Refugee Economic Self-Sufficiency

in the US Resettlement Program

Eleanor Ott

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Department of Social Policy and Intervention
Hertford College
University of Oxford

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Abstract

Globally, twenty-seven countries have resettlement programs associated with UNHCR – representing commitments to the international refugee framework and domestic commitments to those refugees resettled. Since 1975, the US has resettled over three million refugees, including over 75,000 Bhutanese refugees since 2008 – more than all other countries combined on both accounts. The US Office of Refugee Resettlement has the mandate to 'make available sufficient resources for employment training and placement in order to achieve economic self-sufficiency among refugees as quickly as possible' (*The Refugee Act of 1980*). Nevertheless, their economic self-sufficiency and the intertwined ideas of employment and wellbeing remain little examined.

A global systematic review of available high-quality evidence examined whether interventions affect resettled refugees' economic self-sufficiency and wellbeing. Although 9,260 citations were reviewed from a wide variety of academic, policy, and grey literature, no studies met inclusion criteria. This Campbell-registered systematic review concludes that evidence is insufficient to determine if programs affect resettled refugees' economic self-sufficiency and wellbeing.

Subsequently, qualitative research explored existing interventions to improve the economic self-sufficiency of resettled refugees, their theories of change, and perceptions of effectiveness in Pittsburgh, Pennsylvania. Program design follows a policy mandate and expects that initial employment leads to sustained self-sufficiency and wellbeing, albeit without measuring these outcomes or providing long-term assistance. The findings serve as a basis for future research and reveal programming implications for the Bhutanese refugee community in Pittsburgh and broadly for refugee resettlement.

Next, a cross-sectional survey of 145 randomly selected Bhutanese refugees in Pittsburgh (a response rate of 92.9%) was conducted to provide groundbreaking demographics, rates of economic self-sufficiency, and correlates with improved outcomes. The population was overwhelmingly low-income with high usage of certain assistance such as food assistance. Both bivariate relationships and predictive models for employment, gross income, wages, assistance usage, and having 'enough' money to pay the bills were examined. Overall, these paint a complex picture, including the potential importance of neighborhoods, household size, and religious affiliation as well as a more typical picture of the importance of gender, education levels, and time in the country for certain measures of employment, earnings, and household self-sufficiency.

The evidence-based perspective on the economic self-sufficiency of resettled refugees shows that little is known globally, including the potential for interventions to cause harm or success. Understanding the employment services and perspectives of economic self-sufficiency and wellbeing for the Bhutanese population provides a lens to view not only the challenges and successes of this population, but also national and international obligations. As one focus group participant stated, 'Government should understand the nature of the refugees arriving and put us with jobs that… allow the life to sustain.'

Primary publications and presentations from this thesis

Publications:

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Ott, E. (2013). The labour market integration of resettled refugees**,** *UNHCR*, Nov. Available from: http://www.unhcr.org/5273a9e89.html.

Ott, E. & Montgomery, P. (2013). Protocol: Interventions to improve the economic self-sufficiency and well-being of resettled refugees: A systematic review**,** *The Campbell Collaboration*, May. Available from: www.campbellcollaboration.org/lib/project/246/.

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Ott, E. Uncovering resettled refugees' voices, RSC 2014 Conference 'Refugee Voices', Oxford, March 2014.

Ott, E. Review of the labour market integration of resettled refugees, Annual Tripartite Consultations on Resettlement, Geneva, July 2013.

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AOGP	Annual Outcome Goal Plan. This is the federal reporting which covers those resettled refugees not on the matching grant program during their time of eligibility for refugee-specific employment services.
BCAP	The Bhutanese Community Association of Pittsburgh.
CAP	Customer Assistance Program. A name for an energy company's plan for financial assistance.
CARR	Community Assistance and Refugee Resettlement Division of the Northern Area Multi-Service. This division resettles refugees in Pittsburgh.
CUREC	Central University Research Ethics Committee.
ESL	English as a Second (or Other) Language
GAO	US Government Accountability Office.
HIAS	Hebrew Immigrant Aid Society. A national voluntary agency for refugee resettlement for JF&CS.
IRC	International Rescue Committee. A national voluntary agency for the resettlement of refugees.
JF&CS	Jewish Family and Children's Service. An organization which resettles refugees in Pittsburgh.
LIHEAP	Low-Income Heating Assistance Program. This is a federally-funded program for heating assistance.
NAMS	Northern Area Multi Service Center ('Northern'). A resettlement agency for refugees in Pittsburgh
ORR	The US Office of Refugee Resettlement.
RSS	Refugee Social Services.
R&P	Reception and Placement
SNAP	Supplemental Nutrition Assistance Program. The US Federal program that provides food assistance for low-income individuals and families, commonly called 'food stamps.'
TAG	Targeted Assistance Program. An employment program from the US Office of Refugee Resettlement.
TANF	Temporary Assistance for Needy Families. The primary US welfare program.
UNHCR	The United Nations High Commissioner for Refugees. The UN agency charged with assisting refugees.
USCCB	The United States Conference of Catholic Bishops. A national voluntary agency for resettlement with an affiliate agency in Pittsburgh (Catholic Charities).
USCRI	The United States Committee for Refugees and Immigrants. USCRI is the national voluntary agency for NAMS.
WIC	Women, Infants, and Children Program. The supplemental nutrition program for low-income pregnant and postpartum women, infants, and children up to the age of five who are found to be at nutritional risk.
Volag	*Vol*untary *ag*ency for the resettlement of refugees.

Chapter 1. Contextualizing and Defining US Refugee Resettlement

Overview

Globally, over 51 million people are forced migrants as a result of violence and persecution; 11.7 million of them have crossed a border and are classified as refugees as defined by the *1951 Convention Relating to the Status of Refugees* (UNHCR, 2014). The immediate concern arises of protection: identifying which countries or entities will provide temporary or permanent asylum and offer state services such as legal rights, social services such as education and medical care, and physical security from persecution. Despite the existing need, less than 1% of refugees are formally resettled: that is, assisted by governments to settle in a third country. This subset is given legal rights generally solving physical protection and human rights issues, but triggering compounding social issues, including the economic integration and general wellbeing of these individuals. Addressing these issues can be difficult, as refugees arrive in their country of resettlement with experiences of forced migration and may have different cultural norms than other residents.

Resettlement represents significant commitments by countries – morally, legally, and financially – that create parallel obligations to understand how the resources are used, how the refugees are faring, what programming works, and whether programming causes more harm than good. This thesis will use an evidence-based perspective to examine interventions to improve the economic self-sufficiency and wellbeing of resettled refugees.

Before examining these issues in an evidence-based perspective, this first chapter aims to define the topic of refugee resettlement and its importance. It does so by examining the international refugee regime and the role of the United States (US) refugee resettlement program within it, followed by tracing the evolution of the US resettlement program, and finally by discussing the components and measures of the program today. The context is critical to understanding why research on refugee resettlement is important, what it is that will be evaluated, and the backdrop to the theory and research approach discussed in Chapters 2 and 3.

The role of resettlement for refugees

Globally, twenty-seven countries have formal resettlement programs associated with UNHCR – representing a commitment to the international refugee framework and a domestic commitment to those refugees resettled (Office of Refugee Resettlement National Consultation, 2012). The US refugee resettlement program is held up as an archetype of this commitment. Since 1975, the US has resettled over three million refugees, more than all other countries combined (Bruno, 2011; US Department of State, n.d.). In the federal fiscal years (FY) 2009 and 2010, the US Refugee Admissions Program (USRAP) resettled close to 75,000 refugees per fiscal year (US Department of State, 2011), although the number dropped to under 59,000 refugees in FY2011 and FY2012, largely as a result of security measures. The number went back up in FY2013, approaching the current ceiling of 70,000, and similar numbers are expected in the current fiscal year. These numbers represent the vast majority of resettled refugees each year, broad support for the resettlement program in the US, and a dedication by the US government to use resettlement to create a durable solution to protect

vulnerable refugee populations and resolve protracted refugee situations (UNHCR, 2011).

The role this resettlement plays as a 'durable solution' for refugees hinges in large part on the programming of the resettlement system itself. A 2010 US Senate report, *Abandoned upon arrival: Implications for refugees and local communities burdened by a U.S. Resettlement System that is not working*, charged that 'resettlement efforts in many US cities are underfunded, overstretched, and failing to meet the basic needs of the refugee populations they are currently asked to assist' (p. 1). Similarly, a report prepared for a refugee resettlement agency commented that, at the end point of resettlement services, 'Ranging from 90 days to 9 months, refugees become part of the native poor here in America. This bestows on them the problems poor Americans have on top of the issues they already face coming from their refugee experience' (Dickerson, Leary, Merritt, & Zaidi, 2010, p. 21). The literature indicates that resettled refugees join 'the working poor' in the US and 'the unemployed poor' in other resettlement countries at rates higher than other immigrant and native-born populations (Connor, 2010; Cortes, 2004; Hugo, 2010), as shown in Table 1 in the chapter appendix. Data on resettled refugees are not systematically tracked, despite the significance of the size of this resettlement population in the US, the role of resettlement as one of the major frameworks for durable solutions, and indications of poor outcomes. This means that the stated goal of the program of economic self-sufficiency is left largely unexamined.

This chapter outlines the background behind US refugee resettlement including the theoretical role of the program, the history of the program, and the tangible interventions and measures of the program.

Defining refugees legally and theoretically

Normative systems categorize refugees and forced migrants as particularly vulnerable and of particular concern, underpinning the significance of analysis of resettled refugees in US society. Understanding how and why these categories are separated from the rest of society helps explain why they should be studied.

Refugees are one type of forced migrant[1] who fall under the legal definition from the *1951 Convention Relating to the Status of Refugees* and its *1967 Protocol* of someone who has crossed an international border,

> …owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality [or habitual residence for those without nationality] and is unable or, owing to such fear, is unwilling to avail himself to the protection of that country (*Convention and Protocol*).

The crux of US law (INA 101(a)(42)) aligns with this definition (US Congress, 1993), and the US resettles refugees based on a hierarchy of three categories: 'P-1: Individual referrals by U.S. Embassy, UNHCR or designated NGOs; P-2: Specific groups of concern identified by the USRAP, usually specific groups within a certain nationality; and, P-3: Family reunification cases for designated

[1] The definition of forced migrants will be discussed later, but is generally accepted as those in need of a new state of residency because of the inadequacy of their state of residence. This definition would be more expansive than the legal definition of a refugee, incorporating those displaced internally in their country and across borders and many displaced due to environmental disasters, development projects, and/or generalized violence.

nationalities' (USCIS, 2011).[2] This legal definition of a refugee will be used in this paper although the use of the term is debated and the experience of being a refugee is more complex than the label (Zetter, 1991; Zetter, 2007).

Broadly speaking, human movement does not easily fall into legal categories and instead can be more accurately represented as a continuum of 'push' and 'pull' factors of 'force and choice' (Gibney, 2004; Van Hear, 1998). This creates an asylum-migration nexus where it becomes complicated to separate legal refugees from those migrating for financial and other reasons. Furthermore, while refugees may have a unique set of experiences from their forcible flight, their life experiences may overlap with economic migrants who have left their homes for a variety of reasons.

However, forced migrants are still separated from other types of migrants by a lack of state protection which justifies the international refugee regime's involvement, including resettlement programs which seek to rectify the lack of state protection by integrating refugees into a new state. Numerous recent authors use this framework: that the lack of state protection separates forced migrants from other migrants (Betts, 2009; Betts & Kaytaz, 2009; Gibney, 2004; Haddad, 2003; Haddad, 2008; Shacknove, 1985; Zolberg, Suhrke, & Aguayo,

[2] The US definition includes an unwillingness to avail oneself of the protection of the country of nationality or habitual residence due to persecution *or* a well-founded fear of persecution, the ability for the President to specify a nationality or country of habitual residence instead of proving an unwillingness to avail oneself of their protection, and an exclusion from refugee status for 'any person who ordered, incited, assisted or otherwise participated in the persecution of any person on account of race, religion, nationality, membership in a particular social group, or political opinion' (US Congress, 1980). In practice, this acts much like the UN definition although it is more flexible, including the ability for a President to declare a group 'refugees'.

1989). Forced migrants often become synonymous with refugees and are defined by Gibney (2004) as:

> …people in need of a new state of residence, either temporarily or permanently, because if forced to return home or remain where are they are they would – as a result of either brutality *or* inadequacy of their state – be persecuted or seriously jeopardize their physical security or vital subsistence needs (p. 7).

Forced migrants defined as such thus suffer from a failure of state protection for their basic human rights and seek outside assistance (Betts, 2009; Betts & Kaytaz, 2009; Gibney, 2004; Haddad, 2003; Haddad, 2008; Shacknove 1985; Zolberg et al., 1989). This definition reflects a separate set of circumstances from voluntary migrants who can seek domestic recourse.

Implicit in this definition are the following principles, common in the contemporary politics of liberal democratic states, that: i) everyone has a right to basic human rights, and ii) states have an obligation to protect human rights as part of their sovereignty; thus, iii) forced migrants result when states fail to protect human rights (Betts, 2009; Betts & Kaytaz, 2009; Gibney, 2004; Haddad, 2003; Haddad, 2008; Shacknove, 1985).[3] The international community, then, has an obligation to protect forced migrants' human rights (Turton, 2003). Although types of forced migration, such as migration due to natural disasters or the risk of starvation, fall outside the narrow legal refugee definition, those forced migrants legally defined as refugees have particular international rights from the *1951 Convention* and *1967 Protocol* and the protection of an international regime.

[3] The cited authors express the overarching ideas. However, the obligations of states and exact definitions of human rights differ between authors.

The absence of state protection for those legally defined as refugees justifies an international refugee regime and a US resettlement program, which seeks to provide protection by integrating refugees into a new state. Through the Westphalian lens of the world of sovereign states, the creation of states produced the concepts of state responsibility for the protection of the basic human rights of its inhabitants and of the forced migrant who lacks state protection (Gibney, 2004; Haddad, 2003; Haddad, 2008). It follows that if the international state system created the forced migrant, the international state system has a particular responsibility to this population (Ott, 2011). This overall responsibility of international states towards forced migrants strengthens the more specific responsibility towards those forced migrants with the greatest legal rights: refugees.

Defining obligations to resettled refugees

Acknowledging this particular obligation to protect, the international community has created a basic framework for forced migrants who fall under the legal definition of refugees. This framework includes 'durable solutions' as well as the institutionalization of the pursuit of these solutions through national structures and organizations such as UNHCR: the UN Refugee Agency. UNHCR generally acknowledges 'three traditional durable solutions for refugees: voluntary repatriation, resettlement and local integration' (UNHCR, 2011b).[4] These three durable solutions are widely accepted by other organizations and liberal democratic states, including the US government. The US State

[4] Resettlement is sometimes defined as a last resort: 'resettlement to a third country in situations where it is impossible for a person to go back home or remain in the host country' (UNHCR, 2011a).

Department's Bureau of Population, Refugees, and Migration (PRM) acknowledges the same three durable solutions by framing them as: 'Repatriation - going home when they are no longer at risk of persecution'; 'Local Integration - settling permanently in the country to which they have fled' and, 'Resettlement - settling permanently in a third country' (US Department of State, 2010).

Defining the problem and goals of the US refugee resettlement

Within the US, the resettlement program creates a separate category and obligation for refugees. Like other states, the US signals a responsibility to refugees in their country by designing particular access to the social welfare system to facilitate their inclusion in society (Hein, 1993). The primary mission of the US resettlement program, as professed on the Office of Refugee Resettlement (ORR) website, is: 'founded on the belief that newly arriving populations have inherent capabilities when given opportunities, the Office of Refugee Resettlement (ORR) provides people in need with critical resources to assist them in becoming integrated members of American society' (ORR, 2011). What, then, does it mean for a refugee to be an integrated member of American society? This question remains unanswered as refugee integration continues to be a loose and undefined concept in the US. However, one integral component is economic integration through economic self-sufficiency and labor market integration.

From one perspective, conceptualization of integration through economic self-sufficiency is straightforward and prevalent throughout governmental programs. Economic self-sufficiency is the first point mentioned in the *1980 Refugee Act*

and its reauthorization in 2002, and the idea of self-sufficiency is reiterated eleven more times in the legislation. The *1980 Refugee Act* states that the Director of ORR shall 'make available sufficient resources for employment training and placement in order to achieve economic self-sufficiency among refugees as quickly as possible' (8 U.S. Code § 1522-a-1-A). The Office of Refugee Resettlement phrases this obligation on its current website as 'provid[ing] social services that help refugees become self-sufficient as quickly as possible after their arrival in the United States' (ORR, 2012). Economic self-sufficiency is generally defined as 'earning a total family income at a level that enables a family unit to support itself without receipt of a cash assistance grant' and is used as the basis for funding most refugee programs (Halpern, 2008).

From another viewpoint, the exact time frame and role of economic self-sufficiency is controversial (Lewin Group, 2008). Some debate centers on whether employment should be emphasized more or less than other aspects such as education and cultural orientation. The *1980 Refugee Act* outlines the current design of economic self-sufficiency through swift employment by stating that 'employable refugees should be placed on jobs as soon as possible after their arrival in the United States' (8 U.S. Code § 1522-a-1-B). This has resulted in an oft-unexamined prioritization of employment without examining the overall economic wellbeing and quality of life of refugees, as well as a prioritization of employment programming without evaluating the effectiveness of that programming. Using the most rigorous research appropriate for the field and a mixed-methods approach aimed at capturing multiple viewpoints, this thesis will aim to holistically examine the meaning of, and what is currently known about,

the economic self-sufficiency of refugees resettled in the US and interventions designed to improve refugee self-sufficiency.

History of the resettlement system: frameworks with adaptations to shifting populations and contexts

The substance of and populations served by the US refugee resettlement system are dependent on the history of the system itself. The system is further molded by current politics and shifting policies. Thus, despite some conceptual and service consistency, especially since 1980, the system should be viewed as dynamic. This subsection focuses on the development of and changes in the US refugee resettlement since its inception after World War II.

Structure, beginning, and *ad hoc* development

Historically, the US refugee resettlement system was *ad hoc* before 1980, and the domestic definition of a refugee referred only to those fleeing communism or from certain parts of the Middle East (Kennedy, 1981). Even today, the legislature has control over admitting refugees and the ability to alter the parameters of the program, as demonstrated by the expansion of the definition of refugees to the UN definition in the *1980 Refugee Act*. The executive branch, on the other hand, proposes the refugee ceiling and implements the resettlement program through the federal agencies. Before establishing a domestic framework for refugees, Congress, the President, and the Attorney General passed measures for the acceptance, status adjustment, and special services for different populations. Although US refugee policy has historically be seen as a tool for global power politics, policy has also been couched in term of international humanitarian ideals and obligations (Barnett, 2003).

The international refugee regime itself was established in 1951 to account for post-World War II refugees in Europe and officially retained this narrow mandate until the *1967 Protocol*. The particularities of this situation and the need to assist Jewish refugees and other Europeans displaced from their states emerged partially out of a moral obligation. Although the US never signed the *1951 Convention* and did not implement the *1967 Protocol* in domestic legislation until the *1980 Refugee Act*, the US domestic resettlement program was active and grew and adapted with refugee populations and legislative measures.

In the 1940s, President Harry Truman issued a directive allowing for the use of national immigration quotas to borrow against future immigration quotas in order to admit certain refugee populations and to resettle a number of displaced persons from post-World War II Europe. Congress passed legislation during this period that emphasized the strength of these refugee populations and assistance from voluntary agencies such as Catholic, Jewish, and Polish American charities (Haines, 2010). The 1950s similarly included *ad hoc* refugee legislation, such as admitting Hungarians. The emphasis throughout the legislation was self-reliance, creating a trend that would last throughout refugee legislation in the US (2010).

Congress similarly issued a series of legislation in the 1960s and 1970s to bring certain refugee populations into the country while the executive branch used its parole authority to formally recognize refugees who had arrived in the country. For example, the *Fair Share Refugee Act* continued to permit the Attorney General (in the executive branch) parole authority for 'refugee-escapees',

allowing them a path to citizenship after two years (Gordon, 1996). In 1965, the first formal definition of a refugee was accepted as a person fleeing from persecution due to their race, religion or political opinion, in a Communist country or the Middle East, or uprooted by a catastrophic natural calamity (1996). The 1960s saw small groups, such as Hong Kong Chinese, as well as larger groups, such as Cubans, arriving on shore as asylum-seekers and receiving the legal status of refugees (Haines, 2010).

The largest resettlement program to date began in the mid 1970s with Southeast Asian refugees, often referred to as the Indochinese. By the time the program was brought to a close, 1.25 million refugees were resettled. The government issued a formal dispersal policy for the first time to spread out the 'burden' of refugees across the country. Nonetheless, the Southeast Asian program was widely viewed as a 'shock' to the system, and these Vietnamese, ethnic Chinese Vietnamese, Laotian, Cambodian, and Hmong refugees tended to congregate in certain cities and states after arrival (Desbartes, 1986; Forbes, 1984; Kulkarni, 2008). Although no formal evaluation of the program was conducted, a number of studies, particularly on the psychological wellbeing of refugees, examined the Southeast Asian populations specifically (Birman & Tran, 2008; Broadway, 1987; Desbartes, 1986; Desbartes, 2005; Gellis, 2003; Matsuoka, 1993; Murray, Davidson, & Schweitzer, 2010; Starr & Roberts, 1982; Stein, 1979; Strand, 1984; Tran, 1991).

Domestic framework: the *1980 Refugee Act*

The *1980 Refugee Act* emerged from widespread criticism of the *ad hoc* policy of the Southeast Asian resettlement program and aimed at a

comprehensive, coherent policy (Dominguez, 1990; Loescher & Scanlan, 1986). The diversity of the refugee population had proved to be a challenge, as did the relatively high number of arrivals and the relatively low transferability of their occupations (e.g. low-technology farming) (Haines, 1988).

The Act also sought to address concerns over the employment and economic self-sufficiency of refugees, by stressing these ideas in the act and programming. The Refugee Assistance amendments of 1982 and 1986 also indicated the importance of swift economic 'independence' (Siraj, 2007). The *1980 Refugee Act* continues to serve as the backbone of current refugee resettlement policy. However, changing populations and systems helped trigger a complex web of discretionary programs, which now overlay the stipulations from the *1980 Refugee Act* and are outlined in the next section on interventions and measures.

Despite the attempt at a coherent policy, the *1980 Refugee Act* is considered to have failed to anticipate the 'Cuban Refugee Crisis' or the rise of asylum-seekers in general (Gibney, 2004; Meissner, 1988). This led to a peak number of arrivals in 1980, the year the act was passed. Under the *1980 Refugee Act*, annual admissions figures have ranged from a high of 207,116 in 1980 to a low of 27,100 in 2002 (Batalova, 2009). The high point corresponds to the nexus of Cuban arrivals, resettlement of Southeast Asian refugees, and an emphasis of resettling refugees from Communist countries prevalent throughout the 1980s. The low point corresponds to higher security measures after the '9/11' terrorist attacks in 2001. Despite some volatility, a relatively steady stream of arrivals

since the passage of the *1980 Refugee Act* indicates a clear commitment to refugee resettlement.

During this time as before and after, little was known about the effectiveness of refugee resettlement programing. Fass (1985) concludes that the refugee resettlement programming were no better in this regard than with the 'Indochinese' Refugee Program or with the Cuban Refugee Program. He states, 'The only unequivocal facts were that by 1981 the federal government had a refugee act under which it was spending $2.1 billion a year, refugees were making slow but steady progress in finding employment, and there were no clear indications whether the portion of funds spent on employment services or the implementation characteristics of services had any effect on refugee progress' (Fass, 1985, p. 125). This same critique of little knowledge and billions of dollars spent a year continues through subsequent years of refugee arrivals to today.

More recent adaptations and populations

Throughout the 1990s, significant refugee populations included not only individuals leaving communist or former communist countries in Eastern Europe and Southeast Asia (i.e. Eastern Europeans, Soviet Jews, Cubans, Vietnamese, Lao, Khmer, Hmong, and Chinese from Southeast Asia), but also Afghans, Ethiopians, Eritreans, and Iranians, many of whom had fought against communist or other regimes that were deemed oppressive. Many scholars argue that this period revealed that the US policy was largely a political calculation rather than a humanitarian one (Dominguez, 1990; Gibney, 2004; Loescher & Scanlan, 1986). For example, in the 1990s, Cubans readily received asylum whereas many Haitians boat arrivals were sent back, where they were

sometimes abused or jailed (Loescher & Scanlan, 1986). This aligned with global politics; communist Cuba was viewed as an enemy of the US while the Haitian government had positive relations with the government. After the end of the Cold War, the US refugee and asylum policy can be viewed as being at a crossroads in terms of populations and programming, as the political calculation for asylum was largely dissipating (Barnett, 2006).

Recent history has seen both an increase in the diversity of the program and in its emphasis on economic self-sufficiency. The limitation of 36 months for refugee cash and medical assistance was shortened to eight months in 1991, driven by policy and funding levels (Bruno, 2011; ORR Staff, 2012). The implication is both that refugees should become self-sufficient quickly and that the onus is not on the federal government to facilitate that sufficient economic means. The *Personal Responsibility and Work Opportunity Reconciliation Act* of 1996, commonly referred to as 'welfare reform,' also limited assistance eligibility for refugees and 'asylees' along with US citizens. Refugees and asylees lose eligibility after five years if they do not become citizens or otherwise qualify (Wasem, 2010).

Additionally, the pool of refugees has expanded globally. In the 2000s, countries of origin consisted not only of Vietnam and former Soviet countries, including the former Yugoslavia, but also of countries in Africa and new parts of Asia. The expansion of number of refugees from Africa, such as Liberian, Somali, Sudanese, Congolese, and '1972 Burundians,' can be viewed as a commitment to

humanitarian ideals and to burden sharing as part of international efforts (Haines, 2010).

Concomitantly, it can be viewed as fulfilling a desire to see the resettlement program continue and the need to find new populations in order to do so (Barnett, 2006). The number of refugees arriving after September 11th, 2001 initially dropped due to heightened security measures, but support for the resettlement program continued. Populations such as the Somali Bantu and the 'Lost Boys' of Sudan also came with lower education levels and socio-economic status than some previous refugee populations such as former Soviet refugees. Recent populations from Asia, including from Burma and Bhutan, have similarly low-education levels and traditionally rural backgrounds. The current populations have also been described as including an increased percentage of refugees who have spent prolonged periods of time (often decades) living in refugee camps and other difficult conditions; this is theorized to cause health and other issues that challenge economic self-sufficiency (United States Government Accountability Office, 2011).

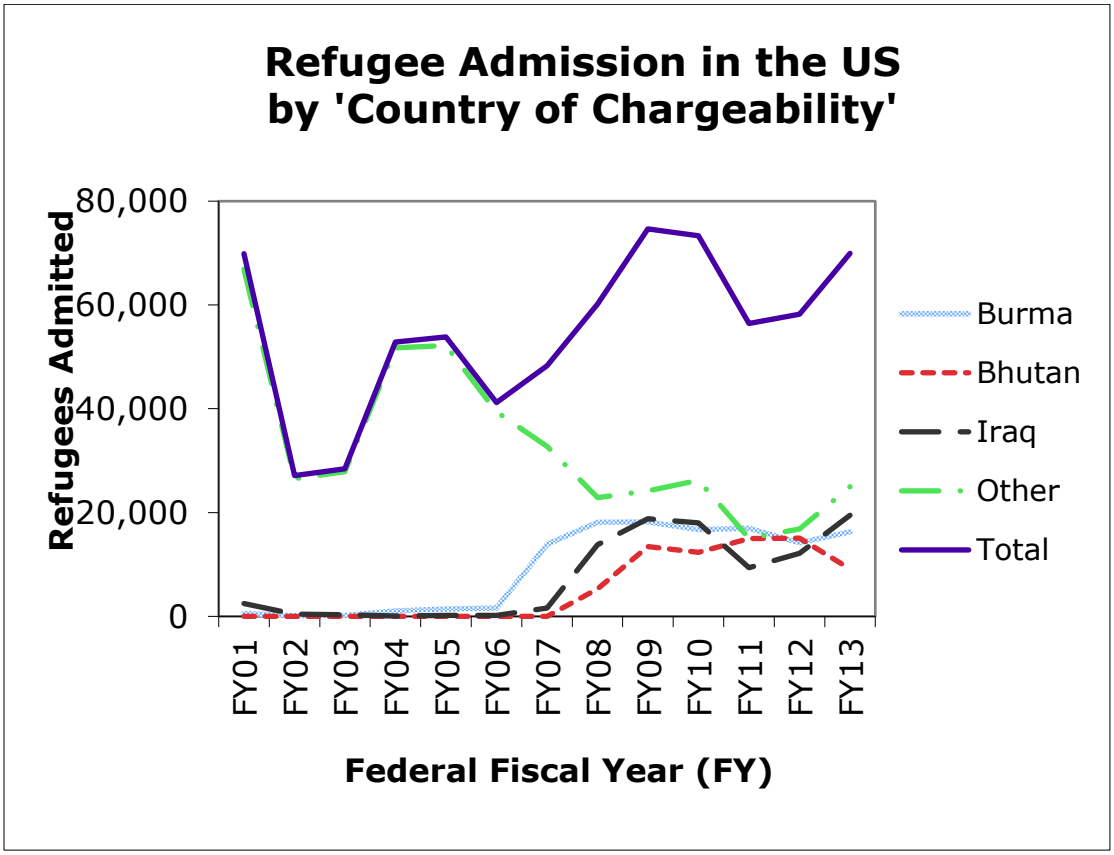


Figure 1: Resettlement numbers over the past twelve years

The three largest 'countries of chargeability', or countries of origin, for refugees resettled in the past five fiscal years include Burma, Bhutan, and Iraq. As shown below, roughly a quarter of refugees have come from each of these countries in the fiscal year 2012, with the largest number being Bhutanese refugees. However, the other quarter also represents a diversity of countries, which corresponds to the diversity of backgrounds served by the US resettlement program.

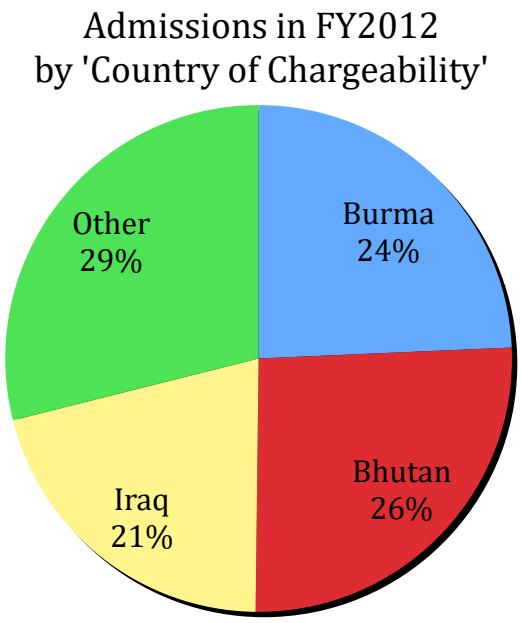


Figure 2: Countries of origin for resettled refugees in fiscal year 2012

Interventions and measurements

Although the US refugee resettlement system consists of the admissions program and the domestic resettlement component, the interventions and measurements in this thesis focus on the domestic component, where the system strives for the goal of the economic self-sufficiency of the refugees it serves. In many ways, the admissions program acts as a vehicle for participation in the domestic resettlement program, where outcomes involving the welfare of refugees and integration are desired. The admissions program under the Department of State works on case identification, transfer, and security. Additionally, the Department of State funds ten national voluntary agencies (Volags) to decide on the initial placement of refugees through their networks of affiliated offices around the country and to provide services for the first 30-90 days in a refugee resettlement office under the 'reception and placement'

program (Office of Refugee Resettlement, n.d.). The reception and placement program is conceptualized in this chapter as part of the domestic program as the funding goes directly to the same resettlement offices around the country that are also funded by the Office of Refugee Resettlement (ORR).

Interventions

The domestic program itself is a complex web of services. However, the services can roughly be broken down into care/social services (e.g. reception and placement, integration services) and job placement services. After initial 'reception and placement' services funded by the Department of State, the federal government provides funds and monitoring other assistance programs (e.g. employment and social services) through the Office of Refugee Resettlement located in the Administration for Children and Families in the Department of Health and Human Services. The services are administered through two divisions: the Division of Refugee Assistance provides allocation of funding for grants to states or state-alternative programs based on formula funding,[5] and the Division of Community Resettlement oversees competitive grant applications for discretionary grant programs administered through non-profits.

ORR described its aims as '…to prepare refugees who are resettled in the U.S. for economic success and community involvement' (Sebelius, 2010, p. 2). The array of services described in this section form the drive of the implementation and the basis for the theory of change of the individual resettlement programs explored during primary research and discussed in Chapter 5. Using the Medical

[5] Most of these formula funds are based primarily on arrivals in the past three years. Until recently, it was based on arrivals in the past five years. Additionally, these numbers general reflect initial arrivals for the reception and placement grant given the difficulty in tracking secondary migration (Ott, 2011).

Research Council's guidance for complex interventions, reintroduced in Figure 7 in Chapter 2, this thesis focuses on the development phase for complex interventions to identify the evidence base, identify and develop theory, and model processes and outcomes (Craig et al., 2008). Understanding the interventions serves as a basis for these actions.

Types of Services Delivered	Administration of Services
Care / Social Services - legal paperwork • social security cards • employment authorization documents • path to citizenship - access to public services • health care • education including English language classes • welfare • specialized assistance - cultural orientation • housing • transportation • financial management • cultural norms	Bureau of Population, Refugees, and Migration, Department of State • Reception and Placement Division of Refugee Assistance, Office of Refugee Resettlement, Department of Health and Human Services • Cash and Medical Assistance • Public/Private Partnership Program • Unaccompanied Refugee Minors Program • Refugee Social Services Program • Targeted Assistance Program • Cuban Haitian Program • Refugee Preventative Health Program • Refugee School Impact Program • Services to Older Refugees • Targeted Assistance Discretionary Program Division of Community Resettlement, Office of Refugee Resettlement, Department of Health and Human Services • Matching Grant Program • Wilson-Fish Program • Services to Survivors of Torture Program • Preferred Communities • Refugee Agriculture Partnership • Individual Development Accounts • Microenterprise Development • Ethnic Community Self-Help Program • Supplemental Services to Newly Arriving Refugees • Technical Assistance
Employment Services - enrollment in an employment program - case management including self-sufficiency budgets, self-sufficiency plan, and childcare assistance (as necessary) - job readiness and placement assistance - post-placement assistance	

Core services

The core services can roughly be grouped under two types: social work/care services and employment assistance. These two groups of services roughly map onto three funding streams: 'reception and placement' funding from the US Department of State, funding to compensate States and State-alternative organizations for integration services under the Division of Refugee Assistance, and various employment programs under the Office of Refugee Resettlement in the US Department of Health and Human Services. Care services provide legal integration through paperwork as well as social notions of integration, access to broader federal, state, and local services, and general acculturation and orientation to the US and community. Additionally, states are funded through ORR based on a formula to support social services and targeted assistance for the use of more generalized welfare services, but they are not required to report on the provision of these services in terms of the provider, funding, and funding periods.

On the employment side, in accordance with Title 45 Code of Federal Regulations (CFR), Section 400.153, Refugee Employment Services must include a family self-sufficiency plan and an individual employability plan (EP). Additionally, these services may include 'employment services, assessment, on-the-job training, English language training, vocational training, skills recertification, day care for children, transportation for employment service or for the acceptance or retention of employment, employment case management, interpretation and translation services, assistance with self employment, if a self-sufficiency plan indicates that this is viable, and assistance in obtaining Employment

Authorization Documents (EADs)' (Commonwealth of Pennsylvania, Department of Public Welfare, Office of Income Maintenance, Bureau of Employment and Training Programs, 2011).

Social services

Aside from employment services, an array of social services is offered. These services may be loosely defined as traditional care services or social work services. Refugees are entitled to Refugee Social Services as well as Refugee Cash Assistance and Refugee Medical Assistance if they do not qualify for parallel welfare services in their state. States are funded for targeted assistance and social services. Most of these social services are administered through a case management approach.

Traditional care services include arrival and integration services. Some services are funded by the 'reception and placement grant' from the Department of State to help orient refugees in the first 30-90 days, while others receive funding under Refugee Social Services. These services can roughly be grouped into three areas: legal paperwork, access to broader public services, and acculturation services. Firstly, under legal paperwork services, refugee resettlement agencies help provide an initial placement in a community and legal documents such as social security cards; they may also help with permanent residence documentation after one year and citizenship after five years. This avenue of care and integration is largely unproblematic; the mandate and regulations give refugees legal rights nearly on par with citizens and a definitive path to citizenship. Secondly, access to broader federal, state, and local services includes health care (e.g. doctors, specialists, dental, and optometry coverage for eight

months); education such as English lessons for adults; welfare such as Refugee Cash Assistance and food stamps; specialized assistance such as utility assistance, food banks, and supplemental nutrition help for pregnant women and young children; referral to job services; and, referral to social services if needed. Acculturation services are comprised of cultural orientation including initial provisions of housing, essential furnishings, foods (including a hot meal on arrival), clothing, transportation assistance, loan repayment, banking assistance after an initial paycheck, and general community orientation.[6]

The second significant component of the resettlement program is job placement services. All refugees are registered in some type of employment assistance program, such as with an employment caseworker under refugee employment services or the Matching Grant Program (explained in the next section under Targeted interventions) for the first 90 to 180 days after arrival. If additional assistance is needed after this period of time, refugees may follow-up with their caseworker, be registered in another employment scheme, or be referred to the public welfare office for advice. There is no set decision process on this, and decisions may be made based on resources, as was learned through participant observation and the Bhutanese focus groups. There are a number of job assistance programs funded through the Office of Refugee Resettlement under discretionary grants to take into account different approaches, needs and skills, and populations. However, only certain agencies offer each program, and employment services vary in practice based on resources and surroundings.

[6] This list of services is roughly defined by the Pennsylvania outline, but similar components exist in all resettlement agencies.

Targeted interventions

Although many resources are targeted towards offering the same basis of services outlined in the previous section, most of ORR's programs are administered on a discretionary grant basis where organizations apply for a limited pot of funding. However, some programs for cash and medical assistance, as well as Refugee Social Services, make grants to eligible states based upon the number of refugee arrivals in the previous three years, and Cuban-Haitian assistance is based on the number of asylum seekers who arrive from Cuba and Haiti. Programs offered only at some sites and listed on ORR's website include: Agriculture Partnership, Anti-Trafficking in Persons, Ethnic Community Self-Help, Individual Development Accounts, Matching Grant, Microenterprise Development, Microenterprise Development – Home-Based Childcare Program, Preferred Communities, Preventive Health, Public/Private Partnership, Repatriation, School Impact, Services for Survivors of Torture, Services to Older Refugees, Supplemental Services, Targeted Assistance Discretionary, Technical Assistance, Unaccompanied Children's Services, Unaccompanied Refugee Minors, and Wilson/Fish programs. The next section will discuss the indicators and lack of evaluation of the programs. This section will highlight five key targeted interventions when considering refugee self-sufficiency: the Matching Grant Program, Ethic Community Self-Help, Targeted Assistance Program, Preferred Communities Program, and the Wilson/Fish Program.

Perhaps the most prominent of the discretionary programs is the Matching Grant Program. This program is designed to support resettled refugees in achieving economic self-sufficiency within 120 to 180 days of eligibility without accessing

public cash assistance (Church World Service, 2010). The program began in FY1979 and was legislated in the *1980 Refugee Act* to continue where effective and efficient (ORR, 2012b). Nonetheless, the parameters evolved on an *ad hoc* basis, with the 120-day program target set in 1983, the $2 federal match to $1 donation (in cash or in kind) set in 1999, and funding not discernibly tied to outcomes (ORR, 2012b). Of participating families in the program, 80 percent obtained 'self-sufficiency' within 180 days in calendar year (CY) 2007, 74 percent in CY 2008, and 65 percent in CY 2009 (Sebelius, 2010). However, agencies have limited matching-grant spots and often enroll families who they think will be more likely to achieve self-sufficiency within that time period (e.g. smaller families, those with more educated adults).

The objective of the Ethnic Community Self-Help program, as proclaimed by the Office of Refugee Resettlement (2012a), '…is to support ethnic community based organizations in providing refugee populations with critical services to assist them in becoming integrated members of American society.' This broad mission can be manifested in multiple ways, but the website focuses on services as a bridge between communities and refugee populations. These grants have been given out to a wide range of organizations including organizations targeting all refugee communities in an area (e.g. the Tucson International Alliance of Refugee Communities), refugees from one continent or region (e.g. Union of Pan Asian Communities in San Diego, the Arab American Community Centre for Economic and Social Services in Dearborn, Michigan, or the Colorado African Organization), refugees from one country (e.g. Iraqi Mutual Aid Society of Chicago or Haitian Neighborhood Centre, in Miami), or one refugee ethnic group (e.g. the Karen

Organization of Minnesota or the Somali Bantu Association of Tucson, Arizona) (ORR, 2012a). These services overlap with those offered under other grants. The overlap could be viewed in a competitive or symbiotic manner, ensuring that certain individuals and populations do not 'fall through the cracks' or fail to receive the extra assistance they may require for integration.

Two programs that can be viewed as working symbiotically to address employment and governmental assistance levels are the Targeted Assistance program (TAG) and Preferred Communities. TAG assists States with an influx of refugee arrivals and high public assistance usage whereas Preferred Communities attempts to increase arrivals to communities where levels of refugee unemployment and use of government assistance are low. The Preferred Communities program seeks to address the unemployment of refugees by funding voluntary agencies to develop capacities in communities with 'ample opportunities for early employment and sustained economic independence' (Sebelius, 2010). Both of these grants are funded from a limited pool of funds on a competitive basis where applicants argue that their communities meet these definitions.

The Wilson/Fish and the Public/Private Partnership programs can be viewed as an alternative to typical state services; they administer these reception and economic self-sufficiency services through different mechanisms and offer uniform cash assistance, unlike refugee cash and medical assistance which varies based on state guidelines. These programs acknowledge the particular obligation of the American government to refugees resettled in the country and the

particular context of refugees' lives that may be better served outside of mainstream welfare services. The individual states decide whether to offer the Wilson/Fish or Public/Private Partnership programs. Like the other programs, there is no evidence of program effectiveness compared to alternative services or services as usual, but ORR staff have commented anecdotally on the possibility of improved outcomes through refugees' particular needs and capabilities being considered separate from the rest of the welfare population (ORR Staff, 2010).

Theories of change

For each intervention targeted towards refugees, it is important to understand the theory behind its development and implementation in order to examine the aspects which matter in the program and eventually affect policy and the understanding about the way in which a program works (Weiss, 1995; Weiss, 2001). A program may have multiple causal pathways to lead to benefits or rely on a series of assumptions. However, the logic models for the current resettlement system overall and for individual programs are not explicitly stated. Current funding announcements for discretionary grants (e.g. the Preferred Communities grant) ask for logic models to explain the conceptual basis for the refugee work, yet these models are not publicly available. After reviewing responses to requests about theories of change, those examined do not clearly articulate the connections or assumptions for desired outcomes.[7] As noted by

[7] The exact funding announcement states that: 'Applicants are expected to use a model for designing and managing their project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements. While there are many versions of logic models, for the purpose of this announcement the logic model should summarize the connections between the:

- Goals of the project (e.g., objectives, reasons for proposing the interventions, if applicable);
- Assumptions (e.g., beliefs about how the program will work and its supporting resources. Assumptions should be based on research, best practices, and experience);

one researcher, Michalski (2001), 'There are different models of intervention to assist refugees, but no uniform model. A challenge for social services is to develop effective interventions' (p. 209). Another report noted, 'While they all might have the same goal of assisting newly arriving refugees to reach self-sufficiency as quickly as possible, Volags all have different mandates and reasoning for doing so' (Adenmatten et al., 2010, p. 61). It follows that these different models and mandates may have diverging theories of change, which should be examined in specific research context. Despite differing local context for theories of change, the theoretical framework of factors influencing refugees may hold constant.

Indeed, theory can be fit into two separate categories: theoretical frameworks on a macro level about how the components influence economic self-sufficiency (e.g. psychosocial models about how individuals and society interact), and theory behind an intervention's causal pathway to improve economic self-sufficiency (i.e. theory of change). Potential models for improving economic self-sufficiency and wellbeing will be examined throughout this thesis. The next chapter will explore the concepts of self-sufficiency and wellbeing along with factors that may correlate with these. Psychosocial theoretical frameworks that may connect the two will also be presented. Later chapters will use qualitative research to probe the theories of change in refugee self-sufficiency programming.

- Inputs (e.g., organizational profile, collaborative partners, key staff, budget);
- Activities (e.g., approach, listing key intervention, if applicable);
- Outputs (i.e., the direct products or deliverables of program activities; and,
- Outcomes (i.e., the results of a program, typically describing a change in people or systems).

Measurement and rationale for evidence-based research

This section shows that although the Office of Refugee Resettlement reports a number of indicators about their programming, these indicators fail to examine the effectiveness of the programming and serve to confirm the continuation of the program. Indicators used in the *Government Performance and Results Act* (GPRA) and the Report to Congress meet minimal government requirements and do not drive funding or programming. For the GPRA, ORR reports against an Annual Performance Plan, which presents 'goals and progress towards six measures of economic self-sufficiency: 1) Entered employment, full time and part time; 2) Federal cash assistance terminations (due to earnings); 3) Federal cash assistance reduction (due to earnings); 4) Entered full time employment with health benefits available; 5) Average hourly wage of full time entered employment; and 6) Employment Retention 90 days after entering employment' (Nightingale, 2008, p. 7).

Similarly, the Annual Report to Congress presents three priority measures based on grantee reporting for those enrolled but not finished having access to employment services: 1) entered employment, 2) wage rate, and 3) 90-day job retention (Nightingale, 2008). These measures may be supplemented by a number of indicators drawn from an annual phone survey of refugees who have arrived in the past five years:

- percentage of refugees 16 or over employed compared to the US population
- labor force participation rate and unemployment rate
- percentage use of public assistance
    - use of public assistance in general
    - percentage use of Medicaid or Refugee Medical Assistance
    - percentage of cash assistance
- and, average hourly wage.

All of these indicators are intended to examine the overarching goal of the US refugee resettlement system of economic self-sufficiency. However, these measures do not evaluate the effectiveness of different interventions since there is no control or comparison group with similar traits. As stated in the context section, refugees hold a unique set of needs and capabilities that differs from the general US population. This justifies the special streams of programming for refugees and also implies that analyses that judge effectiveness by comparison to non-refugee populations have low internal validity[8], as they do not take into account the specific needs and capabilities of refugees.

Quantitative research with human subjects can be thought of in a hierarchy of evidence with different levels of internal validity (Petticrew & Roberts, 2003).[9] For questions of effectiveness of interventions, some designs isolate the effect of an intervention from other compounding issues more effectively than others. For example, a randomized controlled trial not only accounts for measured differences between a group that receives an intervention and a counterfactual group that can be measured (e.g. race, sex, age), but also differences that may not or cannot be measured (e.g. randomizing certain beliefs,

Figure 3: Hierarchy of evidence in the evidence-based social intervention field

1 Systematic reviews and meta-analyses
2 Randomized controlled trials with definitive results
3 Randomized controlled trials with non-definitive results
4 Cohort studies
5 Case-control studies
6 Cross sectional surveys
7 Case reports

[8] Internal validity is the extent to which systematic error or bias is minimized.
[9] Although the scientific rigor of the study design falls along the hierarchy, this frame is nonetheless controversial due to the need to match the design with the research question and feasibility as well as some evidence that well-designed observational studies may be as accurate as randomized controlled trials (Daly et al., 2007; Petticrew & Roberts, 2003).

levels of interest in the program). The Office of Management and Budget in the White House encourages the use of randomized controlled trials and their syntheses to have strong evidence of effectiveness (Nightingale, 2008; Office of Management and Budget, 2004).

The program indicators used by the ORR and mentioned previously fall into the low category of cross sectional surveys; they present a limited picture of the economic situation for refugees at a point in time. These measures may be misleading since they do not account for changing populations served by the US population or changing wider contexts in the ecological model discussed in the next section, such as unemployment rates and national or state policies of minimum wages which change at specific points. These indicators have been used as an assessment of the effectiveness of the resettlement program and refugee assistance organizations' work despite being called 'inadequate for determining whether the work of refugee assistance organizations actually benefit refugees' (Majka, 1991, p. 267). These indicators are used to determine the funding for 'Preferred Communities' grant to locations with 'ample opportunities for early employment and sustained economic independence' and to distribute promising practices (Refugee Resettlement Agency Director, 2011, 2012; ORR, 2012a). Additionally, they are used in annual reports to Congress and regular refugee resettlement newsletters to justify the continuation of the resettlement program overall as well as specific funding streams (ORR, 2012a). ORR staff commented that they have never known a proposed budget for their services to be radically changed (ORR National Consultation, 2012).

Despite most of the interventions and services being targeted towards economic goals, the economic costs of the programs themselves are typically left unexamined. Greenhalgh (2006) defines intervention economic analysis as four main types: 1) cost-minimization comparing two interventions with known effectiveness; 2) cost-effectiveness when expressing the effectiveness in one variable such as life-years gained; 3) cost-utility expressing the effect of the intervention on two or more dimensions, and 4) cost-benefit intervention when comparing 'the intervention with an intervention for another condition.' None of these analyses are done in typical reporting.

Similarly, local programs often report the percentage of clients who have found a job within a certain time period (most frequently, three months). This reported measurement holds the same flaws in considering the effectiveness of the overall resettlement program and does not involve any of these traditional intervention economic analyses: it does not report on the cost of the intervention in any dimension or compare the programming versus another intervention or condition. Refugee resettlement agencies present a financial overview that include sources of revenue and expenses on categories such as services, fundraising, and management, but they generally do not present effectiveness research (US Committee for Refugees and Immigrants, 2010).

Despite attempts at reporting, the conceptual gap in the theories of change coupled with the gap in measurement create a glaring hole in knowledge on whether the system is meeting its goal of 'economic self-sufficiency.' Interventions could even potentially cause more harm than good for resettled

refugees, for example by pushing them into jobs that are too physically demanding or through a swift transition that causes a decrease in wellbeing and potentially psychological harm.[10] Research can occupy a space to meaningfully examine and clarify these areas: what is known already and the rigor of those studies, how interventions are being delivered, how well refugees are doing, and then whether interventions are efficacious in ideal settings and effective in real world settings.

Conclusion

This chapter has summarized the particular place of refugees and the US refugee resettlement system within forced migration globally and the history of the system. Furthermore, the nature of the US refugee resettlement program was outlined. Given the importance of this system but the lack of conceptual clarity about theories of change and the effectiveness of the concept at the crux of the system – 'economic self-sufficiency' – this thesis will apply an evidence-based social intervention research model to explore economic self-sufficiency and wellbeing for adult refugees. Specifically, it will focus on the nature and prevalence of economic self-sufficiency as well as causal models for interventions to improve the economic indicators and overall lives of refugees. The theoretical framework behind the methodological approach is outlined and justified in the next chapter, and the methodology in practice is outlined in Chapter 3.

[10] The Center for Disease Control and Prevention has been investigating the risk factors for suicidal ideation and attempted suicide among Bhutanese refugees in the US after 16 cases of suicide were reported to the Office of Refugee Resettlement (Khadka, 2012).

Chapter 1 Appendix

Table 1: The global 'refugee gap' of resettled refugee economic self-sufficiency outcomes

Author & Year	Finding	Reasons Hypothesized	Country	Population
REFUGEES HAVE POORER OUTCOMES THAN IMMIGRANTS				
Aalandslid, 2008	Refugees have poorer employment outcomes than other immigrants	Adaptation; Length of residence correlates with better outcomes	Norway	All; from primaril Vietnam, Iraq and Iran
Bevelander, 2011	Resettled refugees have poorer outcomes than asylum claimants and family reunion immigrants	Selection processes for immigration (e.g. self-selection or UNHCR selection) and pre-existing networks	Sweden	All
Bevelander, Hagström, & Rönnqvist, 2009	Resettled refugees have lower employment rates and self-employment rates than asylum claimants and family reunion immigrants		Sweden	All
Cobb-Clark & Khoo, 2006	Refugee-humanitarian migrants have lower labor market participation and higher unemployment levels than other migrants	Range of barriers	Australia	Refugee-humanitarian migrants
Connor, 2010; Hugo, 2010	'Refugee gap' after determinates for disadvantage are controlled for, refugee-humanitarian settlers have poorer labor market outcomes than other migrant and non-migrant groups		Australia, US, and in general	Generalization from research
Cortes, 2004; Connor, 2010	Refugees in the US have the same likelihood of employment as other immigrants to the US, but significantly lower occupational status and earnings		US	All
Hiebert, 2002	Pre-Immigration and Refugee Protection Act (pre-IRPA), refugees fare better on some measures of employment earnings than family class immigrants		Canada	All
Hiebert, 2009 (qtd in Hydman, 2011)	Refugees have lower labor force participation and higher welfare usage but exhibit resilience in the labor market (e.g. earnings), only some gaps	Enriched set of settlement services help	Vancouver, Canada	All – Resettled refugees not separated from refugees recognised in Canada
Hugo, 2011	Refugees have poorer outcomes than other immigrants	Settle in places with high unemployment, better outcomes for second generation	Australia	All

Yu, Ouellet, & Warmington, 2007	Average employment rate at 6 months and 2 years and average earnings lower for refugees than for all other immigrants groups	Population characteristics; years with high percentage of highly-educated refugees from Bosnia-Herzegovina do better	Canada	All
Duleep et al., 2001 (qtd in Siraj, 2007)	Comparing 'Indochinese' (Vietnamese, Cambodian, & Laotian) refugees to Thai, Indian, Korean, Chinese, and Filipino economic migrants have lower education levels and lower earnings		US	'Indochinese' refugees versus other Asian immigrants entering at the time
REFUGEES POORER OUTCOMES THAN NATIVES				
Bevelander & Lundh, 2007	'Like in many other Western European countries, most immigrant groups in Sweden have lower employment levels than natives.' (p. 2)	YET, various refugee groups had a local 'best' employment level close to or even over the general employment rate for natives, for example: refugee men and women from Bosnia-Herzegovina and Chile as well as men from Yugoslavia and Iran	Sweden	All
Hugo, 2013	Refugee-humanitarian settlers have lower labor force participation rates than Australian born, but performance converges over time and 'second generation perform at a higher level'	Obstacles incl.: 'language, education, structural disadvantage, and discrimination.' Evidence that part of the gap explained by discrimination	Australia	Refugees, humanitarian settlers
Lundborg, 2013	Refugees have poorer employment outcomes than natives	Certain populations have worse initial conditions due to more discrimination of certain cultural and ethnical backgrounds	Sweden	Refugees identified by country of origin
Samuel, 1984	Refugees & immigrants have poorer outcomes than natives	Outcomes influenced by labor market conditions, language proficiency, sympathy by the population for refugees, support by co-ethnics & individual adaptability	Canada	400,000 refugees (over 25 years), primarily Hungarians, Czechoslovaks, Ugandan Asians, Chileans, and Indochinese

Chapter 2. Methodological Theory and Literature Review

Overview

The policy gap for the economic self-sufficiency of refugees—the central tenant of refugee resettlement policy and programming—was outlined in the first chapter. The following chapter justifies the methodological approach in the context of the literature. First, this chapter defines the key concepts of economic self-sufficiency and wellbeing and justifies the focus on self-sufficiency. Next, the chapter looks at aspects of the theoretical framework including potential factors influencing self-sufficiency and wellbeing as well as the nature of evaluating complex interventions. Lastly, the chapter outlines the background and rationale for an evidence-based social intervention approach using a three-pronged technique of a systematic review, qualitative research, and cross-sectional survey. In the absence of a rich literature, this chapter summarizes what is known from current literature and theories. The methodological approach was chosen to shed light on the gap in knowledge regarding theories of change for improving economic self-sufficiency in refugee resettlement, the implementation of these programs, and the nature and prevalence of refugee self-sufficiency and wellbeing.

Key research concepts

The primary focus of this thesis is the concept of economic self-sufficiency, which often holds a positive connotation and implies a general notion of wellbeing or adequate quality of life. However, both economic self-sufficiency and wellbeing are ambiguous concepts. Although this research centers on economic self-sufficiency, which is often considered one dimension of

wellbeing, this section examines both concepts in more depth and how they relate to this work.

Economic self-sufficiency

Despite the prevalence of the term 'economic self-sufficiency' in both the legal framework of and rhetoric surrounding US refugee resettlement, the definition remains unclear. The question is not only what is economic self-sufficiency but also who defines it. Economic self-sufficiency is labeled as a goal by the US government and the legal framework as specified by the legislative and executive branches, not by resettled refugees. Administrators delimitating reporting guidelines as well as researchers examining the subject further hold power to define what constitutes economic self-sufficiency – which may or may not align with refugees' own experiences and perspectives on it. Refugees have often been viewed as a vulnerable group with categories and definitions imposed upon them due to a myriad of factors (Chase, 2009; Ellis, Kia-Keating, Yusuf, Lincoln, & Nur, 2007; Harrell-Bond, 1986; Mackenzie, McDowell, & Pittaway, 2007). Resettled refugees may be a less vocal voice in defining economic self-sufficiency due to their frequently lower English levels, nascent experience with American administrative norms, and lack of security in the country without initial citizenship status.

When characterizing economic self-sufficiency, there is the question of what the unit goal is as well as for whom it should be measured. The goal could be the cessation of reliance on official welfare programs as recorded in governmental records or the ability to meet monthly bills without assistance from extended family as self-reported by community members. ORR currently defines self-

sufficiency as the absence of receiving governmental cash assistance, even if other governmental assistance such as 'food stamps' (i.e. Supplement Nutrition Assistance Program) or federal medical assistance (e.g. Medicaid) is received (Halpern, 2008; United States Government Accountability Office, 2011). Economic self-sufficiency could be measured for adult individuals, nuclear family unit bases, or extended families, yet the concept of family unit varies across cultures, with many refugee populations relying on and offering assistance to extended families or individuals from the same ethnic community. Official measures of income or poverty often do not take cultural monetary expectations and customs into account. Similarly, this research has practical constraints; although it looked at multiple measures of economic self-sufficiency, these measures were examined per respondent and household. This is consistent with other research employing units that are easier to more consistently define. Due to the constraints outlined above, qualitative accounts of differing conceptions of family units and networks of fiscal and social dependency not fully captured in the data are discussed throughout.

Temporality adds an additional level of complexity to the analysis. Should the goal be short or long-term self-sufficiency? And, is this time-scale trade-off appreciated in program design? Programming and the logic model often differ based on these timeframes. The legislation and the majority of the implementation of the current US refugee resettlement program focuses on short-term outcomes within the first four months, six months, or year. However, in the context of UK Welfare reform, such an emphases has been argued to place refugees in poorer working conditions and replicate inequalities already

experienced by refugees (Shutes, 2011). Due to the legislative emphasis on short-term economic self-sufficiency as well as research constraints, this research focuses on a shorter time frame; however, it is still important to acknowledge that this duration represents only one part of a larger timeline.

Wellbeing

The implicit assumption underpinning an emphasis on economic self-sufficiency is that employment and not being dependent on the government lead to a broader sense of wellbeing. In the US, this has led prominent politicians to assert that 'it's the economy, stupid', and the nation's problems are solved through 'jobs, jobs, jobs' (A., 2012; Galoozis, 2012; Hunt, 2012). Specific policies such as 'welfare-to-work' operate under the assumption that individual lives, family units, and the nation are better off with higher levels of labor market participation and economically independent nuclear families. Indeed, economic outcomes have been hypothesized and correlated with outcomes in other domains – and found to lead to broader wellbeing. The career literature contends that decent, steady employment leads to dignity and security, which may allow refugees and immigrants to integrate into the local social and economic community and have a lower risk of stress and more positive individual outcomes (Codell, Hill, Woltz, & Gore, 2011). In one example from recent research on Sub-Saharan African immigrants to the US, including refugees, employment was the strongest correlate for avoiding HIV risk-taking behavior (Ogungbade, 2011). The exact causal pathway for such a result is not known, but may be been partially attributed to high levels of social capital and increased societal affirmation to change individual behaviors. No matter its

mechanism, economic improvement is presumed to improve quality of life or wellbeing.

Wellbeing itself is a controversial concept. According to Diener and Suh (1997), there are three different ways of conceptualizing wellbeing: as normative ideals mirroring values of society (e.g. good health or wealth, etc.), as subjective experiences of wellbeing, and as the ability to select wanted goods and services. These can be expressed as indices of social and/or economic wellbeing or in surveys as reported subjective experience (Diener & Suh, 1997). All three conceptualizations and their limitations are examined in this thesis.

On the quantitative side, there has been significant progress on developing and validating international quality-of-life instruments, and there is an international society for quality of life research (Anderson, Aaronson, Bullinger, & McBee, 1996). Notable is the 36-item Short Form (SF-36) health survey view of quality of life as consisting of physical and mental health. It measures eight wellbeing health concepts: '1) limitations in physical activities because of health problems; 2) limitations in social activities because of physical or emotional problems; 3) limitations in usual role activities because of physical health problems; 4) bodily pain; 5) general mental health (psychological distress and wellbeing); 6) limitations in usual role activities because of emotional problems; 7) vitality (energy and fatigue); and 8) general health perceptions' (Ware & Sherbourne, 1992). It has since been developed into a shorter 12-question form (SF-12), and one or both versions have been translated and used in more than 40 countries as part of the International Quality of Life Assessment (IQOLA) project (Gandek et

al., 1998; Jenkinson et al., 1997; Ware, 2000). The SF forms show good reliability with refugee populations, such as Russian, Afghan, and Kurdish refugees (Hoffmann et al., 2005; Sulaiman-Hill & Thompson, 2010) and other immigrant and native-language speaker groups such as Turkish and Moroccan immigrants in the Netherlands, Chinese and Korean immigrants in the US, and Kiswahili speakers in Tanzania (Chang, Chun, Takeuchi, & Shen, 2000; Hoopman, Terwee, Devillé, Knol, & Aaronson, 2009; Lam, Tse, & Gandek, 2005; Mui, Kang, Kang, & Domanski, 2007; Wagner et al., 1999).[11]

On the mental health side of wellbeing, a number of refugee-specific instruments have been developed and validated to various degrees to detect one or more mental health issues, including the Refugee Health Screener – 15 (RHS-15), Harvard Trauma Questionnaire (HTQ), the Vietnamese Depression Scale (VDS), and the New Mexico Refugee Symptom Checklist-121 (NMRSCL-121) (Pathways to Wellness: Integrating Refugee Health and Well-Being, 2011). Despite the clarity of the instruments, how to, and even whether to, measure wellbeing remains contentious (Diner & Suh, 1997; Kahneman, 2011).

