



The Refugee Integration Survey and Evaluation (RISE) Study: Year Four Report

*A study of refugee integration in Colorado, funded by
the Wilson-Fish grant program.*



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About This Report

This is the fourth annual report (October 2013-September 2014) of the Wilson-Fish evaluation, conducted by Quality Evaluation Designs (QED) for the Colorado Refugee Services Program — CRSP—through a grant (PO IHA CRSP1123064) from the federal Office of Refugee Resettlement (ORR). The purpose of the grant is to create a framework for understanding refugee integration in Colorado, and then evaluate refugee integration through a survey administered once each year to a population of refugees who will be followed for the duration of the evaluation. The survey is called the Refugee Integration Survey and Evaluation (RISE). A summary of RISE can be found on the QED website: www.QualityEvaluationDesigns.com. Data are collected under the Solutions IRB protocol #1212316.

We thank CRSP staff, including Mr. Paul Stein and Mr. Joseph Wismann-Horther, for their commitment to the refugee community in Colorado and for their support of and assistance with this project. QED is also deeply grateful to the refugees themselves who have participated in the survey, as well as in focus groups and interviews. We are especially indebted to our magnificent network of Community Connectors, who remain connected to the survey population, serve as interpreters for our qualitative research efforts, and provide us with countless meaningful insights along the way. Without these partners, this project would not be possible.

Executive Summary

This report summarizes activities and findings from the Refugee Integration Survey & Evaluation (RISE) project during 2013-14, which was the fourth year of the grant and the third year of data collection. The survey was first administered to nearly all adult refugees who arrived in Denver from Bhutan, Burma, Somalia, and Iraq during 2011-12. In 2013-14, the RISE survey was administered to 340 of the original 467 refugees who comprised the first-year sample. This reflects a 93% retention rate from the prior year and 73% retention from Baseline. Section II summarizes the framework of the RISE survey, which is based on Agar & Strang's integration model. Section II also provides an overview of RISE activities over the year.

The very high retention of the sample population over three years so far makes this longitudinal study unique. Data collection depends on a network of Community Connectors, most of whom are themselves refugees, who are embedded in the communities from which our sample is drawn. Project success is due to Community Connectors' commitment to the evaluation study and their extraordinary efforts tracking down respondents. Section III of the report reviews lessons learned during implementation of the Community Connector model, success of which is attributed to: 1) respecting the expertise of the Community Connectors and being flexible to their ever-changing schedules due to their holding multiple jobs, attending school, and raising children; 2) keeping warm, personal relationships with each Community Connector while maintaining a professional relationship that doesn't compromise the Project Manager's supervisory role; and 3), supporting Community Connectors' sense of ownership and investment in the project.

Section IV summarizes results from qualitative data collection. RISE researchers explored the extent to which *high* and *low* integration refugees reflected differing experiences related to various pathways assessed in the survey. Interviews and focus groups were conducted with 17 members of the sample (5%), selected based on their *Overall Integration* score the prior year as being either high or low. Data provide images of what integration looks like related to several integration pathways. At the extreme ends of the spectrum, experiences of high vs. low integrators contrasted sharply. More commonly, however, high and low integrators were difficult to distinguish as they discussed their experiences related to specific pathways. Trends did emerge across several refugees within a pathway and between individuals who discussed multiple pathways, with high scorers relating greater success overcoming obstacles than low scorers. But refugees travel pathways unevenly, so that someone with high integration and someone with low integration may have similar results related to a specific pathway, making overall integration between the two difficult to distinguish without getting a fuller picture.

Survey data are reviewed in Section V. Although retention across the sample is high (73%), poor retention from Somali and Iraqi respondents have forced RISE researchers to discontinue sampling from those communities. Accordingly, results are presented for refugees from Bhutan and Burma. Analyses include: 1) summaries of key item scores within each pathway at each administration (Baseline, Baseline+1, and Baseline+2); 2) correlations between pathways and

analyses of pathways that showed significant change compared to last year; and 3) analyses of *Overall Integration* scores and trends. The section includes a brief analysis of key findings related to each of the 10 pathways assessed. Pathways showing significant change from Baseline+1 to Baseline +2 are *Child's Education, Safety & Stability*, and *Civic Engagement*. Lesser change was found in *Employment and Economic Sufficiency* and *Language & Cultural Knowledge*. However, correlations between and among pathways tell a richer story. Analyses of *Overall Integration* are particularly revealing. The sample as a whole has steadily progressed from low integration at Baseline, to medium integration at Baseline +1, to high integration at Baseline +2. At Baseline +2, 57% of the sample are high integrators, and 23% are medium integrators. At Baseline +2, 88% of respondents increased from low to high or medium to high, but 12% slipped back a category. Men and women are progressing at the same rate, although men have higher integration scores than women. Those from Bhutan progress towards integration at higher rates than those from Burma. Age is a distinguishing factor, with those who are 55 and older progressing at significantly slower rates than younger refugees. Mean scores of 17-34 year-olds fall into high integration, scores of those 34-54 years old are in the high-medium range, and scores of those 55 and older fall into the low-medium range.

Cluster analyses show that certain patterns emerge based on common characteristics across the sample. High integrators with no children have a different profile of pathway scores than high integrators who do have children. Low integrators who access health care and score high on *Safety & Stability* have a higher integration profile than those who score low on *Safety & Stability*.

Section VI reviews the due diligence activities related to the effectiveness of the survey instrument. The focus of prior reports has been on testing and improving the integrity of the survey by exploring item and pathway reliability and validity. In this third year of data collection, RISE researchers believe that the instrument is sufficiently tested and refined to warrant confidence in the results.

Section VII summarizes findings about the refugee sample based on qualitative and quantitative results. Across pathways, low and high integrators show distinct patterns of results. Within pathways, low integrators as a group and high integrators as a group have different results, although this might not be apparent on a case by case basis. Learning English is critical to successful integration, a fact acknowledged by refugees we interviewed and in the survey data. *Language & Cultural Knowledge* correlates highly with nearly all other pathways, and may emerge as a predictor of successful integration. *Social Bonding* is a factor that appears to reflect effective socialization, but *Social Bridging* correlates with integration success. Age is a critical variable, with those 55 and older showing the greatest challenges related to *Overall Integration*. Qualitative data suggest that this age group provides significant support to younger refugees in the form of child care and SSI income, but the pressures they face are more difficult to overcome compared to younger refugees. Cluster analyses show that age is related to high and low integration, but that the picture becomes more complicated when other factors are considered, such as having children, whether one accesses health care, and whether one feels safe and stable.

In the coming year, RISE researchers will collect a fourth year of survey data and conduct auxiliary studies to clarify and extend findings from the current year. Some study ideas are listed in Section VIII. We believe that the RISE survey provides powerful data related to refugee integration during the first three to five years of arrival. During 2014-15, we seek to work with refugee service professionals as well as with refugee communities in sharing results and encouraging broader adoption of the instrument.

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I. Can a Dream Have a Footprint?

When I tell people about the Refugee Integration Survey & Evaluation (RISE) project, explaining how we are assessing integration of newly arrived refugees, inevitably the conversation turns to illegal immigrants and the burden they place on social services, the economy, and tax dollars. I have to clarify that refugees are oppressed individuals and families from countries around the world that the U.S. government sponsors to come and rebuild their lives in a society based upon economic, political, and religious freedom. I am proud that our country upholds ideals of freedom and democracy in this way, giving hope for a better life to millions who suffer throughout the world—regardless whether they ever will have the opportunity to come to America. For those who do come, the plaque affixed to the Statue of Liberty speaks directly to their circumstances:

“Give me your tired, your poor,
Your huddled masses, yearning to breathe free,
The wretched refuse of your teeming shore,
Send these, the homeless, tempest tossed to me,
I lift my lamp beside the golden door.”

—Emma Lazarus

This is only part of Lazarus’ now famous poem, and I did not know until Quality Evaluation Designs (QED) began the RISE evaluation that in the poem the Statue of Liberty is referred to as *Mother of Exiles*. Before RISE, I did not understand how apt and inspiring this phrase is for newly arrived refugees, whose greatest loss, sometimes, is not their home and property. Compounding the loss of family and friends through war, torture, and disease, is the loss of their identity. I did not understand the facelessness and hopelessness of those exiled from their homelands without papers. Refugees have no home and no political identity.

I also did not know that refugees are required to repay their airfare to the United States and a portion of the costs of their resettlement. These expenses can range from \$1,000-\$5,000 or more depending on the size of one’s family. All refugees are required to sign documents agreeing to repay their loans (interest free). Loan repayment is tracked by refugees’ social security numbers. Refugees are required to attain U.S. citizenship within five years of arrival, but their applications will be blocked if their loans are not repaid.

In major U.S. cities, I typically encounter refugees as taxi drivers and hotel staff. Until I began talking with them, I didn’t understand the tremendous suffering most have endured before coming to the U.S., and the tremendous challenges they face during resettlement in learning English, negotiating transportation, finding jobs, understanding American culture and values, and keeping their families intact in the face of extraordinary pressures. And yet, the refugees with whom I’ve spoken—related to RISE or elsewhere—carry their burdens with patience, grace, and gratitude. RISE data show that no matter how much they struggle to transition into their new lives, 97% feel safe in the U.S. Free from the dangers and restrictions of refugee

camps, refugees who come to the United States feel free and filled with hope. They do not worry about being beaten or tortured by police and they are not targeted because of their religion or ethnicity. This is as true for those well-educated in their home countries who practiced law and medicine who now may be cleaning bedpans in nursing homes, as it is for illiterate farmers trying to adapt to life in an urban center.

A cab driver from Somalia told me,

For us, U.S.A. stand for 'You Start Again.' This is good life, I have opportunity here. My children can be safe and they can have a better life.

A Denver refugee said,

I really appreciate the U.S. government and the people who work with us, and our kids being able to go to school. In our country we do not have school or have the chance to go to school.

I asked a RISE Community Connector who arrived from Nepal whether he would ever return to his home country. He said,

There is nothing for me there. I will never go back. My country didn't want me. They sent me away without papers. In the camps, I still had no country. We were people of nowhere. The United States brought [my family] here. Soon I will have citizenship and then I will have a passport. Now I'll have an identity. The United States will always be my home.

The American Dream was articulated in 1931 by James Truslow Adams, in his book, *The Epic of America*. Adams writes:

It is not a dream of motor cars and high wages merely, but a dream of social order in which each man and each woman shall be able to attain to the fullest stature of which they are innately capable, and be recognized by others for what they are, regardless of the fortuitous circumstances of birth or position." (p. 214-215)

Written during the depths of the Great Depression, these words helped renew a spirit of determination and hope for a discouraged people, and refreshed the vision of America as "the land of opportunity" that has from the beginning been a defining quality of the American ethos.

People differ about what, exactly, the American Dream is, but many agree that a major element is the hope (or expectation) that younger generations will have better lives than their parents. Recent articles and reports question the viability of the American Dream. In an online post on www.Forbes.com, Neil Howe documents trends since the early 1880's showing that, since

2012—for the first time since the U.S. Census—those 50 years and younger are earning lower median incomes than same-age cohorts born in earlier years.¹ A 2012 Gallup poll showed that 58 percent of adults nationally were *unsatisfied* with the opportunity of the next generation to live better than their parents.²

Yet for refugees, the American Dream remains not only an ideal, but a goal. Those brought here by the federal government to escape persecution and the ravages of war have experienced misery, death and living conditions impossible for most of us born in the United States to imagine. Here in America, they work hard to earn money, learn English, keep their families together, and help their children thrive. They move from crowded apartments to modest homes. They seek navigators from within and outside their communities to guide them through confusing legal, social, and cultural systems. Slowly, with extraordinary determination, their circumstances improve.

Can a dream leave a footprint? Only if it's more than just a dream. RISE data, which show a steady increase over three years in the integration of 90% of our Denver sample, is the footprint of refugees' path towards the American Dream.

And yet, some refugees and groups of refugees struggle to overcome obstacles. Headlines in Denver and elsewhere have called attention to the high rate of suicide among Bhutanese refugees, which is double that of the general U.S. population, and the same as that within refugee camps in Nepal.³ We hope over time that RISE data can shed light on the plight of Bhutanese refugees. Our data already reflect perennial obstacles to health care, education, and employment among refugees from a range of countries. RISE data suggest that those aged 50 and over face especially stressful challenges.

¹ Neil Howe, (2014). Are you born to be better off than your parents? (Part 1 of Generations in Pursuit of the American Dream). *Forbes.com*. July 16, 2014. Available at: <http://www.forbes.com/sites/neilhowe/2014/07/16/part-1-generations-in-pursuit-of-the-american-dream/>.

² Americans' satisfaction with the opportunity for the next generation to live better than their parents. May 10-13, 2012. Available at: <http://www.gallup.com/poll/155021/Majority-Dissatisfied-Next-Generation-Prospects.aspx>.

³ Trong Ao, Eboni Taylor, Emily Lankau, Teresa I. Sivilli, Curtis Blanton, Sharmila Shetty, Barbara Lopes-Cardozo, Jennifer Cochran, Heidi Ellis, Paul Geltman, (2012). *An Investigation into Suicides among Bhutanese Refugees in the U.S. 2009 – 2012: Stakeholders Report*. October 18, 2012. Atlanta, GA: Centers for Disease Control.

Working with Community Connectors from within refugee communities to administer the survey over three consecutive years has resulted in enduring relationships between refugees and the RISE evaluation team. Perspectives from refugee participants and Community Connectors have informed and enhanced our findings. Our respondents recognize the unique contribution they can make to the lives of refugees in Denver and throughout the United States. They are eager to share their stories, which remain invisible and untold to most Americans. They have carved time from extensive work and child-rearing schedules and braved horrible weather to take the RISE survey and participate in our interviews and focus groups. Community Connectors have helped refugees move, provided rides, and assisted them with helpful information to encourage their continued participation in the surveys.

We on the evaluation team have been inspired by the perseverance and resilience of the refugees in our sample and the commitment of our Community Connectors to making RISE a success. We strive to justify the hope and trust they place in us by representing their stories with integrity as we map the pathways they travel towards integration into U.S. economy, society, and culture. We think our work can illuminate gaps in the trail, where strategic deployment of resources can provide bridges to facilitate the journey. Ultimately, the evaluation team hopes that RISE will improve the pathways refugees travel toward better lives. We have met them along these paths, and our own lives are enriched a result.

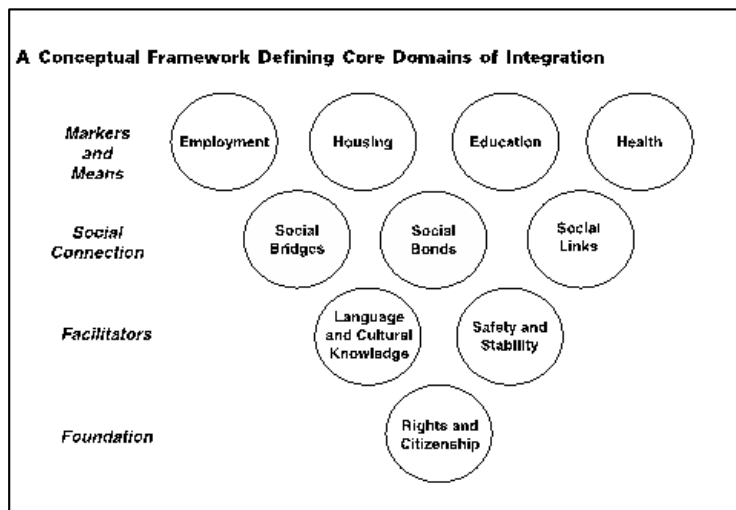
Dr. Gary Lichtenstein, Principal Investigator
Quality Evaluation Designs

II. Summary of Year 4 (2013-14) Activities

2013-14 was the fourth year of Quality Evaluation Designs' (QED) implementation of the Refugee Integration Survey & Evaluation (RISE) project, and the third year of data collection. Data collection involves administering the RISE survey annually to each refugee in the sample, and collecting interviews and focus groups with a subset of respondents. The sample consists of adult refugees who arrived in Denver from January 2011 through March 2012.

