applying the rules fairly and using a generic set of helping attitudes (respect, patience, etc.).

ACSS providers relied primarily on a “learn as you go” and “treat everyone the same” approach to work with refugees. It was their assumption that this approach, combined with refugees’ willingness to assimilate, or “become American,” would result in the desired program outcomes, i.e., decreased public assistance dependency and adherence to majority culture lifestyle norms. A future study would have to determine the effectiveness of this approach in terms of this outcome and in terms of the outcomes refugee clients expect from county programs.

It could be asserted that non-social work social service providers, such as county eligibility workers, should not be held to the same expectations of cultural competence as social workers or other degreed human service professionals who are exposed to

knowledge about intercultural work in their education. After all, the main purpose of eligibility work is “simply” to determine the eligibility and amount of public assistance for any given client. As this study has found, however, refugee clients see eligibility staff as instrumental to their resettlement process, and even their emotional adjustment is connected to the reception they receive from county providers. Those of us in social service work may make a distinction between who does and does not need to develop cultural competence, but it seems that refugee clients do not make that distinction. And this last point would appear to be a contribution that this study could make to the cultural competence literature. The refugee participants in this study viewed county eligibility workers, and the services for which they were gatekeepers, as instrumental to resettlement adjustment. They did not, however, see the providers or the programs as generally being responsive to or supportive of cultural differences and refugee needs, particularly in the early resettlement stage. This lack of responsiveness, or lack of cultural competence, in some aspects negatively impacted their adjustment process by reinforcing their feelings of sadness, loss, and hopelessness. Lack of cultural competence, then, on the part of *all* social service providers, may hinder the very goal that public assistance programs espouse, i.e., client self-sufficiency. If refugee clients are not offered the time, support, and culturally responsive services and community assistance they need to learn English and community norms, to develop and pursue personal goals, and to recover from grief and loss, their successful integration into American communities may take longer and be more costly than is necessary.

The findings from provider data also indicate that Allen County public assistance programs and providers serve a primary function of indoctrinating refugee clients into

dominant American cultural values and norms. Program policies and providers' personal value systems both emphasize English fluency, work, economic independence, and self-sufficiency. Providers also drew on the histories of their own ancestors and their personal value systems to stress the importance of refugees "becoming American" and of adopting what they viewed as American beliefs and practices. Workloads, inflexible policies and rules, and lack of intercultural training all combined to reinforce this perspective. This finding further adds to cultural competence literature in asserting that without culturally competent services, public programs, including eligibility programs, will continue to attempt to reproduce cultural hierarchies and the social status quo in American communities. While there may be those who feel that reinforcing dominant cultural values and norms are appropriate and necessary for America's future, changing national demographics, the dynamics of globalization and international relations, and the mandates of basic human rights would seem to point toward the fact that America's values may need to expand in response to the factors just mentioned. Immigrant and refugee groups, and other traditional minority-status groups in this country, have value systems that offer America lessons in how to live and prosper in highly diverse national and global communities. Public assistance programs, and their employees, can play a role in ensuring that those diverse value systems, and the people who hold them, are supported by and present in the services they deliver. To that end, policy makers, social service agency administrators and supervisors, direct service staff, and community leaders, should work closely with New American groups to develop strategies for enhancing the cultural competence of social service agencies. Some potential strategies that emerged from this study included;

- Hiring bilingual/bicultural staff in all agency divisions;
- Ensuring that caseload numbers are low enough and that there are sufficient number of staff to afford direct service workers the time for authentic interactions with clients and more flexibility in their availability to clients;
- Offering routine cultural awareness and intercultural trainings and providing attendance incentives;
- Affording staff work time or flex time to attend cultural events, trainings, and/or to visit agencies to whom staff routinely refer clients;
- Training and hiring additional professional interpreters;
- Soliciting and acting on the input of agency direct service staff in relation to their work with refugees; and
- Advocating for and creating flexible policies and rules, in county programs and other refugee-serving programs such as job training and ELL.

In addition to contributions that this study may have for cultural competence research and agency practice, the study underscores the need for me to ensure that the following are present in the courses I teach:

1. Content related to specific areas of knowledge, such as Fong's (2004) contextual practice framework, related to work with immigrants and refugees. General cultural competencies are necessary, but immigrants, and especially refugees, have stage-of-migration issues that are specific to their experiences and relevant to the helping process;
2. Content and pedagogical processes that promote advanced cultural self-awareness. For social work students to respect and support the values and

practices of diverse groups, they must have an understanding of their own value systems and how they differ from others. Students must also be aware of how their values are, or are not, reinforced by dominant American culture and what the impact of that culture has been, and continues to be, on the lives and aspirations of minority- and majority-status groups.

3. Interaction with individuals from New American communities. Without opportunities to talk and interact with former refugees, students' perceptions of refugees will no doubt continue to be stereotypical in nature. Guest speakers and service-learning projects that bring students into contact with New Americans will help dispel stereotypes, promote an interest in relationship-building, and further develop cultural competencies.
4. Presentations by social service workers, such as the stakeholders in this study, who have worked with refugees and other diverse groups and who can talk about the cultural self reflection and knowledge and skill development in which they have engaged. Joint presentations by these workers and former or current refugee clients would be particularly interesting.

In general, all the courses I teach need a further infusion of cultural competence content and I need to further my own understanding of what it means to be a culturally competent instructor. With the increasing presence of diverse students in the classroom, including former refugees, culturally competent course content and instruction becomes all the more imperative.

Study Limitations and Future Research Directions

The primary limitations of this study pertain to interview timing and to refugee and stakeholder sample size and characteristics. The purposes of interviewing stakeholders and former refugees were to inform the provider interviewing process and to supply comparative data to provider findings. The refugee and stakeholder participant samples were small, however, so additional interviews with individuals from these groups would reinforce the trustworthiness of data. In addition, the refugee interviews took place after the provider interviews so refugee data did not completely serve the purpose for which they were intended.

Because of problems in recruitment, the refugee group did not provide much variance in characteristics with all interviewees at essentially the same stage of resettlement, all having come from similar socioeconomic backgrounds, and all with some level of English proficiency. A larger and more diverse group of refugee interviewees would have further ensured “saturation” (Strauss & Corbin, 1998) of analysis categories, or produced new categories, and enhanced the trustworthiness of the findings. The stakeholder group was also small and although individuals from various human service systems were represented in the sample, representatives from other systems such as law enforcement and the business sector were not. Inclusion of additional and more diverse perspectives would have enhanced the study.

An additional limitation is that, due to time and financial constraints, member checks were conducted with only two of the ten refugee participants and three of the nine stakeholders. Although member checks were only one of the four strategies used in this study to ensure trustworthiness (the other three being triangulation of data, an audit trail,

and the research consultation team), having this type of feedback from all participants would have been beneficial.

I believe a further limitation is that the study's breadth of scope caused its depth to suffer. Qualitative studies can be extremely time consuming, particularly the data analysis phase, and if the study had focused on only the provider group, more time and effort could have been placed into follow-up interviews, member checks, and data analysis related to that one group.

In the context of these limitations, future research might involve gathering data from a broader cross section of members of refugee communities regarding perspectives on public assistance programs and the intercultural knowledge and skills needed in the delivery of those programs. Additional research might also involve conducting a study like this one using the same research question in county agencies with substantially more staff and client heterogeneity in order to compare the findings from this study with those from different county social service agencies. In general, more research related to cultural competence in the provision of public social services, such as eligibility programs, is needed in order to further understand how such services can best meet the needs and ensure the self-determined success of New Americans in particular and social service clients in general.

APPENDICES

Appendix A
Participant Sign-Up Sheet

Amy Phillips' Research Project
Allen County Social Services

Unit: _____

Name	Phone #	Email Address

Appendix B
Provider Participant Consent Form

Adult Informed Consent
Interview Participant -- Service Provider (_CSS and Stakeholder)

The following information is being presented to help you decide whether or not you want to be a part of a minimal risk research study. This consent form may contain words that are new to you. If you read any words that are not clear to you, please ask the person who gave you this form to explain them to you.

Title of Research Study

Intercultural Knowledge, Values, and Skills in Social Services: A Qualitative Research Study.

Principal Researcher

This consent form is being presented to you by Amy Phillips, a graduate student in the Department of Teaching and Learning at the University of [state]. As part of her degree requirements, Ms. Phillips is conducting this research project which will examine interactions between individuals of different cultures in the context of providing and receiving social services. Ms. Phillips is the principal researcher for this study and is also an Assistant Professor in the Social Work Department at [name of state university].

Selection of Participants

You are being asked to participate in this study because you are a provider of services through _____ County Social Services (_CSS) or another human service agency in ____ County, [name of state]. You are also being asked to participate because you have experience, knowledge, and skills that come from interacting with and providing services to individuals of a different cultural group than your own.

General Information about the Research Study

The purpose of this study is to enhance the understanding of how intercultural knowledge and skills are developed and used in the provision and reception of social services. The principle researcher will conduct one-on-one interviews with individuals who receive and provide social services, will engage in setting observation at _____ County Social Services, and will review documents related to the work of _CSS providers (e.g., agency manuals, case files). The researcher will also meet monthly over a 7-8 month period with a research consultation team. The consultation team will help Ms. Phillips develop research questions and help her understand and interpret the results of her research interviews. The researcher hopes that the study will result in helpful

information for social service agencies and for social service training programs, such as undergraduate social work departments.

Plan of Study

If you decide to participate, you will be interviewed at least once by the researcher, Amy Phillips, during the fall of 2002 or spring of 2003. The researcher may ask you to participate in follow-up interviews or discussions after the initial interview which will take place during the fall of 2002 or spring of 2003. The initial interview with you will take place in your office or at a location more convenient and comfortable for you and will last 1½ to 2 hours. In the interview you will be asked questions about your personal history, your work experience, your perceptions about social service work with individuals from different cultural backgrounds, knowledge and skills needed for intercultural work, and other related questions. The interview will be audiotaped by the researcher and will be transcribed by a transcriber hired by the researcher. If you are interested, the researcher will give you a copy of your transcribed interview and receive your feedback about the interview. If you are willing, the researcher will also meet in a group with you and other providers who were interviewed to discuss your collective impressions of intercultural work and to discuss information emerging from the research. All interviews and discussions will be audiotaped by the researcher and transcribed.

Payment for Participation

You will not be paid for your participation in this study.

Benefits of Being a Part of this Research Study

By taking part in this research study, you will be contributing to an increased understanding of the knowledge, values, and skills needed to provide effective and sensitive intercultural social services. You will also be helping to improve the ability of this researcher, and her professional colleagues at [the state university], to more effectively train social work students.

Risks of Being a Part of this Research Study

There are no financial or physical risks related to participation in this study. The only inconvenience you may experience is the time taken away from your work routine by the interview. Every effort will be made to arrange an interview time that is convenient for you in terms of time and location. The only psychological or emotional risk related to participation in this study may be feelings of concern on your part for how this study and your input to it may impact other interviewees, supervisors, _CSS clients or yourself. Please be assured that all interviews and documentation related to the research will be confidential and the researcher will be using a pseudonym of your choice in the interview, interview transcripts, and in the research report.

Confidentiality of Your Records

Your privacy and research records will be kept confidential to the extent of the law. Authorized personnel and employees of the [state] Department of Human Services'

Institutional Review Board and the University of [name of state] Institutional Review Board may inspect the records from this research project.

The results of this study may be published. However, the data obtained from you will be combined with data from other people in the publication. The published results will not include your name or any other information that would in any way personally identify you. In your interview and in the transcribed interview, a pseudonym chosen by you will be used to identify you. Your signed consent form and a list of interviewees' real names and pseudonyms will be kept in a locked file cabinet in the researcher's office at [the state university]. Transcribed interviews and other research information will be kept in a separate locked file cabinet in the researcher's office. No one besides the researcher and the personnel listed in the paragraph above will have access to research information. All consent forms and research data will be kept for at least three years following the completion of the study at which time consent forms, the interviewees names/pseudonyms list, and audiotapes of interviews will be destroyed.

Volunteering to Be Part of this Research Study

Your decision to participate in this research study is completely voluntary. You are free to participate in this research study or to withdraw at any time. If you choose not to participate, or if you withdraw, there will be no penalty or loss of benefits. If you choose not to participate, simply notify the researcher, Amy Phillips, in person or by phone (236-2724) that you are withdrawing.

If you choose to participate in this research study and upon conclusion of the study, the researcher will notify you of how you may have access to the final research report for your own review.

Questions and Contacts

If you have any questions about this research study, feel free to contact the researcher, Amy Phillips, at 236-2724, or the researcher's advisor at the University, Kathy Gershman, 777-3157.

If you have questions about your rights as a person who is taking part in a research study, you may contact Dr. Christine Kuchler of the [state] Department of Human Services' Institutional Review Board at 328--2662 or Cindy Rerick of the University's Institutional Review Board at 777-4079.

If you feel any negative emotional or psychological consequences as a result of participating in this study, the researcher will, if you wish, help you contact a professional agency who can provide you with assistance. Such assistance will be provided at your own expense or in the context of your medical insurance plan.

Your Consent -- By signing this form I agree that:

- I have fully read or have had read and explained to me this informed consent form describing a research project.

- I have had the opportunity to question one of the persons in charge of this research and have received satisfactory answers.
- I understand that I am being asked to participate in research. I understand the risks and benefits, and I freely give my consent to participate in the research project outlined in this form, under the conditions indicated in it.
- I have been or will be given a signed copy of this informed consent form, which is mine to keep.

Signature of Participant

Printed Name of Participant Date

Researcher Statement

I have carefully explained to the participant the nature of the above protocol. I hereby certify that to the best of my knowledge the participant signing this consent form understands the nature, demands, risks and benefits involved in participating in this study.

Signature of Researcher

Printed Name of Researcher Date

Institutional Approval of Study and Informed Consent

This research project/study and informed consent form were reviewed and approved by the [state] Department of Human Services' Institutional Review Board for the protection of human subjects. This approval is valid until the date provided below. The board may be contacted at 328-2662.

