

Charting a Course to Rebuild and Strengthen the US Refugee Admissions Program

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Acknowledgments

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Refugee Council USA (RCUSA) is a diverse coalition advocating for just and humane laws and policies, and the promotion of dialogue and communication among government, civil society, and those who need protection and welcome. Individual RCUSA members do not all address all refugee-related issues, nor do all individual members approach common refugee-related issues identically.

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Charting a Course to Rebuild and Strengthen the US Refugee Admissions Program (USRAP): Findings and Recommendations from Center for Migration Studies Refugee Resettlement Survey 2020

Executive Summary

This report analyzes the US Refugee Admissions Program (USRAP), leveraging data from a national survey of resettlement stakeholders conducted in 2020.¹ The survey examined USRAP from the time that refugees arrive in the United States. The survey's design and questionnaire were informed by three community gatherings organized by Refugee Council USA in the fall and winter of 2019, extensive input from an expert advisory group, and a literature review.

This report finds that USRAP serves important purposes, enjoys extensive community support, and offers a variety of effective services. Overall, the survey finds a high degree of consensus on the US resettlement program's strengths and objectives, and close alignment between its services and the needs of refugees at different stages of their settlement and integration. Because USRAP's infrastructure and community-based resettlement networks have been decimated in recent years, the Biden administration's main challenges will be to rebuild and revitalize the program, educate the public on it, and try to regain broad, bi-partisan support for it. The report also points to specific ways in which USRAP's programs and services should be strengthened. Among the study's findings:²

- Most refugee respondents identified USRAP's main purpose(s) as giving refugees new opportunities, helping them to integrate, offering hope to refugees living in difficult circumstances abroad, and saving lives.
- High percentages of refugees reported that the program allowed them to support themselves soon after arrival (92 percent), helped them to integrate (77 percent), and it has a positive economic impact on local communities (71 percent).

"The US refugee resettlement program serves important purposes, enjoys extensive community support, and offers a variety of effective services. Its services and objectives align closely with the needs of refugees."

¹ Of the 559 survey respondents, 118 identified as refugees or former refugees and 49 identified as members of groups also served by the US resettlement program. Seventy of these "refugee" respondents (defined to include all three groups) worked for non-profits, 30 for government offices, and 24 for state coordinators. Some 354 respondents worked for non-profits and resettlement agencies. A plurality of non-profit respondents (214), represented local, state, or regional offices of resettlement agencies. Forty-six worked for state refugee coordinators and 22 for state refugee health coordinators. Ninety-one respondents worked for government agencies and public schools.

² In using the term "respondents," the survey refers to all the respondents to a particular question. As discussed below, "refugee respondents" include refugees and other populations eligible for USRAP services, and "non-refugee respondents" refer to non-refugee stakeholders in the resettlement process and former refugees that work or volunteer for entities that provide resettlement services.

- Refugee respondents also reported that the program encourages them to work in jobs that do not match their skills and credentials (56 percent), does not provide enough integration support after three months (54 percent), does not offer sufficient financial help during their first three months (49 percent), and reunites families too slowly (47 percent).
- Respondents identified as the main false ideas about the program that: refugees pose a security risk (84 percent), use too many benefits and drain public finances (83 percent), and take the jobs of the native-born (74 percent).
- Refugee respondents reported using public benefits to meet basic needs, such as medical care, food, and housing.
- Non-refugee survey respondents believed at high rates that former refugees (69 percent) and refugee community advocate groups (64 percent) should be afforded a voice in the resettlement process.
- Non-refugee respondents indicated at high rates that the program's employment requirements limit the time needed for refugees to learn English (65 percent) and limit their ability to pursue higher education (59 percent).
- Eighty-six percent of non-refugee respondents indicated that the Reception and Placement program is much too short (56 percent) or a little too short (30 percent).
- Respondents identified a wide range of persons and institutions as being very helpful to refugees in settling into their new communities: these included resettlement staff, friends and acquaintances from refugees' country of origin, members of places of worship, community organizations led by refugees or former refugees, and family members.
- Refugee respondents identified finding medical care (61 percent), housing (52 percent), and a job (49 percent), as the most helpful services in their first three months in the country.
- Refugees reported that the biggest challenge in their first year was to find employment that matched their educational or skill levels or backgrounds.
- The needs of refugees and the main obstacles to their successful integration differ by gender, reflecting at least in part the greater childcare responsibilities borne by refugee women.
- Refugee men reported needing assistance during their first three months in finding employment (68 percent), English Language Learning (ELL) courses (59 percent), and orientation services (56 percent), while refugee women reported needing assistance in securing childcare (64 percent), finding ELL courses (53 percent), and enrolling children in school (49 percent).
- To open-response questions, non-refugee respondents identified as obstacles to the integration of men: digital literacy, (lack of) anti-domestic violence training, the need for more training to improve their jobs, the new public benefit rule, transportation to work, low wages, the need for more mental health services, cultural role adjustment, and lack of motivation.

- Non-refugee respondents identified as obstacles to the integration of women: lack of childcare and affordable housing, the different cultural roles of women in the United States, lack of affordable driver's education classes, a shortage of ELL classes for those with low literacy or the illiterate, digital literacy challenges, difficulty navigating their children's education and school systems, transportation problems, poorly paying jobs, and lack of friendships with US residents.
- Non-refugee respondents report that refugee children also face unique obstacles to integration, including limited funding or capacity to engage refugee parents in their children's education, difficulties communicating with refugee families, and the unfamiliarity of teachers and school staff with the cultures and backgrounds of refugee children and families.
- LGBTQ refugees have many of the same basic needs as other refugees – education, housing, employment, transportation, psychosocial, and others – but unique challenges in meeting these needs due to possible rejection by refugees and immigrants from their own countries and by other residents of their new communities.
- Since 2017, the number of resettlement agencies has fallen sharply, and large numbers of staff at the remaining agencies have been laid off. As a result, the program has suffered a loss in expertise, institutional knowledge, language diversity, and resettlement capacity.
- Resettlement agencies and community-based organizations (CBOs) reported at high rates that to accommodate pre-2017 numbers of refugees, they would need higher staffing levels in employment services (66 percent), general integration and adjustment services (62 percent), mental health care (44 percent) and medical case management (44 percent).
- Resettlement agencies indicated that they face immense operational and financial challenges, some of them longstanding (like per capita funding and secondary migration), and some related to the Trump administration's hostility to the program.

The report's findings and recommendations chart a course to rebuild and strengthen USRAP based on the collective experience of resettled refugees, federal, state and local officials, state refugee coordinators, state refugee health coordinators, CBOs, and other resettlement stakeholders. The report illustrates the need for the Biden and subsequent administrations to prioritize the revitalization of the refugee program, building on its historic strengths. It recommends that the Biden administration:

- Make it a high priority to work with Congress to rebuild and refund USRAP's infrastructure and its community-based resettlement networks in anticipation of far greater admissions.
- Increase refugee admission ceilings over each of the next four years to levels that resettlement agencies can accommodate, that reflect the size and diversity of the global refugee population, and that honor the nation's historic role as an international leader in resettlement.
- Provide stable, multi-year funding for national and local resettlement agencies so that they can expand their capacity, invest in necessary staffing, and better respond to large-scale secondary migration.

- Rigorously adhere to the legally mandated consultative processes for assessing the global refugee situation, establishing refugee admissions levels and categories, and engaging Congress, states and localities, and other stakeholders in the resettlement process.
- Rescind the Trump administration’s “Executive Order on Enhancing State and Local Involvement in Refugee Resettlement,” which allows states and localities to veto resettlement in their jurisdictions.
- Strengthen quarterly consultations with resettlement stakeholders devoted to information sharing, identifying the needs of refugees, and building accountability for the program’s success.
- Educate the public, Congress, and receiving communities on the contributions and aspirations of refugees, the purpose of USRAP, its strengths, and its need for broad community engagement and support.
- Commit to collecting better data on the integration outcomes of refugees and their children in order to inform and strengthen resettlement services, and establish deeper partnerships with research institutions to advance this goal.
- Support research, informed by refugees, on their lived experiences and on USRAP’s responsiveness to their needs and to the needs of their communities.

“The Biden administration should provide stable, multi-year funding for national and local resettlement agencies so that they can expand their capacity, invest in necessary staffing, and better respond to large-scale secondary migration.”

The report also argues for specific programmatic improvements and greater responsiveness to the individual needs of refugees over time. As the first comprehensive survey of its kind, resettlement stakeholders should closely review and mine its findings for ways to revitalize and strengthen the program. USRAP should:

- Build on the guiding principle of “client-centered” case management (ORR 2020b) to assess the challenges, needs and goals of each refugee and develop tailored plans of services and programs in response.
- Prioritize helping recently arrived refugees to connect with employers, learn English, secure job skill training, access culturally attuned and trauma-informed medical and mental health services, attend appointments, enroll their children in school, apply for benefits, and use public transportation.
- Offer services that respond to the changing needs, challenges, and ambitions of diverse refugees based on their individual needs and, as necessary, for longer than current periods.
- Afford refugees, particularly those with vulnerabilities, a greater say in the content, length and accessibility of programs to promote their settlement and integration.
- Establish an advisory group of refugees to meet regularly with Department of State (DOS)

and Office of Refugee Resettlement (ORR) officials, resettlement agency representatives, state refugee coordinators, and state refugee health coordinators on how to strengthen USRAP and to provide refugees a greater voice in their own resettlement.

- Adopt a more expansive and flexible approach to resettlement that recognizes the importance of work but defines integration more broadly than self-sufficiency through early employment.
- Do not deny refugees basic services for failing to accept early employment in entry-level jobs that may not be compatible with their prior education, professional achievements, and long-term goals.
- Seek alternatives to early employment in low-skilled positions for refugees with pre-existing skills needed in the US economy, including programs that help them gain certification of their credentials, as was a common practice prior to 1980.

“The US Refugee Admissions Program should adopt a more expansive and flexible approach to resettlement that recognizes the importance of work but defines integration more broadly than self-sufficiency through early employment.”

- Afford refugees the time and training to find work that reflects their skills and credentials, and offer services (such as more childcare and mental health services) that allow refugees to study, learn English, and otherwise improve their work prospects.
- Allow refugees to enhance their work-related skills and prospects through financial support, training, and technical assistance in starting businesses.
- Provide extended case management and support services to refugee children and youth that address their unique needs and obstacles to their integration.
- Pilot an on-line integration school for refugee youth that meets their unique educational, social and emotional needs, particularly during the COVID-19 pandemic, and that offers them access to the internet and digital literacy training.
- Provide funding and access to more extensive, culturally attuned and trauma-informed mental health services.
- Provide greater support in navigating the complex US health-care system.
- Devote more specialized programming and individualized attention to finding safe, accessible, welcoming communities and living situations for LGBTQ refugees.
- Offer LGBTQ refugees extended case management services, more programs targeted to their specific and diverse needs, and greater medical and psychosocial services.
- Extend the Section 8 rental assistance program to refugees, given their persistent difficulties in finding safe and affordable housing.
- Prioritize and expedite family reunification.

Successful programs for refugees or immigrants invariably face criticism for excluding native-born persons. Often, these criticisms mask hostility to the presence of refugees and immigrants or reflect a zero-sum mindset regarding resource distribution. However, sometimes they speak to legitimate frustrations and the difficulty of native-born and other US residents in obtaining comparable services and benefits. The resettlement program should be preserved and strengthened. Where possible, USRAP should also work closely with mainstream social service programs to identify needs that are common to refugees and other vulnerable populations and to promote the ability of refugees to access those programs and additional private funding streams. Conversely, greater research and analysis are needed on whether USRAP might serve as a model for promoting the well-being and advancement of other underserved and impoverished US communities, and whether more of its community-based programs for refugees should be extended to other populations.

Section I introduces the report and provides historic context. Section II outlines the US resettlement process and programs. Section III describes the CMS Refugee Resettlement Survey for 2020. Section IV sets forth the study's main findings, with sub-sections covering USRAP's purpose and overall strengths and weaknesses; critiques of the program; the importance of receiving communities to resettlement and integration; the effectiveness of select USRAP programs and services; integration metrics; and obstacles to integration. The report ends with a series of recommendations to rebuild and strengthen this program.