The survey is based on Agar & Strang's conceptual framework of refugee integration, which has been accepted as a model of integration worldwide. Ager and Strang developed "The Indicators of Integration Framework" (2004, 2008)⁴ after years of exploring the construct of "integration" through an exhaustive literature review, fieldwork in refugee settlement communities, and rigorous qualitative data analysis and verification. Rather than attempt to define integration, they delineated its principal components. The framework identifies ten dimensions of integration, which, individually and collectively, are pathways to successful integration. Ager and Strang grouped these ten "core domains" of integration into four themes, as seen in Figure 2.1 below; and any number or combination of pathways might lead to success. Although this depiction may insinuate a hierarchy of progress, Ager and Strang's research suggests no such evidence. In fact, the use of both *Markers and Means* demonstrates how domains can be indicators of integration as well as a pathway to integration.

Figure 2.1. Agar & Strang's Conceptual Framework Defining Core Domains of Integration*



*From: Ager, A. and Strang, A. (2004) Indicators of Integration: Final Report. Home Office Development and Practice Report #28, London: Home Office

⁴ Agar, A., & Strang, S. (2008). Understanding integration: A conceptual framework. *Journal of Refugee Studies*, v1, n2, pp. 166-191. UK: Oxford University Press. And Ager, A. and Strang, A. (2004) Indicators of Integration: Final Report. Home Office Development and Practice Report #28, London: Home Office

In the 9 years since this framework was proposed, it has served as a heuristic for facilitating discussion and integration policy in several countries, including the United States (Ager & Strang 2008). The framework has influenced national and regional policy formulation (Home Office 2008)⁵, and its critique (ICAR 2004)⁶, served as a structure for commissioning and/or developing services aimed at supporting refugee integration (Smyth et al, 2010)⁷, and formed the basis of multiple qualitative studies on aspects of refugee resettlement.

In spite of the influence the model has had on integration policy worldwide, QED has found no evidence that the model has been operationalized with any valid and reliable metrics, nor have we found any longitudinal survey study of integration. The RISE survey assesses integration across 10 pathways, 9 of which align with Agar & Strang’s framework (see Figure 2.2).⁸

Figure 2.2. The 10 Pathways that RISE Assesses

- | | | |
|-------------------------------------|--------------------------------|---------------------------------|
| • Employment & Economic Sufficiency | • Housing | • Language & Cultural Knowledge |
| • Education & Training | • Health & Physical Well-Being | • Safety & Stability |
| • Children’s Education | • Social Bonding | • Civic Engagement |
| | • Social Bridging | |

The RISE team includes:

- Dr. Gary Lichtenstein, QED Principal, who is primarily responsible for study design and execution, as well as contracting, project communication, and dissemination.
- Ms. Maggie Miller is the RISE Project Manager, responsible for day-to-day operations, Community Connector selection and oversight, and data collection.
- Dr. Jini Puma, faculty at the University of Colorado, Denver, who is the lead on database management and statistical analyses.
- Dr. Laurie Bennett, an independent consultant who is the lead on qualitative study design, implementation, and analysis.
- Dr. Martin L. Tombari, University of Texas, Austin, who advises on survey development, statistical analyses, and research.
- Dr. Amy Engelman, is an independent consultant who, during 2014-15, will work in Denver on auxiliary RISE studies and issues related to refugee services and public policy.
- Ms. Nicole DuFour, an independent consultant responsible for survey data entry, transcription, and assisting with qualitative data collection.

⁵ Home Office (2008). *Path to Citizenship*, U.K. Green Paper, London: HMSO.

⁶ ICAR (2004) *Response to Integration Matters: A National Strategy for Refugee Integration*. London: Information Center on Asylum and Refugees in the U.K.

⁷ Smyth, G., Stewart, E., and DaLamba, S. (2010). Introduction: Critical Reflections on Refugee Integration: Lessons from Integration Perspectives, *Journal of Refugee Studies*, 23 (4), 411-414.

⁸ QED uses the term “pathways,” instead of “domains”. Also, , QED modified and collapsed two of Agar & Strang’s domains into one and added the *Child’s Education* pathway.

The design and implementation of the RISE project is grounded in the principles of Community-based Research (CBR). CBR is collaborative, change-oriented research that engages community members, organizational representatives, and researchers in a project that addresses community-identified needs.⁹

CBR aims to increase knowledge and understanding of a given phenomenon and integrate the knowledge gained with interventions and policy and social change to improve the health and quality of life of community members.¹⁰ The CBR project described in this report aligns with the following CBR principles (outlined by Israel): (1) *recognizes community as a unit of identity*; (2) *builds on strengths and resources within the community*; (3) *facilitates collaborative partnerships in all phases of the research*; (4) *integrates knowledge and action for mutual benefits off all partners*; (5) *promotes a co-learning and empowering process that attends to social inequalities*; and (6) *involves a cyclical and iterative process*.

Over the past year, the QED team continued the elaborate process of administering the RISE survey. We refer to this administration as Baseline + 2, indicating that we have now collected two years' of respondent data since the initial, Baseline administration in 2011-12. Over the current year, the survey was administered to 340 respondents, reflecting 93% of those who took it the prior year, and 73% of respondents who took the survey at Baseline.

In addition, the RISE team conducted several interviews and focus groups with a subset of 17 high and low integrator respondents. The purpose of these qualitative data was to assess how integration level might be reflected as refugees discussed their experiences on certain pathways.

In prior years' reports, QED has focused on the effectiveness of the RISE survey itself. We have not wanted to misguide refugee service professionals with results based on findings from a faulty survey. After three years, we have conducted validation studies (both quantitative and qualitative) to ensure the validity and reliability of survey items, the integrity of pathway data, and the effectiveness of summed pathway scores¹¹ that yield an overall integration variable.

⁹ Strand, K., Marullo, S., Cutforth, N., Stoecker, R., & Donohue, P. (2003). *Community-based research and higher education: Principles and practices*. San Francisco: Jossey-Bass.

¹⁰ Israel, B. A., Schulz, A. J., Parker, E. A., & Becker, A. B. (1998). Review of community – based research: Assessing partnership approaches to improve public health. *Annual Review of Public Health*, 19, 173 – 202. And Israel, B. A., Schulz, A. J., Parker, E. A., Becker, A. B., Allen, A., & Guzman, J. R. (2008). Critical issues in developing and following CBPR principles. In M. Minkler & N. Wallerstein (Eds.), *Community-based participatory research for health: From process to outcomes* (2nd ed., pp. 47–66). San Francisco: Jossey-Bass.

¹¹ Throughout this report, “pathway analyses” refers to analysis of the 10 integration pathways that the RISE survey assesses, not to be confused with the statistical method, *pathway analysis*. No pathway analysis methods have been employed.

Having performed extensive due diligence on the survey instrument, we are confident that the survey does assess what it purports to, and that the results are reliable and valid reflections of refugee experiences. We are still tinkering with some items in some pathway areas. The survey may continue to evolve. But, fundamentally, we believe that the structure of the survey, its scope, and its depth of coverage, provide a sound basis for evaluating refugees' integration within the first 3 years of arrival (we hope to prove the survey's value for a five-year period, but would require two more years' data collection to be assured of that). As such, in this report we summarize findings pertaining not simply to the RISE survey instrument, but mainly to the respondent population, who represent refugees who arrived three years ago from Bhutan and Burma.¹²

In the following sections, we report on lessons learned from the unique and adventurous data collection methods on which RISE depends, methods and results from qualitative and quantitative data collection, lessons learned about the RISE survey and about the refugee population we have sampled, and plans for the upcoming year, including Baseline + 3 data collection.

¹² Although in prior years we also reported data from the Iraqi and Somali communities, we were not able to retain sufficient numbers from those populations to conduct survey analyses, and we will not be including those populations in future data collection.

III. Lessons from Data Collection

Three Years of Data Collection

There have been few longitudinal studies of refugees in the United States and none that we have found using a quantitative methodology involving hundreds of respondents. One reason for the absence of longitudinal studies has to do with the huge challenges involved in tracking a very mobile population over time. Refugees don't speak English, their cell numbers change, they move. The contributions of the RISE study to professional and academic communities is based on RISE team success in retaining through the third year of data collection 73% of the original sample of 467 respondents. This high retention rate resulted from an unusual data collection method that depends upon the exceptional efforts of the RISE Project Manager and intense collaboration with Community Connectors embedded in refugee communities. In this section, we review RISE data collection procedures and reflect upon lessons learned from the effort so far.

Baseline Year: Hanging Out in Hallways and Building Trust

During the first year of this study, the RISE survey was administered to the refugees by the Volag case workers approximately 90 days after an adult refugee arrived in this country. The survey, which could take 40 minutes to administer, became part of the 90-day meeting that refugees were required to attend. For Volags, survey administration became just one more task among many for which the extraordinarily busy case workers were responsible.

In order to ensure that the surveys were administered to everyone in the cohort at the designated times, and to maintain quality assurance in administering the survey, the RISE team conducted a number of formal training sessions with the case workers and their supervisors. In addition, the RISE Project Manager made frequent visits to refugee service agencies to catch the busy case workers and their supervisors between tasks, so as to collect completed surveys, answer questions, give reassurances, and address problems of timeliness and completeness as they arose. In so doing, the Project Manager began building trust with the Volags, who had direct connections with the newly arrived refugees.

Originally Quality Evaluation Designs (QED) planned on collecting only a sample of refugees who arrived in Denver during the 2011-12 year. However, due to restricted flow of refugee arrivals, almost every newly arrived adult from the target population was sampled, and each survey became a critical data point. We needed nearly 100% participation in order for the study to proceed. The good relationships established with the Volags became critical to successful data collection during the first year.

Also during this first year, Volags provided essential information the RISE team needed in order to collect surveys in subsequent years. How do Bhutanese names work? How do the Karenni differ from the Karen? What is the structure of a particular family? These learnings occurred

through conversations with Volag case workers, and with the interpreters who administered many of the surveys—some of whom later became RISE Community Connectors.

The Community Connector Model

Beginning 2012-13, QED became responsible for administering the survey to those who took the survey in the first year, as well as conducting cognitive interviews and focus groups. To facilitate these critical facets of the RISE study, QED implemented the Community Connector model.

Community Connectors are embedded members of refugee communities. Many arrived in the United States as refugees themselves. They know the members of their communities and they are bilingual in the languages of the target populations and in English. RISE Community Connectors have lived in the U.S. for at least 2 years. They were hired to contact survey respondents every three months, track new addresses and phone numbers, and administer the RISE survey once each year. To do this, Community Connectors learned not only how to contact refugee survey respondents directly, but also learned respondents' networks of extended family and friends, so if a respondent "disappeared" (moved or got a new mobile phone number) the Community Connector could locate him or her through these networks. It would have been impossible for researchers outside of these communities to identify these networks and follow the movements of individuals and families. But from an insider's perspective, these communities are relatively intimate and people are known. Because of this, it has been possible to execute a longitudinal study of a very mobile, non- and limited-English speaking population.

Administering the survey and qualitative data collection involved many logistics. The Project Manager had to establish protocols for data collection, survey collection, and survey accountability. She had to figure out how the Community Connector model would work in practice. How would the Project Manager communicate with Community Connectors? Email did not work; texting did. Where would she meet with Community Connectors? One-on-one, it turned out, in Subway restaurants, libraries, and Starbucks. What times would work to meet with Community Connectors? Generally, at the last minute, due to Community Connectors' erratic schedules, driven by their many jobs to make ends meet, school, child care, and transportation limitations. How would information be shared? Electronic record keeping did not work for Community Connectors—but handing over printed spreadsheets did. Through trial and error, and a lot of listening, observing, and not giving up, effective systems of communications were established between the Project Manager and the Community Connectors. Establishing unique systems of communication for each Community Connector raised special challenges during turnover. Finding new Community Connectors has been difficult, and then establishing effective routines with each has been time-consuming and patience-testing.

However, because of these very challenges, relationships have been built with each Community Connector. Community Connectors value their relationship with the Project Manager, and have become committed to the mission of the RISE study. Community Connectors moved from

being mere trackers and survey givers to becoming advisors to and partners with the RISE team. They have given the team advice about individual survey items working or not working, and RISE researchers have acted on that advice. Community Connectors are consulted about focus group protocols, and their input has influenced the final product.

Community Connectors' exceptional ability to find refugees through a deep understanding of respondents' social networks enabled them to make contact in unexpected ways: finding the whereabouts of one refugee at an uncle's wedding; administering a survey to another while helping him pack boxes to move. It became clear as early as the first year that the Community Connectors see their role as a form of service, of giving back to their communities. Often, after administering a survey, respondents ask them questions about resources, cultural, or social practices, and Community Connectors discover, proudly, that they have expertise to share.

The end result of all this relationship building was 79% retention in the Baseline +1 year and 93% retention in Baseline+2, as well as amazing stories about Community Connectors efforts to administer the survey and survey respondents' extraordinary efforts to attend interviews and focus groups.

Respect, Professionalism, and Ownership

During 2013-14, retention increased to 93% of the prior year respondents and 73% of the original sample. In spite of some bumps in the road—survey administration gets behind schedule, a Community Connector disappears, a snowstorm obliterates a scheduled focus group—quantitative and qualitative data collection have proceeded fairly smoothly.

We have learned that the longer a Community Connector has been with RISE, the more valuable he or she becomes to the project. At the same time, as their own integration progresses, it becomes increasingly challenging to keep Community Connectors with RISE. Two Community Connectors remain who began in the Baseline +1 year. Each is responsible for a large proportion of RISE respondents from their communities. Whereas two years ago they relied on piecing together their small earnings from RISE with other odd jobs to make ends meet, they now have full-time, professional jobs, and seem to be on career paths in the helping professions. In spite of continuous raises for tracking respondents and administering surveys, the amount of money these Community Connectors earn from RISE is a shrinking percentage of their overall income. These two senior Community Connectors no longer need the income from RISE and they are hugely busy with other work, school, and family. At this point, it is only dedication to the RISE mission and loyalty to the RISE Project Manager that keeps them involved. Their continued participation, which now involves training newer Community Connectors, is key to the continued success of the project, both in terms of retaining refugees in the study and of providing advice about and insight into the communities themselves.

Because Community Connectors are critical to the project's success, it is worth looking more deeply into why Community Connectors remain committed to this project, especially when they have better options in terms of the money they can make and the time they can spend doing

other important things. From the perspective of the Project Manager and RISE Researchers, it all boils down to relationships.

First, the RISE Project Manager has striven throughout to treat the Community Connectors and their contribution to this project with the utmost respect. Flexing to all the limitations of technology and scheduling has built trust and warm working relationships. Community Connectors know that the Project Manager understands and respects the stresses on their time. Adjusting RISE processes to meet their needs and habits, as well as showing appreciation for their knowledge and efforts, has fostered respect.

Second, the relationship with the Community Connectors, while warm and personal, has primarily been maintained as a professional one. While Community Connectors have sought advice of the program manager, and the Project Manager has provided customized mentoring to the Community Connectors (both in their work and in their own process of integration), the personal element of the relationship has not compromised the supervisory demands of the manager role, nor the high standards for performance of the Community Connectors. No one has tried to be the Community Connectors' best friends, or to intrude into their private lives, or to patronize them. As a result, everyone has grown professionally in their roles while at the same time learning much from one another.

Third, the Community Connectors have come to feel a sense of ownership for the RISE study. Community Connectors seem truly to feel that this project can and will help refugees in the future; they proudly own it, have a stake in its success, and want to learn all that the study might find out. That sense of ownership reinforces their already strong feeling of responsibility for and commitment to the future of their communities in the U.S. Of course, the Community Connectors are most interested in what will happen to their own refugee communities—one has expressed the wish that this project could continue to track the progress within his community even after the study ends. Community Connectors' growing perception that this study is serving their communities generates a fervent commitment to the project.

There is evidence in the Community-Based Research literature of other studies that have used embedded community members for data collection. The RISE Community Connector model evolved from another research project in which a similar method was used, although it wasn't a longitudinal study. Implementing such a model raises unique challenges, the meeting of which requires creativity, flexibility, and a commitment to fostering interpersonal relationships with community members that are not common in work undertaken by universities or research firms. The RISE Project Manager and Research Team will attest that the efforts are worth it, yielding personal and professional benefits that extend far beyond mere data collection. The RISE project could not have been successful without collaboration with Community Connectors.

