

Unique Needs of Immigrant and Refugee Youth in the Lincoln Community
University of Nebraska - Lincoln – Center on Children, Families, and the Law
for the
Nebraska Children and Families Foundation

Authors:

Shantel M. Gassman

Graduate Research Assistant - UNL - Center on Children, Families, and the Law

Jason Varga

Projects Director – Lincoln / Lancaster County Human Services Federation

Jeff M. Chambers

Project Director - UNL - Center on Children, Families, and the Law

Thank you to the Lincoln Public School District for providing access, time, and space for the focus group.

Thank you to Mark Cooper (UNL-CCFL) for reviewing and providing input on a draft of this document.

This study was reviewed and approved by the UNL-Institutional Review Board for the protection of human subjects (IRB#: 20150314592 EX).

Executive Summary

The University of Nebraska – Lincoln – Center on Children, Families, and the Law was subcontracted by the Nebraska Children and Families Foundation with grant funds received from the Woods Charitable Fund Inc. to conduct a study on the unique needs of immigrant and refugee youth in the Lincoln community that have previous or current involvement with the child welfare and juvenile justice systems and the services to address identified needs. This study design was composed of four parts. First, a comprehensive review and summary of the current literature on the unique needs of immigrant and refugee youth with child welfare and / or juvenile justice involvement was completed. Second, an examination of any extant child welfare and juvenile justice system data on refugee and immigrant youth served in those systems was conducted. Third, UNL-CCFL conducted targeted individual interviews with Lincoln agency service providers that have extensive experience working with refugee and immigrant youth with child welfare and/or juvenile justice system involvement. The fourth and final study component was a focus group with Lincoln Public School Bilingual Liaisons and the gathering of their experiences and service needs understanding of refugee and immigrant youth with juvenile justice and / or child welfare experience. Service providers and bilingual liaisons work closely with immigrant and refugee youth who have been involved with the child welfare and juvenile justice system. In this study they were asked to identify service needs that are essential for newcomers' successful transition. Qualitative analysis was used to examine the data and six needs emerged: culture, positive activities, school and family support and communication, mental health services, navigating resources and understanding systems, and transportation. Each need is discussed below and followed with specific recommendations. A final theme of *community strengths* was also found and is elaborated on.

Introduction

The Center on Children, Families, and the Law at the University of Nebraska –Lincoln was subcontracted by the Nebraska Children and Families Foundation with grant funds received from the Woods Charitable Fund Inc. to conduct a study on the unique needs of immigrant and refugee youth. The focus is on youth in the Lincoln community that have previous or current involvement with the child welfare and juvenile justice systems and the services to address identified needs.

According to estimates from the U.S. Census Bureau's 2013 American Community Survey (ACS), the U.S. immigrant population is made up of approximately 41.3 million individuals or 13 percent of the total U.S. population. The foreign-born population increased by about 523,000, or 1.3 percent between the years of 2012 and 2013. According to the Migration Policy Institute, ““foreign born” and “immigrant” are used interchangeably and refer to persons with no U.S. citizenship at birth. This population includes naturalized citizens, lawful permanent residents, refugees and asylees, persons on certain temporary visas, and the unauthorized.” Immigrants and their U.S.-born children make up approximately 80 million persons, or one-quarter of the overall U.S. population (Zong & Batalova, 2015). Immigrant and refugee families and children are at greatest risk for concerns due to poverty, including involvement with the public welfare system (Capps, Passel, Perez-Lopez, & Fix, 2003). Earner (2007) reported that while agencies have the best of intentions, too often they are unprepared to meet the unique service needs of this population. Knowing and preparing for these needs is important as Lincoln Public Schools alone serve approximately 2,526 English Language Learner (ELL) students. The current study examines these unique service needs for immigrant and refugee youth who have had involvement with the child welfare and/or juvenile justice system in Lancaster County, Nebraska.

