

# The Changing Context of Refugee Resettlement Policy and Programs in the United States

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Recognizing the historic relationship between immigration and social work, the present study introduces the basics of U.S. refugee policy history, and provides information about current changes to the U.S. resettlement system., especially with regard to refugee populations and policies since the events of September 11, 2001 (9/11). These changes include new national security policies, shifts in where refugee populations originate and where they are settled, and the challenges related to chronic under-funding and economic recession. This study illustrates these changes with the experience of Catholic Charities in Fort Wayne, Indiana and the intersection between social work practice and the larger complex of human service systems. The conclusion provides recommendations for how social workers can act across practice levels to help shore up local services and supports, while simultaneously coordinating with other concerned groups to transform the resettlement system to better meet the needs of all it was designed to serve.

Since the late 1800s, social work has been inseparable from the immigration experience. Since World War II, that has officially included refugees—those immigrants who have left their birth countries due to persecution or threat of persecution (Refugee Council USA, n.d.a). Increasingly, social workers are likely to encounter refugees as clients seeking assistance across practice domains including housing, health, mental health, child welfare, domestic violence, employment and training, schools, work with the elderly and people with disabilities, and in local agencies and international organizations that provide resettlement services. Work with refugees is an almost inescapable component of contemporary social work practice in the United States.

Changes affecting that work, especially since the terrorist attacks against the United States on September 11, 2001 (9/11), include new national security policies, shifts in where refugee populations originate and where they are settled; and unique challenges related to chronic under-funding and economic recession. Accordingly, the National Association of Social Workers (NASW) statement on immigration and refugee resettlement notes that, "Working toward fair and just immigration and refugee policies is important to the profession of social work and essential to the realization of human rights (NASW, n.d., para. 1)." The present study is for social workers across practice levels, and is meant to provide basic background information necessary for reforming a resettlement system that is under-resourced and hampered by unintentional consequences set into motion by homeland security legislation.

The following pages begin with a primer on refugee policy and a summary of key trends affecting programs. The experience of Catholic Charities in Fort Wayne, Indiana, is then used to illustrate some of the complex challenges facing resettlement agencies and the need to shore up local services and supports, and to transform the larger resettlement system.

### Refugee Policy Since 9/11

Immigration has always been a defining aspect of the American experience. New Americans have provided infusions of labor, talent, and cultural wealth while they contribute to a vibrant cultural tapestry, immigration related issues have also periodically strained that social fabric. After World War II, immigration policies specific to refugees were implemented, creating main organizations and processes that persist to this day along with changes that have occurred since 9/11.

From the Chinese Exclusion Act of 1882, policies have frequently been driven by racist or other exclusionary sentiments. Accordingly, the Quota Act of 1921 and the Immigration Act of 1924 were largely aimed at limiting entry of religious minorities seeking to migrate from Europe, while Executive Order 9066 and the incarceration of Japanese Americans during World War II underscored the continued marginalization of Asian immigrants (e.g., Walter, 2007).

The first refugee-specific legislation, the Displaced Persons Act of 1948, allowed the admission of 400,000 refugees from Eastern Europe. This was ideologically and politically consistent with the United States' leadership role in establishing the United Nations 1951 Convention Relating to the Status of Refugees (known as the Refugee Convention), and the functions of the United Nations Refugee Agency (Human Rights First, 2010). The Act was also reflected the political tensions of the Cold War and the ideological conflict with communism, which formed "the backbone of the U.S. refugee program (Haines, 2007: 57)."

In 1965, President Lyndon Johnson signed a new Immigration Act that abolished the national origin quotas established in 1924, and ushered in a liberalized period allowing entry to immigrants from "Third World (and all) countries (Segal et al., 2010: 30)." While the stated intent of the 1965 Immigration Act was to eliminate racial discrimination, a new preference category favoring family reunification, and other administrative procedures, favored European

immigrants by limiting immigration from Asia, Africa, and Latin America (Lee, 2006). In 1975, following the end of U.S. military involvement in the Vietnam War, there was a massive wave of immigration by refugees from Southeast Asia. Difficulties and costs associated with resettlement, combined with racism and historically-present “anti-Asian sentiment,” sparked a national debate on refugee policy that led to the passage of the Refugee Act of 1980 (Lee, 2006: 22).