Theoretical framework

As alluded to in earlier sections, the theoretical framework and theory of change for the economic self-sufficiency of refugees and relevant interventions do not fall neatly into one established literature base or pathway. Neither is there an established literature base or theories in the refugee studies literature. In part due to the absence of such literature, it is especially important to differentiate between the concepts of theoretical framework and theory of

[11] As discussed in the next chapter, the SF-12 was used in this research.

change (Morton, 2011). A theoretical framework offers a general lens through which to see the world and is often a psychosocial theory explaining the ways in which individuals and their surroundings interact. The theory of change or logic model explains the way in which an intervention including all of its components creates a causal pathway to the desired outcome. This explains how and why an intervention works and links activities, outcomes, and contexts (Connell & Kubisch, 1998; Weiss, 1995). The theory of change discussed here was hypothesized and examined based on field research.[12]

Together, the theory of change and the theoretical framework explain the how and why these programs have developed in the way that they have and reveal the assumptions therein (Weiss, 1995; Weiss, 2001). To affect policy, it is necessary to be able to explain the way a program works and to monitor change by measuring mediators and final goals to see how and if an intervention is successful (Shinn & Yoshikawa, 2008; Weiss, 1995). Explaining the importance of understanding theoretical frameworks in a forced migration context, Turton (2003) writes:

> First, we need to encourage research that aims to understand the situation of forced migrants at the local level, as purposive actors, embedded in particular social and historical circumstances. Second, we need to recognise that such research will inevitably call into question the adequacy and usefulness of existing conceptualisations of forced migrants. And third, we need to recognise that it is by the questioning of taken for granted assumptions that research can have its most beneficial impact on policy and practice. (p. 17)

[12] There is a debate in the literature between 'theory of change' and 'logic model.' This debate is beyond the scope of this thesis, but both approaches at their crux seek to understand the program and implementation theory of an intervention (Blamey & Mackenzie, 2007). Both terms will be used interchangeably in this thesis, and specific methodology will be explained.

Examining the theoretical framework can help the context become clear as well as challenge existing assumptions surrounding it.

This section highlights some theoretical frameworks that overlap to form a model of the factors at play to improve economic self-sufficiency and wellbeing for resettled refugees. This thesis employs an ecological model including developmental contextualism to examine interventions designed to improve refugee self-sufficiency, and maps the intentions of the intervention onto this model. This model incorporates the dynamic interplay between individuals and the wider society that is expressed in other models, such as the dynamic system model and the social cognitive career theory.

These four theories, that of the ecological model, developmental contextualism, dynamic systems theory, and social cognitive career theory, as well as their relationship to each other are explained in the following text and in Table 2.

Table 2: Four key theories for refugee economic self-sufficiency

Theory name	Key author(s)	Brief summary of the theory	Relationship
Ecological model (basic)	Bronfenbrenner, 1979	Individuals influence and are influenced by their environment	Base theory
Developmental contextualism	Lerner, 1991, 1996	In addition to individuals and the environment, the change of environment over time is important	Adds the dimension of time to the ecological model
Dynamic systems theory	Tseng & Seidman, 2007	Social settings change but consist of social processes; human, economic, physical, and temporal resources; and the organization of these resources	Also called ecological systems; similar to the ecological model plus developmental contextualism and systems thinking
Social cognitive career theory	Yakushko et al., 2008	Career development depends on interactions between the environment and personal factors	Dynamic systems theory applied to career development

Ecological model

Perhaps most prominent in the literature overall is an ecological model of the factors that affect economic self-sufficiency. The ecological framework acknowledges two-way interactions: individual development and actions are influenced by environmental systems which individuals in turn influence (Bronfenbrenner, 1979). This model is prevalent throughout social interventions.

The original model included four systems defined below:

- a *microsystem* as '…a pattern of activities, social roles and interpersonal relations experienced by the developing person in a given face-to-face setting with particular physical, social, and symbolic features that invite, permit, or inhibit engagement in sustained, progressively more complex interaction with, and activity in, the immediate environment';
- a *mesosystem* which includes '…the linkages and processes taking place between two or more settings containing the developing person (e.g., the relations between home and school, school and workplace, etc.)';
- an *exosystem* which consists of '…the linkages and processes taking place between two or more settings, at least one of which does not contain the developing person, but in which events occur that indirectly influence processes within the immediate setting in which the developing person lives (e.g., for a child, the relation between home and the parent's workplace; for a parent, the relation between the school and the neighborhood peer group); and,
- a *macrosystem* which is '…the overarching patter of micro-, meso-, and exosystem characteristics of a given culture or subculture, with particular reference to the belief systems, bodies of knowledge, material resources, customs, life-styles, opportunity structures, hazards, and life course options that are embedded in each of these broader systems' (Bronfenbrenner, 1994, p. 39-40).

These four systems can be viewed as different intertwined levels, shown in the example in Figure 4 for a sanitary pad intervention.[13]

[13] Aspects of the thesis are brought together to readapt this figure to create an ecological model for the economic self-sufficiency of resettled Bhutanese refugees in Pittsburgh in Chapter 8: Discussion and Conclusion.

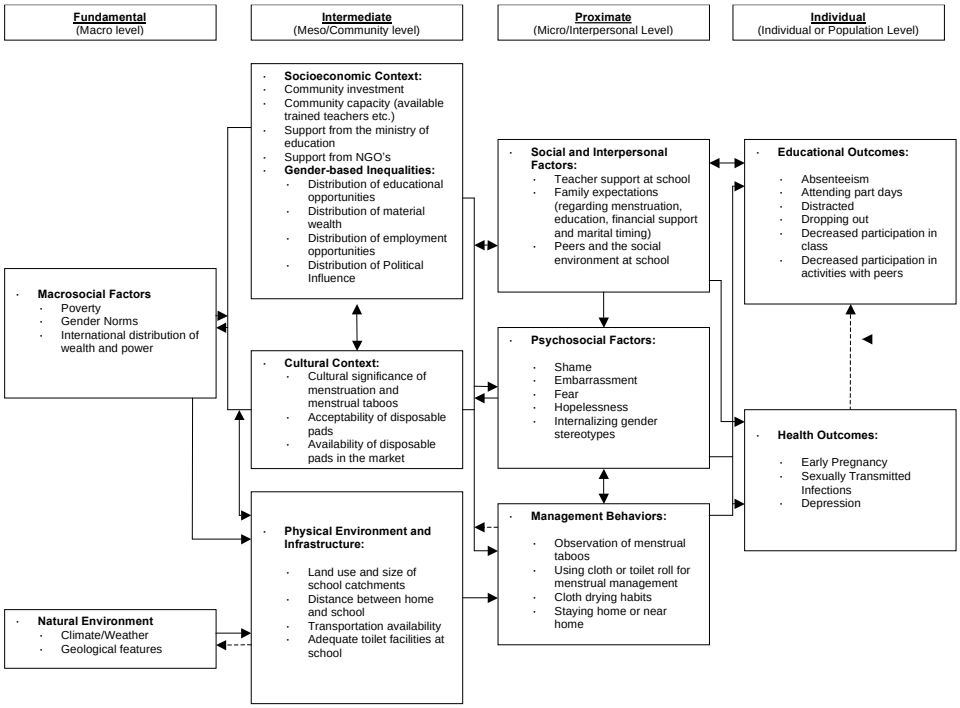


Figure 4: Example of applied Bronfenbrenner's ecological model (Montgomery et al., 2012)

This ecological model has been applied to refugees resettled in the US with evidence suggesting 'that socioeconomic climate, historical background/social norms, and the organizational structure of agencies involved in resettlement moderate successful inclusion of refugees into a host community in a bidirectional process' (Smith, 2008, p. 328). Given that economic outcomes are a key part of acculturation, it can be assumed that an ecological model would be at play for economic outcomes as well.

Development system theory incorporated with the ecological model

Developmental contexualism moves the ecological model through time and space (Lerner, 1991; Lerner, 1996). This acknowledges that social ecology changes with new environments and time. This third dimension of time was later explicitly incorporated into the ecological model as the chronosystem consisting of 'change or consistency over time not only in the characteristics of the person

but also of the environment in which the person lives' (Bronfenbrenner, 1994, p.40). This idea has been applied to forced migrants (Bronstein, 2011). The ecological model for forced migrants by Bronstein (2011), shown below, looks at an individual over time with individual traits, direct experiences, and indirect experiences. This parallels the widening levels of the ecological model.

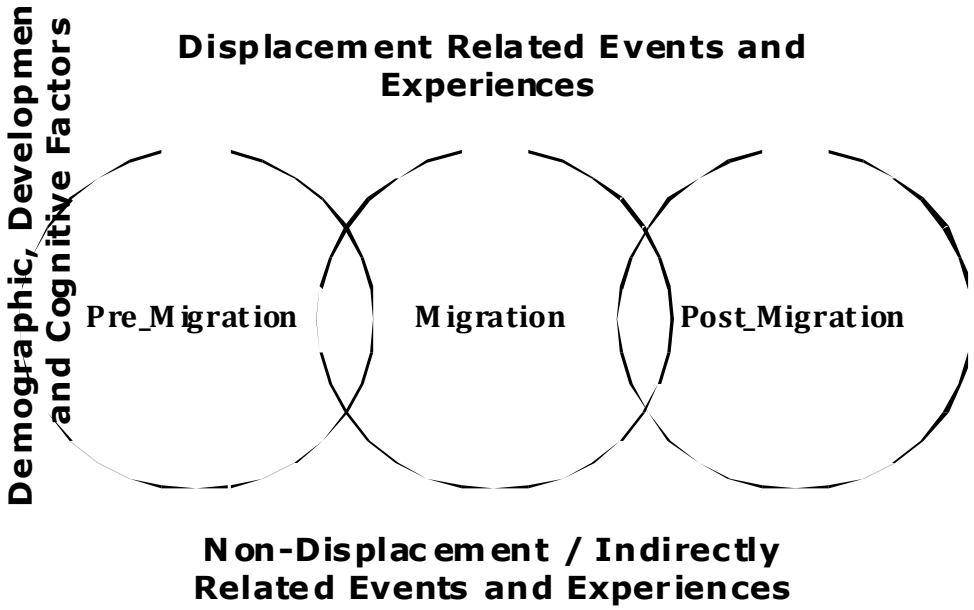


Figure 5: Ecological theory for forced migrants (Bronstein, 2011)

Dynamic systems theory

A similar combination of developmental contextual theory and the ecological model is the dynamic systems model often used when measuring systems' outcomes (Tseng & Seidman, 2007). This model holds that social settings are dynamic but consist of transactions between two or more groups of people (i.e. social processes), human, economic, physical, and temporal resources, and the organization of those resources. The idea of the relationship between multiple dimensions forming outcomes for individuals and settings is key to an ecological *systems* theory, as Bronfenbrenner's work is often termed (Darling, 2007). The dynamic systems theory shown below is a specific way to

look at these concepts rooted in the idea of the setting and social setting outcomes.

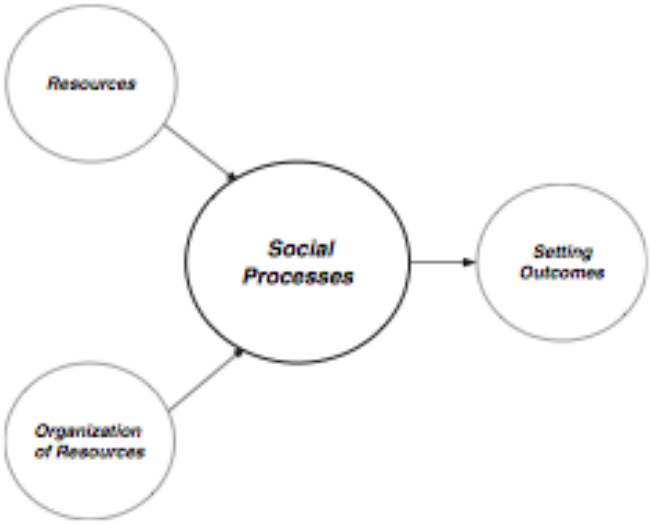


Figure 6: Systems model for social settings (Tseng & Seidman, 2007)

Social cognitive career theory (SCCT)

The relationship between an individual and their surroundings in a career perspective has been developed into social cognitive career theory (SCCT) (Yakushko, Backhaus, Watson, Ngaruiya, & Gonzalez, 2008). SCCT puts forward the idea that 'the development of positive career development depends on experiences that result from interactions between environmental and personal factors' (2008, p. 365-366). In many ways, this is another way of explaining the ecological model with social and human capital in a specific framework of career development.

Factors influencing self-sufficiency

The variables present in these different models, which are theorized to impact the economic outcomes of refugees, have a complex symbiotic relationship according to the literature. For example, variables interact over time between individual refugees and broader variables of communities. Migrants

from developing countries, including many of the recent waves of refugees to the US, have been shown to have only small or negligible decreases on the wages of natives, but larger decreases on the wages of recent immigrants (Bratsberg, Raaum, Røed, & Schøne, 2010). Similarly, evidence indicates that refugees have poorer economic outcomes when there is an increase in social network members resettled in that year or the previous one, whereas an increase in tenured social network members increases employment and hourly wage outcomes (Beaman, 2011).[14] The next two sub-sections explain the human and social capital that may affect outcomes for any particular individual in the models, aside from demographic characteristics and physical resources (or physical capital).

Human capital

Perhaps most crucial among the factors influencing self-sufficiency are the resources brought to the setting in the form of human capital. Indeed, human capital is the most common resource focus within the scant refugee employment literature (Khoo, 2010; Mamgain & Collins, 2003; Potoky-Tripodi, 2003; Siraj, 2007). Human capital can be defined as the skills and capabilities of individuals that allow them to do specific actions (Coleman, 1988). This may include factors such as language ability and education. As opposed to immigrants, refugees have incentives to accumulate human capital through their legal permanent residence status, which indicates that human capital obtained specifically for their local or national context may continue to be relevant (Cortes, 2004). Human capital acquired abroad and capital acquired domestically are theorized to be different,

[14] This study assumed sorting was negated by resettlement agencies dispersing refugees across cities. This assumption can be challenged given refugees choosing to arrive to, migrate to, and often cluster within communities of families and co-ethnics.

with capital such as education often not translating into a country of immigration, especially in the US and Israel (Friedberg, 1996).

Social capital

Linked to the idea of human capital is that of social capital: a contested concept regarding definition and importance (Portes, 2000). Some prominent definitions include Putnam's of social capital as 'features of social organization such as networks, norms, and social trust, that facilitate coordination and cooperation for mutual benefit' (Putnam, 1995, p. 67), and Portes' definition which does not include action but rather 'the ability of actors to secure benefits by virtue of membership in social networks or other social structures' (Portes, 1988, p. 6). At its core, social capital indicates that social relations hold importance for domains of human welfare. The idea of social capital is operationalized by the World Bank in their definition as 'the institutions, the relationships, the attitudes and values that govern interactions among people and contribute to economic and social development' (Serageldin et al., 1999, p. 1).

In research with immigrants and refugees, social capital has been measured through indicators of social networks, workplace ethnic composition, informal assistance and formal assistance received (Potocky-Tripodi, 2004). Although Potocky-Tripodi (2004) did not find measures of social capital to be a significant correlate with economic outcomes, social capital is still theorized to be crucial for economic outcomes and perhaps particularly important for those with low levels of human capital (Ogungbade, 2011; Potocky-Tripodi, 2004).

An enumeration of factors

Whilst there are a number of studies exploring some aspect of refugee self-sufficiency, the field is widely acknowledged as underdeveloped. Viewed from a policy perspective at different times, report titles speak for themselves. A 2011 US Congressional Report was entitled *Little is Known about the Effectiveness of Different Approaches for Improving Refugees' Employment Outcomes*, on the heels of a 2010 report for the US Senate, *Abandoned Upon Arrival: Refugees and Local Communities Burdened by a U.S. Resettlement System that is Not Working* (US Government Accountability Office, 2011; US Senate, Committee on Foreign Relations, 2010). Additionally, knowledge about economic self-sufficiency or how to measure it is limited. One recent academic article noted that, 'In addition to establishing predictors of refugee employment, the specific measurement of successful employment outcomes is also an important area for increased research focus' (Codell et al., 2011, p. 217). Additionally, the programming and populations of US refugee resettlement are constantly in flux, and few studies include more recent populations such as Bhutanese refugees (Benson, Sun, Hodge, & Androff, 2012; Codell et al., 2011). The majority of studies in the literature review focused on Southeast Asian or Eastern European refugee populations, which have not constituted a significant portion of US refugee resettlement in the past decade.

Furthermore, when not focused on the policy and broader context covered in the first chapter, literature on refugee resettlement tends to focus on mental health issues or broader integration (Beiser, Johnson, & Turner, 1993; Keyes and Kane, 2004; Noh, Beiser, Kaspar, Hou, and Rummens, 1999; Peisker and Tilbery, 2004).

The work on mental health tends to focus on the clinical concerns and trauma that many resettled refugees experience (Fazel, Reed, Panter-Brick, & Stein, 2012; Lindencrona, Ekblad, & Hauff, 2008; Marshall, Schell, Elliott, Berthold, & Chun, 2005; Murray, Davidson, & Schweitzer, 2010; Nicholl & Thompson, 2004; Steel, Silove, Phan, & Bauman, 2002; Weine, Levin, Hakizimana, & Dahnweih, 2012). Although mental health is an unquestionably important topic, it is but one aspect of lived experience.

On the other hand, literature on integration coalesces around its conceptualization as a multifaceted two-way process that includes economic integration, social interaction, legal integration such as citizenship, and some sense of mental health or wellbeing on the part of the refugee (Ager & Strang, 2008; Brown, Gilbert, Losby, & Members of the Integration Work Group, 2007; Dickerson, Leary, Merritt, & Zaidi, 2010; Dwyer, 2010; Gilbert, Hein, Losby, & Stein, 2010; Hyndman, 2011; Ives, 2007; Omar, 2013; Strang & Ager, 2010; Tossutti, Hagar, Kelly, & Pitre, 2013; Yu, Ouellet, & Warmington, 2007). Amongst the policy literature in particular, English acquisition and employment emerge as two key indictors of integration, with an inherent tension between them (Gilbert, Hein, Losby, & Stein, 2010; Tollefson, 1985). Employment, especially low-level work with little non co-ethnic contact, stymies the ability to attend English classes and improve English. However, a focus on education and English classes often delays a refugee's ability to obtain employment and cease receiving welfare cash. Whilst this work points out the multi-dimensional nature of refugee adaptation and integration, it fails to reach a clear agreement on these concepts or the role of self-sufficiency.

The literature also has a gap related to programming. There is no clear concept of the pathway for economic self-sufficiency for refugees (Schmitter-Heiser, 1998) or knowledge about the effectiveness of programs. In one demonstration in San Diego, database analysis of refugees assigned to the Wilson-Fish (WF) program versus Refugee Social Services (DSS) showed that refugees receive a significantly lower amount of cash, fewer days of financial support, have a significantly higher placement in jobs and take significantly less time to find a job (Hohm, Sargent, & Moser, 1999). Although the researchers stated that the methods 'precluded and prevented any sample bias between the WF and DSS refugees', the report did not indicate whether random assignment was used, and the evaluator was brought in post-hoc. Biases cannot be eliminated and not a single study reviewed in the literature review or systematic review in Chapter 4 laid out a clear path to economic self-sufficiency or evaluated program effectiveness without a serious bias concern.

The literature concerning notions of refugee economic self-sufficiency coalesces around correlations between employment outcomes and broader notions of wellbeing or demographics. Employment has been shown to correlate with lower stress rates and rates of clinical mental health issues as well as with improved physical health, although the exact directionality or causal mechanism is not known (Benson, et al., 2012; Khoo, 2010; Vinokurov, Birman, & Trickett, 2000). Additionally, physical health was shown to correlate with work force participation for humanitarian migrants in Australia, although there are surprisingly few studies on the relationship between refugee physical health and

employment (Khoo, 2010). Other cross-sectional study measures focus on the role demographics (e.g. age, gender, education level) in predicting employment outcomes; however, results are tenuous as some do not use random samples, control for covariance, or explain the bases for their hypotheses. One study that did use a random sample, control for overlapping results, and base hypotheses in theory found that gender, disability, education, and household composition correlate with economic outcomes for a sample of Russian, Somali, and Hmong refugees in Minneapolis-St. Paul (Potocky-Tripodi, 2003).

The research field is not only quantitative, but also qualitative, and theories on the self-sufficiency processes and correlates have also been developed. Qualitative research suggests that developing the capacity for economic self-sufficiency is gradual for those who come from different societies or face significant barriers (Fass, 1986). Research also indicates that adaptation to lower levels of jobs involves remaking identity and internal concepts of a good job (Finnan, 1981). The emphasis on underemployment and low-level work aligns with quantitative data indicating that refugees in the US have the same likelihood of employment as other immigrants to the US, but significantly lower occupational status and earnings (Cortes, 2004; Connor, 2010). Much of the qualitative research focuses on coping strategies for adapting to a new culture and sense of self, often using small sample sizes to raise the importance of social support or religion for certain populations such as pockets of Bosnian refugees in the US or Sudanese in Australia (Keyes & Kane, 2004; Pahud, Kirg, Gage, & Hornblow, 2009; Schweitzer, Greenslade, & Kagee, 2007; Sossou, Craig, Ogren, & Schnak, 2008). The qualitative work shows a gradual process of acculturation,

including the tendency for refugees to lose aspects of their original culture as they adapt to American culture and come to terms with their new life (Birman & Trickett, 2001; Johnson, 1996)

Still, many resettled refugee studies report severe limitations to generalizing their findings, including acknowledging methodological issues in collating information from existing literature or small, nonrandom studies, as well as the fact that study designs cannot isolate casual relationships (e.g. Andenmatten et al., 2010; Brick et al., 2010; Bruno, 2011; Gilbert, 2005; Johnson, 1989). The majority of studies in the literature took a primary 'qualitative' approach, and their population or subject of interest was often Southeast Asian Refugees (including subsets of Vietnamese, Laotians, or Hmong) or general refugee resettlement policy. Although this is not a systematic review, this literature review points to the gaps in the current programming and in research with representative samples of recent populations. The systematic review in Chapter 4 is therefore needed in order to draw conclusions from the literature using an evidence-based perspective.

The table in the Appendix of this chapter presents some factors theorized to affect refugee self-sufficiency and wellbeing as well as key works that include these theories and/or test them. This list was compiled throughout the duration of thesis writing, and the author acknowledges that the evidence is often low or scant.

The largest category of items which are theorized to correlate with economic self-sufficiency is demographic variables including gender, age, marital status, having children, household size, origin and ethic group, time in country, length of time worked, secondary migration, disability, health variables, and mood disorders. Although they are all presented together to describe the populations of interest in the present, the theories about how they work as moderators and/or mediators sometimes differ. For example, secondary migrants may be disadvantaged from being more recent arrivals to the city and more recent arrivals to a workplace compared to initial arrivals, or from belonging to a particular social group could lead to different wages than those earned by the other resettled refugees.

Other factors group around specific theories of what is important for economic self-sufficiency. Following the developmental contexualism model (Bronstein, 2011; Lerner, 1991), past trauma history (Hauff & Vaglum, 1993), years spent as a refugee (Codell et al., 2011), urban residence in a country of origin (Tran, 1991), and initial language level (Ibrahim, Sgro, Mansouri, & Jubb, 2010) are theorized to be important for resettled refugees' economic self-sufficiency outcomes. Human capital is also thought to be important with education level, previous work experience and occupational status, self-efficacy, acculturation attitudes, country language skills, qualifications and training undertaken since arrival, and recognition of overseas qualifications. Additionally, social capital is seen to be important for economic self-sufficiency through the existence of social networks, social support, and feeling valued in one's community. Human capital

often relates to the individual level whilst social capital relates to the proximate level of Bronfenbrenner's model.

Another grouping of hypothesized variables focuses on the two-way nature of integration (Portes, 1995), including the impact the receiving agency's variables, those of language opportunities, discrimination, education and training opportunities, the job market, the geographic region, and access to transport, have on economic self-sufficiency. These variables link to the Bronfenbrenner ecological model, particularly in the importance of the fundamental and intermediate levels. They hypothesize the importance of national policies and broader contexts as well as communities' attitudes and opportunities for economic self-sufficiency.

Possibly the most salient aspect of the table is simply the number and variety of factors theorized to affect the economic self-sufficiency and wellbeing of any resettled refugee.

Nature of evaluating complex interventions

All of these theories and factors point to the conspicuous need to evaluation of the refugee resettlement program as being a complex intervention. The populations, community contexts, and interventions themselves are heterogeneous; the services a refugee accesses vary based upon their own background and experiences as well as the resettlement agency and the community context. Thus, it is difficult not only to define the intervention and its theory of change, but also to examine a complex intervention without such delineation of the intervention. An existing debate in social research centers

around the ability to and value in evaluating complex interventions. Petticrew and Roberts (2005) promote the need to understand not only if a complex intervention works, but also how and why it works, in order to truly understand which contexts are important and whether results can be replicated.

Refugee resettlement as an intervention, with employment programs as a sub-component of that intervention, meets every definition of a complex intervention. Complex interventions can be defined as having at least some of the following components: '…several elements that "may act both independently and inter-dependently"; complex systems or mechanisms for delivery of the intervention; an intervention that is difficult to describe and replicate; complex explanatory pathways, either physiological or psychosocial; and a degree of uncertainty about the mechanism of action of the intervention or its "active ingredient"' (Lewin, Glenton, & Oxman, 2009, p. 339). Lewin, Glenton, and Oxman (2009) are among the researchers who have lamented the lack of use of qualitative research to help specify the components and theories of change around interventions to accompany and lay the groundwork for randomized controlled trials and rigorous research. This thesis takes the first step to examine the nature and prevalence of economic self-sufficiency for refugees as well as economic self-sufficiency programming.

Background and rationale for methodological approach

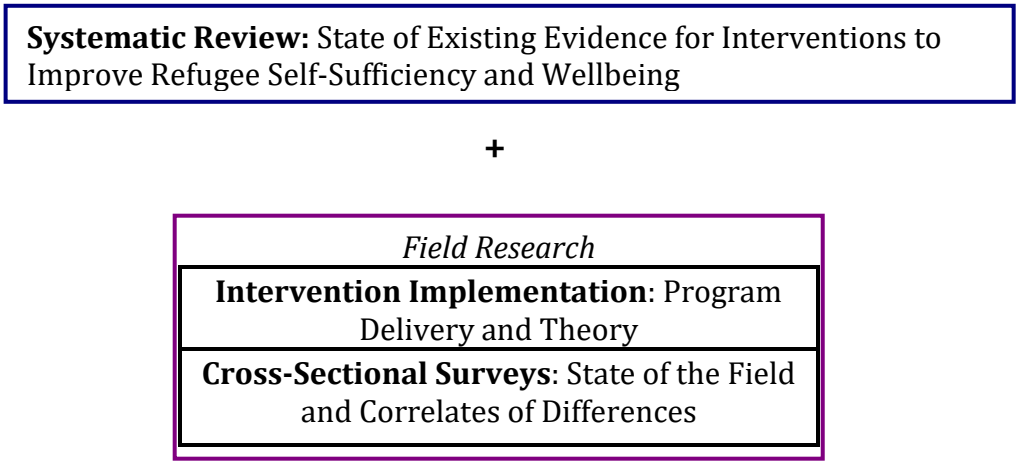
This dissertation approaches research with the frame that 'there is a reality which exists independently of our awareness of it' (Robson, 2002, p. 33). It explains outcomes as complex results of mechanisms and contexts whilst acknowledging the social construction of meaning and its multiple definitions

and interpretations. From this critical realist perspective, research should aim to be as rigorous and representative as possible, to lessen the chances of issues such as selection bias and statistical noise from unmeasured external factors. It instead should seek to examine the mechanisms, processes, and structures that account for the patterns observed. Concomitantly, research must build upon the state of the research in order to grow and expand the field in an appropriate way.

As a means to examine economic self-sufficiency, the primary goal of the US refugee resettlement program, this thesis takes a primarily three-pronged approach: a systematic review to understand the state of the field, qualitative research into program theory and delivery, and a cross-sectional survey of refugees' economic outcomes and reported wellbeing and potential correlates of differences. It rejects a dichotomy of qualitative versus quantitative research (Bryman, 1984) and reaches what has been called 'Teddlie and Tashakkori's third movement: Mixed methods and evidence-based inquiry meet one another in a soft center' (Denzin & Lincoln, 2000, p. 2).

The field research conducted aimed to balance feasibility, quality, and richness. In an evaluation framework for the Office of Refugee Resettlement, Nightingale (2008) recommended that, 'In both experimental and non-experimental evaluations, the richness of evaluation results is enhanced by multi-site studies' (p. 20). Although it was decided in the transfer of status that a multi-city study was not feasible, two refugee resettlement agencies were used to capture different administrative features. The two agencies are not viewed as

comparisons, but rather as complementary sites. The culmination of this research lays the groundwork for the development of interventions that meet the needs and capacities of refugees, as well as the development of a framework to more rigorously test such interventions.



The systematic review was the first step in narrowing the research and understanding the field. However, the review did not return enough high quality studies for meta-analysis and to draw conclusions on effectiveness. Even this case of an empty review adds to the literature by demonstrating a lack of adequate evidence to drive practice or policy, as well as detailing the further research that excluded studies suggest, and a need for well-designed research in this field (The Empty Reviews Project, 2011). Empirical research around resettled refugees is widely acknowledged to be in a nascent stage. In a review of ways to improve refugee resettlement research, Nightingale (2008) remarked, '…there has been less focus on making evaluation, on a broader scale, a part of the refugee program. There have been very few internal or independent evaluations of ORR programs, and those that have been conducted have not been adequate in rigor or scope' (p. 5). The systematic review revealed the

evaluations, their rigor and scope, and the research gaps of the international literature on refugee resettlement.

Furthermore, in communications, observations, and interviews, resettlement agency staff members demonstrated a strong belief in their work but were generally unable to clearly articulate logic models or produce manuals for the steps in their economic interventions. Variability between staff and agencies also exists, leading Andenmatten et al. (2010) to state that, 'currently there is very little guiding policy that resettlement organizations are required in terms of breadth and duration of assistance' (p. 59). There is a real possibility of entities doing harm by not designing or implementing interventions that meet the needs of refugees, or for individuals to believe that refugees are much better or worse off than they actually are (Dishion et al., 1999; McCord, 2003; Rutter, 1999). Thus, this project aims to capture the 'development stage' for complex interventions using the Medical Research Council guidance.

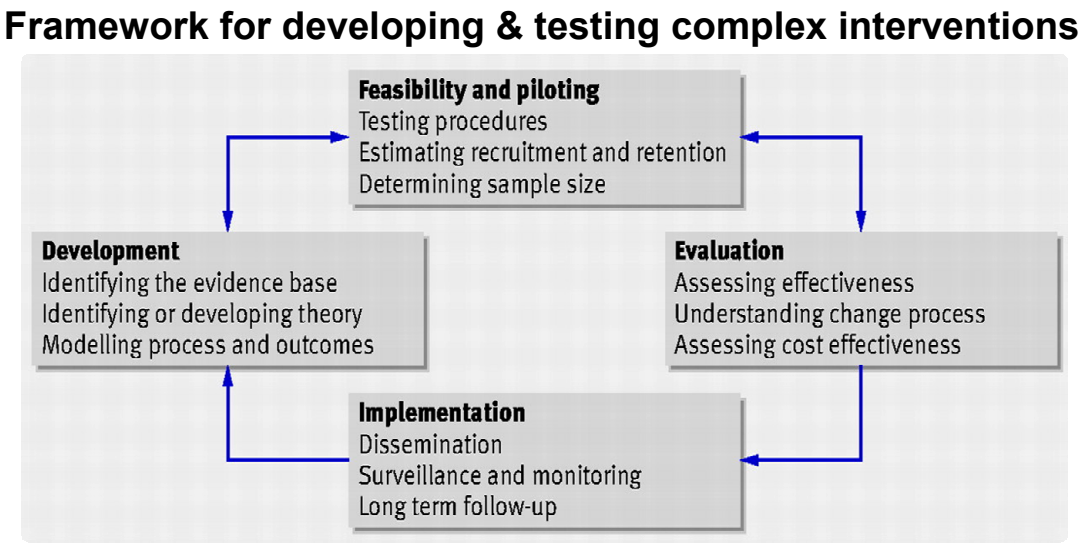


Figure 7: Evidence-based social intervention framework (Craig et al., 2008)

The field of evidence-based practice can also be viewed as a more linear process (see below). As such, through a systematic review this dissertation first determines whether there are any practice guidelines that can be drawn. In the absence of widespread high-quality research that can be applied to the current refugee populations, the cross-sectional survey and accompanying qualitative research aimed to understand the nature and prevalence of economic problems (as both defined by governmental indicators and by refugees themselves) as well as to examine the correlational evidence for risk and protective factors. Additionally, through qualitative research, the thesis sheds light on the theories and mechanisms behind the interventions as well as which factors they are aiming to influence.

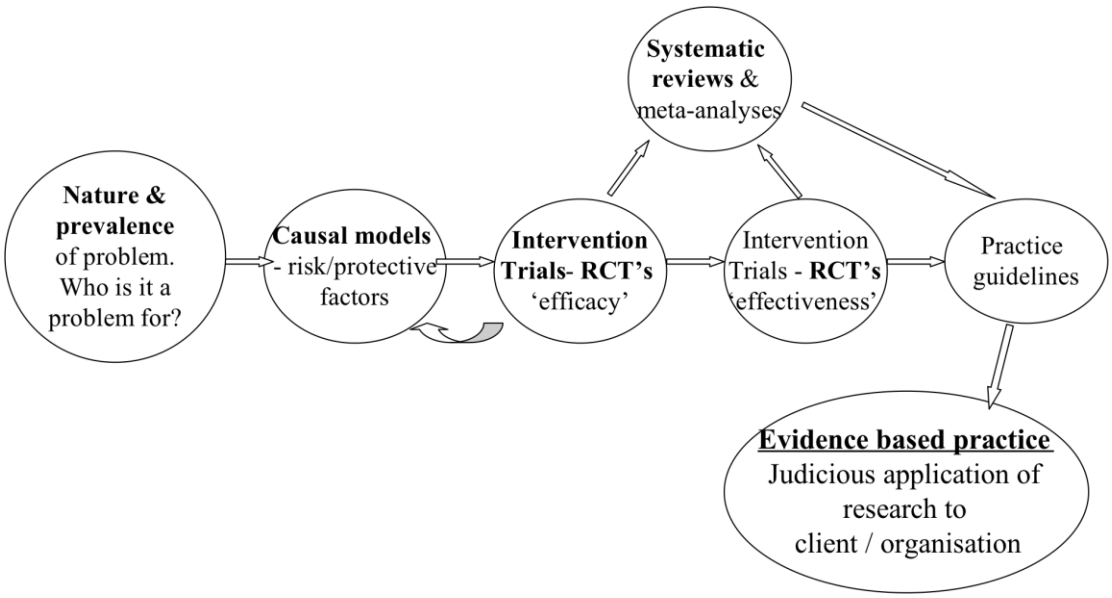


Figure 8: From basic research question to evidence-based practice (Gardner, 2011)

Accordingly, evidence-based social intervention begins by defining not only the persons and populations of interest but also the context and theory. Individuals are influenced multi-directionally with different environmental systems (e.g.

nation-state, neighborhood, and family systems), and by the human, economic, physical and temporal resources used in the dynamic systems of social processes (Bronfenbrenner, 1979; Tseng & Seidman, 2007; Weiss, 2001). Programs may aim to change individual behavior directly or indirectly by changing individuals in their community, the resources in the community, or the community as a whole through a complex intervention. For example, increasing how 'welcoming' a community is through a public campaign may be hypothesized to result in improved economic outcomes as individuals share resources and inform others about job opportunities. Conversely, prejudice towards individuals may negatively affect job opportunities and happiness, as hypothesized with community prejudices towards Iraqi refugees in the US (Adess et al., 2010). The nature and prevalence of positive and negative correlations with economic outcomes are identified through quantitative cross-sectional research as well as qualitative interviews and observations. Understanding the nature and prevalence of issues and whether interventions are designed and implemented in a manner theorized to target these issues allows for the better design of programs and the assessment of current programs.

Conclusion

The emphasis on evidence-based programs has received substantial attention recently, including in the US. Peter Orszag (2008), the first director of the Office of Management and Budget for the Obama Administration stated that, 'Wherever possible, we should design new initiatives to build rigorous data about what works and then act on evidence that emerges — expanding the approaches that work best, fine-tuning the ones that get mixed results, and shutting down those that are failing… we can build knowledge so that spending

decisions are based not only on good intentions, but also on strong evidence that carefully targeted investments will produce results' (p. 1). Significant resources have been invested in the economic self-sufficiency of resettled refugees without systematically examining the knowledge that can be drawn from the evidence base, the prevalence of economic issues, or the interventions themselves. Understanding the factors at play regarding the economic self-sufficiency of refugees and beginning an evidence-based approach to the field of refugee studies will ensure, as has been much-discussed in refugee studies and much-neglected in refugee research, that governmental interventions are fulfilling their roles and obligations to refugees.

Chapter 2 Appendix

Table 3: Factors theorized to affect refugees' economic self-sufficiency

Factors theorized to affect resettled refugees' economic self-sufficiency and their studies
(Medium gray for significant quantitative correlations and dark gray for qualitative findings)

Factor	Work cited	Country (city & population)	Correlate	More detail
Demographic Variables				
Gender	Bevelander Hagström, & Rönnqvist, 2009	Sweden	Employment rate	Do not control for other variables
	Codell et al., 2011	US (Salt Lake City); 50% Burmese, 25% Bhutanese, 25% Iraqis	Wage	85, Based on admin data; young earn more; women earned less
	Franz, 2003a, 2003b	US (NYC, Bosnian)	Selection of employment (more low-skilled, low-paid)	Qualitative, Author also looked at Bosnian refugees in Bosnia
	Ibrahim, Sgro, Mansouri, & Jubb, 2010	Australia (Ethiopian)	Employment	Only 51% held refugee visas (29% humanitarian), 403 mail-in surveys, logistic regression
	Owens-Manley & Coughlan, 2000	USA (Upstate New York, Bosnians)	Wage	100 families, no statistical tests reported
	Potocky-Tripodi, 2003	USA (Minneapolis-St. Paul, Hmong & Somali Refugees)	Employment status	Phone survey using random selection
	Siraj, 2007	USA	Employment status, hourly pay rate, & annual earnings	Regression (N=2713) & OLS (n=1547), 1995-2000 Office of Refugee Resettlement data
Age	Codell et al., 2011	USA (Salt Lake City; 50% Burmese, 25% Bhutanese, 25% Iraqis)	Wage	N=85, Based on admin data; young earn more
	Hauff & Vaglum, 1993	Norway (Vietnamese)	Labor force participation	3 years after arrival; 131 Vietnamese boat refugees
	Tran, 1991	USA ('Indochinese')	Employment status	Sample of 1,960 refugees, logistic regression analysis
	Siraj, 2007	USA	Employment status	Regression (N=2713), 1995-2000 Office of Refugee Resettlement data
	Waxman, 2001	Australia (Sydney, Bosnian, Afghan & Iraqi refugees)	Employment likelihood	N=118
Marital status	Hauff & Vaglum, 1993	Norway (Vietnamese)	Labor force participation	3 years after arrival; 125 Vietnamese boat refugees, sig. in multivariate analysis
	Potocky-Tripodi, 2003	USA (Minneapolis-St. Paul, Hmong Refugees)	Employment status	Random phone survey

	Potocky-Tripodi, 2001	USA (Census data of Soviet/East European & Cuban refugees)	Public assistance usage	Soviet/E European n=4241, SE Asian n=4748, Cuban n=4707, not the UN definition, non-significant for employment
Having children	Potocky-Tripodi, 2003	USA (Minneapolis-St. Paul, Somali Refugees)	Employment status	Phone survey using random selection
	Potocky-Tripodi, 2001	USA (Census data of SE Asian refugees)	Employment status & household income	SE Asian N=4748; not the legal refugee definition
Household size	Potocky-Tripodi, 2001	USA (Census data of SE Asian refugees)	Household income	SE Asian N=4748; not the legal refugee definition
Origin and ethnic group	Bevelander Hagström, & Rönnqvist, 2009	Sweden	Employment rate	Do not control for other variables
	Correa-Velez, Barnett, & Gifford, 2013	Australia (Southeast Queensland, male refugees)	Employment status	N=233, 232 resettled; for region of origin; logistic regression at time one for a) all participants and b) excluding those not looking for work and GEE longitudinal predictor for a
	Desbartes, 1986	USA (Illinois and California, Sino-Vietnamese and ethnic Vietnamese)	Employment status	602 refugees interviewed, controlled for pre-arrival characteristics and resettlement context
	Potocky-Tripodi, 2003	USA (Minneapolis-St. Paul, Hmong-Somali and Russian refugees)	Employment status	Random phone survey of 552
	Siraj, 2007	USA	Employment status, yearly income, and hourly earnings	Regression (N=2713) & OLS (n=1547), 1995-2000 Office of Refugee Resettlement data, being Eastern European negatively associated employment status but positively associated Income and hourly earnings
	Strand, 1984	USA (San Diego, Vietnamese & Cambodians)	Employment rate	Drawn from a larger study of 800 Southeast Asian refugees
Time in country	Bevelander Hagström, & Rönnqvist, 2009	Sweden	Employment rate	Do not control for other variables
	Correa-Velez, Barnett, & Gifford, 2013	Australia (Southeast Queensland, male refugees)	Employment status	N=233, 232 resettled; logistic regression at time 1 and GEE longitudinal predictor for a) all participants and b) excluding those not looking for work
	Cortes, 2004	USA	Earnings and hours worked	Census data (arrivals 1975-1980 from Afghanistan, Cuba, the Soviet Union, Ethiopia, Haiti, Cambodia, Laos, and Vietnam classified as refugees)
	Hugo, 2011	Australia	Labor force participation	600 refugee-humanitarian settlers
	Marsh, 1980	USA ('Indochinese')	Income per week and employment rates	1975 Indochinese arrivals, surveys by the Department of Health, Education, and Welfare
	Siraj, 2007	USA	Annual earnings	Ordinary least squares (OLS)

					regression (N=1547), 1995-2000 Office of Refugee Resettlement data
		Strand, 1984	USA ('Indochinese' in San Diego)	Employment status	N=800 heads of household
		Takeda, 2000	USA (SE cities, Iraqis)	Income	Regression, 105 Iraqi males
		Waxman, 2001	Australia (Sydney, Bosnian, Afghan & Iraqi refugees	Employment likelihood	N=118
	Citizenship	Potocky-Tripodi, 2001	USA (Census data of SE Asian refugees)	Household income	SE Asian n=4748; not the legal refugee definition
	Length of time worked	Siraj, 2007	USA	Hourly wages	OLS (n=1547), 1995-2000 Office of Refugee Resettlement data
	Secondary migration	Ott, 2011	USA	Employment	Qualitative, case studies
		Omar, 2013	Australia & USA (Somali)	Employment	Qualitative, 80 interviews including 6 focus groups
	Disability	Potocky-Tripodi, 2001	USA (Census data of Soviet/East European & Cuban refugees)	Employment status	Soviet/E European n=4241, SE Asian n=4748, Cuban n=4707, not the UN definition
	Health variables	Strand, 1984	USA ('Indochinese' in San Diego)	Employment status	A significant predictor in five of seven regression analysis equations, N=800 heads of household
		Tran, 1991	USA ('Indochinese')	Employment status	Sample of 1,960 refugees, logistic regression analysis
	Mood disorders	Bogic, 2012	Germany, Italy, and the UK (from the former Yugoslavia)	(Un)employment	Multivariate logistic regression; N=854
Pre-resettlement History					
	Trauma history	Hauff & Vaglum, 1993	Norway (Vietnamese)	Labor force participation	3 years after arrival; 145 Vietnamese boat refugees at point 1 and 131 at point 2; controlled for age, sex, and mental health
	Years as a refugee	Codell et al., 2011	USA (Salt Lake City); 50% Burmese, 25% Bhutanese, 25% Iraqis	Employment status	85 refugees, Based on admin data
	Urban residence in country of origin	Tran, 1991	USA ('Indochinese')	Employment status	N=1,960 refugees, logistic regression analysis
	Initial language level	Ibrahim, Sgro, Mansouri, & Jubb, 2010	Australia (Ethiopian)	Employment	Only 51% held refugee visas (29% humanitarian), 403 mail-in surveys, logistic regression
Human Capital					
	Previous work experience/occupational status	Stein, 1979	US (Vietnamese)	Occupational adjustment	The higher ones' former occupational status is, the less likely they will use their skills in employment. Increased time needed for reentry into former occupations (used data but no statistical tests available)
	Self-efficacy	Sulaiman-Hill & Thompson, 2013	New Zealand and Australia (Afghan &	Employment, good English, levels of	N=186

		Kurdish refugees)	education	
Acculturation attitudes	Potocky-Tripodi, 2003	USA (Minneapolis-St. Paul, Hmong)	Employment status	Random phone survey, attitude toward intermarriage
Education level	Bevelander Hagström, & Rönnqvist, 2009	Sweden	Employment rate	Do not control for other variables
	Connor, 2010	USA (all)	Employment, wages, and occupational attainment	N=445, New Immigrant Survey in 2003, those with former refugee status (includes asylum-seekers)
	Potocky-Tripodi, 2003	USA (Minneapolis-St. Paul, Somali Refugees)	Earnings (Somali & Hmong) & employment status (Somali refugees)	Random phone survey of 552
	Siraj, 2007	USA	Employment status hourly wage & annual earnings	Regression (N=2713) & OLS (n=1547), 1995-2000 Office of Refugee Resettlement data, "homeland education"
	Takeda, 2000	USA (SE cities, Iraqis)	Income	Regression, 105 Iraqi males
	Tran, 1991	USA ('Indochinese')	Employment status	Sample of 1,960 refugees, logistic regression analysis
	Potocky-Tripodi, 2001	USA (Census data of Soviet/East European, SE Asian, & Cuban refugees)	Household income	Soviet/E European n=4241, SE Asian n=4748, Cuban n=4707; Definition of refugees NOT the UNHCR definition; not all resettled
Host country language skills	Change Makers Refugee Forum, 2012	New Zealand	Types of employment and ability to meet living needs	Focus groups and interviews with 17 people in employment from 11 different refugee-background communities
	Mamgain & Collins, 2003	USA (Portland, Maine)	Wages	610 households, administrative data of Catholic Charities Maine Refugees and Immigration Services
	McLean, Friesen, & Hyndman 2006; Brunner, Hyndman, & Friesen, 2010	Canada (Vancouver, Acehnese refugees)	Employment	75 surveys and 50 semi-structured interviews
	Owens-Manley & Coughlan, 2000	USA (Upstate New York, Bosnians)	Wage	100 families, no statistical tests reported
	Potocky-Tripodi, 2003	USA (Minneapolis-St. Paul, Hmong and Russian Refugees)	Employment status	Random phone survey
	Robinson et al., 2010	Ireland & UK (DRC refugees)	Employment	Interviews with 27 DRC refugees and four focus groups
	Siraj, 2007	USA	Employment status, hourly wage, & yearly income	Regression (N=2713) & OLS (n=1547), 1995-2000 Office of Refugee Resettlement data
	Tran, 1991	USA ('Indochinese')	Labor force participation, unemployment, and earned income	Sample of 1,960 refugees, logistic regression analysis
	Waxman, 2001	Australia (Sydney, Bosnian, Afghan & Iraqi refugees	Employment likelihood	N=117
Qualifications or	Ibrahim, Sgro,	Australia (Ethiopian)	Employment	Only 51% held refugee visas

	training undertaken since arrival	Mansouri, & Jubb, 2010			(29% humanitarian), 403 mail-in surveys, logistic regression
	Recognition of overseas qualifications	Correa-Velez, Barnett, & Gifford, 2013	Australia (Southeast Queensland, male refugees)	Employment status	Recognition of overseas qualifications NEGATIVELY correlated with employment; N=207 people, 99%+ resettled; GEE for sample, excluding those not actively looking for work
Receiving communities' assets					
	Receiving agency's variables	Andenmatten et al., 2010	USA	Economic self-sufficiency	Quality and duration of services
		Bach, 1988	USA (Southeast Asian refugees)	Poverty and government programs	N=1,056 Southeast Asian
		Brick et al., 2010	USA	Long-term employment outcomes	Qualitative review, thought to be related to duration of assistance
		Tran, 1991	USA ('Indochinese')	Employment status and type of sponsorship	Sample of 1,960 refugees, logistic regression analysis
	Language opportunities	Strand, 1984	USA ('Indochinese' in San Diego)	Employment status	A significant predictor in all seven regression analysis equations, n=800 heads of household; enrollment in English classes correlated with being less likely to be employed
		Waxman, 2001, 2000	Australia (Sydney, Iraqi, Bosnian, and Afghan refugees	Employment status (and attending classes)	Snowball sampling; 77 Iraqis, 50 Bosnians, and 35 Afghans
	Discrimination	Change Makers Refugee Forum, 2012	New Zealand	Employment	Focus groups and interviews with 17 people in employment from 11 different refugee-background communities
	Participation in employment programmes	Change Makers Refugee Forum, 2012	New Zealand	Types of employment and ability to meet living needs	Focus groups and interviews with 17 people in employment from 11 different refugee-background communities
	Educational and training opportunity	Change Makers Refugee Forum, 2012	New Zealand	Employment	Focus groups and interviews with 17 people in employment from 11 different refugee-background communities
		Connor, 2010	USA (all)	Occupational attainment	N=445, New Immigrant Survey in 2003, those with former refugee status (includes asylum-seekers), education taken in the USA
	Job market (e.g. types of employment)	Bach, 1988	USA (Southeast Asian refugees)	Poverty and government programs	N=1,056 Southeast Asian
		Corvo & Peterson, 2005	USA (Syracuse, NY; Bosnian refugees)	Economic self-sufficiency	Theorized as less due to regional labor shortage
		Mamgain & Collins, 2003	USA (Portland, Maine)	Wages (and hire date: proxy for economy)	N=312, Significance between wages and hire date theorized to be because of tightening of labor market
		Ott, 2011	USA (Bhutanese,	Employment and	Local labor market conditions

		Burmese, and Iraqis)	wages	and willingness to travel
Local/ Geographic region (incl. attitude of the community towards refugees and social and economic climate)	Connor, 2010	USA (all)	Wages (and neighborhood effects)	N=445, New Immigrant Survey in 2003, those with former refugee status (includes asylum-seekers)
	Correa-Velez, Barnett, & Gifford, 2013	Australia (Southeast Queensland, male refugees)	Employment status	Correlated with placement of settlement in urban environment; N=214, 99% resettled; logistic regression for all participants
	Haines & Rosenblum, 2010	USA (Richmond, Virginia)	Employment	Qualitative, availability of employment allowed for employment
	Haines, 1988	USA (Southeast Asian)	Economic self-sufficiency	Social and economic environment theorized as important for economic self-sufficiency and makes difficult to document program effects
	Siraj, 2007	USA	Employment status & hourly earnings	Regression (N=2713) & OLS (n=1547), 1995-2000 Office of Refugee Resettlement data, those in the Midwest & South more likely to be employed
	Smith, 2008	USA (Utica, NY)	Employment	Qualitative work, importance of the community and positive attitudes towards refugees as well as economic climate
Access to transport	Blumenberg, 2007	USA (California, Southeast Asian refugees)	Employment	Unlimited access to automobiles a significant predictor of employment
	Colic-Peisker and Tilbury, 2007	Australia	Adequate employment	N=150, necessity of having a car cited as a barrier by 22.7% of the sample including 34% of ex-Yugoslavs and 26% of African refugees
	Correa-Velez, Barnett, & Gifford, 2013	Australia (Southeast Queensland, male refugees)	Employment status	Owning a car; *N*=214, 99% resettled; logistic regression for all participants
	Strand, 1984	USA ('Indochinese' in San Diego)	Employment status	Owning a car for Vietnamese and Lao; regression analysis equations; *N*=800 heads of household
Social capital				
Social networks – e.g. ethnic enclaves, familial connections	Correa-Velez, Barnett, & Gifford, 2013	Australia (Southeast Queensland, male refugees)	Employment status	N=126; 99%+ resettled; logistic regression excludes those not looking for work
	Green et al., 2011	Australia	Underemployment	Social capital and networks outside of ethnic niches
	Mamgain & Collins, 2003	USA (Portland, Maine)	Long-term employment success	Qualitative research indicating social connections with the white community are important
Feeling like a valued member of one's ethnic community	Ibrahim, Sgro, Mansouri, & Jubb, 2010	Australia (Ethiopian)	Employment	Only 51% held refugee visas (29% humanitarian), 403 mail-in surveys, logistic regression
Employment rate of non-Western	Damm, 2012, 2009	Denmark ('refugees' as arrival from	Employment	Administrative data

immigrant and co-ethnic men		refugee-sending countries minus family reunification)		
'Social support' and 'friend support'	Takeda, 2000	USA (SE cities, Iraqis)	Income	Regression, 105 Iraqi males

Please note, GEE = General estimating equation, OLS = Ordinary least squares, and additional statistical abbreviations can be found in the Appendix: Frequently-used statistical abbreviations.

Chapter 3. Research Organization and Process

Introduction

This research design was flexible by nature, in line with critical realist epistemological orientations (Bloch, 1999). Whilst this orientation acknowledges that there is no one 'authentic' voice arising from the individuals or populations studied, it attempts to continually improve relevant concepts to understand the mechanisms at play behind human behavior and outcomes, with the aim to glean knowledge from the world in a systematic, evidence-based manner (Guerin & Guerin, 2007). This approach has aptly been classified as a 'disciplined lack of clarity,' allowing for that which is unknowable before beginning (Law, 2003, p. 3). For example, although the literature review was undertaken first and the systematic review followed, observations and participants' perspectives molded the research in a grounded theory manner (Sheridan & Storch, 2009). The research questions originated from gaps in the research, preliminary interviews from experts, and from past experience and discussions with refugees. The literature, observations, interviews with practitioners

, and discussions with refugees challenged each other at times, such as regarding the importance of health insurance, or the centrality of the caste system amongst Bhutanese refugees. In contrast, at other times the sources substantiated each other – as ideal in 'triangulation.'

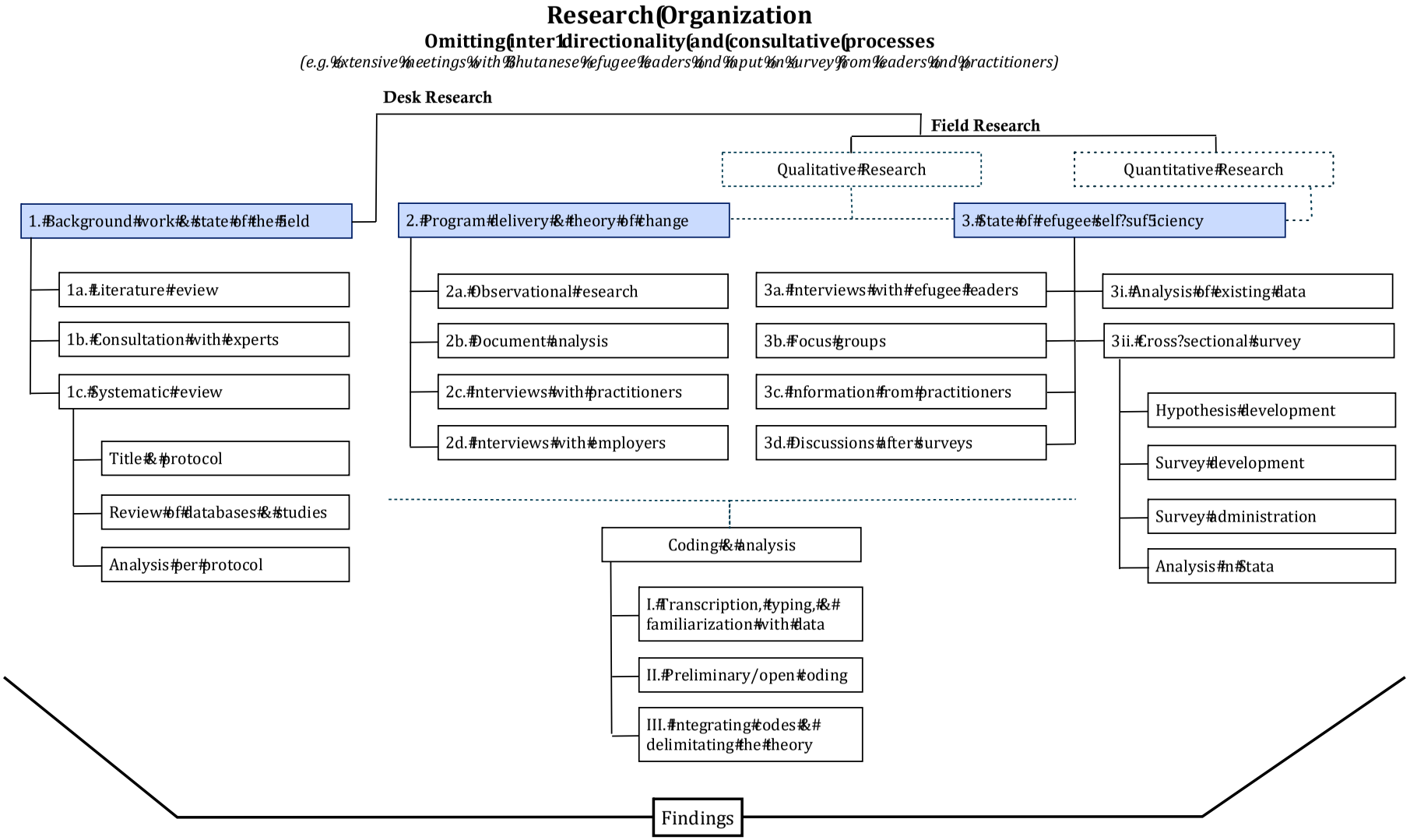
This section reviews the research process, including the methodology in practice, the qualitative and quantitative research study design, collaborators, ethics, and positionality.

Methodology in practice

In practice, the three-pronged approach of a systematic review, a qualitative evaluation of the implementation of and theory of change behind interventions, and a cross-sectional survey took into account feasibility, the needs and desires of participants, and the state of the field. Undertaken together, these enabled a comprehensive focus on the development phase of the complex intervention of refugee resettlement employment programming (Craig et al., 2008). In order to avoid undue intrusion, the research questions targeted a clear gap in knowledge, and consultation was continuous to ensure that the research was beneficial to the service agencies and refugee community organizations (Berg & Lune, 2004; *CUREC: Social Research Association Ethical Guidelines*, 2003). At the beginning of field research in Pittsburgh in the summer of 2012, separate initial meetings took place with 'gatekeepers' to explore program implementation and theory of change within the following the resettlement agencies: Jewish Family and Children's Service (JF&CS) and Northern Multi-Service Companies ('Northern').

Additionally, as the Bhutanese community emerged as a population of concern from meetings and observations, the community leaders were met and interviewed. Upon return to the field site in January 2013, separate meetings took place with one Bhutanese Community Association of Pittsburgh (BCAP) employee, elected leaders of the BCAP, and neighborhood leaders. These meetings confirmed the hypothesis that the research was of value to the communities being studied. They also helped modify the research plan and questions to make them of more use to the community, such as adding interviews with employers and questions about education desires.

Although the methodology is not cleanly split chronologically or by question due to the nature of the grounded theory approach, the diagram on the next page shows the rough steps of the research.


Research Organization
Omitting inter-directionality and consultative processes
(e.g. extensive meetings with Bhutanese refugee leaders and input on survey from leaders and practitioners)
Desk Research
Field Research
Qualitative Research
Quantitative Research
1. Background work & state of the field
2. Program delivery & theory of change
3. State of refugee self-sufficiency
1a. Literature review
1b. Consultation with experts
1c. Systematic review
Title & protocol
Review of databases & studies
Analysis per protocol
2a. Observational research
2b. Document analysis
2c. Interviews with practitioners
2d. Interviews with employers
3a. Interviews with refugee leaders
3b. Focus groups
3c. Information from practitioners
3d. Discussions after surveys
3i. Analysis of existing data
3ii. Cross-sectional survey
Hypothesis development
Survey development
Survey administration
Analysis in Stata
Coding & analysis
I. Transcription, typing, & familiarization with data
II. Preliminary/open coding
III. Integrating codes & delimitating the theory
Findings

By breaking the research down into the following series of questions, the aims and reasoning for the research plan are elucidated:

How are specific refugee resettlement employment and economic self-sufficiency programs expected to work?

- This question was answered on a macro-level through the literature review and consultation with experts as well as at the community level through observation, document analysis, and interviews with practitioners, refugees, and employers.

How are the programs delivered?

- This question aimed to look at key themes amongst project delivery and was answered primarily through intense participant observation, enhanced by reviews of files and program implementation data, interviews and document analysis, undertaken in a grounded-theory manner. The program delivery was organized and summarized with the acknowledgement that this captured a point in time of program delivery as defined by the researcher. Although this question was never intended to be a process evaluation, implementation was also summarized using the template for intervention description and replication (TIDieR) guide, and perspectives about implementation were explored.

What is the current state of refugee self-sufficiency, and what appears to correlate with improved outcomes?

- The systematic review reveals the current state of the research field and any effects of programs on participants' self-sufficiency and wellbeing.
- The cross-sectional survey was the primary vehicle through which the 'epidemiological' state of self-sufficiency in the field research was examined, using a random sample.[15] The qualitative research, particularly the interviews, focus groups, and observations also provide rich, non-representative data on perceptions of refugee self-sufficiency from refugees, service providers, and employers.
- Correlations are analyzed from the cross-sectional survey.

Further detail on these approaches is shown in the next section on study design.

Study design

This section covers the design aspects, divided into the systematic review, qualitative research, and cross-sectional survey.

[15] Although the word, 'epidemiological' is used throughout the thesis, this does not imply the medicalization of self-sufficiency. Rather, this thesis aims to apply the idea of epidemiology: studying the patterns, causes, and effects of health and disease conditions in defined populations to the study of economic self-sufficiency and wellbeing in defined refugee populations.

Systematic review

A systematic review was used to answer the effectiveness question on what improves economic self-sufficiency and wellbeing outcomes. The systematic review extended the reach of sources considered beyond a traditional literature review thorough a sensitive search strategy designed to detect gray literature. The systematic review was completed in tandem with a more traditional literature review, snowballing the articles and including in the literature review articles of interest screened in the systematic review. The alternative to a systematic review would have been a more in-depth literature review, which may have allowed for greater complexity of analysis and flexibility in allowing conclusions to be driven by the studies found. However, this was rejected given both the evidence-based framework of this thesis and the potential pitfalls of a traditional literature review.

Systematic reviews make sense of a wealth of literature to contribute to the question of 'what works' – a central part of the third research question in this thesis (Petticrew & Roberts, 2006). Traditional literature reviews often focus on a single or a small number of studies to make broader conclusions without scientifically analyzing either the quality of those studies or the studies that may have been omitted in making that conclusion. The precautions of systematic reviews minimize bias from the original studies included as well as from publication, dissemination, and the review process (Littell, Corcoran, & Pillai, 2008). The protocol minimizes these biases with specified inclusion requirements, criteria for meta-analysis or combining studies, and robust searches to target studies that may not be peer reviewed or disseminated well.

These actions allow for greater internal validity in statements about what works. Indeed, systematic reviews have been called 'ever more important [for policy and practice] against a backdrop of accountability and austerity' (Hagen-Zanker et al., 2012, p. 1).

The protocol for the Campbell-registered systematic review was published before doing the review and included plans for collection and analysis. The final review makes up the next chapter of the thesis. It was submitted in March 2014 to the Campbell Collaboration Social Welfare Group for publication and has been accepted pending very minor changes.