I. Introduction

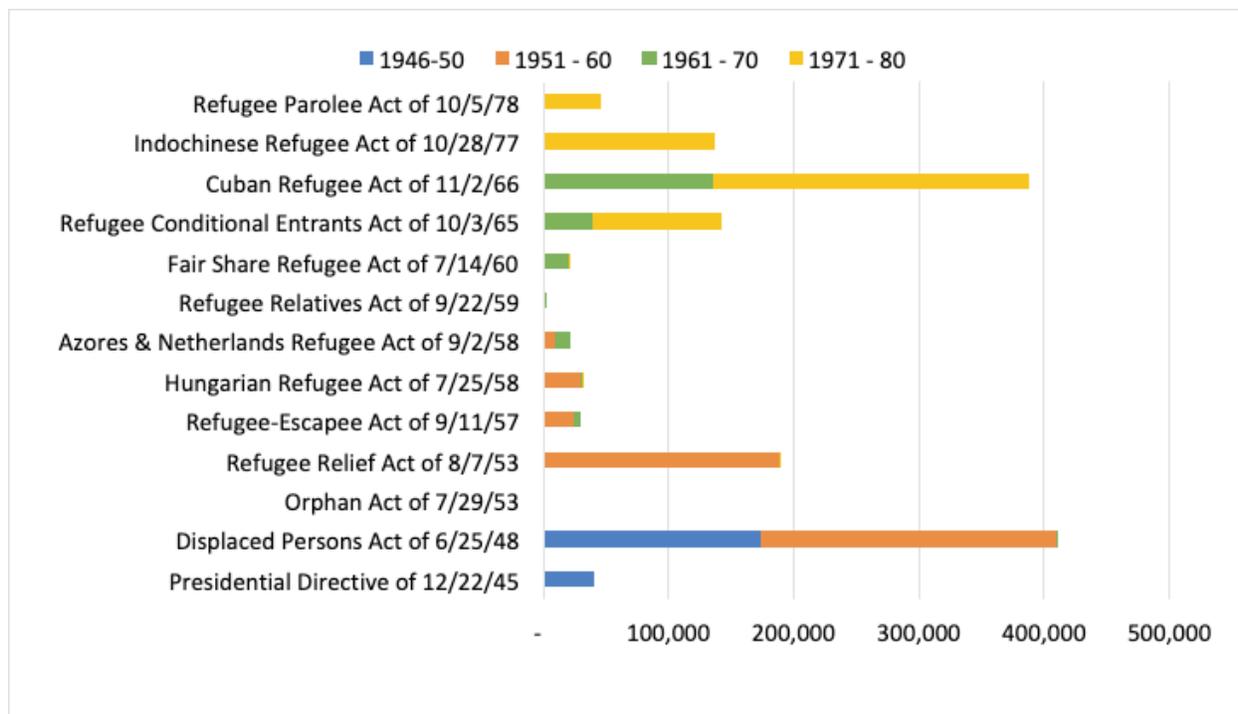
Providing haven to the persecuted has always been central to the nation's identity. In 1620, the Mayflower landed in present-day Plymouth, Massachusetts with Puritans who had been accused of treason and had fled persecution based on their religious beliefs (Martin 2020). In 1783, George Washington wrote that "The bosom of America is open to receive not only the opulent & respectable Stranger, but the oppressed & persecuted of all Nations & Religions; whom we shall wellcome to a participation of all our rights & privileges, if by decency & propriety of conduct they appear to merit the enjoyment."³ In the 19th century, political refugees fled to the United States following failed movements for greater democracy in Europe. In the late 19th and early 20th century, Jews fleeing pogroms in Eastern Europe found refuge in the United States. After World War, the United States used its parole authority expansively to admit displaced persons, and later Indochinese, Hungarian, Cuban and other refugees, to whom it subsequently extended a path to citizenship (Kerwin 2010).

"Since the passage of the Refugee Act of 1980, USRAP has become one of the most successful humanitarian programs in US history. It has saved millions of lives, served as a beacon of hope to desperate persons throughout the world, and advanced the nation's prestige and standing."

³ See letter from George Washington to Joshua Holmes on December 2, 1783, <https://founders.archives.gov/documents/Washington/99-01-02-12127>.

The Refugee Act of 1980⁴ established the nation’s current resettlement program, the US Refugee Admissions Program (USRAP). In the 40 years since the Act’s passage, the United States has resettled more than 3.1 million refugees (WRAPS 2020), far more than any other country.

Refugees and Asylees Admitted to the United States by Statute, 1946 to 1980



Source: Original data from Immigration and Naturalization Service Statistical Yearbook, FY2000, Table 29: Wasem (2020).

Yet over the last four years, the Trump administration has systematically weakened the US refugee resettlement program. It has radically restricted admissions from Muslim-majority and African countries to the point that few refugees from these countries can enter. Each year, the administration has set new record low admissions ceilings, and in FY 2020 it admitted a record low 11,814 refugees. Diminished admissions prevent and delay family reunification, with all the deleterious consequences for the safety, well-being, and integration of members of these families.

The administration has failed to abide by legally mandated processes for ensuring a more broadly supported and informed process. In particular, it has “flouted” the requirements to report to the House and Senate Judiciary Committees on the number of refugees that need resettlement and its projected allocation for the fiscal year, and to facilitate discussion between representatives of the administration and committee members on the global refugee situation (De Peña and La Corte 2019). On September 26, 2019, the President issued an unprecedented Executive Order titled “Enhancing State and Local Involvement in Refugee Resettlement,” which provides that refugees should be resettled “only in those jurisdictions in which both

⁴ Refugee Act of 1980, Pub. L. No. 96-212, 94 Stat. 102 (1980).

the State and local governments have consented” (Trump 2019). The order led to extensive advocacy efforts that resulted in 43 states consenting to host refugees (only Texas declined), as well nearly 100 localities, before a federal court enjoined the order in January 2020. In FY 2020, the Trump administration eliminated regional resettlement caps and significantly diminished refugee admissions from Africa (De Peña and La Corte 2019).

“Diminished admissions prevent and delay family reunification, with all the deleterious consequences for the safety, well-being, and integration of members of these families.”

The Presidential Determination (PD) for FY 2021 set an admissions ceiling of 15,000, including 6,000 “unused places” from FY 2020 that “might have been used if not for the COVID-19 pandemic. It allocated these slots to:

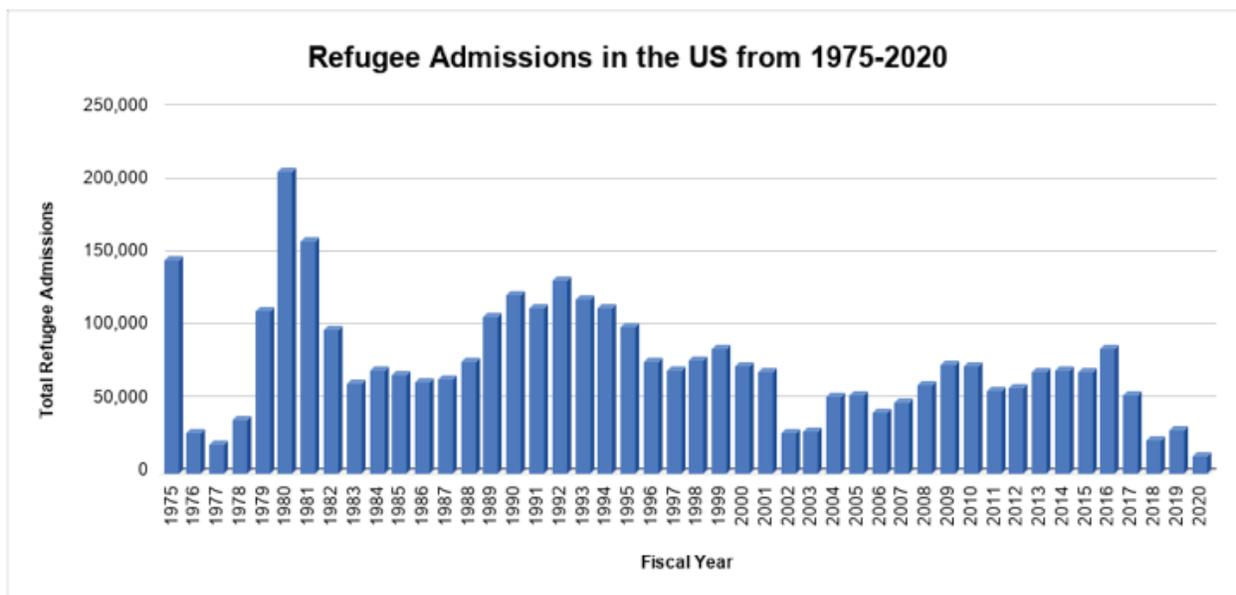
- Persons who have been persecuted or have a well-founded fear of persecution on account of religion, and to members of certain religious minority groups (5,000).
- Iraqis associated with the US government (4,000).
- Refugees from El Salvador, Guatemala or Honduras (1,000).
- “Other” refugees, consisting of persons referred by US embassies, family reunification cases, refugees located in Australia, Nauru or Papua New Guinea (through an agreement with Australia), refugees from Hong Kong, Venezuela, or Cuba, and refugees in the USRAP pipeline in “ready for departure status” as of September 30, 2019 (5,000) (PD 2020).

Resettlement agencies have pointed out that the PD for FY 2021 excludes most of the 36,000 Congolese refugees in the admissions pipeline and “many of the 27,000 refugees from Somalia, Syria and Yemen who continue to face harrowing protection needs abroad.”⁵ These agencies also report on processing delays in Iraqi and Central American cases, family unity concerns in religious persecution cases, and their sense that without proposed changes actual admissions will be in the 7,000 to 8,000 range.⁶ As discussed below, low admissions and changes in the resettlement process have also badly damaged the community-based infrastructures and networks (Darrow and Scholl 2020), established over decades, that have successfully settled and helped integrate more than 3 million refugees, extended services to countless members of host communities, and revitalized many communities (Kerwin 2018, 209; La Corte 2016).

“Since 2017, low admissions and changes in the resettlement process have badly damaged the community-based infrastructures and networks that have successfully settled and helped integrate more than 3 million refugees and revitalized many communities.”

⁵ Letter from Members of Refugee Council USA, to Secretary of State Mike Pompeo and Acting Secretary of Homeland Security Chad Wolf (Nov. 3, 2020). <https://rcusa.org/wp-content/uploads/2020/11/RCUSA-Letter-on-FY21-Report-to-Congress-PD-Others-Category-FINAL.pdf>.

⁶ Id.



Source: Refugee Processing Center data from the State Department Bureau of Population, Refugees, and Migration. Available at <https://www.wrapsnet.org/admissions-and-arrivals/>

The Trump administration’s actions have occurred at a time of record numbers of forcibly displaced persons, including 26 million refugees (UNHCR 2020a), and a growing international consensus on the need to ameliorate refugee-producing conditions, to prioritize refugee protection, and “to operationalize the principles of burden- and responsibility-sharing to better protect and assist refugees and support host countries and communities.” (UN 2018). On December 17, 2018, at the end of an intensive two-year process of engagement and consultation, the UN General Assembly adopted the Global Compact on Refugees (GCR). Affirmed by 152 countries, only the United States and four other countries opposed the GCR. The United States remains the largest donor to UNHCR (UNHCR 2020b). It should also be at the forefront of efforts to expand traditional durable solutions for forcibly displaced persons, including by making legal immigration avenues available to qualified refugees and by piloting private resettlement programs. However, the Trump administration has mostly abandoned the nation’s global leadership and historic commitment to refugee protection.

“The United States remains the largest donor to UNHCR. It should also be at the forefront of efforts to expand traditional durable solutions for forcibly displaced persons.”