Approval Consent Form Expiration Date:

Appendix C
Refugee Participant Consent Form

**Adult Informed Consent
Interview Participant -- Service Recipient**

The following information is being presented to help you decide whether or not you want to be a part of a minimal risk research study. This consent form may contain words that are new to you. If you read any words that are not clear to you, please ask the person who gave you this form to explain them to you.

Title of Research Study

Intercultural Knowledge, Values, and Skills in Social Services: A Qualitative Research Study.

Principal Researcher

This consent form is being presented to you by Amy Phillips, a graduate student in the Department of Teaching and Learning at the University of [state]. As part of her degree requirements, Ms. Phillips is conducting this research project which will examine interactions between individuals of different cultures in the context of providing and receiving social services. Ms. Phillips is the principal researcher for this study.

Selection of Participants

You are being asked to participate in this study because you are currently, or have been in the past, a recipient of public social services in ___ County, [state] and because you have experience and knowledge that comes from interacting with individuals of a different cultural group than your own.

General Information about the Research Study

The purpose of this study is to gather viewpoints from individuals who receive and provide social services about the development and use of intercultural knowledge, values, and skills in providing and receiving public social services. The researcher hopes that the study will help improve social services and social service training programs, such as undergraduate social work education.

Plan of Study

If you decide to participate, you will be interviewed at least once by the researcher, Amy Phillips. The researcher may ask you to participate in a follow-up interview after the first interview. The researcher will also read through documents at ___ County Social Services related to the services you are receiving from ___ County.

Interviews with you will take place in your home or at a location of your choice and will last 1½ to 2 hours. In the interview you will be asked questions about your personal history, your experiences in this country, and your thoughts about the help and support you have received here from social workers and other service providers.

The interview will be audiotaped by the researcher and will be typed by a transcriber hired by the researcher. If you are interested, Amy Phillips will give you a copy of your typed interview and receive your feedback about the interview.

Payment for Participation

In exchange for each interview, you will be offered a \$10 gift certificate to the Mall. You are free to accept or decline this gift certificate.

Benefits of Being a Part of this Research Study

By taking part in this research study, you will be contributing to an increased understanding of the knowledge, values, and skills needed to provide effective and sensitive intercultural social services. You will also be helping to improve the ability of this researcher, and her professional colleagues at [the university], to more effectively train social work students.

Risks of Being a Part of this Research Study

There are no financial or physical risks related to participation in this study. The only inconvenience you may experience is the time taken away from your daily routine by the interview. Every effort will be made to arrange an interview time that is convenient for you in terms of time and location. If you are a current client of ___ County Social Services, the only psychological or emotional risk related to participation in this study may be feelings of concern on your part for how this study and your input to it may affect your relationship with workers at ___ County Social Services. Please be assured that all interviews and documentation related to the research will be confidential and the researcher will be using a different name from yours (which you will choose) in the interview, interview transcripts, and in the research report.

Confidentiality of Your Records

Your privacy and research records will be kept confidential to the extent of the law. Authorized personnel and employees of the [state] Department of Human Services' Institutional Review Board and the University's Institutional Review Board may inspect the records from this research project.

The results of this study may be published. However, the information obtained from you will be combined with information from other people in the publication. The published results will not include your name or any other information that would in any way personally identify you. In your interview and in the typed interview, a name chosen by you will be used to identify you. Your signed consent form and a list of interviewees' real names and chosen names will be kept in a locked file cabinet in the researcher's office at [the university]. Typed interviews and other research information will be kept in a separate locked file cabinet in the researcher's office. No one besides the researcher and

the personnel listed in the paragraph above will have access to research information. All consent forms and research data will be kept for at least three years following the completion of the study at which time consent forms, the interviewees names/pseudonyms list, and audiotapes of interviews will be destroyed.

Volunteering to Be Part of this Research Study

Your decision to participate in this research study is completely voluntary. You are free to participate in this research study or to withdraw at any time. If you choose not to participate, or if you withdraw, there will be no penalty or loss of benefits. If you choose not to participate, simply notify the researcher, Amy Phillips, in person or by phone (236-2724) that you are withdrawing.

If you choose to participate in this research study and upon conclusion of the study, the researcher will notify you of how you may have access to the final research report for your own review.

Questions and Contacts

If you have any questions about this research study, feel free to contact the researcher, Amy Phillips, at 236-2724, or the researcher's advisor at the University of North Dakota, Kathy Gershman, 777-3157.

If you have questions about your rights as a person who is taking part in a research study, you may contact Dr. Christine Kuchler of the [state] Department of Human Services' Institutional Review Board at 328-2662 or Cindy Rerick of the University's Institutional Review Board at 777-4079.

If you feel any negative emotional or psychological consequences as a result of participating in this study, the researcher will, if you wish, help you contact a professional agency who can provide you with assistance. Such assistance will be provided at your own expense or in the context of your medical insurance plan.

Your Consent -- By signing this form I agree that:

- I have fully read or have had read and explained to me this informed consent form describing a research project.
- I have had the opportunity to question one of the persons in charge of this research and have received satisfactory answers.
- I understand that I am being asked to participate in research. I understand the risks and benefits, and I freely give my consent to participate in the research project outlined in this form, under the conditions indicated in it.
- I have been or will be given a signed copy of this informed consent form, which is mine to keep.

Signature of Participant

Printed Name of Participant Date

Researcher Statement

I have carefully explained to the participant the nature of the above protocol. I hereby certify that to the best of my knowledge the participant signing this consent form understands the nature, demands, risks and benefits involved in participating in this study.

Signature of Researcher Printed Name of Researcher Date

Institutional Approval of Study and Informed Consent

This research project/study and informed consent form were reviewed and approved by the [state] Department of Human Services' Institutional Review Board for the protection of human subjects. This approval is valid until the date provided below. The board may be contacted at 328-2662.

Approval Consent Form Expiration Date:

Appendix D
Research Team Consent Form

**Adult Informed Consent
Research Consultation Team Member**

The following information is being presented to help you decide whether or not you want to be a part of a minimal risk research study. This consent form may contain words that are new to you. If you read any words that are not clear to you, please ask the person who gave you this form to explain them to you.

Title of Research Study

Intercultural Knowledge, Values, and Skills in Social Services: A Qualitative Research Study.

Principal Researcher

This consent form is being presented to you by the principal researcher in this study, Amy Phillips, a graduate student in the Department of Teaching and Learning at the University of [state]. As part of her degree requirements and as research for her dissertation, Ms. Phillips is conducting this study which will examine interactions between individuals of different cultures in the context of providing and receiving social services. Ms. Phillips is also an Assistant Professor in the Social Work Department at [state university].

Selection of Participants

You are being asked to participate in this study as a research consultation team member because you are either a provider of public social services through ___ County Social Services (_CSS) in ___ County, [state], or because you work with _CSS service recipients or because you are a member of the Somali or Bosnian community in Fargo/Moorhead. You are also being asked to participate because you have experience, knowledge, and skills that come from interacting with individuals of a different cultural group than your own.

General Information about the Research Study

The purpose of this study is to enhance the understanding of how intercultural knowledge and skills are developed and used in the provision and reception of social services. The principle researcher will conduct one-on-one interviews with individuals who receive and provide social services, will engage in setting observation at _____ County Social Services, and will review documents related to the work of _CSS providers. The researcher will also meet monthly over a 7-8 month period with a

research consultation team. The consultation team will help Ms. Phillips develop research questions and help her understand and interpret the results of her research interviews. The researcher hopes that the study will result in helpful information for social service agencies and for social service training programs, such as undergraduate social work departments.

Plan of Study

If you decide to participate on the research consultation team, you and the other members of the team will meet monthly with the researcher, Amy Phillips, beginning summer 2002 through winter or spring 2003. The team will provide input into and feedback on the research process, including interviewee selection criteria, interview questions, and discussion of interview, observation and document data. Ms. Phillips hopes that the involvement of a research consultation team will help minimize any biases she brings to the study and will help promote valid processes and findings. Only aggregate data will be discussed in team meetings so that interviewee confidentiality will not be violated. Team meetings will be audiotaped and transcribed for review by the researcher and by team members if they so desire. The success of the research consultation team process will be reviewed by the researcher and discussed with the team at various points during the study and at the end of the study and will be discussed in the researcher's dissertation.

Payment for Participation

If your membership on the team is carried out within the context of your employment, you will not be paid for your participation in this study. If your participation on the team takes place outside your employment, you will be offered a \$10 gift certificate to the Mall for each team meeting in which you participate. You are free to accept or decline this certificate.

Benefits of Being a Part of this Research Study

By taking part in this research study, you will be contributing to an increased understanding of the knowledge, values, and skills needed to provide effective and sensitive intercultural social services. You will also be helping to improve the ability of this researcher, and her professional colleagues at [state university], to more effectively train social work students.

Risks of Being a Part of this Research Study

The researcher believes there are no financial, physical or psychological risks related to participation on the research consultation team. The only inconvenience you may experience is the time taken away from your daily routine by your participation in the team meetings. Every effort will be made to arrange meetings that are convenient for you in terms of time and location.

Confidentiality of Your Records

Your privacy and research records will be kept confidential to the extent of the law. Authorized personnel and employees of the [state] Department of Human Services'

Institutional Review Board and the University Institutional Review Board may inspect the records from this research project.

The results of this study may be published. However, the data obtained from you will be combined with data from other people in the publication. The published results will not include your name or any other information that would in any way personally identify you. Transcribed interviews and other research information will be kept in a locked file cabinet in the researcher's office. No one besides the researcher and the personnel listed in the paragraph above will have access to research information. All consent forms and research data will be kept for at least three years following the completion of the study at which time consent forms, documents containing identifying information, and audiotapes of interviews and meetings will be destroyed.

Volunteering to Be Part of this Research Study

Your decision to participate in this research study is completely voluntary. You are free to participate in this research study or to withdraw at any time. If you choose not to participate, or if you withdraw, there will be no penalty or loss of benefits. If you choose not to participate, simply notify the researcher, Amy Phillips, in person or by phone (236-2724) that you are withdrawing.

If you choose to participate in this research study and upon conclusion of the study, the researcher will notify you of how you may have access to the final research report for your own review.

Questions and Contacts

If you have any questions about this research study, feel free to contact the researcher, Amy Phillips, at 236-2724, or the researcher's advisor at the University, Kathy Gershman, 777-3157.

If you have questions about your rights as a person who is taking part in a research study, you may contact Dr. Christine Kuchler of the [state] Department of Human Services' Institutional Review Board at 328-2662 or Cindy Rerick of the University's Institutional Review Board at 777-4079.

If you feel any negative emotional or psychological consequences as a result of participating in this study, the researcher will, if you wish, help you contact a professional agency who can provide you with assistance. Such assistance will be provided at your own expense or in the context of your medical insurance plan.

Your Consent -- By signing this form I agree that:

- I have fully read or have had read and explained to me this informed consent form describing a research project.
- I have had the opportunity to question one of the persons in charge of this research and have received satisfactory answers.
- I understand that I am being asked to participate in research. I understand the risks and benefits, and I freely give my consent to participate in the research project outlined in this form, under the conditions indicated in it.

- I have been or will be given a signed copy of this informed consent form, which is mine to keep.

Signature of Participant

Printed Name of Participant Date

Researcher Statement

I have carefully explained to the participant the nature of the above protocol. I hereby certify that to the best of my knowledge the participant signing this consent form understands the nature, demands, risks and benefits involved in participating in this study.

Signature of Researcher

Printed Name of Researcher Date

Institutional Approval of Study and Informed Consent

This research project/study and informed consent form were reviewed and approved by the [state] Department of Human Services' Institutional Review Board for the protection of human subjects. This approval is valid until the date provided below. The board may be contacted at 328-2662.

Approval Consent Form Expiration Date:

Appendix E
Consent Form in Somali

OGGOLAANSHO KA QEYBQAADASHO CILMI-BAARIS

Waxaa lagaa codsanayaa inaad ka qeybqaadato daraasad cilmi-baaris ah.

Intaadan oggolaan, cilmi-baaruhu waa inuu kuu sheegaa:

- 1) ujeeddada, habka la raacayo, iyo muddada ay qaadanayso cilmi-baarista;
- 2) wixii khatar ah oo ka imaan kara, dhibaatooyin kale, faa'iidada cilmi-baarista iyo
- 3) sida xogtaada loo dhowri doono.

Kolkii ay noqotaba, cilmi-baaruhu waa inuu kuu sheegaa:

- 1) wixii khatar lama filaan ah ee kugu dhici kara;
- 2) xaaladaha uu cilmi-baaruhu kaaga reebi karo ka qeybqaadashada;
- 3) maxaa kugu dhacaya haddii aad go'aansato inaad joojisid ka qeybqaadashada; iyo
- 4) immisa qofood ayaa daraasada cilmi-baarista ka qeybqaadanaya.

Waxaad kale oo aad xaq u leedahay qareen aad adigu soo xulato oo xaadir kuu ah kolka uu oggolaanshahu dhacayo.

Haddii aad oggolaatid inaad ka qeybqaadato, waa in koobbi lagaa siiyaa warqaddan iyo qoraal kooban oo cilmi-baarista ah. Haddii aad wax su'aal ka qabto xuquuqdaada ka qeybqaadashada cilmi-baarista, fadlan la soo xiriiri Cindy Rerick (777-4079) ama Christine Kuchler (328-8877).

Khasab ma aha inaad cilmi-baarista ka qeybqaadato; haddii aad diiddo ama aad markii aad rabto iska joojiso, cidna kuma ciqaabi karto ama wax aad heli jirtay laguuma diidayo. Saxiixa warqaddan macnaahisu waa in lagu sharxay warbixinta cilmi-baarista sare, iyo inaad adigoon cidi ku khasbin dooratay inaad ka qeybqaadato.

Signature of Participant

Saxiixa Ka Qeybqaataha

Date

Taariikhda

Signature of Witness

Saxiixa Markhaatiga

Date

Taariikhda

Appendix F
Consent Form in Croatian

Pristanak za sudjelovanje u istraživanju

Zamoljeni ste da sudjelujete u stadiju za istraživanje.