IV. Interviews & Focus Groups: Exploring Refugee Experiences

In May of 2014, seventeen of the refugee/participants (5% of the current total) in the RISE study were interviewed, some singularly, some in small focus groups of 2-3 individuals. The interviewees were selected primarily based upon their cumulative integration scores on last year's RISE survey (Baseline +1): we wished to interview the highest scorers and the lowest scorers, in order to see whether differences in integration levels captured by the RISE survey manifested in refugees' qualitative responses to probing questions in the different pathway areas. The selection process also considered gender, country of origin, and language groups, in an effort to obtain a fairly representative sample.

Once the potential interviewees were chosen by RISE researchers, the Community Connectors were given lists of the selected participants in their respective language groups. Community Connectors recruited the identified participants for the interviews and interpreted for the three RISE Team members who conducted them. High integrators were interviewed together and low integrators were interviewed together. The sessions were held in the local public library, community-based organizations, or churches. When needed, transportation was provided and the refugees were allowed to bring their children along (QED provided child care). Pursuant to the RISE IRB, all participants were verbally consented and signed consent forms at the outset. The sessions followed an interview protocol (see Appendix A) and each session was audio-recorded and transcribed. The coded transcripts form the basis for the following analysis.

Extremes of Integration: Two Portraits

Just as the survey scores showed variance between the highly integrated and less integrated refugees in the RISE cohort, the qualitative interviews revealed differences in integration, which were most obvious at the extremes. One way to illustrate these differences is through brief portraits of two refugees who were interviewed: Marshall and Maya.¹³

Marshall—High Integration Score

Marshall is 36 years old, living in an apartment with his wife and two daughters, age 8 and 1½. Before coming to the U.S., Marshall had left Burma to live in Malaysia; he never lived in a refugee camp. As a middle school student at a church school in Burma, he had learned to speak English well. In Malaysia, Marshall worked as a translator for a non-governmental organization (NGO).

Marshall currently works full time and is happy with his job, which he found himself, online, with some help from one of the employment specialists. With this job, and with the help of Medicaid and food stamps, Marshall is able to make ends meet, even with his wife currently not working (she stays home with the baby and takes English classes). He has a car. (Marshall notes that he is not able to save any money as yet, mostly because he is still sending money

¹³ In the interest of preserving confidentiality, these are not their real names.

back to Myanmar to his parents on a regular basis.) Marshall and his family have managed to make good use of the health care system, navigating the vagaries of Medicaid when his wife had pregnancy difficulties, and for his children's appointments, without any problems.

Marshall has a lot of friends; from the Chin community and his community organization, from work and the neighborhood, from Burma and Bhutan, and with his English-speaking apartment manager. When he is not working, Marshall spends a lot of his time helping other people; helping them to find an apartment, encouraging families through illness, praying and organizing donations when someone passes away back home, driving people who do not have cars, interpreting, and even helping his case manager help others to find jobs.

Maya—Low Integration Score

Maya is in her 40's or 50's (nobody knows for sure, including her), and lives in an apartment with her sister, her brother-in-law, and her 17-year-old son. She lived in a refugee camp in Nepal for 18 years before coming to the U.S.

Maya has no job, and has never tried to find one. She receives Supplemental Security Income (SSI) benefits and Medicaid, and pools that with her brother-in-law's income, which gives the household enough to pay debts. The family had a car, but got into an accident and have not yet gotten another. Maya relies upon her niece when she has to go somewhere. Maya is trying to save money to travel to see her mother in Ohio this summer; she would go with her high school-aged son. Maya also tries to save for clothing.

Maya spends her time in the apartment with her niece's baby, at times. She goes to a neighbor sometimes, but not often.

Contributing to her isolation is the fact that Maya is deaf and does not speak. She was accompanied at the focus group by her adult niece, who serves as her caregiver, and who spoke for her throughout the interview. Maya herself would warmly smile at the note-taker, but all verbal communication came from her niece.

These two portraits represent what might be seen as the integration extremes among the refugees we interviewed. Although Marshall's and Maya's experiences across the 10 RISE pathways differ in striking ways, differences between high and low integration were rarely so obvious.

Variations in Integration: Between the Extremes

While extreme portraits illustrate the breadth of pathways that refugees travel, in the majority of cases, differences were not so stark. Below, we deconstruct refugee interviews from the vantage point of each RISE pathway, noting common similarities and differences across refugees' integration experiences.

Employment

Do they have jobs? All seven of the men in the "high" category have full- or part-time jobs. The two women have both worked since coming to the U.S., but are currently not working; one is pregnant, the other is also pregnant and has a small child at home. Of the "low" scorers, two men work full time, one woman (with five kids) works full time, and the remaining five are unemployed, two older women—"older" being defined for the purposes of this analysis as over the age of 50—and two women and one man who appear to be disabled.

Types of jobs. The high scorers work at a variety of types of jobs, at small and large employers: a flower garden, FedEx (both part time), Udi's, an adult day care center, two at True Stain furniture store (all full time).¹⁴ The two previously employed women had worked in food services, one in a Safeway cake decorating department, the other making dim sum; it is not clear whether full or part time. The three employed low scorers all work full time, one making sushi at a restaurant, the other two at the Gbs Services LLC meat packing plant in Greeley. Some in both categories have health insurance through their jobs, and some in both do not.

How did they get their jobs? Of the high scorers, about half got their jobs through the Voluntary Agencies (the "Volags" as we call them, "the agencies" as they call them), and the other half got them by themselves (online) and/or with the help of referrals from friends. Of the employed low scorers, two got their jobs through friends, and one through his agency.

One of the high scorers wanted to go through his agency to get a job, but the employment specialist would not help him because he could, if he had wanted to do so, go on disability (this 23-year-old had undergone major surgery to correct a skull/facial deformity since he had arrived in the U.S.). He was and still is upset about this:

I want to work and I told him please find me some job but he told me just sit at home, I don't want to find you any job. He's crazy...I don't know why, when I go with him and I told him I need a job he said "send your mom to the job and you sit at home"...We need money for living, if we don't have money then we need to go to the street to live...The agency is there for helping us. And the employment specialist is so crazy.

All that being said, he is not unhappy with the way things turned out:

I am much happier because the office didn't help me, but also I get the job. I am very happy that I have the ability to find a job.

Was it easy or hard to find a job? Of all the employed participants, the answer is mixed—some say it was easy, some hard, two say "not so easy, not so hard." For those who found it hard, the

¹⁴ One high scorer's full-time employer was not identified in the interview transcript.

reasons center either on the agencies not being helpful or the language barriers.¹⁵ Those who found it easy either got good assistance from their agencies, or had English good enough to figure out the application process. Or, perhaps, they really made an effort, as one high-scoring refugee puts it:

I don't think it [was] hard, it does depend on you, if you want to get a job if you want to work it would be easy to find a job.

Everyone agrees that knowing some English made it or would make it easier to find a job.

Do they like or dislike their jobs? The high scorers' reasons for liking their jobs include the fact that they get to help people in their work, that their work allows them to learn new skills and improve their English; their reasons for disliking their jobs include not having as many hours as they might wish, transportation difficulties, and for one, that "it is too cold, I work in the cold department." For the low scorers, their reasons for job satisfaction include that they are learning English and new skills on the job; their dislikes include that their jobs are too far away (those working for Gbs Services in Greeley) and that no one on the job speaks English, so their English cannot improve. Interestingly, nobody mentions the presence or absence of benefits as a reason for liking or disliking a job.

Have they changed jobs, and if so, why? Both high and low scorers have changed jobs, some more than once. The differences in the reasons why are subtle and noteworthy. One high scorer (Marshall) who started at a casino and ended up full time at the adult day care center is clear that he changed to a job where he could help people and that made him happy. Another looked for a new one because his first (at a Circle K) was too dangerous (they got held up at night), and he found a new one that teaches him things and is giving him time to go to Community College to start his Bachelor of Arts degree. The low scorers' job changes seem more to be a result of cutbacks of hours, insufficient pay/desire to earn more to keep up with the bills, and getting tired of lengthy commutes. Overall, the reasons given for the high scorers' job changes seem more purposeful and directed towards personal growth and advancement than those for the low scorers.

Do they make enough income to live? Virtually everyone professes that the household makes enough to make ends meet, albeit barely. Interestingly, the only one who expresses concern about her current financial situation is one of the high scoring women, who no longer works as she is pregnant with her second child; the change in her family's income situation with her not working clearly troubles her. Those who work give detailed descriptions of the bills they regularly owe and pay. Both the high and low categories include refugees who live in larger households, with more than two adults (often relatives) contributing to the resource pool to get by; the unemployed low scorers contribute their SSI monies to the communal pot. Credit and

¹⁵ For the unemployed low scorers, it does not appear that any of them has ever looked for a job since arriving in the U.S. They are all older (over 50) or disabled, and receive government assistance in the forms of SSI, Medicaid, and food stamps.

debit card users are found in both categories, and some pay them off monthly while some carry a monthly balance (and may not entirely be aware of the consequences of doing so). Some own cars outright, some carry car loans, and some bum rides from others. A number in both categories speak of "travel loans" (granted to them to travel from their home country to the U.S.) that they continue to pay back, a continuing burden on the household budget. Two mention sending money back to Burma to help family members still back there. Individuals in both categories expressed a concern about being able to pay their bills and support their families if they lost their job for some reason.

For all, saving money is very hard, for some not an option at all with their budget being so tight. Nonetheless, a number in both categories talk of saving money to travel, mostly to see relatives who have settled across the country or trips with community groups. Saving money for cars is mentioned by high and low scorers.

What people want to save for may be indicative of what they hope for in the future. Two in the high group and two in the low group talk of saving money so that, in the future, they can own or run their own business.¹⁶ People in both groups want to save to buy a house eventually. (Only one of those interviewed appears to have concretely acted on that dream: a high scorer took advantage of a Lutheran/Spring Institute program to learn, "step by step," how to build credit, and used that learning to buy a house with his sister's family.) Two of the older low scoring women say they save money to buy jewelry for themselves. Another says she saves money for her funeral expenses, so as not to be a burden on her adult children.

Education and Training

Virtually everyone interviewed agrees that taking classes to learn English is hugely important. However, within both the high- and the low-scoring groups, work, making ends meet, and family responsibilities interfere with the actual taking of classes. Everyone still says he or she wants to—but conflicts with class availability and work and family schedules often prevent this. One high scorer, who has made a sincere effort to take classes, but does not currently do so, notes:

I did go to school just for two months, the Emily Griffith School. After that I keep going in my job. So during that time I went to community college school in Lowry, and I took on Saturday class. But because of my schedule shift, it's so busy that I have to work until Saturday sometimes so I cannot move on further class, but I decide to go back and study on Saturday again [when I can].

A number speak of the importance of skill acquisition for advancement and satisfaction at work: "In my mind for future for getting a better job is depend on your ability or your skill. If you have higher skills you will get an easy job." Honing skills occurs for the most part on the job; there seems to be no time for taking training classes. There are two exceptions that stand

¹⁶ Interestingly, at last year's focus groups, no one said that running one's own business was a goal or aspiration.

out, both high scorers: a 54-year-old man who lives alone, works part time, and seems to spend all his spare time either going to classes (four days a week, two at Lowry, two at Galena) or doing his homework or listening to lessons on CD (he professes not to spend time with anybody, a solitary existence, although "friends from Burma" did help him get the job he now has, so he is not entirely isolated); and a 23-year-old man who works part time, has gotten his GED since he arrived in the U.S. and is beginning Community College ultimately to earn his BA and become an engineer (not an unreasonable dream, because he arrived in the U.S. relatively fluent in English and he says he is "good at math").

One type of class taken by a number of high and low scorers is "citizenship class." From the transcripts it was not entirely clear what the citizenship class entails, but it appears to include some English instruction and the refugees seem to enjoy it.

Language and Cultural Knowledge

Speaking English. Not at all surprisingly, ability to communicate in English trumps everything. Those who knew how to speak English before they arrived in the U.S. appear to have a leg up on everyone else in many areas. When you can speak and understand some English:

- Jobs are easier to get—the application process flummoxes many non-English speakers—and easier to keep interesting. (A major drawback of some jobs mentioned by participants is that they do not provide an opportunity to speak English; when combined (such as with the Greeley meatpacking jobs) with crippling long commutes, the refugees have no time to engage in activities conducive to improving their English).
- The health care system and insurance/Medicaid/Affordable Care Act (ACA) are easier to navigate. The high scorers who have mastered some English find getting Medicaid or insurance coverage and dealing with appointments and other processes to be relatively easy and doable. Those high and low scorers with less serviceable English have been frustrated, in some cases unable to get Medicaid coverage, in others presented with unfathomable and scarily large hospital bills,¹⁷ and in one instance dogged with what he calls a "hospital mistake" where a hospital record after he had been hospitalized incorrectly stated that he was using illegal drugs, smoking and drinking, which "became a real problem" for him.
- Other bureaucratic/governmental processes are easier to negotiate. Without English, one can be at sea; for example, getting pulled over by a police cruiser while driving was mysterious and quite agitating to one refugee, who could not communicate with the officer and had to wait until he got home and got a friend to translate the ticket for him

¹⁷ One high scoring refugee reflected: "One time they asked me to visit the hospital and I thought I didn't have to pay. But when I got there they exam me and I had to pay \$800. I didn't know I had to pay and they sent me a letter that said if I don't pay it will hurt my credit so I got scared and just paid it off."

to figure out that he had run a stop sign.

Of high scorers who knew no or very limited English upon arrival, some feel happy that they have experienced success in acquiring English ability:

When I new arrived here I don't understand anything...It was really hard for me to understand English language. It has been 3 years now I understand and my speaking has become better. The best for me. Even before when have a phone rings I could not answer right away because if someone speak English, and I cannot respond right away and I do not know how to speak to them. Now it is easy.

Others of the high scorers have not acquired much English ability as yet. But none of the low scorers claim any proficiency at speaking English. They all believe learning English is a good idea. But actually acquiring English proficiency seems beyond the ones who are older (especially those who have "never been to school [and don't] even know how to read the ABCs" in their own language) or are disabled. The younger low scorers with school-age children, while pleased with their children's ease in learning the language, are working so hard (two of them at jobs where they have no chance to speak English) that they do not have the time to learn English from their progeny:

My kids, they can speak English and they teach me but I don't spend time with them a lot, I spend time with my work.

Cultural Knowledge. The major area touched upon in the interviews was Internet use. More of the high scorers have figured out how to use the Internet, and use it for work, doctor's appointments, and communicating with families and friends across the country and back in their countries of origin. One low scorer does have the internet at home and uses it "for listening to the news and also communicating with people from other countries, like gmail"; another does not know how to use it but gets her kid to use it for her. Others of the low scorers don't have it, can't figure out how to use it, and are baffled by it. Some knowledge of English does seem to make a difference in figuring out how to navigate the Internet for job and other bureaucratic purposes. One high scorer is poised to take advantage of the student discount his child will receive for computer/internet access in order to be able to use the Internet at home without too much cost.

Housing

The housing experiences of high and low scorers seem to be similar. While one interviewee presenting as the most integrated lives with his immediate family, and those presenting as least integrated all live in households with multiple adult members who may or may not be relatives, the housing situations of both high and low scorers run the gamut from living alone (one high scorer), to living together with many, many people. All but two of the participants rent; one high scorer bought a house with his sister (see above under Employment), and one low scorer lives in a house bought by her nephew "and a lot of people stay there together and she pays \$200 a month." Virtually everyone aspires to own a house at some point in the future.

Health & Physical Well-Being

Although fewer high integrators access health care than do low integrators, those with good English (mostly high integrators) have an easier time navigating the health care system than do those participants who do not speak English well. Otherwise, the *Health & Physical Well-Being* pathway does not reveal tremendous differences between high and low scorers.