II. The Resettlement Process and Programs

The US Refugee Admissions Program depends on multiple institutional actors that perform a range of inter-related services and functions throughout the year. However, the process can be said to begin each year when the President, after consulting with Congress and key executive branch officials, issues a Presidential Determination (PD) that establishes an admissions ceiling, admissions priorities, and numbers by region and unallocated reserve. Since 2011, the nation's overarching priorities for admission have been Priority 1 cases referred by United Nations High Commissioner for Refugees (UNHCR), US embassies, or designated non-governmental organizations (NGOs);⁷ Priority 2 groups of "special humanitarian concern"; and Priority 3 cases consisting of family members of refugees from designated nations.⁸

The US refugee resettlement program relies on international organizations, federal agencies, and overseas contractors to identify, screen, refer, and arrange for the travel of refugees to the United States. UNHCR assesses claims and refers persons for resettlement. The US Department of State (DOS), Bureau for Population, Refugees and Migration (PRM) contracts with non-governmental Refugee Support Centers (RSCs) to screen persons for admission and prepare cases for review. US Citizenship and Immigration Services (USCIS) reviews applications for eligibility and admissibility. The USCIS Refugee Corps interviews applicants. USCIS also coordinates background checks, vetting and screening, a process that typically takes 18-24 months and that involves UNHCR, DOS, the Department of Homeland Security, the Federal Bureau of Investigation, the Central Intelligence Agency, and the National Counterterrorism Center (Pope 2015). PRM administers a loan program to fund refugees' travel to the United States, which the International Organization for Migration (IOM) arranges. This pre-admission process has been documented and critiqued in earlier reports, particularly in an exhaustive study in the aftermath of the 9/11 terrorist attacks by David Martin for the US Department of State (Martin 2004).

PRM allocates refugee cases to specific locations in coordination with national resettlement agencies, which meet regularly to review refugee biographic and other information prepared by RSCs. Placement decisions reflect family ties and reunification imperatives and an assessment of where refugees will be able to gain employment and appropriate community support and resources. The national resettlement agencies, in turn, place refugees through their networks of community-based resettlement programs or agencies. PRM's Reception and Placement (R & P) program helps meet the initial needs of arriving refugees, which include housing, furnishings, utilities, clothing, food, orientation, school enrollment, medical appointments, and social and language services.

⁷ The Trump administration's 2020 Presidential Determination (PD) limited UNHCR referrals to refugees who had been persecuted or had a well-founded fear of persecution, but solely on account of religion. Most referrals to the resettlement program now come from US embassies.

⁸ Historically USRAP has also prioritized the admission of refugees at risk because of their association with the United States (Martin 2020).



Since 2017, the number of local resettlement agencies has fallen from roughly 325 to 200 offices, and funding and staffing in most of these offices has been slashed. With very few exceptions, resettlement agency respondents indicated that since 2017 they had laid off substantial staff and, as a result, had suffered a loss in expertise, institutional knowledge, language diversity and capacity. Moreover, they have lost staff, such as case managers and career counselors, who meet some of the most pressing needs of refugees, as identified in the CMS survey. These cuts have increased the workload of remaining staff who, according to participants in the community gatherings, struggle to provide sufficient services to refugees, particularly to victims of trauma and others with special needs. Not surprisingly, resettlement agencies and community-based organizations (CBOs) indicated at high rates that to accommodate pre-2017 numbers of refugees, they would need higher staffing levels in employment services (66 percent), general integration and adjustment services (62 percent), mental health care (44 percent), and medical case management (44 percent).

“With very few exceptions, resettlement agency respondents indicated that since 2017 they had laid off substantial staff and, as a result, had suffered a loss in expertise, institutional knowledge, language diversity and capacity.”

ORR coordinates the provision of longer-term services and benefits to refugees, relying on states and, in states that have withdrawn from the program, non-profit agencies, known as “replacement designees,” to administer its programs. Local resettlement agencies, in turn, directly administer these programs in partnership with an exhaustive array of public and private

entities, and individuals. As discussed below, the ORR-funded Refugee Resettlement Program (RRP) focuses on self-sufficiency through early employment, short- and longer-term integration needs, and assistance to populations with special needs. Some of these programs are formula funded and for others funding is awarded via discretionary grants.⁹ By design, ORR awards funding to states through state refugee coordinator (SRC) programs or replacement designees, which then fund resettlement agencies and other community actors through their own funding mechanisms, whether via a formula or competitive applications.

A. Employment

Refugee Support Services (RSS) funding seeks to assist refugees to achieve “economic independence” by securing and retaining work (ORR 2020a). This program promotes early employment and offers case management services. Under it, caseworkers assist refugees to prepare for employment interviews and to secure work. More broadly, the program assists in assessing employability, training, skills recertification, and job placement and maintenance. It also addresses barriers to employment, such as English language instruction and day care for children (ibid.). States and replacement designees can provide services to refugees who have been in the country up to five years, with the exception of referral and interpreter services and citizenship and naturalization preparation services, for which there is no time limitation. Most survey respondents viewed five-years as a sufficient period for these services.

ORR’s voluntary Match Grant program, an alternative to the RSS program, focuses on expedited employment and financial independence within four to six months following arrival. It requires resettlement offices to contribute \$1 in cash and in-kind contributions for every \$2 in federal funding, with a maximum federal contribution of \$2,600 per client. National resettlement agencies approve select local agencies within their networks as Match Grant sites. The program offers skills training, job referrals, budget planning, case management, housing assistance, English language training, and other assistance. Participants cannot access public cash assistance until a month after their participation in the program ends.

The Wilson-Fish program (WF) previously operated as “an alternative to traditional state-administered refugee resettlement programs for providing cash assistance and support services” (ORR 2020c). The program sought to increase the likelihood of early employment and self-sufficiency through a flexible, integrated and tailored approach, relying heavily on intensive case management. Eleven of the 13 Wilson-Fish grantees were non-profit agencies. As of October 1, 2019, eight of the non-profit WF grantees became replacement designees, and ORR made Wilson-Fish a discretionary grant program that supports “innovative methods to address unmet needs or gaps in the refugee program” (ibid.). The intensive case management program (ICM) made available through WF was discontinued, although similar case management services remain available through the Preferred Communities program. In addition, case managers still retain a degree of flexibility and can draw upon diverse programs, community networks, and local partnerships (some newly formed) to respond to the needs of individual refugees.

⁹ If arrivals rise from one year to the next, formula funding often leaves local agencies understaffed (Darrow 2018, 41).



B. Refugee Cash and Medical Assistance

ORR's Cash and Medical Assistance (CMA) program provides short-term assistance – up to 8 months following arrival – to refugees with no or few financial resources, who are not eligible for public assistance programs such as Temporary Assistance to Needy Families (TANF),¹⁰ Supplemental Security Income (SSI), or Medicaid. The program provides a cash allowance and medical assistance to newly arrived refugees.

Refugee Medical Assistance (RMA) benefits are generally similar to Medicaid. CMA also supports Refugee Medical Screening (RMS) upon a refugee's arrival. In addition, ORR funds the Unaccompanied Refugee Minor (URM) program, which furthers the education, safety, well-being, and self-sufficiency of minors (under age 18) in select states.

Some refugees are eligible for Medicaid or Children's Health Insurance Program (CHIP) during their first 8 months and well beyond. The populations served and benefits provided by these state-administered programs vary by state. Other refugees can secure health insurance through the marketplace created by the Affordable Care Act.

C. Programs for Targeted Populations with Particular Needs

ORR also funds a range of programs, many of them dedicated to adjustment and integration, for targeted populations with particular needs. Among many other programs:

- The Preferred Communities program serves vulnerable populations, such as those with

¹⁰ States operate their own Temporary Assistance to Needy Families (TANF) program with block grant funding from the federal government and state "maintenance of effort" funding for needy families.

serious medical and mental health conditions, women at risk, and elderly refugees without family support systems. It offers intensive case management to address barriers to their integration.

- The Ethnic Community Self-Help program supports CBOs to assist refugees to integrate and adjust to their new communities through work, learning English, becoming citizens, or preparing for college.
- The Refugee School Impact (RSI) program provides grants to school districts and replacement designees to strengthen the academic performance and contribute to the adjustment of refugee youth.
- The Youth Mentoring Program assesses and seeks to achieve the educational and vocational goals of refugee youth through tailored services.
- The Refugee Health Promotion program supports health literacy and emotional wellness services beyond what is available through RMA and RMS.
- The Survivors of Torture program provides integrated, holistic services to torture survivors and their families, so that survivors can heal, recover, and rebuild their lives.
- The Services to Older Refugees Program seeks to ensure that elderly refugees can access appropriate institutions and services, such as senior community centers, nutrition services for homebound, adult day care, respite care, and elder abuse prevention services.
- The Microenterprise Development program helps refugees start, sustain, and grow businesses.
- The Refugee Family Child Care Microenterprise program assists refugees to initiate and operate home child-care businesses.
- The Refugee Career Pathways program assists refugees to develop and pursue professional or skilled career plans.
- Individual Development Accounts help refugees to save money to acquire a needed asset.
- The Refugee Agricultural Partnership Project supports urban gardening and rural farming projects.

III. The Survey

This report analyzes the US refugee resettlement process based on a national survey of individuals and institutions with intimate knowledge of this program. The survey covers the “domestic” side of the US refugee resettlement program, from the point that refugees arrive in the United States. The survey questionnaire was informed by three multi-day gatherings on the US resettlement process organized by the Refugee Council USA, extensive input from an expert advisory group, and a literature review. The community gatherings brought together key actors in the resettlement process

to discuss USRAP's purpose, strengths, and weaknesses. Participants included refugees,¹¹ state and local officials, state refugee coordinators, state refugee health coordinators, representatives from local and national resettlement agencies, and researchers. The first session took place in Detroit, Michigan on October 23-24, 2019; the second in Atlanta, Georgia on November 13-14, 2019; and the third in Sacramento, California on December 9-10, 2019.

"For many, refugees embody the ideals of hard work, freedom, endurance, and self-sacrifice once thought to be emblematic of the United States."

CMS launched the Refugee Resettlement Survey: 2020 on May 1st.¹² National resettlement agencies, the States Coordinators of Refugee Resettlement (SCORR), the Association of Refugee Health Coordinator (ARHC), the Refugee Congress, advisory group members, participants in the RCUSA gatherings and CMS contacts assisted in the survey's dissemination. Thus, CMS recruited respondents from select networks working with refugees and other populations eligible for USRAP services and benefits. The survey was conducted primarily in English. However, USA Refugee Hello, a free online information center for refugees and refugee stakeholders, provided Arabic and Somali translations, which slightly diversified the pool of respondents.

The survey included both open- and close-ended questions designed to elicit the strengths and weaknesses of the US resettlement program, the needs of refugees at different periods following their arrival, obstacles to integration, challenges facing resettlement agencies, and ideas for revitalizing the program. It posed some questions to all respondents, some solely to "refugees" and some solely to "non-refugees." As used in this report, the term "refugees" encompasses refugees, former refugees who have become permanent residents, and US citizens, and other populations (discussed below) who are eligible for resettlement services. The term "non-refugees" includes persons (including refugees) that work or volunteer with entities engaged in the resettlement process.¹³ The survey was administered on-line. Its close-ended questions allowed respondents to select up to a set number or all the responses with which they agreed. The survey also allowed respondents to explain and elaborate on their responses.

CMS closed the survey on July 14, 2020. Its researchers then cleaned the data by deleting duplicate responses, responses from outside the United States, responses that included only answers to initial questions about refugee status and organizational affiliation, and responses from persons who did not meet the criteria to complete the survey. The latter mainly consisted of refugees living outside the United States and non-refugees who did not work for an organization involved in resettlement. Ultimately, CMS retained 559 unique responses for analysis. Of these, 118 identified as refugees or former refugees and 49 identified as members of groups also served by the US resettlement program; i.e., Special Immigrant Visa (SIV) holders (32), asylees

¹¹ Refugees constituted a minority of participants in these meetings.

¹² CMS originally planned to complement its online survey with on-site survey interviews with refugees at several locations. However, the COVID-19 pandemic led CMS to conduct the survey online.

¹³ Many former refugees work for entities that provide resettlement services and are, thus, characterized in this report as both "refugees" and "non-refugees," making distinctions between these two groups less pronounced than they would otherwise be.

(15), and Cuban and Haitian entrants (2). Seventy of these “refugee” respondents worked for non-profits that work with refugees, 30 for government offices, and 24 for state coordinators. Sixty-two refugees (42 percent) listed their gender as female and 84 (57 percent) listed their gender as male. Two preferred not to respond.