Prije nego pristante, onaj koji istražuje vam mora reći o:

- 1) svrhama, postupku, i trajanju istraživanja
- 2) o svim razumno predviđenim rizicima, ometanjima, i koristi istraživanja
i
- 3) kako će se održavati povjerljivost.

Gdje je to moguće, onaj koji istražuje će vam reći o:

- 1) o mogućnosti nepredvidljivih rizika;
- 2) okolnostima kada onaj koji istražuje može zaustaviti vaše sudjelovanje
- 3) što se događa ako vi odlučite prekinuti sudjelovanje
- 4) koliko ljudi će biti u tom stadiju.

Vi imate pravo na zastupnika (advokata) da prisustvuje s vama tokom ovog informativnog procesa o sudjelovanju.

Ako pristajete sudjelovati, moraju vam dati potpisan primjerak ovog dokumenta i pismeni sadržaj istraživanja

Vi možete kontaktirati Cindy Rerick (777-4079) ili Christine Kuchler (328-8877) ako imate pitanja u vezi vaših prava kao sudionik ispitivanja.

Vaše sudjelovanje u ovom istraživanju je dobrovoljno, i nećete biti kažnjeni ili izgubiti povlastice ako odbijete da sudjelujete ili odlučite prekinuti

Potpisivanjem ovog dokumenta znači da vam je istraživačka studija, uključujući ovu informaciju, usmeno opisana i da ste vi dobrovoljno pristali sudjelovati

Signature of Participant

Potpis Sudionika

Date

Datum

Signature of Witness

Potpis Svjedoka

Date

Datum

Appendix G
Refugee Data Analysis

Open Coding

Category: Suffering and Loss

Being a refugee is emotional disaster

“I will never be me”

Disease (malaria)

Suffering from civil war in home country

Family divided during war

Parents torn – families in Bosnia and children here

Refugee inside own country; moving from place to place

Poorly treated by own people

Family spread around Europe and America

Family in Holland, Kenya, Somalia

Family in other countries

Death of family members due to civil war

Personal suffering

Families spread around the world

Refugee camp suffering

Category: America the Ideal

Huge cities

Fun – dancing/clubs

“Paved with gold”

“Money on trees”

“A fairy tale”

LA & NYC violent

Didn't know meaning of America except through music and magazines

Would receive thousands of dollars

Americans as rich

Like to kill people

Everyone has a gun

Government not in control

“They broke my legs” (US job experience)

Easy life, rich, happy

Everybody is rich

Crime everywhere

Black people everywhere

Americans as protectors

Everyone has nice, big, beautiful house
Everyone happy
No one fat; no problems

Category: America the Reality

First months are a blur
Not much help from anyone; "Figure it out on your own"
Would have gone back if had money
Rushed to learn American culture
Told that need to learn English. Told to "be like my grandparents"
Cried everyday. It was really hard
To some, orientation is an overload
People in shock
Pushed to work. Had to comply with TANF work requirements
First experience is of loss.
Stress on kids – "getting stretched between reality and past"
Orientation focuses on making a living, not on cultural practices for adjustment
Pushed to work immediately, although completely lost
Adjustment is tough. Need time to learn system and English
Confusion upon arrival (Is it day or night; unaccustomed to social services, medical system; think you'll be rich)
Tired, confused (a lot of information to learn)
Need to rest
Push to get oriented
Americans need to be patient
Want to cry because no one understands
When first arrive:
 Need to rest
 Push to get oriented
 Americans need to be patient
 Want to cry because no one understands
Need emotional support, encouragement, understanding of needs
"Need to have somebody to hang onto, to trust"
Emphasis on work doesn't address emotional trauma
Perception of importance of work is wrong
Mental and emotional healthy as first priority
Need material help to survive, emotional support to relieve the pain
Feel disrespected
"Need some kind of boost to move on"
Need to feel trust, confidential relationship with worker ("1+1=11")
Family is somebody to rely on, who understands you; "don't have to explain nothing to nobody"
Just wanted to "rest my soul"
Desire to return prevents learning English

Still struggling with going home or being in another America. "Wrong picture about America"

Category: Culture Shock

Can't go to bars until age 21

Nothing to do for teenagers

Have to work hard

Being on time is important

Americans wasteful – buy things they never use or wear

Americans never travel anywhere – can't compare their life to anything

Talk bad about family members

Self-centered and into money

Work so much

Don't know how to budget money – buy things they don't need

Eat a lot in restaurants

System designed for making money

Land of opportunity

Plainsville people – conservative, religious, hardworking, recognize success

Through orientation, picture of America began to change – "For me, I am here, but America is somewhere else"

To survive in America: work hard, speak English, learn the system

Money is bottom line

Life in Plainsville: scripted, work, everything by appointment – "My whole life is my schedule book" "God-forgotten place"

First image: food tasted fake and plastic; everybody looked like robots; eating fast food in cars; nobody walks; communicate via electronics; snow; ugly gray

In NYC, they treat you like garbage

Mistrust Americans: dangerous neighborhoods, steal money from paychecks, buy votes

Nice life in America: free to talk, medical care, driving, going to school (even when older); freedom from traditional sex roles

America as all those who come here. Obligation to help those who come after you.

Freedom – not freedom to drink, smoke, etc. I 'm not a slave. Can work and make money

Hard work, life is expensive

Life is cheap in Somalia, have to work harder here

Plainsville people – detachment as politeness. They don't bother you about your looks.

America is about choices and opportunities

American norms: no socializing outside. "You never see people walking. Here, just people run, doing exercise only"

Confusion about American norms (dogs inside)

Families vs. independence

Kids being independent

Divorce

Retirement homes

Cultural differences as a conflict especially for younger people

No one walks here, everyone has a car. Licenses are expensive in Germany
Public transportation not as good here
In Bosnia, normal to get married young; women not respected if have career
Bosnia is a man's country
The system is a shock. Can't fix your own car here
Don't know neighbors
Only see family at holidays or by appointment
Sex role conflict after coming here
Kids want things
Women can work here

Category: Perceptions of Social Services

Worker's attitude/body language determines comfort level
Worker's attitude impacts embarrassment level/low self esteem
Worker's attitude can reinforce sadness
Workers act as if we're spending their own money
Trained to be rough
Need appointment
Prying into how money is spent
Just getting a paycheck
Should care more about people
Guided by policies and procedures
See people as numbers of a caseload
Rules create safety for workers
Focus on agency protection, not helping clients
"A lot of rules"
System is confusing. Benefits vary from family to family. Want to know why someone else is getting something and they're not.
Public assistance really helped family.
Medical insurance is expensive. Nothing in public system for someone over 21
Public assistance provided for self sufficiency – independence from husband
Self-sufficiency threatened by supporting family overseas
Quick emphasis on self sufficiency
On your own. ACSS sends you to Job Services right away
Public assistance means being a slave—"they bring me here to work"
Financial support is helpful
Refugees as lower class workers – brought to US to work
Reasons for work requirements – to forget trauma? Cheap labor?
Struggling through the system
So much paperwork
Need translator – if not, you're in trouble
Social services not prepared for cross-cultural work
Jealous of those who get more
Mistrust of translators – revealing personal information is painful; "Kills your self esteem"

Program rules create comfort – knew what was expected
Talking every day with worker will help get assistance
Translators caught in the middle

Category: Necessity of English

Refugees should learn English
No need for workers to know refugee language
English critical to success
English necessary for self sufficiency and for workers to be able to help
Need English to build working relationship, to defend self
English as a matter of survival; important in domestic violence situation

Category: Personal Initiative

Making up for lost time; second chance
Charge of discrimination is false
Individual makes life what it is
Finished high school; school is important
Anger motivated learning English; everyone here tries to rip you off; don't know the language, rules, the lies; "learned English to express my anger"
Self taught English; orientation not enough
Prove self through hard work
Refugees hard workers like everyone else
Learned English on own; personal initiative
Earned respect through own initiative
Should be allowed to go to school and learn English
Had to take individual initiative to get into college

Category: Community Response

Employees need to take time to help refugees
Everyone's responsible for building the community
Private sector cares less about refugees. Nothing to guarantee fairness
Public sector has rules which apply same to everyone
No patience for people who don't speak English
Employers looking for things refugees don't have
Plainsville prepared to help but not prepared to understand cultural diversity
Don't understand intragroup diversity
See foreigners as invaders
Resistant – don't want to change
"Can't find my country on a map but think they have the right to judge me"
Adjustment hard for refugees and community

Category: Skills/Knowledge Needed to Work with Refugees

Learn cultures
Travel
Internships

Political education
Overcome belief in American superiority
Learn about different cultures
Be patient
Understand cultural differences (e.g., Bosnians are demonstrative)
Be human (don't approach someone as "an intimidated person with a paperwork in front of you with the paperwork needs to be signed because you have to be accountable to your supervisor")
Cross cultural skills (don't yell, ask questions in a comfortable way)
Help people understand what they're signing
Don't use fake smiles
Have feelings, demonstrate caring
Importance of confidentiality – "strong enough to hold all that for our community"
Be honest, show people around, how to work appliances.
"Treat refugees as if they're your own children"
Treat refugees with respect
Teach practical skills (driving, shopping)
Be patient
"Try to be a friend"
Provide emotional support
Have patience
Treat everyone the same
Offer support beyond helping to get work
Understand their pain
Need to know something about the culture to help
Need to be like a shrink

Category: System Improvement

ACSS needs more workers
Refugees have to wait
Hard to survive
Bicultural workers would help with integration and being accepted and give the organization the image of being open
Having same culture worker would prevent learning on own
Refugee school for learning American culture (\$ system, banking, taxes, gov't system)
Need to pay social workers more – to take job seriously
Resettlement agency was a joke/ACSS more serious
Refugees need long-term orientation
Provide education, not immediate pressure to work
Orientation should take place before coming to US

Category: Perceptions of Roma

Roma cause stereotypes of Bosnians
Embarrassed by Roma; illiterate
Hard to translate for the Roma

Complain they're not getting enough

Sexism

Bosnian class issues in Fargo

Lie, steal, no steady job, mutilate children, beg, work the system, sell children, drink, make all Bosnians look bad.

Make money on the black market; come here with money

Stereotype all Bosnians

Axial Coding (themes and relational statements)

The immediate push to "make a living" allows little, if no, time and support for emotional healing, cultural learning, and just rest and recuperation from the trauma and experiences of being a refugee.

The feelings of loss experienced by refugees also involves the loss of an ideal image of America.

America means hard work, feeling cultural alienation, and being pushed to accept American values, but also means experiencing new-found freedoms.

Public assistance provides important economic support and is especially useful to women's independence.

Personal initiative, especially learning English, is important to success, but the expectation to conform to public assistance work requirements can work against that personal initiative.

Refugee participants often perceive ACSS providers to be influenced more by rules and policies than by compassion and cultural understanding.

The lack of "human connection" with county providers can reinforce the sense of loss and sadness with which refugees struggle, particularly in the early stage of resettlement.

Theoretical statements

Refugee service recipients need a sense of human connection from social service providers, not just implementation of job responsibilities.

County providers, both as gatekeepers to vital services and in their attitudinal response to refugee clients, play a significant role in refugee adjustment.

Appendix H
ACSS Provider Data Analysis

Open Coding

Category: Personal Heritage

Farm background
American with strong German background
Unclear what being an American means
Likes change
Big caring family
Sense of humor, do anything for anybody; family responsibility
Rural, farm, homesteaded by grandfather
Strong friendships
Grew up hearing stereotypes, prejudice
Underdog; understands new Americans
Liberal
Wasn't as aware of culture and customs as wanted to be
Proud to be Norwegian
Grew up on farm
Moral community
Willing to help each other
Accountable to each other
Ethics, values, religion
Caucasian
Always enjoyed getting to know people
No personal cultural identity
Benefited from white privilege
Immigrant grandparents
Raised on a farm
No German traditions in the home
Mother is Old World
No cultural practices at home
Ethnic traits – hot-tempered, stubborn, generous
Like to hear about people
Farming thing
Hard-working
Small town
Diverse education
Farming family
Live and die by rain

Farm thing
Plain old American
Develop own tradition
Strict upbringing

Category: Ancestors' Approach to Adjustment

Be citizen, forget the past
Forgot old German ways, do what Americans do
Grandfather didn't keep his native ways and language. "Not what you did"
Ancestor models for adjustment. Deal with it.
Ancestors had to adapt
Ancestors kept culture but became "part of us"
Immigrant grandparent generation wanted to cut off ties from the old country
Wanted to become American
Were very hard workers.
Had to be healthy and have money before coming here.
Homogeneity prevents problems
Ancestors wanted to learn American ways
Old world traditions of parents like new American traditions
Ancestors didn't have welfare
Think of own ancestors when working with refugees.
Came here "looking for a better life."