Are they healthy? A number of the interviewees attest to their good health, asserting that they have no health problems, and therefore, have not visited doctors since their initial screenings. Some have conditions such as back pains, blood pressure (high or low) for which they take medication, hearing difficulties (treated with hearing aids), and difficulties with eyesight (treated with surgery and glasses); in one case, major surgery was performed soon after arriving and a serious congenital defect was corrected. Those who have had babies since arriving all have no complaints about the medical care. Those with children seem pleased with their children's care, and take their children for regular checkups. Two went to the doctor with some chronic complaints (hurt arm, hurt ankle), and the treatments provided did not improve their conditions, so they have not gone back:

| I went there [to the doctor] but there is no difference so I stopped going there.

| Last year I went to the doctor, they took the x-ray twice, once at Lowery and once somewhere else, they told me to buy the medicine, they gave me a prescription and it didn't help so I didn't go back to the doctor this year.

Making appointments. As a general rule, the participants we interviewed have managed to get appointments for themselves and their children; they have learned how to call ahead, the clinics give them reminders and provide interpreters, friends or community organizations are corralled to give assistance, transportation is arranged through friends or clinics provide rides. People have figured out this part of the puzzle.¹⁸

How to pay for it. Insurance is a different matter. One high scorer, after asserting that his health has been good and he has had no need to see a doctor after initial screenings, conceded that he was not on Medicaid and he had no medical insurance through his job; that picture has changed because he recently obtained coverage through the ACA. Many have managed to get Medicaid, but confusion about it still abounds among high and low scorers alike, with one of the high scorers left with a hefty bill after her first pregnancy because she didn't have Medicaid coverage, and once she finally got Medicaid after the fact, she could not get it to cover the original bill. Another noted his frustration with the Medicaid system (although he had managed to get Medicaid for himself after changing jobs):

¹⁸ This year, only 52% of RISE respondents report that they know how to make a doctor's appointment. This suggests that people who need to see doctors figure out how to do so.

And when the new people they come over here in America, they get the Medicaid for only 8 months, after that it was cut off. So if they are sick, if they don't have a job, then how can they pay the bill? They don't have a job, they don't have Medicaid, so the government should have to give them the Medicaid. If they have a job then also they have to give the Medicaid to help to pay the bill for the medical.

Dental. Dental care for one's children seems to be easy, while dental care for oneself is another matter. Most have not gone to the dentist at all—their insurance or level of Medicaid does not cover dental care. One younger low scorer experienced tooth pain and went to the dentist, only to be told that his Medicaid did not cover what needed to be done and he had to get dental insurance. Instead of doing so, he lives with the pain and avoids eating meat. Two older folk went to the dentist and were advised that teeth needed to be pulled; both got scared and did not go back.

Social Bonding and Social Bridging

Everyone talks about friends. Friends sit and talk at each other's apartments. Friends prepare food together. Friends go to school and to church together. Friends take care of each other's children. Friends talk on their cell phones together about how to get things done and how their lives are going. Friends from back home are contacted on the Internet. Friends (especially those who have been in the U.S. for some time) are part of the job-seeking process ("I contacted my friend who has been living here longer than me and they helped me get the job.") Friends share whatever they have, whether it is car rides, shopping excursions, advice about benefits and health care, you name it—an interviewee will say "I got it from a friend."

While spending time with family and relatives is central to the fabric of their lives, bonding with neighbors and friends from their community seems important to the day-to-day existences of nearly all the refugees we interviewed. All of the high scorers speak positively of spare time spent with friends from their own culture. For the low scorers, it is a bit different. A couple of the older women, who make use of the "older agency"—the adult day care—talk of friends they have met and regularly see there. On the other hand, Maya, the "deaf and dumb" refugee described earlier, sometimes sees a neighbor, but is reticent about visiting others because they apparently are uncomfortable with her disability. Other of the older or disabled refugees interviewed talk of having one friend (in the case of the man with mental disability issues, his patient navigator), or spending all their time with family. Among the younger low scorers, time is so taken up with work and family that there seems to be little left over to spend with friends of any kind (although the younger woman does say she has met people through her children at the park).

Some of the high scorers (and one low scorer) have ventured beyond their own culture or ethnic group to bridge to the outside, making friends from other cultures. Marshall, whom we described earlier, has befriended his American apartment manager. Others talk of friends made from their jobs, with whom they practice their English as the common language; in a couple of instances, they have learned a bit of Spanish to ease their communication with these

new friends. One talks of inviting newfound friends from other cultures to "cultural ceremony we make for the Burmese community":

"I meet my friend in my work and sometimes if we have a cultural ceremony or cultural event they come to the ceremony and we meet them there too and become friends."

For bridging to people of other cultures, it helps that the neighborhoods in which these refugees live (and the jobs in which they work) are home to refugees and immigrants from other lands: "Yes we have lots of different people, people from Burma, Somalia, Nepal, here and Mexican." The neighborhood proximity also makes it easier for folks with children to meet people from other cultures:

It helps to meet people through your kids. If we go to the park with kids and see their friend with parent we meet them....Different people, people from here and from Somali and people who speak Spanish.

Civic Engagement

Getting Help and Helping. One way of looking at the concept of civic engagement for these refugees—who arrived in the U.S. with virtually nothing, dependent upon the kindness of friends, strangers, and governmental agencies—is how they have managed to take advantage of the people and agencies available to them to smooth their entry into U.S. society, and then how, in turn, they have gotten engaged in "giving back" to those less able or fortunate than themselves. We see examples of both of these in the transcripts.

There is no question that the high scorers are doing a better job of navigating the bureaucratic mazes involved in getting jobs, English classes, health care/insurance (if their English is good), cars and homes, credit cards and (in one case) a mortgage, government assistance, etc.; they have figured out how to advocate for themselves in these messy and confusing arenas. The lower scorers, on the other hand, dwell on the difficulties encountered in trying to obtain help from others—benefits and services and the means of subsistence—or have given up trying to get it ("they try to solve their problems by their selves").

Indeed, for some of these refugees, figuring out what governmental services are available to them and creatively getting everything to which they are entitled may reflect a kind of civic engagement and a pathway to integration—they have learned to advocate for themselves in a civically engaged way, and have gained an understanding of the American system. Moreover, some of those who do not avail themselves of government services—*e.g.*, Maya, who receives no services other than SSI for her significant disabilities, others who are flummoxed by the process of obtaining Medicaid—are among the least integrated of the interviewees, victims of their inability or reluctance to get in there and learn how the system works.

There is also no question that among some of the refugees—again, mostly the high scorers, but not always—there is a culture of trying to help others, to share the benefits, however small, of what they have. If you have a car, you help your neighbors with transportation. If you know of

a job opening, you share that with a friend looking for work. If you hear of countrymen in search of housing, you talk to your apartment manager on their behalf. If a neighbor or family member has a baby at home, you stay with the child so she can go to work. If, through your community group, you learn of a death or illness in a family, you pray for them or arrange for donations to be collected. In last year's focus group, this culture of helping had not yet taken hold; it was a very prominent feature of interviewees' lives this year.

An interesting example of the notion of receiving and giving help arose in answer to questions about whether the refugees are in contact with their case managers from the Volags. There are three different kinds of responses. Some complain that their case managers do not help them anymore. Some note that they still go from time to time and get help with paperwork they don't understand, with benefits, and job searches. But the third group is more interesting. Two of the high scorers check in regularly with their old case worker and offer them help: job contacts, housing possibilities, and in one case, occasional interpreting.

Perhaps one real sign of integration is the ability to take advantage of all the help you can get, and, when you are ready, to get satisfaction from giving back help to others who need it. This may be a more culturally appropriate measure of being civically engaged.

Citizenship. A number of the interviewees expressed citizenship as one of their aspirations for the future, and as noted above, many are attending "citizenship classes." A real concern of some of the older refugees is whether they will ever be able to speak enough English to take the citizenship test. One 50-year-old interested in citizenship says, "I don't know English don't understand English, I want your advice how to apply for citizenship." A 52-year-old notes: "After 5 years I want to apply for the citizenship, but I can't speak English, so is there anyone who can help with that?" This is a real concern for the refugees.

The Impact of Demographics and Initiative-Taking

Demographics. Four aspects of demographics—things that the refugees brought to the table, as it were, upon their arrival—emerged from the transcripts as potentially having an impact on the variations in integrative progress (or not) made by the refugees in this study.

1. Age. Older refugees—here, females over 50—really have it tough. Learning a new language becomes more difficult with age, and a number of the older refugees are not literate and have never been to school in their native languages, making attending classes to learn English very challenging. In addition, older refugees often do not work, and are welcomed into their struggling, resource-pooling families in part because of the SSI benefits they bring in and the various other services (babysitting, food prep, etc.) they contribute. It is believed that if a refugee reaches the age of 70 and is not a citizen, his/her SSI benefits will be cut off. As a Community Connector points out, "if the parent over 70 is not a citizen, not bringing in money, they are just there, like a table." This causes considerable consternation to the elderly refugees. (And we learned from one of the Community Connectors that the refugees view of "elderly" begins much younger than for us—they have had

hard lives with little opportunity to take care of themselves—say, around 50, maybe younger.)

2. Disability. Disabilities can be a spur to achievement—our one young man whose facial deformities were corrected by surgery when he got here, infuriated by Volag labeling him disabled and refusing to find him work, was spurred on to find his own job and was made happy thereby—or an extreme isolator, a bar to social bonding and bridging—Maya being rejected by neighbors who don't like "deaf and dumb people."

Services like the adult day care (the "older agency") can be a real help to forestalling the sense of isolation and abandonment that both age and disability can bring to refugees. It could be fruitful to see what impact these kinds of services are having on integration.

3. Level of English learning upon arrival. Only two of our interviewees, both high scorers, had a significant amount of English before arriving in the U.S. Many others (mostly high scorers) had managed to acquire a level of English language proficiency after arriving to the U.S. Regardless, of when or how English is acquired, it clearly impacts almost all other domains.
4. Camps vs. Malaysia. There is an impression left by the transcripts that the refugees who made their way to and in Malaysia rather than living in refugee camps, or who were sent to camps, but spent a significant chunk of time outside of the camps (*e.g.*, the Bhutanese young man whose family sent him from the Nepali camp to India to finish high school) have an easier time figuring out the system in the U.S. (how to get things done) than those refugees who stayed in the camps for over a decade. QED will conduct studies in the coming year to explore this.

Taking Initiative vs. Succumbing to Confusion. There seems to be a range, a continuum of sorts, between the initiative-taking behavior demonstrated by many of the high scorers—getting one's own job, getting a house, figuring out for oneself how the system works—and the confusion exhibited by some of the low scorers in the face of all the obstacles before them. Does a refugee look at the bewilderingly complex set of factors influencing his/her life, find a challenge in that, and figure out how to make something out of it—or just get befuddled and become helpless? This comes through the transcripts pretty strongly, working itself out through the pathways. What is it that equips refugees to take initiative for themselves and their families? What makes a refugee just throw up his/her hands, say it is too hard, and complain about the case manager not helping enough? As the information gleaned from this study is reviewed to determine how refugee service might be designed to facilitate the attainment by refugees of integration and economic sufficiency, this may serve as a helpful lens through which to look.

Summary

Looking pathway by pathway, stark differences did not emerge between high and low scorers in the qualitative interviews, except at the extremes. We found examples of low scorers sharing the experience of high scorers in a pathway and high scorers sharing the experience of low scorers. Yet it was more often the case that trends emerged, with most low scorers sharing experiences within a pathway and most high scorers sharing experiences within specific pathways. This pattern is consistent with Agar and Strang's theory of integration, which hypothesizes that integration is a multi-faceted phenomenon, and that individuals may travel at different rates along different pathways.¹⁹ The pattern of results that emerged across the qualitative data argue using multiple pathways in order to assess refugees' overall resettlement success, and not focusing on a single pathway, such as employment. In Section VII, we interpret both qualitative and quantitative findings and present insights to date.

¹⁹ Agar, A., & Strang, S. (2008). Understanding integration: A conceptual framework. *Journal of Refugee Studies*, v1, n2, pp. 166-191. UK: Oxford University Press

V. Summary of Survey Analyses

In 2013-14, QED Community Connectors administered 340 RISE surveys, which reflected 73% retention from Baseline administration (B) and 93% retention from the prior year (Baseline +1, or B+1). The RISE project has 73% retention from Baseline to the third year of data collection (B+2). Because surveys are administered orally in respondents' native language, nearly all surveys are 100% complete with very few *Don't Know/Refused to Answer* responses (see Appendix B for Baseline + 2 Survey).

Table 5.1. Demographic Characteristics of the RISE Samples Over Time

Demographic Variable	Baseline % (n=467)	B+1 % (n=367)	B+2 % (n=340)
Country of Origin			
Bhutan	57.9	68.8	73.2
Burma	33.4	24.7	23.8
Iraq (n=2)	3.9	3.4	0.6
Somalia (n=8)	4.8	3.1	2.4
Gender			
Male	49.2	48.8	47.6
Female			
Marital Status			
Married	61.1	68.7	71.1
Divorced	1.3	0.5	0.9
Separated	2.4	1.4	1.5
Widowed	3.9	4.1	4.8
Single, never married	30.9	25.0	21.1
Other	0.4	0.3	0.6
Age (in years) Mean (SD)	33.5 (12.8)	34.16 (13.1)	34.9 (13.70)

In B+2, Bhutan remained the largest country of origin among respondents, comprising 73.5% of the sample, followed by Burma at 23.5%. We only retained 2 Iraqis of the 18 surveyed at Baseline. Iraqis are known to be more insulated than other refugee groups, and QED struggled to find reliable, committed Community Connectors from this ethnic group. We retained only 8 of the original 22 Somalis from Baseline. Due to the inability to analyze survey data on so few respondents, QED will no longer follow up with respondents from Iraq and Somalia.

Demographic data across the sample remained fairly stable in terms of gender, marital status, and age as shown in the table above. Not surprisingly, perhaps, the proportion of single respondents drops while the proportion of married respondents rises.

Assessing Pathway Variables Over Time²⁰

Three Years of Pathway Data

The RISE survey assesses 10 pathways (formerly referred to as domains), including:

- | | |
|--------------------------------------|-----------------------|
| 1. Employment & Economic Sufficiency | 6. Social Bonding |
| 2. Education & Training | 7. Social Bridging |
| 3. Children's Education | 8. Language & Culture |
| 4. Health & Physical Well-Being | 9. Safety & Stability |
| 5. Housing | 10. Civic Engagement |

A summary of data on each pathway is provided below.

1. Employment & Economic Sufficiency

Table 5.2 shows a steady increase from Baseline to B+2 in the proportion of refugees employed, from 17.2% at Baseline to 63.0% at B+2. Number of refugees employed 30-39 hours each week evidenced a large jump in B+1 (from 53.8% to 74.9%) and a modest increase in B+2 to 77.2%. Nearly 17% are under-employed, working less than 30 hour per week, which is consistent with the employment complaints heard in the focus groups. That being said, the percentage of refugees employed for 30 or more hours has increased from 60% at Baseline to 83% at B+2. Refugees report an increase in family earnings (see Table 5.3), but not a sharp increase, and we see a slight decline in the proportion receiving retirement benefits through their job. This could be a reflection of the economy. During the B+2 RISE administration, we asked whether transportation was a barrier to employment, based on qualitative data we collected during B+1. A large proportion of refugees, 36.4%, report that transportation is a barrier. This proportion was likely much higher at B and B+1. As we suspected from our interviews, transportation is a critical factor that influences integration.

Table 5.2 also shows an 11% increase over B+1 in the number of refugees reporting part-time jobs (67.3% in B+2), and an 18% increase in the number of refugees who report holding 2-3 jobs in the last year (25.4% in B+2). Our data cannot determine whether these jobs are held simultaneously or in parallel; we suspect that that this varies by individual at different times. However, relatively few (6% at B+2) report working over 40 hours each week, and this reflects a steady drop from Baseline.

²⁰ Throughout this report, “pathway analyses” refers to analysis of the 10 integration pathways that the RISE survey assesses, not to be confused with the statistical method, *pathway analysis*. No pathway analysis methods have been employed.