Although a relatively large and diverse sample of the US refugee population, refugee survey respondents are not likely to be representative of the broader population of refugees in the United States.¹⁴ The average refugee respondent, for example, had been in the United States for 10 years and had received on average about 14 years of education (the equivalent of “some college”). Most lived in Wisconsin (15), Texas (12), Illinois (9), Washington (9), Iowa (7), and Georgia (7).¹⁵

Some 354 respondents worked for non-profits and resettlement agencies. A plurality of non-profit respondents (214 respondents), represented local, state, or regional offices of resettlement agencies. Forty-six respondents worked as state refugee coordinators and 22 as state refugee health coordinators. Ninety-one respondents worked for government agencies and public schools. Respondents live in 42 states and the District of Columbia, the largest numbers from California

¹⁴ CMS recruited refugee respondents mostly with the help of the Refugee Congress. It was not able to offer the survey in-person due to the COVID-19 crisis or in most refugee languages. These factors likely impacted the sample.

¹⁵ The survey may better reflect the experiences of refugees in these six states than of refugees in other parts of the country.

(71), Washington (55), Texas (52), Wisconsin (34), and Illinois (32). Broadly speaking, many responses came from the West Coast and the Upper Midwest (Iowa, Michigan, Wisconsin, and Illinois). A significant number of responses also came from the South (particularly Georgia, Tennessee, Texas, North Carolina, and Virginia). The Mountain West and Great Plains were relatively under-represented.¹⁶ Non-profit and voluntary resettlement organization respondents most often hailed from Washington (43), California (41), Texas (30), Illinois (24), and New York (22). To some degree, the survey may overweigh the experiences of non-profit representatives in these states.

IV. Findings

1. Purpose and Overall Strengths and Weaknesses of US Resettlement Program

The Refugee Act of 1980 set forth a two-fold purpose for the US resettlement program: “to respond to the urgent needs of persons subject to persecution in their homelands” and “to encourage all nations to provide assistance and resettlement opportunities to refugees to the fullest extent possible.”¹⁷ In the ensuing years, USRAP has become one of the most successful humanitarian programs in US history. It has saved millions of lives, served as a beacon of hope to desperate persons throughout the world, and advanced the nation’s prestige and standing. For many, refugees embody the ideals of hard work, freedom, endurance, and self-sacrifice once thought to be emblematic of the United States. Refugees have made immense contributions to the country in business, science, the arts, the law, government, academia, culture, and other areas. Indeed, their contributions have been so varied and consequential that it would be difficult to imagine the United States without them. Yet, many Americans poorly understand the program’s purpose, and some argue that it does not serve the nation’s interests.

“My city was losing ... population and schools and businesses [were] closing. Refugee kids and workers are keeping them open. Landlords and neighborhoods are thriving with children, families.”

Asked to identify the “purpose(s)” of the program, most refugee respondents reported that the program gives refugees new opportunities, helps them to integrate, offers hope to refugees living in difficult circumstances abroad, and saves lives (Table 1). A higher percentage of refugees (54 percent) than non-refugees (35 percent) identify as a main purpose of the program that it offers hope to refugees abroad. Participants in the multi-day community meetings on the program organized by Refugee Council USA articulated these same themes. They also emphasized the ways in which the program benefitted local communities, including institutions and services established by USRAP that were available to other community members. One survey respondent explained: “My city was losing ... population and schools and businesses [were] closing. Refugee kids and workers are keeping them open. Landlords and neighborhoods are thriving with children, families.”

¹⁶ State refugee coordinator and state refugee health coordinator respondents worked in 30 states. A disproportionate number of state coordinator respondents worked in Texas (8) and Wisconsin (7).

¹⁷ Refugee Act of 1980, §101(a).

The survey sought to elicit respondents' views of the overall strengths and weaknesses of the program. As with other questions, the survey questions on strengths and weaknesses of the program presented a list of options informed by the three community gatherings organized by Refugee Council USA, the input of expert advisors, and CMS's literature review. The questions also permitted respondents to add to or elaborate on their responses. However, the options provided may have limited the range of responses and failed to capture fully the views of respondents.

As Table 2 indicates, survey respondents reported at high rates that the program helps vulnerable people (69 percent), positively impacts local communities (57 percent), contributes to more diverse local communities (57 percent), helps to integrate refugees (57 percent), serves entire families (49 percent), and allows refugees to support themselves soon after arrival (49 percent).

Table 1. Main Purpose of the US Refugee Resettlement Program
Respondents were permitted to check up to 5 responses from a list.

Ranked in the "Number of refugees" column.

Responses	Total	Refugees	Non-Refugees		
	<i>Percent</i>	<i>Number</i>	<i>Percent</i>	<i>Number</i>	<i>Percent</i>
Responses	441	125	316		
To give refugees new opportunities	65	85	68	200	63
To help refugees integrate	64	71	57	212	67
To offer hope to refugees living in difficult circumstances living abroad	40	67	54	110	35
To save lives	49	64	51	154	49
To reunify refugee families	53	61	49	171	54
For the US to set an example for other countries as a humanitarian leader	44	52	42	144	46
To find jobs for refugees	39	51	41	123	39
To strengthen local communities	39	37	30	137	43
To find housing for refugees	25	32	26	77	24
To secure public benefits for refugees	22	30	24	69	22

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Table 2 also reveals disparities in the responses of refugees and non-refugees. Higher percentages of refugees (than non-refugees) listed as the program's main strengths that it allows refugees to work (74 to 40 percent) and provides hope to refugees (51 to 37 percent). Lower, albeit still

significant rates of refugees identified as main strengths that the program helps vulnerable people (54 percent compared to 75 percent for non-refugees), contributes to more diverse local communities (42 percent compared to 63 percent), and reunifies families (31 versus 49 percent).

Table 3 also reveals differences between refugee and non-refugee responses related to the program’s main weaknesses. In particular, refugees more frequently reported (than non-refugees) that the program encourages refugees to work in jobs that do not match their skills and credentials (46 to 34 percent).

“Refugees more frequently reported (than non-refugees) that the program encourages refugees to work in jobs that do not match their skills and credentials.”

Table 2. Main Strengths of the Refugee Resettlement Program.
Respondents were permitted to check up to 5 responses from a list.

Ranked in the “Number of refugees” column.

Responses	Total	Refugees	Non-Refugees		
	441	125			
	<i>Percent</i>	<i>Number</i>	<i>Percent</i>	<i>Number</i>	<i>Percent</i>
It allows refugees to support themselves through work soon after their arrival	49	92	74	125	40
It helps to integrate refugees into the United States	57	77	62	174	55
It has a positive economic impact on local communities	59	71	57	189	60
It helps the most vulnerable people	69	68	54	236	75
It provides hope to refugees	41	64	51	118	37
The program services entire families and not just individuals	49	57	46	157	50
It contributes to more diverse local communities	57	53	42	198	63
It reunifies families	44	39	31	154	49
It leads to a positive attitude toward the United States outside the country	18	27	22	54	17

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

“Survey respondents reported at high rates that USRAP helps vulnerable people, positively impacts local communities, contributes to more diverse local communities, helps to integrate refugees, serves entire families, and allows refugees to support themselves soon after arrival.”

Respondents identified as main weaknesses that the program did not provide enough mental health support (50 percent) or integration support *after three months* (47 percent); placed

too much emphasis on support through early employment (38 percent); family reunification was “slow” (38 percent); and did not provide enough financial help to refugees during their first three months (37 percent). These weaknesses may be inter-related. Limited childcare (30 percent) or concern over work that does not match refugees’ skills or credentials (38 percent) may help to explain, for example, frustration with the program’s emphasis on finding employment quickly (38 percent).

Refugee respondents identified as main weaknesses at lower rates (than non-refugees) the program’s level of mental health support (34 to 56 percent) and on finding employment quickly (25 to 44 percent). Of the refugee respondents, 69 identified as men, 51 as women, and one preferred not to respond.

Table 3. Main Weaknesses of the Refugee Resettlement Program.
Respondents were permitted to check up to 5 responses from a list.
Ranked on the “Percent of refugees,” column 3.

Response	Total	Refugees	Non-Refugees		
	437	121		316	
	Percent	Number	Percent	Number	Percent
Refugees are encouraged to work in jobs that do not match their skills and credentials	38	56	46	109	34
There is not enough integration support for refugees after their first 3 months in the US	47	54	45	151	48
Refugees do not receive enough financial help during their first 3 months in the US	37	49	41	112	35
Family reunification is slow	38	47	39	117	37
Adult refugees do not have enough access to opportunities to further their education	32	46	38	95	30
Refugees do not receive enough help integrating in the US during their first 3 months in the United States	27	45	37	74	23
Refugees have little voice in resettlement processes	30	42	35	87	28
There is not enough mental health support for refugees	50	41	34	176	56
There is limited childcare available for refugees	30	33	27	97	31
Too much emphasis on supporting oneself by finding employment quickly	38	30	25	138	44
There is not enough medical support for refugees	11	17	14	33	10
The program does not offer enough support for refugee women	15	14	12	51	16
The program is too politicized	20	15	12	71	22

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

2. Critiques of the Resettlement Program

The US Refugee Admissions Program should be a cause of bi-partisan celebration and support. Yet it has come under intense criticism in recent years by politicians, media figures, and restrictionist groups that portray it as a threat to the nation's security. This criticism is misguided. USRAP has one of the most intensive vetting and screening regimes in the world (Pope 2015; Kerwin 2016, 112-117), and the chance in a given year of being killed by a terrorist who entered the country impersonating a refugee is infinitesimally small (Nowrasteh 2019). In addition, in a variety of ways, refugee protection advances the nation's security (Kerwin 2016, 91-94). An analysis of additional critiques of the program follows.

"The US Refugee Admissions Program should be a cause of bi-partisan celebration and support."

A. Funding and Infrastructure

Even in years with relatively high admission levels, resettlement agencies struggled to sustain necessary positions and funding levels. Because resettlement programs do not control the number, pace, or particular needs of refugees resettled in their communities from year to year, per capita funding has long represented a source of instability for them (Darrow 2015, 5; Darrow 2018). These agencies have also historically struggled to accommodate large-scale secondary migration of refugees (Brown and Scribner 2014, 112-114).

Not surprisingly, 78 percent of non-refugee respondents strongly (60 percent) or somewhat (18 percent) agreed that the lack of guaranteed multi-year funding limited their ability to plan (Table 4). Sixty-five percent strongly (42 percent) or somewhat (23 percent) agreed that per capita funding inhibited their ability to address key staffing needs or to adequately support permanent staff. High percentages also indicated that inconsistent awards periods and grant reporting requirements limited their service to refugees.

"High percentages of respondents indicated that inconsistent awards periods and grant reporting requirements limited their service to refugees."

In light of the dramatic decreases in admissions and destabilizing programmatic changes in recent years, these agencies now operate well beyond their limited capacity. Since 2017, the number of local resettlement offices has fallen from roughly 325 to 200, and funding and staffing in most of these offices have been slashed. With few exceptions, resettlement agency respondents reported that since 2017 they had laid off staff, which resulted in a loss of expertise, institutional knowledge, language diversity and capacity. Moreover, resettlement agencies have lost case managers, career counselors, and other positions that meet the most pressing needs of refugees. At the community fora organized by Refugee Council USA, resettlement staff spoke of the difficulties and frustrations, particularly of case managers, in trying to accommodate high numbers and ratios of refugees, and the need for more staff and greater attention to staff wellness and care.

They reported at high rates that in order to resettle pre-2017 numbers of refugees, they would

need higher staffing levels in employment services (66 percent), general integration and adjustment services (62 percent), housing support (61 percent), mental health care (45 percent), medical case management (45 percent), K-12 adjustment support (37 percent), and other areas.

Table 4. Level of Agreement on Selected Statements About Organizational Restraints.¹⁸

Ranked in Column 2, "Strongly agree."

Respondents were asked to indicate how much they agree or disagree with each statement below using a 5-point scale that ranged from "Strongly Agree" to "Strongly Disagree."