This study design was composed of four parts. First, a comprehensive review and summary of the current literature on the unique needs of immigrant and refugee youth with child welfare and/or juvenile justice involvement was completed. Second, an examination of any extant child welfare and juvenile justice system data on refugee and immigrant youth served in those systems was conducted. Third, UNL-CCFL conducted targeted individual interviews with Lincoln agency service providers that have extensive experience working with refugee and immigrant youth with child welfare and/or juvenile justice system involvement. The fourth and final study component was a focus group with Lincoln Public School Bilingual Liaisons to gather information about their experiences and understanding of service needs for refugee and immigrant youth with juvenile justice and/or child welfare experience.

In addition to these study components, UNL-CCFL assisted The HUB in Lincoln (A local support and service agency for young people who are disconnected from their family and/or the community) in joining the Community Services Management Information System (CS-MIS) – ServicePoint by providing infrastructure / system development, end user training, technical assistance, and the purchase of two Service Point licenses. CS-MIS and ServicePoint provides The HUB with access to and use of the Lincoln community’s shared basic and emergency needs

data system and the ability to share case management and service provision data on refugee and immigrant youth who are served by other agencies in the community.

Background

In order to understand the service needs of immigrant and refugee youth involved in the juvenile justice and child welfare system, it is useful to highlight the unique experiences that brought them to their new home. To begin, it is important to understand the difference between an immigrant and refugee.

An immigrant is someone who is from a different country who chooses to permanently relocate to another country. These individuals may be residing on a visa or permanent resident card (Green Card), in the process of citizenship, or be undocumented. Officially, a refugee is a specific type of immigrant. Any person entering the United States who comes to live permanently is an immigrant and can begin a legal path to becoming a U.S. Citizen, unless he/she is undocumented. This is often through work or marriage. Although immigrants and refugee immigrants share many of the same challenges when arriving in their new home country, it is important to note that refugees, unlike other immigrants, leave by necessity rather than choice. As defined by the United Nations High Commissioner for Refugees (UNHCR, 1951), a refugee is someone "owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality, and is unable to, or owing to such fear, is unwilling to avail himself of the protection of that country" (Article 1 A[2]). In most cases if the refugee does not leave home he/she will suffer severe persecution. The United Nations grants this status and then, often after years of living in a refugee camp, they are relocated to their new permanent country. In 2013, the United States accepted 69,930 refugees from around the world (U.S. Department of State). Often refugees are separated from their family members and arrive to their host country alone. For refugee youth this often means that they become immediately involved in child welfare systems and are assigned a foster family (Bates et al., 2005). Refugees usually are unable to return to their native country.

Due to the plethora of difficulties immigrant and refugee youth experience before, during, and after arrival in their host country, mental health has been a major area of concern. Immigrant and refugee families are at greater risk due to these stressors to suffer from anxiety and depressive disorders (Pumariiega, Rothe, & Pumariiega, 2005). McBrien (2005) identified psychological well-being as one of the important needs of refugee youth in their transition to their new country. Often refugee youth are exposed to trauma before their arrival at their host country. Bates et al. (2005) found that Sudanese refugee children reported many symptoms of PTSD and had a mean score on a PTSD scale (Foa et al., 2001) that was more than twice as high as children experiencing a single traumatic event. The study found that refugee children frequently endorsed items such as "having upsetting thoughts or feelings come into your head when you don't want them to" and "being overly careful." Other refugee children may arrive unaccompanied by parents or family and suffer from emotional loss that can lead to behavioral