Table 5.2 Frequencies for Employment Variables

Employment Variable	Baseline %	B+1 %	B+2 %
Currently Employed? (Yes)	17.0	54.2	62.8
Hours per Week Employed			
1-9	3.8	2.5	2.3
10-19	7.7	2.5	4.7
20-29	25.6	12.3	9.8
30-39	53.8	74.9	77.2
40-49	6.4	6.9	5.1
> 50	2.6	1.0	.9
Receive Retirement Benefits w/Job? (Yes)	4.7	12.0	10.5
# of Part-Time Jobs in the last year			
0	93.6	78.7	67.3
1	6.4	20.8	32.0
2	0.0	0.5	0.7
Total # of Jobs in the U.S. in Past Year			
0	85.8	38.8	28.0
1	14.0	53.3	46.3
2 or 3	0.2	7.9	25.4
4 or more	0.0	0.0	0.3

Barriers to Employment

The number of unemployed refugees in the RISE sample has decreased over time (B: n = 370 (83%); B+1: n = 167 (46%); B+2: n = 126 (37%)), which is encouraging. It is interesting to examine the changes in barriers to employment over time (see Figure 5.1). Although it is not reflected in Figure 5.1, the biggest barrier to employment in B+2 was transportation, which was an obstacle in combination with other factors. Over a third of all respondents (employed and unemployed) (36.4%) indicated that transportation was a barrier to finding and keeping a job.

Overall, more refugees are working 30-39 hours per week, and the proportion working more than that has declined. Table 5.3 shows that, at the same time, self-reported family income has increased across the sample from a median of \$700-\$900 at Baseline and B+1, to \$1,000-\$1,299 at B+2. The inference here is that, overall, refugees are getting jobs that pay better than the ones they had in the previous two years. Nevertheless, the self-reported median income per family is still low.

Figure 5.1. Barriers to Employment

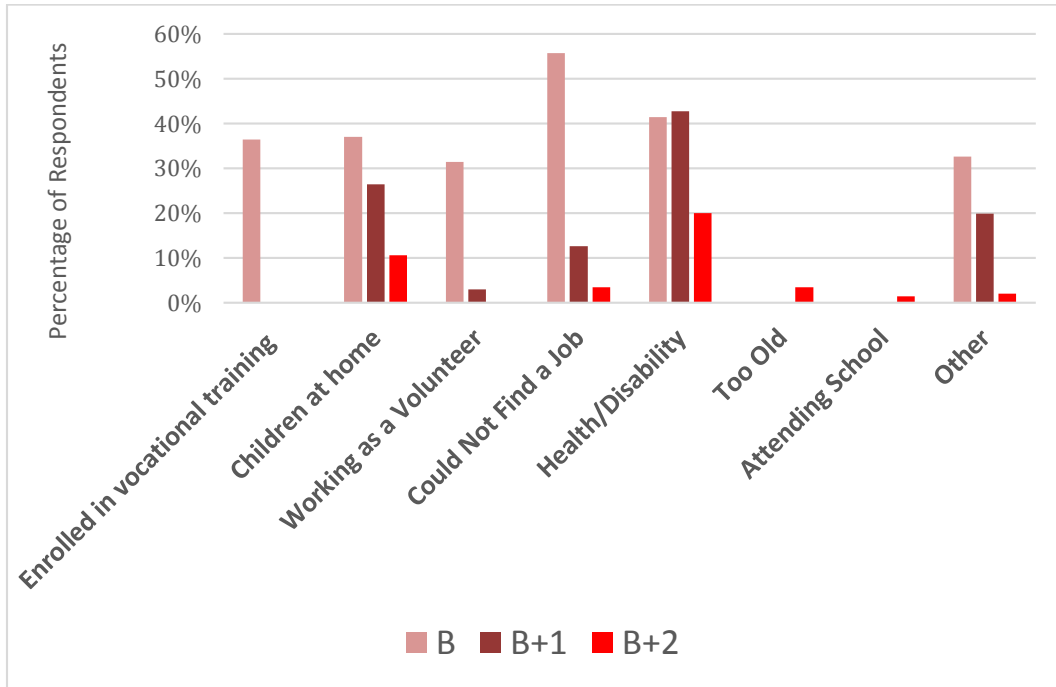


Table 5.3. Frequencies for Family Income Categories

Family's Average Monthly Net Income	Baseline	B+1	B+2
\$0	10.4	27.8	10.4
\$1 - 399	6.3	1.9	4.6
\$400 - 699	15.3	10.5	5.2
\$700 - 999	22.6	13.5	18.0
\$1,000 - 1,299	21.5	18.7	18.3
\$1,300 - 1,599	11.4	12.9	25.6
\$1,600 – 1,899	7.1	9.9	11.6
\$1,900 – 2,199	1.9	3.0	4.3
\$2,200 – 2,499	3.5	1.1	2.1

Table 5.4 (below) shows that refugees report that their jobs are matching their education levels more often than in previous years. At Baseline, 47.2% reported that their jobs were at their education level. This dipped to 40.8% at B+1, and then jumped to 63.3% at B+2.

Table 5.4. Employment Relative to Education Level

Considering all your jobs, are you employed...	Baseline %	B+1 %	B+2 %
Below your education level	50.0	58.6	36.2
At your education level	47.2	40.8	63.3
Above your education level	2.8	0.5	0.5

2. Education & Training

The education and training pathway shows varied results across the sample (see Table 5.5). At B+2, few (5.0%) had obtained a license or certificate. Across the three years, 38 respondents, approximately 10% of the current sample, report having obtained a work-related license or certificate. Just under half (44.9%) continue to take job-readiness courses. Over half, (58%) report taking English language classes, although nearly 15% report that transportation problems pose barriers in their ability to do so. We speculate that this is a decline from previous years and the logistics of taking English language classes is an issue worthy of further study.

At Baseline, 1.3% (n=7) of the sample were enrolled in high school degree programs. At B+1, 5.4% (n=20) were enrolled in degree programs that included AA and bachelors' degrees. Missing data on this question makes it difficult to know for sure, but we suspect that the level of those in degree programs is approximately the same, with fewer refugees being enrolled in high school diploma programs and more are enrolled in AA programs. One refugee reports being enrolled in a bachelor's program and one is enrolled in a master's degree program.

Table 5.5. Frequencies for Education & Training Variables

Variable	Baseline %	B+1 %	B+2 %
Within the past year, have you obtained a work-related license or certificate	17.5	4.6	5.0
Taken job-training/job-readiness classes/programs	28.3	53.4	44.9
Taken an English language class	66.8	62.7	58.0
Within the past year, have transportation problems been a barrier in taking English language classes?	-	-	14.8
Taken other kinds of classes	13.3	4.1	6.7
Is currently enrolled in a degree program [†]	1.3	5.4	--
Level of degree program			
High School Dip/GED	100.0	85.0	--
Associates degree	0.0	10.0	--
Bachelor's degree	0.0	5.0	--
Master's or above	0.0	0.0	--

[†]This question changed in B+2 to “Are you currently enrolled in a community college or a college?” However, there was a large percentage of missing data for this variable so that results are not comparable to prior years.

3. Children's Education

At the beginning of the RISE study, QED surmised that having school-aged children could be a pathway towards integration for caregivers, if supporting the child's education resulted in interactions with teachers and attendance at school events. During interviews, mothers talked about interacting with people from within and outside their home culture when they took their children to the park. As Table 5.6 shows, there is evidence at B+2 of increased interaction among caregivers in terms of visiting with a child's teacher (65.2% compared to 59.2% at B+1) and attending school events (41.5% compared to 26.5 at B+1). Attendance at events outside school dropped considerably (to 6.9%) after a spike at B+1 to 21.2%. The proportion (and number) of parents that volunteer at the school has doubled, but remains low (5.1%, n=8). Consistent with previous years, about one-third of respondents report that their child has a good friend at school who is not from his or her own country or culture.

Table 5.6. Frequencies for Children’s Education Variables

Variable	Baseline % (n=223)*	B+1 % (n=147)*	B+2 % (n=158)*
Has visited with at least one of your children’s teachers about his/her performance or progress in school	29.1	59.2	65.2
Has volunteered time at children’s school	1.6	2.7	5.1
Has attended a social, sporting, cultural, educational activity or event at children’s school	7.2	26.5	41.5
Has attended a social, sporting, cultural, educational activity or event outside children’s school	4.4	21.2	7.0
At least one child has at least one good friend at school who is not from home country or culture	31.1	39.3	34.9

*Number of respondents who report having children living with them. QED cannot explain the drop in the number from Baseline to B+1.

4. Health & Physical Well-Being

Table 5.7. Frequencies for Health and Physical Well-Being Variables

Variable	Baseline %	B+1 %	B+2 %
Has visited a doctor for a routine physical exam w/in the past year?	71.6	87.5	86.4
Knows to how to make an appointment to see a doctor	32.4	55.3	51.6
Has any kind of health care coverage, including health insurance, prepaid plans such as HMO’s (like Kaiser), or government plans such as Medicaid	96.9	49.7	58.4
Has visited a dentist or dental clinic for a routine exam within the past year	17.8	11.4	2.9

At B+1, QED found unexpected results related to *Health & Physical Well-Being*. It was the only pathway that showed a dramatic reduction in overall pathway scores, and evidenced a negative correlation with the other pathways. Further analyses, followed by interviews, revealed that this pathway is negatively correlated with integration among younger, healthier respondents, but is an avenue of integration for older adults and those with disabilities. At B+2, half of respondents (51.6%) still do not know how to make a doctor’s appointment, even though 86.4% report having seen a doctor for a routine exam in the prior year. We noted that 42.6%

report having no health insurance; however, we believe that most, if not all, are eligible for Medicaid. If this is the case, refugees might need assistance accessing this benefit.

5. Housing

Housing is one pathway that shows uniformly high results, even from Baseline (see Table 5.8). Exceptions to living in a home or apartment were so rare that the item identifies refugees with serious adaptation challenges. At B+2, we divided the item, *I live in my own home*, into two items, one for those who rent and another for those who own. Currently, 97.1% report renting, but some have bought homes. This could be a long-range proxy for integration. Number of bedrooms where refugees live might be an intermediate range variable. At B+2, we see a decrease in the proportion of those who report living in places with one bedroom, with increased percentages of those living in places with two, three, or more than three bedrooms, which could be a proxy for upward mobility. Finally, the sharp decline continued of those receiving government assistance for housing, from 79.0% at Baseline, to 13.3% at B+1, down to 5.3% at B+2.

Table 5.8. Frequencies for Housing Variables

Variable	Baseline %	B+1 %	B+2 %
What is your housing situation?			
I am currently homeless	0.2	0.3	0.0
I live in a homeless shelter/transitional housing	0.4	0.0	0.0
I rotate between homes of friends/family	0.7	3.5	0.0
I live in my own home (i.e. rooms, apt, condo)	98.7	96.2	-
I rent house/apt	-	-	97.1
I own house/condo	-	-	2.9
How many bedrooms are in the place where you live?			
1	44.1	38.6	33.9
2	48.6	51.9	49.0
3	6.8	6.2	13.0
4+	--	3.2	4.1
Do you get help from the government to pay your rent or housing costs? (Yes)	79.0	13.3	5.3

6. Social Bonding

Social Bonding pathway items all reflect a big jump from Baseline to B+1 and steady increases from B+1 to B+2 (see Table 5.9). We know of at least one case in which a high integrator expressly avoids affiliating with members of his own culture in order to improve his English and accelerate his integration. On the whole, however, *Social Bonding* seems to be a correlate of successful integration.

Table 5.9. Frequencies for Social Bonding Variables

Variable	Baseline %	B+1 %	B+2 %
Do you spend time with people who share your culture, ethnic group, language, or religion? (Yes)	78.7	90.3	96.1
Do you access information about your culture, ethnic group, language, or religion? (Yes)	57.8	76.6	81.2
Since coming to Denver, have you attended a celebration or event of your culture, ethnic group, language, or religion (i.e., march, parade, or festival)? (Yes)	30.8	86.4	90.3

7. Social Bridging

Table 5.10. Frequencies for Social Bridging Variables

Variable	Baseline %	B+1 %	B+2 %
Do you spend time with people of a culture, ethnic group, language, or religion different from your own? (Yes)	48.0	60.0	54.8
Do you access information about cultures, ethnic groups, languages, or religions different from your own? (Yes)	29.5	55.7	59.3
Since coming to Denver, have you attended a celebration or event of a culture, ethnic group, language, or religion different than your own (i.e., march, parade, festival)? (Yes)	13.1	61.4	63.3

Responses on items related to the *Social Bridging* pathway are not as uniformly high as with *Social Bonding*, yielding “yes” responses from between 55% and 63% of refugees (see Table 5.10). *Social Bridging* is clearly a marker of integration, reflecting a strong correlation with all other pathway variables, and a nearly linear correlation ($r^2 = .801$, $p < .01$) with *Language and Cultural Knowledge*. At B+2, we see a slight dip in the proportion of those who report spending time with people of a culture, ethnic group, language, or religion different from their own. Yet slightly more refugees report accessing information about different cultures and attending a celebration or event of a different culture.

8. Language & Cultural Knowledge

This pathway has higher correlations with other pathways than does any other. It is certainly a marker for, if not predictor of, overall integration. *Language and Cultural Knowledge* has more scored items than any other pathway, giving it more weight in the overall integration score, than other pathways, which we feel is appropriate. At B+2, QED added response options to

clarify English speaking skills. The new response option, “I speak a little English” performed well (see Table 5.11).

Table 5.11. Frequencies for Language and Cultural Knowledge Variables

Variable	Baseline %	B+1 %	B+2 %
Which of the following best describes your English skills?			
I cannot speak English.	32.1	22.7	25.4
I speak a little English.	-	-	22.7
I can speak English when shopping or doing other types of business.	54.8	36.0	3.5
I can speak English in most social and work situations.	6.3	35.9	43.1
I am fluent in English.	6.7	5.4	5.0
Do you regularly speak with people whose first language is English? (Yes)	43.6	56.8	47.5
Do you celebrate any American holidays? (Yes)	34.8	65.2	66.1
Correctly identified location of the White House & Congress	33.3	51.4	57.6

Table 5.11 shows little change in the proportion of those who “cannot speak English.” Three more individuals than last year chose this response. We are finding that some who have poor spoken English skills over-estimate their abilities compared to those who have stronger skills. Those who know more English might be more aware of what they do not know. The proportion of those who “can speak English in most social and work situations” increased from 35.9% to 43.1%. Approximately 5.0% of respondents (similar to B+1) report that they are fluent. Although 57.6% correctly identified the location of the White House and Congress, 42.4% could not. Two-thirds, 66.1% report celebrating American holidays.

9. Safety & Stability

Safety and Stability (see Table 5.12) has a low correlation with most other pathways, but a moderate correlation with *Social Bonding* ($r^2=.36$, $p<.01$), *Social Bridging* ($r^2=.38$, $p<.001$) and *Language & Cultural Knowledge* ($r^2=.33$, $p<.01$). This pathway could possibly be a precursor to success in other pathways that are strongly linked to overall integration scores. *Safety & Stability* emerged as a critical variable in the cluster analyses summarized below.

Proportions of refugees who feel safe in their homes have steadily risen from Baseline (90.3%) to B+2 (98.9%). There was a large jump in the rate of those who feel comfortable outside the home, 44.3% at B+1 to 92.8% at B+2. At B+2, 94.4% would call the fire department to report a fire, and more (96.6%), would call the police if attacked by a stranger. A few more refugees than at Baseline have been victims of crime, but slightly fewer than in the previous year. Three people report having experienced racism or religious discrimination, while 99.1% report never having experienced these things, and 8% “didn’t know” or did not respond to the question.

Table 5.12. Frequencies for Safety & Stability Variables

Variable	Baseline %	B+1 %	B+2 %
Do you feel safe when you are at home? (Yes)	90.3	95.1	98.9
Do you feel safe when you are outside the home?	56.3	44.3	92.8
Would you call the fire department to report a fire?	86.7	91.7	94.4
Since coming to Denver, have you been the victim of a crime, such as assault, robbery, or vandalism?	1.3	3.8	3.3
Since coming to Denver, have you experienced racial, cultural, or religious discrimination?			
Never	98.2	98.1	99.1
Sometimes	1.6	1.6	0.9
Regularly	0.2	0.3	0.0
Don't Know/Refused to Answer	0.0	0.0	8.0

10. Civic Engagement

Table 5.13. Frequencies for Civic Engagement Variables

Variable	Baseline %	B+1 %	B+2 %
Have you participated in meetings of community organizations, clubs, or governmental agencies in the past year? (Yes)	3.7	8.5	5.0
Have you volunteered your time for community organizations, clubs, or governmental agencies since in the past year? (Yes)	2.3	5.5	3.6
Have you advocated or spoken up for your own or your family's rights in public and/or before a government agency, body, or office in the past year? (Yes)	1.1	1.4	2.1
Have you applied for a green card? (Yes)	0.9	93.2	97.6
Do you wish to become a citizen of the United States? (Yes)	98.6	99.4	98.8

Civic Engagement is not a pathway taken by many refugees so far (see Table 4.13). It might be a long-range pathway that follows success in other pathways, such as economic sufficiency and increased English skills. Although two more individuals than in prior years (n=7) advocated for their own or a family members' rights, there were slight dips in the percentage of respondents who indicate that they have participated in community meetings and have volunteered their time. On the other hand, refugees express a strong desire, both in interviews and on the

survey, to become U.S. citizens. At B+2, 98.8% of refugees report that they wish to become U.S. citizens, and 97.6% have applied for their green cards.