Responses	Number	Strongly Agree	Somewhat Agree	Do not know
		Percent	Percent	Percent
The lack of guaranteed multi-year funding limits our staff's ability to plan.	196	60	18	11
Per capita funding inhibits my organization's ability to plan.	196	45	20	19
Per capita funding inhibits my organization's ability to address key staffing needs or adequately support permanent staff.	194	42	23	16
Inconsistent award periods for federal grants limit our staff's ability to provide refugees with consistent service	194	35	25	16
Current grant reporting requirements are so extensive that they limit organization's ability to address key refugee needs.	196	25	30	16
Grant reporting requirements limit our staff's ability to effectively provide services to refugees	196	23	33	13

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

B. State and Local Consultation

As discussed, the Trump administration issued an Executive order that required resettlement agencies to obtain the consent of state and local governments before the federal government can resettle refugees within their territory (Trump 2019). The order identified as one of its purposes the need to be "respectful of those communities that may not be able to accommodate refugee resettlement." The order led to the extensive mobilization of USRAP supporters that resulted in 42 states consenting to accept refugees, and only one (Texas) rejecting refugees.¹⁹

"Since 2017, the number of local resettlement offices has fallen from roughly 325 to 200, and funding and staffing in most of these offices have been slashed."

¹⁸ This chart does not show categories with zero responses.

¹⁹ At this writing, the order has been temporarily enjoined in federal court.

Fifty-eight percent of survey respondents believe that the federal government should consult with state and local officials about resettlement but should not be required to obtain their consent before refugees are resettled. Smaller percentages believed that state and local officials should neither be consulted nor required to consent (19 percent). In fact, extensive consultation requirements have been in place since the program’s inception.

The Refugee Act of 1980 required the federal government to “consult regularly with States, localities and private nonprofit voluntary agencies concerning the sponsorship process and the intended distribution of refugees.”²⁰ PRM cooperative agreements with resettlement agencies require quarterly consultations be held with “local stakeholders” in the resettlement process for coordination purposes (Brown and Scribner 2014). ORR is also responsible for quarterly consultations with stakeholders (GAO 2012, 10). In addition, state refugee plans must ensure quarterly meetings in which “representatives of local resettlement agencies, local community service agencies, and other agencies that serve refugees meet with representatives of State and local governments to plan and coordinate the appropriate placement of refugees in advance of the refugees’ arrival.”²¹ Consultations vary from community to community, but resettlement agencies typically coordinate with the state refugee coordinators and state refugee health coordinators to organize quarterly consultations that combine the required consultations so that stakeholders do not need to attend separate consultations for the same area. Most survey respondents agreed that quarterly consultations significantly (25 percent) or somewhat (37 percent) strengthen the program (Table 5).

Table 5. Statements About State Quarterly Consultations that Refugees Agree with Most.

Ranked by number of responses.

Respondents were asked to select the one statement with which they agreed most.

Responses	267	
	Number	Percent
Quarterly consultations in my state somewhat strengthen the refugee resettlement program	98	37
Quarterly consultations in my state significantly strengthen the refugee resettlement program	66	25
Do not know	62	23
Quarterly consultations in my state have little or no impact on the refugee resettlement program	27	10

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

At the same time, many resettlement stakeholders in the community gatherings organized by RCUSA argued that quarterly consultation meetings can be pro forma and do not promote accountability among participants for the program’s success. Non-refugee respondents identified

²⁰ Refugee Act of 1980, §301 (c)(1).

²¹ 45 CFR §400.5(h).

several factors that limit the success of these meetings, such as lack of time for individual and small-group discussions, the failure of key actors to attend, and the lack of deep discussion of key issues (Table 6).

Table 6. Factors That Limit the Success of Quarterly Consultations.

Ranked by number of responses.

Non-refugee respondents were asked to check all options that apply from a list.

Responses	207	
	Number	Percent
Lack of time for one-on-one or small-group discussions	68	33
None of these factors or do not know	68	33
Key actors do not attend quarterly consultations	66	32
The agenda for discussion prevents deep discussion on key issues	59	29
The required agenda is not conducive to establishing relationships between resettlement actors	42	20
My organization has limited time and staff to plan consultations	31	15
The agenda for discussion is inflexible	25	12

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

C. Refugee Contributions and Public Benefit Use

The survey queried non-refugees on whether refugees positively contribute to local institutions in the state and, if so, how long it takes them to strengthen these institutions. Some respondents reported that refugees contribute to local institutions through their work in hospitals and health systems, law enforcement, elder care, local government, and food services.²² They also highlighted the contributions of refugees to the diversity and cultural awareness of their communities. One pointed to the success of refugee children in school. Another lauded the values and achievements of refugees, stating: “They are the heart of what American ideals once were.”

“Some respondents reported that refugees contribute to local institutions through their work in hospitals and health systems, law enforcement, elder care, local government, and food services.”

Some politicians and media figures criticize refugees’ public benefit use and characterize them as an economic burden. Refugees arrive in the country penniless and typically take low-wage, entry-level jobs shortly after their arrival. For varying periods, refugees depend on public benefits

²² Over time, refugees come to equal or exceed the total US-born population in personal income, homeownership, and other indicia of socio-economic attainment (Kerwin 2018).

and services to supplement their modest incomes. Over time, however, refugees exceed the total US population in common metrics of socio-economic attainment, and their use of public benefits declines (Kerwin 2018). Refugee survey respondents that had used public benefits reported using them to meet basic needs, such as for medical care, food, and housing for themselves and family members (Table 7). In response to a separate close-ended question, 39 percent of refugee survey respondents indicated that they had used at least one public benefit for six months or less and no longer used public benefits, and 21 percent indicated that they had used at least one public benefit for more than six months and no longer used public benefits.

"[Refugees] are the heart of what American ideals once were."

In response to an open-ended question on whether refugees "burden any local institutions in their states," respondents made the point that some local institutions, such as schools, English Language Learning (ELL) programs, and hospitals, had to adapt to the needs of refugees. However, respondents also reported that refugees "usually give back more than they take," and that insufficient federal and state support for the program or systemic social problems, such as the expensive, complex US health care system and the dearth of affordable housing in many communities, lie at the root of the problems attributed to refugees. One respondent argued that public institutions, by their nature, exist to serve all community members and no population should be viewed as a burden for using benefits they need and for which they qualify.



Table 7. Reasons for Using Public Benefits.*Refugee respondents were asked to check all options that apply from a list.*

Responses	Number	Percent
	69	
Medical care for myself in a medical emergency	23	33
To help pay for food for myself	23	33
Medical care for myself, for a non-emergency situation	19	28
Medical care for my child or other dependent for a medical emergency	15	22
Medical care for my child or other dependent, for a non-emergency situation	11	16
To help pay for food for my children or other dependent relatives	10	14
To help pay for housing for my family	10	14
Medical coverage for a disabled relative	4	6
Other reason, do not know or prefer not to respond	17	24

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

D. The Role of Refugees in the Program’s Design and Operation

Resettled refugees have the most direct knowledge of USRAP of any resettlement stakeholder. Yet many survey respondents report that refugees play a minimal role in the program’s design and operation, to their detriment and the detriment of the program’s integration

goals.²³ The survey posed several questions – many of them limited to refugees themselves – related to refugee participation in the resettlement process and in the program’s constituent agencies. Twenty-five percent of refugee respondents “strongly agreed” that they had “little to no input” in the resettlement process (Table 8).

“Many survey respondents report that refugees play a minimal role in the program’s design and operation, to their detriment and the detriment of the program’s integration goals.”

Table 8. Statements About the Resettlement Process with which Refugee Respondents Most Strongly Agreed.

Ranked on Number, column 1.

Respondents were asked to select the one statement with which they agreed most.

Responses	Number	Percent
I feel like I had a lot of input into my resettlement process	30	32
I feel like I had little to no input into my resettlement process	23	25
I feel like I had some input into my resettlement process	21	23
Do not know, no response, or not resettled	19	20

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Two-thirds of non-refugee survey respondents strongly agreed that a “few” (45 percent) or “very few or no” (23 percent) refugees had leadership or other influential roles in their organizations. Moreover, 69 percent of respondents identified former refugees as a population that should be afforded a voice in the resettlement process, followed by refugee community advocates, public schools, mental health care providers, health care providers, and affordable housing associations (Table 9). Resettlement agencies and CBOs identified former refugees as a population that should be given a voice at higher rates than government officials (72 versus 52 percent).

²³ Jessica Darrow, for example, argues that greater “administrative inclusion,” defined as the ability to “express their interests or make demands with a resettlement organization,” would better prepare refugees to exercise their civic responsibilities and promote their civic integration into the broader society (Darrow 2018, 41-42).

Table 9. Persons or Institutions That Should be Given a Voice in the Refugee Resettlement Process.*Ranked in Column 1.**Respondents were asked to check all options that apply from a list.*

	Total	Resettlement Agencies and CBOs		State Coordinators ²⁴		Government		
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
	234		178		29		27	
Former refugees	161	69	128	72	19	66	14	52
Refugee community advocates	150	64	117	66	17	59	16	59
Public schools	109	47	79	44	16	55	14	52
Mental health care providers	107	46	76	43	14	48	17	63
Health care providers	97	41	65	37	17	59	15	56
Affordable housing associations	88	38	65	37	12	41	11	41
Employers	83	35	55	31	14	48	14	52
Advocates for victims of domestic violence	69	29	51	29	10	34	8	30
TANF and WIC employees	65	28	45	25	10	34	10	37
Medicaid providers	60	26	42	24	8	28	10	37
Community colleges	55	24	42	24	5	17	8	30
Local workforce development boards	53	23	38	21	9	31	6	22
Researchers	50	21	39	22	6	21	5	19
Landlords	49	21	32	18	4	14	13	48
All not listed	48	21	37	21	5	17	6	22
Law enforcement	41	18	25	14	9	31	7	26
Local chambers of commerce	36	15	25	14	5	17	6	22
Transportation officials	36	15	29	16	3	10	4	15
Neighborhood associations	34	15	28	16	4	14	2	7
Tech. schools	34	15	28	16	3	10	3	11
Small business associations	33	14	25	14	5	17	3	11
Philanthropists	31	13	25	14	3	10	3	11

Source: Center for Migration Studies Refugee Resettlement Survey: 2020²⁴ The term state coordinators in this and subsequent tables refers to both state refugee coordinators and state health coordinators.



E. The Emphasis on Self-Sufficiency through Employment

The resettlement program seeks to assist refugees to integrate into their communities and to achieve economic self-sufficiency, defined narrowly in terms of employment and lack of receipt of public benefits.²⁵ Some argue that the program's emphasis on self-sufficiency through early employment can lead to the neglect of other refugee priorities, sacrifices long-term prospects to the immediate need for income, stymies integration, and ignores the needs of persons who cannot fully integrate (GAO 2012, 29, Brown and Scribner 2014, 106; Kerwin 2015, 224; Darrow 2018, 43).²⁶

Non-refugee respondents identified both disadvantages and advantages to federal employment requirements for refugees. They indicated that the program's strict focus on early employment limits the time needed to learn English (65 percent) and to pursue higher education (59 percent), and can lead to underemployment (45 percent). On the other hand, significant percentages of respondents indicated that the program's employment requirements helped refugees to pay living expenses (48 percent) and led to less reliance on public benefits (40 percent) (Table 10).

²⁵ INA § 412.

²⁶ Anastasia Brown and Todd Scribner (2014, 106) criticize the program's "almost singular emphasis on self-sufficiency and economic independence" and argue for "a more robust understanding of integration which includes psycho-social, linguistic, and cultural integration."

Table 10. Outcomes Related to Current Federal Grants' Employment Requirements for Refugees.

Ranked by number of responses.

Respondents were asked to check all options that apply from a list.

Responses	316	
	Number	Percent
Employment requirements limit refugees' time to learn English	205	65
Employment requirements limit refugees' ability to pursue higher education	186	59
Current employment requirements help refugees to pay their living expenses	152	48
Rapid employment requirements lead to underemployment	143	45
Current employment requirements lead to less reliance on public benefits	127	40
Employment requirements promote contact with members of the local community	114	36
Current employment requirements can lead to improvements in refugees' self-confidence	100	32
Employment requirements can lead to psychological problems or a loss of self-confidence	91	29
Do not know	47	15

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Thirty-seven percent of non-refugees believed that current government grant programs focus too much on refugee employment, 26 percent the right amount, and 14 percent too little (Table 11). One respondent said the program pushes refugees too quickly into employment to the detriment of the “basics of life,” such as development of language skills or healing from trauma.