Qualitative data collection

In the Glaserian grounded theory approach, observations and recordings are meticulously written down and reviewed throughout the research process, and the concepts and questions are modified as needed (Sheridan & Storch, 2009). The research aimed to strengthen its claims through trough triangulations of methods and sources with interviews, observations, focus groups, and document analysis (Patton, 1999). This tests the consistency of findings and corroborates statements; it does not nullify the validity of statement with contrary perspectives, but acknowledges the multiple ideas existing around one construct (Holloway & Wheeler, 2009).

A sample semi-structured interview and focus group template is available in the Appendix: CUREC approval and sample questions. These were developed based on

experience[16] and findings from the literature review, and modified throughout the research process based on the knowledge accrued. The conversation flow of the interviews and focus groups depended on the participants and context. Individual comments were often followed-up on such as asking for clarifications about the importance of Bhutanese history of oppression in making adjustment difficult, about the constraints of macro-policy, and about divisions based on religion. Refugee service providers were asked about divisions among the Bhutanese population in general. After receiving comments about stark divisions with age, religion, and caste, this question was frequently followed by asking specifically about these social differentiation categories. Likewise, the primary researcher often asked for clarification from the service provider after observing a particular task or interaction, such as whether the observation was typical or the reasons behind particular work.

In Pittsburgh, the qualitative research translated into detailed notebooks written with the day's observations. Interview notes for the two months of initial fieldwork focused on program implementation and theory of change. Additional notes for the subsequent rounds of fieldwork focused more on observations and discussions from carrying out the survey. These were then typed up for reflection and familiarity with the data. Interviews were recorded with an audio recorder based on the intuition of the interviewer, when the interviewee agreed and when the environment was deemed appropriate in terms of noise level and

[16] The interview and focus group guides drew heavily upon the researcher's coursework, work as a social science research analyst for the US government, volunteer work, experience with her master's thesis on the secondary migration of resettled refugees which included seventeen interviews, and a group research project on the inclusion of young asylum-seekers which included twelve interviews of service providers from ten organizations.

the interviewee's comfort level. Relationships were maintained with key informants, which allowed for further rounds of interviews as questions arose.

Strong qualitative research depends on the 'astute pattern recognition' of the research, often strengthened through prior experience (Patton, 1999, p. 1191). The researcher's extensive training and eight years working with, advocating for, and doing research about resettled refugees in the US, specifically in Pittsburgh, enhanced the ability for pattern recognition. Previous experience with refugee populations and knowledge of Nepali and other refugee cultures also allowed the research to be context-bound and context-specific (Holloway & Wheeler, 2009). However, these experiences also created predispositions and biases discussed in the later section on the positionality of the researcher and also discussed throughout the research analysis. The analysis endeavored neither to overestimate nor to underestimate the effects of the researcher on the findings.

Qualitative research in practice

The initial phase of research took place over two months (August and September 2012) in Pittsburgh, Pennsylvania with the primary aims of:

1) Undertaking semi-structured interviews with resettlement agency staff, conducting observational research, and analyzing training materials in order to understand the delivery of and logic model for economic interventions offered to refugees;
2) Using qualitative methodology to examine program delivery and refining the quantitative methodology;
3) Gaining initial thoughts and buy-in from the refugee community; and,
4) Assessing the site for the feasibility of a cross-sectional survey and further research.

The following is a table of the methods used in the initial phase:

Method	**Participants**	**Details**
Phone discussions/ interviews	6 Experts in the field	Includes researchers & national ORR staff
Observation, Discussion, & Semi-structured Interviews	Two refugee resettlement agencies (focus on employment - 8 staff members)	Undertaken for two months, shadowed 'regular services' & attended ORR National Conference
Interviews with other service providers	4 staff - service providers	Avg. 1 hour; 1 man, 3 women
Interviews with 'Bhutanese leaders'	7 People identified as 'leaders'	30min-2.5 hours; 6 men, 1 woman
Focus group	33 Bhutanese adults in one neighborhood	3 hours; 16 men, 17 women; 7 arrived in Pittsburgh first, 26 in other cities
Document analysis	Documents from service agencies	e.g. Meeting agendas, client handbook

These initial two months of qualitative research were followed up with more quantitative research in the subsequent phases of the research (January-April 2013 and July 2013), including:

Method	**Participants**	**Details**
Phone discussions/ Interviews	50+ Experts in the field	Globally
Continued observation & Discussions	Continued contact with two refugee resettlement agencies	Focus on employment - 8 staff members
Conversations at the end of each survey	145 participants	As appropriate
Continued discussions with Bhutanese leaders	Bhutanese neighborhood & community leaders	Noted in the research journal
Second focus group	10 Bhutanese adults in one neighborhood	1 hour; 8 men, 2 women; all arrived in Pittsburgh first
Participant observation	Bhutanese community	Attended events such as the opening of a store and dinners, recorded detailed neighborhood descriptions
Interviews with employers	Spoke with 5 employers (6 individuals)	3 male, 3 female; attempted to contact additional 4 major employers

Detailed knowledge and familiarity with the community is often cited as critical to research with refugees as is positive relations with 'gatekeeper' organizations, such as the resettlement agencies and community groups who have access to the

refugee population (Benson et al., 2012; Bloch, 2004). In addition to the concrete methods and activities listed above, the time spent in Pittsburgh allowed for informal trust building and familiarity.

Qualitative data analysis methodology

In order to develop the themes and findings, a Glaserian grounded theory-inspired approach was used to analyze qualitative research. This process worked iteratively and symbiotically, and roughly followed the six steps below. Although the literature diverges on how rigid a process must be to be called 'grounded theory'[17], this qualitative research remained flexible while following the main grounded theory tenants. It employed iterative reflection and research, three rounds of coding, and used the methodology to develop a middle-range theory for practice (Oktay, 2012; Urquhart, 2013). The research used what has been termed 'an emergent fit mode' of Glaserian grounded theory by building off the researcher's earlier experiences and using basic categories emphasized in the literature (Artinian, 2009). Given the investigator's years of reading about and working with refugee resettlement, it would have been impossible to begin the research in the 'discovery mode' without preconceived notions. However, the researcher endeavored to be open to challenging her beliefs and allowing the research to speak for itself in qualitative data analysis.

Additionally, this process complemented and added context to the results from the systematic review and survey. Following Glaserian grounded theory, 'all is

[17] Grounded theory methodology was first described in 1967 by Glaser and Strauss, but they went on to write seminal texts with divergent ideas about how grounded theory should be implemented, with Strauss and Corbin (1990) going on to write an introductory text prescribing the 'Straussian grounded theory' method whilst Glaser advocated a less prescribed method (Oktay, 2012).

data', and sources of data were not treated rigidly as separate. For example, the survey fed into the qualitative analysis through its quantitative results, the coding of the open-ended responses, and the interactions observed while carrying out the survey. As such, qualitative data analysis was not independent but can be viewed as separate due to its specific steps.

Step 1: Development of main ideas and the theoretical framework from the literature review and systematic review

Based on general themes from the literature, this step developed a series of 'codes' that highlighted foci from the initial literature review that included 'education', 'English', 'job mobility', 'different ethnic groups' and general social capital. These were reevaluated as the research continued.

Step 2: Familiarization with research: typing notes and transcribing

All recordings were transcribed by the researcher and initially handwritten notes were typed. This process familiarized the researcher with a great deal of the research content.

Step 3: Preliminary/open coding

Following step 2, the transcripts were examined thoroughly in detail, applying both open codes and codes from the literature. Although this process originally began using highlights and Microsoft notes, it was then transferred to the qualitative analysis software NVivo.

Step 4: Integrating codes & delimiting the theory

The themes that emerged from the qualitative data, as well as the quantitative data, were reviewed, and codes were consolidated into a more finite number of codes. After pilot research, this step helped inform the survey and further research, whilst later on this step was enhanced by survey results.

Step 5: Development of key themes and theories

This step involved presenting the key themes and theory. Specifically, the key theory codes from Step 4 and quantitative data were integrated to show:

- the theory of change of the intervention, incorporating the nature of complex interventions, the ecological model, and challenges to these frames as appropriate;
- the implementation of the program including key steps and process measures as available; and,
- the perspectives of refugee self-sufficiency and intervention programming from practitioners, refugees, and others.

Step 6: Reviewing of key themes and theories

Finally, the key themes and theories were reviewed again and shared with experts and key informants, namely the resettlement agencies and BCAP leaders. Upon feedback, the researcher returned to earlier steps and continued the iterative process.

Cross-sectional survey

This sub-section covers the sample size, design, translation, and administration of the cross-sectional survey. This research design aligned with the state of the field and the desire to provide estimates of prevalence and basic statistics for a well-designated population (Bonita, 2007). As previously discussed, an evidence-based social intervention approach was used for analyses, focusing on 'epidemiological' rates of self-sufficiency and correlations with outcomes, building up the development phase for testing complex interventions.

Sample size and sampling strategy

The sample size sought to create relatively precise and accurate statistics as well as to be feasible to implement. The researcher aimed to sample half of all households at random included in a BCAP census survey and additional

households present in Pittsburgh in January 2013, but not captured in the BCAP census survey.

This 50% chance of having a household picked originated from the original plan to sample 216 of the initially estimated 433 households (approx. 3,500 people) based on available data at the beginning of survey collection. This size was slightly larger than the number (204) needed to have household self-sufficiency 'epidemiology' rates at a 95% confidence level with a 5% confidence interval.[18] The sample frame and estimate derived from an intense data collection effort by BCAP, which had some remaining neighborhoods to complete while surveys from this study were being collected.[19] Thus, it was decided to sample households on a 'rolling' basis by neighborhoods or groups of neighborhoods while BCAP finished its census data collection. The households were chosen at random and one individual aged 18-65 from within each household was again randomly chosen using the random number generator.

The number of households and people within the population was much less than originally anticipated and, using the rolling randomization of chunks of neighborhoods, the final survey size was 145. An additional four surveys were collected from individuals outside the sampling frame from neighborhoods of particular interest. These additional surveys are not considered in the analyses since they were not at random.

[18] The sample size calculator can be found at: www.macorr.com/sample-size-calculator.htm.
[19] A copy of all completed one-page questionnaires was received based on an agreement with the Bhutanese Community Association of Pittsburgh.

From detailed discussions, the BCAP data seemed reliable and a rare find as it accounted for secondary migrants as well as primary arrivals. This contrasted strongly with the general lack of contact or available identity information for refugees (Jacobsen & Landau, 2003; Pernice, 1994). Service agencies discussed the continuous stream of secondary migrants and refugee families themselves discussed their migration to Pittsburgh from other US cities in the past year yet the official Office of Refugee Resettlement report for Formula Year 2013 listed no migration into the state of Pennsylvania (*Secondary Migration Data Sorted by State,* 2013). This exemplifies the general lack of available information as well as the value of the BCAP data. As the household members in the study were known ahead of time, there was no plan to use the next or last birthday method or Kish gird, as these could have created small biases and birthdays are less important in the Bhutanese community than in other communities.

Furthermore, the population was relatively homogenous, which allowed for greater confidence in the generalizability among the population. All refugees were stateless but considered themselves Bhutanese in nationality and Nepali in ethnicity and language (Hutt, 2011). They fled from Bhutan in the early 1990s, spent time in refugee camps in the same region of Nepal, and around 99% arrived in the US in the past five years through the US resettlement program. Inter-population diversity in English and education levels, religions, castes, and lived experiences emerged from the literature and primary research, as discussed in the subsequent chapters. Nonetheless, the inter-population diversity was less in the researcher's experience when compared to the inter-population diversity of other resettled refugee populations or the US at large.

Additionally, the population was relatively homogenous from an intra-population perspective when compared to other populations, such as the US population. Thus, the statistical assumption of relative homogeneity holds as does the confidence in sampling from a random subset of the population, but the statistics should be treated with caution and findings are contextualized.

As previously stated, the sampling drew from the BCAP data. Final BCAP data population was lower in numbers than expected, and surveying was much more difficult and time-consuming than expected. Still, half of all households were contacted with a high response rate, but the statistical power was less than originally anticipated. The original BCAP data often included typos, incorrect addresses, and incorrect phone numbers. The population moved frequently within Pittsburgh, often changing numbers or not paying phone bills. Additionally, individuals had busy schedules, including long hours for work and transportation. Thus, data collection often felt like detective work. For example, two randomly selected individuals had the same first and last name (not the only incident). After spending much time trying to track down one of them, the researcher asked the other if he knew that person. He then promptly insisted on taking the researcher and interpreter on a 20-minute walk to the new address of the man with his same name. This man, however, was not present and did not have a phone; his brother did, but frequently had the phone at work. This location was visited an additional five times, despite prior phone arrangements to meet, before the correct man was present in the household to be interviewed. The flow chart of data collection, Figure 14 in Chapter 6, shows the results from the randomization and survey process.

Survey design

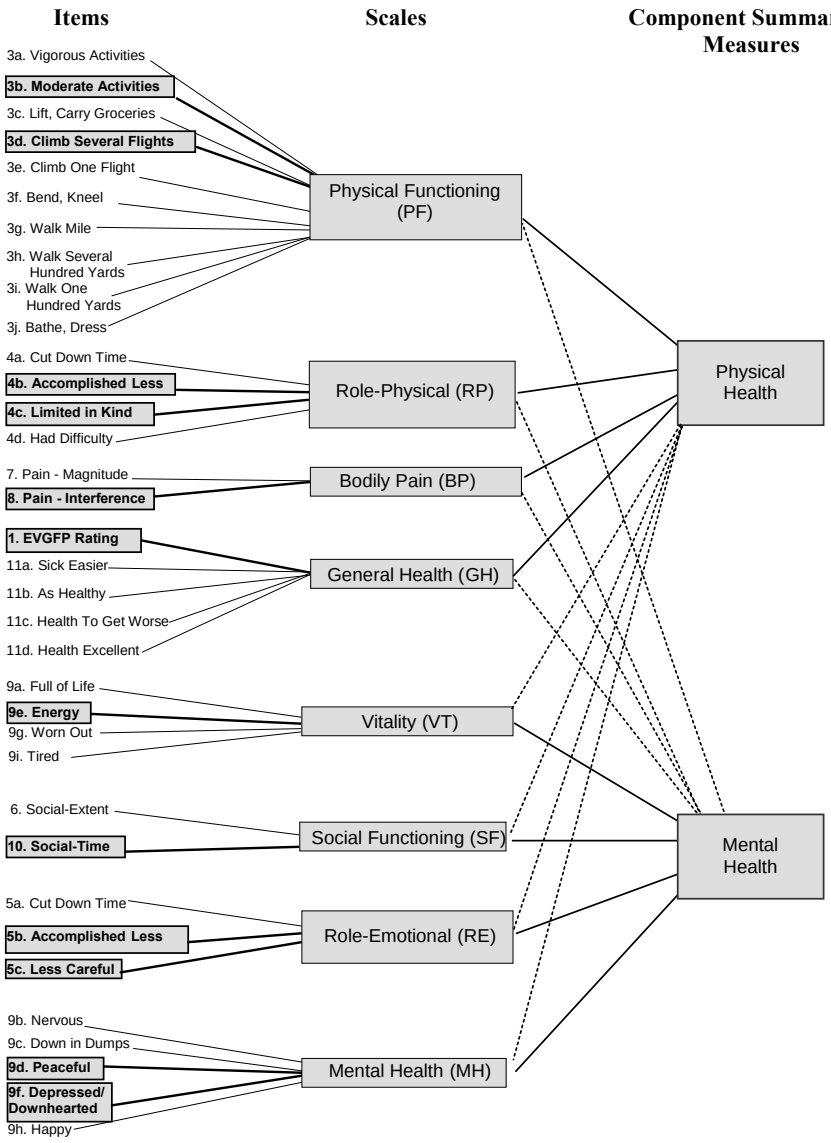
A copy of the survey is available in the appendices along with a listing of the origins of questions.[20] The survey design built off of the theory and existing research. Specifically, the demographics section accounted for hypothesized independent variables. Some questions were asked at the request of BCAP and other stakeholders, such as data about firing and hiring and education, in order to explore specific questions of interest and to design programming that helps meet the needs of the population.

To examine quality of life, the well-validated 12-item Short Form health survey (SF-12) was used. The SF-12 was chosen due to the cross-cultural nature of the research and the desire for a short survey that did not burden participants. As previously discussed, both the SF-12 and the 36-item Short Form (SF-36) health survey view quality-of-life as consisting of physical and mental health and measure eight wellbeing health concepts: '1) limitations in physical activities because of health problems; 2) limitations in social activities because of physical or emotional problems; 3) limitations in usual role activities because of physical health problems; 4) bodily pain; 5) general mental health (psychological distress and wellbeing); 6) limitations in usual role activities because of emotional problems; 7) vitality (energy and fatigue); and 8) general health perceptions' (Ware Jr & Sherbourne, 1992). One or both versions have been translated and used in more than 40 countries as part of the International Quality of Life Assessment (IQOLA) project and show good reliability with refugee and other

[20] Most questions were based on questions from national surveys. The few new questions from the time of the CUREC submission were derived from the particular interests and context of the Bhutanese community in Pittsburgh.

immigrant groups (Chang et al., 2000; Gandek et al., 1998; Hoffmann et al., 2005; Hoopman et al., 2009; Jenkinson et al., 1997; Lam, Tse, & Gandek, 2005; Mui et al., 2007; Sulaiman-Hill & Thompson, 2010; Wagner et al., 1999; Ware Jr, 2000). Figure 9, taken from *SF-12v2 Health Survey: Administration Guide for Clinical Trial Investigators*, shows how the scales and component measures are derived for the SF-36 and SF-12.

Figure 9: Short Form Health Survey Measurement Model Component Scores (Ware et al., 2009, p. 20)



Note. Item numbers correspond to SF-36v2 item numbers. SF-12v2 items are indicated in **shaded** boxes. All health domain scales contribute to the scoring of both the Physical and Mental Component Summary measures. Scales contributing most to the scoring of the summary measures are indicated by a connecting solid line (—). Scales contributing to the scoring of the summary measures to a lesser degree are indicated by a dotted line (·····).

Survey translation

The original English survey was reviewed and checked by the English-speaking leaders of BCAP, the BCAP employee, and the Bhutanese refugee research assistant. The initial translation was then done by a trusted, professional translator in Nepal, through the researcher's contacts from the month spent in Nepal in summer 2012. The survey was then independently back-translated into English by two professional translators in the Bhutanese community in Pittsburgh. Both individuals have post-secondary education and have worked or currently work as translators/interpreters. Additionally, they live in separate neighborhoods and are from separate castes, so they did not meet during the time of translation. Afterwards they met with the primary researcher to resolve any discrepancies. Although there are no guidelines for cross-cultural translation, this aligned with typical double-blind translation methodology and assisted to eliminate cultural biases (Jacobsen & Landau, 2003; Maneesriwongul & Dixon, 2004; Pernice, 1994).

Additionally, the survey was then piloted and altered, as ideal with translation (Van Ommeren et al., 1999). Issues from understanding more technical Nepali terms, concepts of 'food bank' versus more commonly used 'food drive/pantry' were revealed in piloting the research with the primary research assistant. Given issues of translation with earlier research with Bhutanese refugees (De Jong & Van Ommeren, 2002; Van Ommeren, 2003; Van Ommeren et al., 1999), the researcher and interpreters remained vigilant regarding potential problems.

Interpretation

Six individuals acted as interpreters, including one who acted as a research assistant by contacting individuals and providing additional context and assistance. The primary interpreters were two women with secondary school education. One was recommended as a research assistant by BCAP, and the other was recommended as an interpreter by JF&CS (and had undergone a series of health interpretation trainings). All interpreters and research assistants received one-on-one training and a training manual (see thesis appendix) with the an emphasis on:

- Description of the research study;
- Conduct and role of interpreters in research;
- Confidentiality and data security
- The importance of random sampling;
- How to deal with incidents and problems should they occur during research;
- Professional guidelines for interpretation and translation; and,
- Copies of the survey in Nepali and English;

In addition to the two primary interpreters, two young men with some postsecondary education and one professional woman were used in their respective neighborhoods for some of the interpretation. They were contacts from BCAP community leaders and word of mouth recommendations. Another gentleman was used one day for two surveys, but the primary researcher felt that he did not have the same ease with participants as other interpreters. Although he initially expressed willingness to enter the houses of individuals of lower castes, in practice he appeared reticent.

Intangible aspects affected the information collected during face-to-face surveys, such as the role of age, gender, and caste of the interpreter. Additionally, the

selected participant often seemed more at ease if the interpreter could make a connection with the family selected (e.g. acquaintance, previously lived at the same refugee camp, previously taught a relative). On the other hand, some individuals seemed more likely to report mental health issues with the SF-12 if they did not have a connection with the interpreter.

Interpretation was also complicated by practical logistics. Interpreters had other education, employment, and family commitments, including caring for children. Transportation was another barrier. Even if the interpreter had access to a car, it frequently broke down or was shared with other family members. This meant that the primary researcher generally drove interpreters to neighborhoods that were often 45 minutes away one-way. Thus, it became necessary to have a 'fleet' of six interpreters to optimize geographic reach and time usage.

Survey administration.

Before survey administration, the primary researcher met with community and neighborhood Bhutanese leaders both in a group and one-on-one settings, and then sent a Nepali and English letter to all selected participants explaining the research and providing the option to opt-out. After waiting to see if the recipient opted-out, the research assistant contacted the recipient via their given phone number. Participants were given the choice to opt-out then; if they were willing to speak more about the research, a meeting for possible survey administration was arranged.

The primary researcher administered the survey directly with the aid of an interpreter. With the permission of the participant, the researcher with an interpreter approached the individual in his or her apartment or a location of his or her choosing. This was the suggested method by Bhutanese leaders as it is culturally common and acceptable to meet in apartments. The Bhutanese leaders discouraged group administration due to the common practice of copying one's neighbor. Although the survey was translated into Nepali, an interpreter accompanied the researcher to aid those individuals who were possibly illiterate. Many participants chose to have interpretation even if they read English or Nepali. If the individual on the phone spoke clear English and expressed that he or she did not need or want an interpreter, then the primary researcher explained the survey without the interpreter (or with the interpreter present but silent) and allowed them to fill it out on his or her own.

On balance, the combination of self-completion and assisted completion with an interpreter seemed to allow greater participation, understanding of the questions, and respect for participants' privacy. Some participants completed the first few questions independently and then asked for assistance from an interpreter or were offered oral interpretation assistance after a pause. The survey was originally designed to be primarily self-completion, as is advised with the SF-12 section, but most participants seemed to require or prefer some level of interpretation. As such, only the SF-12 followed a specified narrative script, as shown in the appendices, and the interpretation of the other sections involved saying the Nepali version of the survey. All interpreters practiced interpretation, and it is believed that self-completion verses interpreter-assisted

completion did not significantly affect the meaning of the questions and responses, although some individuals may have been more likely to report sensitive mental health issues with more private self-completion or with interpreters with whom they felt more comfortable. Given the frequency of partially-independent and partially-assisted surveys, the low number of participants who self-completed the survey in Nepali (two), and potential cofounding variables, sensitivity analyses were not performed based on survey administration variables.

Survey analysis

The survey was analyzed in Stata 12. As planned, descriptive statistics were reported first, as shown in Chapter 6. Along with the raw data, these were examined for incoherence or irregularities, such as higher wages after taxes than before. These descriptive statistics were important in their own right for understanding the population, context, self-sufficiency, and wellbeing. The epidemiological approach to analyzing demographics and prevalence of economic self-sufficiency allowed for comparability and enhanced qualitative findings. The robust random sample was able to capture multiple refugees' voices with less bias than other sampling methods. However, the approach to economic self-sufficiency analysis, using a survey and the wording of 'issues' and 'prevalence' common in policy and practice, was limited in its ability to capture the depth of lived experience and perspectives from the refugees themselves. Other qualitative methods such as those within the field of anthropology are often considered more robust at capturing the nuances of lived experience and perspectives. Nonetheless, the approach taken allowed for easy translation of

findings into policy and practice and complemented the grounded-theory qualitative work.

After descriptive statistics, statistical tests were completed in two parts. All statistical tests were based on literature and theoretical underpinnings for independent variables, which may affect dependent variables. Part one examined the bivariate relationship between the independent variables of interest (e.g. age, sex, education, English level, religion, family size, time in country) and the dependent variables of interest (i.e. testing the null hypothesis of no correlation). The distributions of scores were tested for normality and appropriate tests were performed.

Then, predictive models were examined. It was planned that logistic regression would examine the dichotomous outcomes of employment and cash assistance for separate models using predictive variables that significantly improved the model. Such a small number of respondents received any form of cash assistance in their household that this analysis was only possible to examine those who were employed (i.e. labor participation). For those employed, separate linear regressions were performed for the prediction models of gross income and wage rate as the continuous outcomes. Secondary models examine other relationships of interest, such as models to predict food assistance usage, having enough money to pay the bills, and the relationship between employment and wellbeing. These models were influenced not only by the theory and the literature covered earlier, but also by observations in the field and hypothesized predictive variables. The analyses plans were in line with high quality studies in the field

(Bronstein, 2011; Potocky-Tripodi, 2004; Westermeyer, Callies, & Neider, 1990), and statistics experts at the Centre for Evidence-Based Intervention were consulted before and during analyses.

Partnerships for research

To begin the primary research, formal agreements with the two largest resettlement agencies in the city were established to observe and do research on their work to improve resettled refugees' economic self-sufficiency. These agencies were Jewish Family & Children's Service (JF&CS), an affiliate of Hebrew Immigrant Aid Society (HIAS), and Northern Area Multi-Service Companies (NASC), an affiliate of the United States Committee on Refugees and Immigrants (USCRI). Pittsburgh also has a third resettlement agency, Catholic Charities, an affiliate of United States Conference of Catholic Bishops (USCCB) yet they have decreased from resettling over 200 clients per year to a target of 80 in recent years. Research was not done with Catholic Charities, but the researcher drew on her past experience with them. In 2008, the primary researcher volunteered as a refugee casework intern for Catholic Charities and continued to help clients through 2009, which lead to a more in-depth understanding of the resettlement process. Each resettlement organization assisting new arrivals using federal funds from the Department of State and Office of Refugee Resettlement in the Department of Health and Human Services has a national affiliate which helps arrange their arrivals, funding, and provides varying levels of support. As expounded upon in Chapter 1, there are ten such voluntary agencies (Volags).

A more detailed description of the two refugee resettlement agencies is provided in the thesis appendix. Below is a short summary and general impressions of each resettlement agency.

Jewish Family and Children's Service of Pittsburgh is a well-established service and resettlement agency affiliate of the Hebrew Immigrant Aid Society (HIAS). JF&CS is located in a well-off and central Pittsburgh neighborhood. In FY2012, JF&CS resettled around 227 refugees, primarily of Bhutanese origin. Although some tensions exist with the broader organization, the refugee resettlement work received good support from the larger agency. Generally, the agency's work is run primarily through twelve full-time positions, supported by volunteers and interns. The overall atmosphere in the office was boisterous and positive.

Northern Area Multi Service Center (NAMS or 'Northern') is another well-established social service agency that only began undertaking refugee resettlement in February 2011 as an affiliate of the national Volag USCRI. The office is located in a small, low- to middle-income borough. NAMS is better known for assisting elderly individuals in the Pittsburgh area. The refugee resettlement office is still figuring out how to best utilize the broader service agency, but has quickly ramped up their work resettling refugees. At the time of the research, they had resettled over 200 refugees that year and expanded their staff positions. During the months of observation, the staff generally consisted of five-full time and four part-time positions. The atmosphere was cordial and quietly busy. Although the office was not often bustling with clients during the

months of observation, the staff was busy and often away with refugee clients, particularly since many employed were Bhutanese refugees themselves.

Additionally, as can be seen from the methods table, numerous experts (50+) on refugee resettlement were spoken with, including staff at the **US Office of Refugee Resettlement** and **UNHCR**. The researcher also attended the 2013 Office of Refugee Resettlement National Conference in Washington, DC and the UNHCR 2014 Annual Tripartite Consultations on Resettlement in Geneva, Switzerland. This work allowed for examination of the macro-structures of resettlement system and provided a better idea of the external validity of the primary research findings in Pittsburgh.

Partnership with BCAP and support for BCAP

The relationship established with the **Bhutanese Community Association of Pittsburgh (BCAP)** was crucial to the research in Pittsburgh. This connection enabled access to Bhutanese refugees' perspectives qualitatively as well the implementation of the cross-sectional survey based on their data as a sampling frame.

Although BCAP only began strategic planning in January 2012, the organization had been operating informally for at least two years before that, possibly since the first Bhutanese refugees were resettled in April 2008 (Ramsden & Brouwer, 2012). Some individuals told how BCAP began by bringing people together to help give financial assistance to families to maintain their spiritual rituals and

have proper burials after deaths in the family, including the after the suicide of a community member in Pittsburgh in January 2010.

Despite statements that BCAP represented the whole community, there was a group of Christians who chose not to be part of BCAP and others who felt less satisfied with the organization and its progress. One BCAP leader spoke about the division: 'We try to bring them together, but we understand that may not be possible with one of the groups [Christians, particularly of sedu caste]… It is because of the leader. The leader they have, he's um (pause), oh, what do you say, but I think he doesn't want to come in the group. Some people are just leaving him and coming back and joining the group. So, it is a very small pocket they have. Still we are working together with other people. Although the leader is not coming with us [inaudible]… So maybe around 100 to 200 people are stuck with him. But other people they are ok, because they come and work with us, and everything is ok. Only with religion, it looks like they are different.' The caste system has existed for centuries, originally imported from India into Nepal and then transferred with this population as they migrated to Bhutan and again when they were forcibly migrated to Nepal. In the refugee camps, some individuals began converting to Christianity, and some refugees spoke of being beaten for this conversion. Social cleavages by caste and religion thus still existed and were reflected in the support for BCAP.

In interviews and discussions, some individuals revealed that they were unhappy with BCAP because they perceived them as dominated by particular groups or individuals. One person expressed dissatisfaction of the power held by

a community member who arrived on a temporary visa and claimed asylum years earlier, thereby not suffering in the camp as long as the rest of the population. In the initial semi-structured interviews of leaders, only one female leader was interviewed, and most leaders were young adult men; social differentiation by age and gender are discussed in Chapter 6. One interpreter explained that many people think that BCAP leaders are waiting to get money and that they would be corrupt then. This interpreter thought that if everyone showed up to meetings and a true democratic vote were held, particular individuals of the highest caste would run the organization, but that would not look good. For the BCAP leaders' part, they seemed conscientious about the way in which they were building up the organization: having neighborhood consultations, organizing a democratic voting system with representatives across neighborhoods, putting in untold volunteer hours on top of employment and family obligations, building up the technical capacity before applying for grants, and ensuring that multiple castes, religious groups, and neighborhoods were represented. Demographics and social cleavages not related to BCAP are discussed in Chapter 6.

In their official documentation, the 18-month plan, BCAP is described as 'focused on preserving the distinctive Bhutanese culture and services that aid refugees' integration into American life', with a vision of 'a vibrant Bhutanese community where all persons are enabled to reach their fullest potential and traditional culture is celebrated and shared'. Their mission is 'to ensure a high quality of life for all members of the Bhutanese community in Pittsburgh and to support their integration into American society through culturally-informed services and

activities' (BCAP, 2013). Their five goals during this period included communication, cultural preservation, ESL, counseling, and the financial health of the organization.

BCAP operated with next to no budget through volunteer work. After the initial stage of research, BCAP obtained funding for an Americorps position. In short, although BCAP appeared to have the support of much of the community, some people expressed issues with BCAP, including believing they were keeping the caste system in place, were corrupt, and/or generally ineffective.

It was therefore important that the researcher presented herself as an independent person having the permission of but not direct affiliation with BCAP. For the data collection, the researcher tried to maintain a position as a student conducting research through the University of Oxford, as a collaborator with BCAP, Northern, and JF&CS, as a former volunteer with Bhutanese refugees, and as independent from any local organization. Balancing these role and collaborations was difficult at times, but these relationships may have ultimately allowed for greater access and more ethical research that captured multiple viewpoints through attempts to remain both inside and outside communities.

Ethics and positionality of the researcher

Following the Refugee Studies Centre Ethical Guidelines and the approved CUREC form, all participants were provided with an information sheet, their written permission was obtained before beginning, and informed consent was orally negotiated throughout the research (Kvale, 1996; Mackenzie et al., 2007). For Pittsburgh, official email and in-person permission with the two

resettlement organizations was obtained before beginning research with the resettlement agencies. Similarly, before starting the survey, permission was obtained in person and over email with the elected leaders and the employed member of the Bhutanese Community Association of Pittsburgh. For service providers, oral permission was used at times in lieu of official written permission, but oral and written permission was always obtained for refugee participants, and all participants were given information sheets and contact information to keep.

The confidentiality of the refugees was stringently observed. This research refrained from presenting any individual identifiers, never requested names, and ensured that individuals understood confidentiality. For the workshops, in order to confirm participants' understanding of the material, discussing ethics and confidentiality and answering questions initially took one full hour for the first one and considerable time for the second workshop.

Bias is inherent in the research due to research techniques, power dynamics, and personal viewpoints and experiences. Prominent biases include the following five points**:**

1) The **sampling strategy** for interviews and observation was not random or representative; concomitantly, refugee leaders' interviews cannot be generalized to represent the views of their ethnic population and resettlement agencies' work is not generalizable to other agencies' work (McQueen & Knussen, 2002).

2) Owing to anticipated **language and cultural knowledge constraints,** trained, professional interpreters were relied on for the workshops and surveys. Some understanding may have been lost through interpretation.

3) The decision on whether to record the interviews was based partially on the judgment of the researcher. Although a recorder was carried around, it was not used if the location was noisy, if the interviewee requested not to be recorded, or if the researcher deemed that participants would feel more at ease without recording. For discussions at the end of the surveys, when asking if there is anything else the participant would like to say, the researcher recorded notes only through writing. Overall, the researcher believes that this **note technique** put interviewees more at ease while still producing an adequate impression of overall viewpoints for the research questions. The researcher had prior experience in taking notes during interviews through several other research projects with refugees and asylum-seekers. She was therefore careful to add quotes sparingly and flesh out details directly after the interview or survey. However, inevitably, some meaning and precise words were lost without consistent recording.

4) Personal **perspectives** influenced all notes and findings. In particular, participant observation notes were restricted to what the researcher was able to observe. The researcher tried to remain reflexive on her position and interact with different types of informants in various settings.

5) The researcher had long-standing **established relationships** with the organizations and some of the individuals who participated in the research, at times these dated back to 2006. Additionally, in line with an ethical research stance that believes in giving back to participants, the researcher assisted at times in resettlement offices or with BCAP and did small gestures such as offering cookies to workshop participants. Although cognizant of these relationships, the researcher attempted to treat everyone the same and maintain a stance as collaborating with organizations but independent from them. Furthermore, relationships allowed access to individuals that may have otherwise been impossible, such as the buy-in from the BCAP and access to the Bhutanese Christian community, some of whom chose not to participate in BCAP. Naturally, preexisting relationships affect access, responses, and analysis.

Further methodological constraints include time and monetary resources. For example, the Bhutanese refugee community is spread out in neighborhoods at the edge of Pittsburgh that are poorly served by public transportation. The complex array of transportation used for this research – including the bus (frequently 3-4 hours round trip), rental cars, and a car-share system (Zipcar) – also limited time with and access to participants.

Conclusion

This section covered the research method plan and process. The methodology followed a critical realist epistemology as well as a mixed-methods and Glauserian grounded-theory approach aiming for a 'disciplined lack of clarity' in exploring the economic self-sufficiency and wellbeing of resettled refugees. The research relied on partnerships, interpreters, and participants.

During the research process, research ethics were maintained through informed consent, through remaining reflexive on positionality, and through creating high-quality research with contributions to policy and practice as well as academia. The findings of this research are presented in subsequent chapters. Whilst showing their complexity and contextuality, they build towards the 'dual imperative in refugee research' of academically and policy-relevant research, with careful scientific and ethical considerations (Jacobsen & Landau, 2003).

Chapter 4. Systematic Review

This systematic review answers part of the third research question: what is the current state of refugee economic self-sufficiency and what appears to correlate with improved outcomes. The systematic review process explained in Chapter 2 provided part of the careful scientific consideration to the question of what is known. The review also ensured the primary research was ethically sound by being relevant to the existing literature and gaps in the literature. Information from abstracts and full-text studies fed into the literature review, and literature uncovered in the systematic review contextualized the findings in Chapters 5-7.

Thus, this systematic review was designed to be an integral part of this thesis. The review was also published as a freestanding piece by the Campbell Collaboration, according to their strict systematic review criteria. This chapter has been modified from the peer-reviewed article in order to delete repeated information and provide additional context, such as extended analysis of excluded studies.

The review was led, carried out, written, and revised by the author of the thesis with the second independent review of the abstracts conducted by her supervisor, Professor Paul Montgomery. Professor Montgomery also provided standard supervisory assistance, such as a check for the technical standards.

This chapter is split into the background for the review, objectives, methodology, plans for analysis, results, discussion, and appendices. These sections follow standard practice for ensuring a systematic review is clear and transparent and allow for the scientific rigor of this chapter which feeds into the broader framework of the thesis.

Background for the review

Despite the large number of refugees resettled and the continuation of resettlement programs discussed in Chapter 1, testimonial and correlational evidence suggests outcomes are variable. This systematic review sought to identify and evaluate the available evidence from across countries to learn whether interventions designed to improve refugees' economic self-sufficiency and wellbeing are meeting their stated goals. The review expanded on the US literature to look at refugee resettlement globally.

Description of the condition

In the global context, the United States (US), Canada, and Australia are the three largest resettlement countries, defined by current volume of resettled refugees. In each, successful economic adjustment has been a central goal of their refugee resettlement policy (Waxman, 2001). Furthermore, refugees often define economic outcomes such as employment as important to their own lives (Fozdar & Hartley, 2013; Valtonen, 1998).

Despite this emphasis, resettlement programs often have mixed outcomes. Australia admitted over a half million humanitarian entrants from 1939 to 2001, but survey evidence suggested that recent refugees from Bosnia, Afghanistan, and Iraq have high unemployment rates relative to the general population

(Waxman, 2001). The same study also found that prior financial status, employment, and qualifications had no statistical correlation with employment outcomes (2001). Similarly, as previously discussed, the United States has resettled over three million refugees since 1975 (Bruno, 2011), yet the US resettlement system is often described as 'failing to meet the basic needs of the refugee populations they are currently asked to assist' (US Senate, Committee on Foreign Relations, 2010, p. 1). Economic hardship is further negatively correlated with refugee wellbeing. For Sudanese refugees in Canada, economic hardship has been associated with their being two to four times more likely to experience mental distress (Simich, Hamilton, & Baya, 2006). For Cambodian refugees in the United States, unemployment has been correlated with PTSD and major depression (Marshall, Schell, Elliott, Berhold, & Chun, 2005).

Like the refugee programs and the populations they serve, the condition of resettled refugees is dynamic. Because contemporary programs are a result of more recent contexts, this review focused on studies undertaken or published since 1980, which can be characterised as a 'watershed' year for refugee resettlement policy.

The legislation and structure of refugee resettlement in the United States, Australia, Canada, and Europe has changed dramatically since the late 1970s. In 1980, the United States, by far the largest resettlement country, passed the 1980 Refugee Act, which serves as the basis for the mandate and structure of its current program. Australia's contemporary approach to refugees emerged in December 1979 when the Community Refugee Resettlement scheme came into

force. This scheme included housing, social, and employment support (Refugee Council of Australia, 2012). Canada's current refugee program is based on the 1976 Immigration Act (which came into force in 1978) and is further shaped by the 1982 entrenchment of the *Canadian Charter of Rights and Freedoms* in their Constitution, the 1997 Refugee Resettlement Model, and the 2002 Immigration and Refugee and Protection Act's incorporation of the *1951 Convention* and *1967 Protocol* into Canadian law (Casasola, 2001; Citizenship and Immigration Canada, 2011; Gauthier, 2010). European resettlement likewise changed dramatically after the 1970s, partly as a result of legal changes across countries, such as Germany's 1992 revision of their constitutional definition of 'refugee' (Hailbronner, 1994).

Description of the intervention

This review sought to examine any intervention designed broadly to increase the economic self-sufficiency and wellbeing of resettled refugees. This breadth of scope reflects the paucity of previous reviews on the effectiveness of interventions as well as the diversity of approaches to promoting economic self-sufficiency and wellbeing. Such interventions typically last from three months to two years and may include services such as employment casework to discuss goals and expectations; mediation between employers and employees; translation and paperwork assistance; employment mentorship; and interview training. These interventions may be delivered by the resettled state, by for-profit organisations, or by non-profit organisations, including secular and faith-based organisations.

The contexts of the interventions also vary. The number of resettlement countries has changed over the years, but in 2012, refugees left for 26 different resettlement countries. UNHCR reports that the following states currently have regular resettlement programs: Argentina, Australia, Brazil, Canada, Chile, the Czech Republic, Denmark, Finland, France, Hungary, Iceland, Ireland, Japan, the Netherlands, New Zealand, Norway, Paraguay, Portugal, Romania, Spain, Sweden, the United Kingdom, the United States, and Uruguay (UNHCR, 2013). In any one country, there may be multiple providers and multiple interventions offered to improve the economic self-sufficiency and wellbeing of refugees.

How the intervention might work

The hypothesized pathways for improving conditions for resettled refugees are not always specified in the literature. Broadly speaking, an intervention might target individual refugees, their surroundings, or the link between the two. For example, interventions may aim to work by targeting individuals through casework and employment skill development or by targeting employment demands and matching refugees with available employment. Interventions may also work by attempting to change community attitudes towards refugees or through complex interventions targeting multiple goals at both the level of the individual and the community.

As shown in Chapter 2, there are multiple frameworks to explain how refugee economic interventions may work. Rather than seeking to identify one single paradigm of causal change, this review aimed to understand the impacts of interventions.

Why it is important to do this review

Despite the importance of and attention to refugee economic self-sufficiency, a knowledge gap exists about outcomes from interventions designed to improve refugee economic self-sufficiency and wellbeing. For example, the US government offers numerous interventions including the Office of Refugee Resettlement's four approaches to improving employment outcomes, but the government itself reports that 'little is known about which approaches are most effective in improving the economic status of refugees' (United States Government Accountability Office, 2011, p. 20). To our knowledge, this is the first systematic review seeking to compile evidence about outcomes from interventions designed to improve refugee economic self-sufficiency and wellbeing.

Objectives

This systematic review sought to collect and synthesize evidence from prospective, controlled evaluations of interventions designed to improve economic outcomes for refugees. The review aimed to answer the following questions:

1) Do interventions designed to improve the economic self-sufficiency and wellbeing for refugees affect participants' labor force participation, employment, use of cash assistance, income, job retention, and quality of life?

2) Do effects differ depending on program content, program provider, populations served, or the setting?

Methodology

Criteria for inclusion and exclusion of studies

This section outlines the criteria for inclusion and exclusion of studies.

Types of studies

Studies were required to use a prospective, controlled methodology: a randomised controlled trial (RCT) design; a quasi-randomised controlled trial design (QRCT, i.e. participants are allocated by means which may not be expected to influence outcomes, such as alternating allocation, birth date, the date of the week or month, case number or alphabetical order); or a nonrandomised controlled design (i.e. quasi-experimental design). Nonrandomised controlled studies were required to provide information on baseline comparability of the cohorts and use statistical tools to adjust for baseline differences. For all included studies, participants needed to be prospectively assigned to study groups or a control group (i.e. alternative intervention or 'services as usual'), and studies needed to measure control group outcomes concurrently with intervention group outcomes.

Additionally, studies were required to have been conducted or published since 1980, as explained in the background for the review.

Types of participants

The review included studies of individuals who meet the domestic legislative definition of a refugee for the country of the intervention and:

a. were formally assisted to resettle by the government (i.e. were resettled refugees but not asylum-seekers);
b. had been served by a refugee resettlement entity; and,
c. fell between the ages of 18 and 64 at the time of intervention.

If, for any reason, the sample in the study did not fall completely within those parameters, we agreed to contact the author in order to obtain disaggregated data for the population that meets the criteria of a, b, and c. If we had been unable to obtain disaggregated data, we planned to use sensitivity analyses

based on studies with mixed populations. Although abstracts or titles sometimes used the term 'refugee' to cover asylum-seekers, we were able to discern through the full article or learn from the author if the population was resettled refugees.

Types of interventions

Eligible interventions were those designed to increase the economic self-sufficiency and wellbeing of resettled refugees compared to a control or comparison group. There was no restriction on the type or the duration of the intervention. Such interventions varied and included employment casework, therapy sessions, or broad community support.

Types of outcome measures

Studies were required to report at least one primary or secondary outcome.

Primary outcomes

The primary outcome was economic activity as measured by employment rate or labor force participation rate.

The unemployment or employment rate is a measure of the number of people without or with jobs compared to those searching for jobs in a population of interest (e.g. adult refugees) whereas the labor force participation rate is a measure of the proportion of the population of interest (i.e. including those not actively looking for a job) participating in the labor force.

Secondary outcomes

For resettled refugees, secondary outcomes included:

- Level of cash assistance, as measured by the percentage or portion of the population accessing specialised refugee cash assistance or public cash assistance;
- Income, as measured by overall annual income, salary rate, or average hourly wage;
- Job retention; and,

- Quality of life, as measured by 'generic indicators' including scales such as the Euroqol, or the short-form SF-36 or SF-12, which measures individual functioning, family functioning, social support, or general health related quality of life (Jenkison & McGee, 1998). Measures needed to both make sense across different intervention evaluations and not be tied to specific clinical mental health diagnoses, as these were not the review focus. Disease-specific measures, patient-generated measures such as the Patient-Generated Index of Quality of Life, and Diagnostic and Statistical Manual of Mental Disorders (DSM) categories were outside the purview of this review.

We anticipated that secondary outcomes would be predominately measured by self-reports from the study participants and/or collected via records from governmental agencies or non-governmental organizations.

Search methods for identification of studies

We used bibliographic databases, targeted websites, and personal communication in an attempt to identify relevant studies. No language restrictions were applied to potential studies identified through searches, although our search language was English and this necessarily affected the studies in our search results.

We began contacting relevant listservs and individuals on 14 May 2013, searched the websites 19-21 June 2013, and searched the databases 12-14 September 2013.

Search terms

The following key search terms were used:

- Population: (*resettle* OR* re-settle* *OR* refuge* *OR force* ADJ *migrant* OR asylum* OR humanitar* ADJ entrant* OR humanitar* ADJ settle**)
- Intervention: AND (*economic OR job* OR employ* OR mone* OR work* OR labor OR labour OR well-being OR wellbeing OR well ADJ being OR quality NEAR life*)

- Methods: AND (*outcome* OR evaluat* OR effect* OR efficacy OR compar* OR experiment* OR trial OR control* OR random* OR study OR studies OR assessment OR impact* OR research**)

These terms were in line with other meta-analyses on refugees and suggested terminology for limiting methodology to quantitative methodology (Bollini, Pampallona, Wanner, & Kupelnick, 2009; Bronstein & Montgomery, 2011; Clark & Mytton, 2007; Fazel, Wheeler, & Danesh, 2005; Gagnon & Tuck, 2004; Lipsey & Wilson, 2001; Littell, Corcoran, & Pillai, 2008; Morton 2011; Robjant, Hassan, & Katona, 2009). From the protocol, we added the terms 'labor' and 'labour' to cover interventions that may use terminology such as 'labour market integration'.

A full listing of how these search terms were applied in each database is provided in the Appendices for Chapter 4, 'Search strings used for databases and search results'.

Databases

We searched the following databases and citation indices:

- Applied Social Sciences Index and Abstracts (ASSIA)
- Business Source Complete
- Cochrane Library
- CINAHL
- Conference Proceedings Citation Index – Social Science & Humanities (CPCI-SSH)
- Education Resources Information Center (ERIC)
- EconLit
- IDEAS
- International Bibliography of the Social Sciences (IBSS)
- OpenGrey
- PAIS International
- PolicyFile
- ProQuest Dissertation and Thesis: Full Text
- ProQuest Dissertations & Theses: UK & Ireland

- PsycINFO
- Social Care Online
- Social Science Citation Index
- SocIndex
- Sociological Abstracts

These databases were chosen based on existing advice on systematic reviews and reviews in the area (Greenhalgh, 2010; Hammerstrøm, Wade, & Jørgensen, 2010). However, as databases are constantly developing, we updated our databases accordingly when carrying out searches in order to reflect the renaming of databases and obtain the most up-to-date knowledge. Thus:

- Business Source Complete replaced Business Source Elite for a more sensitive search. Business Source Complete contained more active, peer-reviewed, business related journals than any other database currently available.
- We searched the Cochrane Library rather than only Cochrane Central in order to find the widest range of Cochrane studies and resources that may be relevant.
- We changed the title for the ISI Index to the Social Sciences and Humanities to its more commonly used Conference Proceedings Citation Index – Social Sciences & Humanities (CPCI-SSH). The *ISI Web of Knowledge* Social Science Citation Index was also searched as per the protocol.
- Sociological Abstracts was the new name for SocioFile.
- Dissertation Abstracts International was a print index for the ProQuest Dissertation and Theses Database, so we used the online database, using both 'ProQuest Dissertation and Thesis: Full Text' and 'ProQuest Dissertations & Theses: UK & Ireland' to have optimal geographical coverage.

Searching other resources

In order to capture unpublished reports, the above list includes some databases known for their grey literature: CPCI-SSH Conference Proceedings Citation Index, OpenGrey, PAIS International, PolicyFile, and Proquest dissertation and thesis.

Additionally, we manually searched the *Journal of Refugee Studies* for any relevant articles that may have been published since its inception (1988).

We also searched the following websites of relevant research, policy, and governmental organisations:

- Center for Migration and Refugee Studies, American University in Cairo: www.aucegypt.edu/gapp/cmrs
- Centre for Refugee Research, University of New South Wales: www.crr.unsw.edu.au/
- Centre for Refugee Studies, York University: http://crs.yorku.ca/
- Centre for Research on Migration, Refugees and Belonging, University of East London: www.uel.ac.uk/cmrb
- Department for Work and Pensions Social Research Branch: www.dwp.gov.uk/asd/asd5/index.html
- Forced Migration Online Digital Library: www.forcedmigration.org/digital-library (This website was browsed, but a search was not possible due to the website's technical difficulties which persisted through this research.)
- Manpower Demonstration Research Corporation: www.mdrc.org
- Mathematica Policy Research: www.mathematica-mpr.com
- National Centre for Social Research: www.natcen.ac.uk/natcen/pages/op_employment.html
- National Institute for Social Work: www.nisw.org.uk/about.html
- Norwegian Refugee Council, Evaluations: www.nrc.no/?aid=9160729
- Office of Refugee Resettlement, U.S. Department of Health and Human Services, Administration for Children and Families: www.acf.hhs.gov/programs/orr/
- Refugee Services, New Zealand: www.refugeeservices.org.nz
- Refugee Studies Centre, Oxford University: www.rsc.ox.ac.uk
- Urban Institute: www.urban.org
- UNHCR: The UN Refugee Agency, Policy Development and Evaluation: http://www.unhcr.org/pages/4a1d28526.html

We additionally inspected the bibliographies of all studies that we reviewed in full text, and used personal contacts, listservs/discussion lists, Twitter, and Facebook groups to try to locate any relevant ongoing or unpublished studies.

Selection of studies

Records were screened and selected through a two-part process. In each stage, the number of papers excluded and retrieved was noted in the flow diagram in the next section.

First, both review authors separately reviewed all titles and available abstracts obtained from the search. When there was any doubt about the relevance of the title or differences in opinion between the two review authors, the full text of the paper was obtained and reviewed.

Second, all studies retrieved were screened by the two review authors against the inclusion criteria using the screening guide (in the chapter appendix).

If studies met inclusion criteria, we planned to use the data collection sheet for included studies (see chapter appendix), the risk of bias sheet (also available in the chapter appendix), and the plans for analysis (below). Evidence of effectiveness was to be examined only for studies meeting the screening criteria.

Plans for analysis

If studies had met the inclusion criteria, the plans outlined in this section would have been followed.

Data extraction

The review authors planned to independently extract and code studies in the data extraction sheet. The initial data extraction sheet included information on the context, study design, study sample, and outcomes. A separate risk of bias sheet can be found in the chapter appendix, which would have been used to assess and record the quality of included studies. The review authors planned to assess the appropriateness of the data extraction and would have determined if changes were necessary. Relevant primary investigators were to be contacted as necessary for missing or unclear information. Disagreement on extraction and coding would have been resolved through consulting an independent reviewer at the Centre for Evidence-Based Intervention at the University of Oxford or the Campbell Methods Group.

Risk of bias table

As previously stated, internal validity was ensured by including only studies with the following designs: prospective randomised controlled trials, quasi-randomised controlled trials, or nonrandomised controlled trials which adjust for baseline differences.

For included studies, additional risk of bias was planned to be assessed using both i) categories outlined in the *Cochrane Handbook for Systematic Reviews of Interventions* (Higgins & Green, 2011: Section 8.6) and ii) predetermined criteria previously published in two systematic reviews and modified to adapt to the

parameters of this study as shown in the chapter appendix (Morton, 2011; Zief, Lauver, & Maynard, 2006). Review authors planned to independently complete both of the risk of bias sheets. Relevant primary investigators were to be contacted to request any missing information. If there had been any dispute between the two review authors, an arbiter from the Centre for Evidence-Based Intervention at Oxford University or the Campbell Methods Group would have been consulted.

i) Using the data extraction form, review authors planned to independently assess each study for risk of bias on the following criteria as outlined by the *Cochrane Handbook for Systematic Reviews of Interventions* (Higgins & Green, 2011: Section 8.6):

1. Sequence generation (was the allocation sequence adequately generated?)
2. Allocation concealment (was allocation adequately concealed?)
3. Blinding of participants, personnel and outcome assessors (was knowledge of the allocated intervention adequately prevented during the study?)
4. Incomplete outcome data (were incomplete outcome data adequately addressed?)
5. Selective outcome reporting (were reports of the study free of suggestion of selective outcome reporting?)
6. Other sources of bias (was the study apparently free of other problems that could put it at a high risk of bias?)

One example of 'other sources of bias' could have consisted of including participants who have received employment services from more than one agency. This could lead to bias, as participants in this subgroup may be more likely to demonstrate an effect after having received a higher dosage of employment services.

For each domain, review authors planned to independently assign each included study to one of the following categories:

(A) High risk of bias
(B) Low risk of bias
(C) Unclear or unknown bias

ii) Additionally, we planned to carry out a narrative assessment of bias based on the second risk of bias table. This table was adapted to this review to accommodate both randomised controlled trials and high-quality quasi-experimental designs. In particular, these criteria would have addressed how a study controls for baseline differences, reassignment, and attrition. Studies would have been considered to be of higher quality if they meet *What Works Clearinghouse* standards for overall and differential attrition (Mathematica Policy Research, Inc., 2011, p. 13-14), use statistical tools to adjust for all baseline differences that are statistically significant before the intervention, and use original assignment of intervention and other groups as the basis for analyses. These standards have been used in recent systematic reviews (Del Grosso, Kleinman, Esposito, Martin, & Paulsell, 2011; Mathematica Policy Research, Inc. & Child Trends, 2012). This assessment of the risk of bias was not intended to be a ranked or quantitative exercise. Rather, the exercise was planned to facilitate discussion about the strengths and weaknesses of the research designs and their implementation for included studies.

Measures of treatment effect

Binary data

For dichotomous outcomes, such as employed or unemployed, we planned to report relative risks (i.e. risk ratios) (Higgins & Green, 2011, section 9.2.2).

Continuous data

In line with the systematic review for work programmes for welfare recipients (Smedslund et al., 2004), for outcomes that are continuous variables, such as salary, and reported on the same scale of measurement, we planned to use the mean difference (i.e. weighted mean difference). For outcomes reported on different scales, we planned to use Hedges' *g* to report standardized mean differences (SMDs) (Mathematica Policy Research, Inc., 2011). We planned to report the 95% confidence intervals for mean differences and standardized mean differences.

Synthesising binary and continuous data

Had both binary and continuous data been reported across studies, the review authors would have assessed and discussed whether it was logical and appropriate in the context of the study and wider field to convert the continuous data into dichotomous data. The cut-off point for the dichotomous data must be meaningful and reasonable. We planned to consult experts from the Campbell Methods Group and the Centre for Evidence-Based Intervention as necessary, and report synthesised data as appropriate.

Unit of analysis issues

Cluster-randomised trials

We anticipated that allocation to the intervention group would be at the individual level. In the event of clustering, for example on the community level, we anticipated that investigators would have controlled for a clustering effect in their results. We planned to contact authors for further information if that had been unclear. If the clustering effect was not controlled for, we would have requested individual participant data to calculate an estimate of the intra-cluster

correlation coefficient (ICC), and, if that was not available, we planned to obtain external estimates of the ICC from similar studies. We planned to then enter these data into RevMan to analyse effect sizes and confidence intervals using the generic inverse variance method (Higgins & Green, 2011, section 16.3.3).

Repeated observations on participants

One potential complication of a systematic review of studies in this area is that most studies could report multiple outcomes, and some could report the same outcome (e.g. salary) at multiple time points. The statistical methods outlined required that findings (e.g. standardized mean differences) come from unique samples.

In order to address this problem, all findings meeting the criteria of this review were to be coded, but, for meta-analysis, we planned to use the data from the longest follow-up that is based on the full sample (i.e. not affected by attrition) (Higgins & Green, 2011, section 9.3.4). We planned to use the attrition guideline standards set by *What Works Clearinghouse*, accounting for different levels of overall and differential attrition as well as the primary investigator's judgment about whether the source of attrition was at random or endogenous (Del Grosso et al., 2011; Mathematica Policy Research, Inc. & Child Trends, 2012).

Dealing with missing data

If a study had missing data, we would have contacted the primary author to request additional information. For trials reporting outcomes only for participants completing the trial, the primary author would be asked to provide additional information to permit intention-to-treat analyses. Studies in which participants were analyzed as members of the groups to which they were

originally assigned (intention-to-treat analysis), studies that included only those participants who were willing or able to provide data (available-case analysis), and studies that analyzed participants who adhered to the study's design (per-protocol analysis) would have been analyzed separately.

If obtaining missing data was not possible or investigators were unresponsive, we would have made assumptions regarding whether the data were 'missing at random' or 'not missing at random' and would have followed the recommendations of the *Cochrane Handbook for Systematic Reviews of Interventions* (Higgins & Green, 2011, section 16.1.2). We anticipated that data that were not missing at random were likely to be missing for reasons related to the outcomes of the missing data. For example, if a participant agreed to take part in an employment services intervention, but was unhappy with not finding a job or the job found, the participant may have been unwilling to complete any follow-up interviews or questionnaires on his or her experience. In such a situation, where dichotomous data were missing, we planned to impute data with the assumption that the participants experienced the less favourable outcome. We also planned to explore the possibility that those missing experienced the positive outcome (found work) and impute data based on this assumption. We planned to conduct sensitivity analyses to examine the impact on the results of changes in the assumptions made about missing data.

If studies had missing summary data, such as missing standard deviations, we planned to derive these where possible, using calculations provided in the

Cochrane Handbook for Systematic Reviews of Interventions (Higgins & Green, 2011, section 16.1.3).

We planned to specify the methods used to address any missing data in the results tables. If imputation was not possible, we planned to outline the reasons for this in the text.

Assessment of heterogeneity

We planned to record any heterogeneity in terms of study demographics, setting, program characteristics, and study quality both in a narrative format and in a table.

If meta-analysis had been used, statistical heterogeneity would have been reported both using a Q statistic and its p value, the I^2 statistic, and by visual inspection of forest plots. Experts on this issue would have been consulted as necessary.

Assessment of reporting biases

Reporting bias could have been present both as a result of publication bias and because of selective reporting. Extensive searches were conducted to attempt to identify both published and unpublished studies. We planned to use funnel plots for information about possible publication bias if we found sufficient studies (e.g. at least ten studies, Higgins & Green, 2011, section 10.4.1). However, asymmetric funnel plots are not necessarily caused by publication bias (and publication bias does not necessarily cause asymmetry in a funnel plot). If asymmetry had been present, we would have considered possible reasons for this.

We also planned to seek to identify any pre-published study protocols to check that all pre-specified items appear in the final reports. Additionally, review authors would have contacted researchers with regard to missing data and information, and all missing data and concerns about reporting biases would have been reported.

Subgroup analysis

We planned to subgroup results by:

- Gender of the participants (Beiser & Hou, 2003; Siraj, 2007);
- Language proficiency level for the national language of the resettlement country at baseline (Mamgain & Collins 2003; Potocky-Tripodi, 2004); and,
- Ethnic group of the participants (e.g. this may be split by countries of origin: Siraj, 2007).

If sufficient data had existed and comparison conditions had been similar, subgroup analyses in RevMan would have examined potential differential effects of interventions, dividing studies using meta-regression where appropriate (Higgins & Green, 2011, section 9.6) according to:

- program content grouped if there were clear delineations in approach, intensity, and content (e.g. mediation between employers/employees, employment mentorship, and language training)
- program provider as defined as government provider, co-ethnic community provider, other non-profit provider, or a private provider;
- population served by:
    - gender of the participants,
    - language proficiency level for the national language of the resettlement country, and,
    - ethnic group of the participants
- the setting by country (e.g. US, Canada, and Australia)

In the event of sufficient studies and data for subgroup analyses, these analyses would have been accompanied by a discussion of their potential pitfalls. No

conclusions from subgroup analyses would have been drawn and interpretation of relationships would have been cautious, as they are based on subdivisions of studies and are therefore indirect comparisons.

Sensitivity analyses

We planned to perform sensitivity analysis to assess whether the findings of this review were robust with respect to the decisions made in the process of obtaining them. For example, sensitivity analyses may have been performed by excluding studies according to study quality issues (including those with low sample size and high risk of bias) and through separating studies by design (i.e. randomised controlled trials from quasi-experimental designs). For methodological quality, we planned to consider sensitivity analysis for each major component of the risk of bias checklists. Sensitivity analysis would further be used to examine the robustness of conclusions in relation to the quality of data (outcome measures based on different time intervals).

Data synthesis

Meta-analysis would have been used if appropriate. If sufficient studies were identified, we planned to analyse the effects of differing types of interventions, time points, and/or comparison conditions separately. Meta-analyses would have been conducted for each outcome construct separately, combining dichotomous and continuous outcomes as appropriate, as discussed in the section on measures of treatment effect. As the standard for study designs included in this review was fairly strict, we did not plan separate studies by study design. However, study design would have been explored through sensitivity analyses if there had been sufficient studies to warrant this.

Statistical procedures and conventions

A random effects model would have been assumed given the expected level of heterogeneity across studies. If there were sufficient studies, analyses would have been performed using RevMan5, SPSS, or STATA.

Narrative synthesis

We planned to use a narrative synthesis of the results to present information on the strength of the study design, risk of biases, population differences, context of the intervention, and context of the results. Depending on the quantity of papers that met the inclusion criteria, we had planned follow the three step suggestion of Petticrew and Roberts (2005): '(i) organizing the description of the studies into logical categories; (ii) analyzing the findings *within* each of the categories; and (iii) synthesizing the findings *across* all included studies' (p. 170). As planned, we discussed the nature of excluded studies since no studies met the inclusion criteria.