Changes in Pathway Scores from B +1 to B +2

As might be expected, group scores on specific pathways change over time. QED analyzed changes in specific pathways from Baseline to B+1 and from B+1 to B+2 (see Table 5.14). This analysis helps us understand to some extent what issues commonly affect all refugees during a given year, and spot changes in specific pathways that affect low and high integrators alike.

Table 5.14. Changes in Pathway Scores Over Time

Pathway Variables	Change from B to B+1	Change from B+1 to B+2
<i>Employment & Econ. Sufficiency</i>	***	**
<i>Education & Training</i>	*	NS
<i>Child's Educ.</i>	NS	***
<i>Health & Phys. Well-Being</i>	***†	NS
<i>Social Bonding</i>	***	NS
<i>Social Bridging</i>	***	NS
<i>Language & Cultural Knowledge</i>	***	*
<i>Safety & Stability</i>	***	***
<i>Civic Engagement</i>	***	***

Note: NS = Not significant change *=Significant change (p<.05); **=Highly significant change (p<.01), ***=Highly, highly significant change (p<.001).

† *Health & Physical Well-Being* is the only variable to show a drop from one year to the next. All other changes are increases.

Changes in Pathway Analyses Over Time analyses show significant changes from Baseline to Baseline +1 with all but one pathway (*Child's Education*), which reflects highly significant change. From Baseline+1 to Baseline +2, overall increases were not significant for several pathways (those that show NS change). Significant change did occur, however, in the areas of *Employment & Economic Sufficiency* and *Language & Cultural Knowledge*, but at a lesser rate than in the prior year. Whereas from Baseline to B+1 there was no significant change in *Child's Education*, that pathway showed highly, highly significant increase from B+1 to B+2. This suggests that we might see higher integration this year among refugees who have children, which appears to be the case in the cluster analyses, below.

Relationships between Pathways in B+2

QED has performed analyses to identify relationships between pathways. Correlation is one such analysis. Correlation is a measure of the relationship between two variables. Correlations range from -1 to +1. The closer a correlation is to 1 (positive or negative) the stronger the relationship. Table 5.15 shows the relationships between different pathways. Correlations between 0.0 and 0.2 (positive or negative) suggest no relationship at all. Relationships between 0.2-0.5 (positive or negative) are moderate. Relationships greater than 0.5 (positive or negative) are strong. Relationships are not assumed to be causal. For example *Language and*

Cultural Knowledge has a strong relationship with *Employment and Economic Sufficiency* ($r^2=.56$, $p<.01$). But we cannot say that employment causes high scores on *Language and Cultural Knowledge* or vice-versa.

Employment and Economic Sufficiency, *Education & Training*, *Social Bridging*, and *Language and Cultural Knowledge* all show moderate to strong relationships with other variables, making them important contributors to overall integration. *Social Bonding* and *Safety and Stability* have moderate relationships with other variables, which suggest that they also play an important role in overall integration.

When a correlation is negative but moderate or strong, it suggests that when one variable is high, the other is low. For example, *Health and Physical Well-Being* has a moderate, negative relationship to *Employment and Economic Sufficiency* ($r^2=-.43$, $p<.01$). This means that if a refugee scores high on *Employment and Economic Sufficiency*, he or she will probably score low on *Health and Physical Well-Being*. Conversely, if a refugee scores low on *Employment and Economic Sufficiency* (for example, a 70 year old female), she is likely to score high on *Health and Physical Well-Being*. Items on *Health and Well-Being* probe for how effective one is in interfacing with the medical establishment. Someone who is healthy and has no cause to visit doctors or undergo medical tests may score low on this item. But the 70-year old female, who would probably score low on *Employment and Economic Sufficiency*, might have accessed health services several times. For her, interfacing with the medical establishment is a pathway towards integration.

Table 5.15. Correlations Between Pathways at B+2

	Employment & Econ. Sufficiency	Education & Training	Child's Educ.	Health & Physical Well Being	Social Bonding	Social Bridging	Language & Cultural Knowledge	Safety & Stability	Civic Engagement
Employment & Econ. Sufficiency	1	.38**	-.01	-.43**	.19**	.56**	.56**	.15**	.34**
Education & Training		1	-.01	-.14*	.29**	.54**	.53**	.28**	.28**
Child's Educ.			1	-.01	.14**	.02	-.06	-.02	.05
Health & Physical Well-Being				1	-.11	-.28**	-.32**	-.01	-.03
Social Bonding					1	.50**	.42**	.36**	.09
Social Bridging						1	.80**	.38**	.33**
Language & Cultural Knowledge							1	.33**	.46**
Safety & Stability								1	.09
Civic Engagement									1

*Relationship is significant at p<.05

**Relationship is significant at p<.01.

Assessing Overall Integration Over Time

Examining changes in specific pathways and relationships between pathways provides some insights into the integration process. Yet looking at overall scores across all pathways gives a more vivid understanding of the successes and challenges refugees face as whole and by specific demographic groups in their adjustment to U.S. society and culture. By summing scored items related to each pathway, QED derives an *Overall Integration* score. Using the profile of *Overall Integration* scores at Baseline + 1 year, QED applied cut-points for low, medium, and high integration. In this section, we summarize our analyses of these scores.

Looking at *Overall Integration* among all refugees as a group, we see that the group average has increased steadily from Baseline through Baseline+2 (see Figure 5.2). This is what we would both hope for and expect, so this is an encouraging finding. In fact, at Baseline+1, 30% of *Low Integrators* shifted to *Medium* or *High*. At Baseline+2, another 11% shifted from *Low Integrators* to *Medium* or *High*, leaving 21% of the population as *Low Integrators* at Baseline+2, compared to 63% *Low* at Baseline.

Figure 5.2. Mean Integration Scores by RISE Administration

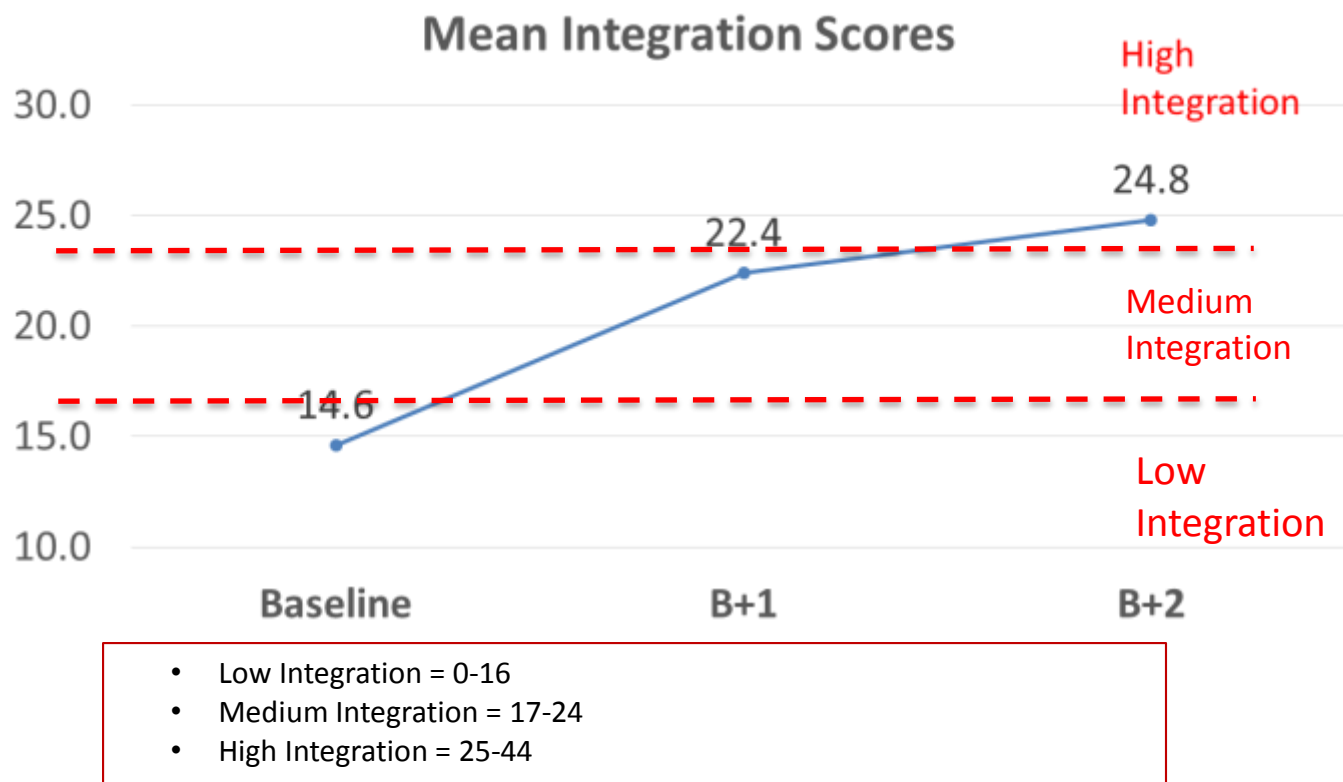
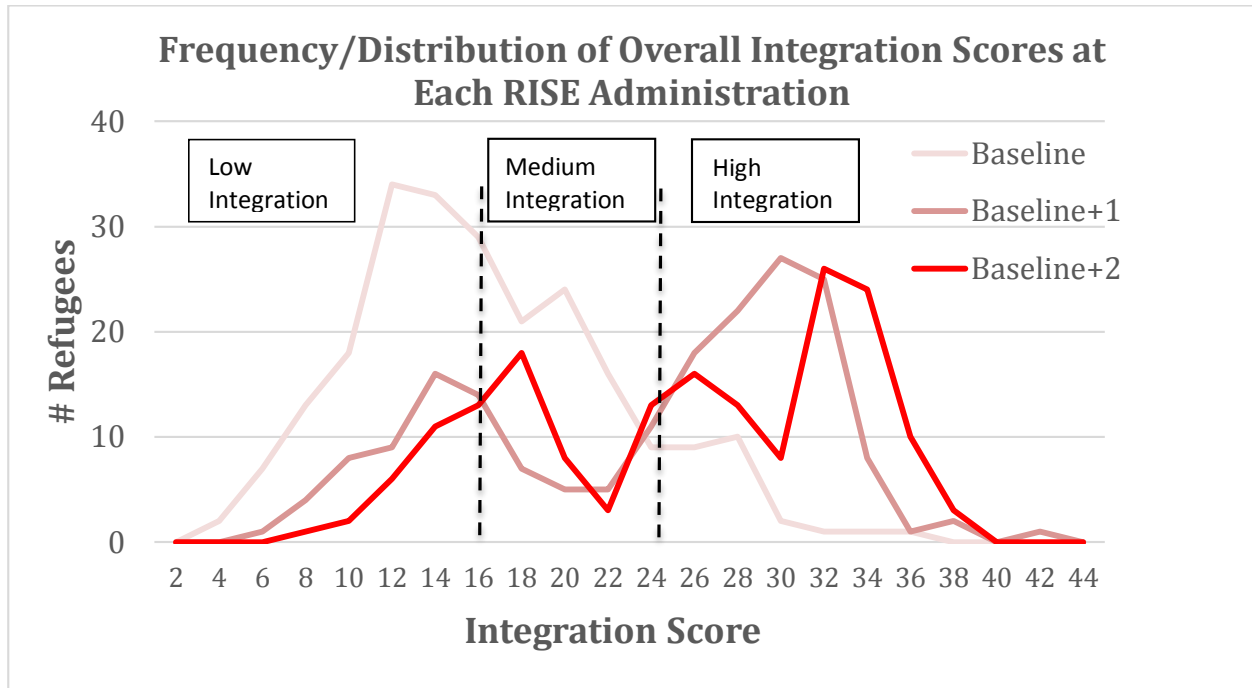


Figure 5.2 sums up the overall story of refugee integration across the three survey years. In Figure 5.3, below, we can see in greater detail the extent to which the sample as a whole has shifted towards higher integration. This graph plots the scores of all refugees on the

integration scale (0-44) for all three RISE administrations. Humps in the line indicate a large number of refugees scoring in the ranges covered by the hump. If the reader follows the faintest line (Baseline administration), we see one major hump between Integration Scores of 10 and 16. From there, few refugees have high integration scores and the line tapers off at Integration Scores of 30 and greater.

Figure 5.3. Frequency and Distribution of Integration Scores at each RISE Administration.



Looking at the middle line (Baseline +1), we see one hump between 10 and 18 and another hump between 26 and 34. This shows refugees fanning out along the integration continuum, with more refugees having higher integration scores. By Baseline +2 (the red line) we see the first hump moving toward the right, covering scores 14-20. There is a second hump between 24 and 28, and a third hump between 31 and 36. Each year, the humps at the low and high ends move towards the right, indicating higher scores across the sample.

Although during Baseline +2 most refugees stayed in the same integration category or moved up, some moved down. Table 5.19 shows the percentages of refugees in the three categories at Baseline + 1 compared to the percent of refugees in categories at Baseline + 2. Here is how to read this table: Looking at the upper left box, we see that 48.1% of refugees who scored *Low* at Baseline+1 also scored *Low* at Baseline+2. Moving one box to the right, we see that 34.9% of refugees who scored *Low* at Baseline+1 scored *Medium* at Baseline +2. Looking at the second row, we see that 16.4% of refugees who scored *Medium* at Baseline+1 scored *Low* at Baseline+2. Looking at the third row, 3.8% of those that scored *High* at Baseline +1 scored *Low* at Baseline +2, and 9.4% that scored *High* at Baseline +1 scored *Medium* at Baseline +2.

Some slippage might be expected across the sample. A qualitative study of the 30 refugees who slipped back a category between the second and third administration could give excellent

insights into critical factors that support and thwart integration. (As an aside, there was no slippage of refugees from a higher integration category to a lower one between Baseline and Baseline +1).

Table 5.16. Shifts in Integration Groups from Baseline +1 to Baseline +2

B+1 (n=367)	B+2 (n=320)			Total % of B+1
	% Low	% Medium	% High	
Low	48.1	34.9	17.0	100
Medium	16.4 (n=9)	36.4	47.3	100
High	3.8 (n=6)	9.4 (n=15)	86.8	100
Total B+2	20.6%	22.5%	56.9%	100

Integration by Demographic Group

QED analyzed differences in refugees' integration by demographic group. Figure 5.4 shows *Overall Integration* by gender. This graph shows that men's means on *Overall Integration* start out a bit higher than women's, but that the two trend lines increase and track one another closely. In year three, men still evidence a higher mean overall; however, the difference is not statistically significant. This means that men and women increase towards integration at the same rate.²¹

²¹ Means shown in Figure 5.4 differ slightly from means reported in the 2012-13 evaluation. This is due to the fact that missing data have been supplied.