Category: Being an American

Traditional norms
No one staying home anymore
Leave the old behind
Know everybody in small town
Prejudices in small town
People not accepting of differences
Relatives always around
Norwegians unemotional
Americans don't do well at taking care of our families
Materialistic
Adjustment is American - "if you're from the farm you don't take the tractor to town with you"
Nonadjustment means taking advantage
Work ethic
Too much nationalism and globalism
Participating in society for good of the community
Work hard
America has it all
Freedom, know our neighbors, live in harmony
Freedom being lost with terrorism; refugees threaten freedom; "we need to be selective"
Americans work hard, no hand out

We supervise our kids more
Hard workers, high morals and values, education, marriage, following laws
Work hard compared to other countries
Hard for new Americans to keep up with our expectations
We work too hard – hard to raise a family
Work, take care of families, act appropriate in public, follow laws, not be catered to
German heritage – not real affectionate
Value independence
American dream – money, wealth, self sufficiency
Keep emotions in check (in this area)
Cliquish, clannish
Being from this state means being independent, help one another
Work ethic; appreciation for money
Being several generations removed from ethnic heritage removes ethnic identity
Work and earn everything you get
Need to be employed; government doesn't take care of all needs
Responsible for your behavior

Category: Perceptions of Refugees

New Americans come to get what they can
Don't have to be healthy. Rely on tax dollar services
Intimidated by Somalis
Elderly clients appreciative
Frustrating
Rude
Think worker has unilateral decision-making power
Mentally disabled most difficult
Don't get to know them well
Younger refugees more demanding
Don't want to become American – want to do their own thing
Cling on to the family
Clannish
Need to keep up property
Prevent cohesion, neighborhood integration
Need to learn language; blend in more
More committed to families than are Americans
Why bringing them here when we have our own to take care of
Keep to their own group
Financial drain on system
Culture as a crutch
They should adjust
Demanding
Scary
Refugees like children
Smell of garlic

If educated and speak English, easier to work with
Live in groups and families more than Americans
Lost Boys, good; Bosnians, mentally ill
Get services Americans don't get
Need reality orientation
Uncomfortable
Intimidating
Entitled to transition period but need to make good use of it
Learn to live within our society
Difficult to deal with people who don't speak English
Language issue difficult for worker and client
New Americans take care of their own
Competition for benefits with Americans
Look where our tax money's going
Community view of refugees getting more/taking our jobs
Need to learn English
Refugees like babies
Take more time
High maintenance
Bosnians more closed
Level of education contributes to adaptation
Not prepared for what's acceptable/not acceptable behavior
Need to be willing to become American

Category: Perceptions of "the System"

Policies and regulations prevent helping some people
Importance of culturally relevant services
Need home visits and case managers
Not many cultural diversity trainings
Need workers from different cultures
Eligibility programs are "black and white"
Refugees get more help. System doesn't provide from all Americans.
Resettlement agency interested in self preservation
Interpreters and ESL are financial drain on the system
Refugee camps should provide better education
Don't always agree with rules/regulations
Interpreters make for long, tough interviews
Social workers create dependency on the system
System doesn't help with self-sufficiency
System is enabling people – too many services available
Need to help our own first
Government bureaucracy, rules and regulations changing – "have to verify so much"
Work requirements unrealistic for those who don't speak English.
Food stamp rules don't make sense
Should require new Americans to learn English in order to get refugee cash

Not enough education about medical insurance options
Anger at system for not better indoctrinating new Americans to American way of life
System creates dependence on the system.
Resettlement agency not keeping them long enough
Refugees need the system
Need more in-services in different cultures. Train us how to teach them our culture.
Bigger medical facilities haven't made commitment to providing health care to people who don't speak English.
Frontline services to new Americans have been overwhelmed
New Americans need longer immersion, job coaches, better public transportation, assistance at schools
Need more ESL and long-term commitment
Resettlement agency staff too busy, burned out.
No memory of cultural diversity trainings
New Americans drain system
Need group meetings in their homes for orientation
Need mentors
Need speakers from different cultures – tips for working with them
Assessment process is overwhelming
Need living wage jobs, family services, school counselors
Use the guidelines to deal with pushy Bosnians
Can't change the system
Gaps in services
Not much training on cultures
"Not my job" syndrome
Frustrating because can't spend a lot of time with secondary refugees
Workers need more cultural diversity trainings
Refugees need more trainings on police; landlords on dehumidifiers
No direct line to resettlement agency
New Americans don't know they're being taken advantage of
Blaming refugees for school problems
State funded program doesn't provide a lot of flexibility for delivery of service
Need more ESL classes, improved orientation, family mentors, teaching about things we take for granted, "America 101 class"
Need multilingual staff
Need more cultural trainings; need cultural database
Should hire people who know the community, services in it, cultural places
Tension between TANF and eligibility units
Need more trainings
Need cultural expert on staff to help both staff and refugees
"the rule made me do it"
Big Brother computer system
Refugees are first introduced to county services so develop a sense of entitlement – systems fault
Need comprehensive case managers

Those making the rules not effected by the problem
Getting a health care appointment requires an act of congress
Need more staff
Know more about cultures so not to offend
Need sponsors to help refugees "just get through the system"
Resettlement agency has dropped the ball
Refugees need longer support time, better jobs, transportation, education, medical care, ability to pay off debts
Hurdles in working with refugees include sexism, culture, language
Need more workers
Need to simplify regulations
Biggest struggle is explaining the rules
The rules are confusing
Rules create callousness
More ESL classes
Workers need higher wages – "more money helps workers deal with anyone"
Management needs to do more on team building, hiring more staff, empowerment of workers, building empathy
When refugee is disqualified from job service, it comes from social services
Need list of required items sent home in native language
Need translators 8-5, M-F
Have application in different languages
Need more staff so have time to be courteous and not rushed
Bureaucracy and no input is source of frustration
Frequent change in program guidelines not always helpful
System doesn't accommodate long-term involvement
"Almost like managing their lives, not their case."

Category: Interpreters

Getting correct info?
Better ones know the programs
Bilingual services a crutch
Hard for interpreters to explain everything because not all English words have a translation
Easy to miss things
Don't trust interpreter
Takes more time
Interpreter explained hospitality and potential insult
Adequacy depends on interpreter
Majority are good. Difficult ones don't last long because create problems for client
Using interpreters is intimidating – not knowing if you're getting across and if what's translated is correct
Don't like to use interpreters
Interpreters tell workers things about clients.
Not getting full story through interpreters

Cultural informant

Interpreters reinforce intragroup attitudes (Roma)

Need more good, full-time interpreters

Interpreter is in the middle – hard to build a relationships with the client

Bosnian interpreters don't like the Roma

Sometimes suspicious of what's being translated

Get more accurate info with interpreters

Interpreter bias against Roma – don't know their language

When client and interpreter are laughing, I feel like I've lost control

Mistrust of interpreters

Need more interpreters

Category: Skills Needed to Work with Refugees

Don't treat them any different, when I'm mad, I'm mad at them

Uncomfortable asking questions about cultural practices – depends on person

Develop trust, resist personal impulses

Compassion for people; look for similarities

Start where person's at

Undivided attention, show caring, acknowledge client frustrations

Experience – wait to see if client wants to shake hands

Take cultural diversity classes

Awareness of cultural norms

Openness to world affairs

Patience, compassion, knowledge, fairness

Social workers are bleeding hearts, create dependence

Respect, dignity, love

People are the same

Respect customs

Be positive

Help people help themselves

Always more to a person's story than what you hear

Work harder because they're more frustrating

Frustrating to go the extra mile

Handle everybody the same

Rules as default mode

Ask questions in non-offensive way

"Learn as you go"

Dual role as tax payer and social service provider

"Learn as you go"

Don't do anything different with New Americans, but look at "the whole person"

One-on-one works

Treat them the same as everyone else, with respect and dignity

"Learn as you go"

Make no assumptions, explain in detail

Keep an open mind

Rely on rules
 Knowing the basics to do the job
 Start where client is at
 "teach them to fish"
 Working with refugees made me a more rounded person
 Listen to them tell their stories
 Need more training on cultural differences
 Understand cultural group. Don't look at world only through own eyes
 Don't treat new Americans any differently. Get to know them.
 Prepare them for offensive assessment questions.
 Learn how to ask questions in non-offensive way
 Need to know new American background/experience to know how they will approach things
 Self disclosure helps build rapport
 Be technically proficient
 Get them to understand what they need to do
 Follow the rules
 Be nonjudgmental
 Prepare clients for community norms
 Don't treat anyone any differently
 Warn clients about fraud
 Put self in their shoes
 Believe in people
 Patience
 Try to make them comfortable
 Try not to be "the big bad bureaucrat"
 Know what NOT to say
 Manage power with grace
 Program guidelines help us treat everyone the same – fair playing field
 Need to learn about their backgrounds and their lives
 Importance of multicultural knowledge
 Go a little slower
 No difference between clients, just need to get them to understand what they need to do
 Figure it out on your own.
 Take time, repeat what they're saying until you understand
 Treat people the same
 Social workers need to be friends with their financial workers
 Don't dwell on the past
 Program guidelines as "fair playing field"

Axial Coding

Subcategories: (Related to workers' perceptions of refugees, own work, and "system")

Expectation of assimilation
 Like children

"Learn as you go"
 Uncomfortable

Frustrating work
 Overworked

Can't build relationships
with them
Should fit in/be American
Language barrier
Need reality orientation
Dependent on system
Clannish
"work the system"
Grateful
High maintenance
Demanding

Need to know cultures
Treat everyone the same
Don't understand them
People are people
Help our own first
Rely on rules
Fear of offending
Generic set of attitudes
for work with everyone
American values
Intimidated

Gaps in service
Weight on aCSS
Inflexible rules
System creates
dependency
Special treatment
for refugees
Rules create fair
playing field
System makes
self sufficiency
difficult

Relational statements (Across all programs)

Refugees learning "our culture" will make service provision easier.

Refugees are "like children," the system as their parents.

As representatives of "the system," someone "working the system" is considered a personal affront to workers.

One refugee-serving agency doesn't know what the other is doing.

Workers need to feel in control. Interpretation process, different cultural norms, inability "to read" refugees can create sense of being out of control.

Interpreters can be a positive or negative aspect of service provision (takes longer, some are untrustworthy, can bond with clients, reinforce biases about other cultural groups, but can also serve as cultural bridges).

Refugees are viewed as both a monolithic group in terms of what they need to do to adjust to life in Plainville, (e.g., learn English, "fit in," "become American" "work hard") and as diverse groups and/or individuals based on perceived group characteristics and factors impacting adjustment (e.g., older refugees are more appreciative; younger refugees learn English faster, Somalis are more clannish than the Bosnians; the Roma are demanding; educational level effects adjustment, etc.).

The programs and their rules are designed to change behavior, promote conformity.

Program rules, worker's personal values and expectations, and system pressures are the primary mediators of the interactions between workers and refugees. (Refugee data analysis shows that *refugee* personal values/expectations will also be a mediating influence.)

Cultural knowledge/skills and cultural trainings have limited presence in the data as mediating influences.

If the variables are viewed as discreet systems (refugee system, worker system, larger human services system) the work can be experienced as all the more frustrating because of both intra- and inter-system paradoxical tensions.

The primary tools used by workers for balancing this tension and for interaction with refugees are reliance on program policies/rules, personal values, expectations placed on refugees, and a generic set of helping attitudes applied to all clients.

Minimal if any presence of following in data from interviews:

Knowledge/skills learned from cultural diversity trainings

Use of bilingual/bicultural workers

Impact of refugee background, experience, trauma

Positive attributes/contributions of refugees

Need for/interest in advocacy or system change

Primary themes

A sense of connectedness to family, neighbors, community is important and frequently comes from small town or farming background. With the language barrier, different customs, reliance on family and the social service system, refugees cannot be relied on as part of the larger community support system.

Primary goal of refugees should be to "adapt" "fit in" "adjust" "blend in" "assimilate" "become one of us" "be American."

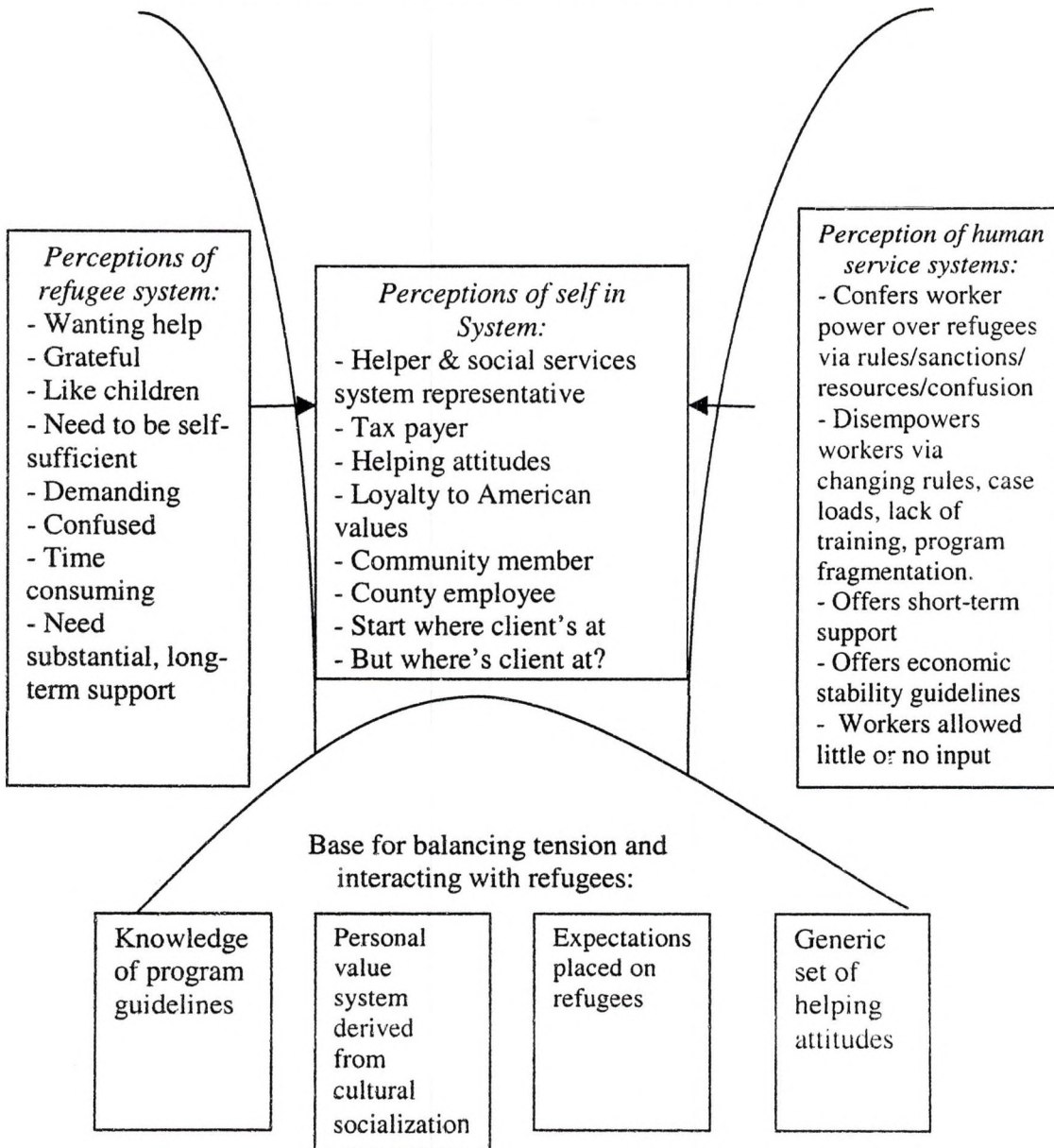
Language is the biggest barrier to service provision.