Treatment of qualitative research

Qualitative data from included studies were planned to be useful in contextualizing the results and determining the risk of bias, and would have been reported in the review if it had been available.

Results

Results of the search and study selection

Of the 9,260 records initially identified, 26 records, corresponding to 23 studies, were identified for full screening; 22 of these records, corresponding to 19 of these studies, were excluded after inspecting the full text. Two non-excluded studies were systematic reviews with potentially relevant studies, which led to a further 13 abstracts and one potentially new study being reviewed. Three relevant primary investigators were contacted in an attempt to establish eligibility for their studies; two of these responded and their studies were excluded.

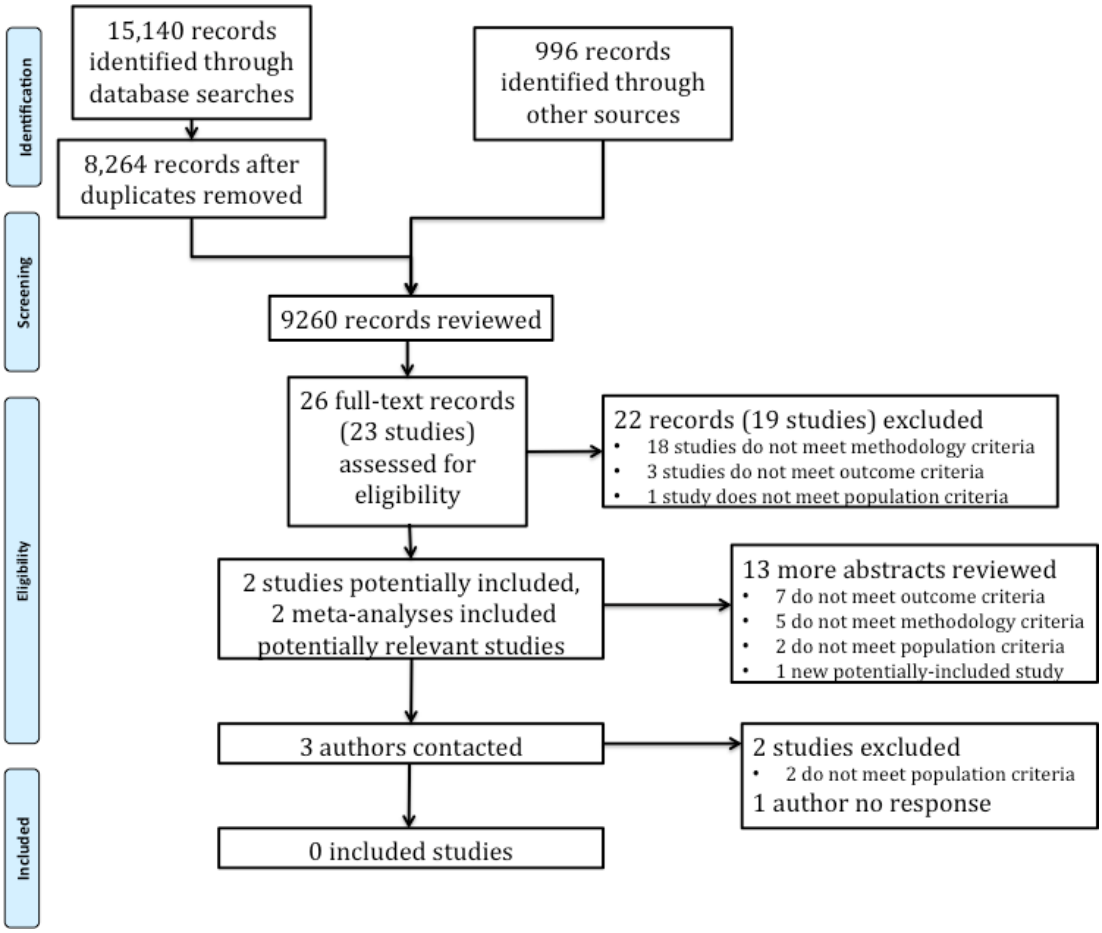


Figure 10: Flow chart for study selection

Of the 27 records (24 studies) reviewed in full text, 18 were excluded because they did not meet methodology criteria, 3 did not meet outcome criteria, 3 did not meet population criteria, and one author was nonresponsive. There were no disputes between the two review authors regarding the inclusion/exclusion of studies. Had such a dispute arisen, however, an arbiter from the Centre for Evidence-Based Intervention at Oxford University would have been consulted to help decide if that paper met the inclusion criteria.

Included studies

No studies met the inclusion criteria. Consequently, evidence of effectiveness could not be examined.

Excluded studies

Due to the sensitive nature of the searches, most of the citations were excluded on the basis of title and abstract. The table in the appendices lists the studies excluded on the basis of their full-text. Please note that shorthand is used for much of the questions and studies. Please see chapter appendix for the full screening guide and the end of this section for the full citations.

Study Number 24 was added after reviewing two systematic reviews (McFarlane & Kaplan, 2012; Palic & Elklit, 2011), both of which included Kruse et al., 2009, a study that appeared to potential meet inclusion criteria. These two systematic reviews and the three primary authors contacted (Kruse, Lepersen, and Paunovic) all focused on clinical treatment of refugees with mental health diagnoses and also included a measure of wellbeing. These works point to a growing literature on the effectiveness and efficacy of treating mental health

diagnoses among refugees, both those who arrive as asylum-seekers and as resettled refugees. The rigorous clinical research around refugees seems to be growing at a faster rate than the rigorous nonclinical literature focused on items such as employment.

Many of the excluded studies stem from policy documents and government-funded research across decades, indicating a long-term commitment to studying refugee resettlement, particularly employment and economic self-sufficiency. The excluded studies range from being published in 1984 to 2012. Some of the older studies were obtained from authors, microfiche in the United States, records in the British Library, and the Oxford Refugee Studies Centre Collection. It is important to maintain these records for research, and hopefully many of these records will be digitized in the future for greater accessibility.

As discussed previously, of all of the full-papers reviewed, 18 were excluded because they did not meet methodology criteria, three did not meet outcome criteria, three did not meet population criteria, and one author was nonresponsive. Research design that minimizes bias when discussing effects is of great concern to this research field. One instance where heightened awareness regarding potential bias was useful was when reviewing an excluded study of relatively better design quality than average and with a large sample size: 'A Quantitative Comparison of the Effectiveness of Public and Private Refugee Resettlement Programs: An Evaluation of the San Diego Wilson Fish Demonstration Project' (Hohm, Sargent, & Moser, 1999). This evaluation examined the outcomes for adult refugees without children in San Diego, US,

served by an intervention employing a private-sector approach compared to outcomes for those served by an intervention employing a standard, public-sector approach of employment services administered by the Department of Social Services. Outcomes measured included the number of refugees who found jobs within eight months, the number of days that refugees received financial support, and the number of days it took to find a job for those employed.[21] For each measure, the researcher did a t-test or chi-squared calculation. Although the researcher defended equivalence of the intervention and comparison groups, there are serious risks of bias, due to the retrospective design, an unclear explanation for how refugees were non-randomly assigned to one group or the other, and the sole demographic comparisons of each group being gender, ethnicity, and age. There could have been significant differences in socioeconomic status or education before the services, which may have affected outcomes.

The full-text excluded studies do not represent the best quality studies in this field, but they were unable to be excluded based on their abstracts. As such, there are limited implications for policy or practice from analyses of these studies.

[21] This last measure is an endogenous subgroup, which would not be included in analyses. The population of those who find jobs may be influenced by the interventions (i.e. the populations may be different between the private-sector and standard services). Thus, the comparison of the number of days between the two groups would be looking at two subgroups that may not be equivalent due to the interventions.

Ongoing studies

We were able to locate only one potentially relevant ongoing study. The study is dated September 2013-March 2016, entitled 'Optimising refugee resettlement in the UK: a comparative analysis', and is led by Dr Michael Collyer, Prof Rupert Brown, Dr Linda Morrice, and Dr Linda Tip at the University of Sussex. This study seeks to compare three locations regarding integration outcomes for resettled refugees and find the key determinates of integration outcomes among resettled refugees, especially subjective wellbeing, self-efficacy, and perceived social acceptance (Sussex Centre for Migration Research, 2014).

Discussion

The questions in this systematic review – whether 1) interventions designed to improve the economic self-sufficiency and wellbeing for resettled refugees affect participants' labor force participation, employment, use of cash assistance, income, job retention, and quality of life, and whether 2) effects differ depending on program content, program provider, populations served, or the setting – answer the third research question in the thesis and are of great importance. These questions are crucial to those who are forcibly displaced and beginning their life in a new country, and to the millions who have been resettled over the past 30 years. Resettled refugees often prioritize outcomes such as employment as important in their own lives (Fozdar & Hartley, 2013; Valtonen, 1998). Secondly, these questions are of upmost importance to the governments, non-governmental organizations, practitioners, and communities who assist refugee resettlement programs. Refugee resettlement programs are often long-standing and cover a number of countries, with 26 countries having resettlement programs associated with UNHCR as of 2012. The three largest resettlement

countries have some form of economic self-sufficiency as central to their programs, and the US currently invests over $1 billion per year in refugee resettlement programming.

No studies met the review's inclusion criteria. We reviewed 27 records, corresponding to 24 studies, and excluded all of them. The studies reviewed and excluded were limited in their ability to answer questions of causal effects with minimal potential for bias and most were excluded for failing to meet methodology criteria. Many of the studies we excluded were done retrospectively or as non-randomised designs without a control or comparison group.

The absence of evidence found in this review is not evidence of absence of effects of these resettlement interventions (Montgomery et al., 2011; Schlosser & Sigafoos, 2009). Programs may be improving outcomes or potentially causing harm. It is not possible to conclude beyond the evidence. Although there was an absence of research with resettled refugees, there has been over forty years of randomized controlled trial research for self-sufficiency and employment programming with other low-income populations, including the existence of a self-sufficiency research clearinghouse in the US (Welfare Research and Evaluation Conference, 2014). Some of this research and programming may be applicable and adaptable to resettled refugees, but it is impossible to conclude this without substantially including resettled refugees as research participants.

This review was designed with clear questions and scientific rigor to minimize bias, as per the principles of the Cochrane Collaboration and the practice of systematic reviewers. The authors aim to update the review within three years.

Implications for research, practitioners and policy

This review points to a clear need for future research using prospective, controlled designs (RCT or QED) which can answer the question of the effects on resettled refugee economic self-sufficiency and wellbeing. Retrospective studies and those with non-randomized designs without a control or comparison group make it difficult to isolate effects to the intervention rather than to other changes that happened during the time the study took place. Prospective, controlled designs have been used to determine the effects of employment, economic self-sufficiency, and wellbeing interventions with other populations (Office of Planning Research and Evaluation, 2013). We believe that greater investment should be made in these studies, given the policy importance of this resettled refugee population and of economic self-sufficiency and wellbeing.

Furthermore, several of the reports we excluded did not provide clear information on the population studied. Studies should specify if refugees arrived as asylum-seekers or through government resettlement, as this may affect their reception experience, including the services they are entitled to receive, their ability to find employment, and their wellbeing.

For practitioners and policymakers, it is important to note that this review did not find any evidence for or against interventions.

Implications for the thesis

First and foremost, this systematic review answers part of the third research question on what is known about interventions to improve the resettled refugee economic self-sufficiency and the confidence is discussing causal statements for the effects of those interventions. In doing so, it also reiterates the need for primary research to answer this quesion.

Additionally, as stated in the methods chapter, many of the excluded studies and abstracts fed into the literature review and knowledge about the resettlement system discussed in Chapters 1 and 2. This literature forms a basis for preliminary codes and background knowledge about the resettlement system for the qualitative research in Chapter 5. The literature also provides context for the self-sufficiency and wellbeing findings and models in Chapters 6 and 7.

Therefore, for the thesis, the results of the systematic review reinforce that little is known and the need for the primary research as well as contextualize the primary research. In defining the terminology for the systematic review, it became clear that there is both a lack of knowledge about the theory of change for interventions designed to improve the economic self-sufficiency and wellbeing of resettled refugees and a lack of rigorous intervention research. This underpins the need to carry out the work in the next chapter to lay the groundwork for future rigorous research. Interventions can also be better designed by understanding the needs and capacities explored in Chapter 6 and by models to explain variances in outcomes explored in Chapter 7.

Chapter 4 appendicies

Search strings used for databases and search results

The following databases were searched 12-14 September 2013.

Database	Search(es)	Hits
Applied Social Sciences Index and Abstracts (ASSIA) (Proquest)	ab,ti((resettle* OR re-settle* OR refuge* OR "force* *migrant*" OR asylum* OR "humanit* entrant*" OR "humanit* settle*") AND (economic OR job* OR employ* OR mone* OR work* OR labour OR labor OR wellbeing OR well-being OR "well being" OR quality NEAR/4 life) AND (outcome* OR evaluat* OR effect* OR efficacy OR compar* OR experiment* OR trial OR control* OR random* OR study OR studies OR assessment OR impact* OR research*)) LIMITERS: 1980-CURRENT	503
EconLit (Proquest)		322
ERIC (Proquest)		689
International Bibliography of the Social Sciences (Proquest)		1150
PAIS International (Proquest)		279
ProQuest Dissertations & Theses Full Text (Proquest)		2348
ProQuest Dissertations & Theses: UK & Ireland (Proquest)		443
Sociological Abstracts (Proquest)		1860
Business Source Complete (EBSCO)	Boolean/Phrase: TI ((resettle* OR re-settle* OR refuge* OR force* W1 *migrant* OR asylum* OR humanit* W1 entrant* OR humanit* W1 settle*) AND (economic OR job* OR employ* OR mone* OR work* OR lab#r OR wellbeing OR well-being OR well W1 being OR quality N4 life) AND (outcome* OR evaluat* OR effect* OR efficacy OR compar* OR experiment* OR trial OR control* OR random* OR study OR studies OR assessment OR impact* OR research*)) OR AB((resettle* OR re-settle* OR refuge* OR force* W1 *migrant* OR asylum* OR humanit* W1 entrant* OR humanit* W1 settle*) AND (economic OR job* OR employ* OR mone* OR work* OR lab#r OR wellbeing OR well-being OR well W1 being OR quality N4 life) AND (outcome* OR evaluat* OR effect* OR efficacy OR compar* OR experiment* OR trial OR control* OR random* OR study OR studies OR assessment OR impact* OR research*)) Limiters Published Date: 19800101-20131231	692
CINAHL (EBSCO)		482
The Cochrane Library	(resettle* or re-settle* or refuge* or (force* next *migrant*) or asylum* or (humanit* next entrant*) or (humanit* next settle*)) and (economic or job* or employ* or mone* or work* or labour or labor or wellbeing or well-being or "well being" or (quality near/4 life)) and (outcome* or evaluat* or effect* or efficacy or compar* or experiment* or trial or control* or random* or study or studies or assessment or impact* or research*) title, abstract, keywords from 1980 to 2013, in Cochrane Reviews (Reviews and Protocols), Other Reviews, Trials, Methods Studies, Technology Assessments and Economic Evaluations (Word variations have been searched)	21
CPCI-SSH Conference Proceedings Citation Index (Web of Science)	Topic=((resettle* OR re-settle* OR refuge* OR "force* *migrant*" OR asylum* OR "humanit* entrant*" OR "humanit* settle*") AND (economic OR job* OR employ*	158

Social Science Citation Index (Web of Science)	OR mone* OR work* OR labour OR labor OR wellbeing OR well-being OR "well being" OR (quality NEAR/4 life)) AND (outcome* OR evaluat* OR effect* OR efficacy OR compar* OR experiment* OR trial OR control* OR random* OR study OR studies OR assessment OR impact* OR research*))	2178
OpenGrey	(resettle* OR re-settle* OR refuge* OR "force* *migrant*" OR asylum* OR "humanit* entrant*" OR "humanit* settle*") AND (economic OR job* OR employ* OR mone* OR work* OR labour OR labor OR wellbeing OR well-being OR "well being" OR (quality NEAR life)) AND (outcome* OR evaluat* OR effect* OR efficacy OR compar* OR experiment* OR trial OR control* OR random* OR study OR studies OR assessment OR impact* OR research*)	137
PolicyFile	(resettle* OR re-settle* OR refuge* OR "force* *migrant*" OR asylum* OR "humanit* entrant*" OR "humanit* settle*") AND (economic OR job* OR employ* OR mone* OR work* OR labor OR well-being OR "well being" OR "quality of life") AND (outcome* OR evaluat* OR effect* OR efficacy OR compar* OR experiment* OR trial OR control* OR random* OR study OR studies OR assessment OR impact* OR research*)	97
PsycINFO	1) (resettle* or re-settle* or refuge* or asylum*).ti,ab. 2) (force* adj immigrant*).ti,ab. 3) (force* adj migrant*).ti,ab. 4) (humanit* adj entrant*).ti,ab. 5) (humanit* adj settle*).ti,ab. 6) 1 or 2 or 3 or 4 or 5 7) (well adj being).ti,ab. 8) (quality adj4 life).ti,ab. 9) (economic or job* or employ* or mone* or work* or labour or labor or wellbeing or well-being).ti,ab. 10) 7 or 8 or 9 11) (outcome* or evaluat* or effect* or efficacy or compar* or experiment* or trial or control* or random* or study or studies or assessment or impact* or research*).ti,ab. 12) 6 and 10 and 11	1877
Social Care Online	(freetext="resettle*" OR freetext="re-settle*" OR freetext="refuge*" OR freetext="force* *migrant*" OR freetext="asylum*" OR freetext="humanit* entrant*" OR freetext="humanit* settle*") AND (freetext="economic" OR freetext="job*" OR freetext="employ*" OR freetext="mone*" OR freetext="work*" OR freetext="labour" OR freetext="labor" OR freetext="wellbeing" OR freetext="well-being" OR freetext="well being" OR freetext="quality of life") AND (freetext="outcome*" OR freetext="evaluat*" OR freetext="effect*" OR freetext="efficacy" OR freetext="compar*" OR freetext="experiment*" OR freetext="trial" OR freetext="control*" OR freetext="random*" OR freetext="study" OR freetext="studies" OR freetext="assessment" OR freetext="impact*" OR freetext="research*")	549
SocIndex (Sociology Research Database)	Boolean/Phrase: TI ((resettle* OR re-settle* OR refuge* OR force* W1 *migrant* OR asylum* OR humanit* W1 entrant* OR humanit* W1 settle*) AND (economic OR job* OR employ* OR mone* OR work* OR lab#r OR	1355

	wellbeing OR well-being OR well W1 being OR quality N4 life) AND (outcome* OR evaluat* OR effect* OR efficacy OR compar* OR experiment* OR trial OR control* OR random* OR study OR studies OR assessment OR impact* OR research*)) OR AB((resettle* OR re-settle* OR refuge* OR force* W1 *migrant* OR asylum* OR humanit* W1 entrant* OR humanit* W1 settle*) AND (economic OR job* OR employ* OR mone* OR work* OR lab#r OR wellbeing OR well-being OR well W1 being OR quality N4 life) AND (outcome* OR evaluat* OR effect* OR efficacy OR compar* OR experiment* OR trial OR control* OR random* OR study OR studies OR assessment OR impact* OR research*)) Limiters Published Date: 19800101-20131231	

The following websites were searched and the number of citations specifically reviewed when appropriate. The searches took place 19 June 2013 - 21 August 2013.

Organization and website	Specific citations reviewed (when applicable)
Center for Migration and Refugee Studies, American University in Cairo: www.aucegypt.edu/gapp/cmrs	55
Centre for Refugee Research, University of New South Wales: www.crr.unsw.edu.au/	13
Centre for Refugee Studies, York University: http://crs.yorku.ca/	234
Centre for Research on Migration, Refugees and Belonging, University of East London: www.uel.ac.uk/cmrb	64
Department for Work and Pensions Social Research Branch: www.dwp.gov.uk/asd/asd5/index.html	13
Forced Migration Online Digital Library: www.forcedmigration.org/digital-library	The website's search functions are down, but the website itself was reviewed.
Manpower Demonstration Research Corporation: www.mdrc.org	2
Mathematica Policy Research: www.mathematica-mpr.com	14
National Centre for Social Research: www.natcen.ac.uk/	21
National Institute for Social Work: www.nisw.org.uk/about.html	0
Norwegian Refugee Council, Evaluations: www.nrc.no/?aid=9160729	32
Office of Refugee Resettlement, U.S. Department of Health and Human Services, Administration for Children and Families: www.acf.hhs.gov/programs/orr/	5
Refugee Services, New Zealand: www.refugeeservices.org.nz	12
Refugee Studies Centre, Oxford University: www.rsc.ox.ac.uk	146
Urban Institute: www.urban.org	53
UNHCR: The UN Refugee Agency, Policy Development and Evaluation: http://www.unhcr.org/pages/4a1d28526.html	333

Screening guide

Below was the planned screening guide.

Data to be extracted	*Notes to reviewer*
Preliminary Screening Guide	
Is the study about the economic self-sufficiency or wellbeing of resettled refugees conducted or published since 1980?	If clearly no, exclude (e.g. editorials, newspaper articles, different subject matter). If yes or unclear, include.
Screening Guide	
Title of study/paper	
Author	
Journal/publication/source of information	
Year of publication/release	
Population	
Are the participants being served by a refugee resettlement entity?	This may be governmental, public, or private
Do the participants fall between the ages of 18 and 64 at the time of intervention?	
Intervention and Comparison	
Is the intervention designed to broadly increase the economic self-sufficiency and wellbeing of resettled refugees?	A wide range of approaches and durations of the intervention will be accepted here
Is the intervention compared to a control or comparison group receiving 'services as usual' or an alternative intervention?	
Outcomes	
Is there an outcome regarding the unemployment/employment rate, labor force participation rate, percentage (or portion) of population accessing cash assistance (e.g. specialised refugee cash assistance or public cash assistance), income, job retention, or quality of life?	These will likely be measured by refugee self-report and/or records from governmental agencies or non-governmental organizations.
Evaluation Methodology	
Does the study examine the effects of an intervention using a randomized controlled trial (RCT) design; a quasi-randomized controlled trial design (QRCT, i.e. participants are allocated by means such as alternating allocation, person's birth date, the date of the week or month, case number or alphabetical order); or a nonrandomized controlled design (i.e. quasi-experimental design)?	
Were participants prospectively assigned to study groups or a comparison/control	

group (i.e. alternative intervention or 'services as usual')?	
Did the study measure control or comparison group outcomes concurrently with intervention group outcomes?	
If it is a nonrandomized, controlled study, does it provide information on baseline comparability of the cohorts and use statistical tools to adjust for baseline differences?	If no, the author may need to be contacted to see if this was done in another paper.
If any of the answers above are clearly no, exclude	

Data extraction sheet

Below was the planned data extraction sheet.

Coding form	
General	
Title	Description of target population Method of recruitment
Author	
Year of publication	
Journal/source	
Contact details	
Original language of report	
Context	
Setting	Town/region and country of intervention
Description of setting/contextual variables	From information provided
	Additionally, mark one category Setting is described primarily as: 1. Urban 2. Rural 3. Suburban 4. A mix between urban and rural 5. Local policy change 6. National policy change 8. Other 9. Cannot tell
Description of *target* population	e.g. Gender, nationality of origin, age, language, socio-demographics
Method of recruitment	
Intervention delivery	Description of who delivers the intervention Mark one: Who delivers or provides the intervention? 1. Government entity 2. For-profit entity 3. Secular non-profit organization 4. Faith-based non-profit organization 8. Other 9. Cannot tell
Description of intervention/program	Including name of intervention, aim/focus, components, manual information Mark one category[22]: type __

[22] Categories specified based on experience and literature. May be modified based on obvious splits for included studies. For use only if sufficient studies for meta-analysis exist.

	1. Policy or procedural change 2. Short self-sufficiency targeted intervention (avg. 3 sessions or fewer) 3. Medium intensity self-sufficiency targeted intervention (4 – 8 sessions) 4. Intensive self-sufficiency targeted intervention (9+ sessions) 5. Access to language training only (not broader, 2-4) 6. Meditation between employers and employees only (not broader, 2-4) 7. Access to translation and paperwork assistance only (not broader, 2-4) 8. Other
Intensity of intervention	Descriptive dose (i.e. duration and intensity/number of sessions). Intended length of intervention (hours) __ __ Average length of intervention (hours) __ __
Description of counterfactual	Including description of control intervention or 'services as usual', aim/focus, components, dose (i.e. duration and intensity/number of sessions), manual information, who implemented the counterfactual. Mark one category for the counterfactual __ 1. Services as usual 2. Other self-sufficiency intervention of equal intensity 3. Other 'unrelated' intervention (e.g. physical health) of equal intensity 4. Intervention of lesser intensity 5. Information 8. Other 9. Cannot tell
Dates of study	
Study design	
Study objective as stated by authors	
Study design (or designs) used	(a) randomized controlled trial; (b) quasi-randomized controlled trial design, or (c) nonrandomized controlled trial with comparison group
Method of randomization (if applicable)	
Type of data included to assess validity of conclusions	Including statistical tables
Data source	(e.g. administrative records, collected surveys)
Statistical analyses used	
Study sample	
Total number	Also include total population

assigned in study	
Number to intervention group	
Avg. age and other characteristics of intervention group	Mean age __ Youngest age __ Oldest age __ Approximate gender description of sample __ 1. All men (>90%) 2. More men than women (60% to 90% men) 3. Roughly half men and half women 4. More women than men (60% to 90% women) 5. All women (>90%) 9. Cannot tell Regions of origin of sample Percentage from Americas (e.g. Caribbean, Latin America) Percentage Asian Percentage European Percentage Middle Eastern Percentage North African Percentage Sub-Saharan African Percentage Unknown/Other Reported ethnic group breakdown Other descriptions provided: e.g. socioeconomic status, racial characteristics, SD of age
Number to control/ comparison group	
Avg. age and other characteristics of cont./comp. group	Mean age __ Youngest age __ Oldest age __ Approximate gender description of sample __ 1. All men (>90%) 2. More men than women (60% to 90% men) 3. Roughly half men and half women 4. More women than men (60% to 90% women) 5. All women (>90%) 9. Cannot tell Regions of origin of sample Percentage from Americas (e.g. Caribbean, Latin America) Percentage Asian Percentage European Percentage Middle Eastern Percentage North African

	Percentage Sub-Saharan African Percentage Unknown/Other Reported ethnic group breakdown Other descriptions provided: e.g. socioeconomic status, racial characteristics, SD of age
Response rate, baseline: inter. group	
Response rate, baseline: comp. group	
Baseline differences between groups	
Response rate, follow-up: inter. group	If multiple follow-up points, include all points.
Response rate, follow-up: comp. group	If multiple follow-up points, include all points.
Follow-up length – after intervention began	
Follow-up length – after intervention concluded	
Method to account for differences between intervention and control group	(e.g. Randomization, matching, statistical analyses)
Confounders controlled for in the analysis statistically or by matching	
Rate of attrition – overall and differential	

Outcomes – Include outcomes reported for the whole study population as well as subgroups reported by gender, language proficiency of national language of resettlement country, and ethnic group of participants. Additionally, please complete a table for each outcome reported that meets study inclusion criteria.	
Labor force participation	With reported values
Employment (or unemployment) rates	
Usage of cash assistance	
Overall annual income	
Salary	
Average hourly wage	
Job Retention	

Quality of Life	
Other outcomes reported (specify)	
Reported subgroup results	With reported values and including how subgroup was determined (e.g. if endogenous or other validity issues)

DICHOTOMOUS OUTCOME DATA

OUTCOME	TIME POINT(s)*	SOURCE	VALID Ns	CASES (e.g. employed)	NON-CASES	STATISTICS	NOTES AND PAGE NUMBERS
	(Record exact time from program beginning and ending, there may be more than one, record them all)	Questionnaire Admin data Other (specify) Unclear	Intervention Comparison	Intervention Comparison	Intervention Comparison	RR (risk ratio) SE (standard error) 95% CI Other Covariates (control variables, age, gender, education, English, ethnicity, other)	Note if RR was calculated

Repeat as needed

CONTINUOUS OUTCOME DATA

OUTCOME	TIME POINT(s)*	SOURCE	VALID Ns	CASES (e.g. employed)	NON-CASES	STATISTICS	NOTES AND PAGE NUMBERS
	(Record exact time from program beginning and ending, there may be more than one, record them all)	Questionnaire Admin data Other (specify) Unclear	Intervention Comparison	Intervention Comparison	Intervention Comparison	P T F Df ES Other Covariates (control variables, age, gender, education, English, ethnicity, other)	

Repeat as needed

*If there had been sufficient studies, outcome results would have been grouped by 3-month follow-up, 6-month follow-up, 1-year follow-up, and 5-year follow-up from program ending.

Risk of bias tables

i) This was the Cochrane Collaboration risk of bias table (Higgins & Green, 2011: Section 8.6).

Risk of Bias	Judgment	Comments
Sequence generation		
Allocation concealment		
Blinding		
Incomplete outcome data		
Selective outcome reporting		
Other sources of bias		

ii) This guide for appraising study quality was drawn from: (Morton 2011; Schulz, Altman, & Moher for the CONSORT Group, 2010; Zief et al., 2006).

Section/Topic	Item No	Checklist item	Comments (Included yes/no, quality)
Title and abstract			
	1	Study Design	
Introduction			
Background and objectives	2	Relationship of the evaluator to intervention	
	3	Relationship of the study sponsor to intervention	
	4	Explanation of rationale for the intervention	
	5	Specific objectives or hypotheses	
	6	Logic model or theory of change	
Methods			
Trial design	7	Description of trial design: (a) randomised controlled trial; (b) quasi-randomised controlled trial design, or (c) nonrandomised controlled trial with comparison group	
	8	Important changes to methods after trial commencement (such as eligibility criteria), with reasons	
Participants	9	Eligibility criteria for participants	
	10	Settings and locations where the data were collected	
Recruitment	11	Explanation of recruitment procedures	
Interventions	12	Precise details of the intended intervention	
	13	Precise details on the implementation of the intervention	
	14	Information about the activities of the control/comparison group	
	15	Information on possible contamination	

Outcomes	16	Clearly defined pre-specified primary and secondary outcome measures	
	17	Outcome measures aligned with the goals of the intervention	
	18	Explanation of measurement instruments and information regarding their validity and reliability	
	19	Methods used to enhance the quality of the data (supplemental studies, multiple evaluations, training of data collectors)	
Sample size	20	How sample size was determined (ideally, use of power analysis to determine sample size)	
	21	Sample size of treatment and comparison groups	
Randomization (if applicable):			
Sequence generation	22a	Explanation of the method used to generate the random allocation sequence, including details of any restrictions (e.g. blocking, block size, stratification)	
Allocation concealment mechanism	23a	Mechanism used to implement the random allocation sequence (including any concealment)	
Implementation	24a	Information on who generated the random allocation sequence, enrolled participants, and assigned participants to interventions	
Comparison group analysis (if applicable):			
	22b	Justification for comparison group	
	23b	Statistical methods used to control for differences in outcome measures at baseline	
	24b	Statistical methods used to control for demographic variables (and listing of variable)	
Statistical methods	25	Statistical methods used to compare groups for primary and secondary outcomes	
	26	Methods for additional analyses, such as subgroup analyses and adjusted analyses	
	27	Appropriateness of methods chosen	
	28	Pre-intervention measures of outcomes and other important variables collected at baseline and incorporated into the analysis	
Results			
Participant flow and Attrition	29	For each group, the numbers of participants who were randomly assigned, received intended treatment, and were analysed for the primary outcome	
	30	Number in each group who withdrew from study and lost to follow-up	
	31	Number excluded from analysis (give reason)	
	32	Overall and differential attrition calculated	
	33	Attrition > 20%: Completers statistically compared to non-completers	
	34	Attrition > 20%: Baseline equivalence of analytic sample demonstrated	
Intention-to-treat	35	Whether the analysis was by “intention-to-treat”	

Baseline data	36	A table showing baseline demographic and clinical characteristics for each group	
Numbers analyzed	37	For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups	
Outcomes and data reporting	38	For each primary and secondary outcome, results for each group reported	
	39	Means and standard deviations reported	
	40	*p-values* and degrees of freedom reported	
	41	Effect sizes and their precision (such as 95% confidence interval)	
	42	Other value reported (specify)	
Ancillary analyses	43	Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing pre-specified from exploratory	
Harms	44	Inclusion of harms or unintended effects in each group (for specific guidance see CONSORT for harms)	
Discussion			
Interpretation	45	Discussion of trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses	
	46	Interpretation of the results, taking into account study hypotheses and sources of potential bias or imprecision	
	47	Use of observational data to understand impact results	
Generalizability	48	Generalizability of the results	
	49	Replicability of the intervention	
Overall evidence	50	Interpretation consistent with results and done so in the context of current evidence	
Other information			
Registration	A	Registration number and name of trial registry	
Protocol	B	Where the full trial protocol can be accessed, if available	
Funding	C	Sources of funding and other support	

Excluded studies

The table on the next page lists the excluded studies. Shorthand was used for much of the questions and studies. The full screening guide above provides the detailed questions, and the end of this section lists the full citations.

Study No.	1	2	3	4_A-B	5	6	7	8	9	10_A-B	11	12_A-B	13	14	15	16	17	18	19	20	21	22	23	24
Study information	US GAO, 1990	Partners in Economic Development, 1994	Arter, 1984	Aslund et al., 2009 and 2010	Adelman, 1999	Bach &Carroll-Seguin , 1986	Beiser & Johnson , 2003	Bollinger & Hagstrom, 2011	Brown, 2011	Caplan , 1985 and 1989	Cichon, 1985	Damm et al., 2009, and 2012	Forbes, 1985	Goodkind, 2004	Hohm et al., 1999	Jepersen & Vuust, 2012	Lukes, 1997	McFarlane and Kaplan, 2012	McPherson, 2012	Palic & Elklit, 2011	Paunovic & Ost, 2001	Tollefson, 1989	Tran, 1991	Kruse et al., 2009
Populations: Are they resettled refugees?	Yes	Maybe	Yes	No	Yes	Yes	Yes	Maybe	Yes	Yes	Yes	No	Yes	Yes	Yes	No *emailed	Unclear	Yes	No	Some	Unclear	Yes	Yes	No*emailed
Are the participants aged 18-64?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Intervention: Is the intervention designed broadly to affect desired outcomes?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Comparison: Is there a control or comparison group?	No	No	Yes	Yes	No	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Outcomes: Is there an outcome of interest?	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes
Evaluation: Does the study use a RCT, QRCT, or QED design?	No	No	Yes	Yes	No	No	Yes	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	No	Yes
Was it prospective?	No	No	No	No	No	No	No	No	No	No	No	No	No	No	No	Yes	No	Yes	Yes	Yes	Yes	No	No	Yes
Did the study measure groups concurrently?	No	No	Yes	Yes	No	No	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	N/A	Yes
If it is a NRCT, does it provide information on baseline comparability and controls?	N/A	No	No	Maybe	No	No	Yes	No	No	No	No	Maybe	Yes	--	Yes	N/A	N/A	N/A	N/A	Yes	Yes	No	N/A	N/A
Include (I) /Exclude (E)	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E,Added #24	E	E,Added #24	Unclear	E	E	E

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Chapter 5. Theory of Change, Intervention, and Perceptions of Implementation

During a focus group discussion with adult Bhutanese refugees in Pittsburgh, an older woman stated: 'Government should understand the nature of the refugees arriving and put us with the jobs that… allow the life to sustain.' For Bhutanese refugees[23], the nature of the resettlement experience is the result of the design of the national resettlement system and of the local services received upon arrival. In the US, 'economic self-sufficiency' and employment form the fundamental objectives of the resettlement program for new arrivals. Examining the programs that constitute these services and their theory of change to achieve economic self-sufficiency forms the basis for social intervention and future research. The previous chapter emphasized that more research is needed. As explored in Chapter 2, following the Medical Research Council guidance for developing and evaluating complex interventions, this thesis focuses on the development phase of the process (see below).

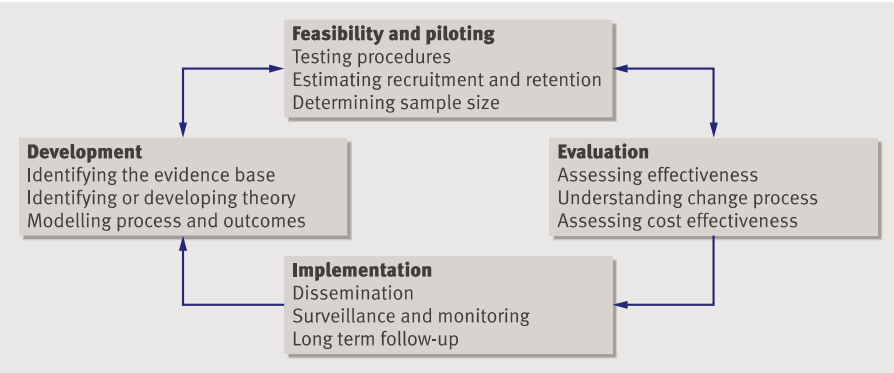


Figure 11: Key elements of the development and evaluation process (Craig et al., 2008)

[23] This population is often referred to as 'Bhutanese Nepalis' or 'Lhotshampas', although each term has political undertones (Hutt, 2011). The term 'Bhutanese refugees' was chosen in this dissertation in alignment with the preference of community leaders in Pittsburgh, although many now prefer not to be referred to as refugees because they have permanent residency.

The interventions for resettled refugees and their measurements on a national level were examined in Chapter 1. The national framework served as a basis for understanding the funding streams and goals as well as for showing the lack of a centralized model for theory of change and for resettlement agencies' work. As refugee resettlement programs have similar funding streams and mandates, they can be envisioned as replications with adaptations to local contexts or as independent interventions with the same goal. Chapter 1 examined how refugee resettlement employment and economic self-sufficiency programs were delivered and expected to work on a national level and showed the need to examine theory and delivery on a more local level to serve as a basis for evidence-based interventions.

In this chapter, findings on the theoretical framework and theory of change are presented and implications of the employment programming's 'theory of change' for the Bhutanese refugee community in Pittsburgh and for refugee resettlement are discussed. Next, a completed template for intervention description and replication (TIDieR) is provided and analyzed, followed by metrics used to analyze the program. Then, perceptions of intervention implementation are presented. This section thus presents results from field research on the research questions: how resettlement employment programs are expected to work and how they are delivered, including findings, program metrics, and perceptions of refugee self-sufficiency.

Theoretical framework and theory of change

Before developing a theory of change, the refugees are situated in the environment that influences them. Individuals are presented at the center, then

the microsystems of families and peers, then the community, and finally the macrosystem of national cultural values, customs, and laws. This follows Bronfenbrenner's 'ecological model', the theoretical framework of the levels on which programming acts (Bronfenbrenner, 1979; Bronfenbrenner, 1999; Bronfenbrenner & Ceci, 1994). Policies and programs aim to change behavior by influencing different levels: individual, proximate (micro/interpersonal), intermediate (meso/community), and fundamental (macro). The primary researcher mapped the employment and economic self-sufficiency programs observed, their general emphases, and their outcomes onto these levels. Although these services are intended for all refugees resettled by the agencies, Bhutanese refugees accounted for almost all of the clientele in the interactions observed. Rather than presenting complex frameworks, the research focused on core activities and concepts. The figure below shows a simple version of the ecological model for this service delivery, incorporating recent programmatic design thinking of fundamental, intermediate, and proximate spheres of influence.

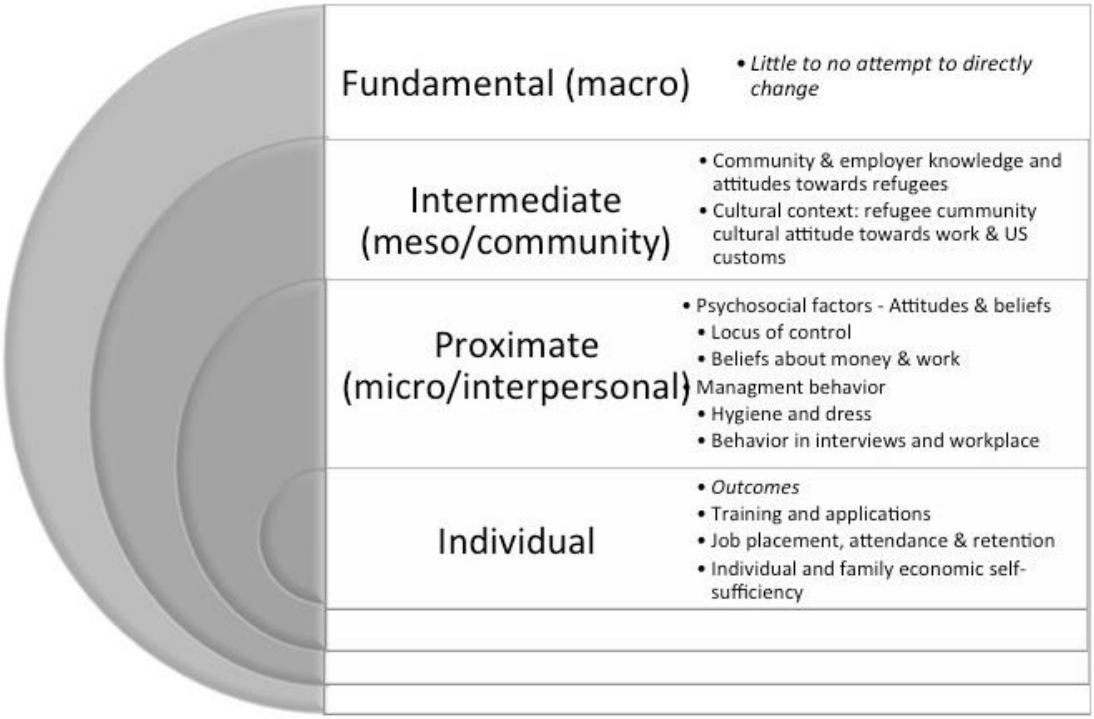


Figure 12: Framework highlighting levels targeted in agencies' work

Importantly, multiple orientations, one-on-one meetings with employment specialists, and job readiness workshops or employment English classes emphasized changing refugees' cultural norms and public interpersonal interactions. These included changing attitudes and beliefs about the importance of accepting any low-level employment as well as behaviors such as hygiene, timeliness, and direct communication in English. Agency staff attempted to shift the locus of control from external factors happening to resettled refugees to the need for refugees to be proactive about their employment and future. Although attempting to change individual and cultural norms may sound didactic, in practice this part of the framework sought to empower refugees about the available array of options and the way they are perceived by others in the US to understand their current situation.

Accordingly, Bhutanese were taught not only macro-concepts such as the importance of relationships between employers, the resettlement agency, and the refugee community, but also minutiae such as the sensitivity of many native-born Americans to strong smells and standard workplace safety regulations. Resettlement agency employment specialists explained employers' cost-benefit analyses, indicating that employers may cease to work with the resettlement agency and the Bhutanese population if individuals quit without communication, and the expectation that individuals stay at least three to six months, as employers initially had to invest a lot in training employees. This theoretical framework and mapping of emphases flowed into the theory of change developed, thereby examining the interactions between the resettlement agency, refugees, and employers.

Theory of change (logic model)

In observing program delivery, the interaction between different individuals and entities was examined and the following logic model was developed. From this logic model, one can reexamine approaches and begin to monitor service delivery.

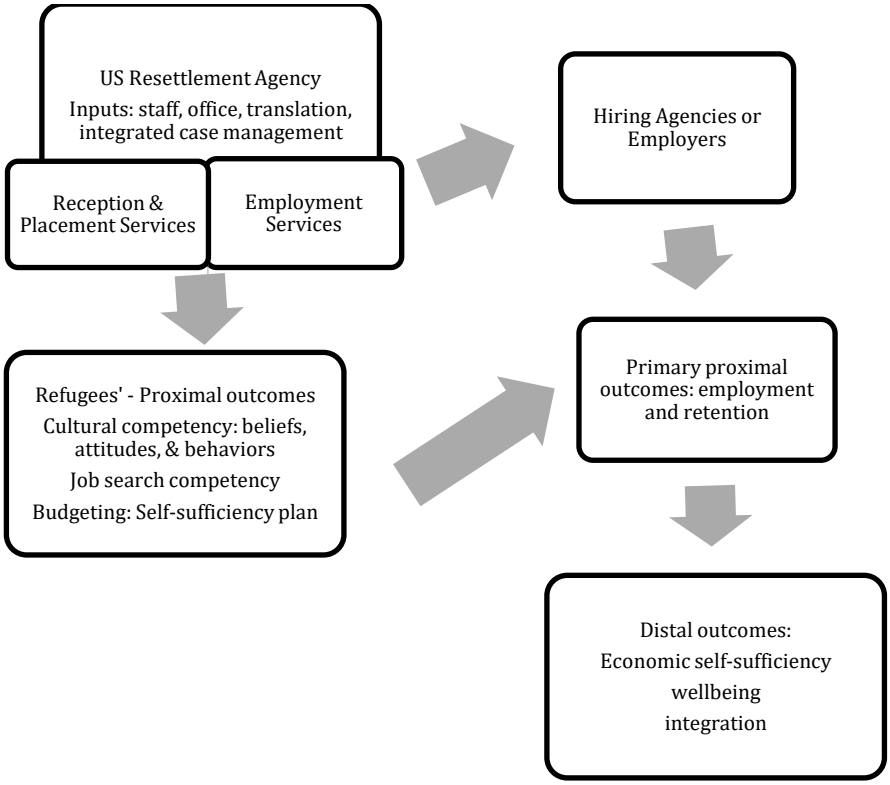


Figure 13: Simple logic model highlighting different actors and outcomes[24]

The agencies roughly split their workers into those involved in reception and placement services (e.g. housing, cultural orientations, health appointments) and employment services (e.g. employment orientation, job search, interviews). However, these entities reinforced the same ideas, such as cultural competency in understanding the US system. The employment services team also communicated with hiring agencies and employers and sought to connect the employers and agencies with refugees in hopes of achieving the primary proximal outcomes of employment and retention. The proximal outcomes were planned to lead to distal outcomes of economic self-sufficiency, wellbeing, and integration. Rather than providing detail of all services and how they map onto the federal service requirements, three overarching findings are presented.

[24] Potential mediators: age, gender, ethnic group; moderators: English and education levels

1: Separating employers and refugees

Firstly, both agencies separately focused on changing the beliefs and behaviors of potential employers or hiring agencies as well as of the refugee community. Neither agency had active forums where community members and employers were brought together before the hiring process or a time where potential employers came in to discuss job and self-sufficiency skills and cultural competency with refugees. Although this could be viewed negatively, it also enabled resettlement agency staff to interact as the 'broker', communicating for refugees while initial proximal outcomes of cultural competency and job search competency were still being developed. Additionally, many staff in both resettlement agencies had refugee and immigrant backgrounds, including as resettled Bhutanese refugees; this personal experience helped them understand the perspectives of the refugees. Employment staff spoke of the importance of their ongoing relationships with employers to assist when issues arose to help maintain employment.

Although it seemed that the standard modus operandi was resettlement agency staff acting as 'brokers' and trusted contacts, other arrangements within these agencies had previously been made. In the past, some employers held initial explanatory sessions with the refugee population, and certain employers preferred to communicate directly with the potential refugee employees. One employment specialist commented that some employers might have been put off by a greater fanfare or 'special treatment' for refugees. Refugees were encouraged to use their own skills and networks to find employment, bypassing agencies' employer contacts and either directly going to employers or using

friends or family members as intermediaries. Future research could focus on which relationships were best for obtaining and maintaining employment.

2: Leap from proximal to distal outcomes

Secondly, there appears to be a gap in the logic model, which assumed that the primary proximal outcome of employment and retention would lead to broader distal outcomes. This leap may be attributed to the structure of the resettlement system rather than to the agencies themselves. Main funding streams focused on refugees' employment in their initial months after arrival and assumed they would progress to economic self-sufficiency, wellbeing, and integration as time passed or be able to access mainstream services as needed. Although both agencies offered referrals and help with upgrading or finding second employment as resources permitted, one agency provided more *ad hoc* help for wellbeing, self-sufficiency, and integration. This agency supported BCAP, offered weekly neighborhood office hours with paperwork and other assistance in Nepali, and provided emergency case management for specific cases long after funds and contractual obligations for that family had expired. The other agency offered 'bonus checks' for the early employment of those in their Matching Grant employment program, hoping that quicker proximal outcomes and extra cash would lead to quicker distal outcomes. The question for an agency over which levels to target – federal policies, community norms, interpersonal interactions, or other levels, and in what timeframe - relates to nuanced theories of change.

3: Little attempt to directly change macro-policies for receiving communities

Most of the agencies' employment staff time was spent directly with refugees and paperwork. Staff focused on providing resources and targeting changes to attitudes, beliefs, and behaviors through group workshops and one-

on-one training. Agency staff relied on their national resettlement agencies (Volags) to focus on changing macro federal polities and broader American norms about refugees. In selected instances, there was support for events to celebrate community diversity as well as outreach to city councilmen, police, or non-profit workers, which were viewed as representative of the broader community.

Despite the lack of direct attempts to change federal policies, there was consensus on the need to change macro-policy, particularly the mainstream governmental self-sufficiency program, 'Temporary Assistance for Needy Families' (TANF), commonly called 'welfare'. At one resettlement agency, a job placement specialist had 'around 85 clients' receiving welfare cash, for whom she was helping to navigate the welfare system. She said that 'they give us less money per client, but expect us to have better outcomes' compared to agencies working with non-refugee clients.

Adult TANF recipients must attend a certain number of hours per week of allowed activities, generally 20-35 hours depending on family composition. Although one year of vocational English as a Second Language (ESL) is permitted to count towards these hours, generally fewer ESL hours per week are offered than the required hours. This means that refugees must supplement these hours with additional official hours. Locations offering permitted activities are not equipped to assist individuals with low levels of English, so some refugees may attend job search sessions or other activities where they understand little of the discussions. Furthermore, they must switch activities every four weeks to retain

TANF eligibility if they are not enrolled in their year of ESL class. An employment specialist commented, '…with the job search, it's just kind of a farce; it's keeping track of the paperwork. They want to see them slip up so they can close cash. And, the attitude is well, tough, the clients need to do that [even if it doesn't fit them].' Despite dissatisfaction with these and other programming requirements, as well as levels of federal and state support, no attempt to change macro policies by the agencies was observed. This lack of change was despite their contact with their national agencies, which carry out some information campaigns and lobbying.

This research corroborated recent reports highlighting the potential for US government and resettlement agencies to place greater emphasis on community consultation (Nezer, 2013; United States Government Accountability Office, 2012). There were collaborative forums between different refugee-serving agencies, but broad outreach to change the attitudes and beliefs of the general community was not part of the key logic model. Both agencies had *ad hoc* outreach to employers or other entities as conflict arose, and one agency was more adroit at using the media to highlight refugee employment assistance and needs. This same agency received a contract to train teachers in local schools about refugees through a program that worked to change a micro-community's cultural attitudes, with positive post-intervention evaluations by the teachers. Both agencies viewed their programs as holistic, and considered *all* programming to lead to greater acculturation, which in turn allowed for improved economic self-sufficiency and wellbeing. However, individuals in Pittsburgh with whom the researcher spoke, including in the neighborhoods

where the Bhutanese were densely concentrated, had no idea that there were any Bhutanese refugees in Pittsburgh, let alone their strengths, the challenges they faced, or their history. This reflects the wider gap of communications between refugees and the wider community on the intermediate level of the ecological model.

The acknowledgement of the two-way nature of resettlement, where both receiving and refugee communities play an integral role, is becoming more salient nationally and locally, as visible public anti-refugee sentiment and city and state-wide efforts to restrict resettlement rises in locations such as Georgia, New Hampshire, Massachusetts, and Tennessee (Goonan, 2013; Nezer, 2013). The US Office of Refugee Resettlement funded 'Welcoming America' in 2012 to support refugee resettlement community engagement. Welcoming America brands itself as a collaborative that promotes mutual respect and cooperation between native- and foreign-born Americans. Additionally, the 'Linking Communities Project: Creating Welcome for Refugees' pilot project was recently launched in Pennsylvania and Ohio for 'building and supporting capacity at the national and local levels to generate and maintain broad-based commitment to resettlement in local communities' (HIAS, 2013). These efforts will affect agencies' work in Pittsburgh and may increase the welcome and community support for Bhutanese refugees, particularly for the large numbers in Pennsylvania and Ohio.

Overall picture for the design of employment services

Employment services for resettled refugees have been criticized as often being 'dependency-based' and 'oppressive' (Grigsby, 2013). However, the agencies' work revealed itself to be heartfelt and nuanced, with resettlement caseworkers working as a 'pivotal link' to initiate refugees 'into the societal processes and networks within which they take up new roles, and exercise the citizen's repertoire of rights and duties in the "new" social context', as desired in anti-oppressive practice in the labor market programs for resettled refugees (Valtonen, 2001, p. 959). There was a false dichotomy in the role resettlement agency staff played as being both friend and teacher, advocate and authority, doing for refugees and making refugees do for themselves. All the staff observed acted in both roles and many struggled with the balancing point when being involved became too much.

The theory of change in Pittsburgh revealed an employment services design that echoed legislative requirements to promote economic independence and 'to achieve economic self-sufficiency among refugees as quickly as possible' (*The Refugee Act of 1980*). The delivery of these employment services, as discussed in the next section, was decidedly practical. For example, agency staff held meetings and had detailed discussions to decide, based on specific demographics like family size, physical health, and mental health, which funding stream would offer families the best chance of paying bills before their funding ran out. In both focus groups, without prompting, Bhutanese refugee individuals stated that they had nothing negative to say about the resettlement agencies' services. Individuals suggested macro ways in which resettlement could be improved,

such as allowing for longer support to allow for more education, training, finding jobs that matched and 'allow[ed] that life to sustain', and greater support for occupational mobility. Services were constrained by funding and administrative requirements that influenced the theory of change. They were also constrained through local variables such as employment opportunities as well as by individual characteristics of Bhutanese refugees and resettlement agency staff.

Description of resettlement employment programs

Program delivery is summarized in this section using the template for intervention description and replication (TIDieR) checklist, analysis of the description, and through discussion of the key factors reported by resettlement agencies. The delivery of employment programming was initially analyzed through grounded-theory based analysis of the same research documentation as the theory of change: detailed documentation, interviews, and participant observation of the rote processes occurring on a day-to-day basis in resettlement agencies. This data and analysis of key activities were then organized into the TIDieR checklist, the latest guidelines for intervention reporting. The TIDieR checklist is an extension of the CONSORT 2010 and the SPIRIT 2013 statements (Hoffmann et al., 2014) and aims to be applicable across all evaluative designs. The focus of this sub-section is what the resettlement agencies were doing in practice and what they reported rather than the theory behind the work or what they viewed as important.

Completed Template for Intervention Description and Replication (TIDieR)

BRIEF NAME
1. Provide the name or a phrase that describes the intervention.

Economic self-sufficiency and employment services for resettled refugees at local resettlement agencies

WHY
2. Describe any rationale, theory, or goal of the elements essential to the intervention.

The goals for the programming are outlined in the 1980 Refugee Act (Sec. 411, 8 U.S.C. 1521). The intentions are as follows: '(i) employable refugees should be placed on jobs as soon as possible after their arrival in the United States; (ii) social service funds should be focused on employment-related services, English-as-a-second-language training (in non-work hours where possible), and case-management services; and (iii) local voluntary agency activities should be conducted in close cooperation and advance consultation with State and local governments.'

There were no prescribed theories of change. In practice, the programming aimed to improve refugees' 1) cultural competency, 2) job search competency, and 3) budgeting to lead to the primarily proximal outcome of employment and retention and distal outcomes of a) economic self-sufficiency, b) wellbeing, and c) integration. This is described in the previous section on theory of change.

WHAT
3. Materials: Describe any physical or informational materials used in the intervention, including those provided to participants or used in intervention delivery or in training of intervention providers. Provide information on where the materials can be accessed (e.g. online appendix, URL).

Materials differed between staff personnel but included:

1. A training schedule for new staff ensuring that staff had read and understood national guidelines, agency policies, ethics and confidentiality, and had shadowed current staff.
2. A guide for participants with basic overviews of the services and a local area social service directory.
3. A PowerPoint or guide on job readiness for staff for use with participants
4. A case file with:
    - An employment document checklist
    - Client rights and responsibilities
    - Intake assessment and employment plan
    - Family plan for self-sufficiency
    - Monthly budget (both a pre-budget of what they need to earn and a post-budget of what they are earning)
    - Employment verification form
    - Copy of pay stub

- Employment placement form
- I-94, Employment Authorization Document (EAD) or Green Card
- Copies of State identifications/drivers' licenses (if available)
- Grievance policy
- Client resume (degrees and certificates if available)

And either an additional file with:

A Refugee Social Services programming:

- Refugee social services checklist
- Interpretation/translation document
- Client confidentially
- Authorization for release of information
- Authorization of release of social security number
- Declaration of status
- Responsibility agreement
- For TANF clients (only):
    - Activity attendance forms
    - Weekly summer sheets
    - Weekly job search log

Or an additional file with:

A Matching Grant (MG) program form file including:

- Match enrollment form
- Welfare letter
- Match grant letter of agreement
- Employment retention log
- Notice of self-sufficiency
- Volunteer log and in-kind receipts

The exact materials differed between refugee agencies and were not found digitally or centrally in any documents such as a manual. Further information can be obtained from the Pittsburgh JF&CS and NAMS refugee resettlement divisions.

4. Procedures: Describe each of the procedures, activities, and/or processes used in the intervention, including any enabling or support activities.

Again, the intervention procedures were not written in a manual, but the checklist of case file documents provided rough guidelines on procedures. Primary procedures included:

- Cultural orientations at the client's home, in the community about the bus system, and in the resettlement office.
- Orientations for employment and job readiness in the resettlement office. These served as lessons of sort. Guided interview practice may take place, but it was rarely observed as a component.
- Enrollment in an English as a Second Language (ESL) course.
- Appointments with necessary health and administration offices (e.g. doctor's appointment, tuberculosis clinic, health specialist appointments as needed, social security office, welfare office).

- One-on-one employment meetings including an independent job search by the refugee participant and the caseworker. This work served as employment counseling.

WHO PROVIDED

5. For each category of intervention provider (e.g. psychologist, nursing assistant), describe their expertise, background and any specific training given.

Local resettlement agency employees provided the services. They were supported by a broader social service agency (e.g. legal advice, administrative assistance) and a national voluntary agency for resettlement (e.g. resources, national campaigning).
Intervention providers included:

- A refugee resettlement director
- Job developers/employment specialists
- Case managers assisting with reception and placement as well as basic non-employment tasks
- Interns and volunteers often doing *ad hoc* tasks

Resettlement agency staff members who provided the intervention held at least a bachelor's degree. On-the-job training was provided, but many had prior experience working with immigrant and refugee populations or were an immigrant or former refugee themselves. Interns were often studying for a Masters degree in Social Work or in Public Administration.

HOW

6. Describe the modes of delivery (e.g. face-to-face or by some other mechanism, such as internet or telephone) of the intervention and whether it was provided individually or in a group.

The intervention included a mix of one-on-one meetings between refugees and their employment caseworkers and non-employment case managers, and group meetings for employment orientation, cultural and program orientations, and English language training. Phone contact was often used by caseworkers and case managers to organize meetings, address concerns, and check in on participants.

WHERE

7. Describe the type(s) of location(s) where the intervention occurred, including any necessary infrastructure or relevant features.

Employment sessions took place at a resettlement agency's office. The resettlement staff also transported refugees to interviews as necessary or brought employers into the office. Additional help with integration and economic self-sufficiency was provided in the home and in the community by reception

and placement staff. English help was offered through community-based organizations at other locations.

WHEN and HOW MUCH

8. Describe the number of times the intervention was delivered and over what period of time including the number of sessions, their schedule, and their duration, intensity or dose.

There was no prescribed number or duration of sessions or intensity. Individuals were often helped as needed and possible. The program implementation was conceptualized in a rough, overlapping three-step process, summarized the in bullet points below.

'Step 1' – Refugee Reception & Placement

- From day 0 to 30-90 days
- Met at the airport, provided with a furnished apartment, hot food, initial cash, and bus pass or tickets
- Rent paid for the first 1-4 months
- Completed:
  - Home orientation and checks
  - Cultural orientation
  - Tuberculosis checks
  - Vaccinations and school enrollment for children
  - Official paperwork including state IDs
- Linked to welfare, social security, food stamps, and broader services
- Scheduled for medical appointments (first appointments may be later)

'Step 2' - Employment Services

- From 30 to 120-180 days after arrival
- Began with intake into employment program
- Attended job readiness training
  - Cultural concepts: timeliness, hygiene, workplace safety
  - How job search works in the US: Importance of agency relations with employers as well as using family and ethnic group connections.
  - How to fill out an application and interview
- Enrolled in English classes (assumption attending)
- Completed:
  - Employability plan
  - Family plan for self-sufficiency
  - Resume
  - Applications
  - Interviews

'Step 3' - Follow-up and Referrals

- Completed:
  - Post-employment self-sufficiency plan
  - Employment verification, placement form, pay stub

- Sometimes follow-up with employer at 2 weeks, 30, 60, 90, 180 days
- Case closed if there was job retention at 180 days
- Sometimes participated in job upgrades or re-referrals
- Referred for:
  - Longer case management, welfare or other services
  - 'Green Card' after 1 year
  - Citizenship after 5 years

TAILORING

9. If the intervention was planned to be personalized, titrated or adapted, then describe what, why, when, and how.

The language and techniques used as well as the duration and intensity of financial and casework assistance were planned to be tailored to each individual and family. Tailoring took place based on staff preferences, staff resources, and refugee characteristics. Cash assistance depended on family size. Although the employment services had many of the same elements and were sometimes delivered very similarly, there were three different 'employment programs.' Spots in these employment programs were matched to refugees to tailor to particular needs and strengths. In particular, there was a limited number of Matching Grant Program places, and future places were perceived as contingent on outcomes. This resulted in resettlement agencies attempting to place those individuals most likely to find a job within four months in the Matching Grant Program and, similarly, those large families more likely to survive off of stipulated amount of welfare cash in the Refugee Social Services or Targeted Assistance Grant Employment Services (delivered as the same employment program). Resettlement staff members discussed family cases in detail to decide which family would end up in which employment program. Exact tailoring was not prescribed other than for the provision of in-person interpretation for any individual who did not speak English well.

MODIFICATIONS

10. If the intervention was modified during the course of the study, describe the changes (what, why, when, and how).

The overall structure of the intervention was not modified over the course of the study, but details of the intervention were constantly in flux depending on all contexts. For example, staff members changed over time as did refugee arrivals, altering the ability to deliver individualized tailoring. The strength of the job market and employment connections affected the ability of refugee clients to obtain a job and achieve self-sufficiency as well as the duration of the time to reach and maintain employment. It was commonly believed that many jobs obtained in December were short-term for the Christmas season and that the labor market was much more difficult in January through March. The items presented in the rest of this TIDieR were the consistent components.

HOW WELL

11. *Planned: If intervention adherence or fidelity was assessed, describe how and by whom, and if any strategies were used to maintain or improve fidelity, describe them.*

Fidelity was indicated, but not assessed, by the completion of case files and official paperwork per regulations. These files included process implementation indicators such as employability plans, family plans for self-sufficiency, employment verification forms, pay stubs, employment placement forms, state IDs, client resumes, and case notes documenting when staff saw the refugee clients and what transpired, and, for TANF clients, activity attendance forms and job search logs.[25] At one of the agencies, staff met monthly, per regulation, to review case files for all clients at their six-month, one-year, 18-month, 2-year, 3-year, or 5-year mark of being resettled.