The Refugee Act of 1980 exempted refugees from work requirements for 60 days, but Congress subsequently eliminated this exemption, tying self-sufficiency more tightly to work (Scribner and Brown 2014, 106). The emphasis on self-sufficiency through early employment raises particular challenges for refugees with children, refugees suffering from extensive trauma, or those who have never worked in the formal sector. One respondent said the program did not prioritize the self-sufficiency of women to the extent it did men. Some argued in favor of a programmatic shift to living wage jobs and to building job skills for post-entry level work. These respondents said that “survival” jobs did not lead to decent housing, foster broad community contacts, or increase refugees’ ability to pay bills. Instead, they created dependence on public benefits.

Table 11. View of Current Government Grant Programs, Including both State Department and ORR Grants.

Ranked in Column 1.

Respondents were asked to select the statement that best reflects their point of view.

Responses	Total	Resettlement agencies & CBOs		State Coordinators		Government	
	Percent	Number	Percent	Number	Percent	Number	Percent
Current grant programs focus too much on refugee employment	37	88	39	22	47	8	21
Current grant programs focus about the right amount on refugee employment	26	59	26	11	23	13	26
Do not know or prefer not to respond	22	48	22	8	8	13	34
Current grant programs focus too little on refugee employment	14	28	13	6	13	11	18

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Some said that refugees should not be threatened with losing resettlement services and benefits, such as housing, if they decline to accept jobs that might damage their long-term prospects. One respondent said that the program should emphasize learning English, continuing education, and allowing refugees to prepare for and to secure work that supports a dignified life.

F. Duration of Services

The Reception and Placement (R & P) program has consistently been criticized for its relatively short duration and its modest funding (currently \$2,175 per refugee). Eighty-six percent of non-refugee survey respondents believed that the program was much too short (56 percent) or a little too short (30 percent). Many respondents felt that the program should last between six months and a year. Some respondents said that the length of the program should exceed a year or should turn on the individual circumstances of refugees, such as family ties, education, language proficiency, health needs, and the availability of services in the community.

“Eighty-six percent of non-refugee survey respondents believed that the reception and placement program was much too short (56 percent) or a little too short (30 percent).”

Several stated that R & P's objectives could not be achieved within the 30-90 days window, and that R & P services did not, in any event, address core needs like opening a bank account. When asked to identify which elements of the R & P program should be extended beyond 90 days, non-refugee respondents identified language training (56 percent), mental health care access (51 percent), housing benefits or service (49 percent), cultural orientation (47 percent), physical health care access (44 percent), and other services. Forty-four percent checked "all of the services" listed. Several emphasized the importance of an effective transition from R & P, to ORR-administered programs, which address many of these needs.

Similarly, 71 percent of survey respondents believed that the eight-month period of medical assistance was either "much too short" to meet refugees' needs (41 percent) or a "little too short" (29 percent). Many respondents believed that coverage should last in the one- or two-year range. Some made the point that the length of coverage should depend on the health coverage offered by the states. The need for expanded coverage may be particularly acute during the pandemic and its aftermath when many refugees will lose employment-related and other health insurance.

"The need for expanded healthcare coverage may be particularly acute during the pandemic and its aftermath."



3. The Receiving Community

The US refugee resettlement program views the successful placement of refugees as essential to their resettlement and to the prevention of secondary settlement (ORR 2020b). The receiving community strongly influences refugee integration. Resettled refugees relate to a range of institutions and individuals in their new communities, some through the resettlement program and others in their day-to-day lives. Family members, persons from their home countries, public agencies, employers, faith communities, and CBOs serve as points of access and bridges to the broader society. These “mediating” entities provide refugees with networks, skills, resources, experiences, and a sense of belonging that facilitate their integration into the broader society.

Survey respondents reported that the most important factors for determining refugee placement and settlement were affordable and decent housing (74 percent), the availability of jobs (71 percent), local community support (53 percent), refugee family members or friends nearby (50 percent), public transportation (50 percent), and availability of ELL classes for refugees (45 percent) (Table 12).

“The federal government administers the refugee program, but resettlement takes place in local communities. USRAP’s success, therefore, depends heavily on local networks of institutions and community members.”

These findings, however, masked differences between refugee and non-refugee respondents. A higher rate of refugees than non-refugees (33 versus 19 percent), for example, identified the cultural diversity of a community as “most important,” and a lower (but substantial) rate of refugees identified affordable and decent housing as “most important” (58 versus 79 percent).

In their open-ended comments, non-refugee respondents identified a range of features and characteristics of successful refugee receiving communities. Some respondents emphasized the need for diverse, inclusive, and welcoming communities, the willingness and flexibility of community institutions to serve refugees, and a strong volunteer base. Others identified sufficient employment opportunities, self-sufficiency pathways, the support of business leaders, educational opportunities for adults, and ELL programs. Still others highlighted the importance of essential services, such as affordable housing, supportive schools, decent public transportation, and health centers.

The federal government administers the refugee program, but resettlement takes place in local communities. USRAP’s success, therefore, depends heavily on local networks of institutions and community members. Asked to identify the most helpful people or organizations in the settlement process, respondents identified at the highest rates: resettlement program staff; friends and acquaintances from their country of origin; members of their places of worship; community organizations led by refugees or former refugees; and family members (Table 13). A higher percentage of refugee than non-refugee respondents (49 versus 39 percent) identified friends and acquaintances in the United States as most helpful. Lower percentages of refugees than non-refugees identified as most helpful members of their places of worship (46 versus 70 percent) and teachers or school staff (24 versus 47 percent).

Table 12. Most Important Factors for Determining Where in the United States Refugees are Resettled.

Ranked on "Percent of refugees," column 2.

Respondents were permitted to check up to 5 responses from a list.

Responses	Total	Refugees	Non-Refugees		
	Percent	Number	Percent	Number	Percent
The availability of jobs for refugees in a local community	71	76	67	216	73
Affordable and decent housing	74	66	58	235	79
Local community support for refugees	53	61	54	156	53
Availability of English as a second language classes that can accommodate refugees with diverse backgrounds and schedules	45	55	49	129	44
Refugees' family members or friends live nearby	50	52	46	154	52
Public transit that is affordable, frequent, and goes to places that refugees need to visit	48	51	45	144	49
The cultural diversity of the local community	23	37	33	56	19
The presence in the community of persons from the same country as the refugees	35	33	29	110	37
Availability of interpretation services	26	33	29	74	25
Strong school systems	14	28	25	30	10
Schools provide services to refugee families	25	24	21	80	27
Availability of appropriate physical health providers	10	17	15	24	8

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Table 13. People or Organizations That were Most Helpful for Settling into a New Community in the United States.

Ranked on “Percent of refugees,” column 2.

Respondents were permitted to check up to 5 responses from a list.

Responses	Total		Refugees		Non-Refugees	
	Percent	Percent	Number	Percent	Number	
Responses	412		113		299	
Resettlement program staff	73	70	62	232	78	
Friends and acquaintances from refugees’ countries of origin living in the United States	67	55	49	219	73	
Friends and acquaintances from the United States	42	55	49	118	39	
Family members	47	52	46	141	47	
Members of your church, temple, mosque, congregation, or other place of worship	63	52	46	208	70	
Community organizations led by refugees or former refugees	58	47	42	190	64	
Employers	33	35	31	99	33	
Local or state government officials	12	27	24	24	8	
Teachers or other school staff	41	27	24	140	47	

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Table 14 points to the level of support refugees received from individuals and institutions in their areas. Refugee survey respondents indicated at high rates that the following entities were supportive of them: CBOs, other than faith-based organizations (FBOs) (47 percent “completely” and 31 percent “somewhat” supportive); FBOs (39 and 37 percent); elementary and secondary schools (43 and 32 percent); physical health care providers (34 and 39 percent); and public benefit administrators (35 and 32 percent).

Non-refugees identified as “completely” or “somewhat” supportive: CBOs (not FBOs) (56 and 38 percent); FBOs (54 and 40 percent); elementary and secondary schools (35 and 49 percent); physical health care providers (32 and 48 percent); employers (24 and 55 percent); and mental health care providers (32 and 46 percent).

Table 14. Level of Support to Refugees from Various Entities and Institutions in Service Area.*Ranked on Column 2, "Completely supportive."***Respondents were asked to indicate the supportiveness or lack of supportiveness of each institution using a 5-point scale that ranged from "Completely Supportive" to "Completely Unsupportive"**

Responses	Total number	Completely supportive	Somewhat supportive	Completely unsupportive	All other responses
		Percent	Percent	Percent	Percent
Refugees					
Community-based organizations, other than faith-based institutions	94	47	31	5	17
Elementary and secondary schools	94	43	32	2	23
Faith-based institutions	94	39	37	5	17
Public benefit administrators	94	35	32	5	28
Physical health care providers	95	34	39	6	20
Employers	94	30	31	10	29
Law enforcement	90	19	24	10	46
Mental health care providers	94	18	26	11	45
Elected officials	91	13	27	9	50
Non-refugees					
Community-based organizations, other than faith-based institutions	169	56	38	0	6
Faith-based institutions	169	54	40	0	5
Elementary and secondary schools	169	35	49	1	15
Mental health care providers	151	32	46	1	33
Physical health care providers	168	32	48	0	20
Public benefit administrators	168	29	43	1	29
Elected officials	167	26	44	2	30
Employers	168	24	55	0	20
Law enforcement	168	17	33	0	49

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

4. Effectiveness of Select Programs and Services

The US refugee resettlement program offers an extensive array of programs, some intended to help refugees settle and adjust in their new communities in the period after their arrival, and others intended to help them succeed over the long-term. Asked to rank the effectiveness of select resettlement programs, most state coordinator respondents – state refugee coordinators

and state refugee health coordinators – ranked as highly effective the core Refugee Cash and Medical Assistance programs (72 percent) and the Refugee Health Promotion program (50 percent). Most resettlement agency and CBO respondents ranked as highly effective Refugee Support Services (70 percent), School Impact grants (60 percent), Refugee Cash and Medical Assistance (56 percent), Refugee Health Promotion (55 percent), and Youth Mentoring (52 percent) (Table 15).

Table 15. Effectiveness of Select Resettlement Programs

Ranked in the “Highly Effective” column.

Respondents were asked to indicate the effectiveness or ineffectiveness of each program from which they received funding in 2019 using a 5-point scale that ranged from “Highly Effective” to “Highly Ineffective.”

Program	Total Responses Number	Highly Effective Percent	Somewhat Effective Percent	Highly Ineffective Percent	All other Percent
State Coordinators					
Refugee Cash and Medical Assistance	39	72	26	-	3
Refugee Health Promotion	32	50	31	3	15
Youth Mentoring	32	41	38	3	19
Refugee Support Services	59	39	22	14	25
School Impact Grant	57	30	19	9	43
Grant for Elderly Refugees	55	27	20	7	45
Resettlement Agencies and CBOs					
Refugee Support Services	133	70	22	1	9
School Impact Grant	52	60	23	2	16
Refugee Cash and Medical Assistance	75	56	35	-	9
Refugee Health Promotion	53	55	26	2	17
Youth Mentoring	63	52	29	-	20
Match Grant	148	45	44	1	11
Grant for Elderly Refugees	34	41	38	3	18

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Refugee respondents reported at high rates that the most helpful services in their first three months were those that allowed them to settle into their new communities, such as help in finding medical care and attending appointments (60 percent), securing housing (51 percent), finding a job (49 percent), and enrolling children in school (42 percent) (Table 16).

Table 16. Most Helpful Services Received Through the Resettlement Program in the First Three Months in the United States.

Ranked on Number, column 1.

Respondents were permitted to check up to 5 responses from a list.

Responses	Number	Percent
Help finding medical care or attending appointments	61	60
Help finding housing	52	51
Help finding a job	49	49
Help enrolling my children in school	42	42
Help understanding American culture	31	31
Help learning English	29	29
Transportation to appointments and classes	26	26
Training in job skills to help me succeed at my work	20	20
More interpretation	14	14
Help opening a bank account	13	13
Help using public transportation	11	11

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

After three months, refugee respondents viewed as most helpful a range of services that both facilitate their initial settlement and lay the groundwork for their long-term success. These services run the gamut from help connecting to employers, ELL courses, job skill training, finding medical care or attending appointments, and opening a bank account (Table 17).