Refugee casework is frustrating work due to an interacting set of variables related to perceived refugee characteristics, workers' knowledge/values/expectations, and larger systems' issues.

Program rules create fair playing field, promote conformity, help workers be in control, and are default mode when problems come up.

While cultural knowledge is acknowledged as useful to help workers understand refugee attitudes and behaviors, workers rely primarily on a "learn as you go" and "treat everyone the same" approach to interaction with refugees.

Provider Thematic Relational Matrix and Theoretical Statement



Theoretical statement: In the context of intra- and intersystemic tensions and pressures, and in the absence of intercultural training, workers rely on a base of action comprised of knowledge of program policies/rules, personal values, expectations placed on refugees for conformity, compliance, and assimilation (from program policies/rules and personal value system), and a generic set of helping attitudes in their work with refugees.

Appendix I
Stakeholder Data Analysis

Open Coding

Category: Personal History & Self Reflection

Sheltered upbringing
French/Norwegian heritage
White, German
Great grandparents immigrated
No German traditions in own home
Grandparents bearers of traditions
Exposure to cultural diversity in military
Scandinavian heritage
No Scandinavian practices in home
Influenced by family values – work ethic, community sense, generosity
Identity as white
Quiet hometown
No discussion of German heritage in home
Total Caucasian hometown
Some exposure of other cultures in college
Protected upbringing
Lived in other states
Personal values based on farming
Small town attitudes – people in your business, help each other
Don't know own ethnic history
Feel empty without sense of own cultural background – “I want to feel full”
Cultural heritage unimportant to parents
Having children inspired search for meaningful traditions
Travel overseas
Interest in other cultures
Exposure to other cultures in college
Family open to other cultures
German heritage
bicultural heritage
German grandmother wouldn't discuss immigration
military experience
sacrifice for others motivated return to college to improve own life
bicultural experience – different value systems
experienced prejudice in school
college put self into perspective

college education gave name, explanation to experiences
college studies normalized personal history
Interest in multicultural studies
desire to help people
“learning like a sponge”
wanted to help people
Refugee work allows you to look at your own beliefs
Own cultural beliefs will be challenged
Need for awareness of personal values and impact of personal background
Need for openness to differences
More commonalities than differences
People are basically good
Belief in good of person creates rapport
Talk to people like they’re people
We/they attitude prevents self reflection
Look for similarities instead of differences
Avoid fear as excuse for not helping
Don’t be afraid of the new, of making mistakes
Need both own ideas from life and book knowledge
Appreciate freedom when you know what it looks like without it

Category: Perceptions of Refugees

Refugee felt heard in program
Uncomfortable giving intimate information to a robot
Need to learn English
Need materials in own language
Those lacking education in programs longer
Nonpaid work experience viewed as “doing something for nothing”
Struggle with punctuality
Somalis and Bosnians don’t have much education
Males more likely to be educated in home countries
Refugee frustration about not getting work
Lack of work effects self esteem
Self blame for not passing tests
“Pop in” without appointments
Concern on job about physical contact with men
Depression, paranoia
Depression can cause loss of job
Refusing jobs where pork is handled
Cultural norms create fewer job options
Working lower status jobs than in home country
Female circumcision practiced here
Sudanese teenager in foster care
Not knowing system
Bosnians most difficult with follow-through

Roma least compliant
 Roma used to not being accountable
 Gender role conflict with work requirements
 Many Somali men are disabled
 Somali women taking on different gender roles
 Multiple demands of Somali women
 Refugees starting own support group
 Have same goals as everyone
 PTSD
 MH services often not part of culture
 War experiences
 Expectation of abundance in US
 Receptive to honesty
 Honesty forges friendship
 Starting from scratch
 PTSD
 Don't want to adopt new values
 Miss their homes
 Financial struggles, loneliness, isolation, fear of saying something stupid in English, fear of being attacked due to color of skin
 Self sufficient and productive members of community
 Generational struggles
 Deep meaning for why they're here
 Help refugees develop their own programs
 Reduce agency dependence
 Need housing
 Need culturally competent MH services – to deal with trauma
 PTSD, depression, anxiety at various stages of resettlement
 Can't reach potential due to struggling with depression
 Range of barriers
 "They are just like you and I"
 language barrier
 "It's amazing they can get out of bed"
 "They're fleeing from awful things"
 Lack of English prevents passing skills tests
 Refugee self advocacy
 Need to speak up when they don't understand
 Don't know why they don't speak up
 Some refugees at 60 month limit but can't speak English
 Refugees frustrated with agencies
 Sudanese have "larger sense of community" – not so stoic
 Feel abused by community – rejected
 Need in-home supports, longer orientation, cultural interventions, partnerships between refugee groups
 Intergroup prejudice (Somali/Sudanese; Kurds/blacks)

Cultural views of MH prevent use of services
Stigma on MH services
Psychosocial stressors of being a refugee (finding employment, money issues, unmet expectations re. US)
US as rude awakening
Basic needs, wanting help but not intrusion, transportation, MH stigma
Trauma not easy to discuss
Retraumatized by system
Fear of not having needs met recreates old feelings
Revictimized by systems' demands
Perception of not having to work in US
Frustrated with agencies
Resilience of refugees
Lack of parental involvement in schools
Parents love their kids
Refugee groups stay together like our ancestors
Stay attached for security
Kids left to own devices result in trouble
Trauma of becoming a refugee
In America by necessity not choice
"Hard to take American hand because it's Christian"
Kids have power because learn English faster
"they have a different set of rules"
"Wanting more but being scared of it"
Pull between the familiar and the new
Need to be prepared to have strong work ethic
Shouldn't expect to fit into community
May experience prejudice
Pick out best of both worlds
Sticking to own group may add to isolation
Should accept American culture so American culture will accept theirs
Female circumcision as awful, scars for life
Treating mental health issues compounded by "people who have trouble communicating"

Need:

- Mentors
- Long term intensive support
- Help with school problems
- More help with paperwork
- Help with daily living skills
- Culturally appropriate day care
- Help with work on citizenship
- Driver's license for independence
- Full-time ESL
- Concrete assistance with basic needs
- Mentors

Saturate with English
Need mentors
Mentors

Category: Work and Relationship with Refugees

Likes working with refugees/helping people
Connects Somali arm painting with American cosmetic practices
Curiosity about refugee perspectives
Refugee friends
Refugee work changed life
Initially frightened by refugee
First experiences: couldn't understand, didn't know, frightening, shocking and difficult, had no clue, worried about being talked about
Different disciplinary practices
Confronts bigotry toward refugees in others
Current job allows more "in depth" work with clients
Lack of supports in program for clients prevents buy-in by clients
First contact with refugee: smell of food, unsure of refugee comprehension
Job allows small talk
Get to know them
Caring attitude at work
Program support for another program, not refugee clients
Don't know what the truth is
Had to prove self with refugee community
Acceptance and appreciation of other cultures
First experience – language barrier prevented total assessment
Exposure to variety of social service programs
Passion for refugee work
Experience with church-sponsored refugee work
Help refugees attach new information to old
Literacy in first language helps learning of English
Some look down on parents for non-involvement in school
Empathy for families due to trauma
"Baptism by fire"
kids are like sponges
need common experience to learn English
hard to step out of "Euro thinking"
allow them to share their own experience
start with common experience
life history promotes open-mindedness, non-judgmentalism
not shocked by family stories
"genuineness to help"

Category: Advocacy on behalf of refugees

Failed advocacy on behalf of refugees; disappointment

Developed collaborative working relationship to integrate services
Started literacy program
Provided childcare
Working to change system
Starting literacy program
Starting program

Category: Knowledge and Skills Needed to Work with Refugees

Cultural knowledge

Not understanding our and other's culture can effect assessment ability
Understand how alienating it is to be a minority
Learn more about other cultures
Travel
Understand importance of extended family
Understand history of conflicts, politics, intragroup differences
Understand histories of groups
Learn about cultures, histories, countries
Learn about process of getting here
Understand cultural practices
Cultural understanding improves services – better understand refugee behavior
Lack of cultural knowledge creates lack of openness
Lack of cultural knowledge is offensive
Cultural knowledge develops friendships and allows for cultural joking
Understand refugee experiences
Understand refugee trauma
Understand family system
Understand cultural frame of reference
Learn about refugee cultures
Take interest in sociopolitical history
Learn about culture and family
Talk about their family
Understand patriarchy, gender roles
Understanding encourages acceptance
Understand impact of differences
Cultural knowledge necessary to provide effective services
Not understanding client, practices results in poor services
Learn about client's history

Attitude of compassion/openness

Hear their stories
Don't push discussion of trauma
Be respectful
Treat refugees with respect and compassion
Don't judge refugees as noncompliant
Accept where refugees are – "If you had no legs, I would never say 'Get up and run'."

Don't be alarmed at different views/habits
Worker must take initiative to create trust
Creating trust as ongoing process
Build relationship so as to build trust and comfort
Trust and comfort allows disclosure of barriers
Not as judgmental after learning more
Engage on human level
Treat the need not the culture
Respect, appreciation for refugee experiences
Don't generalize
Treating everyone the same means stereotyping
Don't treat everyone the same
Move beyond stereotype to get to know individual
Look at whole person
Open to differences
Importance of openness, honesty
Open and accepting
"Meet them where they are"
Any work experience teaches job skills
Empathy and support for the push/pull in refugees' lives
Understand refugee motivation for decisions
Being judged inhibits disclosure
Don't look at refugees as "those people"
Look at similarities more than differences
See parents as doing their best

Skills

Be flexible with job description and with changes
Be willing to give of yourself
Be creative in communicating
Gather knowledge, listen
Give 2nd and 3rd chance
Take initiative to work harder if compliance not there
Listen so as to convey their importance
Listen so as to understand exact need
Fill needs in manner acceptable to person
Cheerleading
Have "open door policy"
Learn a few words of their language
Know some basic words in foreign languages
Reach out to the other
Enjoy interactions
Talk about differences
Teach them about our culture

Generalist skills needed: apply values/ethics; problem solving skills; case management approach; ability to see gray areas; flexibility; focus on strengths

Category: Perceptions of ACSS Providers/Programs

Language is biggest struggle
Taking for granted that refugee is understanding
New workers should know their feelings about refugees
Eligibility work is cut and dry
Rigidity prevents getting to know refugee personalities
Easy to be frustrated with refugees
County doesn't get into life issues
County sticks to factual information
Individual workers decide level of involvement with refugees
County workers lack time to build relationships
Refugees are lumped together – possibly offensive
Not overcoming cultural and language barriers implies prejudice
Language/cultural barriers makes assessment difficult
Assessment problems impacts refugee adjustment
Program demands, time constraints prevent cultural learning
Refugee work consuming
Importance of hiring ethnic appropriate persons
Non-refugee staff help refugees understand the system
Need continual communication training with staff
Focus on workers adapting to differences
Default mode when we don't understand culture: "we're right and they're wrong"
Looking at differences creates wedge
Teachers viewed as powerful people – influences decision making
Hard to balance power
Trying not to judge from Christian EuroAmerican perspective
Pulling away from things that are different
Fear of being talked about when refugees speaking own language
Need for control result in poor teaching
Need people skills, compassion, empathy
workers seen as "cold robots"
Phrasing of questions can be demeaning: "in or out of wedlock?"
Value judgment in questions
Data gathering process creates engagement problem
No cultural sensitivity in interview process
Need people skills
Worker dictated by guidelines
No power to change rules

Category: Systemic Struggles/Needs and Strengths

Systems have grown stronger in work with refugees
Systems offered "what we had" in early settlement years

Systems are confusing, complicated
DMV test refers to “crest of hill” – toothpaste?
Informed consent can create resistance
Not enough manpower to provide needed support
Refugees dropped from support too soon – before going through entire ND season
Orientation too short with too much information
Conflict over which system takes responsibility for what
Blaming between agencies
Agency leadership dictates agency attitude
Agencies that bring refugees in should do more for refugees
Self sufficiency is the goal
Large influx of refugees caused system conflict
Working to correct mistakes of the past
Attitudinal dilemma over whether or not it’s good to provide welfare
Perception of refugees as looking for welfare
2-parent households not eligible for cash assistance
Secondary migrants receive no cash assistance
First 90 days are integration period
Minimum wage job can hurt adjustment phase
Conflicting messages from system – find work, but only work that won’t hurt income and food stamps
Try to avoid county assistance after 8 months
Public assistance hard to live on
Church support and donations needed
Individual refugee or small family not receiving enough refugee cash to live on
This town open to taking most cases
VOLOGS distribute refugees
Strict requirements regarding meeting basic needs
Requirements ensure dignity and respect
Increasingly stringent rules re. resettlement
Fewer refugees = less burden on systems
Refugees bounced between agencies
Refugees don’t understand information at all agencies
Mental health system “is a big umbrella” – have to deal with concrete needs too
Maslow’s hierarchy of needs
Balancing concrete and mental health needs
Job Service computer system confusing and complicated
County is bureaucratic with lots of paperwork, lots of requirements
Have to fight for everything
No diverse staff at county
Focus on work
Orientation process too condensed
Racism against students by other students in schools
Services not culturally sensitive
Employers afraid of special needs of refugees

Discrimination by employers
 ESL classes not flexible – refugees can't work and take classes simultaneously
 Refugees responsible for appealing system decisions
 Training program not modified to accommodate refugees
 County has to deal with sanctioned clients
 Required meetings results in fewer clients
 Refugees have to fit employment box – no creative thinking
 Fear of offending
 Takes energy to communicate
 Confidentiality issues with interpreters
 Difficulties in mental health services
 Frustration with Roma
 No use of foreign words by workers
 Language barrier biggest difficulty in providing services
 Encourage refugees to work harder
 Refugees need accommodations
 Inappropriate expectations of refugees
 Cultural conflict between instructor and refugee students
 Program focus on self sufficiency
 Some programs flexible with refugees
 Leadership attitude trickles down to staff
 Transportation issues