Both agencies also kept internal documents (on a shared folder in an internal system or on a username and password googledoc) that monitored basic information about clients, which employment program they were enrolled in, when they attended certain appointments such as medical appointments, and when they obtained and retained employment.

12. Actual: If intervention adherence or fidelity was assessed, describe the extent to which the intervention was delivered as planned.

Intervention fidelity was not assessed. In observation, it was common for caseworkers and employment specialists to be behind on paperwork and fill it out days or weeks after the events. Employment specialists often did not follow-up or manage to reach their employed refugee clients at the relevant time periods. For example, some employment specialists remarked that it was detrimental to have an outside person call and inquire about individuals at their workplaces, especially if they had found the job on their own. Likewise, employment caseworkers would at times fill out the post-employment self-sufficiency plans with their own estimates without the refugee client present. This often occurred if they felt that client was prudent and would not need a post-employment self-sufficiency plan, and thus considered it a waste of time or even condescending to complete it with them. Even with refugee participants present, many of the forms were filled out in a cursory manner depending on time constraints and the assessment of the staff regarding whether they viewed that paperwork as helpful. During the monthly case file reviews, not all clients were well remembered, and there was little or nothing to add to some files.

[25] A copy of the blank documents in a case file was obtained for the records.

Analysis of program implementation

The TIDieR was helpful for defining the intervention and examining how it was delivered. Even with a checklist, this conceptualization of programming was imprecise due to the flexibility of the intervention. Additionally, the aim of the research was not to look at fidelity or process measures, but to look at the core of the program in action. Although the details of how these program steps were carried out varied between the resettlement agencies, both included the information provided in the TIDieR, including the three main steps in item 8 (when and how much), which were also mandated by funding requirements. In coding, the work fell into five overlapping categories: basic needs, cultural competency, connection with resources, economic self-sufficiency & employment, and administration. This mapped roughly onto the original categorization made in Chapter 1 from the literature of: employment services and care/social services including legal paperwork, access to public services, and cultural orientation. Emphasis on the categories was context-specific, including the day, task, and people observed.

Additionally, within resettlement agencies, the steps would be carried out with different timeframes and in different orders depending on staffing constraints, the refugee themselves, and the refugee individual-staff dynamic. Most of these program steps were recorded in a case file for the family. In reality, much of the time was spent maintaining case files and completing official paperwork per regulations. From a process measures standpoint, this also ensured that the key steps were completed, even with adaptation and variation. The indicators of implementation were often considered rote and not helpful. That employment

specialists often did not follow-up or manage to reach their employed refugee clients at the relevant time periods is indicative of the low priority of case files and the negative opinions of the usefulness of the paperwork.

One resettlement agency employee spoke of the federal government's positive commitment to keep refugee resettlement, but stated that to improve the process they should '…start with the paperwork. Like the R&P [reception and placement] paperwork is so redundant. I don't know why someone would do that, let's see: core service checklist, then you have the case logs, you have like three different documents with the date and what happened. You know, three different things that you require people to do with exactly the same information. That's just one example. I think they need to review the paperwork and all that. I think it's just too much bureaucracy.' The same employee also spoke about the absence of data on clients after six months, as the resources were not there to follow-up.

Reporting from the agency

The following describes the reporting document for one resettlement agency for their 'clients' on matching grant and state-funded programs, although they are similar for both agencies. Both agencies also referred to the resettled refugees they served as clients.

Matching grant reporting

The majority of these clients were enrolled in the Matching Grant Program, with the key outcome difference being expected quicker self-sufficiency than in any other program. One agency tri-annually reported the

following information on the cases and individuals they dealt with to the national Volag:

1. Placed into the program in the past four-months
2. Reaching their 120th day during the reporting period
3. Of the clients qualifying for 2, the number who
    - were economically self-sufficient on the 120th day,
    - the number not yet economically self-sufficient but remaining in the program beyond the 120th day
    - the number of clients time expired and those who anticipate receiving public cash assistance
    - the number dropped out prior to the 120th day and their reasons
4. Outcomes on employable adults at the 120th day including the number that entered part-time and full-time work, those average hourly wages, and the numbered entered in employment with health benefits available.
5. The number of clients who reached self-sufficiency at the 120th day who were still self-sufficient at 180th day after arrival
6. Of those who remained in the program at the 120th day, their self-sufficiency on the 180th day
7. A combination of the earlier numbers to calculate the percent of individuals self-sufficient at 180th day.

State funded programming (TAG & RSS)

The state of Pennsylvania's Bureau of Program Evaluation used a Commonwealth Workforce Development System, which was in the process of changing, but reported:

- The referral numbers for Temporary Assistance for Needy Families, and
- The time and program attendance for employable adults in TANF.

For those accessing public funds routed through the Allegheny County Department of Public Welfare the following information was available in their Client Information System (CIS), which the agency monitored despite not collating any of this information themselves:

- Family benefits information
- Cash termination date
- Benefit amounts
- Benefit reduction dates

Internally, the agency also completed monthly reports for RSS and TAG clients for refugee cash, non-cash, and TANF cases and trimester reports for RSS and TAG based on state specific spreadsheets that are modified on a quarterly basis.

The reporting revealed that the outcomes and much of the activities were well-monitored, but little was recorded about the way in which individuals interacted, what levels of change resettlement agencies were trying to affect, or the path of the relationships to affect change.

Viewpoints on program implementation

Although assessing the effectiveness of the employment programs for Bhutanese refugees, implementation of the programming, or the viewpoints about the services were not primary research questions, viewpoints of program implementation emerged from different perspectives, including from: the clients the program was serving, those delivering the program, as well as others. It would be remiss to examine the programming for resettled refugees and not include these viewpoints, as they serve to richly contextualize the environment in which this programming occurred.

Refugee viewpoints on program implementation

The resettled refugees were reticent to discuss the program implementation. Before the first focus group, when explaining the research project, individuals stated that they did not want to say bad things about the resettlement agencies and that they thought the resettlement agencies were doing a good job. Responding to this statement, there were head nods to the side, a cultural movement of agreement. Two individuals said the resettlement

agencies were doing good work, and there was general participant indication of approval. One individual followed his statement by saying that the problem was that appointments take two months: 'That might be a big problem.'

When asked generally about the main role of the resettlement agency, individuals responded with assistance in finding employment. One woman talked about how pre-departure resettlement information in the refugee camp was clear that they would work when resettled. However, after arriving in Idaho, they could not find work, so instead, after eight months, they moved to Pittsburgh. When asked whether agencies had helped them maintain or move up in a job, there was a mixed response.

Viewpoints from a satisfaction survey

One resettlement agency, JF&CS, sends yearly satisfaction surveys with a self-addressed, stamped return envelope to clients. In the most recently available survey (sent in Nepali to Bhutanese refugees), 20 of 80 families responded. Their translated responses were very positive in the five rated statements about helpfulness of JF&CS staff, being treated with respect by JF&CS staff, services overall, help in starting a new life, and being connected to other services.[26] Responses may have been affected by the fact there were being requested from the agency from which refugees continued to desire assistance.

[26] In response to 'I was treated with respect by JF&CS staff', 19 responded 'often', 0 responded 'sometimes', and 1 responded 'rarely', although the one rarely response did not have negative comments, so this may have been mistakenly checked.
- In response to 'I feel that JF&CS staff were helpful', 19 responded 'often' and 1 responded 'sometimes', and 0 responded 'rarely'.
- In response to, 'Overall, how would you rate the services that you receive', 17 responded 'good', 3 responded 'average', and 0 responded 'poor'.
- In response to 'how helpful was JF&CS in helping me start my new life in America', 15 picked 'a lot', 5 picked 'somewhat', at 0 picked 'a little'.

In narrative responses, individuals liked medical services a lot, and the whole array of services including welfare services and assistance for employment. They suggested improving a broad array of items. These included extended services for six months, sharing information about opportunities, help finding better jobs, help applying for social security income, providing winter jackets, and having a closer office.

When asked for any other suggestions or comments, many expressed satisfaction or continual improvement in their current work while others had more detailed suggestions, including the ones below (typed sic):

- 'I want to suggest, if this agency helps us get job in a highly paid company it would be great.'
- 'You help to find a job, but if that job is not full time one, then this is what types of help?'
- 'Find the job suitable to the client's qualification, and that should be long lasting and let the income cover the rental cost and other utilities bills. The house keeping and the laundry jobs are not full time and there are problems. Rest, all is well.'
- 'From my personal view point, I don't see anything bad regarding the services of JF&CS. I am very thankful to JF&CS. I don't have any specific comment, still I say it would be better if you could remember us once in a month; if possible do home visit once in a month.'
- 'It would be good for us if JF&CS helps us in getting state ID, driver license, citizenship in the days to come. Utility reducing, making involve in certain programmes like CAP etc as soon as possible so that we can save cash assistance in the first few months. WE are happy as JF&CS shows the way to walk in various field [sic]. Be with us, make us see and live in America by our own foot.'

Overall, the responses expressed satisfaction in the resettlement services and room for improvement in achieving economic self-sufficiency, particularly through the type of jobs found. Because of the resistance to speak about the

- In response to 'how helpful was JF&CS in connecting me to services, for example, welfare, healthcare, school', 19 responded 'a lot', 1 responded 'somewhat', and 0 responded 'a little'.

resettlement agencies work, questions did not directly ask about resettlement agencies or probe this further to respect the refugees' wishes and elicit their views on other issues central to the research questions. However, throughout the research, refugees expressed their struggles and thoughts on how the federal resettlement structure could be improved. The measures of economic self-sufficiency and wellbeing presented in the next chapter show some of the challenges and successes.

Practitioner viewpoints on program implementation

Practitioners frequently expressed frustration regarding limited funding and resources as well as exhaustion from the effort they put into their work. Many felt that from an outcome perspective they were falling short even if they were able to meet targeted process measures, complete necessary paperwork, and have positive outcomes on paper. The employment programming at JF&CS had been held up as an ideal nationally. The lead of the employment team had traveled domestically to speak about the success of their work, but she would have daily struggles with refugees who were somehow in crisis mode, such as arriving at the resettlement agency without possessing the resources to return on the bus. At a meeting of matching grant employment specialists for USCRI held at NAMS, employment specialists from around the country shared practices and were able to see the context in Pittsburgh, which had led to relatively positive official outcomes. In a meeting debrief, people commented that it had served as a therapy session of sorts, with one of the Pittsburgh resettlement agency staff members saying that, 'It's reassuring and frustrating that we all face the same challenges.'

Resettlement agency staff particularly wished they could change program implementation structurally: for extended assistance, greater financial resources, and greater flexibility. The head of one of the resettlement agencies summed it up with, 'There are many things I would change.' There was a general atmosphere of controlled chaos at both resettlement agencies as employees worked to meet structural requirements and deal with individual personalities and needs. During the research period, the Department of State put a stopgap measure on the number of new arrivals to Pittsburgh per resettlement agencies' requests as they felt that they did not have the capacity or resources to adequately deal with an additional caseload. Amongst the employment specialists at one agency, a consensus reached at a meeting was that the issue was not with the caseload, but the implementation and ability to follow through with clients and stated programming aims. The head of the other resettlement agency said that, 'It would be nice to extend assistance to clients, and make sure that it's really helping the clients.'

On a broader scale, the viewpoints of practitioners on program implementation has been well explored in policy literature and academic literature, including a recent dissertation by Dr. Jenny Mincin, who surveyed International Rescue Committee (IRC) employees about perceptions of self-sufficiency and programming in the resettlement program (Mincin, 2012). The IRC is a national Volag and is shifting towards a 'strengths-based approach.' Despite some serious methodological concerns including the validity of her questions and the response rate (57%), Mincin had a relative large sample size of 200 and closely examined practitioners' perspectives. She found that employees rated the following factors

in their influence towards refugees' achievement of self-sufficiency (scores from most influential to least influential): job placement, schooling for children, budget management, English proficiency, transportation orientation, job skills training, financial literacy, health services access, cultural adjustment, mental health services access, expansion of social network, safe and sanitary housing, adequate nutrition, adjusting to immigration status, and professional recertification. On a scale from 1 to 4, from 'does not contribute' to 'highly contributes', the averages were between 3 to 4 for every single item, supporting the finding in this study that economic self-sufficiency does not follow a single linear pathway or reach a sole target area. Likewise, she found that employees believed Reception and Placement and Matching Grant were effective in helping clients access services and achieve some integration with foci that helped lead to self-sufficiency. Matching Grant was viewed as most effective in leading to job placement and job skills training.

The interconnectedness of services that contribute to economic self-sufficiency, wellbeing, and integration was thus viewed as important by practitioners in this research, by practitioners in other literature, and in the theory of change as the basis of practitioner's actions. Despite resettlement agency employees' beliefs in the power of their work to help lead to greater economic self-sufficiency and wellbeing, the employees also believed that the resettlement program could be improved, particularly for 'difficult cases' and long-term outcomes.

Other viewpoints on program implementation

Likewise, other viewpoints on refugee economic self-sufficiency programming echoed those of refugees and resettlement agency employees: for those who were aware of the program, many felt that program staff was doing a good job, yet room for improvement existed. As discussed in Chapter 1, the policy and academic literature provides mixed views on refugee resettlement programming, including how it often fails to meet the basic needs of the refugees it is meant to assist (Nezer, 2013; Sebelius, 2010; US Senate, Committee on Foreign Relations, 2010). Locally, many of the community members consulted in the course of this research had no idea there was refugee resettlement in Pittsburgh and thus had no views on their programming; in general, there was neither strong media presence for or against the programs. From the researcher's previous experience completing refugee resettlement casework, other services in Pittsburgh (e.g. a tuberculosis clinic, doctors' offices) often placed an extra burden on individuals served by a resettlement agency as they viewed it as the resettlement agency's responsibility to provide interpretation and ensure the refugees were doing well.

Likewise, employers felt constrained by their own business needs and relationships in Pittsburgh. Two employers expressed that it was not the fault of refugees, but company regulations made it difficult to hire refugees, particularly with incomplete education and employment histories. One employer stated that the resettlement agencies were doing the best they could with their resources. Another hiring agent said that it was great working with the resettlement agency and that he appreciated being able to call the employment specialist and be

provided whatever number of workers he wanted instead of going all over town to recruit employees himself. He also thought the resettled refugees made better workers than their typical workforce. He commented that 'they're good workers', and they 'rarely call off' as opposed to 'other people [who] say they want to work, but don't. They [the refugees] don't know the bus, but that's easy to teach them.' For him, the refugee employment programming worked well to meet his needs.

Overall, however, other employers did not express such satisfaction with their relationship with resettlement agency staff and refugees. In phone conversations, observations, and interviews, it was learned that some employers were unhappy about the attendance record, work ethic, English level, and/or work history of the refugees that the agencies had connected them to and wished the resettlement program had helped resolve some of these issues first. One workforce development specialist for an employer said that 'I personally think they need more time', and 90 days was not enough time to learn a new culture and acculturation, including learning colloquialisms and other ways to communicate. Employers' viewpoints on the refugee resettlement program were perhaps best expressed by whether they hired or decided not to hire the refugee clients and by whether those clients continued to work there or were fired. These actions, which all occurred, demonstrated the mixed ability of the resettlement program to prepare refugees for the labor market.

Despite contacting major employers numerous times,[27] few were willing to speak to the researcher. Those interviewed wished to remain anonymous. This perhaps reflects more a concern about negative press over the employers' practices rather than a viewpoint on program implementation. Some of the employers were spoken about as having unpleasant workplace environments and/or hiring practices or possibly illegal working hours. All the employers who did not respond to interview requests were using Bhutanese refugees as low-paid labor for menial or difficult tasks. Despite concerns about employment, the employers who spoke with the researcher expressed satisfaction with the working relationship with the resettlement agencies and overall satisfaction with the refugees' hired. Many of the refugees likewise expressed satisfaction with their employment, particularly when compared to the situation in the refugee camp. The resettlement program thus helps provide a link between employers and employees, which can both be frustrating and helpful in meeting the demands of the economy and providing mutually beneficial relationships.

Conclusion

The economic self-sufficiency service provision for resettled refugees in Pittsburgh does seem to not fall into categories of deficient or sufficient. Rather, the service provision appears to be imbued with broad ideas such as changing cultural norms and increasing tangible knowledge about the US job search and interview process, but also shows variation in results based on individual

[27] The majority of the Bhutanese refugees were employed by four employers: a hiring agency that supplied hotels with cleaners, a food packaging company, a casino (primarily as cleaners), or a packaging moving company.

refugees, individual service providers, labor markets, and neighborhood resources.

The onus on improving service delivery and outcomes for refugees does not appear to fall squarely on the service providers, or on the government, or on the refugee community. Service providers may improve their services more broadly by reaching out to local communities and by lobbying for federal changes. Just as a Bhutanese refugee said that 'governments should understand the nature of refugees arriving', so too should the broader city community, including employers. In doing so, governments, receiving communities, refugee communities, and individual refugees can communicate and reach out to understand each other in the concentric spheres of influence present within the theoretical framework discussed. Understanding the employment services and perspectives of economic self-sufficiency and wellbeing for Bhutanese refugees in Pittsburgh provides a means to examine not only the challenges and successes of this population and resettlement, but also national and international obligations towards resettled refugees.

Chapter 6. Describing the Economic Self-Sufficiency of Resettled Refugees

Introduction

This chapter explores the descriptive statistics and analyses for the Bhutanese resettled refugee population in Pittsburgh. It answers part one of the third research question regarding the state of refugee economic self-sufficiency for the Pittsburgh Bhutanese refugee population. As previously discussed in the methodological theory and the systematic review, economic self-sufficiency is a multi-dimensional and contested term. First, in this chapter, a description of the sample used to answer the question is provided, including its representativeness and generalizability. Then, the dimensions of economic self-sufficiency for resettled refugees in the sample are explored, provided with context, and compared to other data when available. Next, the wellbeing for resettled refugees is discussed, building on the importance of wellbeing highlighted in the literature review, systematic review, and logic model. Lastly, the researcher explores neighborhood-level descriptions and differentiation for the Bhutanese refugee population, a level of analysis that emerged as preeminent in grounded-theory analyses and was highlighted by Bronfenbrenner's theoretical framework. In essence, this chapter uses an epidemiological perspective to look at the prevalence of the social science 'problems' of a lack of economic self-sufficiency and wellbeing for Bhutanese refugees in Pittsburgh.

Description of the sample

Representativeness

The sample includes 145 individuals. Each household had a 50% chance of an adult in that household being selected and each adult was selected at

random from adults in the household. Consequently, the household measures should be representative, but individual-level measurements may be less representative as individual characteristics may vary between households with many and few adult members. The flow chart below shows the results from the randomization and data collection process.

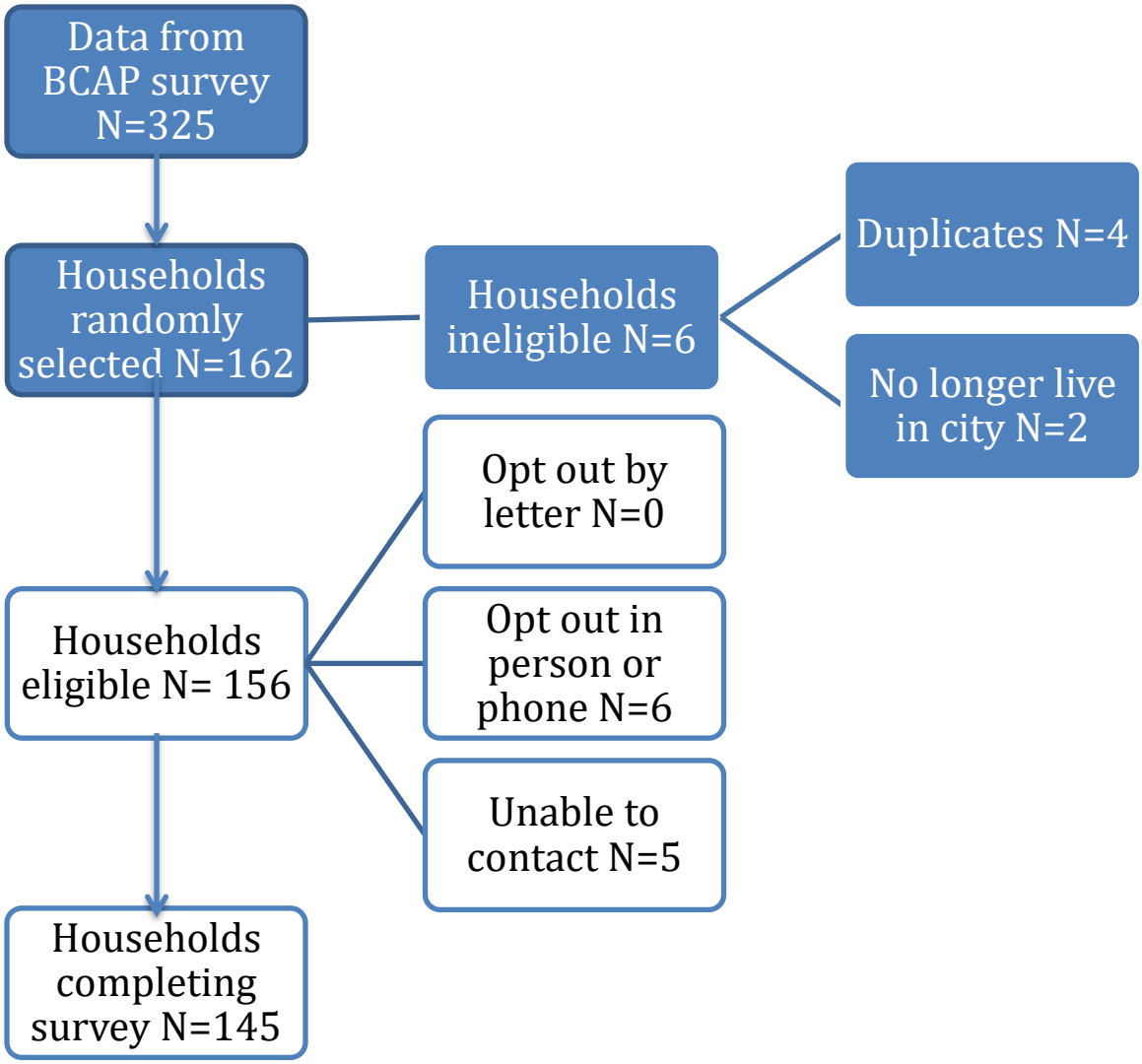


Figure 14: Flow chart of data collection

The response rate was 92.9%, with question item response rates ranging from 93.8% to 100%, with an average of 99.1%. The survey and item response rates

are high given the field and low-income population. The US Centre for Disease Control and Prevention (CDC) carried out the only other available survey with randomly-selected Bhutanese refugees in the US, which had a participation rate of 73% (Ao et al., 2012). Given the access to a large sampling frame and the high response rate, the descriptive statistics should be fairly representative.

Demographic comparisons to other sources

This data set is groundbreaking not only because it provides representative statistics that have not previously been measured for this population (i.e. Bhutanese refugees in Pittsburgh), but also because there are few existing statistics of any sort for resettled refugee populations, particularly Bhutanese refugees. The only source of comparison for the population sampled is BCAP census data whose refugee contact information was used as a launch to gather this data. However, the BCAP data includes few demographic variables and had a much higher item nonresponse.

The BCAP survey's main purpose was to better understand the population distribution, including age groups, for future programming needs. Exact details were not considered pertinent. A variety of individuals collected the data, with volunteers or elected BCAP leaders in most neighborhoods, rather than a central collection team or person ensuring uniform collection. This led to differences in the completion of the single page per household. Although their item response rate was fairly low, their population response rate was fairly high, and a worker for BCAP reported that only one or two households approached did not respond. The table below compares the gender composition and the original place of resettlement for respondents in this study and from the BCAP survey.

	From Data		From BCAP Data	
Item	N	Percent	N	Percent of respondents
Male	72	49.7%	646	51.6%
Female	73	50.3%	606	48.4%
Resettled originally in Pittsburgh	81	57.9%	198	69.0%
Resettled originally elsewhere in Pennsylvania	5	3.6%	10	3.5%
Resettled originally in other state	54	38.6%	79	27.5%

Table 4: Comparison of thesis and BCAP data

When compared to other Bhutanese refugee samples, the demographics from this thesis are also similar, as shown in Table 4. It is self-evident that the demographics of these samples would vary based upon their sampling technique, year of data collection, and sample frame (e.g. location subpopulation as well as factors such as all adults, whole population, or working adults). For example, the Bhutanese participants in this thesis complement the population of Bhutanese refugee studied by the research team lead by Liana Chase (Chase, 2012; Chase & Bhattarai, 2014; Chase, Welton-Mitchell, & Bhattarai, 2013). At the time that Chase was conducting research in the camps in Nepal, 'roughly 60,000 refugees had been resettled and 50,000 remained in the camps, the majority of whom were hoping to resettle' (Chase, Welton-Mitchell, & Bhattarai, 2013, p. 71). Shortly thereafter, the data were collected for this thesis, from those refugees resettled in or who moved to Pittsburgh, when roughly 80,000 Bhutanese had been resettled (Gurung, 2013). Certain populations may have been more likely to leave earlier, such as vulnerable persons in Nepal due to health or discrimination against minorities, or persons who put themselves forward for resettlement as they hold less hope of returning to Bhutan or integrating into society in Nepal. Qualitative research with resettled refugees

suggests that those who view resettlement as an opportunity and who are more highly educated, which was thought to be roughly collinear with caste, may be more likely to resettle earlier. Additionally, refugees are likely to congregate in urban areas due to commonalities such as family, religion, and caste, referred to by UNHCR and Chase as 'social group'.

	Percentage of sample:	Thesis data: random, N= 145	Ao et al., 2012: random, N=423 (participation rate=73%) in 4 US cities	Benson et al., 2012: convenience sample, N=112 Hindus in 1 US city	UNHCR, 2007: camp population	Chase et al., 2013: random, N=193 in Nepal
Gender	Male	49.7%	50.6% [sic]	61.8%	50.7%	46%
	Female	50.3%	52.2% [sic]	38.2%	49.3%	54%
Age	Mean (SD)	33.3 (10.7)	38.3	38 (15.4)	--	--
	Median (Range)	31 (18-64)	34 (18-83)	(18+)	--	(18+)
	18-59	95.9%	--	--	56.9%	83%
	Above 60	4.1%	--	--	6.6%	16%
Partnered	Partnered/ married	73.8%	71.2%	70.9%	--	--
Religion	Hindu	73.8%	72.3%	100.0%	60-70%	50%
	Buddhist	14.5%	--	--	20-25%	26%
	Christian	10.3%	--	--	2-3%	7%
	Kirat	0.7%	--	--	5-8%	14%
Caste	Brahmin	54.5%	--	--	--	16%
	Kshatriya	22.1%	--	--	--	16%
	Vaishya	18.6%	--	--	--	56%
	Sudra	4.8%	--	--	--	10% 'other'
Education	None	21.4%	35.0%	36.7%	25-30%	--
	Some elementary or high school	31.7%	combined with below	24.8%	--	--
	High school graduate	29.7%	51.0%	27.5%	--	--
	Some college or graduate	17.2%	--	11.0%	--	--
English level	None	11.7%	--	30.4%	65%	--
	Poor	33.8%	--	24.1%	--	--
	Good	31.0%	---	33.0%	--	--
	Very good/ excellent	23.4%	--	12.5%	--	--
Time in the US	Median time (range)	3.0 years (0.25-5)	1.8 years (0.2-5)	--	N/A	N/A
	0-6 months	1.4%	--	24.0%	N/A	N/A
	6 months-1 year	9.7%	--	37.5%	N/A	N/A
	1 year - 1.5 years	9.7%	--	19.2%	N/A	N/A
	Over 1.5 years	78.6%	--	18.3%	N/A	N/A
Work	Work now	66.2%	65% (reg. income)	29.1%	N/A	N/A

Table 5: Comparison of Bhutanese refugee samples

Additionally, resettlement and time alters the demographics of the refugee population. For example, resettlement may affect the spacing and number of children born as well as education levels, English levels, and conversions to particular religions.

Demographics as points of social differentiation

From the qualitative research, English level, education level, and physical health emerged as the three central ideas believed to predict or to act as mediators to explain employment and earnings. However, points of social differentiation were much broader and included persons with disabilities, age, newer versus older arrivals, gender, caste, and religion. The nature of these points of social differentiation and why they may explain or correlate with differential outcomes are explored in this chapter as descriptive and qualitative analyses (i.e. pre-regression analyses). Individual aspects of the demographics collected are explored in the next chapter for their predictive value.

English level

On a 1-4 English level scale ('very well' to 'none'), the average English level was 2.33 (SD=0.97). As shown above, 23.4% (n=34) reported they spoke English very well, 31.0% (n=45) reported they spoke English well, 33.8% (n=49) reported they spoke a little bit of English, and 11.7% (n=17) reported they cannot speak English. This is somewhat higher English levels than the population of Bhutanese refugees covered in Benson et al. (2012), which is not surprising considering the population in this survey would have been in the country longer and only included working-age adults. From the literature and analysis, English was a major theme for integration, wellbeing, and employment. One Bhutanese refugee directly said, 'Most people don't get a job because of language.'

Education level

Education was also a repeated theme in the literature and in qualitative data. On a seven level scale of education (0-6), the average education level was 2.34 (SD=1.82). A more meaningful description is to look at the levels of education self-reported: 21.4% with no school; 21.4% with some primary school; 10.3% with some secondary school; 29.7% with some secondary school; 6.3% with some higher education; 1.4% with a training diploma; 9% with a bachelor's degree, and 0.7% with a graduate degree. In hindsight, it may have been more beneficial to phrase this question to be a continuous 'write-in' of number of years of formal schooling, but it was planned categorically, following other studies. Additionally, this could have become confusing with English classes, religious education, and other forms of nontraditional schooling. The sample in this study was slightly better educated than other Bhutanese refugee populations, perhaps in part because it only included those of working age and included refugees who had been in the US longer and had a greater chance for education (Ao et al., 2012; Benson et al., 2012; UNHCR, 2007).

Physical health and disability

After discussions with the community, two direct measures of health and the ability to work were added in the survey, in addition to the health measures in the SF-12. The first measure is an official US government measure of whether one has a disability that prevents accepting any kind of work during the next six months.[28] The next question is a 'softer' measure of physical disability by asking 'Are you physically able to work 8 hours straight in a row?', which was coded as

[28] This question mirrors a question to determine if one meet eligibility criteria for Social Security Income for a personal disability.

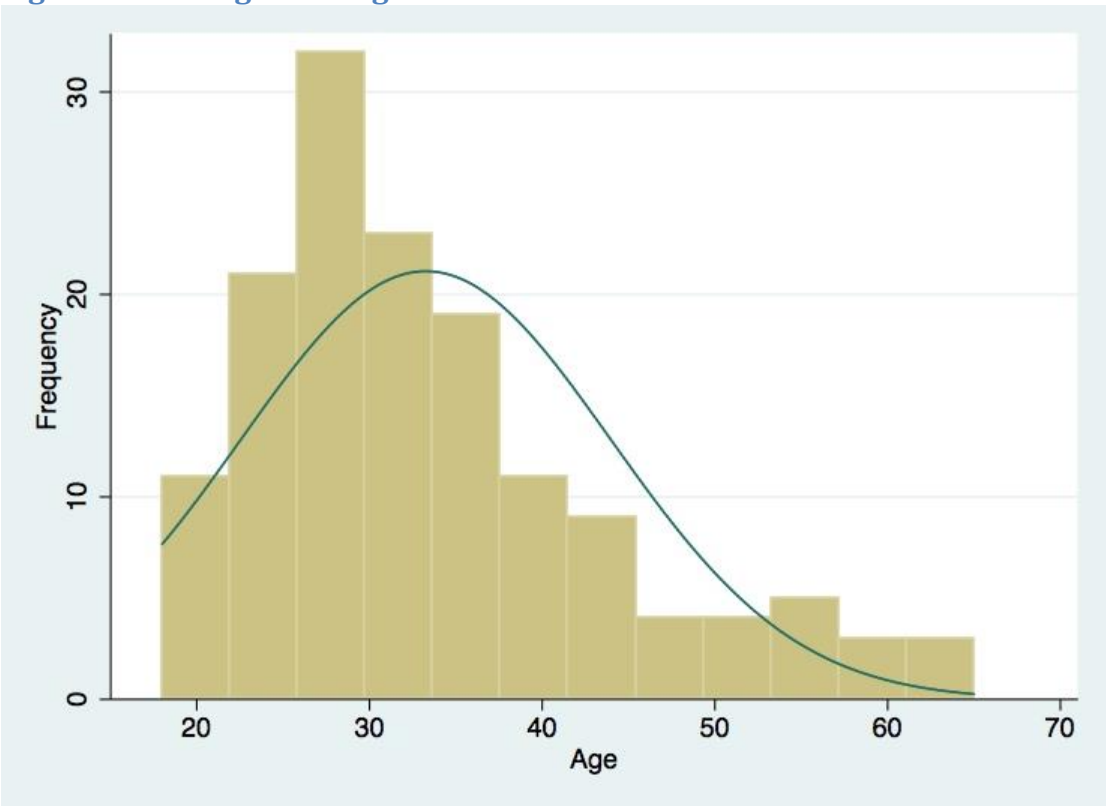
'able'. This question was developed with the help of Bhutanese leaders who believed an important part of the population may not meet official criteria for having a disability that prevents one from working but may nonetheless be physically unable to work.

Three categories emerged: 125 people were able and didn't have a disability, 11 people didn't have a disability but were not physically able to work 8 hours in a row, and 8 people had a disability and were also physically not able to work. The quantitative data thus upheld the qualitative data in that there was a substantive number of Bhutanese refugees who technically did not consider themselves or were not classified with a disability but also found it difficult to work eight hours straight. One Bhutanese leader talked said, '…My father-in-law is here, and he is taking SSI. And my mother-in-law is here. She was trying to go to work. She worked for two months. She was laid off from the job [because of weakness and English]… And she is not qualified for SSI because she is only 55 now. And at that time she was 53 I think. But, um, so they can't stand up for even four hours. Eight hours is a lot different.' Other people in focus groups and discussions stated problems 'with sweating', 'with stones', or 'hands and legs' prevented them from working although they may appear able to work.

Age

The average age of the interviewee was 33.3 years old. The distribution was positively skewed. When transformed into in $1/\sqrt{(age)}$ the distribution meets normality criteria by visual inspection and with a χ^2=2.95, p=0.229.

Figure 15: Histogram of age



The Bhutanese population consistently talked about the difference between 'older' refugees in interviews, focus groups, and conversations while collecting the survey. The same difference in age categories also emerged while talking to refugee resettlement personnel in formal and informal conversations. The population was often discussed as divided in two – with those over 50 or even 40 speaking much less English and being much less educated, often illiterate in Nepali as well as English. Multiple informants in focus groups, when asked about points of social differentiation, pointed to the age gap. One refugee staff member said, 'The age group. The old clients, they're just, I don't want to say they don't

want to work, right, but most of the resettlement aspects that we want them to work through; they feel like they don't need. ESL. Employment. Forget about it. Someone is 40? They're done. And they have the support of the whole family. Everybody in the whole family. So, my aunt cannot work and my dad cannot work. And what's wrong with them? They're old. That's it. And, the younger guys, they know their responsibility, and they don't want their parents to work, and that's it.' Separate from often having social expectation not to work, older refugees were viewed as more frail and having a harder time finding work and adapting due to lower levels of English and education.

Interaction between health and age

One Bhutanese leader described the interaction between health and age as '… in our context, 50 is very old. And they're not physically able to work.' He echoed resettlement agency workers, other interviewees, and survey participants, which is reflected in the table below. At the household level, 25.5% (37) had at least one adult receiving SSI, due to age over 65 and/or disability.

	Number 'not able'	Number 'able'	% Not able to work
under 50	11	118	8.5%
50 or over	8	7	53.3%
under 40	6	107	5.3%
40 or over	13	18	41.9%

Table 6: Interaction between age and ability to work

There was much concern about taking care of those 'older' individuals who did not yet qualify for SSI due to their age or the severity of the disability, but could not work or the family did not want to work. Resettlement agency staff, when discussing family self-sufficiency plans, would often adjust plans as younger members stated that their middle-aged family members would not be working.

The interaction between health and age was explained as a more severe phenomenon for this population due to their historical context. One informant said, 'And the second question is that what happens to those people who are not being able to go to work because of physical problems, with the health problem, because we had a lot of problem with the malnutrition back in the country; it was like 17 years. And some people are now coming with over 20 years in the refugee camp. There, there were a lot of depression. So these are things that make them physically weak, like physically weak so they're not being able to work here.' BCAP programming attention was also placed on this subset through English classes in Nepali, small-earning activities such as sewing and gardening, and cultural activities.

Time in country

The survey recorded the month and year of arrival in the US. This was used with the current date to calculate an estimate of the months in the country. Time in country was non-normally distributed, with more refugees arriving in the country earlier. Of those interviewed, 21 had arrived in 2008, 46 arrived in 2009, 29 arrived in 2010, 26 arrived in 2011, and 23 arrived in 2012. This intuitively makes sense considering the high numbers of secondary migration in the Pittsburgh area (Ott, 2011). Individuals spoke of arriving in their first location and then moving to Pittsburgh after six months or one year, when assistance had ceased in their initial place of resettlement. Strong motivations to move included a lack of employment opportunities and community networks. It is important to note that, as data were based on those in Pittsburgh in January

2013, but not necessarily followed-up with until July 2013, more recent arrivals were not included in the sampling frame.

Gender

Unsurprisingly, there was a 50/50 split for the gender of the interviewees (73 females and 72 males). No individuals self-identified as third gender.[29] The community has strict gender norms, with the women being more likely to cook and take care of the children.[30] Educated women and wage earners were no exception; they cooked and offered drinks during home visits, as well. During meals, it was customary for the women to serve all of the guests multiple helpings of the food and not eat until all of the guests had finished eating. This gender imbalance was reflected in the employment and earnings data explored later, but not in reports on family-level data such as having enough money to the pay the bills or using a food bank. One stark finding was the ratio of employed to nonemployed members for each gender: 36 females employed/37 nonemployed versus 64 males employed/8 nonemployed. Customs affecting genders differently are not unique to the Bhutanese refugee community; they pervade all societies. One of the interpreters was constrained by US employment regulations that differentially affected genders. After a series of grueling interviews, she was offered her ideal job as a well-paid phone interpreter, but when asked if she could have time off for childbirth, they told her that she would only be able to get

[29] This is a common accepted category of social differentiation in Nepal and is used in official Nepali government surveys.

[30] Participants adhered to a series of gender roles. Generally, women were not allowed in the kitchen if they were menstruating. Gender roles would also be seen outside the house as the Bhutanese Christian service segregated the sides of pews by gender, and men and women had different roles to play during the Hindu rituals observed. For example, after the death of a close family member for a high caste, individuals were not allowed to leave their dwelling, and men would go play cards with the men who could not go outside.

five days off for maternity leave and that she should wait six months and reapply during the next application cycle after she delivered her baby.

Religion

The majority of the population identified as Hindu (n=107, 74%) with substantial numbers of Buddhists (n=21) and Christians (n=15) and one individual each who identified as Kirat and as no religion/other. Although this variable appears as discretely categorical, qualitative research exposed more of a fluid religious process. Some individuals narrated their choice for religion, with statements such as, 'I am Buddhist, but I celebrate all religions', or 'I used to be Hindu, but now I am Christian', or even 'I am both Hindu and Christian, which to put down?… I think I will choose Christian as individuals from the Christian church have helped me.' Over the course of the data collection, the researcher spoke with Hindu priests, received the blessing of the local Bhutanese lama (Nangylama), and attended a Christian Bhutanese service where four resettled Christian pastors were present. People often mentioned the importance of religion to the researcher. Social, employment, and financial assistance networks may have formed around religion.

Caste

Due to the sensitive nature of the caste system that appeared in preliminary research, no questions directly ask about one's caste, but data for last names were collected, which was known to directly map onto caste in the Nepali community. An expert on Nepali castes, who knew but was separate from the Bhutanese community in Pittsburgh, then coded these surnames into the four major castes. From the data, 79 individuals were Brahmin, a religiously pure

high caste; 32 were Kshatriya, also a high caste that was traditionally the military and ruling caste; 27 were Vaishya, which is traditionally ethnic groups considered outside of the caste system or non-Hindus as well as merchants and farmers; and, 7 were Sudra, which is commonly called the low caste, Dalits, or 'untouchables.' In reality, the caste system in Nepal, as practiced by the Nepali Bhutanese in Bhutan, and carried on by Nepali Bhutanese refugees in the US, is a complex web of social groupings and ethnic groups. UNHCR and other bodies often categorize individuals under the numerous social groups that exist, differentiating all those lumped together as the Vaishya caste.

In the initial phase of the research in Pittsburgh, community leaders said the caste system no longer existed and resettlement agency staff did not mention it, which was surprising considering the researcher's experience with the caste system in Nepal. However, informants then revealed that although the power of the caste system had diminished, particularly in the workplace, grouping by social caste and customs that did not intermix castes were still central to many individuals, especially for those who were Hindu or in older age.

Interaction effect of religion and caste

There were overlapping groupings between religion and caste, as shown in the table below. Notably, 93.7% of those identified as Brahmin identified as Hindu; 87.5% of those in the Kshatriya caste also identified as Hindu; 70.4% of those in the Vaishya cast identified as Buddhist, Kirat, or no religion; and, all of those interviewed from the lowest cast [Sudra] identified as Christian. One interviewee commented about how some of the Christians, especially those of

lower caste, did not care to be part of BCAP. He said, 'It depends on the individual. Especially those Christians who are of Sedu [Sudra] caste. And what they feel is like, uh, they dominated us in Nepal so why do they follow still. They say it so. And we [those of my caste] are in the middle [of the caste system] so we have not any restrictions, nothing to avoid, so we are ok with both the groups and we just say that we come together for the same cause… Only with religion it looks like they are different. Because the Brahmin [high religious caste] people still feel bad if they [sudra caste] come and eat inside their apartment.' Social grouping, such as by caste and religion, thus affected the daily lived experiences of resettled Bhutanese refugees, as it has with other refugee groups such as Karen refugees (Kenny & Lockwood-Kenny, 2011).

Caste	Hindu	Buddhist	Christian	Kirat	No religion
Brahmin	74	1	4	--	--
Kshatriya	28	3	1	--	--
Vaishya	5	17	3	1	1
Sudra	--	--	7	--	--

Table 7: Castes and religions from sample

Exploratory principal component analysis

Given the hypothesized similarity between many of the descriptive variables, exploratory principal component analysis was run on eight variables: the three-caste structure (reducing Brahmin and Kshatriya to one), three-religion structure (Hindu; Buddhist, Kirat or other; and Christian), English level, education level, time in country, age, physical ability, and disability. This analysis looked roughly at the fewest variables that describe the components listed.

When looking at results in the future, there may be some latent classes in play, but the sample size was too small for meaningful latent class analysis. There is

some controversy in statistics over the similarity between principal component analysis, factor analysis, and latent class analysis (Jolliffe, 2005). Latent class analysis is used to determine the structure of classes based on observed data (i.e. the latent taxonomic structures) whereas factor analysis is concerned with the structure of the variables (i.e. correlations). Factor analysis and principal component analysis reduce the dimensionality of the data by transforming the variables into new sets of variables (generally uncorrelated but sometimes oblique with factor analysis), where a model is assumed for factor analysis whilst no model assumption is necessary for principal component analysis (2005). In Stata, factor analysis by principal components defines reconstruction in terms of prediction of the correlation matrix of the original variables whereas reconstruction means minimal residual variance summed across all equations in principal component analysis. Principal component analysis is the only appropriate one for exploratory reducing of the data to look at the underlying structure of social groupings at this point.

However, information from principal component analysis is of limited utility as the procedure is scale-dependent and assumes data is interval-level (StataCorp 2005, p. 372). The three caste structure expressed in their society 'upper' (Brahmin and Kshatriya)/ 'middle' (Vaishya of many social groups)/'lower' (Sudra) can be argued to be interval-level, but there is less of an argument for a scale based on 1) Hindu, 2) Buddhist and other, and 3) Christian-level religious data, although the religions follow similar hierarchies of traditional acceptability and social groups as that of caste. Physical ability and disability are also binary variables, not interval ones.

For an exploratory analysis, these eight components can be reduced to two orthogonal components to explain 60.0% of the variance or three to explain 72.0% of the variance and so forth. Using the Kaiser criteria, two principal components were retained (Statsoft, n.d.).[31] The first component is primarily explained by English level, education, age, physical ability to work, and disability. The second component is primarily explained by the three castes, the three religions, and time in country. Removing the binary variables and assuming interval level social structure for caste and religion, principal component factor analysis results in two principal components from these six variables explaining 67.5% of the variance (or three explaining 82.4%). Again, the first component is primarily explained by English level, education, and age whilst the second is primarily explained by three castes and three religions.

Despite the limited utility of principal component analysis, the exploratory findings align with the qualitative data of two social groupings: one component combining age, English level, education level, and disability and a second component of social groups aligning caste and religion. Notably, all of the descriptive variables in the first component can only be applied to an individual level whilst all of the descriptive variables deriving the second component can generally be applied to both individuals and their families. This does not align with the concern expressed by Bhutanese leaders that there is a grouping of arrival time with education and English and that more recent arrivals had less education and spoke worse English. This may be true for the most recent arrivals or for those outside of working age who are not captured in the survey, but it

[31] The eigenvalues for the first two components were 2.85 and 1.94. Using the scree test, the first three factors a proposed by Cattell (1966) would have been used.

may also indicate some prejudice. The time since arrival does seem to correlate more with components consisting primarily of caste and religion, indicating that those arriving more recently are more likely to be lower caste and non-Hindus than early arrivals.

The meaning of demographics

Understanding the social groupings and demographics provides information about who makes up a particular population and points of social differentiation. These demographics are crucial for making statements that are representative of the population and for designing interventions that are appropriate for the age, gender, and diversity of the population. Demographics are also crucial when exploring correlations and differential outcomes, as done in the next chapter, and more broadly for understanding trends in society. The description of the Bhutanese population explored thus far does not reveal how well the population is doing by various metrics, which is the focus of the next sub-section.

Measures of economic self-sufficiency

This section covers the epidemiological state of economic self-sufficiency through employment measures; wages, earnings, and types of employment; services accessed; and ability to pay bills. Economic self-sufficiency was often thought of in terms of one or multiple of these ideas. When asked to define economic self-sufficiency, the head of one of the resettlement agencies said, 'I would say it's, um, being able to look forward to having everything that you need on a regular basis, without relaying on any public assistance or anyone else,

being able to afford that from your own salary. As long as your income is higher than your expenses.'

Employment

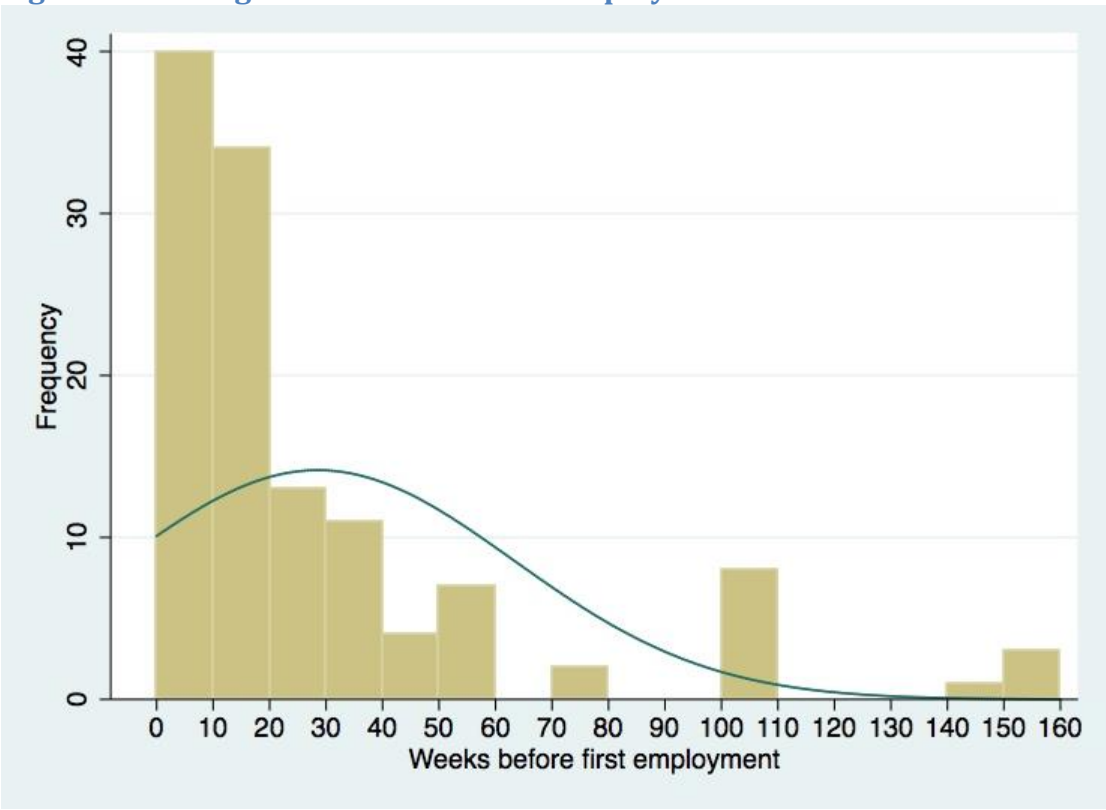
The unemployment rate was 18.9% (23/145). Although the unemployment rate is not measured for resettled refugees, this compares to a rate for the US population (age 16 and older) of between 7.3-7.9% during the months of data collection (January-July 2013) and between 6.1 and 6.2% in October and November 2013 in the Pittsburgh Metropolitan area (Bureau of Labor Statistics, n.d.).

The majority of interviewees were employed (100, 69.0%) with 66.2% (96) of them having worked in the past week while the other four (2.8%) had not, due to factors such as vacation, work schedule, illness, and/or not having started the job yet. Furthermore, 90.3% (131) had ever worked. Nineteen individuals reported that they were physically not able to work although they were of working age. The employment rate of 69% in this sample compares to an employment rate of 53% for refugees covered by the Annual Outcome Goal Plan (AOGP) and to an entered employment rate of 65% of the refugees in Pennsylvania covered by the AOGP (2,043 refugees) in 2013 (Office of Refugee Resettlement, 2013).

Another measure through which interventions try to affect economic self-sufficiency is by finding employment as promptly as possible. The majority of interviewees found employment within the first twenty weeks in the country, as shown below. This is much quicker than a 2011 survey of resettled refugees

which found that, of those who worked, 26% found work within the first three months, 26% within four to six months, another 22% within seven to twelve months, and 22% after more than twelve months. Qualitative findings indicate that many of those who found employment later may have been resettled in another city with a more difficult employment market, too young to find employment initially, focused on childcare, and/or nonessential workers for their family (e.g. one adult was already employed). One middle-aged interviewee with excellent English explained that he spent nine months in the state where he was resettled. During that time he had twelve job interviews but never received any offers. They all said he needed to have US work experience first. He eventually received assistance from family and moved to Pittsburgh where he heard, and ultimately found to be true, that it was easier to get a job.

Figure 16: Histogram of weeks before employment



The logic behind the resettlement program's aim to help refugees find employment promptly is that refugees will more promptly be able to pay bills, decrease government assistance, and be 'economically self-sufficient.' The long-term consequences on economic outcomes of finding employment as soon as possible are not measured in refugee resettlement. Social interventions often focus on short-term outcomes without knowing if initial improvements lead to long-term success. Other social interventions aim to delay sexual activity to decrease unplanned pregnancies, to initially decrease depressive symptoms to improve wellbeing, or to increase reading levels in elementary school to increase high school graduation rates. It is not known if initial employment leads to long-term employment, self-sufficiency, or wellbeing.

In the case of employment, it may be that a first job leads to inherent trade-offs in being able to find later jobs, particularly in terms of time for finding one that matches with skills, desired hours, and work benefits. ESL teachers remarked on a drop in attendance after a refugee received a job, and viewed English as crucial to receiving better jobs. When asked if there was anything else they would like to add, at least seven survey participants talked about wanting to find a better job that matched their skills, came with benefits, or offered more paid hours. One man interviewed expressed sadness at the burden of supporting his whole family and the lack of time to search for new employment. He found it difficult to manage his family obligations even on off days from work, let alone on those when he works. His parents were in Nepal, and he had to rely on public transportation to go to work in a neighborhood that is not well served by the bus. He was also not satisfied with the work, which offered maximum 60 to 65

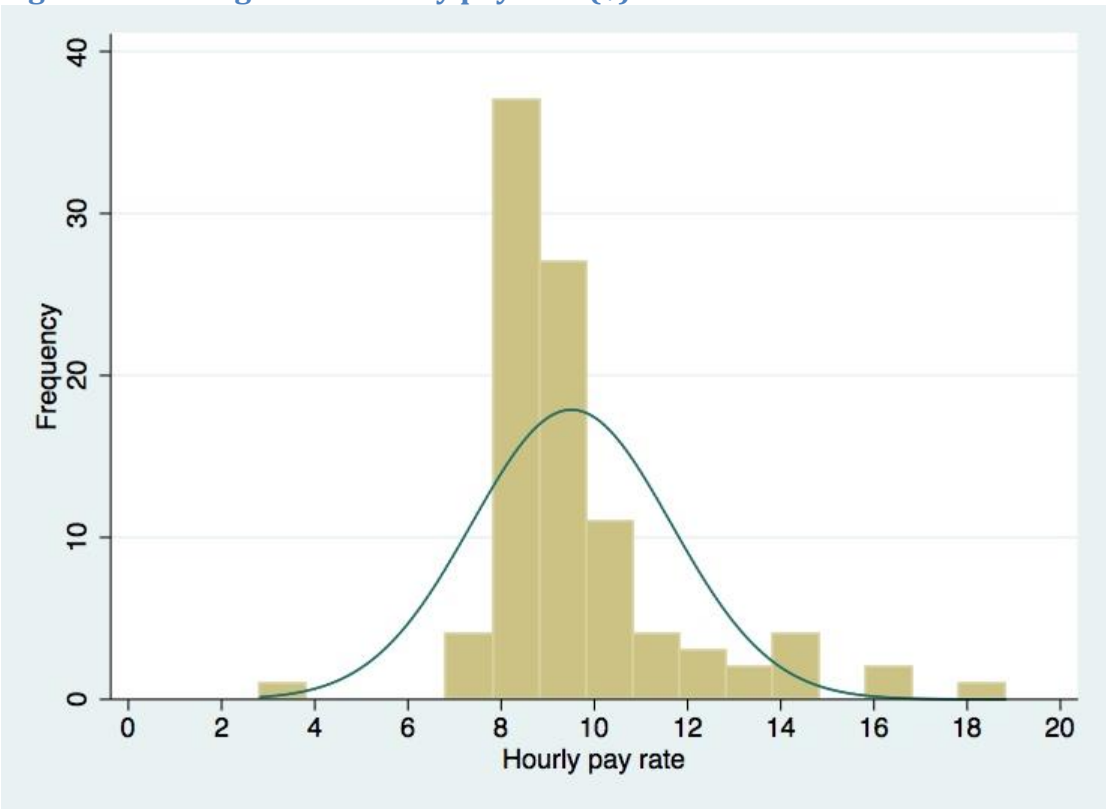
hours per two weeks in the winter. His resettlement agency had helped him find that job, and he stated that, 'There's no time to search for a new job.' For six months, he had not earned enough money to pay the bills. He said, 'I just take out of any pocket to pay the bills.' He was particularly concerned because his family was currently living in an one-bedroom apartment, but he thought the company that owned the rental property would make him move into a two-bedroom with increased rent after his one-year-old became a bit older. This concern about the quality of initial employment was echoed by a Bhutanese leader who said that he wished resettlement agencies could help them adjust for a longer period of time and, if possible, also receive skills training. He felt individuals were 'pushed' into a job without the time and same level of assistance to find a better job, which caused community members to be 'morally down', especially if this meant a loss of social status.

Wages, earnings, and types of employment

Thus, the goal for economic self-sufficiency is not only employment but also the type of employment that allows one to earn enough to be 'self-sufficient' and pay bills. The average hourly rate for the refugees surveyed was $9.51 (SD=2.14, median=9.00, n=96). This compares to an ORR average of $9.27 for refugees in the national Annual Outcome Goal Plan (AOGP) in FY2012 and a Matching Grant hourly wage of $8.47 in FY2007, the most recently reported year. Together, these two categories cover all resettled refugees tracked by the Office of Refugee Resettlement, but do not overlap. The Pittsburgh average wage was thus comparable to those for refugees in the US at large. In comparison to earnings of all employees on private nonfarm payrolls, the refugee hourly rate average of $9.51 was much lower than the US average of $23.75 in January 2013

at the time of the survey (Bureau of Labor Statistics, 2014) and the Pittsburgh average of $22/hour in 2012 (Three Rivers Workforce Investment Board, 2013). Only 10% of workers in Pittsburgh earned less than $10/hour in 2012 whereas 72% of Bhutanese workers earned less than $10/hour in this survey in 2013 (2013). These numbers align with expected values as the refugees in Pittsburgh have similar hourly wages to other refugees and a lower hourly rate of the population overall which has different demographics, such as higher levels of English and more US labor market experience.

Figure 17: Histogram of hourly pay rate ($)



Concomitant with the hourly rate is the hours at the workplace and subsequent gross and net income. Histograms of these variables are available in the overall appendix. Like the hourly rate, the distributions were non-normal (skewness-

kurtosis test for normality of gross income/week: χ^2=27.42, p<0.0001; skewness-kurtosis test for normality of gross income/week: χ^2=20.24, p<0.0001), perhaps due to a clustering in specific workplaces that offered particular hours and wages, and thus income. The average hours at the primary workplace were 37.3 hours per week (SD=9.73, median=40, n=101), and eleven interviewees had second jobs averaging 16.7 hours per week (SD=15.0) with over 68.3% of individuals working at least 35 hours or more at their jobs combined. The average net income per week was $291.45 (SD=112.37, median=267.50, n=96), and the average gross income per week was $374.39 (SD=144.31, median=340, n=99). The average weekly wage in Allegheny County was $1,080/week in the first quarter of 2013, when most of the data were collected, and the national average was of $989/week (Bureau of Labor Statistics, 2013). This ranked the county 61st in the nation amongst counties for wages.

These numbers show only part of the picture for the economic aspects of employment. Much of the work had hours that varied by season. As shown previously, the vast majority of employment was in hotels (primarily housekeeping but also as a bellhop and dishwasher), in FedEx (primarily moving and scanning boxes), or in factory-like settings such as mass food production. These occupations all involve shift work where hours vary based on the business and the season. Many raised concerns about having few work hours when hotels were near empty in the winter, outside of holiday season for packaging, or when production was slow in factories. This was particularly difficult for those who felt 'stuck' because of a lack of other options or a push to keep a job for a while

for work history. In the focus group in Prospect Park neighborhood, one man remarked that, 'Agencies say you need to work for three months. Some companies we are put in work becomes slower, and you only get one day per week of work. It is very hard. Still we are told that we need to stay in the job. This is the kind of compulsory we have.' However, in the observation work, employment specialists sought jobs with at least 35 hours per week, and the benefits of staying in the first job for a while, even if transportation was difficult, was clearly emphasized at both agencies. Refugees were also encouraged to find jobs through their networks, which seemed to have fewer hours. In the fall, one refugee resettlement employee seemed exasperated that clients were choosing jobs at FedEx with a large Bhutanese population, but where the hours would be cut back after the holidays, rather than with smaller employers where relationships had been fostered in order to enable a few Bhutanese refugees to enter in those workplaces.

In the US context, particularly pre-Affordable Care Act, the benefits of a job, especially health care benefits, make a large difference. From the most recently available data, the 2011 survey of refugees who had been in the US for less than five years, approximately eight percent of refugees received medical coverage through an employer (Office of Refugee Resettlement, 2014). For those enrolled in the Matching Grant Program in FY2013, 4.6% had full-time jobs with benefits while 62% of refugees who worked had a job with health benefits available on the Annual Outcome Goal Plan (2013). In this sample, half of employed refugees (50%) reported receiving health insurance with the job, while 49% got paid national holidays, and 57% got paid vacation or sick leave. The difficulty in

paying medical bills was a major theme in the focus groups. One older woman remarked that, 'We are always trying to do work. But if there were insurance that would always be better.' Following this comment, an older man discussed one time when his wife was sick and taken to the emergency room. The bill came out to $1600 for two hours, so they went to welfare but were told not to come with such small bills. They paid it off at $35 per month and 'now do not go to the hospital if there is an emergency.' The ability to get assistance from welfare and other agencies can be crucial for financial calculations, although they mean that families are not acting independently, as many define self-sufficiency.

Accessing services

By measurements of service usage, few households were accessing government cash assistance, but many were receiving help with buying food and had someone in the household receiving Medicare or Medicaid for medical assistance. Nine households (6.21%) responded that they had at least one person in the household who was currently getting cash assistance. Two households (1.38%) stated that someone in the household was obtaining refugee cash assistance or cash from a resettlement agency. Five households (3.45%) stated that at least one person in the household was currently receiving cash through TANF or 'welfare cash.'[32] A much larger number of households, 37 households, or 25.52%, had a member who was receiving Social Security Income (SSI), likely for being over 65 or disabled. This was generally not considered cash assistance in states' welfare calculations or by individuals themselves. Instead, it was viewed as security for the elderly or disabled.

[32] These numbers may not be exact. Although the survey was designed to ask about cash assistance generally and then types of cash assistance, individuals were often confused about which programs they were currently receiving assistance from. It is hypothesized that they may actually be overestimations for non-SSI assistance.

These numbers are not surprising for those familiar with the US resettlement and welfare systems and their pushes to get individuals off of cash assistance. They debunk rhetoric about refugees living off the government, and reflect a larger trend in the US of having a greater number of people on SSI. One of the resettlement agencies spent considerable time helping disabled and/or elderly individuals receive SSI, as that was part of the calculations for a family's economic self-sufficiency plan. One woman in a focus group explained that, 'It's been four years that I've been in the US. I have sweating problems [probably diabetes], and I don't have a bedset and am sleeping on the floor. We've been bearing it for four years. My husband is physically weak. We have no communication skills in English. We receive SSI income from my husband so we are just able to pay the bills.'

A much higher percentage of families currently use the SNAP (informally called 'food stamps') and other food assistance programs than those on any sort of financial assistance. Nearly three quarters of households used SNAP (n=104, 71.72%), which has an income maximum of $3,141 per month to qualify for a family of four without an elderly or disabled member (Pennsylvania Department of Welfare, 2013). Of all the households, 42.07% (n=61) used the federally-funded Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), which requires participants to meet categorical (demographic), income, and nutrition risk criteria. WIC provides supplemental foods, health care referrals, and nutrition education for pregnant and postpartum women as well as infants and children up to the age of five. Additionally, 45.52% (n=66) of

households used a food bank/pantry, often located at a church or community center, at the time of the survey to gain assistance with food. There was a minority of households (n=25) using all three services and an even smaller minority (n=20) using none of those services.