Figure 5.4. Overall Integration Across Three RISE Administrations by Gender

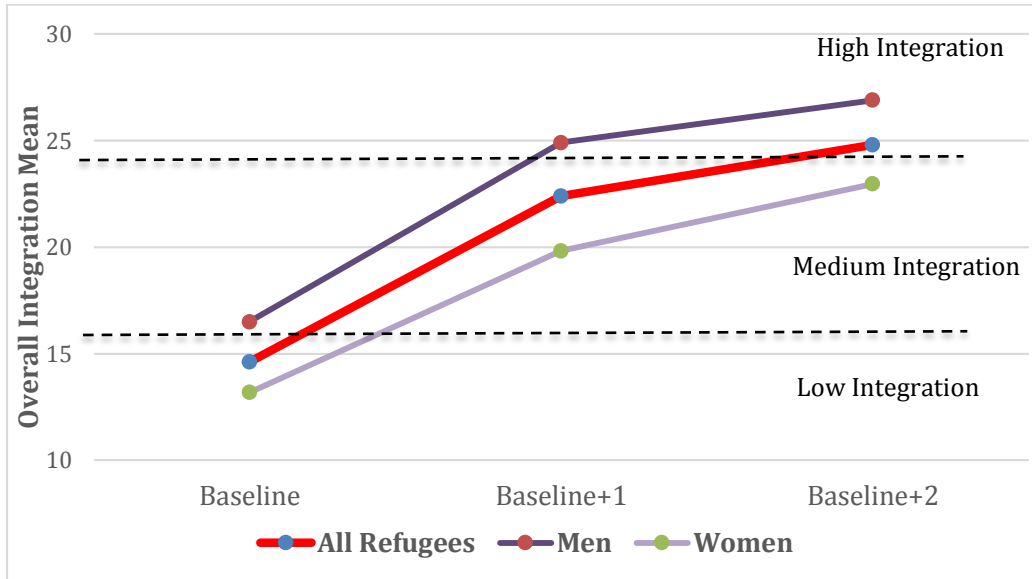


Figure 5.5 shows differences in integration levels by country of origin. We see a statistical difference between overall integration levels of those from Bhutan compared to those from Burma ($p < .001$). Both populations began at Baseline in the Low range (Bhutan 15.8, Burma 14.1). While both populations increased in *Overall Integration* over the next two administrations, the Burmese increased at a slower rate. Differences in the beginning and end means are highly, highly statistically different ($p < .001$).

Figure 5.5. Overall Integration Across Three RISE Administrations by Country of Origin

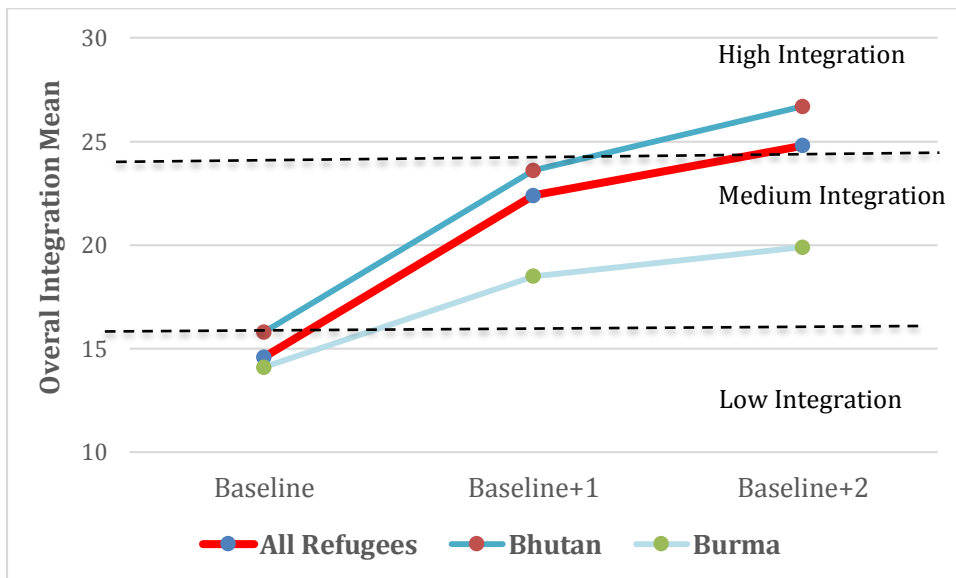
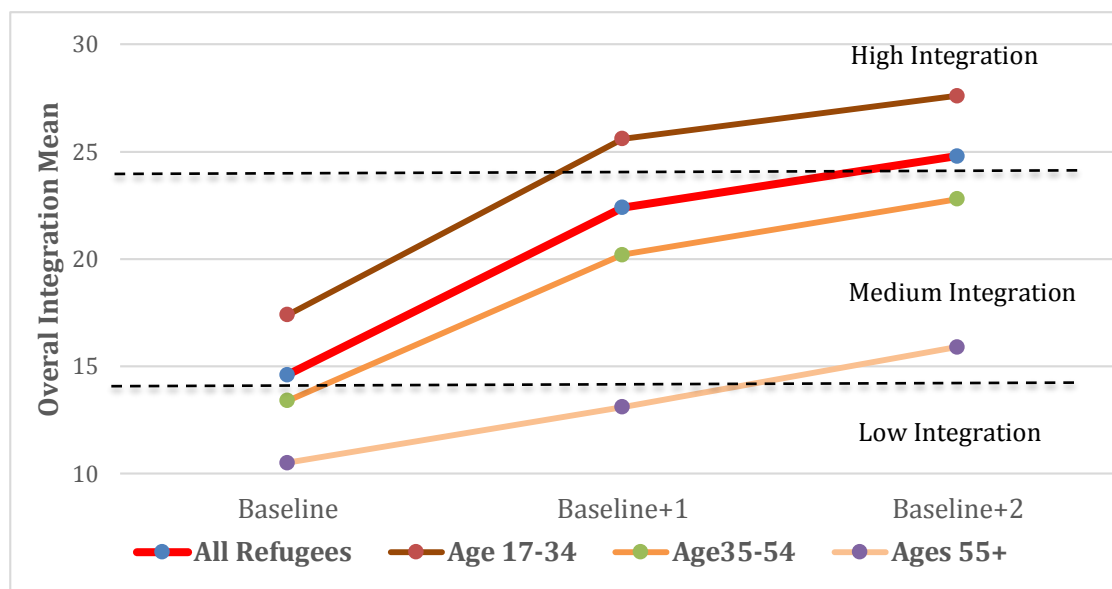


Figure 5.6 shows how age influences *Overall Integration*. RISE researchers plotted all ages in the sample, then noted natural breaks in the data. Three age groups were identified: Age 17-34 (62%), 35-54 (28%), and 55 and over (11%). We see very distinct mean age differences between the integration groups. Mean differences in ages at each level are highly, highly statistically significant ($p < .002$), indicating that age is a predictor of integration level. More specifically, we see a relatively flat trend line for those 55 and older. Although increases in the other two groups is steady, above or near *High Integration* in the third year, the mean age for the 55+ category just crosses into *Medium Integration*. The older a refugee is upon arrival, the more challenges he or she faces. Although 55 and older comprise only 11% of the refugee population, as a group they face greater challenges, as suggested by the different profile of the trend line in Figure 5.6. Qualitative data suggest that older refugees provide valuable support to younger generation refugees (child care and SSI income), yet also they struggle more with language and other resettlement issues.

Figure 5.6. Overall Integration Across Three RISE Administrations by Age



Cluster Analyses: Patterns Across Pathways

Looking at an individual’s score on a single pathway, or even the correlation between two pathways, is like taking a snapshot of integration. But the multi-faceted integration process is more like a movie, with several themes (pathways) interacting at the same time. Cluster analyses are one way to tell this dynamic story.

Most of our analyses of overall integration are based on the sum of scores across all 10 pathways. Since some pathways have more items, those pathways give greater weight to the score. For the cluster analyses, we transform all pathway scores from the current year (Baseline + 2) onto the same scale, so all pathways have equal weight (z-scores). On this scale, all pathways have a mean of 0 and a standard deviation of 1. If a z-score is positive that means

that the score is above the mean of the entire sample; if a score is negative, then it is below the sample mean. First, we ran an analysis to identify common integration patterns among subgroups of refugees.²² Four common patterns emerged:

- Cluster 1 includes refugees who have a pattern of above average scores on each pathway and who don't have children (High Integrators, No Children). This group comprised 146 respondents, or 43% of the sample.
- Cluster 2 includes refugees who have a pattern of above average scores on most pathways and who have children (High Integrators, With Children). This group comprised 58 respondents, or 17% of the sample.
- Cluster 3 includes refugees with below average scores on most pathways, and who access health care and feel safe (Low Integrators who Access Health Care and Feel Safe). This group comprised 101 respondents, or 30% of the sample.
- Cluster 4 includes refugees with below average scores on all pathways (Low Integrators Who Do Not Engage in Any Pathway). This group comprises 30 respondents, or 9% of the sample.²³

Figure 5.7 is a graph of the average scores of refugees in each group. Keep in mind these are mean scores. An individual in any cluster can have a score higher and lower than the group average. In qualitative interviews, it was difficult to distinguish high and low integrators on a case by case basis—individuals who are low and high integrators can have similar experiences on a specific pathway. But even in the qualitative interviews, trends emerged across low and high integrators, which are shown in stark relief in Figure 5.7.

The cluster analyses provide critical information to refugee service professionals. By identifying common patterns of integration, these analyses cluster refugees by their circumstances and needs. For example, low integrators who feel safe (Cluster 3) have a very different cluster profile than low integrators who don't feel safe (Cluster 4). Those who have above average scores and who don't have children (Cluster 1) travel pathways differently than those with above average scores who do have children (Cluster 2).

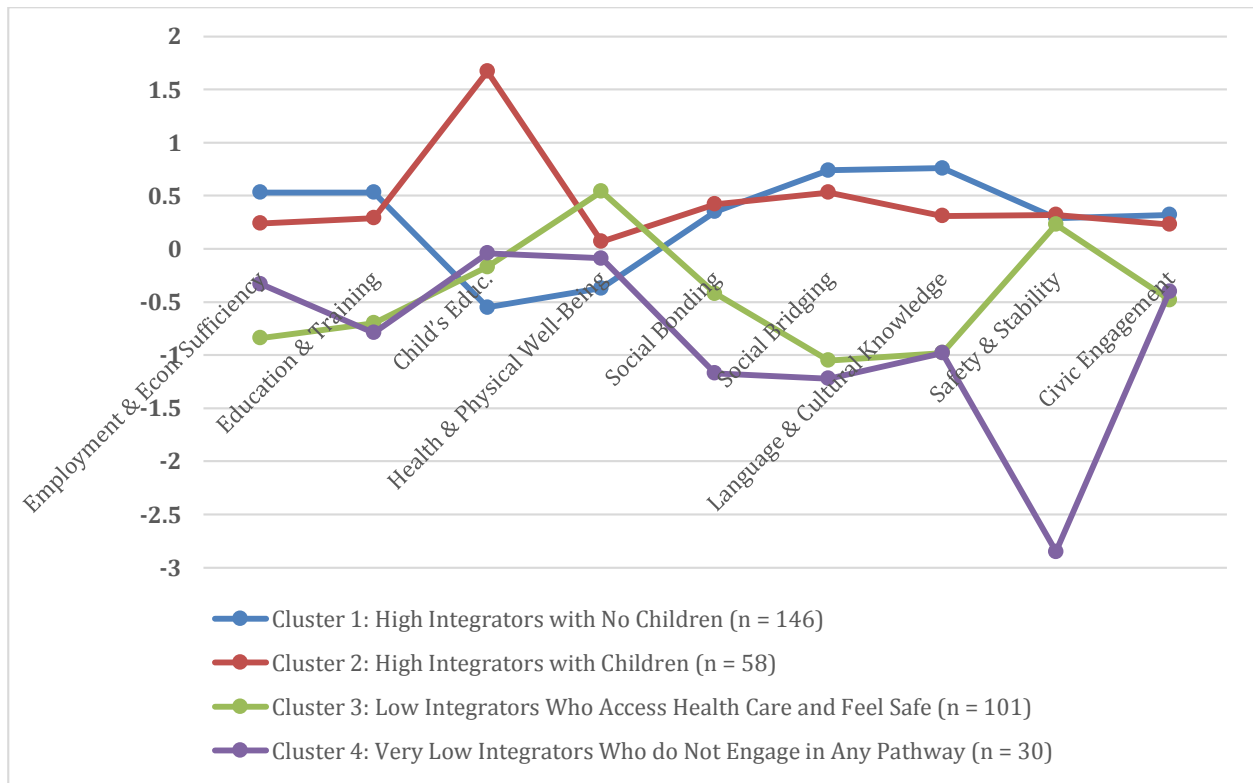
The other vital data we get from cluster analyses is which pathways are most challenging for different cluster groups. To best interpret Figure 5.7, follow each line from left to right. Where a line dips to -0.5, individuals in that group are scoring significantly below the mean. Anything below -1.0 is a highly significant slump compared to refugees in other groups. Conversely, a group score of 0.5 above the mean is high, and 1.0 is very high. For example, if you are looking

²² A hierarchical cluster analysis with squared Euclidian distance as the linking method was first run in order to explore the clustering of the data for the various pathways. The agglomeration coefficients indicated that a four-cluster solution would fit the data the best. Figure 5.15 is the result of a K-means cluster analysis.

²³ In total, cluster analyses included 99% of the sample. Five respondents were not included due to missing data.

at this chart and noticing the huge dip in Cluster 4 scores related to *Safety and Stability*, and you are thinking this extremely low score may warrant an intervention, you are understanding the data correctly. Another inference from these data is that those who frequently interface with the health care profession (that is, they score high on *Health & Physical Well-Being*) are at risk of being low integrators overall.

Figure 5-7. Cluster Analyses: Finding Common Patterns Across Pathways*



* With only one scored item, *Housing* cannot be included in these analyses. However, nearly 100% of respondents all score the same on that pathway, so the mean for each group on this graph would be 0.

We can add one other piece of critical information to this picture. There are highly, highly significant differences ($p < .001$) in the average age of members of each cluster group, but in an unexpected way, as shown in Table 5.17.

Table 5.17. Mean Difference in Cluster Groups by Age*

Cluster Group	Mean Age	Standard Dev.
<i>Group 1</i>	27.7	9.0
<i>Group 2</i>	36.3	9.9
<i>Group 3</i>	42.6	15.7
<i>Group 4</i>	38.13	12.9

* Age differences between cluster groups are highly, highly significant ($p < .001$).

As refugee service professionals probably expect, age plays a significant factor in refugees' integration experiences. Three years after arrival to the U.S., 60% of our sample fall into the *High Integration* category, and most of these refugees are in their 20's and 30's. Figure 5.6 (above) shows that *Overall Integration* scores decrease with age. While cluster analyses show highly significant differences in age by cluster group, these differences do not reflect linear patterns by age. Although high integrators (Group 1 and 2) do have younger mean ages, mean ages of low integrators are only a few years' different, and although the mean ages of those in the low integrator groups are higher than those in the high integration groups, the mean ages (and fairly wide standard deviations) suggest members of each cluster group (Clusters 2, 3, and 4 in particular) represent a range of ages. Low integrators tend to be older refugees, but that's not the entire story. *Safety & Stability* and *Health & Physical Well-Being* are important factors as well. Further study of the interdependence among factors that influence integration progress can pinpoint the most effective deployment of agencies' resources to ensure that more refugees integrate successfully.

Summary

RISE researchers conducted the following statistical analyses on the RISE survey data, which were summarized in this section:

- Frequencies by demographic group
- Summary scores on selected items for each pathway for all three survey administrations
- Changes over time of each pathway for Baseline to B+1, and B+1 to B+2
- Correlations between pathways for the Baseline +2 administration
- *Overall Integration* score means for the entire sample
- *Overall Integration* curve for all respondents each of the three administrations
- Proportions of refugees who fall into each integration category at B+2 compared to B+1
- *Overall Integration* means by gender, country of origin, and age groups
- Cluster analyses, including demographics that define low and high integrators

Each analysis reveals a different piece of the refugee story. Analyses based on *Overall Integration* scores reveal the dynamic, multi-faceted nature of refugee integration experiences. Taken together, these data profile refugee integration pathways and some critical factors that influence successful resettlement. In Section VII, we summarize our major findings and insights.

VI. What Are We Learning About the RISE Survey?

In the first two years of data collection (2011-12, 2012-13), QED focused our analyses on the RISE survey itself, probing the integrity of each of the pathway items using both quantitative and qualitative methods. Quantitatively, we examined item frequencies, inter- and intra-pathway statistics, and correlations to identify items and pathways that were behaving poorly, statistically speaking. We conducted focus groups and one-on-one cognitive interviews to explore how refugees thought about different pathways as well as how they interpreted specific survey items. We consulted our Community Connectors about items that seemed consistently problematic. We also conducted a translation study with an independent, third-party firm to check the validity of key survey items.