- + not having car
- + son drives mother, misses school
- + can't get license

 So many organizations
 Transportation problem
 A lot of paperwork
 Nor giving refugees a chance in programs sends wrong message
 Fragmentation of services – a lot of referrals
 Transportation problems
 Bounced back and forth between agencies
 Some agencies not culturally competent
 Employers concerned about safety issues
 Refugees treated like “axe murderers”
 System creates separation of couples (no assistance for 2-parent household)
 Bus system confusing
 ACSS rigid about rules
 Turn over often result of white staff not adjusting
 Cold assembly line feel at ACSS
 At ACSS huge caseloads, program reqs, limited time prevents understanding
 System as judgmental, hoop-jumping, assembly-line
 Hoop jumping seen as showing initiative
 More courses needed on different cultures
 Culturally competent agencies

- + understanding all cultures
- + Look at attitudes of new hires toward refugees
- + hire bicultural staff
- + cultural artwork in agency

Refugee serving agencies need more manpower
 Refugees with sponsors are better off
 Need bicultural workers at DMV
 Encourage refugees to learn English
 Sponsorship best approach to resettlement
 Need integration of services
 Better communication between groups
 Mentoring services
 Intensive case management
 More ethnic diversity in service positions
 Resettlement agency needs to do better job
 Agencies need to make processes user friendly
 Direct service staff of different agencies need collaborative meetings
 Service integration – common goal, plan, working together
 New workers should know something about refugees
 Cultural sensitivity training
 Training in cultural histories, life experiences
 Need diverse employees
 Need to understand client limitations re. ability to meet program reqs

Category: What Works in Systems

Lower number of refugees both good and bad
 Collaborative meetings help define agency roles
 Agencies coming together is valuable
 Move from blaming to collaboration
 Agency leadership is important to cultural competence
 Trainings improve cultural competence
 Comfortable setting promotes learning
 Close collaboration between agencies promotes client compliance

Category: Views on Community/US

City as homogeneous
 English required in job descriptions
 Community as “closed doors” to refugees
 “as soon as you walk in the door they have no openings”
 community not willing to give them a chance
 educate elderly in community about different cultures
 community doesn’t see refugees as people
 Americans can’t relate to refugee experiences
 Being American means freedom to do what I want, advantage, opportunities

City's advantages for refugees: affordable housing, jobs, feeling safe, low cost of living, good schools
Community welcoming due to success of refugees
Americans sheltered – “my little world”
Americans don't study geography
“Americans are egocentric” – don't learn about conflicts elsewhere
lack of community supports to deal with depression
community not used to thinking outside the box
need to understand refugee issues before placing expectations on them
community-wide function to help refugees, not just agencies
small town attitudes, prejudice
more diversity creates more openness
misconceptions about refugees – just stay on welfare
prejudice towards Arabs
get business people on agency boards
get community involved
expect refugees to be like us
people in community need education, greater awareness, comfort with refugees
people fearful of reaching out to refugees
community working at accepting – more work needed
resettlement began in 1950s
Prejudice against refugees – don't “mix with who's here”
good place to live for refugees
Need more community education about how to integrate refugees
belief that “should take care of our own”
Angry phone calls about refugee resettlement
Resettlement not seen as Christian
Competition for jobs with refugees
Attitude of “shouldn't have this mix in our community”; “No business bringing in people here that nobody wants”
Positive impact of refugees
Overprotective of Lost Boys
Expecting resettlement agency to be responsible forever
Community needs to support refugees for years
Need church support, mentoring, community tour guides
No direct experiences of refugees promotes ignorance or refugees
“need to be more open to our neighbors”

Axial Coding (relational statements and themes)

Stakeholders place high value on learning about and understanding refugee cultures

Cultural understanding promotes effective service provision.

Lower caseloads, flexibility on the job, and having time to get to know refugees promotes a willingness to advocate on behalf of refugees (e.g. program development) and such advocacy is necessary for refugee adjustment.

Accept refugees “where they’re at.”

Social services systems cause problems for refugees.

Refugees need personal attention, mentors, long-term support.

Systems need to collaborate.

Refugees struggle with mental health issues.

US is culture shock.

Community not as receptive as it could be

Primary themes:

Building relationships with refugees is important. Relationship building moves workers beyond fear and judgment.

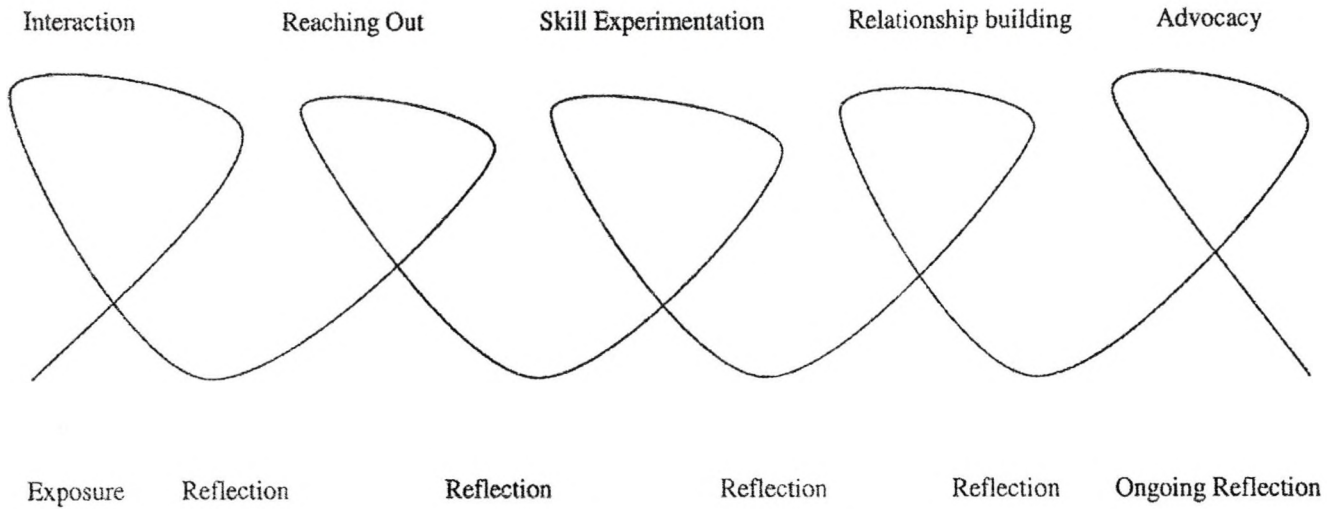
Self awareness and cultural understanding prevent we/they default mode.

Effective work with refugees and refugee adjustment requires *active* effort on the part of the worker (cultural learning, initiating and building relationships), not just a passive mental attitude of respect.

County workers are not able to build relationships due to high caseloads, inflexibility of jobs, and lack of intercultural training.

Theoretical statements:

1. Refugee adjustment is the mutual responsibility of refugees social services, and the larger community.
2. Effective work with refugees involves a “praxis” cycle of intentional learning, action using new knowledge, reflection on that action, more informed action, etc.



Base upon which work with refugees takes place:

Human Service Education

Interest in diverse cultures

Flexible Job

“Praxis Cycle” of Stakeholder Work with Refugees

REFERENCES

- Abramson, J. S. & Mizrahi, T. (1994). Examining social work/physician collaboration: An application of grounded theory methods. In C. K. Riessman (Ed.), Qualitative studies in social work research (pp.28-48). Thousand Oaks: Sage.
- Anderson, J. & Wiggins Carter, R., (Eds.). (2003). Diversity perspectives for social work practice. Boston: Allyn and Bacon.
- Archer, C. M. (1991). Living with strangers in the U.S.A. Communicating beyond culture. Englewood Cliffs: Prentice Hall.
- Aroian, K. J. (1990). A model of psychological adaptation to migration and resettlement. Nursing Research, 39, 5-10.
- Bailey, T. & Waldinger, R. (1991). Primary, secondary, and enclave labor markets: A training system approach. American Sociological Review, 56, 432-445.
- Balian, K. (1997). Overview of issues and the United Nations roles. Paper presented at the meeting on Survivors of Torture: Improving Our Understanding Conference. Washington, D.C.
- Balgopal, P. R. (2000). Social work practice with immigrants and refugees. NY: Columbia University Press.
- Baptiste, D. A., Jr. (1993). Immigrant families, adolescents and acculturation: Insights for therapists. Marriage and Family Review, 19, 341-363.

Bargal, D. & Schmid, H. (1992). Organizational and community change through participatory action research. Administration in Social Work, 16, 99-122.

Becker, H.S. (1970). Sociological work: Method and substance. Chicago, IL: Aldine.

Behnia, B. (2004). Trust building from the perspective of survivors of war and torture. Social Service Review, March, 26-40.

Belozersky, I. (1990). New beginnings, old problems: Psychocultural frame of reference and family dynamics during the adjustment period. Journal of Jewish Communal Service, 67, 124-130.

Bemak, F., Chung, R. Chi-Ying, Pedersen, P. B. (2003). Counseling refugees. A psychosocial approach to innovative multicultural interventions. Westport, CT: Greenwood Press.

Bennett, M. J., (Ed.). (1998). Basic concepts of intercultural communication. Selected readings. Yarmouth, MA: Intercultural Press.

Berger, R. (1989). Promoting minority access to the profession. Social Work, 34, 346-349.

Berger, R. (in review). Listening to their voices: The experience of immigrant women.

Berger, R. & Weiss, T. (2002). Immigration and posttraumatic growth: A missing link. Journal of Immigrant and Refugee Studies, 1, 21-39.

Berry, J. W., Kim, U., Minde, T., & Mok, D. (1987). Comparative studies of acculturative stress. International Migration Review, 21, 491-511.

Bochner, S. (1986). Coping with unfamiliar cultures: Adjustment or culture learning? Australian Journal of Psychology, 38, 347-358.

Breton, M. (1999). The relevance of the structural approach to group work with immigrant and refugee women. Social Work with Groups, 22, 11-29.

Brislin, R. W. (1986). A culture general assimilator: Preparation for various types of sojourns. International Journal of Intercultural Relations, 10, 215-234.

Brodsky, B. (1982). Social work and the Soviet immigrant. Migration Today, 10, 15-20.

Burgess, R. (1984). In the field: An introduction to field research. London: George Allen & Unwin.

Capps, R., Passel, J. S., Perez-Lopez, D., & Fix, M. (2003). The new neighbors: A user's guide to data on immigrants in U.S. communities. Baltimore, MD: The Annie E. Casey Foundation.

Charmaz, K. (1994). The grounded theory method: An explication and interpretation. In B. Glaser (Ed.), More grounded theory methodology. A reader (pp. 95-115). Mill Valley, CA: Sociology Press.

Charmaz, K. (1996). Grounded theory. In J. A. Smith, R. Harre, & L. Van Langenhove (Eds.), Rethinking methods in psychology (pp. 27-49). London: Sage Publications.

Charmaz, K. (2000). Grounded theory: Objectivist and constructivist methods. In N. K. Denzin & Y. S. Lincoln (Eds.), Handbook of qualitative research (2nd ed., pp. 509-535). Thousand Oaks: Sage.

Christensen, C. P. (1992). Training for cross-cultural social work with immigrants, refugees, and minorities: A course model. Journal of Multicultural Social Work, 2, 79-97.

Christians, C. G. (2000). Ethics and politics in qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), Handbook of qualitative research (2nd ed., pp. 133-155). Thousand Oaks: Sage.

Citrin, J., Reingold, B. & Green, D. P. (1990). American identity and the politics of ethnic change. Journal of Politics, 52, 1124-1154.

Cohen, N. A. (Ed.) & Contributors. (2000). Child welfare. A multicultural focus (2nd ed.). Boston: Allyn & Bacon.

Colon, E. (1996). Program design and planning strategies in the delivery of culturally competent health and mental health prevention and treatment services to Latino communities. In Y. Asamoah (Ed.), Innovations in delivering culturally sensitive social work services. Challenges for practice and education (pp. 85-96). NY: Haworth Press.

Corbin, J. & Strauss, A. (1990). Grounded theory research: Procedures, canons, and evaluative criteria. Qualitative Sociology, 13, 3-21.

Council on Social Work Education. Using Title IV-E training funds in social work education: Report from a survey [On-line]. Available: www.CSWE.org/projects/4eSurvey.htm. Retrieved on: March 17, 2004.

Cravens, R. B. & Bornemann, T. H. (1992). Refugee camps in countries of first asylum and the North American resettlement process. In W. H. Holtzman & T. H. Bornemann (Eds.), Mental health of immigrants and refugees (pp. 38-50). Austin: Hogg Foundation for Mental Health.

Creswell, J. W. (1998). Qualitative inquiry and research design. Choosing among five traditions. Thousand Oaks: Sage.

Cross, T. L., Brazon, B. J., Dennis, K. W., & Isaacs, M. R. (1989). Towards a culturally competent system of care. Washington, D.C.: Georgetown University Child Development Center.

Cultural Orientation Project. (2004a). Refugee Statistics [On-line]. Available: www.culturalorientation.net/rese_who.html.

Cultural Orientation Project. (2004b). Who is a refugee? [On-line]. Available: www.culturalorientation.net/rese_who.html.

Curtis, K. A. (1989). Help from within: participatory research in a low-income neighborhood. Urban Anthropology, 18, 203-217.

de la Garza, R. O., Polinard, J. L., Wrinkle, R. D., & Longoria, T. (1991). Understanding intra-ethnic attitude variations: Mexican origin population views of immigration. Social Science Quarterly, 72, 379-387.

Denzin, N. K. (1970). The research act. Chicago: Aldine.

DePoy, E., Hartman, A. & Haslett, D. (1999). Critical action research: A model of social work knowing. Social Work, 44, 560-570.