issues if left untreated (Derluyn & Broekaert, 2008; Pumariega et al., 2005). Mental health issues, however, are not exclusive to the refugee population, immigrant families also experience intense stress and pressure due to immigration and acculturation that puts youth at increased risk of maltreatment (Dettlaff, Earner, & Phillips, 2008). Immigrant families often suffer the double stigma of being an immigrant in addition to not being a member of the majority race, which can result in psychological distress (Clarke, Kim, & Spencer, 2013). Most immigrants and refugees have experienced discrimination and oppression on some level based upon the color of their skin, their accent in speech, or clothing they wear (Segal & Mayadas, 2005). This stigma affects not only the mental health, but also the financial well-being of these families, as they are commonly discriminated against for occupational positions. Children and adolescence are at an increased risk of being discriminated against by their peers which can contribute to their mental health risk (Pumariega et al., 2005). Additionally, many immigrant families struggle with the citizenship process, and those who are undocumented often live in a constant fear of deportation (Earner, 2007). Some families have the even more complicated status of have mixed citizenship, meaning that some members, most usually young children, are citizens, while other family members (e.g., older siblings and parents) are not (Pine & Drachman, 2005). Both groups suffer from increased emotional, legal, economic, social, and psychological stress (Dettlaff et al., 2008; Derluyn & Broekaert, 2008; Earner, 2007; Pumariega et al., 2005).

Cultural differences may also be linked to immigrant and refugees higher involvement in the child welfare and juvenile justice systems. Differences in parenting styles, discipline, and expectations of adult children have been cited as potential reasons for immigrant and refugee families' higher involvement with the child welfare system (Earner, 2007). Additionally, one study found that immigrant families identified barriers to child welfare such as caseworker lack of knowledge about immigration status, cultural misunderstandings, and language issues (Earner, 2007). Stereotypes, prejudice, and discrimination have also been identified as a major obstacle to immigrant and refugee youths adjustment to their new culture (McBrien, 2005). Previous literature stresses the importance of culturally competent practice when working with immigrant and refugee youth and their families in order to avoid generalizations and assumptions and provide the most appropriate care and resources (Earner & Rivera, 2005; Jones, 2005; Segal & Mayadas, 2005). Chan (2003) reports that service providers working with these immigrant and refugee populations should strive to understand both the culture of the individual's country of origin and the immigration experience of the individual. It is important to know why the individual left their homeland and what resources if any they brought with them. Additionally it is important to consider what resources they have left behind, including social supports, family, culture, language, traditions, careers, et cetera. Finally it is important for the service provider to understand that even if the new arrival had a seemingly smooth transition, the new environment of the United States can feel strange and bewildering and even at times overwhelming, resulting in intense culture shock for individuals (Segal & Mayadas, 2005). Moreover, Earner and Rivera (2005) reported that as the immigrant and refugee population continues to grow in the United States, it is important that permanency planning and family stability policies and services are

developed in a culturally and linguistically sensitive manner. Another common topic in the literature is the differences in cultural assimilation between parents and children. Often children subscribe more quickly to the ideas and norms of their new host country and this can create dissonance in the home when parents choose to adhere more tightly to their traditional culture (McBrien, 2005). The same study found that cultural mentors who have a shared experience with the immigrant and refugee population have been found to be particularly helpful for validation, mutual support, and processing common experiences. Other helpful interventions include informing newcomers of their host countries cultural norms and educating service providers on the unique experiences of immigrant and refugees (Pumariega et al., 2005).

Adjustment to a school has been another topic identified in the literature as being difficult for immigrant and refugee youth and their families (McBrien, 2005). Often new students are expected to have rapid English acquisition with little other educational supports (Gibson, 1998; Olsen, 2000). In a review of the literature, McBrien (2005) found that successful acquisition of the English language by students studying in the U.S. was related to better adjustment to their new school environment. Parental involvement via support and interest in their child's education is also correlated with student success (Portes & Rumbaut, 2001). Factors that can inhibit a student's ability to learn include trauma (Sinclair 2001), self-perceptions about their academic ability (House, 2001), antisocial behavior and rejection by peers (French & Conrad, 2001), lack of psychological and academic preparation (Rong & Preissle, 1998), and goals for the future (Portes & Rumbaut, 2001). Educators and current students can also assist in the healthy adjustment of immigrant and refugee youth to the school system by becoming informed on cultural differences and practicing culturally competent skills for working with newcomers (Earner & Rivera, 2005).