Likewise, an overwhelming majority of households (70.34%, n=102) had at least one member receiving Medicare or Medicaid. A smaller number of households (8.28%, n=12) reported at least one member on Refugee Medical Assistance, which is also government run medical assistance, but only for refugees within their first eight months in the country.

There were few other types of assistance that refugees received. Only 18 (12.41%) received any assistance on heating and energy, which was generally termed as an energy company's Customer Assistance Program (CAP) and not the federally-funded Low-Income Home Energy Assistance Program (LIHEAP). One household reported receiving assistance with housing. In other locations, refugees are known to use government-subsidized housing or vouchers, and it is not uncommon for other low-income populations in Pittsburgh. Some Somali Bantu refugee families in Pittsburgh are living in government housing (Section 8) or in privately built Habitat for Humanity houses after a decade in the country. Others within the Pittsburgh population receive government vouchers or rent deductions for housing.

In the other assistance category, one person mentioned how they borrowed from neighbors and received assistance from a church, but no one else wrote anything

down. Informally others mentioned to me how helpful particular churches, family networks, or volunteers had been for their families. In the resettlement agencies, they talked about star volunteers or churches assisting families in neighborhoods. One woman talked about medical appointments for her child and how a pastor from the church she attends manages the appointments.

Ability to 'pay the bills'

One measure of economic self-sufficiency is having enough money to pay all of the bills. As the questionnaires used to base the data collection survey did not have a question on this, a scale for how often the household has enough money to pay the bills was created with a four option Likert-type responses (to avoid individuals choosing the middle). Roughly half (47.22%, n=68) responded that they sometimes had trouble paying bills. Another large portion (41.67%, n=60) responded that they always had enough money for paying bills. A minority (11.11%, n=16) responded that most of the time they have trouble paying the bills, and no one responded that they have never had enough money to pay their bills.

These responses show a level of resilience and relatively high level of economic self-sufficiency whilst also showing a minority of those who struggle. Many native-born Americans also have trouble paying their bills. A study by the Center for Disease Control and Prevention, found that 20% of people under the age of 65 were in families who had trouble paying their medical bills in the last six months (Cohen & Kirzinger, 2014). In hindsight, this question in the thesis survey did not have the distribution of responses or sensitivity that was expected. More households were anticipated to respond that they were

struggling and had never been able to pay all of their bills and to have more of a bell curve. Visibly, interviewees often showed shame when answering these questions. Individuals expressed a feeling of inadequacy of not being able to meet expectations due to lack of resources, as common among adults living in poverty (Chase & Walker, 2013). Financial stability and ability to meet costs with resources at hand are complex concepts and would be areas for future research.

Measures of wellbeing

Broader ideas of wellbeing were intertwined with the idea of economic self-sufficiency, the primary focus of this thesis. The importance of wellbeing was particularly highlighted in the theory of change. As examined in Chapter 2, there are different conceptualizations of wellbeing: as normative ideals reaching values of society (e.g. good health or wealth, etc.), as subjective experiences of wellbeing, and as the ability to select wanted goods and services (Diener & Suh, 1997). Normative economic wellbeing was examined in the previous section.

In this section, wellbeing is primarily measured through the SF-12, a well-validated questionnaire for mental and physical health wellbeing. This focuses on normative ideals of physical and mental health and vitality as well as presents subjective experiences, as indexed by a much larger pool of surveys. The SF-12 was chosen due to its well-validated measure and lack of burden on participants, as it was felt that a longer index, even the SF-36, would be too time-consuming for participants, particularly considering the busy lives and lower-literacy levels of many participants. Included as ancillary discussions, wellbeing is also covered in this section through other narratives and owning goods.

SF-12

Overall from the SF-12, the participants scored almost exactly the same as the general population norm for both the physical component (49.55 vs 50) and the mental health component of the survey (50.48 vs 50). Participants showed slightly better vitality (56.06) and slightly lower general health (45.12). The other components were within a score of 1.6 for physical functioning (50.99), role physical (49.9), bodily pain (48.4), social functioning (51.3), role-emotional (48.8), and mental health (48.52). Regarding the percentage of those at risk in the first stage positive depression screening, 11% were at risk versus 20% of the general population. These results indicate a population with an average mental and physical wellbeing, although wellbeing in other dimensions (e.g. economic) and individual cases may differ.[33] As discussed in the next subsection and the wellbeing model in Chapter 7, the SF-12 has limited confidence when used with this population, because of reporting issues when discussing wellbeing and because it is a measure originally developed in Western contexts and may not align perfectly with Bhutanese ethno-psychology. The SF-12 survey is also one way of many for measuring the multifaceted and contested term of wellbeing, and it looks only and physical and mental health wellbeing. Nonetheless, it should not be completely discounted either, given the well-validated history of the SF-12 and that it triangulates qualitative research of much of the population doing well.

[33] The histograms for the mental health and physical health components are presented in Figure 23 and Figure 24 in the appendices, showing a normal distribution for both components. Additionally, these SF-12 findings are presented in graphical form in Figure 25 in the appendices.

However, this SF-12 picture of wellbeing is contrary to the general narrative of serious wellbeing and mental health issues amongst Bhutanese refugees (Mills, Singh, Roach, & Chong, 2008; Mishra, 2014; Mitschke, Aguirre, & Sharma, 2013; Nelson, 2012; Van Ommeren et al., 2001), but it is supported by narratives of general resilience of refugees and of refugees finding their own solutions (Betts & Omata, 2012; Kibreab, 1993). A recent study also found that only 4% of Bhutanese refugees in four US sites had a previously diagnosed mental health condition (Ao et al., 2012, p. 15) whereas systematic reviews found that refugee populations have poorer mental health outcomes than non-refugees with a moderate effect size (Porter & Haslam, 2005) and that Bhutanese refugees in Nepal had high levels of mental health disorders (Mills et al., 2008). Although important, the emphasis on the clinical mental health of refugees may be over-emphasized and have unintended consequences as it propagates a negative image of refugees. Over 30 years ago, a mental health focus was charged as 'sometimes unintentionally promot[ing] the erroneous impression that a great majority of refugees are fraught with serious mental health disorders' (Starr & Roberts, 1982, p. 597). This criticism may well hold true today. It may also be that official measures do not account for the lived experience of wellbeing, the stigma of mental health, or the Bhutanese ethno-psychology (Chase, Welton-Mitchell, & Bhattarai, 2013), which may be better captured in subjective accounts and participatory research.

Subjective accounts of wellbeing

In oral accounts, individuals talked about some people doing well while others struggled. One BCAP leader and one person highly critical of BCAP agreed on this factor. The BCAP leader said, 'There are families that are struggling, some

that are prospering, some that have bought houses.' The other person interviewed discussed that, 'People who came in 2007, 2008, 2009…are doing good', while others were not doing well mentally or financially or had fallen under negative influence. Statements often reflected this dichotomy of doing or not doing well and few focused on the spectrum, perhaps because the extreme cases were more salient.

There also seemed a general reticence to discuss mental wellbeing. Several times, a conversation ensued after the survey was complete about how a family member felt close to the questions about mental and physical wellbeing due to personal experiences like the questions. For example, after one middle-aged man completed the survey with the aid of an interpreter, his mother who had been quiet throughout the survey remarked that the questions at the end about mental health were about her and her issues. However, individuals often wanted to rush through the SF-12 section verbalizing 'nothing is wrong' or an equivalent. After one survey, the interpreter commented that she thought the survey participant had serious mental health issues although the marks on the SF-12 were more neutral. The mother of the survey participant had said to 'tell them everything that's wrong', and the participant had seemed depressed and weak, yet was the only one working in her family. At the end of another survey, one participant responded, 'We're finding lots, about 95% of people having depression in our community, but they're hiding it…There are many reasons to be depressed. Mostly old people are depressed. Even if they're getting SSI. They can't go outside. They can't talk to people. They're lost.'

Wellbeing was often expressed in relation to the ability and willingness to adapt to the new environment as well as in general attitude. One talkative young man spoke about 'not having any complaints' because 'even the bad, they're bad for the bad.' He had been robbed five times at his work, but he had no grievances about it. He viewed his family as happy, doing well, working, and saving money. He was illegally working seven days a week more than eight hours a day and had hid over $9,000 from his family to use as he pleased. Visibly, some individuals seemed cheerful and laid back like him while others seemed sad.

Frequently, important indicators of wellbeing like this appeared more outside of the survey results, whether from discussion or visual observation. Indirectly, the image of the household dwelling – whether sparse, dilapidated, and/or dirty, or well-kept and furnished with personal items, revealed something about the personality and wellbeing of the household. Visually, as discussed in the following section, one could also see the ability to purchase goods – from cell phones and laptops to cars and houses.

Wellbeing by owning goods

Measuring the ability to select wanted goods and services is problematic as it must account for not only the ability to own certain goods, but the value placed on those goods. The research never set out to measure wellbeing by the owning of goods, but the list of goods items to measure global poverty and socioeconomic status was adapted to items relevant for this population, such as a fridge, TV, car, home ownership, and business ownership (Howe et al., 2012; Rutstein & Johnson, 2004). This also allowed for rough comparisons of

socioeconomic status by goods between current households in the US, in Nepal, and in Bhutan.

	Now	Nepal	Bhutan
Fridge	100%	0%	2.61%
TV	90.28%	31.72%	7.83%
Car	75.69%	1.38%	2.61%
House (Own)	5.63%	0.69%	89.47%
Business (Own)	2.78%	11.72%	23.89%

Table 8: Percentage of responding households owning items

From a goods wellbeing perspective, the survey showed that all households had refrigerators, 90.28% had TVs, 75.69% had cars, 5.63% had houses they owned, and 2.78% had businesses they owned. Although it was not asked how much they valued these goods, individuals frequently referenced wanting or pride for cars, houses, and businesses. The responses thus indicate a sense of current mixed wellbeing by ability to own wanted goods. Changed last full sentence to clarify meaning: 'Informants had lower wellbeing if measured by owning houses and businesses, as many did in Nepal, but had greater ability to achieve wellbeing if measured by owning items such as refrigerators, TVs, and cars.'

Interpreting this table requires additional context. For instance, Bhutan has generally lagged behind other countries in terms of technology and banned television until 1999 (Bhaumik, 1999). Furthermore, this table does not necessarily accurately represent the entrepreneurship of the population. Generally, people did not consider farming, with a primary goal of subsistence, a business; some people who sold vegetables called it a business, but certainly not all individuals.

Measures of success were often outside of the confines of the survey. One Bhutanese refugee who worked at one of the resettlement agencies was proud of his job (which came with considerable status) and of his '0 mile car' that he bought on finance. He was also proud that, 'More than 65 students are graduating high school in four years. And six or seven students are getting scholarships in Pittsburgh University and Duquesne University. And Penn State, you know Penn State University? Four students in Penn State University this year.' Likewise, a gas station owned and operated by Bhutanese community leaders opened during this time period. Individuals expressed pride in the opening, both the owners and the community members attending. Free food was offered to all, including momos, a Nepali dumpling specialty bought at a Chinese market in Pittsburgh. Owning a store appeared to come with a higher socioeconomic status.

Describing the population beyond employment and monetary values in terms of pride, ownership, and wellbeing also acknowledges that lived experience surpasses the strict national programmatic goals. Overall, this population has stories of wellbeing, successes, and personal agency that counter much of the literature's portrayal of refugees, and particularly of Bhutanese (Ao et al., 2012; Harrell-Bond, 1986; Thapa et al., 2003; Van Ommerman et al., 2001).

Little is known how programming and resettlement affects wellbeing (Benson et al., 2012; Nelson, 2012). One resettlement worker described it as, 'They see that all of the sudden they have all these bills, and they're going to wipe out almost

everything they have in their account. And for them it's wow, what is this, what did I come here for? And that's how we find out people are getting depressed or they're, you know, you probably heard about the suicide rate, especially within the Bhutanese community.' On the other hand, some refugees described resettlement as offering them hope. Correlates of wellbeing are examined in the next chapter, and the effects of programming on wellbeing are subjects for future research.

Describing the geography and neighborhood-level data

Up until this point, individual and family-level descriptive data were used and extrapolated up to describe 'the Bhutanese population in Pittsburgh' as a whole. However, when examining demographics and economic self-sufficiency, these may not be the correct levels. The importance of geography and neighborhoods emerged as a theme, challenging the latent terminology of '*the* Bhutanese population in *Pittsburgh*.' In carrying out the research, the community was often observed as operating on a more interconnected level than individuals or single households, and instead often on a level based in part on neighborhood. The map in Figure 18 shows the density of the housing for interviewees, revealing pockets of Bhutanese refugees, often in housing complexes or a series of rental houses. Higher density areas are pink with more gradation and lower density areas are light blue. The exact numbers sampled at random per neighborhood are provided in Table 9.

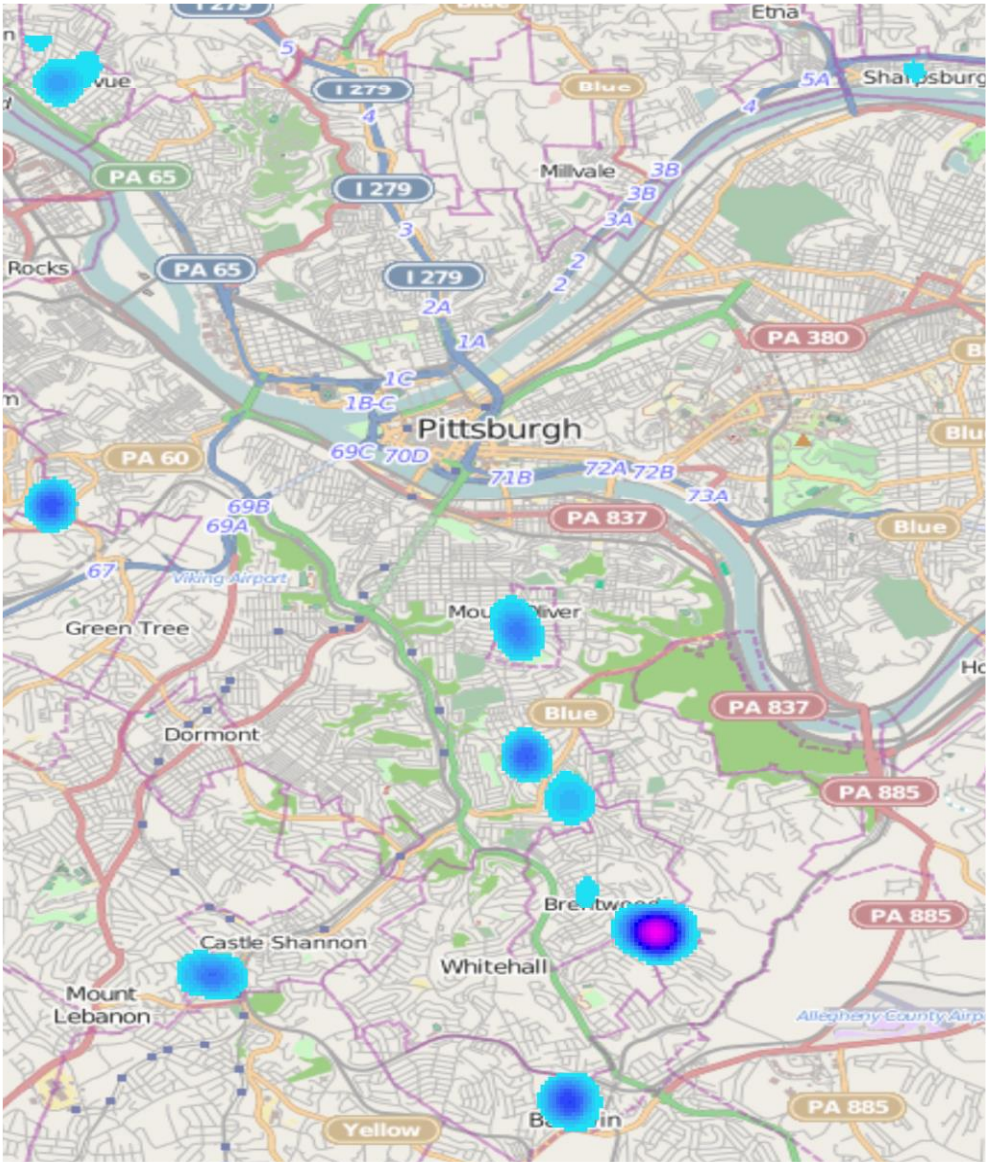


Figure 18: Density map of interview sites

Neighborhood-level data and data extrapolated to the neighborhood-level

Researchers in refugee resettlement often neglect neighborhoods or sorting effects, as they assume refugees are 'randomly placed' by resettlement agencies which settle them across countries and find initial housing in those cities (Beaman, 2011). However, arriving refugees and their already-established family members often requested their neighborhood, or moved from initial placements. Employment was also often found through contacts in the same neighborhood. Thus, there emerged self-segregation. The importance of geography can be considered tangibly as reflected in the demographics in the table below as well as by the length and difficulty of the car ride or bus trip to particular neighborhoods. Geography can also be considered more intangibly through the impressions of the researcher of each neighborhood written as detailed descriptions in her notebook. These palpable and impalpable impressions illustrate the prominence of geography.

Neighborhood	n	Employment rate	Avg gross income per week	Religion and caste notes	Avg months in country	Avg age
Bellevue	12	100%	$353.21 (SD=15.48)	58% Christian, Brahmin, Vaishya & Sudra castes	29 ±3.3	33
Sharpsburg	3	100%	$466.66 (SD=88.19)	100% Hindu	20 ±3.7	26
Green Tree	14	78.57%	$281.60 (SD=21.80)	mix of castes and religions	36 ±4.3	34
Mount Oliver	12	41.67%	$360.40 (SD=66.51)	mix of castes and religions	17 ±2.4	30
Carric	22	45.45%	$335.59 (SD=37.55)	59% Hindu, 27% Buddhist, 14 % Christian; Brahmin, Kshatriya & Vaishya castes	23 ±2.9	35
Prospect Park	51	70.59%	$372.72 (SD=23.51)	82% Hindu, 14% Buddhist; Brahmin, Kshatriya & Vaishya	40 ±2.0	35
Castle Shannon	14	57.14%	$386.88 (SD=32.83)	86% Hindu, mainly Kshatriya	42 ±2.6	34
Leland Point/ Baldwin	16	87.5%	$444.14 (SD=58.60)	100% Hindu, 81% Brahmin	47 ±1.5	29

Table 9: Neighborhood comparisons

Table 9 lists all neighborhoods on the map from North to South that contained at least three data points. With a smaller sample size, the descriptive statistics once aggregated and extrapolated to a neighborhood-level are less meaningful due to the decreased statistical power and increased chance for random (and systematic) errors, as small numbers are not representative. For example, the small sample of three households in Sharpsburg may have over-counted younger refugees as well as those who are Hindu, earn more, and are employed. It could also be that neighborhood-level data such as jobs available in that neighborhood or proximity to the resettlement agencies affected the employment rate and income. However, inferences cannot be drawn with the quantitative data available. The subgroups by neighborhood do point to descriptive differentiation by neighborhood, triangulated by observation and interviews.

Importantly, it seemed that descriptive statistics and impressions varied between neighborhoods, and, overall, that certain neighborhoods were faring better than others in terms of economic self-sufficiency. For example, based on measures of economic self-sufficiency, individuals in Leland Park were doing better on average than those in Mount Oliver, two tangibly different neighborhoods. The neighborhood of Leland Park was more expensive to live in and included primarily secondary migrants who had been in the country for a longer period of time. All individuals interviewed in that neighborhood were Hindu. The local schools were known to be good and safe, and the sprawling complex of small three-storied brick apartment buildings were, according to the researcher, the nicest housing complexes for the resettled refugees. They were

well maintained, such as being repainted between tenants, and had secure doors. Overall, the neighborhood was quiet and poorly served by public transportation.

In contrast, the street noise within the neighborhood of Mount Oliver could be loud, but the area was well served by public transportation and closer to the heart of Pittsburgh. There was a community center where Bhutanese community members held English and citizenship classes. The housing showed visible wear, including row houses and a renovated old school building. When entering this building, an older Nepali man usually sat out front in a plastic chair, and the door was ajar. Wide school hallways marked the poorly lit and well-worn building. The population consisted of mainly new arrivals who had come directly to Pittsburgh, and comprised a mixture of castes and religions. A Bhutanese leader said, 'Almost all of the families are totally different than here.' People reported being randomly jumped and beaten up on the street while walking on the sidewalks. The researcher found it more difficult to do surveys in Mount Oliver than in Leland Park as the average survey time was longer and English level lower. The researcher also spent hours in some apartments in Mount Oliver, listening to medical difficulties or answering questions about mail. Based on the experience of collecting data and the data, economic self-sufficiency interventions should perhaps be designed differently in the two neighborhoods.

In the broader literature, the importance of neighborhoods is hotly debated. Most research suggests an impact of neighborhoods on employment and welfare outcomes, including for a group of refugees who arrived as asylum-seekers in Sweden (Åslund & Fredriksson, 2009; Åslund & Rooth, 2007; Åslund, Östh, &

Zenou, 2010). However, research in the US has found that location is not important for the probability of employment of TANF welfare recipients in public housing, assuming that the housing is exogenously determined (Gurmu, Ihlanfeldt, & Smith, 2008). For the refugees in Pittsburgh, housing was certainly endogenously determined based on resettlement agencies' connections, when the family or individual arrived, preferences expressed by the 'case' to live close to family, and moving after, or even before, initial contracts were up for renewal. No one in the sample lived in public housing. It was observed at one agency that the resettlement staff put much effort in trying to help families live in the same neighborhoods and, in one particular case, helped a refugee change neighborhoods and move into the shared housing of their family.

Although it is important to keep in mind neighborhood-level analysis, inferences drawn in the next chapter using individual and household-level data cannot be applied to the neighborhood-level lest the atomistic fallacy be committed (Diez, 2002; McLaren & Hawe, 2005). For example, if individual earnings and wellbeing were to be correlated, it could not be assumed that neighborhood-level earning levels and wellbeing were associated. Given the differences between neighborhoods, the general high-density concentration of the Bhutanese population, and the frequent interactions amongst community members, future analyses should look at community-level data, and the Bhutanese community may be appropriate for neighborhood-level interventions.

Conclusion

This chapter looked at the 'thick description' of the Bhutanese refugee population in Pittsburgh, which serves as a basis for analysis in the next chapter.

The descriptive statistics are noteworthy in their own right as this is a groundbreaking representative sample of a resettled Bhutanese population in the US. The demographics lead to a better understanding of the population and its social groupings while measures of economic self-sufficiency and wellbeing reveal the multi-dimensional nature of these concepts and epidemiological rates for this population. Likewise, by grouping data on a community level, further variances emerge from the numbers and from qualitative differences. Through understanding the thick description of the population, the field can understand if the population is at-risk or doing well, better develop targeted and culturally appropriate interventions, and continue with statistical analyses that are based on reasonable assumptions.

Chapter 7. Predicting Outcomes: Correlational Findings and Social Differentiation

Introduction

This chapter answers the second part of the third research question: *what is the current state of refugee self-sufficiency and what appears to correlate with improved outcomes?*

To do so, the predictive models are created for employment (i.e. participating in the labor force), income, wages, paying the bills, using SNAP, using a food bank, and mental health wellbeing. The previous chapter explored demographics and social groups as well as differences in economic self-sufficiency and wellbeing; this chapter investigates whether these points of social differentiation predict differences in economic self-sufficiency outcomes. These models serve as a basis for hypotheses and future analyses, and the independent variables in these models serve as potential mediators and moderators for future intervention research. Overall, this chapter builds on the descriptive statistics in the previous chapter to hypothesize if variables are related.

Analytical procedure and chapter organization

All analyses were conducted with STATA/IC 12.1 for Mac. The statistical analyses were conducted in two parts based on hypotheses before analyses. Relationships between outcomes (e.g. income) and explanatory variables were first assessed using pairwise correlations and the appropriate bivariate

statistical test and secondly using multivariate regressions in order to adjust for observed confounding (Field, 2006; UCLA: Statistical Consulting Group, 2006).[34]

This chapter is split into three subsequent subsections: 1) primary outcomes: employment (i.e. labor force participation), gross income, and wage rate; 2) secondary outcomes: always having enough money to pay the bills, usage of SNAP, and usage of food banks; and, 3) mental health wellbeing. The pairwise correlations, bivariate correlations, and models are examined for each outcome of interest in these subsections.

Primary analyses: employment, income, and wages

The primary analyses examined employment, income, and wages: these are the outcome variables most often reported in the literature regarding the economic self-sufficiency of resettled refugees (see Table 3: Factors theorized to affect refugees' economic self-sufficiency in Chapter 2). Furthermore, these employment outcomes are well-validated concepts and are often used as comparative outcomes.

Robustness of pairwise results

As a first analysis, pairwise correlations were performed. Table 10 shows the pairwise correlations.[35] Some important relationships are highlighted in these pairwise correlations, which are further examined in the bivariate relationships

[34] For a more detailed discussion of the analytic procedure, see the Appendix:

Additional statistical explanation and models.

[35] This examines the extent to which the variables correlate regardless of the types of variables, using pairwise deletion. The type of deletion is less relevant for most variables as item response rate was high, although the outcome variables of gross income per week and hourly rate only include a subset of the population.

and regressions. As these were preliminary analyses with a defined number of variables, rather than targeted analyses for definitive policy or intervention recommendations, correlations are mainly reported without accounting for multiple comparisons. However, even after accounting for multiple comparisons using the conservative Bonferroni correction, [36] a number of significant relationships exist as shown in Table 12 in the appendix.

[36] The Bonferroni correction test controls for false positives, but it increases the likelihood of false negatives.

Table 10: Pairwise correlation coefficients for selected study variables

Variable	Gender (male)[37]	Age (years)	Physical-ly able[38]	House-hold size	Married	Edu. level[39]	English level[40]	Time in country (months)	Time in job (years)	Empl.[41]	Gross income	Hourly rate
Gender (male)	--											
Age (years)	-0.11	--										
Physically able	0.22**	-0.49***	--									
Household size	-0.29***	0.23**	-0.24**	--								
Married/partnered	-0.11	0.24**	-0.04	-0.02	--							
Education level	0.35***	-0.43***	0.33***	-0.26**	-0.08	--						
English level	-0.41***	0.52***	-0.37***	0.32***	0.09	-0.72***	--					
Time in country	0.00	0.06	0.01	0.13	-0.07	0.13	-0.22	--				
Time in job	0.13	0.12	0.13	0.11	0.08	0.15	-0.09	0.35***	--			
Employed	0.43***	-0.15	0.40***	-0.34***	0.02	0.23**	-0.28***	0.00	-0.14	--		
Gross income	0.30**	-0.16	0.10	-0.17	-0.13	0.36***	-0.26*	0.22*	0.21*	0.02	--	
Hourly rate	0.21*	-0.15	0.05	-0.07	-0.20*	0.36***	-0.23*	0.36***	0.19	N/A	0.53***	--

Unadjusted for multiple comparisons: *p<.05, **p<.01,***p<.001. As shown in Table 12 in the appendix, a number of these are still significant with Bonferroni corrections: able with age; household size with gender; education level with gender, age, and able; English level with gender, age, able, household size, and education level; employed with gender, able, household size; gross income with education level; and, hourly rate with education level, time in country, and gross income.

[37] 0 = female, 1 = male

[38] 0 = not physically able to work 8 hours a day, 1 = physically able to work 8 hours in a day

[39] 0 = no education, 1 = primary school, 2 = some secondary school, 3 = secondary school graduate or high school graduate, 4 = some university or higher education but did not finish a degree or certificate, 5 = a training school after secondary school (e.g. secretarial school) or an associates degree (e.g. AA, AS), 6 = a bachelor's degree (e.g. BA, BS), 7 = a graduate degree (e.g. masters, PhD)

[40] 1 = speak and understand English very well, 2 = speak English well, 3 = speak a little bit, 4 = no English

[41] 0 = unemployed; 1 = employed

In the pairwise correlations, a number of demographic variables were strongly correlated with each other:

- Positively correlated:
  - Female respondent and larger household size
  - Male respondent and education level
  - Male respondent and English level
  - English and education level
  - Time in country and time at primary workplace
- Negatively correlated:
  - Age and physical ability to work
  - Age and English level
  - Age and education level
  - Respondent's English level and household size

These correlations can lead to intuitive interpretations of causality. For example, women may report living in a larger household because culturally women were not allowed to live alone in Pittsburgh whereas men were. Men were also more likely to be educated and have a higher level of English, which was again consistent with the gender norms of this population. Younger individuals also were considered to have had more opportunities for education, including English classes. Thus, it was natural that younger, able-bodied individuals spoke better English and had a higher level of education on average. Time in the country correlated with the time at the primary workplace, as may be intuitive, but also indicates that refugees were not constantly switching jobs, at least amongst the earlier arrivals. A larger household size also correlated with a lower English level. This could be due to a number of reasons and mechanisms, such as more unemployment among lower English-level individuals that leads to more people with lower English levels needing to share a house or apartment. These interpretations should be further explored using qualitative research and longitudinal research.

Regarding the dependent variables, being employed correlated with being male, being able-bodied, and having a smaller household size. Higher gross income correlated with education level, and higher hourly rate correlated with education level and time in the country. These relationships will be discussed with more confidence by examining the bivariate relationships and then the regression models controlling for other variables.

Employment

From the literature, it was hypothesized that gender, age, physical ability, time in country, having a partner, household size, English language speaking ability ('English level'), and education level may affect employment.

In this research, the effect of gender on employment was significant in a binary relationship [χ^2=26.52, p<0.001].[42]

The effect of age was non-significant [Mann-Whitney Test z=1.01, p=0.31].[43] An additional test was used to examine the effect of categorizing the population as above and below 40; this was found to be significant [χ^2=5.54, p=0.019]. However, given the collinearity of age with physical ability to work explained in the demographics chapter, this dichotomized variable was not used in the final analyses. Instead, age and an interaction term between age and being 'able' was used.

[42] The Pearson's chi-squared test was used to test these two categorical variables.

[43] As shown in Figure 15: Histogram of age in the previous chapter, age was non-normally distributed, so a Wilcoxon-Mann-Whitney test (generally called 'Mann-Whitney Test') was performed here and for other relevant variables which were non-normally distributed.

The measure of being 'able' to work had a statistically significant correlation with employment [p<0.001].[44]

The time in country did not have a statistically significant correlation with employment [Mann-Whitney Test: z=0.14, p=0.89]. Although the literature on resettled refugee populations in other locations differs with this finding (Hugo, 2013; Ott, 2013), this correlation was hypothesized to be non-significant for this population given the availability of jobs in Pittsburgh and the need for employment within the first four months given the low-level of a US safety net. Time in country was omitted from this labor force participation model. In line with other US refugee resettlement populations, time in country was hypothesized to correlate more with income than with employment (Connor, 2010; Cortes, 2004).

Two aspects of family dynamics, having a partner and household size, were examined. Being married or having a partner that one lives with was not correlated with employment (χ^2=0.078, p=0.78). This is not surprising given the number of coupled households and the operation of extended family networks to support one another. Moreover, in the literature on refugees and immigrants in the US, being part of a household headed by a married couple is more strongly linked to public assistance usage than employment status or wages (Potocky-Tripodi, 2001; Potocky-Tripodi, 2004). In the literature on the general US population, there is also debate about the role of marital status on employment

[44] This was tested using Fisher's exact test given that less than five were expected in a category.

and wages. Having greater family financial responsibility (e.g. being married with more children) has been found to correlate with increased wages for men, but not necessarily employment status (Hill, 1979), and with decreased wages for women (Waldfogel, 1998). As it was felt that this variable would be spurious in the regression for employment status in the context of this research, it was omitted.

Household size had a significant bivariate relationship with employment status [z=3.93; p=0.0001]. The more people that were in a household, the less likely it was that the person completing the survey was employed. This was further explored in the regression. This relationship was at first hypothesized to be related to care burden: that those in larger households were more likely to need care (e.g. physically disabled) or to be non-working caretakers (e.g. taking care of elderly or small children). Unfortunately, the data collected only showed the relationship between all individuals and the ages of any children in the family, and included only limited information on the other household members (e.g. did not include their working status). It was debated whether to run additional variables (e.g. the presence of children five and older or of parents in the household). However, the matrices of dependencies observed among families and co-ethnic peers were complex, in line with other resettled refugee populations (Johnson, 2003; Makwarimba et al., 2013). A larger sample size would be needed to break down households into the different groupings.

Qualitatively, as previously discussed, refugees were often considered older and dependent on their children at ages such as 50 and above, and many

grandparents, older siblings, or other relatives and friends provided childcare for infants. In other Asian refugee populations, traditional beliefs about financial care for the family have remained consistent during refugee resettlement (Johnson, 2003). All of these factors make household structure a difficult dynamic to meaningfully describe in the data available. It was therefore determined that remaining with household size as an attempt to capture the household dynamic was the most viable option for this study.

There were two additional variables that were hypothesized not to correlate with employment status, but they were tested for completeness: caste and religion. These were tested using Fisher's exact test for categorical independent variables and were found to be non-significant for caste (p=0.97), caste grouped into three categories (p=1.00); and religion (p=0.36). This confirmed initial hypotheses, yet it was also important to show no differences based on these points of social differentiation.

Employment had a significant bivariate relationship with both English (z=3.10; p=0.002) and education level (z=-2.89; p=0.004), using the Mann-Whitney Test for ranked independent variables. Given the collinearity between education and English level, as well as the conceptual link, it was decided to use only one of the two variables in each model. For employment, English level was used as it was hypothesized that English would be more important than education for finding employment; concomitantly, education was hypothesized to be more important for the type of employment and wages. The final variables therefore entered in

the employment logistic regression were: gender, 'able,' age, household size, and English level.

Model 1: Odds of being employed

Predictor variable	Odds Ratio	SE	95% CI
Gender (male)	5.17***	2.63	[1.90-14.02]
Physically 'able'	0.19	0.50	[0.001-33.96]
Age	1.08*	0.04	[1.01-1.16]
Able(1) x Age	0.90	0.06	[0.80-1.02]
Household size	0.66*	0.12	[0.46-0.95]
English level (reference category=speak a little)			
Speak very well	0.87	0.59	[0.23-3.25]
Speak well	0.81	0.45	[0.27-2.41]
None	0.17	0.17	[0.02-1.21]

n=143
LL = -61.74, LR $\chi^2(8)$=54.63***
Pseudo R^2= 0.307
*p<0.05, **p<0.01 , ***p<0.001
Goodness of Fit:
Hosmer-Lemeshow $\chi^2(8)$=7.00, p=0.54
Pearson $\chi^2(123)$=147.25, p=0.06

To determine whether the model was significant, the likelihood ratio chi-squared (LR χ^2) test was used. Since logistic regression models non-linear relationships, a maximum likelihood approach is commonly used to estimate coefficients and standard error. Likelihood can be thought of as the 'probability' that a set of parameters has generated the observed data. Thus the parameters are picked which have the highest 'probability' – likelihood – to have led to the data at hand, which is expressed in the 'maximum likelihood'. The measure is also used in the LR χ^2 test. The test statistic is negative two times the difference between the starting and ending log likelihood. This number is then used to calculate the probability of obtaining that chi-squared if there is no effect of the independent variables on the dependent variable (i.e. the probability of obtaining χ^2 under the

null hypothesis).[45] In this case, the probability is less than 0.05, so the overall model is statistically significant.[46]

Implications of employment model

The results of this linear regression suggested the importance of gender on employment. After controlling for English level, household size, age, and physical ability, gender had a significant effect on employment. The results also imply that when all other hypothesized variables were held constant, being older than the mean age increased the likelihood of employment and those with larger household size than the mean household size were less likely to be employed.

This model shows relationships but does not explain results or the directionality of causality (i.e. whether refugees are more likely to live in a larger household because they are not employed or whether living in a larger household causes one to be less likely to be employed directly or indirectly). This subsection discusses different theories to explain the results of the employment model based on previous studies, qualitative data, and intuition. Gender differences may be because of cultural norms or structural barriers. Age may be an indicator of previous experience which effects employability, and household size may be an indicator of caring responsibilities or ability to pursue non-employment interests. All of these are theories for future analysis.

[45] The number in parentheses in the LR test is the degrees of freedom.

[46] The model can also be examined by other measures of its goodness of fit. While R^2 is valuable measure of fit for linear regression, it is less useful in logistic regression. The pseudo R^2 is presented here, but it should be treated with caution. Using the more accurate Hosmer-Lemeshow-Sturdivant goodness of fit test, the model cannot be rejected since the value is above 0.05. Likewise, using the commonly used Pearson chi-squared test, the model cannot be rejected.

As discussed in the descriptive statistics chapter, women and men were expected to adhere to different cultural norms. Women were expected to cook and carry out caring responsibilities for family members whilst men were expected to be the primary financial breadwinners. One survey respondent who lived with her parents lamented that she and her mother were expected to do all of the housework, despite the fact that both she and her mother worked and that she was also enrolled in full-time schooling. As previously discussed, one man discussed the financial burden he felt to care for his young family, despite the fact that his wife worked as well. As expressed regarding employment, these gender norms may have kept women away from work due to perceived or expected care responsibilities and pushed men into work due to the gender norms regarding financial responsibility.

As also mentioned in Chapter 6, gender differences in the labor force may be accounted for due to structural barriers such as the labor market structure, short maternity leave, and the lack of childcare options. One employment specialist related an anecdote of bringing two people for interviews at a hotel – one woman interviewing for a part-time job in the kitchen and one man interviewing for a full-time position cleaning rooms. The manager suggested that the employment specialist switch those positions because the manager felt it would be more appropriate for the woman to be in the cleaning position. Another employment specialist discussed how job descriptions were written in such a way that they perhaps unintentionally gendered the expected work, such as some employers seeking to hire men for lifting jobs, even if a female refugee was strong. Overall, it is postulated that pervasive gender norms – be they with the

Bhutanese culture or with the Pittsburgh area employment structure – may influence labor force participation and unemployment rates.

After running the regression for unemployment rather than labor force participation (Model 10 in the appendix), there are no significant differences between unemployment rates for men and women, although all of the men who are not employed would accept employment if offered versus less than half of the women who are not employed.[47] This suggests that this population of women is less likely to be willing to participate in the labor force than men, whether due to caring duties, discouragement from structural barriers, or some other factor. The study may also be underpowered and unable to provide good correlational analyses, particularly for unemployment and smaller subgroups.

Although the evidence is unclear here, a descriptive exploratory analysis was run with the responses for the barriers to attending education. In the 'other barrier' category, twenty people responded that they had barriers due to children, babies, taking care of people (1), or being pregnant (1). Of these twenty responses, 17 were from women and 3 were from men. Additionally of these twenty respondants, 7 were employed (2 men), 5 were unemployed (1 man), and 8 were not in the labor market and not looking to enter (no men). Although these numbers do not control for other factors, this descriptive examination of childcare barriers to education supports the qualitative data on distributive

[47] Men are less likely to be unemployed in this model (OR: 0.76, 95% CI: 0.25-2.29), but this difference is not significant in this model. In total, 23 people are unemployed 8 men and 15 women versus 8 men not working and 37 women not working.

caring responsibilities and on these responsibilities being part of the reason women were not entering the labor force.

Age also marked a point of social differentiation that statistically correlated with being employed; being older by one year increases the odds of being employed (OR: 1.08). Importantly for age, an interaction term was added to disentangle the contribution of physical (dis)ability by incorporating that variable and the interaction term separately. In the first analysis without this interaction term (Model 9 in the appendix), age was not statistically significant and being physically 'able' was statistically significant (p<0.01); those who are physically able were 12.9 times more likely to be employed versus those who were not physically able in that model. As adding the interaction term changes this statistic, it suggests that age may contribute to physical ability to stand and work eight hours in a row and that without the addition of disability, older individuals are more likely to be employed. This could be due to a number of factors, such as no longer pursuing education or having more of a previous work history. Indeed, in the unemployment model previously discussed, age is not significantly correlated with unemployment, suggesting that some of the lack of labor force participation may be voluntary for younger individuals.

The last correlation of interest for predicting employment was household size. From the average, if the household size increases by one, the odds of being employed decreased (OR: 0.66). This is the only variable that kept statistical significance in the unemployment model (unemployment OR: 1.71, p=0.008, see Model 10). There were numerous theories for this from the contextual research:

perhaps larger households had more individuals who needed or were providing care for others, which in turn provided a barrier to employment. It is also possible that unemployed individuals were more likely to live with relatives in a larger household. However, for the caretakers, those individuals looking after individuals with significant disabilities may have been counted as employed or unwilling to take work (i.e. not in the labor force). In Pennsylvania, providing care to a severely disabled person who is on Social Security Income (SSI) can be a paid position for a relative in the household or individual outside the household. This state law allowing individuals to be paid to take care of relatives with care needs was one reason that refugees said they moved to Pennsylvania. If household size expanded based on extended networks of employment and economic need, this would align with the traditional extended networks of Bhutanese refugees (Hutt, 2011; Mitschke, Aguirre, & Sharma, 2013). Other resettled refugee populations with collectivist cultures, such as Southeast Asian refugees, have been shown to retain traditional beliefs for financial responsibility for the family as opposed to North American individualism (Johnson, 2003), but little information is available about Bhutanese financial responsibility beliefs post-resettlement.

The correlation finding for household size may have been thus been related to household formation; it may also be a proxy for another variable. For example, it may be related to housing size and distribution with could relate inequities by neighborhood. The neighborhoods with visibly larger housing units on average (i.e. old row houses) were in the neighborhoods of Mount Oliver and Carric, which also had the lowest labor market participation rates. This was first

hypothesized qualitatively, and the descriptive statistics for the household size were later explored. Mount Oliver and Carric were indeed two of three neighborhoods with above population-average mean household size (Mount Oliver: 5.42 people/household, Carric: 4.41 people per household, and Green Tree: 4.71 people versus an average across the population of 4.26), and they were also neighborhoods more recently settled by Bhutanese refugees and with a mix of caste and religions. Households may have grouped in part related to available housing, and individuals in these neighborhoods may have been disadvantaged for other reasons than household size. The connections between the ways resettled refugees form households and their employment outcomes are under-researched.

Gross income

Paralleling the analyses for employment status, predictors of gross income were examined first by bivariate relationships and then through linear regression for this continuous variable. From the literature, it was hypothesized that gender, age, physical ability, time in country, time at workplace, having a partner, household size, English level, and education level may affect gross income.

For the bivariate tests, gender was significantly correlated with gross income [z=-3.23, p=0.0012], as was English level [Spearman's ρ=0.42; p<0.001] and education level [Spearman's ρ=-0.30; p=0.0028]. Given the collinearity between English and education level,[48] only one was included in the final analysis. English level was theorized to be more important to obtain a job, but education was

[48] Education level sig. correlated with English, Pearson's χ^2=131.75, p<0.001.

assumed to be a more nuanced measure and more important to advance in pay (Mincer, 1974; Portes & Bach, 1980; Potocky-Tripodi, 2001; Potocky-Tripodi, 2003; Tainer, 1988). Thus, only education level was included in the final analyses.

Age did not correlate with gross income [ρ=-0.10; p=0.33], even when examined as a binary variable for those above and below 40 [t=1.18, p=0.24]. Despite age not correlating with income, it was included in the analysis as it was considered a central variable to social differentiation (e.g. age and gender). Given that those who were physically unable to work generally did not work and would not be considered part of population with gross income data, no measure of physical 'able' or disability was used for these analyses.

Time in country was hypothesized as important given the qualitative work and past literature. Refugees who had been in the country longer were hypothesized to have higher wages and income (Aalandslid, n.d.; Cortes, 2004; Hugo, 2013; Marsh, 1980; Siraj, 2007; Takeda, 2000) . The importance of having an American work history for getting a 'better job' was emphasized in the employment programming. In a bivariate correlation, time in country was found to be near-significant [Spearman's ρ=0.19; p=0.056]. Similarly, time at workplace was hypothesized to influence income-level as it would allow for raises and advancement in position. Time at workplace was found to significantly correlate [ρ=0.335; p=0.0007].

Household size was again tested for a bivariate correlation. Although there was a non-significant correlation [ρ=-0.168; p=0.098], this variable was used in the final analyses. The correlation was near-significant (p<0.10), and the Bhutanese population was hypothesized to work in household networks where income would be shared and individual earnings and wages might be influenced by the number of individuals in the household.

Again, the correlation of caste and religion with gross income was tested although they were hypothesized not to make a difference in pay. As hypothesized, neither was found to have a significant bivariate correlation [caste: Kruskal-Wallis χ^2=0.047, p=1.00, ANOVA F=0.03, p=0.97; religion: ANOVA F=0.95, p=0.39.]. Caste and religion were not included in the final analysis.

Linear regression is robust to a non-normal distribution. Thus, despite gross income being non-normally distributed, it was used in these models, and a model with bootstrap (10,000 reps) was also run to check for robustness to non-normal distribution. The primary model included all of the variables predicted as important and without high collinearity: gender, age, months in country, time at workplace, household size, and education level.

Model 2: Regression predicting gross income

Predictor variable	Observed Coef. ($)	Bootstrapped SE	Normal-based 95% CI
Gender (male)	47.12	35.16	[-12.20-116.02]
Age	0.37	1.90	[-3.37-4.12]
Time in country (months)	1.73	1.09	[-0.41-3.88]
Time at main job (years)	16.99	12.64	[-7.78-41.75]
Household size	-26.34*	13.20	[-52.22- -0.46]
Education level (reference category=no education)			
Primary	30.55	37.76	[-43.45-104.56]
Some secondary	103.49	88.10	[-69.18-276.15]
Secondary school graduate	70.41	44.07	[-15.96-156.79]
Some university	156.88	86.64	[-12.94-329.93]
Training school	375.40***	78.85	[220.86-529.93]
Bachelor's degree	77.63	41.58	[-3.90-159.16]
Graduate degree	206.64***	53.25	[102.27-311.01]

n=97
Replications=5551
Wald $\chi^2(12)=315$***
$R^2=0.358$
Adjusted $R^2=0.266$
Root MSE =124.6
*$p<0.05$, **$p<0.01$, ***$p<0.001$

This model was found to be significant ($p<0.001$). The model explained 35.8% of the variance in gross income. The only variables that significantly correlated with gross income, after all other variables were held constant, were household size (i.e. fewer individuals, less gross income) and the dummy variables of education levels of some university and training school (i.e. with these levels of education individuals earned more). Tested bootstrapped, the Wald $\chi^2(12)$test equaled 316, $p<0.0001$, and the root of the mean squared errors equaled 124.6; thus the test was robust to a non-normal distribution in gross income. The non-bootstrapped standard errors are presented in Model 11 in the appendix.

Another model was tested excluding age and time at job, which were hypothesized as less important. This model was again significant ($p<0.001$) and

explained 33.8% of the variance in gross income, nearly the same amount as the previous model. In addition to household size, some university, and training school correlating with gross income (i.e. with these levels of education individuals earned more). This model is shown in Model 12 in the appendix.

Implications of gross income model

It was possible to create a significant linear regression model for predicting gross income per week for individuals that explained over a third of the variance in gross incomes. Household size and certain education levels correlated with income.

Interestingly, a larger number of people in a household correlated with 'worse' outcomes: the participant earning less income per week, lower odds for employment, and higher odds for unemployment. The reasons for this are not known, but may have to do with household size being a proxy measure for a distribution for neighborhood wealth or quality, as previously explored in the section on implications of employment model.

As expected, education was an important indicator of income (Bevelander, Hagström, & Rönnqvist, 2009; Connor, 2010): refugees with higher post-secondary education generally had higher individual incomes, and particularly those with training school experience and some college (but not completed). Most of the refugees expressed an interest in more education and English classes, with a high write-in response for training programs. Given the relatively

small sample for the higher education categories, it is important to continue to explore these relationships and their causal pathways.

Wage

The wage rate an individual was paid was hypothesized to correlate with the same variables as gross income: gender, age, time in country, time at workplace, household size, English level and education level. Naturally, wage rate was hypothesized to be strongly correlated with income, but possibly vary, as wage rate does not take into the hours worked per week.

The correlation between gender and hourly rate was significant [Wilcoxon rank-sum (Mann-Whitney) test: z=-2.21, p=0.027], in line with women's hourly pay gap in the US (Miller, 2014). However, age did not correlate with hourly rate [ρ=-0.091; p=0.38], even when examined as a binary variable for those above and below 40 (z=1.27, p=0.20). Despite age not correlating with income, it was included in the analysis as it was considered a central variable to social differentiation (e.g. age and gender). Given that those who were physically unable to work generally did not work, no measure of physical 'able' or disability was used for these analyses.

Again, both English and education levels were significantly correlated with wage rate [English level Kruskal-Wallis χ^2=11.19, p=0.011; education level Kruskal-Wallis χ^2=22.41, p=0.002]. As education was hypothesized to correlate more with pay, only education level was included in the final analyses.

Time in country was again hypothesized as important as was a significant bivariate correlate [Spearman's ρ=0.29; p=0.004]. Similarly, time at workplace was again hypothesized to correlate with wage, as it would allow for raises and advancement in position. Time at workplace was correlated but was only near-significant [ρ=0.20; p=0.054]. As with the gross income model, both of these variables were included in the model.

Household size was again tested for a bivariate correlation. Although there was a non-significant correlation [ρ=-0.082; p=0.43], this variable was used in the final analyses given the importance of household size in other models.

Again, the correlation of caste and religion with gross income was tested although they were hypothesized not to make a difference in pay. As hypothesized, neither was found to have a significant bivariate correlation [caste: Kruskal-Wallis χ^2=5.39, p=0.15, ANOVA F=0.71, p=0.55; religion: ANOVA F=2.53, p=0.09]. Caste and religion were not included in the final analysis.

Thus,

Model 3 was created using predictive variables of gender, age, time in country, time at job, household size, and education level.

Model 3: Predicting hourly pay rate

Predictor variable	Observed Coef. ($)	Bootstrapped SE	[95% C.I.]
Gender (male)	0.67	0.44	[-0.20-1.53]
Age (years)	-0.03	0.02	[-0.08-0.02]
Time in country (months)	0.05**	0.02	[0.02-0.09]
Time at job (years)	0.10	0.19	[-0.27-0.47]
Household size	-0.29	0.18	[-0.65-0.08]
Education (reference category=no education)			
Primary school	-0.08	0.53	[-1.12-0.96]
Some secondary school	0.03	0.95	[-1.84-1.89]
Secondary school graduate	-0.45	0.68	[-1.79-0.89]
Some university	0.65	0.77	[-0.87-2.17]
Training school	5.24***	0.95	[3.37-7.10]
Bachelor's degree	0.81	0.63	[-0.43-2.04]
Graduate degree	2.75***	0.59	[1.60-3.91]

n=94
Replications=5484
Wald $\chi^2(12)=1087$***
$R^2=0.413$
Adjusted $R^2=0.326$
Root MSE =1.73
*$p<0.05$, **$p<0.01$, ***$p<0.001$

Implications of wage model

Model 3 showed that a model could be created for pay rate. This model explained 41.3% of the variance, considered very high in the social sciences. However, this still means there are other points of difference that explain the majority of the variance.

Secondly, the model for pay rate, like the model for gross income, showed the importance of time in country and of higher education. This research aligns with previous research on the correlation between education level and hourly wage for resettled refugees (Connor, 2010; Siraj, 2007). Time in country and higher education are intuitive predictive variables, as one would hope that accumulating an American work history and cultural knowledge as well as increasing education levels would increase pay. Again, however, this correlation

must be cautiously interpreted, not only because of the limitations in the research and variables used, but also because correlation does not mean causation. This model does not state that one leads to another, but only states that they correlate. Further research should be done to explore causation.

Furthermore, the 'clinical significance' of these observed differences is low in terms of time in country. The figure showed that those individuals who have been in the country one month longer make $0.05/hour more (or $2/week more assuming a 40 hour work week). This is not a considerable addition to purchasing power and does not therefore significantly upgrade living standards. However, the $5.24/hour more that someone with a training degree makes over someone without any education can add significantly more purchasing power. Some points of social differentiation may thus have a larger impact in pay and lived experience. Individual pay also has limited value to signify if households are able to purchase items and pay bills or if the households access an array of supportive services or if they are 'self-sufficient.'

Secondary models: enough money and accessing food assistance

Secondary models looked at predictive models for household finances of having 'enough' to pay the bills and for self-sufficiency by whether household accessed two types of food assistance: the government Supplemental Nutrition Assistance Program (SNAP) and private food pantries/food banks (often located in churches or community spaces). Other measures of assistance did not have enough of a spread of responses to examine assistance beyond program requirements (e.g. very few families access TANF and WIC served those with women, infants, and small children in their households). These three measures

of having 'enough', using SNAP, and using private food pantries explore three concepts of household economic independence: use of government services, use of nonprofit services ('civil society'), and ability to meet financial needs with assistance.

As seen in Table 11 below, pairwise correlations for these models were examined using minimal variables.

Table 11: Pairwise correlations for having enough money and service usage

	House-hold size	Time in Country	Caste	Employ ment Status	Gross Income	Def. Enough	SNAP	Food Bank
Household size	1							
Time in Country	0.13	1						
Caste	-0.05	-0.22	1					
Employment Status	-0.34***	0.003	0.003	1				
Gross Income	-0.17	0.22	0.04	0.017	1			
Definitely having enough money	-0.04	0.17	-0.04	0.04	0.28	1		
SNAP	0.14	-0.01	-0.078	-0.29*	-0.094	-0.15	1	
Food Bank	-0.07	-0.09	-0.14	-0.1053	-0.0279	-0.042	0.24	1

As these three outcome measures are all household measures, household-level predictor variables were used, such as household size, time in country, caste, and religion. Exploratory analyses were also done with the employment status and gross wages of the individual chosen at random to respond to the question.

Enough

As per pre-analysis plans, the variable for enough was dichotomized to the household 'always' has enough money to pay the bills and 'sometimes' or 'most of the time' does not have enough money to pay the bills. In observing the survey completion, people seemed hesitant about which category they belonged in unless they felt that they always had enough money. As discussed in the demographics chapter, no one wrote that they never had enough money, so the

answer did not have the same sensitivity in determining gradients of financial stability. The original question asks, 'with assistance, how often do the people who live with you have enough money to pay all of your bills such as housing, transportation and buying necessary goods like food?' This question thus probes the ability of household to pay for their financial obligations in their current state, including accessing services.

Bivariate relationships were examined before running the model. Time in country was significant [Mann-Whitney Test z=-2.16, p=0.031]. The effect of household size was non-significant [Mann-Whitney Test z=0.74, p=0.46]. Both were maintained in the model due to their hypothesized significance and given the significance of household size in other analyses.

To analyze the importance of social groupings, both religion and caste were examined. For the relationship between definitely having enough and religion, Fisher's exact test provided a statistically significant correlation [p=0.045]. If categorized into a religious structure with three social groupings (grouping Kirat and no religion/other under Buddhist), three religious categorizations were near-significant [$\chi^2(2)$=5.92, p=0.052]. The effect of caste was non-significant [Fisher's exact p=0.661]. Although caste and religion overlapped, religion seemed to be more important than caste in this quantitative analysis and in the qualitative data regarding how individuals formed social groups. Therefore only religion was used in the final model.

As expected, individual variables did not correlate with this family-level variable. Being employed was non-significant [Pearson's $\chi^2(1)=0.24$, $p=0.63$], as was being able [Pearson's $\chi^2(1)=0.007$, $p=0.936$], age [$t=-0.052$, $p=0.48$], gender [Pearson's $\chi^2(1)=0.11$, $p=0.74$], English level [Pearson's $\chi^2(1)=1.77$, $p=0.62$], and education [Fisher's exact $p=0.22$]. This is a promising finding as it may indicate that the question was not interpreted drastically differently by individual demographic characteristics (e.g. women versus men always answering 'not enough', despite both being equally likely to be chosen from within the household to answer). Individual-level variables were not used, as they neither made theoretical sense nor practical sense. For those working, gross income was statistically significant with their household's ability to pay the bills [$z=-2.78$, $p=0.005$], which was examined in a separate model.

Implications of 'enough' for all households

A model for predicting having enough money to pay all of the bills was created. In this model, only the three prominent religions are used; the two individual responses for Kirat and none/other religion are dropped due to a sample size of one perfectly predicting an outcome, leaving a sample of 140. The generalizability would then only extend to Bhutanese who are Hindu, Christian, or Buddhist in Pittsburgh.

Model 4: Predicting having 'enough money'

Predictor variables	Odds ratios	SE	95% CI
Household size	0.84	0.12	[0.64-1.11]
Time in country (months)	1.03*	0.01	[1.00-1.05]
Religion (reference category=Hindu)			
Christian	0.21*	0.17	[0.04-0.98]
Buddhist	0.98	0.52	[0.16-2.64]

n=140
LL = -89.02, LR $\chi^2(4)=11.91$*
Pseudo R^2= 0.063
* $p<0.05$, ** $p<0.01$, *** $p<0.001$
Goodness of Fit:
Hosmer-Lemeshow $\chi^2(8)=4.78$, $p=0.78$
Pearson $\chi^2(111)=114.09$, $p=0.40$

The model was significant at the 5% level using the likelihood ratio chi-squared, and the goodness of fit could not be rejected using either the Hosmer-Lemeshow-Sturdivant goodness of fit test or the Pearson chi-squared test. The model showed that Christians were significantly less likely to have all the money to pay the bills (OR=0.21), and those who had lived in the country longer were significantly more likely to pay all of the bills (one month above the mean had an OR=1.03) when controlling for household size and religion.

Implications of 'enough' for households where the respondent was working

In Model 5, variation in whether a household definitely had enough is considered for those households where the respondent was working and considered himself or herself belonging to one of the three major religions (*n*=97).

Model 5: Predicting definitely enough including respondent's gross income

Predictor variable	Odds ratios	SE	95% CI
Household size	0.78	0.16	[0.53-1.17]
Time in country (months)	1.02	0.02	[0.99-1.06]
Gross income/week	1.00	0.00	[1.00-1.01]
Religion (reference category=Hindu)			
Christian	0.18	0.20	[0.02-1.57]
Buddhist	1.07	0.68	[0.31-3.70]

n=97
LL=-59.20, LR $\chi^2(5)=13.74$*
Pseudo R^2= 0.104
* $p<0.05$, ** $p<0.01$, *** $p<0.001$
Goodness of Fit:
Hosmer-Lemeshow $\chi^2(8)=2.31$, $p=0.97$
Pearson $\chi^2(91)=97.54$, p=0.30

In this model as well, the goodness of fit could not be rejected. Interestingly, none of the variables are statistically significant for this smaller, more narrow population, perhaps indicating that none of the factors play a major role after obtaining a job. It is also possible that the study is underpowered for this model.

One interesting finding is that an individual's gross income did not predict (OR: 1.00) the household always having enough money to pay the bills after controlling for household size, time in country, and religion. This may indicate more complex social structures for paying the bills or a household's reliance on assistance. This reiterates the need to study Bhutanese refugees' social and dependency networks in greater depth.

SNAP

For the SNAP model, time in country, household size, and religion were included. Time in country was non-significant [Mann-Whitney Test z=0.115, p=0.908], but was still considered a fundamental household variable for which it was important to control.

Assuming a non-normal distribution, there is a correlation but no statistical significance between SNAP usage and household size [Mann-Whitney Test z=-1.60, p=0.11].[49] Given the importance of household size in other analyses, and that the criteria for receiving SNAP varies on the household size, the researcher maintained this in the model as an independent variable.

Both religion and caste were examined to look at the social structure. Religion had a non-significant correlation with SNAP usage [Fisher's exact p=0.335] as did caste [Fisher's exact p=0.661]. Maintaining the logic used previously, religion was used in the model, partially as an indicator for social grouping.

At first, a model was run excluding employment, to incorporate only variables that could be classified as at the household level. However, this model was found to be non-significant using the likelihood ratio χ^2 test (see appendix, Model 13). A second model was run, incorporating whether the individual responded was employed. As there is an earning maximum for SNAP, employment was theorized to correlate. This model (below) was significant [LR χ^2 test, p=0.0019], and employment of the respondent did correlate with household SNAP usage [p<0.01].

[49] Using a one-tailed t-test assuming normal distribution and that larger household would be more likely to receive SNAP, household size is significantly different between households who currently use SNAP and households that do not [t=-1.71, p=0.045]. Normality would be reasonable to assume considering the descriptive statistics of household size, and the assumption of direction (i.e. one-tailed) would also be reasonable given that SNAP is a means-tested program that is easier to receive with larger household sizes. However, these findings assumptions were not definitive, and, are thus not assumed in this case.

Model 6: Logistic regression predicting household SNAP usage

Predictor variable	Odds ratios	SE	95% CI
Household size	1.22	0.22	[0.86-1.73]
Time in country (months)	0.99	0.01	[0.96-1.01]
Employed	0.15**	0.10	[0.04-0.54]
Religion (reference category=Hindu)			
Christian	0.44	0.27	[0.13-1.47]
Buddhist	0.58	0.34	[0.19-1.80]

n=141
LL = -73.61, LR $\chi^2(5)=19.08$**
Pseudo $R^2=0.115$
* $p<0.05$, ** $p<0.01$, *** $p<0.001$
Goodness of Fit:
Hosmer-Lemeshow $\chi^2(8)=13.07$, $p=0.93$
Pearson $\chi^2(119)=114.40$, $p=0.60$

Implications of SNAP model

Interestingly, only the employment status of the individual being interviewed (i.e. employed in the labor force or not in the labor force) significantly correlated with the likelihood of someone in the household using food stamps when controlling for the other variables. Being employed or not may have been indicative of the earnings for the household, but this is not necessarily the case as many households were low-income working households which would have qualified for SNAP. Furthermore, the earnings maximum increases as household size increases. The fact that no significant findings were found with religious group is promising as this type of assistance is supposed to be only needs based. Additionally, it was anticipated to find a negative correlation between time in country and SNAP usage (as found very slightly in this work), which accompanies the broader trend of the resettled refugee 'wage' gap closing over time (Connor, 2010; Hugo, 2013). However, this study may have also been under-powered and it is important not to over-interpret results.

Additionally, households received their support not only from governmental sources such as SNAP, but also from community-based services such as food banks. This is explored in more depth below.

Food bank

The use of a food bank was theorized slightly different than whether a household had enough or used the federal services like SNAP, partially because connection to food banks was not mandated by resettlement services. Food banks operate as more of a community-based mechanism than other services, and they were often not directly connected to refugee resettlement services but were listed in the client handbook. In the service delivery, one resettlement agency had just begun having a 'basket' provided by food bank after initial arrival, but only for a short time for newly arrived refugees. No direct connecting of refugees to food banks was observed for the other agency. In 2008, the author once assisted Bhutanese refugees in going to a food bank, but it was very difficult to find with a considerably long bus ride and had little culturally sensitive food. The fare for bus alone may have been prohibitive for some families. Thus, food pantries were available more readily in certain neighborhoods and churches. As they did not have the same stringent eligibility criteria as government services such as SNAP, people in household, time in country, neighborhood, and religion were accordingly initially hypothesized to correlate.

Like the other categories, the number of people in the household (i.e. mouths to feed and potential care burden) was hypothesized to correlate with using the

food bank. This was non-significant in the bivariate relationship [t=0.86, p=0.81] but was maintained in the model as a control.