Table 17. Most Helpful Services Received Through the Resettlement Program After Three Months in the United States.

Ranked on Number, column 1.

Responses	72	
	Number	Percent
Connections to employers	32	44
English as a second language classes	27	38
Training in job skills to help me succeed at my work	22	31
Help finding medical care or attending appointments	22	31
Help enrolling my children in school	16	22
Help applying for cash benefits like TANF	16	22
Help using public transportation	13	18
Financial counseling	13	18
Help applying for medical benefits like Medicaid	12	17
Help opening a bank account	12	17

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Refugee respondents had lived in the United States an average of ten years. Their long tenure may explain, in part, why when asked to indicate the biggest challenges currently facing them, refugee respondents most frequently replied “none” (29 percent) (Table 18). In addition, nearly one-fourth identified as current challenges false understandings or misperceptions of refugees in the news (25 percent) or in the community (25 percent), followed by:

- Difficulty finding employment that matched their educational or skill level or background (17 percent).
- Housing-related difficulties (16 percent).
- Financial difficulties (16 percent).
- Limited time or resources for continued education (16 percent) (Table 18).

Table 18. Biggest Challenges Currently Facing Refugee Respondents

Respondents were permitted to check all that apply from the list below.

Response	69	
	Number	Percent
Difficulty finding employment	2	2.9
Difficulty finding employment that matches my educational or skill level or background	12	17.4
Housing-related difficulties	11	15.9
Financial difficulties	11	15.9
Limited time or resources for continued education	11	15.9
Difficulty learning English	3	4.4
Difficulty finding childcare	6	8.7
Difficulty attending English as a second language classes	2	2.9
Lack of appropriate mental health care services	6	8.7
Lack of appropriate physical health care services	4	5.8
Difficulty navigating the health care system	4	5.8
Difficulty applying for public benefits	0	0.0
Difficulty qualifying for public benefits	5	7.3
Lack of English as a second language classes for women and girls	2	2.9
Lack of childcare at English as a second language classes	1	1.5
Lack of driver's education classes for women	5	7.3
False understandings or misperceptions about refugees in the news	17	24.6
False understandings or misperceptions about refugees in the community	17	24.6
All of the Above	4	5.8
Other	3	4.4
None	20	29.0
I don't know	1	1.5
I prefer not to respond	3	4.4

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Asked to identify the “main false ideas” about refugees in the United States, respondents identified at high rates the belief that refugees “pose a security risk to US citizens” (84 percent), use too many benefits and drain public finances (83 percent), and take the jobs of native-born citizens (74 percent). Refugee respondents identified as false ideas at higher rates (than non-refugees) that refugees were uneducated (63 versus 42 percent) and not hard workers (53 versus 28 percent) (Table 19).

Table 19. Main False Ideas about Refugees in the United States.

Ranked on “Number of refugees,” column 2.

Responses	Total	Refugees	Non-Refugees		
	Percent	Number	Percent	Number	Percent
	407	113	294		
Refugees use too many benefits and drain public finances	83	82	73	256	87
Refugees pose a security risk to US citizens	84	82	73	260	88
Refugees are uneducated	48	71	63	124	42
Refugees take the jobs of native-born citizens	74	70	62	231	79
Refugees are not hard workers	35	60	53	82	28
Most refugees are Muslim	32	41	36	90	31
The US resettles more refugees than it can accommodate	55	36	32	186	63
Refugees want to leave their home country	35	33	29	110	37
All refugees come from a certain country or region	13	17	15	37	13

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Table 20 on help refugees would most have liked to receive illustrates how refugee needs change over time. While some needs like housing services and financial counseling persist over many years, other needs diminish, such as help in learning English, understanding US culture, and transportation to appointments or classes. At the same time, refugees report needing additional help in meeting more advanced integration needs, such as starting businesses, over time. Overall, these findings highlight the need for services that adapt to the changing ambitions and needs of refugees.

Table 20. Additional Help Refugee Respondents Would Most Have Liked to Receive, by Selected Period in the United States.

Respondents were permitted to check up to 5 responses from a list.

Responses	First 3 Months		3 months to two years		Currently	
	Number	Percent	Number	Percent	Number	Percent
	100		71		99	
Employment skills training	-	-	32	45	42	42
Help starting a business	-	-	14	20	31	31
Connections to employers	-	-	28	39	28	28
Additional services related to housing	26	26	21	30	27	27
None	-	-	3	4	23	23
Help getting my previous degrees or credentials recognized or accredited	30	30	16	23	21	21
Financial counseling	25	25	20	28	21	21
Finding and enrolling in other classes that meet my needs	29	29	24	34	14	14
More help learning English	34	34	17	24	13	13
More help to understand American culture	25	25	20	28	13	13
Help finding or enrolling in a school or vocational program	19	19	19	27	11	11
More help enrolling my children in school	25	25	6	8	6	6
Help finding medical care or setting up doctor appointments	23	23	10	14	6	6
Help finding mental health care or setting up appointments with a psychologist, etc.	12	12	4	6	6	6
More help applying for medical benefits like Medicaid	13	13	4	6	4	4
More interpretation	12	12	3	4	4	4
Transportation to appointments or classes	25	25	7	10	3	3
More help using public transportation	11	11	6	8	1	1
More help finding a job	44	44	-	-	-	-

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

5. Integration Metrics

Immigrant integration is an overarching goal of the resettlement program. The integration process occurs on different timelines and in different ways for different persons. A series of survey questions sought to identify integration metrics over time for distinct refugee populations, particularly men, women, and children. In addition, the survey included a question about the needs and concerns of LGBTQ refugees. Table 21 shows significant alignment between refugee and non-refugee respondents on the measures of successful integration after 90 days in the United States. Survey respondents reported at high rates that the most important measures of refugee integration after 90 days were enrollment of children in school; safe and affordable housing; knowing where to buy food and other necessities; learning to use public transportation or car-pooling; and employment of a household member who earns enough to meet basic household needs.

Table 21. Most Important Measures of Refugees’ Successful Integration After About 90 Days in the United States.

Ranked on “Refugees,” column 2.

Respondents were permitted to check up to 5 responses from a list.

Responses	Total	Refugees	Non-Refugees
	Percent	Percent	Percent
Children are enrolled in school	73	75	73
Learning to use public transportation, when applicable, or having access to a carpool	66	70	65
At least one member of the household is employed in a job earning enough money to pay rent, mortgage, food, transportation, and other necessities	55	63	52
Having safe and affordable housing	70	62	73
Knowing where to buy food and other necessities	67	56	71
Knowing how to find emergency medical care	37	39	37
Making US social connections	36	32	37
Opening a bank account	17	27	13
Knowing how to call the police	17	20	16

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Table 22 illustrates how integration metrics change over time. High percentages of respondents identified as the most important measures of integration after two years: employment; the ability to navigate life in the United States; the ability to speak English; a feeling of belonging; and understanding US culture. By year five, they reported as most important the ability to speak English, a feeling of belonging, earning enough to pay for necessities, the success of refugees’ children, and the ability to navigate day-to-day life. Refugee respondents identified at higher rates than non-refugees the importance of owning a home (47 to 14 percent) at year five.

Table 22. Most Important Measures of Refugees’ Successful Integration at Two and Five Years in the United States.

Ranked on “Refugees,” column 2.

Respondents were permitted to check up to 5 responses from a list.

Responses	Two Years			Five Years		
	Total	Refugees	Non-Refugees	Total	Refugees	Non-Refugees
	Percent	Percent	Percent	Percent	Percent	Percent
At least one member of the household is employed in a job earning enough money to pay rent, mortgage, food, transportation, and other necessities	82	79	84	64	55	67
Ability to navigate day-to-day life in the United States	82	79	84	50	49	50
Ability to speak English with little or no help from an interpreter	66	79	60	69	66	71
Understanding of US culture	43	55	38	48	60	44
Minimal dependence on public benefits	44	51	42	45	43	46
Feeling of belonging in the US	62	46	68	67	61	69
Success of refugees’ children	41	38	42	60	59	61
Having friends from the US	36	27	40	41	32	45
Owning a home	2	4	1	23	47	14
Other	5	2	6	5	4	6

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

Table 23 and Table 24 indicate the services refugee men and refugee women most need to integrate during their first three months, between three months and two years, and after two years. These tables underscore the need for a resettlement system that can adapt to the distinct and changing needs of different populations of refugees and highlight some of the inter-related services needed to achieve this goal.

Survey respondents identified needs that persist over all three periods, as well as those that decline or increase as refugees integrate. Non-refugee respondents²⁷ report that during their first three months, refugee men most need assistance in finding employment (68 percent), ELL courses (59 percent), orientation to life in the United States (56 percent), employment skills training (40 percent), and transportation to appointment or classes (29 percent).

²⁷ As explained previously, the term “non-refugee” in this paper includes refugees and former refugees working for resettlement agencies and other entities involved in the resettlement process.

Between three months and two years, their “most needed” services include ELL courses (57 percent), employment skills training (57 percent), orientation to life in the United States (54 percent), financial counseling (45 percent), assistance finding employment (45 percent), and recognition of job or educational credentials (39 percent). After two years, financial counseling (56 percent) was their most frequently cited need, followed by employment skills training (50 percent), recognition of job or educational credentials (45 percent), orientation to life in the United States (38 percent), ELL courses (37 percent), and mental health care or facilitation of mental health access (33 percent).

Table 23. Services Most Needed by Refugee Men to Successfully Integrate, by Selected Length of Residence.

Ranked in Column 1.

Respondents were permitted to check up to 5 responses from a list.

Responses	During first 3 months		Between Three Months and Two Years		After Two Years	
	Number	Percent	Number	Percent	Number	Percent
Total	273		269		263	
Assistance finding employment	186	68	114	45	63	24
ELL Courses	160	59	153	57	97	37
Orientation to life in the US	152	56	142	54	99	38
Employment skills training	110	40	138	57	132	50
Transportation to appointments or classes	79	29	32	12	6	2
Physical health care or facilitation of physical health care access	66	24	45	16	40	15
Financial counseling	59	22	115	45	146	56
Recognition of job or educational credentials	59	22	117	39	119	45
Mental health care or facilitation of mental health care access	59	22	80	32	86	33
Assistance applying for medical benefits	57	21	9	4	12	5
Assistance applying for cash assistance	56	21	7	1	4	2
Additional housing benefits or services	49	18	67	22	69	26
More help using public transit or finding carpools	39	14	25	9	6	2
Help enrolling children in school	35	13	6	2	2	1
Help opening a bank account	25	9	24	11	15	6
More interpretation	19	7	23	10	20	8
Do not know	12	4	16	6	24	9

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

The most frequently identified needs of refugee women over the three periods (Table 24) differ significantly from those of men. These differences reflect, in part, the greater childcare responsibilities borne by refugee women and their slower integration into the labor market. Survey respondents reported that refugee women “most need” during their first three months: orientation to life in the United States (81 percent), help finding childcare (64 percent), ELL courses (53 percent), help enrolling children in school (49 percent), transportation to appointments or classes (48 percent), ELL courses appropriate to women and girls (42 percent), and physical health care or physical health care access (42 percent).

“The most frequently identified needs of refugee women differ significantly from those of men.”

The most frequently identified needs of refugee women between three months and two years are employment skills training (69 percent), orientation to life in the United States (66 percent), assistance in finding employment (65 percent), help finding childcare (51 percent), ELL courses (46 percent), ELL courses appropriate to women and girls (43 percent). After two years, refugee women most need skills training (81 percent), followed by financial counseling (69 percent), assistance finding employment (55 percent), ELL courses (46 percent), orientation to life in the United States (43 percent), and help finding childcare (41 percent).



Table 24. Services Most Needed by Refugee Women to Successfully Integrate, by Selected Length of Residence.

Ranked in Column 1.

Respondents were permitted to check up to 5 responses from a list.