Derman-Sparks, L. & Brunson Phillips, C. (1997). Teaching/learning anti-racism. NY: Teachers College Press.

De Vita, C. J. (1996). Immigrants' impact on U.S. society. Migration World Magazine, 24(3), 28-30.

DeVoe, D. M. (1981). Framing refugees as clients. International Migration Review, 15, 88-94.

Dhooper, S. S. & Moore, S. E. (2001). Social work practice with culturally diverse people. Thousand Oaks: Sage.

Diller, J. V. (2004). Cultural diversity. A primer for the human services (2nd ed). Belmont, CA: Brooks/Cole-Thomson Learning.

Drachman, D. (1995). Immigration statuses and their influence on service provision, access, and use. Social Work, 40, 188-197.

Drachman, D. & Ryan, A. S. (2001). Immigrants and Refugees. In A. Gitterman (Ed.), Handbook of social work practice with vulnerable and resilient populations (2nd ed., pp. 651-681). NY: Columbia University Press.

Dubrow, N. & Nader, K. (1999). Consultations amidst trauma and loss: Recognizing and honoring differences among cultures. In K. Nader, N. Dubrow, & B. Hudnall Stamm (Eds.), Honoring differences: Cultural issues in the treatment of trauma and loss (pp. 1-19). Philadelphia: Brunner/Mazel.

Duck, S. (Ed.). (1997). Handbook of personal relationships: Theory, research and intervention (2nd ed.). NY: John Wiley.

Dumpson, J. R. (2001). Some thoughts on diversity [On-line]. Available: www.naswnyc.org/d20.html.

Edleson, J. L. & Roskin, M. (1985). Prevention groups: A model for improving immigrant adjustment. Journal for Specialists in Group Work, 10, 217-224.

Ellis, C. & Bochner, A. P. (2000). Autoethnography, personal narrative, reflexivity: Researcher as subject. In N. K. Denzin & Y. S. Lincoln (Eds.), Handbook of qualitative research (2nd ed., pp. 733-768). Thousand Oaks: Sage.

Ellison, C. G. & Powers, D. A. (1994). The contact hypothesis and racial attitudes among black Americans. Social Science Quarterly, 75, 385-400.

Emerson, R. M., Fretz, R. I., & Shaw, L. L. (1995). Writing ethnographic fieldnotes. Chicago: The University of Chicago Press.

Epstein, M. & Mohn, S. L. (1992). Planning for pluralism. A report on a Chicago agency's efforts on behalf of immigrants and refugees. In A. S. Ryan (Ed.), Social work with immigrants and refugees (pp. 119-123). NY: Haworth.

Espenshade, T. J. & Calhoun, C. A. (1993). An analysis of public opinion toward undocumented immigration. Population research and Policy Review, 13, 189-224.

Fine, M. (1998). Working the hyphens. Reinventing self and other in qualitative research. In N. K. Denzin, and Y. S. Lincoln (Eds.), The landscape of qualitative research. Theories and issues (pp. 130-155). Thousand Oaks: Sage.

Fine, M., Weis, L., Weseen, S. & Wong, L. (2000). For whom? Qualitative research, representations, and social responsibilities. In N. K. Denzin & Y.S. Lincoln (Eds.), Handbook of qualitative research (2nd ed., pp. 107-131). Thousand Oaks: Sage.

Fix, M. & Laglagaron, L. (2002). Social rights and citizenship: An international comparison. Washington, D. C.: The Urban Institute.

Fix, M. & Passel, J. S. (2002). Assessing welfare reform's immigrant provisions. In A. Weil & K. Finegold (Eds.), Welfare reform. The next act (pp. 179-202). Washington, D. C.: The Urban Institute Press.

Fix, M., Passel, J. S. & Sucher, K. (2003). Immigrant families and workers. Facts and perspectives. Trends in naturalization. Occasional Paper. Brief No. 3. Washington, D.C.: The Urban Institute.

Fix, M., Zimmerman, W., & Passel, J. S. (2001). The integration of immigrant families in the United States. Washington, D. C. The Urban Institute.

Fong, R. (2004a). Context and environments for culturally competent practice. In R. Fong (Ed.), Culturally competent practice with immigrant and refugee children and families (pp. 39-59). NY: Guilford Press.

Fong, R. (Ed.). (2004b). Culturally competent practice with immigrant and refugee children and families. NY: Guilford Press.

Freire, P. (1970). Pedagogy of the oppressed. NY: Seabury Press.

Furnham, A. & Bochner, S. (1986). Culture shock. Psychological reactions to unfamiliar environments. London: Methuen.

Glaser, B. G. & Strauss, A. L. (1967). The discovery of grounded theory. Strategies for qualitative research. Chicago: Aldine.

Gonsalves, C. J. (1992) Psychological stages of the refugee process: A model for therapeutic interventions. Professional Psychology: Research and Practice, 23, 382-389.

Green, J. W. (1982). Cultural awareness in the human services. Englewood Cliffs, NJ: Prentice Hall.

Green, J. W. (1995). Cultural awareness in the human services: a multi-ethnic approach. Boston: Allyn & Bacon.

Guarnizo, L. E. (1992). One country in two: Dominican-owned firms in New York and the Dominican Republic." Unpublished doctoral dissertation. Department of Sociology. Johns Hopkins University.

Guba, E. G. & Lincoln, Y. S. (1981). Effective evaluation. Improving the usefulness of evaluation results through responsive and naturalistic approaches. San Francisco: Jossey-Bass.

Gudykunst, W. B. & Kim, Y. Yun. (1992). Communicating with strangers. An approach to intercultural communication (2nd ed.). NY: McGraw-Hill.

Haines, D. W. (1988). The pursuit of English and self-sufficiency: Dilemmas in assessing refugee programme effects. Journal of Refugee Studies, 1, 195-213.

Handelman, M. (1983). The new arrivals. Practice Digest, 5, 3-22.

Hardiman, R. & Jackson, B. W. (1992). Racial identity development: understanding racial dynamics in college classrooms and on campus. In New directions for teaching and learning, No. 52. Jossey-Bass.

Healy, K. (2001). Participatory action research and social work: A critical appraisal. International Social Work, 44, 93-105.

Helms, J. E. (1992). A race is a nice thing to have. A guide to being a white person or understanding the white persons in your life. Topeka: Content Communications.

Heron, J. & Reason, P. (2001). The practice of co-operative inquiry: Research 'with' rather than 'on' people. In P. Reason & H. Bradbury (Eds.), Handbook of action research. Participative inquiry and practice, (pp.179-188).

Hing, B. O. (1998). Don't give me your tired, your poor: Conflicted immigrant stories and welfare reform. Harvard Civil Rights-Civil Liberties Law Review, 33, 159-182.

Hispanics now rival blacks as nation's top minority group. (2001, April 8). The Fargo Forum, p. A4.

Hood, M. V. III, & Morris, I. L. (1998). Give us your tired, your poor,...but make sure they have a green card. The effects of documented and undocumented migrant context on Anglo opinion toward immigration. Political Behavior, 20, 1-15.

Horowitz, C. R. (1998). The role of the family and the community in the clinical setting. In S. Loue (Ed.), Handbook of immigrant health (pp. 163-182). NY: Plenum Press.

Horton, M. & Freire, P. (1990). We make the road by walking: Conversations on education and social change. Philadelphia: Temple University Press.

Hoskin, M. & Mishler, W. (1984). Public opinion toward new migrants: A comparative. International Migration, 21, 440-462.

Hulewat, P. (1996). Resettlement: A cultural and psychological crisis. Social Work, 41, 129-135.

Hyde, C. (2004). Multicultural development in human service agencies: Challenges and solutions. Social Work, 49, 7-16.

Iglehart, A. (2000). Managing for diversity and empowerment in social services. In R. Patti (Ed.), The handbook of social welfare management (pp. 425-444). Thousand Oaks, CA: Sage Publications.

Iglehart, A., & Becerra, R. M. (1995). Social service and the ethnic community. Boston: Allyn & Bacon.

Ivry, J. (1992). Paraprofessionals in refugee resettlement. In A. S. Ryan (Ed.), Social work with immigrants and refugees (pp. 99-117). NY: Haworth.

Jandt, F. E. (2004). An introduction to intercultural communication. Identities in a global community (4th ed.). Thousand Oaks: Sage.

Janesick, V. J. (2000). The choreography of qualitative research design: Minuets, improvisations, and crystallization. In N. K. Denzin & Y. S. Lincoln (Eds.), Handbook of qualitative research (2nd ed., pp. 379-400). Thousand Oaks: Sage.

Kahn, A. J. (1979). Social policy and social services (2nd ed.). NY: Random House.

Keller, S. L. (1975). Uprooting and social change: The role of refugees in development. Delhi: Manohar Book Service.

Kelley, P. (1994). Integrating systemic and postsystemic approaches to social work practice with refugee families. Families in Society: The Journal of Contemporary Human Services, 75, 541-549.

Kemmis, S. & McTaggart, R. (2000). Participatory action research. In N. K. Denzin & Y. S. Lincoln (Eds.), Handbook of qualitative research (2nd ed., pp. 567-606). Thousand Oaks: Sage.

Kincheloe, J. L. & McLaren, P. L. (1998). Rethinking critical theory and qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), The landscape of qualitative research. Theories and issues (pp. 260-299). Thousand Oaks: Sage.

Kuo, W. H. & Tsai, Y-M. (1986). Social networking, hardiness and immigrant's mental health. Journal of Health and Social Behavior, 27, 133-149.

Kuzel, A. J. (1992). Sampling in qualitative inquiry. In B. F. Crabtree & W. L. Miller (Eds.), Doing qualitative research (pp. 31-44).

Lecca, P. J., Quervalú, I., Nunes, J. V., & Gonzales, H. F. (1998). Cultural competency in health, social, and human services. Directions for the twenty-first century. NY: Garland Publishing.

Le-Doux, C. & Stephens, K. S. (1992). Refugee and immigrant social service delivery: Critical management issues. In A. S. Ryan (Ed.), Social work with immigrants and refugees (pp. 31-45). NY: Haworth.

Lennon, E. (2000). Strengthening lives, rebuilding communities. Somalis recover from war. Minneapolis: The Center for Victims of Torture.

Lerum, K. (2001). Subjects of desire: Academic armor, intimate ethnography, and the production of critical knowledge. Qualitative Inquiry, 7, 466-483.

Lewin, K. (1946). Action research and minority problems. Journal of Social Issues, 46, 34-46.

Lieberman, A. A., Hornsby, H., & Russell, M. (1988). Analyzing the educational backgrounds and work experiences of child welfare personnel: A national study. Social Work, 33, 485-489.

Light, I. (1984). Immigrant and ethnic enterprise in North America. Ethnic and Racial Studies, 7, 714-735.

Lin, K-M. (1986). Psychopathology and social disruption in refugees. In C. L. Williams & J. Westermeyer (Eds.), Refugee mental health in resettlement countries (pp. 61-73). NY: Hemisphere Publishing.

Lincoln, Y. S. & Guba, E. G. (1985). Naturalistic inquiry. Beverly Hills: Sage.

Lincoln, Y. S. & Guba, E. G. (2000). Paradigmatic controversies, contradictions, and emerging confluences. In N. K. Denzin & Y. S. Lincoln (Eds.), Handbook of qualitative research (2nd ed., pp. 163-188). Thousand Oaks: Sage.

Lindy, J. D. (1996). Psychoanalytic psychotherapy of posttraumatic stress disorder. The nature of the therapeutic relationship. In B. A. van der Kolk, A. C. McFarlane, & L. Weisaeth (Eds.) Traumatic stress. The effects of overwhelming experience on mind, body, and society (pp. 525-536). NY: The Guilford Press.

Loue, S. (1998). Handbook of immigrant health. NY: Plenum Press.

Lum, D. (1999). Culturally competent practice. A framework for growth and action. Pacific Grove: Brooks/Cole.

Lum, D. (2000). Social work practice and people of color. A process-stage approach (4th ed.). Belmont, CA: Wadsworth.

Lustig, M. W. & Koester, J. (2003). Intercultural competence. Interpersonal communication across cultures (4th ed.). Boston: Allyn and Bacon.

Lynch, E. W. & Hanson, M. J. (1998). Developing cross-cultural competence. A guide for working with children and their families (2nd ed.). Baltimore: Brookes.

Maio, G. R., Esses, V. M. & Bell, D. W. (1994). The formation of attitudes toward new immigrant groups. Journal of Applied Social Psychology, 24, 1762-1776.

Marshall, C. & Rossman, G. B. (1989). Designing qualitative research (3rd ed.). Thousand Oaks: Sage.

Marshall, P. A., Koenig, B. A., Grifhorst, P. & Van Ewijk, M. (1998). Ethical issues in immigrant health care and clinical research. In S. Loue (Ed.), Handbook of immigrant health (pp. 203-226). NY: Plenum Press.

- Maxwell, J. A. (1996). Qualitative research design. An interactive approach. Thousand Oaks: Sage.
- Mayadas, N. S. & Elliott, D. (1992). Integration and xenophobia: An inherent conflict in international migration. In A. S. Ryan (Ed.), Social work with immigrants and refugees (pp. 47-62). NY: Haworth Press.
- Maykut, P. & Morehouse, R. (1994). Beginning qualitative research. A Philosophic and practical guide. London: Falmer Press.
- McCubbin, H. I., Thompson, E. A., Thompson, A. I., & Fromer, J. E. (1998). Resiliency in Native American and immigrant families. Thousand Oaks: Sage.
- McPhatter, A R. (1997). Cultural competence in child welfare: What is it? How do we achieve it? What happens without it? Child Welfare, 76. As reprinted in Colorado Department of Human Services, (2001), Colorado Child Welfare Practice Handbook, Appendix G [On-line]. Available at:
www.cdhs.state.co.us/cyf/cwelfare/Handbook%20Index.htm.
- Meloy, J. M. (2002). Writing the qualitative dissertation. Understanding by doing (2nd ed.). Mahway, NJ: Lawrence Erlbaum Associates.
- Mertus, J., Tesanovic, J., Metikos, H., & Boric, R. (Eds.). (1997). Suitcase. Refugee voices from Bosnia and Croatia. Berkeley: University of California Press.
- Midelfort, C. F. & Midelfort, H. C. (1982). Norwegian families. In M. McGoldrick, J. K. Pearce, & J. Giordano (Eds.), Ethnicity and family therapy (pp. 438-456). NY: The Guildford Press.
- Mikatavage, R. (1998). Immigrants and refugees. Create your new life in America. Hampstead, MD: Melodija Books.