The Refugee Act of 1980 officially established the Federal Refugee Resettlement Program, and marked formal adoption of the UN Refugee Protocol’s definition of a refugee as anyone fleeing a country “because of persecution or a well-founded fear of persecution on account of race, religion, nationality, membership in a particular social group, or political opinion (U.S. Department of Health and Human Services, n.d.a).” Though lauded for establishing a more uniform system of services and supports to help refugees resettle and build new lives in the U.S., Southeast Asian refugees were dispersed across 50 states and hundreds of zip codes—a reflection of the ongoing tensions between humanitarian impulses and entrenched racism (Lee, 2006).

Despite gains in support of universal human rights since the 1960s, refugee policy decisions continue to be dominated by U.S. foreign policy goals and domestic political considerations (e.g., Waibsnaider, 2006). This was particularly evident with the sea change after 9/11. The USA PATRIOT Act of 2001 and the Real ID Act of 2005 were officially passed to prevent future acts of terrorism on U.S. soil and to formalize immigration as a national defense concern, but the unintentional consequences meant that refugee protections were undermined even though public safety was not always well-served (Keith & Holmes, 2009).

The PATRIOT Act, enacted October 26, 2001, introduced a three-tier classification system for “terrorist” organizations (PATRIOT Act, 2001). These provisions increased the number of groups defined as “terrorist” by including, under the third tier, any person taking up arms against any government under any circumstances. Ironically, this included groups actively *supporting* U.S. policy in both Iraq and Burma. Members of the Hebrew Immigrant Aid Society testified before Congress that, “Shockingly, under today’s laws, Jews who bravely resisted and survived Nazi terror would be excluded from refuge in the United States... [and] the Warsaw ghetto uprising would have been considered a ‘terrorist activity’... (Hebrew Immigrant Aid Society, 2007: 1).” Even less rationally, the PATRIOT Act stated that any “material support” (even to tier III groups) could be treated as terrorist activity and grounds for denial of refugee protection. The material support clause has prevented thousands from obtaining protection. Examples of material support include contributions as minimal as small amounts of money or a sack lunch; even those who have ‘provided aid’ to armed groups under coercion, including, robbery, forced labor, and rape have been excluded under the current definition.

The Real ID Act expanded terrorism-related admissibility bars, and made it possible for those currently in the United States to be deported based on meeting such criteria (Hughes, 2009). In just one case, denial under the material support bar resulted in over 9,000 Karen Burmese refugees languishing for years in camps along the Burmese border in Thailand (Pasquarella & Cohen, 2006), refugees who had aided the pro-democracy, U.S.-supported Karen National Union

(KNU). To address these types of situations where Real ID was unintentionally punishing innocent individuals and even allies, Congress enacted provisions to enable the Secretaries of State and Homeland Security, in consultation with the Attorney General, to issue discretionary waivers (Pasquarella & Cohen, 2006). The first material support waiver was issued in May, 2006 (U.S. Department of Homeland Security, 2007). Waivers were eventually granted to six Burmese groups opposing the military regime in their country (Hughes, 2009), leading to a dramatic increase in the resettlement of Burmese refugees to the United States. In 2009 alone, 18,202 Burmese—nearly one-quarter of the total refugee admissions for that year—were resettled in the U. S. (Martin, 2010). The implementation of these waivers finally redressed the unjust exclusion of Burmese refugees; however, the sudden change in policy also resulted in unintended consequences for American communities and social service systems (as shown in the case illustration that follows).

Much of the legislative advocacy by human rights groups since the Real ID Act has focused on individuals who have been threatened, coerced, or forced by armed groups to provide aid or other services. Advocates have been particularly concerned about women who have been sexually assaulted or threatened with rape (e.g., Stein, 2007). As a result, “duress” exceptions were enacted in 2007 (U.S. Citizenship and Immigration Services, 2007). Unfortunately, such waivers have been issued in only a slow and limited fashion, and have done little to remedy the systemic problems documented by human rights groups and others concerned with refugee protection (Refugee Council USA, 2009b).

Many refugees continue to be victimized by the unintended consequences of post-9/11 terrorism-related policies, and their plight remains largely invisible to most Americans (Hughes, 2009). While Congress has attempted to address issues related to terrorism-related inadmissibility bars, none has yet passed Congress. Attempts include the Comprehensive Immigration Reform Act of 2006 (Leahy-Coleman Amendment, which passed in the Senate May of 2006), H.R. 5918 (the Pitts Amendment sponsored by Representative Joseph Pitts in 2006), and the Refugee Protection Act of 2010 (introduced in committee by Senator Patrick Leahy in March, 2010).