The time in country was hypothesized and connections were hypothesized to correlate. This was not significant using either the Mann-Whitney rank-sum test or the t-test [z=1.09, p=0.28, t=1.02, p=0.30], but was again kept in the model as a control.

Neighborhood was hypothesized to correlate and showed bivariate significance (Fisher's exact p=0.030). Religion was also hypothesized to correlate and was found to be non-significant (p=0.305). However, it was again maintained in the model out of interest and as a control.

This led to Model 7, shown below. Due to perfect correlation and small samples, the model omitted those who lived outside these neighborhoods (e.g. individual households) and identified as Kirat or other religion. None of these omitted households accessed a food bank, despite 46% of households currently accessing food banks.

Model 7: Household food bank usage

Predictor variable	Odds ratios	SE	95% CI
Household size	0.98	0.15	[0.72-1.33]
Time in country (months)	0.97	0.02	[0.94-1.01]
Religion (reference category=Hindu)			
Christian	2.02	1.58	[0.44-9.34]
Buddhist	0.61	0.34	[0.21-1.79]
Neighborhood (reference category=Prospect Park)			
Bellevue	0.73	0.60	[0.15-3.65]
Green Tree	0.04**	0.04	[0.00-0.36]
Mount Oliver	0.15*	0.14	[0.03-0.88]
Carric	0.68	0.42	[0.20-2.28]
Castle Shannon	1.04	0.65	[0.31-3.55]
Leland Point	0.36	0.23	[0.11-1.24]

n=137
LL = -82.50, LR $\chi^2(10)=24.66$**
Pseudo R^2= 0.130
* $p<0.05$, **$p<0.01$, ***$p<0.001$
Goodness of Fit:
Hosmer-Lemeshow $\chi^2(8)=10.29$, $p=0.25$
Pearson $\chi^2(120)=125.97$, $p=0.34$

Implications of the food bank model

The model fit could not be rejected. None of the variables are statistically significant except for low food bank usage in two particular neighborhoods: Green Tree and Mount Oliver. No controlling for need was done, in part because of the interest in who accesses the food bank outside of measures of economic deprivation and because of the relative lack of financial hurdles for accessing a food bank. The two neighborhoods with significantly lower food pantry access are both mixed caste and religion neighborhoods where the individuals surveyed reported relatively low earnings, as seen in Table 9: Neighborhood comparisons in Chapter 6. Food security was not examined for this population, but food assistance may help families use their money for other ends. From a policy perspective, the result shown from this model is an indication of a possible need to target policy towards food assistance in those neighborhoods.

Religion did not significantly correlate with food bank usage when controlling for other items, although in this model Christians were two-times more likely than Hindus (and over three times more likely than Buddhists) to access a food pantry. Food assistance may be classified as a humanitarian need, in which case it should be done on principle, without regard to an individual's religion, caste, age, or other marker of diversity. In reality food banks operate as private NGOs that target certain populations. In the 'food banks' listing, one location is listed, that of the Salvation Army, where lunch is offered free but only after one first attends a church service. Tying services to religion or religious service attendance was much-discussed in the 2013 Workshop on Bhutanese Resettlement, as stories like this emerged from around the US and touches on a current debate and growing literature about the faith-based services for refugees (Eby, Iverson, Smyers, & Kekic, 2011; Fiddian-Qasmiyeh, 2011; Ives, Sinha, & Cnaan, 2010).

The differences in food bank usage must be cautiously interpreted as only two neighborhoods were significant and the model and data do not tell anything about the households' food security (i.e. the need to use a food bank). Disparities between food bank usage become an issue of concern when food banks play a humanitarian role or fulfill a basic need that the government is failing to address. Households may be more or less likely to access food banks due to a variety of factors including geography, social networks that include neighborhood or church-based food banks, being more in need, or due to another mechanism altogether. Additionally, those households that access food banks may be more likely to group demographically, such as identifying as Christian or living in a

certain neighborhood. It is impossible ascertain these factors with the existing research, but the roles of neighborhoods and religion when accessing nonprofit services should be further researched.

Model for mental wellbeing

The correlational model for wellbeing was completed with the SF-12 composite measure for mental wellbeing. This was a normally distributed score, which allowed for more sensitive statistical tests for significance. However, the findings should be treated cautiously as the qualitative work highlighted the delicate nature of discussing and reporting mental health and the potential unreliability of the SF-12. Additionally, only 135 of the 145 survey respondents completed enough of the SF-12 to calculate the composite mental health score.

Bivariate correlations

Based on hypothesized correlates, bivariate correlations were examined for gender, age, time in country, being physically able to work, employment, English level, education level, and the household having enough money to pay the bills.

As discussed in the Chapter 7, mental health may vary based on gender, age, disability, and time in country, due to issues from past traumas as well as current social pressures and integration challenges. Practitioners and Bhutanese refugees expressed concerns about particular refugees based on these demographics. Both the standard demographics of age and gender were found to be significant [gender(male): t=-2.6921, p=0.008; age: t=-2.33, p=0.022]; being male and being older both correlated with more positive mental health. Being

physically able was significantly correlated with mental health [t=-3.92, p=0.0001]. Some refugees and service provider thought time in country may affect mental health through integration, as expressed in sentiments such 'people who came in 2007, 2008, 2009…are doing good' or discussions by service providers about the increased complexity of mental health issues. However, this was non-significant in bivariate calculations [t=1.67, p=0.98], but maintained as a control.

Being employed was hypothesized to improve mental health, possibly through decreasing financial worries or through improved integration, and was upheld in bivariate calculations [t=-2.07, p=0.040].

English and education levels were also hypothesized to correlate with mental health due to both integration potential and due to those with better mental health being more willing to learn English and gain higher levels of education. Both English and education correlated, although the correlation for English level was stronger and the correlation with education was only near-significant [English: ANOVA F=4.60, p=0.0043, by regression, no English has t=-2.19, p=0.030 and very good English t=2.15, p=0.03; education: ANOVA F=1.77, p=0.099, those with no education were more likely to have lower mental health]. Again, since English level and education level are highly collinear, only English was used in the model.

It was also hypothesized that having enough money to pay the bills would correlate with mental health wellbeing. As a hierarchical variable, this was

marginally significant [F=2.95, p=0.056] and, as categories, most of the time not having enough money to pay the bills was again marginally significant when compared to sometimes having enough money to pay the bills [regression: t=-1.91, p=0.058]. All of these variables led to Model 8.

Model 8: Linear regression for predicting wellbeing

Predictor variable	Observed Coef.	Bootstrapped SE	95% CI
Gender (male)	2.12	1.51	[-0.84-5.07]
Age (years)	0.02	0.09	[-0.16-0.21]
Time in country (months)	0.02	0.05	[-0.07-0.12]
Able	6.70*	3.21	[0.40-13.00]
Employed	-0.53	1.80	[-4.96-3.00]
English (reference category = speak English very well)			
Speak well	-1.69	1.71	[-5.03-1.65]
Speak a little bit	-2.26	1.75	[-5.70-1.18]
Cannot speak	-4.15	3.40	[-10.81-2.51]
Enough (reference category = always have enough money to pay bills)			
Sometimes have cannot pay	-1.20	1.43	[-4.00-1.60]
Most of the time cannot pay	-5.12*	2.41	[-9.84- -0.40]

n=133
Replications = 9999
Wald $\chi^2(10)$=23.18**
* p<0.05, **p<0.01 , ***p<0.001
R^2=0.19
Adj R^2=0.12
Root MSE =7.79

Implications for the mental health wellbeing model

This model for mental health was significant compared to no association, and explained 19% of the variance for mental health wellbeing. Being physically able correlated with having higher mental health wellbeing while the household having trouble paying all of its bills most of the time correlated with significantly lower mental wellbeing when also controlling for gender, age, time in country, employment status, and English level. These findings point to the role that financial worries and physically being able to work may have on mental health for the Bhutanese refugee population in Pittsburgh who completed the SF-12.

However, only limited conclusions can be drawn from the model, in part because only limited conclusions can be drawn from one regression model as well as due to the qualitative findings and higher nonresponse in this last and more difficult section of the questionnaire. The previous chapter highlighted the stigma of discussing mental health in the Bhutanese refugee community as well as the nature in which informants rushed through or seemed reluctant to respond to some questions. This SF-12 section may also have been more difficult to complete for participants and to analyze because it was a standardized questionnaire where the wording was prescribed, had possibly more interpretation concern, and did not necessarily incorporate the particular Bhutanese refugee ethno-psychology.

Chase and Bhattarai (2014) have highlighted that resettlement contexts may not acknowledge the markers of Bhutanese ethno-psychology. They discuss markers for negative mental health such as building tension in the heart-mind, disrupted functioning of the brain-mind, negative coping or inappropriate behavior, social status, shame, and somatic symptoms as well as positive resilience factors of 'subjective feelings of peace or lightness in the heart mind, as well as intersubjective markers such as positive community perceptions' (Chase & Bhattarai, 2014, p. 161). The SF-12 frames some of these concepts without as much nuance; this analysis only looked the mental health component, which included ideas like peacefulness, social functioning, vitality, and mental health, as shown in the measurement component model in Figure 9 (Ware et al., 2009, p.

20). Although the SF-12 has been well studied to attempt to make it comparable across translations, limitations still exist.

Nonetheless, this model is important for the research. Bhutanese mental health is often discussed within the Bhutanese community leadership structure and outside of the community (Ao et al., 2012; Chase, 2012; Chase & Bhattarai, 2014; Ellis, Murray, & Barrett, 2014; Mills, Singh, Roach, & Chong, 2008; Nelson, 2012; Pyle, 2014). On 28-29 June 2014, there was a conference on community initiatives for mental health and suicide prevention focusing on Bhutanese refugees in Pennsylvania, which included leaders from and members of Bhutanese communities in the state, other service providers, and individuals from federal agencies including the Office of Refugee Resettlement, the Substance Abuse and Mental Health Services Administration, the US Department of State. The existence of such events reiterates support to better understand and improve Bhutanese mental health, and to prevent suicide and suffering. The involvement of federal officials also aligns with the influence of national structures and policies on individual outcomes found throughout this thesis.

Conclusion

The models presented in this chapter reveal matrices of different correlations – between being male and being employed and earning more; between having a larger household and being less likely to be employed and more likely to earn less; between having higher education and earning more; between being Christian and being less likely to always have enough money to

pay bills; and between time in country and having higher wages and having enough money.

All of the models and findings need to be interpreted with caution as they are correlations and the sample size was not robust to detect small variations. Additionally, although the response rates were high, survey and item response rates were not perfect. There was no comparative sample to control for survey nonresponse so there was no controlling for missing data. Nonetheless, these findings point to areas of social differentiation in economic self-sufficiency. Based on this information and future studies, more specified programming could better target those in need or not accessing services, including more recent arrivals, those with lower education, those with larger households, and those living in specific neighborhoods. The correlations also point to potential risk and protective factors and mechanisms for employment, economic, and service deprivation. These should all be explored in future analyses.

Chapter 8. Discussion and Conclusion

Introduction

Policy makers and advocates have charged that refugees are 'abandoned upon arrival' and become part of the American poor (US Senate, Committee on Foreign Relations, 2010). For the Bhutanese refugees in Pittsburgh, there are variable outcomes, but this thesis has found that overall they too become part of the American working poor. This research has also highlighted that little is known about how resettled refugees are faring or how to improve their economic self-sufficiency. However, there is a moral imperative to understand how refugees, already abandoned by the nation-state system, are faring in those nation-states that resettled them. Furthermore, there are concurrent legal obligations towards refugees as well as programmatic structures to that assist resettled refugees in finding jobs, becoming self-sufficient, and integrating into society. This thesis has contributed to filling the gap in research on the economic self-sufficiency of resettled refugees with the aim of providing information to better inform these government and programmatic structures supporting refugees to attain economic self-sufficiency.

This section reviews the thesis as a whole by 1) examining the findings from the original three research questions, 2) detailing the contributions and implications of this thesis, 3) outlining areas for future research and reflection based on the research, 4) placing the findings in the context of the existing literature, and 5) outlining its implications for policy and practice.

Aims of the study and summary of findings

The topic of economic self-sufficiency fits squarely within an evidence-based framework, although the definition of economic self-sufficiency is contested and multidimensional. Given the state of the literature, the most rigorous design appropriate aimed to examine three questions: 1) How are specific refugee resettlement employment and economic self-sufficiency programs expected to work?; 2) How are these programs delivered?; and, 3) What is the current state of refugee self-sufficiency and what appears to correlate with improved outcomes? Mixed-methods research was used to answer these questions, including a literature review, systematic review, and fieldwork with resettlement agencies and the Bhutanese refugee community in Pittsburgh in three rounds between August 2012 and July 2013.

Research question 1: How are specific refugee resettlement employment and economic self-sufficiency programs expected to work?

This question was first examined through the literature review and by conducting expert interviews. In interviewing personnel with the Office of Refugee Resettlement, one employee emphasized an array of employment programming for the purpose of economic self-sufficiency. He also commented that they 'don't know what happens' to resettled refugees after a short period of time and 'everyone is looking for money' given concerns over different populations. The literature review revealed a history of the US resettlement program, also driven by this central tenet: the importance of finding any employment for resettled refugees, as soon as possible, to enable economic self-sufficiency. Concomitantly, programming was structured in a web of mandatory and discretionary programs with the major emphasis on entering the workforce

quickly and not using federal cash assistance. Through this review, it was determined that the theory of change had been little examined at the macro-level and a micro-level examination was needed to determine how programming was expected to work and worked in practice.

In undertaking observational research, document analysis, and interviews, the theory of change for specific interventions mapped onto the political emphasis and programmatic funding. The agencies worked through integrated case management to change refugees' proximal outcomes of cultural competency, job search competency, and budgeting while they worked with hiring agencies and employers directly to obtain early employment for refugees. The emphasis on employment included an often-unspoken assumption that employment led to economic self-sufficiency, which led to broader wellbeing.

Research question 2: How are these programs delivered?

Surprisingly, although detailed case logs are maintained, little information exists on how refugee resettlement employment and economic self-sufficiency programs are delivered. No manual was available, but the TIDiER framework and data analysis revealed a structured yet flexible delivery. In practice, refugee resettlement programming was delivered through the theory above: integrated case management and emphasizing economic self-sufficiency, namely helping a refugee find a job early and accepting it even if it was not ideal. Refugee resettlement agencies also retained an amount of variation and used the specific context of their environment and the individuals with which they worked to try to achieve refugees' economic self-sufficiency. Paperwork,

including reporting, was a large part of delivery. Refugees, resettlement agency workers, and employers viewed the refugee resettlement delivery as positive yet constrained by governmental requirements and resources. Again, a local level analysis returned to the focus of the programmatic and the structural constraints placed upon the service providers from the federal level.

Research question 3: What is the current state of refugee self-sufficiency and what appears to correlate with improved outcomes?

The literature review revealed that the current state of US refugee self-sufficiency was tracked through constrained measures of programmatic employment and outcomes. A myriad of variables were hypothesized to correlate with refugee self-sufficiency. The global systematic review examining the programmatic effects on outcomes revealed that little is known about what improves outcomes or the current programmatic state of refugee self-sufficiency. This global work revealed the need to look at a smaller community and do primary data collection in order to clearly capture a community's self-sufficiency and hypothesized correlates.

Fieldwork within the Bhutanese refugee population in Pittsburgh revealed a mixed picture of economic self-sufficiency. By and large, the Bhutanese population can be described as working poor, with labor market participation rates similar to those of the general American public but with wages and income much less than the average in Pittsburgh or the US. The population had a very low usage of cash assistance, the official measure of economic self-sufficiency by the government, but had a high usage of food assistance such as the

Supplemental Nutrition Assistance Program. For this population, the federal mandate to place employable individuals in work and off of cash assistance appeared to be met, but refugees reported insecurity in being able to pay household bills regularly, and had a high usage of other low-income assistance programs, as well as mixed results for wellbeing.

Correlations and predictive models for major economic self-sufficiency outcomes and hypothesized correlates were examined using a random sample from the Bhutanese refugee population in Pittsburgh. Some of the strongly hypothesized predictors held true in the models. Being male correlated with being more likely to be employed. Some higher levels of education correlated with higher gross income and hourly pay rate. Being employed was a predictor for a household to be less likely to use SNAP. Time in country correlated with hourly rate and a household always having enough money to pay the bills. Mental wellbeing was significantly lower for those who were physically unable to work and for those whose households had trouble paying the bills most of the time.

Other interesting grouping and social dynamics emerged. Being younger and having a large household size correlated with an individual being less likely to be employed, possibly because of other pursuits such as care duties or education. Individuals were more likely to have lower gross incomes in larger households, perhaps indicating a necessity to live in a larger household if one earned less or reflecting the particular nature of certain rental and neighborhood structures, or perhaps indicating something else. Additionally, being Christian was correlated with being less likely to have enough money to always pay bills, and certain

neighborhoods were less likely to use food banks. These findings fed into the demographic and qualitative findings of the importance of household and community networks, including the importance of neighborhoods in attaining economic self-sufficiency.

Contributions and implications

The first chapter outlined the importance of studying resettled refugees. Normative and legal systems categorize refugees as a population of particular concern that entails a moral obligation to forced migrants living outside of state protection. As part of the broader structural framework, the US has established and maintained a long-standing refugee resettlement program, with over one billion USD invested in domestic programming and around 70,000 refugees being resettled per year. Over four million individuals have officially resettled in the US since World War II and the programmatic push has been for their 'economic self-sufficiency.'

The existing normative structures lead to a moral obligation to better understand how refugees are faring and what may improve their outcomes. Interestingly, the review of the program by Fauss in the mid-1980s holds true today: 'The only unequivocal facts were that by 1981 the federal government had a refugee act under which it was spending $2.1 billion a year, refugees were making slow but steady progress in finding employment, and there were no clear indications whether the portion of funds spent on employment services or the implementation characteristics of services had any effect on refugee progress' (Fass, 1985, p. 125). There remains a large policy gap concerning refugees' economic self-sufficiency. This thesis has contributed to filling this gap by

comprehensively presenting the policy structure and highlighting this policy push for economic self-sufficiency.

The refugee resettlement literature focuses on lived experience, politics, and programmatic reports. The question 'does refugee economic self-sufficiency programming work?' was answered in the literature through a political lens: focusing on indicator reporting or qualitative summaries based on political viewpoints and small sample sizes. The answer does not focus on evaluations of effectiveness or even on how refugees are faring beyond anecdotal evidence. This thesis built on existing theories and literature to examine whether economic self-sufficiency programming works, how it is expected to work, how refugees are faring, and correlations.

The research methodology was innovative in that it framed refugee resettlement and economic self-sufficiency within a broader intervention and evidence-based literature, using a mixed-methods approach to understand various viewpoints and created a more holistic picture of refugee economic self-sufficiency. The research began with a global systematic review and ultimately focused on the programming for and economic self-sufficiency of Bhutanese refugees in Pittsburgh, all the while framing results in terms of the US resettlement program and what is known and not known about it.

This thesis included the first systematic review to look at interventions for resettled refugee populations and contributed to policy and academic understanding of effectiveness for this topic. Despite the broad terms of the review, it lacked includable studies, with an absence of evidence to determine how interventions affect resettled refugees' self-sufficiency and wellbeing. This systematic review thus showed what is not known for policy and practice in addition to what research does not focus on. The other systematic reviews focusing on resettled refugees examined the prevalence of serious mental health disorders and of women's reproductive health status (Fazel, Wheeler, & Danesh, 2005; Gagnon, Merry, & Robinson, 2002). This reflects a broader trend in the literature reviewed, namely that research on how refugees are faring is measured in limited terms, particularly medical ones. Although these foci relating to wellbeing are important to analyze and capture, the literature does not rigorously evaluate interventions to help resettled refugees.

The qualitative work and developed theory of change provided a first attempt to conceptually examine economic self-sufficiency interventions as offered in two agencies and to practically describe the self-sufficiency work of these two agencies. This revealed the importance of the national framework and funding in driving the work and theory of change for economic self-sufficiency programming. Both agencies used integrated case management to target proximal outcomes of cultural competency, job search competency, and self-sufficiency planning to lead to the primary proximal outcome of employment and retention, with hopes that they eventually lead to the distal outcomes of

economic self-sufficiency, wellbeing, and integration. The viewpoints on the programming revealed a level of satisfaction by all parties, but also cited room for much improvement, particularly for changes at the macro level (e.g. funding structures) to provide longer-term and more non-employment assistance to individuals.

The survey is noteworthy for focusing on the new and substantial low-income Bhutanese population in the US as well as for gathering a representative sample of a resettled refugee population – incorporating not only those who are currently accessing an agency's services, but also those who have migrated from other cities. Bhutanese refugees represent the single largest group of refugees admitted to the country through resettlement in 2012, the last reported federal fiscal year, and nearly 20% of all refugees resettled in the US in the past five fiscal years. This research took place in an urban area with one of the greatest concentration of Bhutanese, presenting ground-breaking demographics, rates of economic self-sufficiency, and correlational findings.

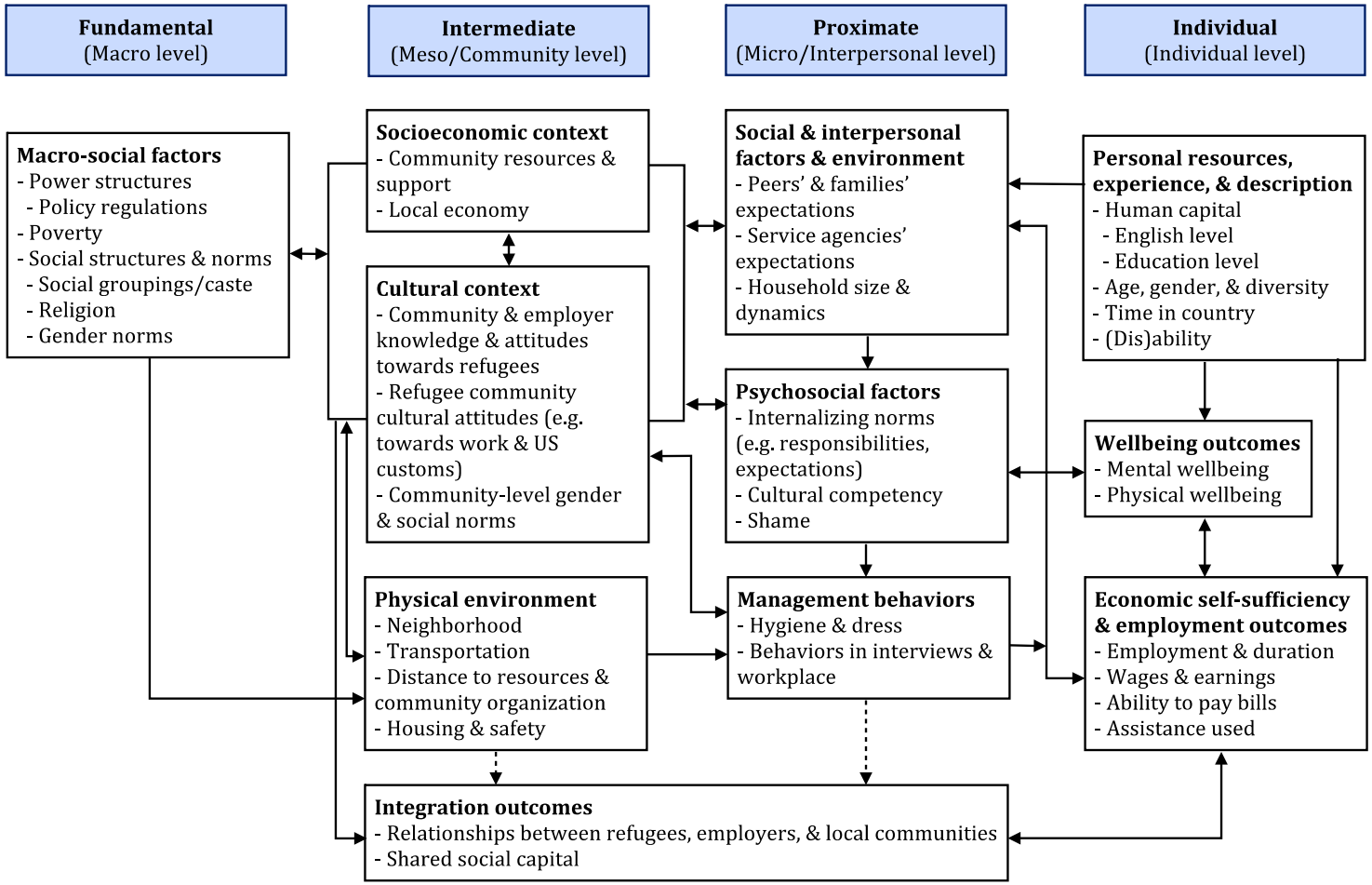
The Bhutanese refugee population was found to be an overall low-income group, with some households and individuals struggling while others did well. This finding implies there is a need for programming to help those who are struggling financially or with mental health issues. These needs found in the community are also of concern in the longer-term due to the broader structure of poverty in the US, a country with a weak social safety net. US poverty experts have called this 'stickiness at the ends' of the system (Cornish & Currier, 2011; Isaacs, 2008),

which creates barriers to climb out of poverty for the working poor. This was found to be true for the Bhutanese refugee population in Pittsburgh, as well.

The correlational analysis represents more robust analysis than normally carried out in this field. The correlates were based on the theory and literature outlined in Chapter 2, the data were specifically collected on hypothesized variables instead of relying on administrative data, and the statistical techniques were more robust and transparent, such as bootstrapping linear regressions and reporting goodness of fit for logistic regressions.

Merging ideas throughout the thesis, an ecological model for the economic self-sufficiency of Bhutanese refugees in Pittsburgh was produced, as shown in Figure 19. This drew on the US and global literature as well primary research. It was not possible to capture all ideas at play for economic self-sufficiency, so the model highlights only those that the author determined to be the salient ideas from this thesis.

Figure 19: Ecological model for the economic self-sufficiency of resettled refugees



The research showed that inter-related structures and concepts all affected economic self-sufficiency. First and foremost, macro-social factors played a fundamental role: power structures, policy regulations, structural poverty, and social norms drove economic self-sufficiency and employment. However, the intermediate level was also at play with its own socioeconomic context, cultural context, and physical environment. Resettlement agencies' work focused most on the proximate level such as social and interpersonal factors, psychosocial factors, and management behaviors. Additionally, there were individual level characteristics, such as education, English level, age, gender, disability, and time in country that affected outcomes. Economic self-sufficiency was also linked to wellbeing and meso- and micro-integration. Although economic-self-sufficiency outcomes were hoped to lead to broader wellbeing and integration in the programmatic theory of change, wellbeing and integration also affected economic self-sufficiency. Qualitative research showed physical health and mental health wellbeing as well as social capital in Pittsburgh and integration into American customs affected some refugees' employment. All of the findings serve as a basis for future research; interventions could target particular factors, contexts, and relationships on different levels of the ecological model.

Areas for future research and reflections

As discussed in the first chapter, research has the potential to occupy a space for meaningful examination and clarification of the following to take place: what is known already about refugee economic self-sufficiency, and the rigor of existing studies, how interventions are being delivered, how well refugees are doing, and ultimately whether interventions are efficacious in ideal settings and effective in real world settings. This thesis pointed out the gaps in knowledge

and built up knowledge in many of these points, highlighting the need for further study of the efficacy and effectiveness of interventions. Expanding on earlier points, this section discusses the need for replicating and creating longer-term studies, for qualitative process work, for evaluation studies, and for studies that expand their persons of concern.

Additional correlational research can confirm or challenge these findings with other populations. Other research designs, such as longitudinal research, can lead to a better understanding of how economic self-sufficiency and wellbeing changes over time and the directionality of correlations. Understanding the path of change can lead to a better understanding of mediators and moderators and how correlates may act as risk or protective factors. This type of research can highlight where problems are and key points to target in an intervention's theory of change.

Additional theory of change and process research should also accompany prevalence research to understand what interventions resettled refugees receive and how they work. This should be integrated with more qualitative research looking at perspectives around interventions. These perspectives could clarify for whom economic self-sufficiency is a problem and how interventions could be strengthened theoretically and in practice.

Fundamentally, knowledge about the efficacy and effectiveness of interventions with resettled refugees is limited due to the lack of rigorous designs, particularly randomized controlled trails. As highlighted in Chapter 1, randomized controlled

trials are able to more easily identify interventions as the driving factors for observed change. As highlighted in the systematic review and elsewhere, randomized controlled trials of employment interventions with low-income populations are prevalent, but have not covered resettled refugees with a comprehensive understanding of forced migration and the nuances and challenges it brings to low-income populations that are refugees, as well. These types of studies are needed to isolate the effects of interventions, and how they can be mediated to be most beneficial to this specific low-income population.

Future research, regardless of design, should also consider the dynamics of the variables that emerged in this research. Specifically, neighborhood emerged as a variable hypothesized to effect daily life and specific outcomes, such as usage of a food bank. Caste and religion also emerged as variables important in the experiences of the Bhutanese population, which should be considered in future research and programming to ensure inclusion as well as reaching the most in need. In other resettled refugee populations, different socioeconomic and cultural variables may be important, and may or may not mirror the larger US society. The conclusions that can be drawn from this research are limited, due in part to the limited population with which the primary research worked as well as due to the research limitations outlined in Chapter 3.

The research approach used in this thesis could be classified as being in line with a recent movement for 'lean research': relevant, rigorous, respectful, and right-sized (Counts, 2014; Wilson, 2014). The approach aimed to be relevant to policy and the respondents and apply the most rigorous design appropriate for the

field. At the same time, it aimed to respect the respondents and be right-sized (efficient) and not over-burden them with questions outside the purview of the thesis while remaining flexible enough to begin to explore questions as they arose. Concomitantly, there are in-depth analyses or questions that arose which could not be answered in the short survey and mixed-methods research design. This thesis and the areas of research in this section should therefore be seen as 'lean' parts of a much broader field of inquiry into resettled refugees.

Considering findings in the context of the existing literature

Indeed, the findings from this study should be seen in context of the extant literature. Findings have already been framed from within the US resettlement context explored in Chapter 1 and the influence of the national framework on the theory and implementation of programming at a local level. The findings can also be examined by revisiting theory and the literature.

The ways in which economic self-sufficiency and employment programming and outcomes fit with the ecological model and subsequent developmental contexualism and dynamic systems theory was covered in Chapter 2. Resettled refugees influence and are influenced by their environment; this changes over time and involves various resources and processes. This theoretical framework was used and upheld in the primary research: resettlement programming influenced refugees, but this programming was in turn individualized and influenced by them as well as by community needs and macro structures. The individual refugees and their families ended up with different career trajectories and wellbeing due to a variety of factors. Some refugees had bought houses and cars and had received higher education and higher-paying jobs; others were

struggling to pay hospital bills or find full-time work. Successes and struggles were not only at the individual and household level but also played into a complex interplay of networks of support and dependencies of family members, Bhutanese communities, and receiving communities. The programming provided by resettlement agencies, driven by federal mandates and funding requirements, also influenced success and struggles. Individuals talked about their lives being changed suddenly, such as finding employment or becoming injured, as well as gradually, through learning English and integrating slowly or being stuck in a low-paying job without options for career advancement.

In correlational and qualitative analysis, demographic variables (such as age, gender, and disability) and human capital (such as English language levels and education levels), receiving communities' assets (such as the job market and access to neighborhood food banks), and social capital (such as religious and social networks) were all hypothesized to influence outcomes based on the data. Some of the variables hypothesized from the extent literature in Table 3—including age, gender, disability, household size, education, and neighborhood—predicted economic self-sufficiency as wellbeing outcomes. These variables as well as their groupings are useful in considering the factors that may be at play to determine outcomes, but their influence varies based on specific populations and contexts, as outlined in the broader theoretical framework models, and based on the specific pathways and theories of change for outcomes and interventions. The multifaceted programming could thus be defined as a complex intervention (Lewin, Glenton, & Oxman, 2009).

The outcomes of economic self-sufficiency and wellbeing were also complex and varied based on their definition. As defined by the government and the *1980 Refugee Act* (Halpern, 2008), 94% of households were economic self-sufficient as they were not receiving a cash assistance grant. However, 72% of households were receiving SNAP, which provides food assistance for low-income households, and a majority of households (53%) had trouble paying their bills at least some of the time. These findings challenged the policy literature and definitions, but are unsurprising in the context of the US poverty literature (Andrews & Smallwood, 2012; Rosenbaum, 2013). Similarly, SF-12 mental health scores aligned with levels for the general population norm, but the measure did not capture cultural stigma or individual narratives. As one participant said, 'We're finding lots, about 95% of people having depression in our community, but they're hiding it…There are many reasons to be depressed.' The research both confirms the literature on financial and mental health struggles for resettled refugees while showing the resilience of much of the population and challenging narratives of vulnerability.

The utility of Bronfenbrenner's ecological model (1979) and subsequent theoretical frameworks (Lerner, 1991; Lerner, 1996; Tseng & Seidman, 2007) hinges on the ability to reduce a complex intervention into understandable, dynamic parts: economic self-sufficiency programming and outcomes are a result of 1) the concentric spheres of influence (fundamental, intermediate, proximate, and individual), 2) multi-directional processes, and 3) systems that change over time. In this research, social cognitive career theory (Yakushko et al., 2008) held true: an individual's employment and economic self-sufficiency

depended on a variety of interactions and could not be easily reduced to singular factors. The models in Chapter 7 only explained part of the variance for the outcomes; when controlling for other variables, some predictor variables that were significant in bivariate calculations were no longer significant. Many of the broader implications must be treated cautiously as the external validity could vary.

Implications for practice and policy

An important message of this thesis is the need for further research and further programing. From a practice perspective, this thesis emphasized that little is known about the effectiveness of interventions, and that the outcomes for resettled refugees are mixed based on employment, earnings, finances, assistance, and wellbeing. Refugee resettlement in Pittsburgh could therefore target those subpopulations found to have lower levels of economic self-sufficiency and wellbeing or not accessing services that may be beneficial. Practitioners could also reexamine their theory of change and practice to see if the work is following the desired pathway or if, for example, more work is needed in community consultation and changing macro-policy.

From a policy perspective, the mixed-findings of the implementation work suggested that additional financial resources and funding flexibility might be helpful for improving programming and outcomes. Integrated case management under the current funding levels and reporting requirements was not easy, as evidenced by the daily struggles in the resettlement offices to deal with individual cases and needs as well as with set paperwork and programming.

Programming reflected policy and funding – economic self-sufficiency (no cash assistance) and employment (any kind) as soon as possible was the main focus of both the theory of change and of the implementation in practice. This led to often unexamined priorities and programming structures.

Concluding comments

This thesis examined the economic self-sufficiency of resettled refugees in the US and interventions to improve their self-sufficiency. Conclusions are limited because of the complex political systems, the complex nature of interventions, and the complex nature of the Bhutanese refugee population examined in Pittsburgh. The work with resettlement agencies shows integrated case management and programming that strives towards employment and economic self-sufficiency, although it is much constrained by resources and funding mandates.

The primary research with resettled refugees provides a mixed picture of economic self-sufficiency: some individuals, households, and neighborhoods do well while others struggle. Overall, the statistics clearly present a population that is part of 'the working poor', with many households struggling to regularly pay bills. Wellbeing is also mixed, with some individuals recounting harrowing stories of expensive hospital bills and a daily life focused on the barest of economic survival. These findings are concerning due to the current struggle of this population as well as the potential longer-term implications that being resettled means becoming part of the American poor. A resulting question is whether this is the best that resettlement can offer and, if not, how this situation

can be improved. Further research addressing refugee economic self-sufficiency is important for it can lead to understanding that changes both policy and practice. As one Bhutanese refugee recommended, the 'government should understand the nature of the refugees arriving and put us with jobs that… allow the life to sustain.'

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Appendices

Appendix: Additional descriptions and details

Description of resettlement agencies

The following is a summary of the two resettlement agencies with which the research was conducted:

Jewish Family and Children's Service of Pittsburgh has been named as such since 1950, the outgrowth and merger of community Jewish charitable organizations in existence since 1843, and today provides social, psychological, and employment services as a non-profit. Their website states that, 'Since our inception, Jewish Family & Children's Service has been resettling individuals and families that have fled their homes due to fear of persecution, imprisonment or death simply because of his or her race, religion, nationality, membership in a particular social group or political opinion.' The refugee populations they served over the years have changed from primarily Jewish to more recent ones. JF&CS's 'services are provided and referrals are made without regard to race, color, religion, ancestry, national origin, place of birth, sex, sexual orientation, familial status, age, handicap or disability' (JF&CS, 2013). However, programs have specific eligibility requirements, including obvious requirements for resettlement and refugee employment services. Generally, secondary migrants needed a referral from the welfare office in order to gain employment services, and JF&CS refugee services has assisted a small number of asylees and human trafficking survivors.

The overall atmosphere in the organization was boisterous and positive. They are located in a traditionally Jewish neighborhood in Pittsburgh not far from

Carnegie Mellon University and the University of Pittsburgh. JF&CS's staff tasked with refugee oriented work included three individuals who were resettled in Pittsburgh as refugees: one Belarusian Jewish refugee, one Sudanese refugee, and one Bhutanese refugee and two other staff persons who had immigrant backgrounds from El Salvador and Hong Kong. In addition to the immediate staff in the refugee resettlement part of the office, they received significant support from the others in JF&CS including their financial manager, immigration lawyer expert, receptionist, and volunteers throughout the community. Their staff can be broken down roughly into the following 12 full-time positions supported by the larger agency and at times by volunteers and interns:

- Two positions in the office of the director
    - Director, Resettlement services
    - An Americorps member and volunteer coordinator[50]
- Five positions in employment
    - Refugee and Immigrant Employment Program Coordinator
    - Four employment specialists
        - One focused on Refugee Social Services clients, two general employment specialists, and one position as an Americorps
- Five positions in reception and placement
    - One health specialist
    - One arrivals specialist (e.g. housing and setup)
    - One reception and placement case worker
    - One refugee case worker
    - One Americorps member

In FY2012, JF&CS resettled around 227 refugees. They were primarily of Bhutanese origin but included some Burmese and Iraqi family reunification cases. JF&CS also took on a small number of secondary migrants for employment services and provided extended assistance to some refugees based on exigent circumstances and available capacity.

[50] Americorps is a US service program; in the context of these positions, individuals commit to a year position, receive a modest living allowance during their term of service.

Northern Area Multi Service Center (NAMS) began in 1968 as the Sharpsburg Community Center, which today is just one site or 'company' of five sites that form a Human Service Network commonly called 'Northern' and until recently known as the Northern Area Companies. Overall, NAMS provides a range of community service programs throughout the Pittsburgh region to 'help senior citizens, individuals with intellectual and developmental disabilities and refugees build and maintain their independence and an improved quality of life.' The refugee resettlement office of NAMS was opened in February 2011 as an affiliate of the national Volag USCRI as part of NAMS Community Assistant Program (Refugee Services Director, 2012). NAMS was most well known for their senior service assistance programs at the main office, and the Community Assistance and Refugee Resettlement (CARR) office was located across from the main office in Sharpsburg, a low- to middle-income, predominately white borough across the river on the North side from the boundary line of the city of Pittsburgh.[51]

The atmosphere was cordial and quietly busy. Although the office was not often bustling with clients during the months of observation, the staff was busy and often away with refugee clients. The staff scaled up from three people when they first began to nine a year and a half later during research period. The director was a Rwandan immigrant who had worked for Catholic Charities Refugee Services for many years and the staff included at least three Bhutanese refugees. The staff was also subject to fluctuation in numbers and roles; however, aside

[51] According to the 2010 Census, the Sharpsburg Borough numbered 3,446 people, 87% of whom are white. According to the 2000 Census, the median income for a household in the borough was $22,828, and the median income for a family was $30,500. About 14.0% of families and 16.6% of the population were below the poverty line (US Census Bureau, 2011).

from interns and Americorps positions, the staff generally consisted of the following nine positions during the months of observation, five full-time and four part-time:

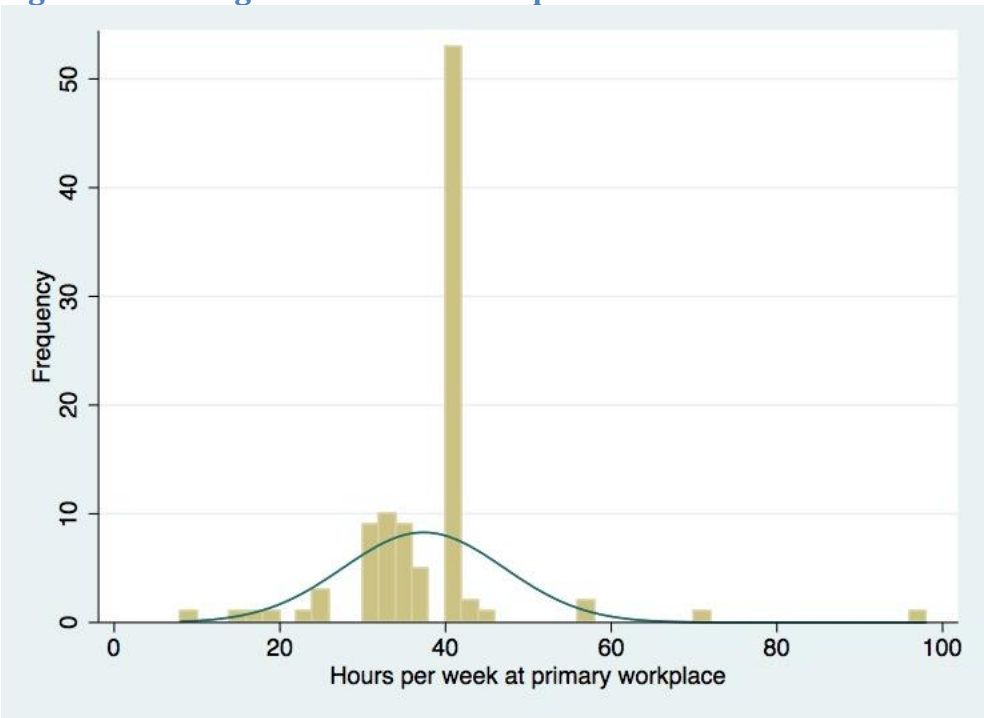
- One refugee resettlement director
- Two full-time job developers/employment specialists and one part-time
    - These were split between a Refugee Social Services (RSS) specialist, a Match Grant (MG) specialist, and one part-time specialist with secondary migrants although they helped each other.
- Two full-time and three part-time case managers assisting with reception and placement and basic non-employment case management tasks
    - The three part-time case management positions included one part-time medical and housing specialist, one part-time apartment setup and airport pickup specialist, and one part-time bus specialists. The bus specialist who worked remotely did ESL enrollments and medical appointments.

In the first year of existence (FY2011), the target resettlement number was 120 refugees, and Northern resettled 164. In FY2012, the target number was 150 refugees, but they resettled over 200 refugees. Their primary population has been and continues to be Bhutanese refugees, although they have also assisted two asylees and resettled a handful of Burmese Karen, Iraqi, and Burundian refugees. On top of resettlement numbers, they assist a small number of secondary migrants.

Other figures for employment and wellbeing measures

Additional the line shows the normal distribution for visual inspection of the normal distribution of the data.

Figure 20: Histogram of work hours per week



The two following histograms show income in USD on the x-axis.

Figure 21: Histogram of gross income per week

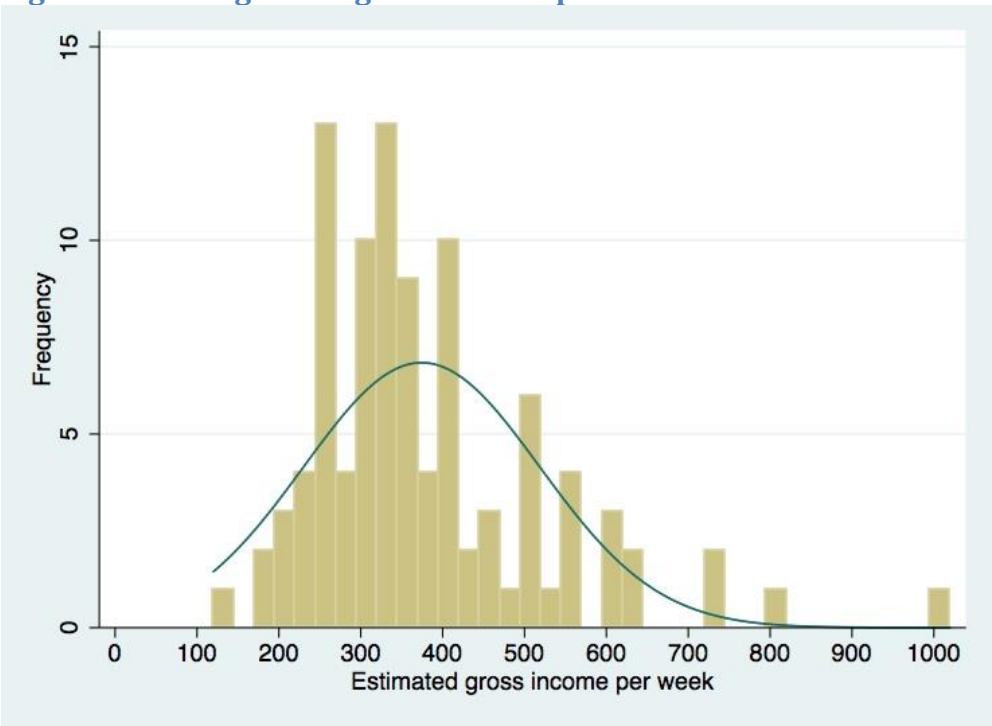


Figure 22: Histogram of net income per week

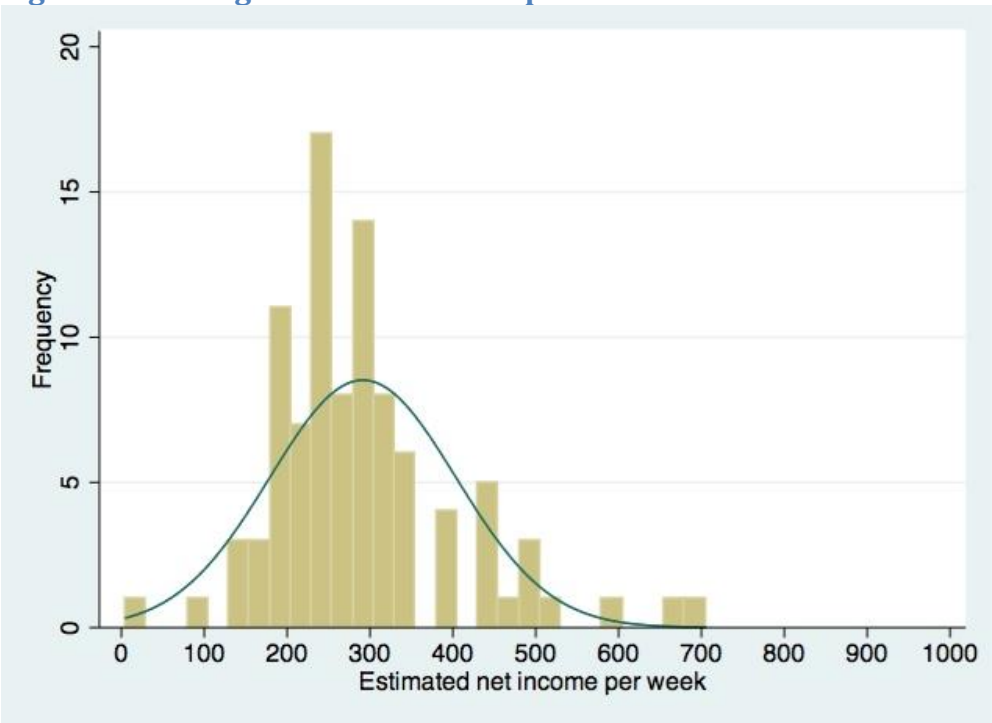


Figure 23: Histogram of SF-12 mental health component distribution

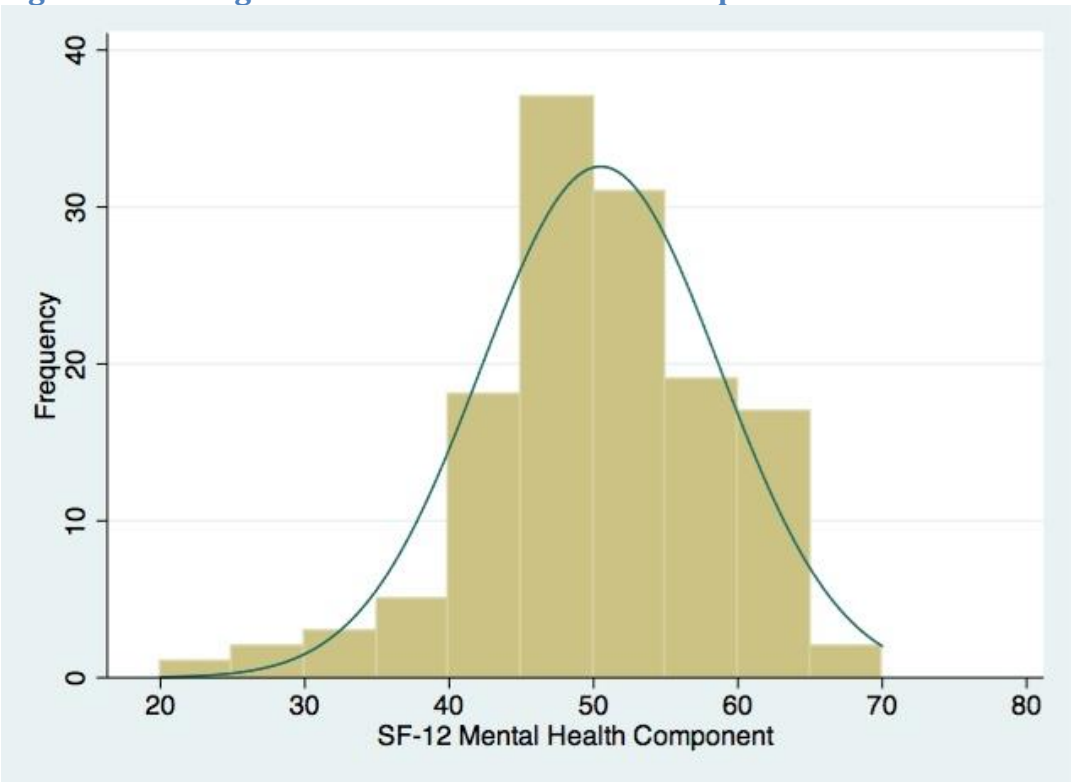


Figure 24: Histogram of SF-12 physical health component distribution

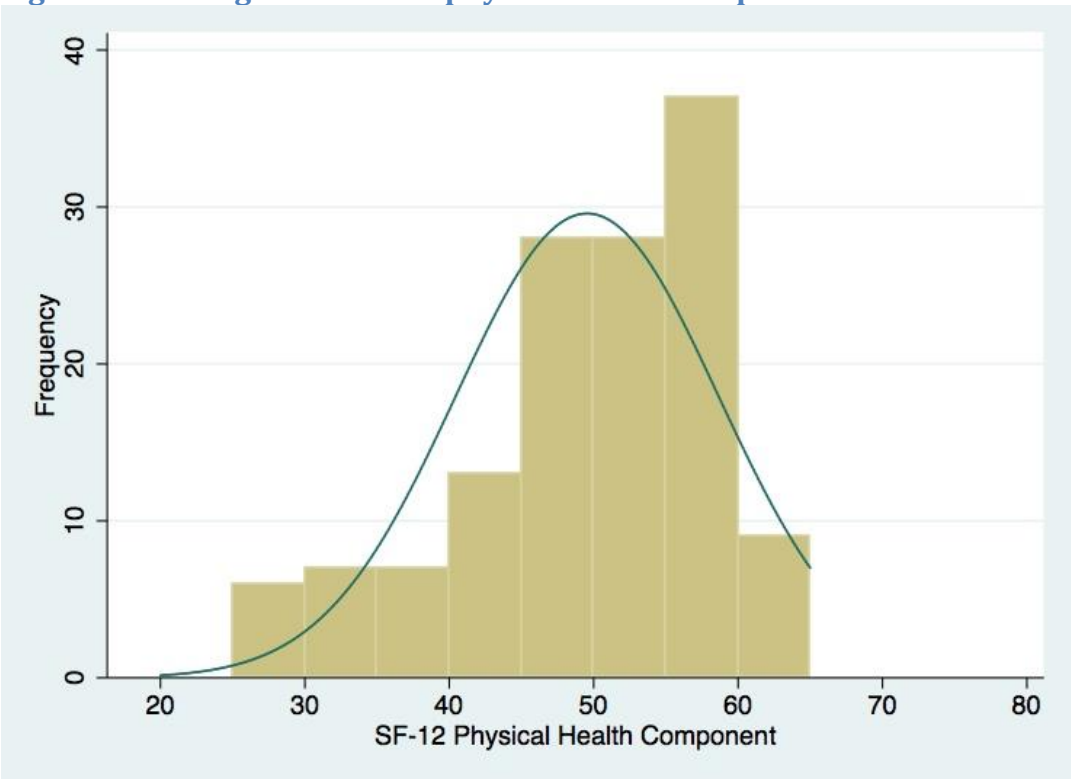
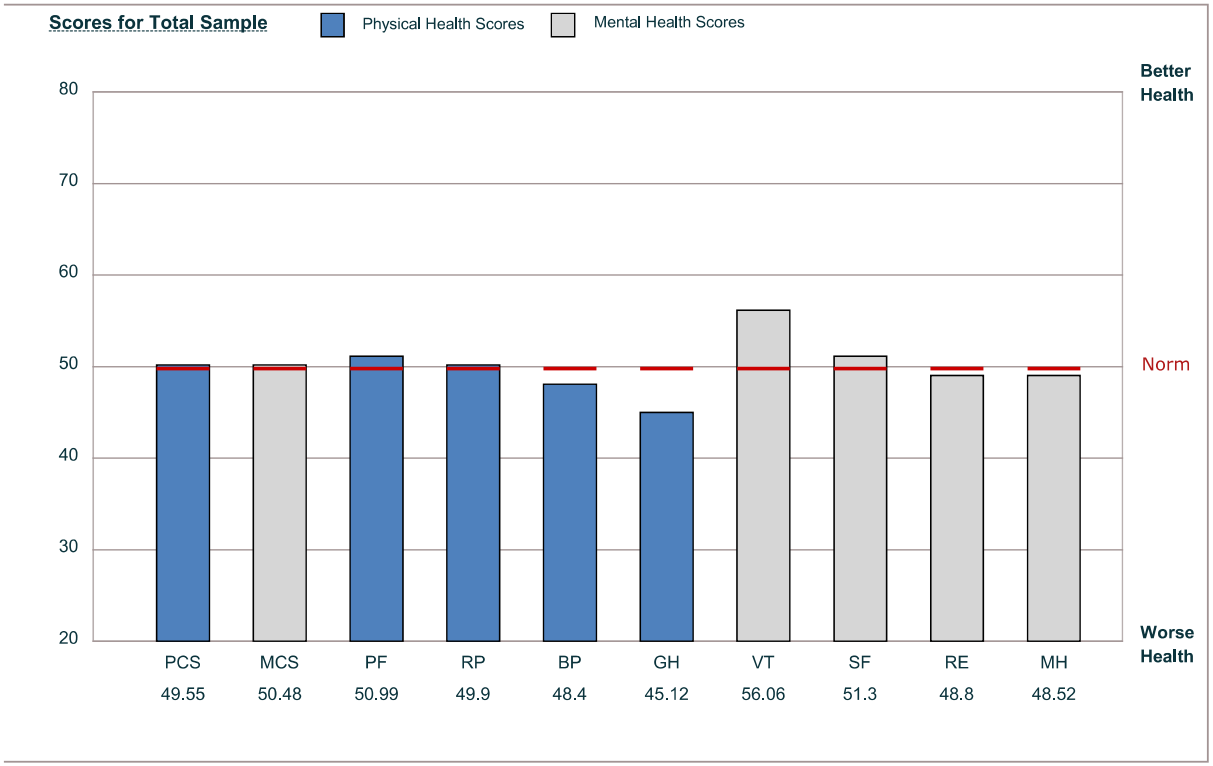
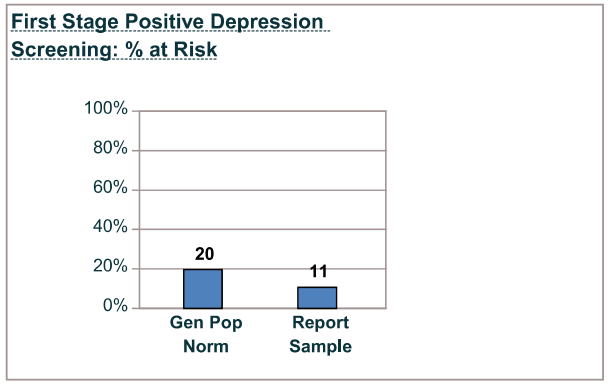
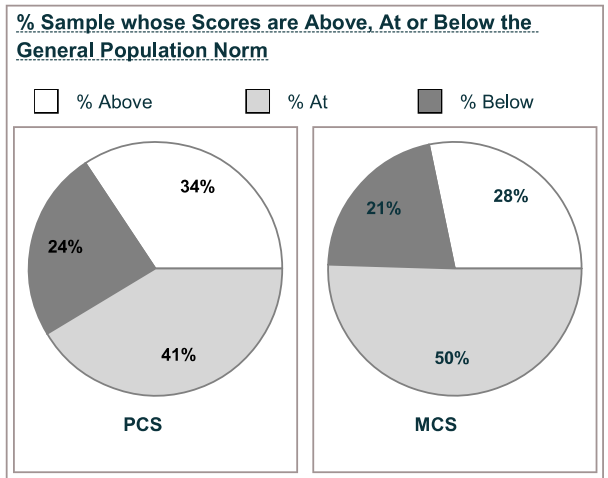


Figure 25: Summary of SF-12 results







Note: Totals may not equal 100%, due to statistical rounding.

Abbreviation
PCS = Physical Component Summary
MCS = Mental Component Summary
PF = Physical Functioning
RP = Role Physical
GH = General Health
BP = Bodily Pain
VT = Vitality
SF = Social Functioning
RE = Role Emotional
MH = Mental Health

Additional statistical explanation and models

This appendix provides a listing of common statistical abbreviations, additional narrative for the statistical tests, and additional models to explore the correlational relationship and statistics.

Frequently-used statistical abbreviations

CI: confidence interval

df: degrees of freedom

LL: log likelihood

LR χ^2: likelihood-ratio chi-squared test

MSE: mean squared error

n: number is analysis/subpopulation

N: number in total sample/population

OR: odds ratio

p: significance level

ρ: Spearman's rho rank correlation coefficient

SD: standard deviation

SE: standard error

t: *t*-test statistic

z: z-score test statistic

χ^2: chi-squared test statistic

Additional statistical narrative

As stated in Chapter 7, the relationships between independent and dependent variables of interest were examined. In other words, the null hypothesis that there is no correlation between outcomes and explanatory variables was tested. Binary analyses show correlations but do not take into account covariates or the individual effect of each variable. Pairwise correlations were run and then bivariate relationships were tested based on the nature of the

variables and standard statistics advice (Field, 2006; UCLA: Statistical Consulting Group, 2006)

Second, regressions (logistic or linear) were run to identify the effect of each independent variable on the dependent variables whilst holding other explanatory variables constant. Although statistics is a science, it is not an exact one. Thus, the terms of procedure are defended as relevant to this data and based on the standard procedures in the field combined with expert advice.

Table 12: Relationships between outcomes and demographic variables using Bonferroni corrections for multiple comparisons

Variable	Gender (male)[52]	Age (years)	Able[53]	House-hold size	Married	Edu. level[54]	English level[55]	Time in country (months)	Time in job (years)	Empl.[56]	Gross income	Hourly rate
Gender (male)	--											
Age (years)	-0.11	--										
Able	0.22	-0.49***	--									
Household size	-0.29*	0.23	-0.24	--								
Married/partnered	-0.11	0.24	-0.04	-0.02	--							
Education level	0.35***	-0.43***	0.33**	-0.26	-0.08	--						
English level	-0.41***	0.52***	-0.37***	0.32**	0.09	-0.72**	--					
Time in country	0.00	0.06	0.01	0.13	-0.07	0.13	-0.22	--				
Time in job	0.13	0.12	0.13	0.11	0.08	0.15	-0.09	0.35*	--			
Employed	0.43***	-0.15	0.40**	-0.34**	0.02	0.23	-0.28	0.00	-0.14	--		
Gross income	0.30	-0.16	0.10	-0.17	-0.13	0.36*	-0.26	0.22	0.21	0.02	--	
Hourly rate	0.21	-0.15	0.05	-0.07	-0.20*	0.36*	-0.23	0.36*	0.19	N/A	0.53***	--

[52] 0 = female, 1 = male
[53] 0 = not physically able to work 8 hours a day, 1 = able
[54] 0 = no education, 1 = primary school, 2 = some secondary school, 3 = secondary school graduate or high school graduate, 4 = some university or higher education but did not finish a degree or certificate, 5 = a training school after secondary school (e.g. secretarial school) or an associates degree (e.g. AA, AS), 6 = a bachelor's degree (e.g. BA, BS), 7 = a graduate degree (e.g. masters, PhD)
[55] 1 = speak and understand English very well, 2 = speak English well, 3 = speak a little bit, 4 = no English
[56] 0 = unemployed; 1 = employed

At first, the odds ratio was examined without incorporating the interaction between being physically able to work age.

Model 9: Logistic regression predicting employment without interaction

	Odds Ratio	SE	95% CI
Gender (male)	5.58***	2.84	[2.06-15.12]
Physically 'able'	12.93**	10.68	[2.56-65.22]
Age	1.05	0.03	[0.99-1.11]
Household size	0.66*	0.12	[0.46-0.96]
English level (reference category=speak a little)			
Speak very well	0.86	0.58	[0.23-3.25]
Speak well	0.74	0.40	[0.25-2.18]
None	0.26	0.24	[0.04-1.56]

n=143
LL = -63.03, LR $\chi^2(7)=51.73$***
Pseudo R^2= 0.283
* $p<0.05$, ** $p<0.01$, *** $p<0.001$
Goodness of Fit:
Hosmer-Lemeshow $\chi^2(8)=6.96$, $p=0.54$
Pearson $\chi^2(123)=142.17$, $p=0.11$

A model predicting unemployment was also examined.

Model 10: Logistic regression predicting unemployment

	Odds Ratio	SE	95% CI
Gender (male)	0.84	0.47	[0.28-2.54]
Physically 'able'	65.15	212.5	[0.11-38893]
Age	1.68	0.06	[0.95-1.19]
Able(1) x Age	0.90	0.06	[0.78-1.03]
Household size	1.71*	0.35	[1.15-2.54]
English level (reference category=speak very well)			
Speak well	1.17	0.82	[0.29-4.59]
Speak a little	0.67	0.53	[0.14-3.13]
None	1.71	1.99	[0.17-16.75]

n=143
LL = -61.74, LR $\chi^2(8)=54.63$***
Pseudo R^2= 0.307
* $p<0.05$, ** $p<0.01$, *** $p<0.001$
Goodness of Fit:
Hosmer-Lemeshow $\chi^2(8)=7.00$, $p=0.54$
Pearson $\chi^2(123)=147.25$, $p=0.06$

The linear regression model to predict gross income was examined both using a bootstrap procedure (in text) and a non-bootstrapped procedure (shown below).