Miles, M. B. & Huberman, A. M. (1994). Qualitative data analysis: An expanded sourcebook (2nd ed.). Thousand Oaks: Sage.

Minnesota Mainstream Social Work Training Team. (n.d.). Global war and violence: Implications for U. S. social workers. Minneapolis: The Center for Victims of Torture.

Montalvo, E. (1994). Against all odds: The challenges faced by Latino families and children in the United States. The Roundtable, 8.

Montero, D. & Dieppa, I. (1982). Resettling Vietnamese refugees: The service agency's role. Social Work, January, 74-81.

Moore, S. (1986). Social scientists' views on immigrants and U.S. immigration policy: A postscript. In R. J. Simon (Ed.), The annals of the American academy of political and social science, 487. Beverly Hills: Sage.

Mooren, R. J. & Kleber, R. J. (1999). War, trauma, and society: Consequences of the disintegration of former Yugoslavia. In K. Nader, N. Dubrow, & B. Hudnall Stamm (Eds.), Honoring differences: Cultural issues in the treatment of trauma and loss (pp. 178-207). Philadelphia: Brunner/Mazel.

Morrison, S. D. (1973). Intermediate variables in the association between migration and mental illness. International Journal of Social Psychiatry, 19, 60-65.

Morton, T. (1999). The increasing colorization of America's child welfare system: The overrepresentation of African-American children. Policy and Practice, December, 23-30.

Mullins, S. C. (1990). Social services for refugees and immigrants: Issues and problems. In W. H. Holtzman & T. H. Bornemann (Eds.), Mental health of immigrants and refugees (pp. 167-171). Austin: Hogg Foundation for Mental Health.

Nader, K., Dubrow, N. & Hudnall Stamm, B. (1999). Honoring differences. Cultural issues in the treatment of trauma and loss. Philadelphia: Brunner/Mazel.

Nah, Kyung-Hee. (1993). Perceived problems and service delivery for Korean immigrants. Social Work, 38, 289-295.

Nash, K. A. (1999). Cultural competence. A guide for human service agencies. Washington, D.C.: CWLA.

NASW. Standards for cultural competence in social work practice [On-line]. Available: www.socialworkers.org/sections/credentials/cultural_comp.asp. Retrieved on: March 15, 2004.

North Dakota Department of Human Services. (October, 2001). Manual. Economic Assistance Basic Care Assistance Program (BCAP), Manual Letter # 2738, p. 5.

Nybell, L. M. & Gray, S. Sims (2004). Race, place space: Meanings of cultural competence in three child welfare agencies. Social Work, 49, 17-26.

Oakes, M. G. (2002). Loss and recovery in war refugees: A qualitative study of Bosnian refugees in Las Vegas, Nevada. Journal of Immigrant and Refugee Studies, 1, 59-75.

Okely, J. & H. Callaway. (1992). Anthropology and autobiography. London: Routledge.

Okta, J. S. (2004). Grounded theory. In D. K. Padgett (Ed.), The qualitative research experience (pp. 23-47). Belmont, CA: Wadsworth/Thomson.

Olness, K. N. (1998). Refugee health. In S. Loue (Ed.), Handbook of immigrant health (pp. 227-241). NY: Plenum Press.

Ong, A. (1996). Cultural citizenship as subject-making: Immigrants negotiate racial and cultural boundaries in the United States. Current Anthropology, 37, 737-762.

Padgett, D. K. (1998). Qualitative methods in social work research. Challenges and rewards. Thousand Oaks: Sage.

Padgett, D. K., Mathew, R., & Conte, S. (2004). Peer debriefing and support groups. In D. K. Padgett (Ed.), The qualitative research experience (pp. 225-235). Belmont, CA: Wadsworth/Thomson.

Padilla, Y. C. (1997). Immigrant policy: Issues for social work practice. Social Work, 42, 595-606.

Patrick, E. (2002). The US Refugee Resettlement Program. Migration Information Source [On-line]. Available: www.migrationinformation.org.

Patton, M. Q. (1990). Qualitative evaluation and research methods (2nd ed.). Beverly Hills: Sage.

Pipher, M. (2002). The middle of everywhere. The world's refugees come to our town. NY: Harcourt.

Portes, A. & MacLeod, D. (1996). Educational progress of children of immigrants: The roles of class, ethnicity, and school context. Sociology of Education, 69, 255-275.

Potocky, M. (1996a). Refugee resettlement in the United States: Implications for international social welfare. Journal of Sociology and Social Welfare, 23, 163-174.

Potocky, M. (1996b). Toward a new definition of refugee economic integration. International Social Work, 39, 245-256.

Powers, D. A. & Ellison, C. G. (1995). Interracial contact and black racial attitudes: The contact hypothesis and selectivity bias. Social Forces, 74, 205-226.

Proctor, E. K. & Davis, L. E. (1994). The challenge of racial difference: Skills for clinical practice. Social Work, 39, 314-323.

Punamaki, R-L. (2000). Measuring suffering. Conflicts and solutions in refugee studies. In F. L. Ahearn, Jr. (Ed.), Psychosocial wellness of refugees. Issues in qualitative and quantitative research (pp. 105-130). NY: Berghahn Books.

Punch, M. (1998). Politics and ethics in qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), The landscape of qualitative research. Theories and issues (pp. 156-184.). Thousand Oaks: Sage.

Queiro-Tajalli, I. & Smith, L. (1998). Provision of services to older adults within an ecological perspective. In R. R. Greene & M. Watkins (Eds.), Serving diverse constituencies. Applying the ecological perspective (pp. 199-220). NY: Aldine de Gruyter.

Ramakrishnan, K. R. & Balgopal, P. R. (1995). Role of social institutions in a multicultural society. Journal of Sociology and Social Welfare, 22, 11-28.

Reason, P. & Bradbury, H. (2001). Handbook of action research. Participative inquiry and practice. London: Sage.

Reese, D. J., Ahern, R. E., Nair, S., O'Faire, J. D., & Warren, C. (1999). Hospice access and use by African Americans: Addressing cultural and institutional barriers through participatory action research. Social Work, 44, 549-559.

Reisch, M. (2002). Race, welfare reform, and nonprofit organizations. Journal of Sociology and Social Welfare, March [On-line]. Available: http://articles.findarticles.com/p/articles/mi_mOCYZ/is_1_29/ai_837904201print.

Richardson, A. (1968). A theory and a method for the psychological study of assimilation. International Migration Review, 2, 3-29.

Rogg, E. M. (1974). The assimilation of Cuban exiles: The role of community and class. NY: Aberdeen.

Rubin, H. J. & Rubin, I. S. (1995). Qualitative interviewing. The art of hearing data. Thousand Oaks: Sage.

Rumbaut, R. G. (1992). The Americans: Latin American and Caribbean peoples in the United States. In A. Stepan (Ed.), Americas. New interpretative essays (pp. 275-307). NY: Oxford University Press.

Russell, M. N. & White, B. (2001). Practice with immigrants and refugees: Social worker and client perspectives. Journal of Ethnic and Cultural Diversity in Social Work, 9, 73-92.

Ryan, A. S., (Ed.). (1992). Social work with immigrants and refugees. NY: Haworth.

Samantrai, K. (2004). Culturally competent public child welfare practice. Pacific Grove, CA: Brooks/Cole-Thomson Learning.

Scheinfeld, D., Wallach, L. B., & Langendorf, T. (1997). Strengthening refugee families. Designing programs for refugee and other families in need. Chicago: Lyceum Books.

Schmid, C. L. (2001). Educational achievement, language-minority students, and the new second generation. Sociology of Education, 74, Extra Issue, 71-87.

Seidman, I. (1998). Interviewing as qualitative research. A guide for researchers in education and social sciences (2nd ed). NY: Teachers College.

Siegel, L. (1994). Cultural differences and their impact on practice in child welfare. Journal of Multicultural Social Work, 3, 87-96.

Silove, D. & Franzc, P. (1999). The psychological effects of torture, mass human rights violations, and refugee trauma. Journal of Nervous and Mental Disease, 187, 200-207.

Singh, J. & Gopal, K. (2002). Americanization of new immigrants. People who come to America and what they need to know. Lanham: University Press of America.

Smith, E. (1991). Ethnic identity development: Toward the development of theory within the context of majority/minority status. Journal of Counseling and Development, 70, 181-187.

Smith, J. A. (1996). Semi-structured interviewing and qualitative analysis. In J. A. Smith, R. Harre, & L. Van Langenhove (Eds.), Rethinking methods in psychology (pp. 9-26). London: Sage Publications.

Starr, P. D. & Roberts, A. E. (1982). Attitudes toward new Americans: Perceptions of Indo-Chinese in nine cities. Research in Race and Ethnic Relations, 3, 165-186.

Stein, B. N. (1986). The experience of being a refugee: Insights from the research literature. In C. L. Williams & J. Westermeyer (Eds.), Refugee mental health in resettlement countries (pp. 5-23). NY: Hemisphere Publishing.

Strauss, A. (1987). Qualitative analysis for social scientists. Cambridge: Cambridge University Press.

Strauss, A. & Corbin, J. (1998). Basics of qualitative research. Techniques and procedures for developing grounded theory (2nd ed.). Thousand Oaks: Sage.

Stringer, E. T. (1996). Action research. A handbook for practitioners. Thousand Oaks: Sage.

Stutz, R. P. (1984). Resettling Soviet émigrés: How caseworkers coped. Social Work, 9, 187-188.

Sughandadhirom, B. (1986). Experiences in a first asylum country: Thailand. In C. L. Williams & J. Westermeyer (Eds.), Refugee mental health in resettlement countries (pp. 81-96). NY: Hemisphere Publishing.

Tatum, B. D. (1997). Why are all the Black kids sitting together in the cafeteria? And other conversations about race. NY: Basic Books.

Taylor, R. & Nathan, D. (1980). "Resettlement casework: The role of the professional." Paper presented at the Annual Meeting of the Conference of Jewish Communal Service, Denver.

Taylor, S. J. & Bogdan, R. (1984). Introduction to qualitative research methods. The search for meanings (2nd ed.). NY: John Wiley & Sons.

- Thurlow, C. Transcultural communication: A treatise on *trans* [On-line].
Available:
<http://faculty.washington.edu/thurlow/research/transculturalcommunication.html>.
Retrieved on: March 15, 2004.
- Timberlake, E. M. & Cook, K. O. (1984). Social work and the Vietnamese refugee. Social Work, March-April, 108-113.
- Ting-Toomey, S. (1999). Communicating across cultures. NY: The Guilford Press.
- Tumlin, K. C. & Zimmermann, W. (2003). Immigrants and TANF. A look at welfare recipients in three cities. Occasional Paper Number 69. Washington, D. C.: The Urban Institute.
- U. S. Census Bureau. (2000). Overview of Race and Hispanic Origin. Census 2000 Brief. Issued March, 2001. www.census.gov/prod/2001pubs/c2kbr01-1.pdf.
- U. S. Committee for Refugees. (2000). Refugees admitted to the United States, by nationality, FY 1987-2000. Refugee Reports, 21, 10-11.
- U. S. Department of Health and Human Services (2000). Characteristics and financial circumstances of TANF recipients: Fiscal year 1999. Washington D.C.: Administration of Children and Families.
- Useem, J. & Useem, R. (1967). The interfaces of a binational third culture: A study of the American community in India. Journal of Social Issues, 23, 130-143.
- van der Veer, G. (1998). Counselling and therapy with refugees and victims of trauma. Psychological problems of victims of war, torture and repression (2nd ed.). Chichester, England: Wiley.

Vu, T. Q. (1990). Refugee welfare dependency: The trauma of resettlement. In W. H. Holtzman & T. H. Bornemann (Eds.), Mental health of immigrants and refugees (pp. 234-244). Austin: Hogg Foundation for Mental Health.

Waddington, D. (1994). Participant observation. In C. Cassell & G. Symon (Eds.), Qualitative methods in organizational research. A practical guide (pp. 107-122). London: Sage.

Weaver, H. N. (2005). Explorations in cultural competence. Journeys to the four directions. Belmont, CA: Thomson/Brooks-Cole.

West, C. (1993). Race matters. NY: Beacon Press.

Whyte, W. F. (1943). Street corner society. Chicago: University of Chicago Press.

Williams, C. L. & Berry, J. W. (1991). Primary prevention of acculturative stress among refugees. Application of psychological theory and practice. American Psychologist, 46, 632-641.

Williams, C. L. & Westermeyer, J. (Eds.). (1986). Refugee mental health in resettlement countries. NY: Hemisphere Publishing.

Winawer-Steiner, H. & Wetzell, N. A. (1982). German families. In M. McGoldrick, J. K. Pearce, & J. Giordano (Eds.), Ethnicity and family therapy (pp. 247-268). NY: The Guildford Press.

Wiseman, R. L. & Koester, J. (Eds.). (1993). Intercultural communication competence. Newbury Park: Sage.

Wolcott, H. F. (1990). Writing up qualitative research. Newbury Park: Sage.

Wolcott, H. F. (1995). The art of fieldwork. Walnut Creek: Altamira Press.

Wulf, D. (1994). Refugee women and reproductive health care: Reassessing priorities. NY: Women's Commission for Refugee Women and Children.

Yu, M. M. & Gusukuma, I. (2001). Working with Asian immigrants and refugees: A social work curriculum and practice model. New global development, 17, 113-117.

Zhou, M. (1992). New York's Chinatown: The socioeconomic potential of an urban enclave. Philadelphia: Temple University Press.

Zlotnick, J. L. (1998). The Adoption and Safe Families Act of 1997: Implications for social work education. The Prevention Report, 1998(2), 17-18.