The combined effect of homeland security legislation on the admission of refugees has been dramatic. Table 1 was constructed with data from the U.S. government’s Office of Refugee Resettlement (U.S. Department of Health and Human Services, n.d.b). Using Fiscal Year (FY) 2000 as a baseline year, refugee admissions slowed considerably between 2000 and 2009, dropping to less than half (42%) of 2000 levels in 2003. In FY 2009, the number of admissions recovered to around four-fifth (79%) of 2000 levels. Table 1 also depicts the dramatic increase in admissions of Burmese refugees as previous restrictions were lifted by the passage of the material support waivers described above.

Despite the upward trend in admission of refugees since FY 2008, human rights advocacy groups, refugee-serving organizations, and many legal experts in immigration law continue to unsuccessfully press Congress to address what many view as the over-reaching nature of post-9/11 national security legislation on refugees. The consequences of not acting means increased dangers and hardships for vulnerable populations seeking to flee war-torn regions (including wom-

en and children), denial of protection to credible asylum-seekers, and the abandonment of American ideals of fairness and justice (e.g., Hughes, 2009; Lombardo, Buwalda & Lyman, 2006; Stein, 2007).

Table 1

## NUMBER OF REFUGEES ADMITTED TO THE U.S. FROM 2000-2009

FISCAL YEAR	REFUGEES ADMITTED TO THE U.S. (ALL COUNTRIES)	REFUGEES ADMITTED TO THE U.S. FROM MYANMAR (BURMA)
2000	94,222	637
2001	87,104	543
2002	45,793	128
2003	39,201	200
2004	73,858	1,054
2005	53,738	1,447
2006	41,053	1,323
2007	48,281	9,776
2008	60,193	12,852
2009	74,654	18,275

In addition to 9/11 policy impacts, there is evidence of increased suspicion of refugees as terrorists or supporters of terrorists (e.g., Barkdull et al., 2011). Incidents include U.S. law enforcement arrests or detentions of hundreds of Arabs and Muslims on suspicion of terrorist affiliation (e.g., Johnson, 2004). In general, anti-immigrant sentiment has been increasing across the United States, with many bills filed in state legislatures that contain restrictive policies toward immigrants (Chang-Muy & Congress, 2009). Post 9/11 xenophobia and the ubiquitous politics of race and ideology unfortunately affect America's willingness to accept refugees, its treatment of them once they are here, and its support for the public and private agencies that assist them.

## A Case Illustration: Fort Wayne, Indiana

The modest Midwestern community of Fort Wayne, in Allen County, Indiana, drew national attention in 2008 when community leaders reacted to record numbers of primarily Burmese refugees whose arrival for resettlement severely strained available public and private resources. The public outcry and civic leaders' concerns about possible community backlash against the newcomers caught the attention of Congressman Richard Lugar, who subsequently initiated an investigation of communities most severely affected by this wave of resettlement, including Fort Wayne (Abandoned upon arrival, 2010).

Fort Wayne, Indiana, an urban center of nearly 250,000, is typical of many mid-sized Rust Belt communities suffering the loss of manufacturing jobs in the U.S. economy since the early 1970s. Despite some economic diversification in recent years, close to one-fourth of all jobs (23.7%) continue to be dependent upon manufacturing (Stafford, 2008). Northeastern Indiana had lost an estimated 10,000 jobs early in 2007, and area employment continued to decline through the Fall of 2008 (Stafford, 2008). Median family income in 2008 was \$54,259, compared to the national median of \$63,211 (U.S. Census Bureau,

2009). These downward pressures were further worsened by the national mortgage crisis and stock market crash of October, 2008.

Within the first six months of 2007, Catholic Charities of the Diocese of Fort Wayne-South Bend, the local nonprofit charged with providing refugee services, resettled 537 refugees from Burma, Liberia, and the Ukraine. Per Debbie Schmidt, the agency's executive director, this was the largest number received in such a short time frame in the history of the agency (personal communication, September 18, 2008). In FY 2008, the agency settled 837 additional refugees, surpassing its annual goal of 150 by 651 percent. Four years later, Catholic Charities had resettled a total of 1,892 refugees. A normal resettlement caseload for this agency over that time frame would have been less than half that number, or approximately 600-800 (150-200 cases per year) (D. Schmidt, personal communication, July 27, 2011).