Model 11: Predicting gross income (non-bootstrapped)

	B	SE	95% CI
Gender (male)	47.12	29.83	[-12.20-106.43]
Age	0.37	2.08	[-3.77-4.52}
Time in country (months)	1.73	1.04	[-0.34-3.80]
Time at main job (years)	16.99	13.03	[-8.92-42.89]
Household size	-26.34*	11.84	[-49.89- -2.79]
Education level (reference category=no education)			
Primary	30.55	47.35	[-63.62-124.72]
Some secondary	103.49	67.41	[-30.56-237.53]
Secondary graduate	70.41	51.13	[-31.26-172.08]
Some university	156.88*	65.47	[26.68-287.08]
Training school	375.40**	107.29	[162.04-588.76]
Bachelor's degree	77.63	57.58	[-36.88-192.14]
Graduate degree	206.64	137.19	[-66.17-479.46]
F = 3.90***			
n=97			
R^2 =0.358			
Adjusted R^2 =0.266			
Root MSE=124.6			
* p<0.05, **p<0.01 , ***p<0.001			

Regressions of gross income using only variables hypothesized as of primary importance was also examined.

Model 12: Regression predicting gross income with only variables of primary importance

	B	SE	95% CI
Gender	53.9	28.21	[-2.10-110.07]
Months in country	2.18*	0.98	[0.23-4.13]
Household size	-25.53*	11.76	[-48.90- -2.15]
Education level (reference category= no education)			
Primary	29.16	43.13	[-56.58-114.91]
Some secondary	91.69	50.24	[-8.19-191.57]
Secondary graduate	67.47	38.75	[-9.56-114.51]
Some university	149.89**	54.89	[40.76-259.02]
Training school	362.91***	96.13	[171.81-554.02]
Bachelor's degree	83.70	52.55	[-20.77-118.18]
Graduate degree	195.25	130.67	[-64.52-455.02]

n=97
F = 3.94***
R^2 =0.338
Adjusted R^2 =0.268
Root MSE=124.45
* p<0.05, **p<0.01 , ***p<0.001

Model 13: Predicting SNAP usage with only household variables

	Odds ratios	SE	95% CI
Household size	1.42*	0.23	[1.03-1.96]
Time in country (months)	0.98	0.01	[0.96-1.01]
Religion (reference category=Hindu)			
Christian	0.44	0.26	[0.14-1.40]
Buddhist	0.54	0.30	[0.18-1.62]

n=142
LL= -79.41, LR $\chi^2(4)$=7.48
Pseudo R^2= 0.046
* p<0.05, **p<0.01 , ***p<0.001
Goodness of Fit:
Hosmer-Lemeshow $\chi^2(8)$=1.63, p=0.99
Pearson $\chi^2(112)$=108.62, p=0.573

The model likelihood ratio test is non-significant (p=0.113), indicating that constraining these parameters to zero, there is no significant reduction in the fit of model.

Appendix: CUREC approval and sample questions

DEPARTMENT)OF)SOCIAL)POLICY)AND)INTERVENTION)
)
Barnett)House,)32)Wellington)Square,))
Oxford,)OX1)2ER,)United)Kingdom)
www.spi.ox.ac.uk)

14'August'2012'

Eleanor'Ott'
Hertford'College'
Oxford'

Dear'Eleanor,'

!
Refugee!economic!self.sufficiency!in!the!US!resettlement!program!
!

Your'application'for'research'ethics'approval'in'connection'with'your'thesis'has'been'considered'by'the' Departmental'Research'Ethics'Committee'(DREC)'in'accordance'with'the'procedures'laid'down'by'the' University'for'ethical'approval.'

I'am'pleased'to'inform'you'that,'on'the'basis'of'the'information'provided,'the'proposed'research'has'been' judged'as'meeting'appropriate'ethical'standards'and'DREC'approval'has'been'granted.'''

If'any'revisions'to'your'research'methodology'are'made'subsequent'to'this'approval,'these'must'be' detailed'in'writing'and'submitted'to'DREC'immediately.'

Please'can'you'ensure'that'you'submit'a'copy'of'this'letter'with'your'thesis'in'August.'

Yours'sincerely'

Dr'Lucie'Cluver'
Chair'of'DREC'

cc.'Paul'Montgomery'

Direct'line:'Tel:'+44'(0)1865'280734''''''''''''Email:'''gemma.roche@spi.ox.ac.uk'
General'enquiries:'Tel.'+44(0)1865'270325''Fax:'+44(0)1865'270324'

Sample interview template for qualitative interviews with caseworkers and refugee resettlement personnel

Adapted from an interview template used in SSD/CUREC1A/11-060. This is a loose guide as the interviews are designed to be semi-structured.

Basics

- *Discuss consent.*
- Would you like us to use your name and title or keep it anonymous?
- Job Title, Contact Information
- Permission to Quote/Use Recorder

Background on the Participant

- Why did you decide to do this job? (Follow-up: Are you of a refugee background?)
- If you don't mind my asking in order to understand the diversity of resettlement agency, what is your age and ethnicity?

Background on the Organization

- Please summarize for me the work your organization does with resettled refugees.
- How many refugees do you serve? What age ranges and populations? How many staff do you employ? How many volunteers do you have?
- How/why did your organization begin?

Main Research Questions

- What programs to you offer to improve economic self-sufficiency?
- Do you have any data on economic self-sufficiency? If so, what kind of data do you keep? Would you be willing to share it after the interview? *Discuss confidentiality of the data.*

Theory of change

- How do you or your staff members try to improve economic self-sufficiency?
- Could you explain in detail how you hope your resettlement program improves the economic self-sufficiency and wellbeing of your refugee clients?
- How does your work change with different populations?
- How has this work changed over time?
- Do you have a manual or any guidelines for employment service? If so, may I look at it or them? *Discuss confidentiality of the document(s).*
- Do you think you should target any factors with employment services that are not targeted?
- *Renegotiate/discuss consent at any point in time.*

Relationship of the intervention(s) to macro-policy

- How do funding streams and funding requirements affect your work?
- Do you think the government should be doing anything different in their goal to improve economic-self sufficiency?
- What do you think the overall goal of the US refugee resettlement program should be? (e.g. should it be economic self-sufficiency?)

Concluding

- Is there anything I haven't asked you about that you would like to talk about?
- Do you have any questions for me?
- Having discussed these topics, is there anyone who you might recommend that I speak with as part of this research project?
- *Renegotiate consent.*

Sample focus group guide

Basics

- *Discuss again the background of the project in broad terms.*
- *Discuss consent.*
- *Time to ask questions and opportunity for participants to leave.*

Refugee services

- What aspects of your life do resettlement agencies help you with?
- What do you think the role of the resettlement agency is? *Renegotiate consent and discuss confidentiality again.*
- How do you think the resettlement agency helps you with these goals? What are the steps?

View on research project

- Explain the research project and the aims.
- What are your thoughts about the overall objectives of the project?
- Hand out survey section two and three (or a portion thereof).
- What are your thoughts about this interview measures?
  follow-up: What measures should be added or not? Did any of these words confuse you? Why?

Concluding

- Is there anything I haven't asked you about that you would like to talk about?
- Do you have any questions for me?
- Having discussed these topics, do you have any suggestions for me?
- *Renegotiate consent.*

Origins of survey questions

This does not include the SF-12 questions which much be used in standardized format and is provided for the first draft of the survey to show development of final survey.

SECTION 1 – Demographic characteristics

.

Question #	Question:	Source:
	Your Background	
	The first section contains questions about your background. If you are unclear about anything, please ask. If you do not know the exact answer, your best guess is fine. For example, the first question will ask you about the month and year of your birth. If you do not know the month, you can tell us what season such as planting season or rainy season.	
1.1	What is your age and date of birth – Month (or Season) and year of birth? Month _____ Year _____	Standard, American Community Survey (ACS)
1.2	What is your gender? Mark (X) ONE box. Male Female Other gender (such as a third gender)	Standard, Edited (third gender known among Nepali)
1.3	What country were you born in? _____	Hispanic, Hmong, Russian and Somali Immigrants (HHRSI) in the Twin Cities: A Survey edited
1.4	In this question, we ask about your ancestry or ethnic origin. Would you consider yourself to be… Bhutanese or Nepali Iraqi Burmese Burmese Karen Burmese Chin Burmese Kachin	HHRSI, ACS

Question #	Question:	Source:
	Hispanic Something else, please PRINT ethnicity _____	
1.5	What is your race? You may give more than one answer. American Indian or Alaska native Asian Black or African-American Native Hawaiian or Other Pacific Islander White Other, please PRINT RACE _____	Standard, US government, ACS, etc.
1.6	When you are at home, or with your family, what language or languages do you typically speak? Mark all that apply. Nepali Arabic Burmese A different language spoken in Burma, PRINT LANGUAGE _____ English Spanish Other, please PRINT LANGUAGE _____	Mathematica Policy Research (survey on teenage pregnancy prevention approaches), edited
1.7	How many years did you spend as a refugee? _____	Identified as important by Codell et al., 2011
1.8	What was the highest level of schooling you finished before you came to the U.S.A.? Primary school Some secondary school Secondary school graduate or high school graduate Some university or higher education A training school after secondary school (e.g. secretarial school) or an associate's degree (for example, AA, AS) An bachelor's degree (for example: BA, BS) A graduate degree (such as a master's degree, professional degree beyond a bachelor's degree, or a doctoral degree)	Question working from ACS (modified) theorised as important from Friedberg, 2002; Zorlu & Hartog, 2005; Mincer, 1974; Potocky-Tripodi, 2004; Siraj, 2007

Question #	Question:	Source:
1.9	***Answer this question if you have a bachelor's degree or higher. Otherwise, SKIP to the next question.*** This question is about your BACHELOR'S DEGREE. Please print below the specific major(s) of any BACHELOR'S you have received. (For example: chemical engineering, elementary teacher education, organizational psychology) _____	ACS[57]
1.10	How well would you say you speak English? Would you say: I speak and understand English very well I can speak English well, but O have a little bit of trouble understanding the language I can just speak a little bit of English I can't speak English	HHRSI
1.11	The following questions ask about your family. Think about the place (apartment, house) you live in most of the time. Who do you live with in this place? Please circle all that apply. Husband, wife or other romantic partner Children Daughter(s) If circled, please list the ages of daughters: ___ Son(s) If circled, please list the ages of sons: ___ Parents Biological mother or woman who gave birth to you Biological father or male parent you are genetically related to Stepmother, adoptive mother, or foster mother Stepfather, adoptive father, or foster father A parent's partner, boyfriend, or girlfriend Sister and Brothers -- include step- or half-	Mathematica Policy Research

[57] We ask this question to collect information about the kinds of college degrees obtained. Combining this information with statistics about jobs and income allows educators to assess how graduates in differing fields are doing in the job market. Employers can use the field of degree statistics to find out if there are potential employees in an area with the training and education needed to support their businesses.

Question #	Question:	Source:
	Older sister(s) Older brother(s) Younger sister(s) Young brother(s) Other Adults Grandparent(s) Aunt(s) or Uncle(s) Other adult relative(s), but not brother or sister Other adults I'm **not** related to by blood or marriage Other Children Cousin(s), sister's or brother's children, or other children I'm related to Other children I'm **not** related to	
1.12	Now, think about the place where you lived before coming to the U.S.A., such as a refugee camp or city in another country: did your family have any of these things at that place? Car - yes/no Fridge – yes/no Television – yes/no	Hodes et. al., 2008; Curie, Elton, Todd, & Platt, 1997; von Rueden, Gosh, Rajmil, Bisegger, Ravens-Sieberer, & the European KIDSCREN group, 2006[58]
1.13	Now, think about the place where you lived in your country of origin: did your family have these items? Car - yes/no Fridge – yes/no Television – yes/no I do not remember that place or never lived in my country of origin.	Same as above

[58] This phrasing has been known to examine socioeconomic status, particularly in the context of developing countries.

SECTION 2 – Economic Outcomes

*These questions aim to answer the question about the current state of economic self-sufficiency. Administrative data may provide additional information about economic outcomes or confirm the reporting validity.

Question #	Question:	Source:
2.1	Do you receive any kind of cash assistance, such a refugee cash assistance or cash assistance from your resettlement agency? 1. Yes 2. No	New question, a common metric used by the Office of Refugee Resettlement US Government Accountability Office, 2011
2.2	Which of the following services do you or members of your family who live with you use? Please mark (X) ALL that apply. Medicare Medicaid Refugee Medical Assistance Refugee Cash Assistance Temporary Assistance for Needy Families (TANF) or Welfare Food Stamps or the Supplemental Nutrition Assistance Program (SNAP) Women, Infant, and Children assistance (WIC) A food bank LIHEAP – government assistance for heating and energy A voucher for housing State or federal unemployment compensation Social security payments Other assistance with money, food, rent, housing, or health costs, please list _____ I do not know	New question, from experience, US Government Accountability Office, 2011; and, Majka, 1991
	In the next few questions, I'm going to ask you about work in the LAST SEVEN DAYS. By the LAST SEVEN DAYS, I mean the days beginning on [Interview date minus, eight, in day, month, date, year format], and ending yesterday.	

Question #	Question:	Source:
2.3	In the LAST SEVEN DAYS, did you do ANY work for pay? 1. Yes 2. No 3. Retired 4. Disabled 5. Unable to work.	American Time Use Survey (ATUS), Current Population Survey (CPS), ACS
2.4	In the LAST SEVEN DAYS, did you have a job, either full or part time? Include any job from which you were temporarily absent. If you do not have a job, **PLEASE SKIP TO SECTION 3**. 1. Yes, I had a job in the past week. 2. Yes, I had a job but I did not work in the last seven days. 2. No, I did not have a job in the seven days. Go to **SECTION 3.**	ATUS
2.5	In the LAST SEVEN DAYS, did you have more than one job, including part-time, evening or weekend work? 1. Yes 2. No	ATUS
2.6	How many hours per week do you USUALLY work at your main job? By main job we mean the one at which you usually work the most hours. ____ * Please enter the number of hours or V is the hours vary widely.	ATUS
2.7	How many hours per week do you USUALLY work at your other job(s)? _____* Please enter the number of hours or Enter V if the hours vary	ATUS
2.8	Do you USUALLY work 35 hours or more per week with ALL of your jobs combined? 1. Yes 2. No	ATUS
2.9	For your main job, would you describe yourself as (Please mark (X) one) … 1. an employee of a PRIVATE FOR-PROFIT company or	ATUS, ACS

Question #	Question:	Source:
	business, or of an individual, for wages, salary, or commissions? 2. an employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization (e.g. a refugee resettlement agency)? 3. a local GOVERNMENT employee (city, county, etc.)? 4. a state or federal GOVERNMENT employee? 5. SELF-EMPLOYED in own business, professional practice, or farm? 6. working WITHOUT PAY in family business or farm? 7. working WITHOUT PAY as a volunteer for an organization?	
2.10	What is the name of the company or non-profit organization for which you work as your main job? _____	ATUS
2.11	What kind of work do you do: that is, what is your occupation? (For example: plumber, typist, farmer) _____	ATUS
2.12	What are your usual activities or duties at this job? (For example: types, keeps account books, files, sells cars, operates printing press, lays bricks) _____	ATUS
2.13	For all of your jobs combined, how much money did you make BEFORE taxes or other deductions? Please give this in the easiest way for you (e.g. per hour, per week, per year, or on some other basis) and please include all tips, bonuses, overtime pay, or commissions you may receive. $_____ per _____	ATUS, CPS modified[59]
2.14	Do you usually receive overtime pay, tips, or commissions at your main job?	ATUS, CPS

[59] Given that many refugees surveyed have been in the country less than a year and that their initial pay may not be reflective of their current and future pay, traditional questions about income such as those in the American Current Population Survey (CPS) may not be the best to use, and questions in this draft have been adapted.

Question #	Question:	Source:
	1. Yes 2. No	
2.15	EXCLUDING overtime pay, what is your best estimate of your hourly rate of pay? _____ per hour I do not know	ATUS modified
2.16	How much money do you earn per week before taxes and other deductions? Your best guess is fine. _____ per week before taxes	CPS modified
2.17	How much money do you make per week after taxes, health insurance, and other deductions? Your best guess is fine. _____ per week after taxes	CPS modified

SECTION 3 – Job Search

Question #	Question:	Source:
3.1	How many weeks have you worked since you arrived in the US? ____ weeks worked out of ____ weeks in the country	Siraj, 2007
3.2	Do you currently want a job, either full or part time? 1. Yes, I want a job 2. Maybe, it depends 3. No, I do not want a job 4. No, I have a job	ATUS
3.3	LAST WEEK, would you have started a job if offered one, or returned to work if recalled? 1. Yes, could have gone to work 2. No, because of own temporary illness 3. No, because of another reason (childcare, in school, etc.) 4. No, I already have a job	ATUS, ACS

Question #	Question:	Source:
3.4	If you have a disability, does your disability prevent you from accepting any kind of work during the next six months? 1. Yes 2. No	ATUS
3.5	What are all of the things you have done to find work in the last four weeks? 1. Contacted employer directly/interview 2. Contacted public employment agency 3. Contacted private employment agency 4. Contacted friends or relatives 5. Contacted school/university/employment center 6. Sent out resumes/filled out applications 7. Check union/professional registers 8. Placed or answered ads 9. Looked at ads 10. Attended job training programs/courses 11. Other, please list _____ 12. Nothing	ATUS

Appendix: Interpreter and research assistant training manual

OXFORD CENTRE FOR EVIDENCE-BASED INTERVENTION

Eleanor "Ellie" Ott
Doctoral Candidate, Department of Social Policy and Intervention
MSc Refugee and Forced Migration Studies (Oxford)

Barnett House, 32 Wellington Square, Oxford OX1 2ER, UK
Tel: (412)586-8922 (US); +44 (0)7403 693136 (UK) Fax: +44 (0)1865 270324 (UK)
Email: ellie.ott@spi.ox.ac.uk

Research Assistant Training Manual

Refugee economic self-sufficiency in the US resettlement program

February 2013

Content

Also attached:

- Survey about Refugee Economic Self-Sufficiency in the US Resettlement Program
- General principles for interpreters and translators from AUSIT: Australian Institute for Interpreters and Translators

Research summary

- This is a study concerning the prevalence of economic self-sufficiency among adult Bhutanese refugees in Pittsburgh.
- The primary aim is to understand how well Bhutanese refugees are doing in finding employment, being able to pay their bills, and in quality of life.

  The secondary aim is to explore the relationship between these outcomes and demographic variables, such as education, English levels, thereby identifying potential resilience factors and coping mechanisms for future programming.

  A third aim is to explore different questions for service providers, such as the educational needs of Bhutanese refugees.

Importance of this study

- The United States has resettled more than 3 million refugees since 1975, more than all other countries combined. Aside from a few indicators reported by resettlement agencies, there is very little information on how these refugees are doing.
- The US has resettled over 67,000 Bhutanese refugees since 2008.
- Few studies have been done on Bhutanese refugees living in the US. The small literature available about Bhutanese refugees suggests they have suffered health and mental health consequences from their mistreatment in Bhutan and years in refugee camps in Nepal and may have difficulty adapting to the US.
- Both resettled refugees in the US and the Bhutanese refugee population is under-researched. Additionally, economic self-sufficiency is the legislative goal of the program but there is little research on it.
- The US government has done recent reports titled *Little is Known about the Effectiveness of Different Approaches for Improving Refugees' Employment Outcomes* (2011) and *Abandoned Upon Arrival: Refugees and Local Communities Burdened by a U.S. Resettlement System that is Not Working* (2010) that call for further research.
- I have talked to policy officials at the US Office of Refugee Resettlement, UNHCR, and in Pittsburgh and they are interested in knowing how refugees are doing and the results of this study. The summarized results will be shared with policy officials.
- Locally, I have formal relationships with Jewish Family & Children's Service and Northern Area Multi-Service Center (NAMS) to look at their service delivery, and the directors are eager to known the results of the survey and suggestions for improving their services. Additionally, I have spoken with the other service providers and will share results with them.
- This information may be helpful in designing programming for Bhutanese refugees and in strengthening grant applications by BCAP and local organizations to fund programming.
- The results from this study will be published and shared at major conferences.
- The results of this study may help to raise the profile of Bhutanese refugees – both their needs and accomplishments.

Summary of doctoral dissertation

A following is a summary of the overall doctoral dissertation.

Refugee Economic Self-Sufficiency in the US

Synopsis
This project examines the economic self-sufficiency and well-being of refugees resettled in the US. In other words, it wants to find out how well refugees are doing and what is known about their employment services.

Research Questions
There are currently three primary research questions:

1) ***How are specific refugee resettlement employment and economic self-sufficiency programs expected to work?***
2) ***How are the programs delivered?***
3) ***What is the current state of refugee self-sufficiency and evidence of program impact on participants?***

Research Design
The research adopts both a flexible, grounded-theory approach to incorporate site-specific contextual insights and an evidence-based perspective to use a scientifically rigorous design appropriate for the field.

Systematic Review
The research begins with a systematic review of the evidence from prospective, controlled evaluations of interventions designed to improve economic outcomes and well-being for resettled refugees. It is registered with the Campbell Collaboration and aims to answer the following questions:

1) Do interventions designed to improve the economic self-sufficiency and well-being for refugees affect participants' labour force participation rate, (un)employment rate, cash assistance utilisation rates, average hourly rate, salary, job retention, and quality of life?
2) Do effects differ depending on program content, provider, populations served, or the setting?

Mixed Methods Field Research
The field research will take place in two locations and will *not* be comparative.

Qualitative Research and Implementation Analysis. Qualitative research will involve site visits and the development of research questions; ongoing qualitative data collection; and monitoring and documenting the implementation of interventions. It will explore theories of change and interventions, as well as contextual factors explaining refugees' outcomes.

Quantitative Research and Analysis. Given the state of the field, the quantitative research will focus on understanding the nature and prevalence of economic self-sufficiency and quality of life and correlational evidence of program effects through cross-sectional surveys.

Further Information

- *Ethics:* The Oxford Central University Research Ethics Committee (CUREC) has approved this research.
- *Consultation:* The primary researcher has consulted with academic and policy experts about this research, including at the Office of Refugee Resettlement and UNHCR.
- *Resources Needed:* The researcher will provide translation and a small budget. Research requires the cooperation on the part of agency staff and 30-minute to 1-hour interviews of employment staff.
- *Potential Benefits:* These results may be used to help improve the employment and other services. Feedback will be provided to the refugee agency, academics, and policy makers, and may be helpful in applying for grants or improving services. Additionally, the primary researcher aims to give back whether through creating informational materials, researching specific questions, or other means.
- *Funding:* This dissertation and research is funded through the Rhodes Trust, the Truman Foundation, an Oxford Department of Social Policy and Intervention research grant, and a Hertford College grant.

Participant Information Sheet
Refugee economic self-sufficiency in the US resettlement program

You are invited to participate in research for the University of Oxford. Before you decide "yes or no" we would like you to understand more about the research. Please read the following information carefully before making your decision. Feel free to discuss this with others and to ask any questions.

What is this research? What will you with the results?
This research wants to find out how well refugees are doing and how best to improve their employment services. The results of this study will be in a doctoral thesis at the University at of Oxford, presented at conferences and meetings, and published in academic journals.

What will I need to do as a participant?
You will answer some questions in a survey. This should take you around 30 minutes. There are no right or wrong answers. We ask that you answer honestly.

Will anyone know how I answer the questions?
No, your name will not be in the results. This research is confidential and anonymous. No one will know what you mark, and we will keep survey safe and not tell people who participated.
You **will not** be identified in any published report or summary of the results. **However, in the rare circumstance where we find out that you or someone is at risk of serious harm then only the information necessary to that emergency will be told.**

Are there any risks?
You may not want to answer some questions and may become sad or upset thinking about things. You can stop at any time.

Are there any benefits?
These results may be used to help improve the employment and other services that you receive or to help improve the services available for refugees arriving in the future.

Questions or complaints?
If you have a question or concern, please ask now. At any time, you can contact the primary researcher Ellie Ott (ellie.ott@spi.ox.ac.uk; (412) 586-8922). You may also contact her supervisor, Dr. Montgomery at the University of Oxford (paul.montgomery@psych.ox.ac.uk; +44 18652 80325). If you remain unhappy and wish to make a formal complaint, please contact the Research Ethics Committee at the University of Oxford (ethics@socsci.ox.ac.uk; +44 (0)1865 614871; Social Sciences & Humanities Inter-Divisional Research Ethics Committee, Oxford University, Hayes House, 75 George Street, Oxford, OX1 2BQ, UK).

Ethics
This research has been checked and approved by the Central University Research Ethics Committee (CUREC) at the University of Oxford.

Funds
This study is sponsored by the Centre for Evidence-Based Intervention, Department of Social Policy and Intervention, the Rhodes Trust, and Hertford College at the University of Oxford.

Thank you for considering this study. Please keep this information sheet for your reference.

Consent Form

Refugee economic self-sufficiency in the US resettlement program
Name of researcher: Ellie Ott, doctoral student; Supervisor, Dr. Paul Montgomery
Please circle your answer.

Have you read and understand the information sheet for this study and have had the chance to ask questions? Yes / No

Do you understand you are free to stop answering:

- at any time
- without giving a reason
- and that participating will not affect your casework, employment, or any support you're are receiving? Yes / No

Do you know how to contact the researcher and make a complaint? (if no, see the complaint section of your information sheet or the bottom of this sheet.) Yes / No

Do you understand that your answers will not be linked to you, except in the rare case that someone is at risk of serious harm, then professionals will be told only necessary information about the risk of that harm? Yes / No

Do you agree that answers can be used, WITHOUT giving your name in presentation of the research? Yes / No

Do you agree to take part in this study? Yes / No

_____	_____	_____
Name of participant	Date	Signature

_____	_____	_____
Name of research assistant or interpreter	Date	Signature

Thank you

Contact for further information: Ellie Ott [412-586-8922; ellie.ott@spi.ox.ac.uk]
Supervisor: Dr. Paul Montgomery [+44 18652 80325; paul.montgomery@psych.ox.ac.uk}
Oxford Ethics Committee: [+44 1865 614871; ethics@socsci.ox.ac.uk]

The importance of random sampling

The study uses random sampling—like a flip of a coin—to choose which households and individuals are contacted to survey. Random sampling makes the sample statistically representative of the population, not only in ways we can measure, but also in ways that cannot be easily observed or measured. This eliminates selection bias by giving all households the same chance to be contacted for the survey. Having a random sample is very important for statistical procedures. Surveys that do not follow these procedures can produce results that lead to misguided beliefs, programs, or policy decisions.

Let's say that you wanted to complete the survey with a sample size of ten and make it as easy as possible. You would probably contact your friends. Then what would we think? We would think that the entire Bhutanese refugee population in Pittsburgh is young, well educated, and has perfect English. We might think that there is no need for citizenship classes or assistance for elderly refugees and that no one has complex health issues that prevent him or her from working. Conversely, if we only sampled other members, we might think that no Bhutanese speak English or own houses or cars.

Service guidelines for research assistants, interpreters, and multi-lingual personnel

Specific criteria

- Research assistants should have a high level of fluency (reading, writing, speaking) in Nepali and a high standard of English.
- They must have previous experience working with Bhutanese refugees.
- They must have a high level of cultural understanding of participants.
- Research assistants must be able to maintain professionalism, confidentiality, and impartiality at all times.

Confidentiality

- Research assistants and interpreters will treat all information they encounter in the course of their work on the project as **highly confidential** and are not allowed to discuss or disclose any information concerning participants or details about the research to external parties.

General Principles

- When interpreting, the role is to enable others to communicate through the oral translation from one language to another and to ensure that this communication is an accurate and faithful interpretation of language and culture.
- Interpreters are expected to accurately interpret between English and Nepali without anything being added or omitted.
- Interprets should ensure that they are perceived to be in a position of neutrality.
- Interpreters must only undertake work, which they are competent to accomplish in a satisfactory way.

Interpreting sessions

- Interpreters must ensure that introductions are made and that their role is clarified.
- Interpreters must inform both parties of the interpreting process, including the following:
    - Appropriate seating arrangement
    - To provide adequate time for interpreting.
    - All that is said during the session will be interpreted and that no private conversations can be carried out.
    - The interpreter will respect the confidentiality of participant and not disclose information from the session to any external parties, keeping with the confidentiality agreements stipulated in the *Professional Guidelines* and *Interviewing Guidelines.*
    - Interpreters may not take a primary role in communication or enter into discussion, give advice or express opinions.
    - Interpreters may intervene for the following reasons:
        - to ask for clarification concerning a specific concept or terminology.
        - to point out if a participant has not understood the message although the interpretation was correct.

- to alert a client to a possible missed interference which has not been stated by the knowledge of which may be assumed.

The interpreter must inform both the research assistant and the participant of the reason for the intervention.

If the interpreter's impartiality is compromised during the session then he/she should immediately notify the researcher.

Conduct of Interpreters

- Interpreters should always be polite, courteous, and unobtrusive.
- Interpreters should explain their role to participant, encouraging the researcher and participant to speak to each other directly.
- Interpreters should allow nothing to prejudice or influence their work, and disclose any possible conflict of interest.
- Interpreters should ensure punctuality at all times.
- Interpreters should refrain from unprofessional behavior.
- Interpreters should not interject or reveal their own feelings, moods, attitudes, or beliefs.
- Interpreters will not take personal advantage of any information obtained in course of their work.
- Interpreters will not delegate their work.
- Interpreters will not accept any form of reward for interpreting work other than the honorarium or prearranged agreement for their assignment.

Protocols and Best Practices

Protocol for Dealing with Participants in Acute Distress

It may become apparent during an experimental session that an individual is experiencing severe psychiatric or psychological distress. In these circumstances it is important that researchers have a procedure in place that enables them to respond appropriately and sensitively and which minimizes risk both to the study participant and the researcher.

In all circumstances in which a participant appears to be acutely distressed researchers should bring the experimental session to a close. They should then sensitively ask questions to ascertain whether or not the participant is receiving any support for their distress, and if not whether they feel they would benefit from support. It may also be helpful to ask whether anyone (e.g. friends, family) is aware of how the participant is feeling and whether they have already considered contacting their general practitioner or another professional to discuss their problem(s). In cases where the individual states that they are currently receiving support or treatment for the problem(s) discussed, it would usually be sufficient to encourage the participant to re-contact their healthcare provider. If an individual indicates that they are <u>not</u> currently receiving support then the researcher would usually encourage them to contact their General Practitioner in the first instance.

Protocol for Recording Details of Serious Incidents

Research teams should develop a standard procedure for recording details of incidents where participants are judged to be at serious risk, including recording of information about the reasons for concern and a record of any action taken by the researcher (e.g. advice and information given, contacts made). Any incidents should be discussed with the senior researcher on the team and any contacts made with General Practitioners should generally be confirmed in writing. See the next page for a sample form.

(From Medical Sciences Interdisciplinary Research Ethics Committees (MED IDREC) Best practice guidance for studies where this is a possibility of detecting psychological distress or disorder in non-NHS participants, best practice guidance on storage of data collected for research purposes, best practice guidance for researchers interviewing people in their homes, and best practice guidance on anonymisation and identifiers.)

Best practice guidance for researchers interviewing people in their homes

1. Whenever visiting participants in their home, researchers must inform someone where they are going to be.
2. The researcher should telephone that person when they arrive at the home.
3. If the researcher has any concerns about the situation, then he/she should leave immediately.
4. Ideally, no research should be undertaken in a participant's home unless two people can go together, although it is appreciated that this is not always possible.

If there is thought to be a significant risk associated with a particular visit, a specific risk assessment (expanding on the points above) should be made and recorded.

Incident Report Form

Name of Researcher: _____

Participant ID Number: _____

Details of Incident: (e.g. reasons for concern)

Action Taken: (e.g. discussed with whom, who contacted, outcome, decisions?)

Participant's Caseworker Contacted by Researcher: Yes / No (By participant? Yes / No)

Participant's Physician Contacted by Researcher: Yes / No (By participant? Yes / No)

If Contacted by Researcher: Name and Address of Caseworker and/or Primary Physician:

Letter sent to Primary Physician to confirm details of contact? Yes / No

Letter attached? Yes / No

Signed (Researcher): **Date:**

General Principles for Interpreters and Translators from the Australian Institute for Interpreters and Translators (AUSIT)

1. Professional conduct

Interpreters and translators shall at all times act in accordance with the standards of conduct and decorum appropriate to the aims of AUSIT, the national professional association of interpreters and translators.

Interpreters and translators should:

- always be polite and courteous, unobtrusive, firm and dignified
- explain their role to clients, encouraging them to speak to each other directly
- allow nothing to prejudice or influence their work, and disclose any possible conflict of interest
- decline gifts and tips (except token gifts customary in some cultures), explaining to clients that accepting them could compromise their professional integrity
- ensure punctuality at all times (and if lateness is unavoidable, advise clients immediately)
- prepare appropriately for assignments and ensure they are completed
- refrain from unprofessional or dishonourable behaviour and refer any unresolved disputes to the AUSIT Executive Committee and accept its decision.

2. Confidentiality

Interpreters and translators shall not disclose information acquired during the course of their assignments.

- Interpreters and translators may only disclose information with the permission of their clients (or if the law requires disclosure).
- If other interpreters or translators are involved in the same assignment and require briefing, this should be done after obtaining the clients' permission, and all are obliged to maintain confidentiality.
- No work should be subcontracted to colleagues without clients' permission.
- Translated documents remain the client's property.

3. Competence

Interpreters and translators shall undertake only work which they are competent to perform in the language areas for which they are "accredited" or "recognised" by NAATI.

- Acceptance of an assignment is a declaration of one's competence and constitutes a contract. If, during an assignment, it becomes clear that the work is beyond the interpreter's or translator's competence, they should inform clients immediately and withdraw.
- Interpreters/translators must clearly specify their NAATI accreditation, level and language direction, if necessary explaining its significance to

clients.

- It is the interpreter's responsibility to ensure that working conditions facilitate communication.
- If an interpreter or translator is asked to provide a second opinion or to review alterations to the work of another practitioner, there should be final agreement between all interpreters and translators concerned.

4. Impartiality

Interpreters and translators shall observe impartiality in all professional contracts.

- Professional detachment must be maintained at all times. If interpreters or translators feel their objectivity is threatened, they should withdraw from the assignment.
- Practitioners should not recommend to clients anyone or anything in which they have personal or financial interest. If for some reason they have to do so they must fully disclose such interest - including assignments for relatives or friends, or which affect their employers.
- They should not accept, or should withdraw from, assignments in which impartiality may be risked because of personal beliefs or circumstances.
- Interpreters and translators are not responsible for what clients say or write.
- They should not voice or write an opinion on anything or anyone concerned with an assignment.
- If approached for service by all parties to a legal dispute, an interpreter or translator shall offer to work for the first party making the request and notify all parties concerned.

5. Accuracy

Interpreters and translators shall take all reasonable care to be accurate.

They must:

- relay accurately and completely all that is said by all parties in a meeting - including derogatory or vulgar remarks, non-verbal clues, and anything they know to be untrue
- not alter, add to or omit anything from the assigned work
- acknowledge and promptly rectify any interpreting or translation mistakes. If anything is unclear, interpreters must ask for repetition, rephrasing or explanation. If interpreters have lapses of memory which lead to inadequate interpreting, they should inform the client, ask for a pause and signal when they are ready to continue.
- ensure speech is clearly heard and understood by all present. Where possible (and if agreed to by all parties), interpreters may arrange a short general conversation with clients beforehand to ensure clear understanding by all
- provide full evidence of NAATI accreditation or recognition if requested

6. Employment

Interpreters and translators shall be responsible for the quality of their work, whether employed as freelance practitioners or by interpreting and translation agencies or other employers.

- AUSIT members may set their own rates and conditions in freelance assignments.
- They may not accept for personal gain any fees, favours or commissions from anyone when making any recommendations to clients.
- Interpreters and translators are responsible for services to clients performed by assistants or subcontracted employees. I&T practitioners employed by colleagues must exercise the same diligence in performing their duties.

7. Professional development

Interpreters and translators shall continue to develop their professional knowledge and skills.

- They should constantly review and re-evaluate their work performance.
- They should maintain and enhance their skills by study and experience, and keep up to date with relevant languages and cultures.

8. Professional solidarity

Interpreters and translators shall respect and support their fellow professionals.

They should:

- assist and further the interests of colleagues, refraining from comments injurious to the reputation of a colleague
- promote and enhance the integrity of the profession through trust and mutual respect. Differences of opinion should be expressed with candour and respect - not by denigration -refraining from behaviour considered unprofessional by their peers.

Appendix: Information sheets and opt-out letter

Interview Participant Information Sheet
Refugee economic self-sufficiency in the US resettlement program

You are invited to participate in research for the University of Oxford. Before you decide "yes or no" we would like you to understand more about the research. Please read the following information carefully before making your decisions. Feel free to discuss this with others and to ask any questions.

What is the purpose of the research project?
This project aims to look at the economic self-sufficiency and wellbeing of refugees resettled in the US. In other words, it wants to find out how well refugees are doing and how best to improve their employment services.

What will I need to do as a participant?
You will be asked to provide your opinion about refugee economic self-sufficiency and wellbeing. This may take you 30 minutes or more. There are no right or wrong answers. We ask that you answer honestly.

Will my records and responses be kept confidential?
Yes, all information will be kept in the strictest confidence. More specific information about how the confidentiality of your responses will be ensured may be found at the end of this form.

The results of this study will be included in a doctoral thesis at the University at of Oxford and published in academic journals. You **will not** be identified in any published report or summary of the results.

Are there any risks?
Some of the questions may make you feel uncomfortable or sad. You may therefore not want to answer these or any questions. You are free to stop answering the questions at any time.

Are there any benefits?
These results may be used to help improve the employment and other services that you receive. The results may also be used to help improve the services available for refugees arriving in the future.

Complaints
If you have a concern about any aspect of this project, please speak to the doctoral student researcher Ellie Ott (ellie.ott@spi.ox.ac.uk; (412) 586-8922) who will do her best to answer your question. You may also contact her supervisor, Dr. Paul Montgomery at the University of Oxford. His email is paul.montgomery@psych.ox.ac.uk, and his telephone number is +44 18652 80325. If you remain unhappy and wish to make a formal complaint, please contact the Research Ethics Committee at the University of Oxford (ethics@socsci.ox.ac.uk; +44 (0)1865 614871; Social Sciences & Humanities Inter-Divisional Research Ethics Committee, Oxford University, Hayes House, 75 George Street, Oxford, OX1 2BQ, UK).

Ethics
This research has been checked and approved by the Central University Research Ethics Committee (CUREC) at the University of Oxford.

Contact
For more information, feel free to contact the primary researcher, Ellie Ott at the address above, by telephone: (412) 586-5922 or +44 74036 93136, or by email: ellie.ott@spi.ox.ac.uk.

This study is sponsored by the Centre for Evidence-Based Intervention, the Department of Social Policy and Intervention, the Rhodes Trust, and Hertford College at the University of Oxford.

Thank you for considering this study.

Please keep this information sheet for your reference.

How we intend to maintain strict confidentiality of information:

- Only the principal research team will have access to any personally identifiable data relating to questions or demographic information;
- NO personally identifiable data will be available to the refugee resettlement agency or a government agency;
- Your records will be made anonymous so that people cannot know that it is you who provided those answers;
- All completed notes will be stored in secure location;
- Publications and presentations from this research will have no identifiable names or characteristics;
- **In the rare circumstance in which it is judged that you or someone else is at risk of serious harm then only the information necessary to the emergency will be communicated.**
- All records will be destroyed after a period of 10 years.

Consent Form

Refugee economic self-sufficiency in the US resettlement program

Name of researcher: Ellie Ott, doctoral student; Supervisor: Dr. Paul Montgomery

[Please circle your answer]

Have you read the Participant Information Sheet? Yes / No

Have you had an opportunity to ask questions and discuss this study? Yes / No

Have you received satisfactory answers to all your questions? Yes / No

Have you received enough information about the study? Yes / No

Do you understand you are free to leave the study:

- at any time
- without having to give a reason for leaving
- and without affecting your casework, employment, or other services? Yes / No

Do you understand that this study has been approved by University of Oxford Central University Research Ethics Committee? Yes / No

Do you understand that personal data will be identified using only a number code, will be accessed only by members of the research team and will be destroyed after a period of 10 years? Yes / No

Do you understand how to make a complaint (if no, see bottom of the sheet)? Yes / No

Are you aware that all information will be kept strictly confidential except in the rare circumstances in which it is judged that you or someone else is at risk of serious harm? (in which case only information necessary to an emergency would be communicated) Yes / No

Do you agree to take part in this study? Yes / No

_____	_____	_____
Name of participant	Date	Signature
_____	_____	_____
Name of researcher	Date	Signature

Thank you.

If you have any questions or a concern about any aspect of this project, please speak to the researcher, Ellie Ott [ellie.ott@spi.ox.ac.uk, (412) 586-8922], who will do her best to answer your question. If you remain unhappy and wish to make a formal complaint, please contact the Research Ethics Committee at the University of Oxford (ethics@socsci.ox.ac.uk; +44 (0)1865 614871; Social Sciences & Humanities, Inter-Divisional Research Ethics Committee, Oxford University, Hayes House).

OXFORD CENTRE FOR EVIDENCE-BASED INTERVENTION

Eleanor "Ellie" Ott
Doctoral Candidate, Department of Social Policy and Intervention
MSc Refugee and Forced Migration Studies (Oxford)

Barnett House, 32 Wellington Square, Oxford OX1 2ER, UK
Tel: (412)586-8922 (US); +44 (0)7403 693136 (UK) Fax: +44 (0)1865 270324 (UK)
Email: ellie.ott@spi.ox.ac.uk

Dear

The University of Oxford is carrying out important research with Bhutanese refugees in Pittsburgh and you are invited to take part!

Please read the information on the reverse side and decide if you would like to find out more information about the study. Participation should take around 30 minutes of your time. You will **not** be identified in the results, but a summary of the results will be shared with policy makers, including in Pittsburgh, at the US Office of Refugee Resettlement, and at UNHCR. The study is carried out by researchers at one of the top universities and may help improve future services for refugees and raise awareness about the needs and accomplishments of Bhutanese refugees in Pittsburgh.

The study is independent of any organization but is taking part with the support of BCAP. In order to contact you, we would like to make sure you are happy to give the researchers your contact details. They will not share them with anyone else.

If you do **NOT** want the researchers to contact you and do **NOT** want find out more information, then please text your name and "no thank you" to 412-586-8922, email the primary researcher at ellie.ott@spi.ox.ac.uk, or fill out the section below, sign and return it to Ellie Ott, 111 S. Graham Ave, Pittsburgh, PA 15206. If you do not contact us within one week, then we will know you are happy to be contacted.

If you have any questions about any of this, please contact Ellie Ott from the University of Oxford at 412 586 8922 or ellie.ott@spi.ox.ac.uk

Best wishes,

Ellie Ott

This is to confirm that I do NOT want my contact information to be given to the University of Oxford research team and that I do NOT want to take part in the research they are doing.

Name: Signature:

Date:

Participant Information Sheet
Refugee economic self-sufficiency in the US resettlement program

You are invited to participate in research for the University of Oxford. Before you decide "yes or no" we would like you to understand more about the research. Please read the following information carefully before making your decision. Feel free to discuss this with others and to ask any questions.

What is this research? What will you with the results?
This research wants to find out how well refugees are doing and how to improve their employment services. The results of this study will be in a doctoral thesis at the University at of Oxford, presented at conferences and meetings, and published in academic journals.

What will I need to do as a participant?
You will answer some questions in a survey. This should take you around 30 minutes. There are no right or wrong answers. We ask that you answer honestly.

Will anyone know how I answer the questions?
No, your name will not be in the results. This research is confidential and anonymous. No one will know what you mark, and we will keep survey safe and not tell people who participated. You **will not** be identified in any published report or summary of the results. **However, in the rare circumstance where we find out that you or someone is at risk of serious harm then only the information necessary to that emergency will be told.**

Are there any risks?
You may not want to answer some questions and may become sad or upset thinking about things. You can stop at any time.

Are there any benefits?
These results may be used to help improve the employment and other services that you receive or to help improve the services available for refugees arriving in the future.

Questions or complaints?
If you have a question or concern, please ask. At any time, you can contact the primary researcher Ellie Ott (ellie.ott@spi.ox.ac.uk; (412) 586-8922). You may also contact her supervisor, Dr. Montgomery at the University of Oxford (paul.montgomery@psych.ox.ac.uk; +44 18652 80325). If you remain unhappy and wish to make a formal complaint, please contact the Research Ethics Committee at the University of Oxford (ethics@socsci.ox.ac.uk; +44 (0)1865 614871; Social Sciences & Humanities Inter-Divisional Research Ethics Committee, Oxford University, Hayes House, 75 George Street, Oxford, OX1 2BQ, UK).

Ethics: This research has been checked and approved by the Central University Research Ethics Committee (CUREC) at the University of Oxford.

Funds: This study is sponsored by the Centre for Evidence-Based Intervention, Department of Social Policy and Intervention, the Rhodes Trust, and Hertford College at the University of Oxford.

Thank you for considering this study. Please keep this information sheet for your reference.

Appendix: Survey

The survey is on the following page to retain formatting. Sources of the survey questions were provided in the CUREC 1A form and in a previous appendix. Also provided below is the interview administration script for the SF-12 for those participants who needed or wanted assistance in completing that portion of the survey.

Consent Form

Refugee economic self-sufficiency in the US resettlement program

Name of researcher: Ellie Ott, doctoral student; Supervisor, Dr. Paul Montgomery

Please circle your answer.

Have you read and understand the information sheet for this study and have had the chance to ask questions? Yes / No

Do you understand you are free to stop answering:

- at any time
- without giving a reason
- and that participating will not affect your casework, employment, or any support you are receiving? Yes / No

Do you know how to contact the researcher and make a complaint? (If no, see the complaint section of your information sheet or the bottom of this sheet.) Yes / No

Do you understand that your answers will not be linked to you, except in the rare case that someone is at risk of serious harm, then professionals will be told only necessary information about the risk of that harm? Yes / No

Do you agree that answers can be used, WITHOUT giving your name, in presentation of the research? Yes / No

Do you agree to take part in this study? Yes / No

_____	_____	_____
Name of participant	Date	Signature

_____	_____	_____
Name of research assistant or interpreter	Date	Signature

Thank you

Contact for further information: Ellie Ott [412-586-8922; ellie.ott@spi.ox.ac.uk]
Supervisor: Dr. Paul Montgomery [+44 18652 80325; paul.montgomery@psych.ox.ac.uk}
Oxford Ethics Committee: [+44 1865 614871; ethics@socsci.ox.ac.uk]

PART 1 – About You

The first section contains questions about you. If you are unclear about anything, please ask. If you do not know the exact answer, your best guess is fine. For example, the first question will ask you about the month and year of your birth. If you do not know the month, you can tell us what season such as planting season or rainy season.

1.1) What is your month and year of birth?
Month _____ Year _____

1.2a) When did you arrive in the U.S.A.?
Month _____ Year _____
b) Where did you first resettle (city/state)? _____

1.3) What is your gender? *Mark (X) ONE box.*
Male ☐ Female ☐ Other gender (such as third gender) ☐

1.4) What country were you born in? *Choose ONE.*
Bhutan ☐ Nepal ☐ Other, please list _____

1.5) How many years did you spend as a refugee? _____ years

1.6) What is your religion?
Hindu ☐ Christian ☐ Buddhist ☐ Kirat ☐ No religion ☐ Other ☐

1.7) What was the HIGHEST level of schooling you finished BEFORE you came to the U.S.A.? *Mark (X) ONE box.*

☐ No school
☐ Primary school
☐ Some secondary school
☐ Secondary school graduate or high school graduate
☐ Some university or higher education but did not finish a degree or certificate
☐ A training school after secondary school (e.g. secretarial school) or an associate's degree (for example: AA, AS)
☐ A bachelor's degree (for example: BA, BS), *IF MARKED, PLEASE LIST YOUR MAJOR* - _____
☐ A graduate degree (such as a master's degree, professional degree beyond a bachelor's degree, or a doctoral (PhD) degree), *IF MARKED, PLEASE LIST YOUR MAJOR* _____

1.8) How well would you say you speak English? *Please mark (X) ONE*, would you say:

☐ I speak and understand English very well
☐ I can speak English well, but I have a little bit of trouble understanding the language
☐ I can just speak a little bit of English
☐ I can't speak English

1.9) The following question asks about your family. Think about the place (apartment, house) you live in most of the time here in the U.S.

a) How many people, including you, live in this place? _____

b) Who do you live with in this place? *Please mark (X) ALL that apply.*

☐ Husband, wife or other romantic partner

Children

☐ Daughter(s) *IF MARKED, PLEASE LIST THE AGES OF DAUGHTERS:* ___

☐ Son(s) *IF MARKED, PLEASE LIST THE AGES OF SONS:* ___

Parents

☐ Biological mother or woman who gave birth to you

☐ Biological father or male parent you are genetically related to

☐ Stepmother, adoptive mother, or foster mother

☐ Stepfather, adoptive father, or foster father

☐ A parent's partner, boyfriend, or girlfriend

Sister and Brothers -- include step- or half-

☐ Older sister(s)

☐ Older brother(s)

☐ Younger sister(s)

☐ Young brother(s)

Other Adults

☐ Grandparent(s)

☐ Aunt(s) or Uncle(s)

☐ Other adult relative(s), but not brother or sister or ones listed above

☐ Other adults I'm **not** related to by blood or marriage

Other Children

☐ Grandchildren, sister's or brother's children, or other children I'm related to

☐ Other children I'm **not** related to

1.10) In the place where you currently live, with the people you live with, do you have any of these things? *Please mark (X)* yes OR no for each item.

Where you live NOW		
Item	**Yes**	**No**
Fridge		
Television (TV)		
Car		
A house or dwelling that you own		
A business that you own		

1.11) Now, think about the place where you lived before coming to the U.S.A., such as a refugee camp or city in another country: did your family have any of these things at that place?

Where you lived right BEFORE coming to the USA		
Item	**Yes**	**No**
Fridge		
Television (TV)		
Car		
A house or dwelling that you owned		
A business that you owned		

1.12) Now, think about the place where you lived in your country of origin: did your family have these items?

Where you lived BEFORE displacement		
Item	**Yes**	**No**
Fridge		
Television (TV)		
Car		
A house or dwelling that you owned		
A business that you owned		
I do not remember that place or never lived in my country of origin		

1.13) Now, think about your job(s) in the places you lived BEFORE coming to the U.S.A. What kind of work did you do? (For example: teacher, housekeeper, farmer)

_____

SECTION 2 – Employment Questions

The next section contains questions about your current job or job search. They are designed to understand who works and what kind of jobs people work at. If you are unclear about anything, please ask. If you do not know the exact answer, your best guess is fine. Remember, all of your answers will NOT be linked to your name.

2.1) How many weeks were you in the U.S.A. before you began working for pay? Please WRITE in the number of weeks. Your best guess is fine.

____ weeks **OR** ☐ I have not worked in the U.S.A.

2.2) If you have worked, have you been fired and rehired in the same company?

☐ Yes. If yes, please list how many times _____

☐ No

2.3) Do you currently want a job, either full or part time? *Please mark (X) one.*

☐ Yes, I want a job

☐ Maybe, it depends

☐ No, I do not want a job

☐ No, I have a job

2.4) LAST WEEK, would you have started a job if offered one?

☐ Yes, I could have gone to work

☐ No, because I was sick for a bit

☐ No, because of another reason (such as: school classes, children, or disability)

☐ No, I already have a job or I went to work

2.5) If you have a disability, does your disability prevent you from accepting any kind of work during the next six months? *Please mark (X) one.*

☐ Yes

☐ No

2.6) Are you physically able to work 8 hours straight in a row? Please mark (X) one.

☐ Yes, I can physically work 8 hours in one day.

☐ No, I have difficulty working or standing 8 hours in one day.

In the next few questions, I'm going to ask you about work in the LAST SEVEN DAYS – that is the last full week ending yesterday.

2.7) In the LAST SEVEN DAYS, did you do ANY work for pay? *Please mark (X) one.*

- ☐ Yes
- ☐ No
- ☐ Retired or too old
- ☐ Disabled
- ☐ Unable to work

2.8) In the LAST SEVEN DAYS, did you have a job, either full or part time? Include any job from which you were temporarily absent. If you do not have a job, **PLEASE SKIP TO SECTION 3**.

- ☐ Yes, I had a job in the past week.
- ☐ Yes, I had a job but I did not work in the last seven days.
- ☐ No, I did not have a job in the seven days. Go to **SECTION 3.**

2.9) In the LAST SEVEN DAYS, did you have more than one job, including part-time, evening or weekend work?

- ☐ Yes
- ☐ No

2.10) How many hours per week do you USUALLY work at your main job? By main job, we mean the one at which you usually work the most hours.

____ hours * Please enter the number of hours or V is the hours vary widely.

2.11) How many hours per week do you USUALLY work at your other job(s)?

_____* Please enter the number of hours or Enter V if the hours vary

2.12) Do you USUALLY work 35 hours or more per week with ALL of your jobs combined?

- ☐ Yes
- ☐ No

2.13) How long have you worked at your main job?

_____ years _____ months

2.14) At your main job, which of the following benefits do you have? *Mark (X) ALL that apply.*

- ☐ Paid vacations and/or sick days
- ☐ Paid holidays (such as, paid Christmas or Labor Day)
- ☐ Health insurance
- ☐ None of the above

2.15) What kind of work do you do: that is, what is your occupation or job in the U.S.A.? (For example: plumber, housekeeper, farmer)

2.16) EXCLUDING overtime pay, what is your best estimate of your hourly rate of pay?

$ _____ per hour or ☐ I do not know

2.17) Gross income. For all of your jobs combined, how much money did you make PER WEEK BEFORE taxes or other deductions? Your best guess is fine. Please include all tips, bonuses, overtime pay, or commissions you may receive.

$_____ per week

2.18) Net income. How much money do you make per week AFTER taxes, health insurance, and other deductions? Your best guess is fine.

$_____ per week after taxes

SECTION 3 – Assistance, Money, and Education Questions

The next section contains questions about your assistance. They are designed to see how well you are doing with money and if there is need for more or different services. If you are unclear about anything, please ask. If you do not know the exact answer, your best guess is fine. Remember, all of your answers will NOT be told to anyone or linked to your name and you are free to not answer any questions.

3.1) AT THIS TIME, do you receive any kind of cash assistance, such a refugee cash assistance or cash assistance from your resettlement agency?

- ☐ Yes
- ☐ No

3.2) Which of the following services do you or members of your family who live with you use AT THIS TIME? Please mark (X) ALL that apply.

- ☐ Medicare or Medicaid
- ☐ Refugee Medical Assistance
- ☐ Refugee Cash Assistance
- ☐ Temporary Assistance for Needy Families (TANF) or Welfare
- ☐ Food Stamps or the Supplemental Nutrition Assistance Program (SNAP)
- ☐ Women, Infant, and Children assistance (WIC)
- ☐ Food drive/food bank
- ☐ Government assistance for heating and energy (CAP or LIHEAP)
- ☐ Government housing/a voucher for housing
- ☐ Unemployment compensation
- ☐ Social security payments (SSI) / disability or help for older persons
- ☐ Other assistance with money, food, rent, housing, or health costs, please list

  _____
- ☐ I do not know

3.3) With assistance, how often do the people who live with you have enough money to pay all of your bills such as housing, transportation and buying necessary goods like food?

- ☐ We always have enough money to the bills.
- ☐ Sometimes we do not have enough money to pay the bills.
- ☐ Most of the time we do not have enough money to pay the bills.
- ☐ We have never had enough money to pay the bills.

The next few questions ask you about education and training.

3.4) Are you currently doing English classes, education, or training? *Mark (X) ALL that apply.*

- ☐ Yes, I am in an English class.
- ☐ Yes, I am in a class to get a high school diploma or equivalent degree such as GED.
- ☐ Yes, I am in a 2-year or quicker training or certificate program (such as nursing assistant or mechanical training).
- ☐ Yes, I am attending a 4-year university.
- ☐ Yes, I am in graduate school for a master's degree or PhD.
- ☐ No, I am not doing any more education or training right now,

3.5) Would you like more education or training?

- ☐ Yes
- ☐ No

3.6) If you would like more education or training, what prevents you from doing that? *Mark (X) ALL that apply.*

- ☐ Money
- ☐ English level
- ☐ Time
- ☐ I do not understand the system in the U.S.A.
- ☐ OTHER, please explain _____
- ☐ I do not want more education or training

3.7) If you would like more education or training, what kind of education or training would you like? *Mark (X) ALL that apply.*

- ☐ More English classes taught in English
- ☐ More English classes taught in Nepali
- ☐ High school equivalency classes (such as GED)
- ☐ 1-2 year technical trainings (such as nursing assistant, mechanic, plumbing, electrical certificates or 2-year degrees)
- ☐ A 4-year bachelor's degree
- ☐ A master's degree or doctorate (PhD) degree
- ☐ OTHER, please explain _____
- ☐ I do not want more education or training.

Go to the next page, last section: Section 4 – Wellbeing

Your Health and Well-Being

This survey asks for your views about your health. This information will help keep track of how you feel and how well you are able to do your usual activities. ***Thank you for completing this survey!***

For each of the following questions, please mark an ☒ in the one box that best describes your answer.

1. **In general, would you say your health is:**

Excellent	Very good	Good	Fair	Poor
☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

2. **The following questions are about activities you might do during a typical day. Does <u>your health now limit you</u> in these activities? If so, how much?**

	Yes, limited a lot	Yes, limited a little	No, not limited at all
a <u>Moderate activities</u>, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf	☐ 1	☐ 2	☐ 3
b Climbing <u>several</u> flights of stairs	☐ 1	☐ 2	☐ 3

3. During the <u>past 4 weeks</u>, how much of the time have you had any of the following problems with your work or other regular daily activities <u>as a result of your physical health</u>?

	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a <u>Accomplished less</u> than you would like	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
b Were limited in the <u>kind</u> of work or other activities	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

4. During the <u>past 4 weeks</u>, how much of the time have you had any of the following problems with your work or other regular daily activities <u>as a result of any emotional problems</u> (such as feeling depressed or anxious)?

	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a <u>Accomplished less</u> than you would like	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
b Did work or other activities <u>less carefully than usual</u>	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

5. During the <u>past 4 weeks</u>, how much did <u>pain</u> interfere with your normal work (including both work outside the home and housework)?

Not at all	A little bit	Moderately	Quite a bit	Extremely
☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

6. These questions are about how you feel and how things have been with you <u>during the past 4 weeks</u>. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the <u>past 4 weeks</u>…

	All of the time	Most of the time	Some of the time	A little of the time	None of the time
a Have you felt calm and peaceful?	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
b Did you have a lot of energy?	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5
c Have you felt downhearted and depressed?	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

7. During the <u>past 4 weeks</u>, how much of the time has your <u>physical health or emotional problems</u> interfered with your social activities (like visiting with friends, relatives, etc.)?

All of the time	Most of the time	Some of the time	A little of the time	None of the time
☐ 1	☐ 2	☐ 3	☐ 4	☐ 5

Thank you for completing these questions!

Lastly, is there anything that we have not asked you about that you would like to say?

Thank you again!

SF-12v2® HEALTH SURVEY (FOUR-WEEK RECALL)

SCRIPT FOR INTERVIEW ADMINISTRATION

This first question is about your health now.

Please try to answer as accurately as you can.

1. **In general, would you say your health is...** *[READ RESPONSE CHOICES]*

(Circle one number)

Excellent 1

Very good.....2

Good 3

Fair 4

or Poor 5

Now I'm going to read a list of activities that you might do during a typical day.

As I read each item, please tell me if your health now limits you a lot, limits you a little, or does not limit you at all in these activities.

2a. **. . . moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf. Does your health now limit you a lot, limit you a little, or not limit you at all?** *[READ RESPONSE CHOICES ONLY IF NECESSARY]*

[IF RESPONDENT SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?]

(Circle one number)

Yes, limited a lot 1

Yes, limited a little 2

No, not limited at all.....3

2b . **. . . climbing several flights of stairs. Does your health now limit you a lot, limit you a little, or not limit you at all?** *[READ RESPONSE CHOICES ONLY IF NECESSARY]*

[IF RESPONDENT SAYS S/HE DOES NOT DO ACTIVITY, PROBE: Is that because of your health?]

(Circle one number)

Yes, limited a lot 1

Yes, limited a little 2

No, not limited at all.....3

The following two questions ask you about your physical health and your daily activities.

3a. **During the past four weeks, how much of the time have you accomplished less than you would like as a result of your physical health?** *[READ RESPONSE CHOICES]*

(Circle one number)

All of the time 1

Most of the time 2

Some of the time 3

A little of the time 4

or None of the time 5

3b. **During the past four weeks, how much of the time were you limited in the kind of work or other regular daily activities you do as a result of your physical health?** *[READ RESPONSE CHOICES]*

(Circle one number)

All of the time 1

Most of the time 2

Some of the time 3

A little of the time 4

or None of the time 5

The following two questions ask about your emotions and your daily activities.

4a. **During the past four weeks, how much of the time have you accomplished less than you would like as a result of any emotional problems, such as feeling depressed or anxious?** *[READ RESPONSE CHOICES]*

(Circle one number)

All of the time 1

Most of the time 2

Some of the time 3

A little of the time 4

or None of the time 5

4b. **During the past four weeks, how much of the time did you do work or other regular daily activities less carefully than usual as a result of any emotional problems, such as feeling depressed or anxious?** *[READ RESPONSE CHOICES]*

(Circle one number)

All of the time 1

Most of the time 2

Some of the time 3

A little of the time 4

or None of the time 5

5. **During the past four weeks, how much did pain interfere with your normal work, including both work outside the home and housework? Did it interfere . . .** *[READ RESPONSE CHOICES]*

(Circle one number)

Not at all 1

A little bit 2

Moderately 3

Quite a bit 4

or Extremely 5

The next questions are about how you feel and how things have been with you during the past four weeks.

As I read each statement, please give me the one answer that comes closest to the way you have been feeling; is it all of the time, most of the time, some of the time, a little of the time, or none of the time?

6a. **How much of the time during the past four weeks . . . have you felt calm and peaceful?** *[READ RESPONSE CHOICES ONLY IF NECESSARY]*

(Circle one number)

All of the time 1

Most of the time 2

Some of the time 3

A little of the time 4

or None of the time 5

6b. **How much of the time during the past four weeks . . . did you have a lot of energy?** *[READ RESPONSE CHOICES ONLY IF NECESSARY]*

(Circle one number)

All of the time 1

Most of the time 2

Some of the time 3

A little of the time 4

or None of the time 5

6c. **How much of the time during the past four weeks . . . have you felt downhearted and depressed?** *[READ RESPONSE CHOICES ONLY IF NECESSARY]*

(Circle one number)

All of the time 1

Most of the time 2

Some of the time 3

A little of the time 4

or None of the time 5

7. **During the past four weeks, how much of the time has your physical health or emotional problems interfered with your social activities like visiting with friends or relatives? Has it interfered . . .** *[READ RESPONSE CHOICES]*

(Circle one number)

All of the time 1

Most of the time 2

Some of the time 3

A little of the time 4

or None of the time 5