This process of continual refinement strengthened the survey to the point where RISE researchers now feel confident that results reflect the experiences of Denver refugees and are not artifacts of a faulty survey. Our confidence springs from a pattern of evidence over time, including the following:

- Correlations between pathway scores are mostly in expected directions. Co-efficients are mostly mild to moderate, suggesting that they are relatively independent but assessing different aspects of an underlying phenomenon. Negative and positive correlations co-vary in similar ways across years. Unexpected correlations (i.e., *Health & Physical Well-Being*) are consistent with findings from qualitative data.
- Cognitive interviews showed that most items we studied were understood as we intended them to be, and when this wasn't the case we altered or removed the item.
- Qualitative data identified items (e.g. transportation) that were important to include in the survey. On the other hand, reports from refugees and Community Connectors have not suggested pathways that should be included that aren't already.
- *Overall Integration* means have shifted in expected ways over time. Baseline did capture some variation at the very beginning, and the instrument seems to effectively discriminate among refugees as they fan out along the integration continuum. The instrument seems sensitive enough to capture movement of those who slid backwards from a higher to a lower integration level.
- Cluster analyses present compelling evidence of consistency of results across pathways within different sub-groups of respondents. Results of z-score analyses mirror results from weighted pathway scores. We believe that this is a strong indicator of both the reliability and validity of the instrument.

In short, QED is confident that the RISE survey effectively quantifies refugees' experiences according to Agar and Strang's integration framework.²⁴ Each pathway section seems to capture variation as well as lack of variation in refugee experiences. Taken together, the

²⁴ Agar, A., & Strang, S. (2008). Understanding integration: A conceptual framework. *Journal of Refugee Studies*, v1, n2, pp. 166-191. UK: Oxford University Press

Overall Integration score seems to effectively summarize refugees' progress across pathways that result in *low*, *medium*, and *high* integration. Further administrations as well as more comprehensive qualitative research will help us determine what, exactly, low, medium, and high experiences look like, but the survey metrics do effectively place respondents along the continuum and it does seem from our studies so far that medium integrators have better integration overall than low integrators, and that high integrators have integrated more effectively than low and medium integrators.

The scoring system we have used seems effective. Each pathway section contains two types of items: scored items and auxiliary items. Auxiliary items are not scored; they provide supporting information that extends and/or deepens information we get from scored items. Pathways vary in terms of the number of scored items in each, ranging from a low of 1 (*Housing*) to a high of 9 (*Language & Cultural Knowledge*). Scored items are always Yes/No, with one point for Yes, zero for no.

Overall Integration is the sum of all points on all scored pathways items. This means that pathways with more items have the potential of carrying more weight than those with fewer items. We believe that this is warranted by our cluster analyses and correlation studies, which have identified some pathways as more important than others for successful integration, at least in the first few years after refugee arrival. An alternative approach would be to summarize all pathway items according to a common denominator (z-scores) and weight each pathway equally. QED has experimented with this and although we used this approach for cluster analyses, we feel that results obtained from raw (weighted) pathway scores more effectively reflect refugees' experiences overall. Most pathways are already weighted appropriately; however, we are adding four items to *Social Bridging* in the Baseline+3 administration, as we've discovered that it ranks close to *Language and Cultural Knowledge* in terms of its importance in integration. While pathway items are pretty good at discriminating between respondents, *Overall Integration* score is a stronger measure than individual pathway scores.

Overall Integration falls on a range of 0-44. At Baseline, no refugee reached the maximum score (one refugee scored 38). At Baseline + 1 and Baseline +2, one refugee scored 44, and respondents were distributed across the continuum. While we surmise that scores for most respondents will reach the high range in 2-3 years, we believe that the survey certainly meets the goal of identifying integration levels of refugees from arrival through the first four or five years. After that, as more and more refugees score in the high integration range, a ceiling effect will likely limit the effectiveness of the instrument.

The survey is designed to be administered orally in respondents' home language. We see this as a necessary requirement to assure both reliability and validity. Many refugees come to the U.S. with little or no literacy in their home language. A written version of RISE, no matter how simplified, would not be well understood by a good proportion of refugees. Administering the survey orally enables refugees to ask questions, which ensures that responses align with the intention underlying each question.

In addition, after the Baseline administration, RISE researchers learned that the survey had been translated in a formal register more commonly used in business, education, and politics. We chose to maintain that register in future administrations to preserve reliability. Although most items are intentionally simple, administering the survey orally enabled respondents to clarify the intention of certain items.

There are several technical features we could go into about survey properties and items. QED will gladly entertain such discussions with interested audiences. The RISE survey continues to be modified each year, as we get new information from survey administration and qualitative studies. However, we are confident that, in its current form, the RISE survey is an effective tool for assessing refugee integration from arrival through the first four or five years of resettlement.

VII. What Are We Learning About Refugees?

In Section V, we reviewed the quantitative findings from analyses of each pathway and all pathways together (*Overall Integration* scores). Taken together, these analyses reveal a profile of refugee integration in terms of the ten pathways assessed on the RISE survey. In Section IV, we explored these pathways by asking refugees to relate their experiences in interviews and focus groups. Their stories provide color and shading to the broader outlines revealed by the survey data. Taken together, a vivid and multi-faceted mural is emerging showing systematic progress, supports, and challenges refugees face during their first three years integrating into Denver's economy, society, and culture.

From interviews and focus groups, we learn that each refugee finds her or his way based on the supports and opportunities that arise along his or her journey. While Volags placed about half of our interview respondents in jobs, the other half find employment on their own. Job satisfaction for both low and high scorers was strongly influenced by the extent to which their jobs help them learn English. Low and high integrators valued this equally. All respondents in our qualitative sample report that they earn enough to meet their bills, but it's close, and a fragile balance. This year, unlike previous years, some talk about owning businesses. Others talk about owning homes as they did at Baseline +1, but now some have attended seminars and/or begun saving, which wasn't evidenced in the prior year.

Every respondent with whom we spoke commented on the importance of learning English. Ease of learning the language and access to classes that meet travel and work constraints varies. But all refugees recognize the connection between being able to speak English and experiencing success in the U.S. Getting jobs, accessing health care, and understanding social and cultural norms are obviously much easier for those who understand and/or speak English. Older respondents, who often have had little formal education in their home countries, struggle more than others to learn the language, which might be why age is such a defining factor in the survey results. Language might or might not be a factor related to refugees' access of health care. In the current year, 58% report that they have some kind of health coverage. Several who we would have thought are eligible for Medicaid have not enrolled; this is a noteworthy finding.

The RISE survey shows that nearly all respondents have adequate housing. In fact, if a refugee reports that he or she lives in a shelter or some transitional facility, this is likely a cause for intervention. (In the current year, 97% reported renting an apartment or house, and 3% report owning a house or condo.) Even though many refugees live with multiple families or large extended families in crowded apartments when they first arrive, by year three they have begun moving into apartments with more rooms and some have moved into houses. At Baseline, 6.8% of refugees lived in places with three or more bedrooms. At Baseline +1, that increased slightly to 9.4%, and at Baseline +2 this nearly doubled to 17.1% who report living in places with three or more bedrooms.

Social Bonding and *Social Bridging* are important indicators of integration. It is through connections with others that refugees learn to navigate resettlement. *Social Bridging* is a strong correlate of *Overall Integration*. *Social Bonding* might be a precursor, or at least an indicator of healthy socialization. During interviews and focus groups, respondents often commented about how friends from within and outside the culture help them.

Across interview and focus group transcripts, RISE researchers discerned qualitative differences in the extent to which refugees described their situations. Some talked about circumstances and challenges happening to them. Others spoke with more agency, as if they believed that they could alter these circumstances on their own. Our limited sample doesn't enable us to draw conclusions about whether this is even a phenomenon, or whether it is a distinguishing factor between low and high integrators. However, an extensive self-efficacy literature in psychology has shown over and over that one's beliefs about one's ability to alter one's circumstance is a strong predictor of whether one takes action to do so. RISE researchers are curious about the extent to which one's circumstances before arrival might influence refugees' perceptions of their ability to alter their own circumstances, and therefore their ability to integrate in the U.S. We have added questions to the Baseline +3 survey to explore this.

Although the underlying factors of integration cannot be known, a key finding from our data is that integration among the overall cohort has steadily increased (refer to Figure 5.1). Mean *Overall Integration* scores have moved from *low* at Baseline (2011-12) to *medium* at Baseline +1 (2012-13) and *high* at Baseline +2 (2013-14). Our quantitative and qualitative data suggest that no one is more concerned about successful integration than refugees themselves. As they describe the challenges they face overcoming obstacles along several pathways, they also express hope and gratitude for the opportunity to make new lives in this strange country.

Agar & Strang (2004, 2008)²⁵ emphasize the interdependence among pathways. We have found both in the survey and interview data that refugees progress unevenly towards integration. Looking at an individual refugee or individual pathway, one may find similar levels of integration among a high and low integrator. In Section IV, where we summarize qualitative data, it was possible to clearly distinguish the experiences of low and high integrators only at the extremes. Along much of the integration continuum, some low and some high integrators can report similar experiences and outcomes and their overall progress towards integration may seem indistinguishable. However, by looking across pathways, we see that individuals begin to separate into low and high groups. Within pathways, trends emerge for those who are predominately low and those who are predominately high integrators. This is one reason why *Overall Integration* is a stronger indicator of progress than scores in specific pathways.

Although our unit of analysis for the survey is the individual, we believe that integration might be best understood in the context of the family unit, however that is defined by each family's

²⁵ Ager, A. and Strang, A. (2004) Indicators of Integration: Final Report. Home Office Development and Practice Report #28, London: Home Office; Agar, A., & Strang, S. (2008). Understanding integration: A conceptual framework. *Journal of Refugee Studies*, v1, n2, pp. 166-191. UK: Oxford University Press.

circumstances. In fact, we have renamed *Employment & Economic Self-Sufficiency* to *Employment and Economic Sufficiency*, to better capture the family dynamics that underlie effective integration. In many refugee families, one or more members might be wage earners, with others supporting the wage earners by running a household and/or raising the children. Women may work only part time or not at all, and an elderly mother or father might not work at all, but assists with child care and brings in several hundred dollars each month in Supplemental Security Income (SSI). Part-time workers and unemployed elders can be primary care givers, which enables a husband and possibly others to work full or part time. In light of this, “economic self-sufficiency” is a misnomer, because primary wage earners are dependent on other family members in order to hold jobs and earn income, just as dependents who support the wage earners rely on wage earners’ income to manage the household and raise the children.

Survey data have identified group differences in integration, as well as the salience of some pathways over others at different times. For example, men’s *Overall Integration* means are higher than women’s, possibly due to men’s’ greater participation in the workforce. Yet, women are progressing towards integration at the same rate as men, relying on different pathways. This suggests that *Employment and Economic Sufficiency* is only one indicator of successful integration, and it might not be the best indicator for all refugees. In fact, the data suggest that *Employment and Economic Sufficiency* might depend on success in other pathways, such as *Social Bridging* and *Language & Cultural Knowledge*, which are important pathways to effective integration of all refugees.

Language and Cultural Knowledge is a critical pathway for nearly everyone. About half of our sample of refugees continue to take English language classes three years after arrival, and in interviews, nearly all talk about how important it is to learn English. Of those who are employed, some speak English as part of their job, but others do not. More refugees would take English language classes, but location and timing are often obstacles, especially since transportation is often difficult.

Age is strongly tied to level of integration. Those who are 55 years and older have significantly lower *Overall Integration* scores than those in other age groups, and progress at significantly slower rates. Those aged 35-54 have medium integration three years after arrival. Those aged 17-34 average in the high integration range three years after arrival. Yet the rate of increase among 35-54 year olds is comparable to that of 17-24 year olds.

Cluster analyses show distinct patterns of integration for those who have children, those who don’t, those who access medical services, and those who don’t feel safe. These factors are not necessarily causal, but they are a means by which to target differing needs among sub-groups of refugees. Further study will help us better understand specific needs and how resources might be deployed to most effectively meet them.

These findings stand out in our data. Some of these insights will be intuitive to those familiar with refugee issues. However, no data were available previously to document suspected relationships, nor was there a means by which to look at integration patterns by different

groupings of refugees. The RISE survey gives us many opportunities to explore relationships between variables, and this will be a focus in the coming year. Meantime, one thing is clear: the policy agenda to broaden the focus on refugees' transition using an integration framework was forward thinking and right-headed. A singular focus on employment and economic self-sufficiency can neither capture nor explain the complex interactions between employment, health, housing, education, safety, civic engagement, social bonding, social bridging, and other variables that result in refugees' successful integration into U.S. economy and society.

VIII. What Is the Focus of Year 5 (2014-15)?

In the upcoming year (2014-15, the Baseline +3 survey administration), QED will continue to rely on our network of Community Connectors to deliver the survey to RISE respondents for the fourth time. Data will be from the Bhutanese and Burma populations only, as sample sizes for the Iraqis and Somalis have diminished to the point where meaningful survey analyses are not possible. As in previous years, we will also conduct interviews and focus groups to extend and explain survey data.

The RISE survey will remain essentially the same. Some items have been added to the *Social Bridging* section to weight that pathway in the scoring rubric. We suspect from interviews with refugees and Community Connectors that refugees' experiences prior to arrival in the U.S. figure prominently in their integration progress. Those who lived in camps where entrepreneurial opportunities were limited will have less experience and ability to capitalize on opportunities than those who have been able to work and/or run businesses before they resettled here in the U.S. New questions on the Baseline+3 survey summarize refugees' situations before coming to the U.S. Finally, several items and groups of items have been removed to make room for more useful items and to reduce the time it takes to administer the instrument.

The RISE team has outlined possible auxiliary studies that can enrich the project's finding, which we will undertake as funding becomes available. RISE researchers would like to work with ORR/CRSP staff in outlining these studies. Current ideas include:

- Cluster Analysis Exploration Study. Using our cluster analyses findings, interview members of various cluster groups to better understand supports and obstacles they face related to integration.
- Elderly Integration Study. Using a sample of RISE respondents over age 60 and their families, take a special look at the challenges elderly refugees face, the resources on which they depend, and the ways, if any, that they support the integration of younger generations.
- RISE Integration Slippage Study. A quantitative and qualitative look at the 30 refugees whose Overall Integration slipped to a lower category from B+1 to B+2.
- Literacy Validation Study. Using a valid, standardized English language proficiency exam, compare self-report items on RISE with actual proficiency of RISE respondents as well as newly arrived refugees.
- Middle-Age Challenges Study. A Community Connector identified those between 50 and 60, especially men, as having particular challenges related to integration. Young and healthy enough to work, but often with no or minimal formal education and skills that don't relate to urban living, they struggle more than others finding jobs and fitting in.

- Refugee Address Geo-Mapping Study. By plugging refugee addresses into a geo-mapping program, examine the patterns of mobility of refugees from B to B1 to B2. Look for correlations between neighborhood and the “safety and stability” pathway scores, as well as overall integration scores.
- Exploring the *Safety and Stability* pathway. *Safety & Stability* seems to be an important correlate of *Social Bridging*, *Social Bonding*, and *Language & Culture*. *Safety & Stability* jumped significantly at B+2, due to refugees feeling safer outside the home. In cluster analyses, low scores on *Safety & Stability* was a defining characteristic of refugees who haven’t affiliated with any integration pathway. This qualitative study explores factors that influence refugees’ feelings of safety and stability and how those feelings affect other integration pathways.

In the upcoming year, the RISE team will complete and submit an article to a research journal summarizing the RISE study and results so far. We also hope to work with ORR/CRSP staff in disseminating RISE results at professional meetings. The RISE team regularly reports emergent findings to Community Connectors. During 2014-15, we will seek opportunities to share RISE findings with Volags and refugee community groups.

The RISE team believes that this survey and evaluation study can make a substantial contribution to the refugee services community in Denver, nationally, and in other countries where the integration framework is used as a means by which to understand and resource refugee resettlement. We look forward to working with ORR/CRSP staff to keep RISE relevant to refugee service professionals and to policy makers concerned about budgeting refugee resources effectively.