The five staff members at Catholic Charities providing case management services were quickly overwhelmed by the precipitous and unforeseen increase. The refugees, many of whom had recently escaped situations of extreme deprivation and trauma, receive only eight months of modest financial support and three months of case management services to make the transition to a new community. During this transition, they must adapt to a very different set of economic, social, and cultural circumstances, as must the community that receives them. A lack of interpreters made this situation especially challenging.

Refugees are required to obtain health screenings and medical follow-up within 30 days of their arrival in their new community, overloading Allen County's already-strained budget, and endangering the provision of services to low-income resident individuals and families. When health department staff cited refugees as the reason for having to charge other populations for services, one result was negative press for the entire refugee community. In addition, many of the refugees have been diagnosed latent with pulmonary tuberculosis (TB) and hepatitis B (Abandoned upon arrival, 2010). Other challenges have included limited housing and poor access to public transportation.

The transition for many of the refugees from rural village life in South Asia to urban living in the United States has frequently led to complaints from longer-term residents. For instance, child welfare workers receive frequent calls about unattended children or worries about the sanitary condition of residences (Abandoned upon arrival, 2010). The dumping of animal carcasses in apartment dumpsters causes sanitation concerns and is shocking to residents unaccustomed to being self-sufficient in matters of food processing (D. Schmidt, personal communication, March 23, 2010). A Laundromat owner made local headlines and received national radio coverage when he posted a sign barring Burmese from entering his business due to his frustration over black stains on the walls caused by the custom of chewing betel nuts and spitting out the juice. The sign has since been modified to forbid betel nut chewing only (Abandoned upon arrival, 2010).

Teachers and school officials in the southeastern part of the county have also been vocal in expressing their concerns while attempting to accommodate the unexpected number of newly-enrolled refugee children. Some of the schools are close to the point of enrolling a maximum number of students, and have had limited budgets to deal with the number of new ESL students from myriad cul-

tures. Many of the students have spent their entire lives in refugee camps in Thailand, and their families may not be literate in their native tongues. Such students require additional supports to be successful in school, but the school district experienced an \$8,000 cut in ESL funding for the 2007-08 school year at a time when these resources were already sorely stretched. Officials also worry that mandates from the No Child Left Behind Act skew the results of some of the affected schools, making it appear as if they are “failing” due to the influx of ESL students. Non-refugee parents are increasingly worried at the ramifications of this, and local school officials remain under fire (D. Schmidt, personal communication, March, 23, 2010).

Issues related to secondary migration—relocation of refugees who were previously settled by another agency, often in another state—are now among the most pressing for local helping professionals. For instance, an estimated 1,020 “secondary migrants” moved to Allen County between 2007 and 2011 to be with family members, but they are not officially counted among the totals directed to that community by federal designation. Under PRWORA (the Personal Responsibility and Work Opportunities Act of 1996, better known as “welfare reform”), many secondary migrants are no longer eligible for many public benefits that comprise the social safety net (Lung, n.d.). Compounding matters, there is no way to accurately count this population or to predict how many may eventually arrive. Although Catholic Charities has attempted to offer job placement to the secondary migration population through its Job Development program, the funding priority mandated by the federal government is the primary refugee population (D. Schmidt, personal communication, March, 23, 2010).

The strain on so many systems in an already-depressed “rust belt” community has been considerable. Furious phone calls to Catholic Charities for “bringing these people in” and angry letters to the editor of the local newspaper, indicate a backlash from longer-term community residents toward the refugees and to the helping professionals who try to serve them (D. Schmidt, personal communication, March, 23, 2010).

### Current Challenges

Fort Wayne’s experience illustrates many of the significant issues affecting the resettlement of today’s refugees and the communities that host them. Those challenges include four main factors: first, that the system was originally designed to serve World War II refugees; second, the reality that today’s refugees are more diverse and come from increasingly violent and desperate places; third, the system has largely been under-resourced during most of its history; and fourth, refugees are increasingly being sent to smaller communities that may lack economies and service systems sufficient for successful integration.

Created in the aftermath of World War II, the State Department’s Bureau of Population, Refugees and Migration (PRM) continues to serve as the primary source of funding and coordination of the refugee resettlement process. The PRM provides funding to a network of voluntary agencies (VOLAGs) that provide reception services and ensure that resettled refugees in the first 90 days of resettlement receive food, housing, transportation, English language instruction,

orientation to their new communities, and referrals to additional supportive and employment services. The VOLAGs receive grants from the PRM to provide for the direct needs of the refugees and to help cover agency operating expenses (Lutheran Immigration and Refugee Service [LIRS], 2011). This public-private partnership continues as the foundation of the refugee resettlement program. As a consequence, Catholic Charity Services was among the key VOLAGs designated in the aftermath of World War II, commonly assigned to work with Catholic refugees fleeing war-torn Europe.