Responses	During first 3 months		Between Three Months and Two Years		After Two Years	
	Number	Percent	Number	Percent	Number	Percent
Total	194		190		190	
Orientation to life in the US	157	81	125	66	81	43
Help finding childcare	125	64	97	51	78	41
ELL courses	102	53	114	60	87	46
Help enrolling children in school	95	49	13	7	3	2
Transportation to appointments or classes	93	48	47	25	19	10
ELL courses appropriate to women and girls	82	42	81	43	50	26
Physical health care or facilitation of physical health care access	82	42	45	24	30	16
Assistance finding employment	76	39	123	65	104	55
Employment skills training	69	36	131	69	153	81
Mental health care or facilitation of mental health care access	69	36	88	46	74	39
More help using public transit or finding carpools	37	19	35	18	13	7
Assistance applying for cash assistance	37	19	5	3	6	3
Assistance applying for medical benefits	30	15	9	5	9	5
Financial counseling	27	14	75	39	131	69
Additional housing benefits or services	26	13	39	21	47	25
Recognition of job or educational credentials	21	11	30	16	59	31
More interpretation	17	9	26	14	21	11
Help opening a bank account	13	7	26	14	20	11

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

6. Obstacles to Integration

Non-refugee respondents most frequently reported that the main obstacles to the integration of refugee men were:

- Difficulty attending ELL classes during work hours (64 percent);
- Lack of employment opportunities appropriate to their educational level, skills or background (61 percent);
- Limited time or resources for continued education (59 percent);
- Difficulty learning English (52 percent); and
- Housing-related difficulties (49 percent) (Table 25).

To open-response questions, respondents identified as obstacles to the integration of men: digital literacy, (lack of) anti-domestic violence training, the need for more training to improve their job prospects, the new public benefit rule, transportation to work, low wages, the need for more mental health services, cultural role adjustment, and lack of motivation. Some said that it could be difficult for men to adjust to their new cultural roles, to express trauma in appropriate ways, and to adapt to US laws related to parenting. One said that psychosocial support services had “left men behind.”

“Some said that it could be difficult for men to adjust to their new cultural roles, and one survey respondent said that psychosocial support services had ‘left men behind.’”

By contrast, survey respondents most frequently identified the main obstacles to integration by refugee women as:

- Difficulty finding childcare (75 percent).
- Difficulty learning English (59 percent).
- Limited time or resources for continued education (42 percent).
- Lack of childcare at ELL classes (40 percent).
- Difficulty attending ELL classes for other reasons (36 percent).
- Lack of appropriate mental health services (35 percent) (Table 25).

Invited to elaborate on their responses, one respondent commented, “Childcare is the barrier” to all other services. Other respondents identified as obstacles to refugee women: affordable housing; the different cultural roles of women in the United States; lack of affordable driver’s education classes; lack of ELL classes for those with low literacy or the illiterate; digital literacy challenges; navigating children’s education and school systems; transportation difficulties; poorly paying jobs; and lack of friendships with US residents.



Table 25. Main Obstacles to Successful Integration of Refugees in Service Area, by Gender.

Ranked in Column 1.

Respondents were asked to check all options that apply from a list.

Responses	Men		Women	
	Number	Percent	Number	Percent
Responses	236		223	
Difficulty attending ELL classes due to working hours	152	64	52	23
Lack of employment opportunities appropriate to educational level or skills or background	145	61	72	32
Limited time or resources for continued education	139	59	94	42
Difficulty learning English	123	52	131	59
Housing-related difficulties	116	49	*	*
Lack of appropriate mental health care services	99	42	77	35
Difficulty navigating the health care system	76	32	75	34
Difficulty attending ELL classes due to transportation	71	30	69	31
Difficulty finding childcare	56	24	168	75
Lack of childcare at ELL classes	46	19	89	40
Lack of employment opportunities	43	18	54	24
Difficulty applying for public benefits	42	18	29	13
Difficulty attending ELL classes for other reasons	30	13	80	36
Difficulty qualifying for public benefits	22	9	17	8
All the above	21	9	30	13
Inadequate funding for services focused on women	-	*	77	35
Lack of women's ELL classes	-	*	47	21
Lack of women's drivers' education classes	-	*	76	34

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

As Table 26 indicates, non-refugee survey respondents report that refugee children face unique obstacles to integration, including limited funding or capacity to engage refugee parents in their children’s education, difficulties communicating with refugee families, and the unfamiliarity of teachers and school staff with the cultures and backgrounds of refugee children and families.

Table 26. Main Obstacles to Successful Integration of Refugee Children Aged 5 to 18 in State of Residence.

Ranked on the number of responses.

Respondents were asked to check all options that apply from a list.

Responses	314	
	Number	Percent
Limited funding or capacity to engage refugee parents with their children’s education	171	54
Difficulties communicating with refugee families	147	47
Teachers and staff are unfamiliar with the cultures and backgrounds of refugee children and their families	137	44
School counselors lack the capacity, training, or experience to help children that have experienced trauma	131	42
Many refugee children live in neighborhoods with few resources	126	40
Inadequate funding for services focused on refugee children	116	37
Inadequate funding or capacity to train refugee students to use key educational technologies and online resources	116	37
School districts lack resources to offer ELL classes for refugee children	109	35
Inadequate funding for services focused on ALL children, including refugee children	100	32
Bullying of refugee children	98	31
All the above	86	27

Source: Center for Migration Studies Refugee Resettlement Survey: 2020

7. LGBTQ Refugees

LGBTQ refugees have the same basic needs as other refugees – educational, housing, employment, transportation, psychosocial, and other – but unique challenges in meeting these needs due to their possible rejection by immigrants from their own countries and residents of their new communities. Asked to “describe any unique obstacles or challenges faced by, or pressing needs” of LGBTQ refugees or other refugees, respondents pointed to discrimination and hostility toward LGBTQ persons in their new communities and places of origin.

Some LGBTQ refugee youth endure bullying in school. LGBTQ refugees also suffer employment discrimination. Non-LGBTQ persons often refuse to live with LGBTQ refugees and, as a result, they need to find their own housing, which can be expensive. Isolation and loneliness make it difficult for them to secure transportation, housing, and social and economic independence. Lack of trust in authorities can exacerbate their sense of isolation.



LGBTQ refugees have fled persecution and, thus, feel unsafe with their “own people.” They often face discrimination from persons from their own nations and ethnic communities. Some fear “coming out” and have difficulty voicing their identity. Many LGBTQ refugees find it difficult to access US LGBTQ communities. Some are not accepted by their families or by religious organizations. Resettlement staff, including refugees, often do not feel comfortable with LGBTQ clients and receive insufficient training on their needs.

Past trauma, combined with lack of acceptance and isolation, can cause and exacerbate mental health challenges. The resettlement system, respondents said, needs to devote more attention to finding safe, accessible, and welcoming communities for LGBTQ refugees, with appropriate integration services and better-trained case managers and resettlement staff.

“Respondents said the resettlement system needs to devote more attention to finding safe, accessible, and welcoming communities for LGBTQ refugees.”

V. Recommendations

This report illustrates the need for the Biden and subsequent administrations to prioritize the broad revitalization of the refugee program, building on its historic strengths.²⁸ In particular, the Biden administration should:

- Make it a high priority to work with Congress to rebuild and refund USRAP’s infrastructure

²⁸ The report’s recommendations build on the study’s findings. However, the authors also recognize the need to expand migration and resettlement opportunities for refugees beyond current USRAP programs. To that end, CMS recommends that the new administration pilot a private resettlement program as a complement to the existing program, and explore opening traditional employment-based immigration visas to qualified refugees.

and its community-based resettlement networks in anticipation of far greater admissions.

- Increase refugee admission ceilings over each of the next four years to levels that resettlement agencies can accommodate, that reflect the size and diversity of the global refugee population, and that honor the nation's historic role as an international leader in resettlement.
- Provide stable, multi-year funding for national and local resettlement agencies so that they can expand their capacity, invest in necessary staffing, and better respond to large-scale secondary migration.
- Rigorously adhere to the legally mandated consultative processes for assessing the global refugee situation, establishing refugee admissions levels and categories, and engaging Congress, states and localities, and other stakeholders in the resettlement process.
- Rescind the Trump administration's "Executive Order on Enhancing State and Local Involvement in Refugee Resettlement," which allows states and localities to veto resettlement in their jurisdictions.
- Strengthen quarterly consultations with resettlement stakeholders devoted to information sharing, identifying the needs of refugees, and building accountability for the program's success.
- Educate the public, Congress, and receiving communities on the contributions and aspirations of refugees, the purpose of USRAP, its strengths, and its need for broad community engagement and support.
- Commit to collecting better data on the integration outcomes of refugees and their children in order to inform and strengthen resettlement services, and establish deeper partnerships with research institutions to advance this goal.
- Support research, informed by refugees, on their lived experiences and on USRAP's responsiveness to their needs and to the needs of their communities.

The report also argues for specific programmatic improvements and greater responsiveness to the individual needs of refugees over time. Utilizing this first comprehensive survey of its kind, resettlement stakeholders should closely review and mine its findings for ways to revitalize and strengthen the program. Among other recommendations, USRAP should:

- Build on the guiding principle of "client-centered" case management (ORR 2020b) to assess the challenges, needs and goals of each refugee and develop tailored plans of services and programs in response.
- Prioritize helping recently arrived refugees to connect with employers, learn English, secure job skill training, access culturally attuned and trauma-informed medical and mental health services, attend appointments, enroll their children in school, apply for benefits, and use public transportation.
- Offer services that respond to the changing needs, challenges and ambitions of diverse

refugees based on their individual needs and, as necessary, for longer than current periods.

- Afford refugees, particularly those with vulnerabilities, a greater say in the content, length, and accessibility of programs to promote their settlement and integration.
- Establish an advisory group of refugees to meet regularly with DOS and ORR officials, resettlement agency representatives, state refugee coordinators and state refugee health coordinators on how to strengthen USRAP and to provide refugees a greater voice in their own resettlement.
- Adopt a more expansive and flexible approach to resettlement that recognizes the importance of work but defines integration more broadly than self-sufficiency through early employment.
- Do not deny refugees basic services for failing to accept early employment in entry-level jobs that may not be compatible with their prior education, professional achievements, and long-term goals.
- Seek alternatives to early employment in low-skilled positions for refugees with pre-existing skills needed in the US economy, including programs that help them gain certification of their credentials.
- Afford refugees the time and training to find work that reflects their skills and credentials, and offer services (such as more childcare and mental health services) that allow refugees to study, learn English, and otherwise improve their work prospects.
- Allow refugees to enhance their work-related skills and prospects through financial support, training, and technical assistance in starting businesses.
- Provide extended case management and support services to refugee children and youth that address their unique needs and obstacles to their integration.
- Pilot an on-line integration school for refugee youth that meets their unique educational, social and emotional needs, particularly during the COVID-19 pandemic, and that offers them access to the internet and digital literacy training.
- Provide funding and access to more extensive, culturally attuned and trauma-informed mental health services.
- Provide greater support in navigating the complex US health-care system.
- Devote more specialized programming and individualized attention to finding safe, accessible, welcoming communities and living situations for LGBTQ refugees.
- Offer LGBTQ refugees extended case management services, more programs targeted to their specific and diverse needs, and greater medical and psychosocial services.
- Extend the Section 8 rental assistance program to refugees, given their persistent difficulties in finding safe and affordable housing.

- Prioritize and expedite family reunification.

Successful programs for refugees or immigrants invariably face criticism for excluding native-born persons. Often, these criticisms mask hostility to the presence of refugees and immigrants or reflect a zero-sum mindset regarding resource distribution. However, sometimes they speak to legitimate frustrations and the difficulty of native-born and other US residents in obtaining comparable services and benefits. The resettlement program should be preserved and strengthened. Where possible, USRAP should also work closely with mainstream social service programs to identify needs that are common to refugees and other vulnerable populations and to promote the ability of refugees to access those programs and additional private funding streams. Conversely, greater research and analysis are needed on whether USRAP might serve as a model for promoting the well-being and advancement of other underserved and impoverished US communities, and whether more of its community-based programs for refugees should be extended to other populations.

"The resettlement program should be preserved and strengthened. USRAP should also work closely with mainstream social service programs to identify needs that are common to refugees and other vulnerable populations."



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