The Refugee Act of 1980 opened the doors to more diverse, global refugee groups. Over the past decade, communities have received increasing numbers of people from sources new to American immigration patterns, with “record numbers of refugees and asylees... admitted from countries in political turmoil” (Segal, Elliott & Mayadas, 2010: 29), including individuals from the former Yugoslavia, Rwanda, Liberia, Somalia, Ethiopia, Sudan, the Republic of Congo, Myanmar (Burma), and Iraq (United Nations High Commissioner for Refugees [UNHCR], 2009). This has occurred without appropriate reforms to modernize the system (Refugee Council USA, n.d.b).

Additionally, the system has long been under-resourced. Upon resettlement, refugees, unlike other immigrants, are immediately eligible for public assistance in the form of cash and medical services for a period of eight months (states have the ability to modify this eligibility). The eight-month limit on federal assistance to refugees is particularly insufficient for those with disabilities, no formal education, no English language skills, or torture survivors (Refugee Council USA, n.d.b). Long underfunded, the system suffered cuts over the last two decades, which were sharpened post 9/11, and then further aggravated by the current economic crisis. A 2008 study by the Lutheran Immigration and Refugee Service (LIRS) noted that federal funding provides only 39% of the resources needed for VOLAGs to carry out reception and placement services. VOLAGS begin their work in the country of origin and per capita grants are actually depleted prior to an individual refugee’s arrival in the United States (LIRS, 2011). As the refugee population has grown increasingly diverse, social service and health budgets have “remained at a stagnant level for 20 years,” and funding cuts post 9/11 undermined cost saving programs such as the Preferred Communities program, which helped refugees achieve early self-sufficiency through employment, until being “cut by two thirds in recent years (from \$1.6-\$2 million in recent years to \$600,000 in FY 2009)” (U.S. Conference of Catholic Bishops, n.d.b, para. 2). The Refugee Council USA (2009a) noted: “Coupled with chronic underfunding, the challenges connected to the current economic crisis have placed the resettlement program in peril (para. 2).” Fort Wayne provides a striking example of a community that was already economically distressed, targeted to receive too large an influx of refugees without adequate notice, and then left to fend for itself as under-resourced social service systems were quickly overwhelmed.

Closely connected to the resettlement program’s funding crisis is the shift in settlement patterns to smaller communities such as Fort Wayne. Between fiscal years 1893 and 2004, 1,655,406 refugees from more than 125 countries resettled in the United States in some 30 metropolitan areas, with New York, Los Ange-



les, and Chicago receiving the greatest number of refugees (Singer & Wilson, 2007). Recent shifts to smaller host communities often stretch local infrastructures. Even before the recent Great Recession, many U.S. communities had struggled over a period of decades with the loss of manufacturing jobs and other changes in the economy, and the resettlement of refugees adds new layers of economic, social, and cultural stresses. Public welfare agencies, schools, job services, and mental health agencies often struggle with limited resources to provide the most basic services to long-term residents, much less New Americans. Resulting tensions, resentment, and anger make adjustment on everyone's part all the more difficult. Again, Fort Wayne's experience of cultural backlash and the process in which social service agencies were 'blamed' for the arrival of new immigrants is illustrative.

### Considerations for Advocacy

To effectively meet humanitarian obligations in a post-9/11 world, both U.S. national security policy and the refugee resettlement system require significant reforms. Social workers can be influential in moving these forward, and have already officially recognized the importance of this issue through policy statements issued by their professional associations, including the National Association of Social Workers (e.g., NASW, n.d.), the Council on Social Work Education (e.g., Estes, n.d.), and the International Federation of Social Workers (International Federation of Social Workers [IFSW], 1998). Given the complexity of the issues involved, both shorter- and longer-term strategies are required, and multiple practice levels must be engaged as the resettlement experience includes refugees, those assisting them, and their host communities.

At the international level, global needs remain daunting with approximately 12 million refugees awaiting resettlement (Abandoned upon arrival, 2010), and there is routine international pressure to increase the number of refugees admitted, and to expand resources to the public and private partners that form the foundation of the U.S. resettlement program. Consistent with its national ideals, the United States has accepted over three million refugees since 1948 (UNHCR, 2009), and has resettled more refugees than all other resettlement countries combined (Patrick, 2004). Yet, the U.S. currently admits under 1% of the world's refugees, ranking behind Australia, Canada, and Sweden in terms of the number resettled as a percentage of total host-nation population (U.S. Committee on Refugees and Immigrants [USCRI], 2010).

Social workers can add their individual and collective voices to those of refugee advocacy and resettlement organizations calling for the United States to live up to its historic and moral obligations as a humanitarian leader and to consider modest increases in the numbers admitted. Concurrently, social workers can help advocate for pressing systemic reforms, including: first, more adequate resources for the resettlement system; second, a more prominent role for the Office of Refugee Resettlement (ORR); third, improved management to avert the problems caused by the high number of refugees arriving in communities at the end of each fiscal year; fourth, improved coordination and communication among participating levels across the resettlement service continuum; and fifth,

stronger linkages between domestic and overseas resettlement partners (e.g., Refugee Council USA, n.d.a; Refugee Council USA, n.d.b; U.S. Conference of Catholic Bishops, n.d.b). Comprehensive and long-term orientation for accepted refugees awaiting resettlement is another urgent need (e.g., Brick et al., 2010).

Organizations such as the Refugee Council USA (RCUSA), the U.S. Conference of Catholic Bishops, and Lutheran Social Services offer user-friendly websites for individuals wanting to become more informed about reform of the resettlement system, and provide routine updates on individual advocacy efforts needed around key issues at the United Nations or in Congress. Local NASW chapter meetings need to share these resources and explore opportunities for informing members and providing information about avenues for action. The associations of professional social workers cited above provide rich resources as well as practical assistance with advocacy efforts. Individual members and local chapters could also urge their professional associations to formally join coalitions such as RCUSA in working for broader resettlement system reforms.

Local communities—stretched to help refugees meet basic needs and to integrate successfully—need greater resources. Social workers, acting both individually and in concert, must advocate for needed changes and intervene across practice levels to improve conditions. This work can include forming or joining local organizations to address the most pressing needs including language and literacy training for immigrants, and in educating the broader community about the history, culture, needs and potential benefits of their new neighbors.

Ethically obligated to challenge social injustice, social workers must support social justice groups working to mitigate the unintended consequences of post-9/11 national security legislation, including reforms contained within the Refugee Protection Act of 2010 introduced in committee by Senator Patrick Leahy in March, 2010. Despite backing from human rights groups, the American Bar Association, and numerous coalitions of organizations and agencies that serve refugees, the Act stalled in the committee process and, as of this writing, has not made it to the floor of Congress for a vote. Renewed efforts to pass this legislation are under way (e.g., LIRS, 2011).

The current resettlement system prioritizes the most vulnerable populations. Many of today's refugees are coming to their new homes after spending years in some of the planet's most poverty-stricken and conflict-torn regions. Many are affected by severe or chronic untreated medical conditions, and some are torture or sexual assault survivors. Social workers are uniquely positioned to meet the needs of elderly refugees, children, and single heads of households. Social workers are also well-equipped to lend their expertise in assessing unmet community needs, and in networking with allied professionals to develop and expand culturally responsive health, mental health, and employment and training services. This will require social workers to engage in capacity- and development-oriented work and to think outside the traditional "services box" as communities struggle economically and sources of private and public funds continue to shrink. Partnerships with university social work departments will enhance such efforts and can improve data collection procedures to assist resettled families and their new communities. Social workers are also needed to help build organizational and leadership skills within refugee communities and to lend their

expertise as volunteers and board members. Support of ethnic-based community organizations (ECBOs) can help fill the gaps in the current system by assisting refugees to build social networks that contribute to long-term upward mobility, maintain healthy pride in their cultures of origin, identify positive role models, develop leadership skills, and mentor youth (e.g., Newland, Tanaka & Barker, 2007).

The United States has a paradoxical history regarding immigration: the nation has long provided a beacon of hope even as its policies have frequently been racist and hegemonic. Refugees arrive with special needs and unique cultures, and the resettlement process affects not only refugees, but also those directly serving them and their host communities. Social work offers the greatest hope for a successful resolution. With its broad skill set and unifying directives, no other profession is so uniquely positioned to help assure the successful continuation of the nation's economic and political promises, long enriched by the energies and dreams of New Americans. It was the profession's earliest mission and continues to be among its most important work.

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