Findings

Data on the prevalence of refugee or immigrant youth in the child welfare and juvenile justice systems in the State of Nebraska is not available from service providers. Neither child welfare nor probation systematically records the immigrant or refugee status of youth being served. Given the unique, unmet service needs of immigrant and refugee youth in Lancaster County as detailed in the following sections of this report, and that child welfare case managers and juvenile probation officers are undoubtedly aware of this status of the youth they are serving, this data should be collected systematically in both N-FOCUS and NPACS.

Service providers and bilingual liaisons work closely with immigrant and refugee youth who have been involved with the child welfare and juvenile justice system. In this study they were asked to identify service needs that are essential for newcomers' successful transition. Qualitative analysis was used to examine the data; six themes of *service needs* and one of *community strengths* emerged. The six needs that were identified by the participants were: culture, positive activities, school and family support and communication, mental health services, below and followed with specific recommendations. The final theme of *community strengths* is also addressed.

Culture: Norms, language, and familial differences in acculturation

First and foremost, a major theme that interweaves all the needs mentioned in the present study is the role that culture plays in the lives of immigrants, refugees, and other community members. The major areas of culture that were identified include: differing norms and language, and intra-familial differences in acculturation. These cultural issues play some role in each of the other needs mentioned in this report.

Perhaps the most obvious role of culture comes into play for individuals in their norms of everyday life and language. Cultural norms of immigrant and refugees' home countries may not translate well in their new society; several service providers cited examples of individuals engaging in behaviors that were normal in their native culture but problematic in their new environment. One service provider reported working with youth who had been involved with the juvenile justice system for entering neighborhood homes uninvited and using items that were not theirs, although this is a behavior deemed acceptable in their home country. Other examples include individuals offering money to police officers when pulled over for traffic citations, and families becoming involved with the child welfare system for leaving children unattended for extended periods of time or utilizing traditional methods of discipline. These situations appear to arise from cultural misunderstandings; immigrant and refugee families and youth are unaware of the social norms in their new environment and the community is often unaware of the newcomers' traditions. These misunderstandings are only further exacerbated by other cultural differences, especially communication difficulties due to language barriers or uncertainty about appropriate contacts for service needs.

Familial differences in acculturation were also a concern mentioned by many of the study participants. Acculturation is the "process in which members of one cultural group adopt the beliefs and behaviors of another group" (Hazuda, Stern, & Haffner, 1982). Several service providers and liaisons commented on the rapid assimilation of youth into the host culture, whereas parents and other older adults are not as likely to integrate the new way of life. Participants spoke about problems this can cause in families, with parents feeling that their children have disowned their traditions and history, and children struggling to "fit in" while also appeasing the demands of their traditional home life. Another commonly reported concern was the shifting of roles between the youth and their parents. As the youth begin to learn the language and understand the culture, parents often rely on them to serve as interpreters, resource connectors, and transporters.

Recommendation:

1. *Cultural education* for the incoming immigrant and refugee families as well as the individuals who work closely with these families is important. Many service providers commented on the innocent nature of most of the issues that occur between new immigrants and refugees and their environments. Some service providers reported that presentations on cultural norms would be helpful to inform newcomers of the expectations the community has for them. They also reported that more affordable

English classes for adults could assist with the language barrier; in the meantime hiring more interpreters could decrease miscommunication due to language barriers.

2. *Mentors*: The providers suggested the usefulness of cultural mentors who had experience with a similar transition. Many providers believed that immigrant and refugee families benefit most when they work with the same individual who has both the cultural competency and language fluency of their homeland.

Positive affordable activities

The second theme that emerged from the focus groups and interviews with service providers was the need for positive affordable activities for immigrant and refugee youth, especially before and after school hours. Many service providers and bilingual liaisons stated that the school system was a strength for immigrant and refugee youth, providing a safe and healthy environment. However, they mentioned concern for what children do after school is dismissed for the day. Several participants reported that youth have few options for positive affordable activities after school and often attempt to entertain themselves by engaging in unhealthy activities and risky behaviors such as joining gangs. Often this is motivated by a strong need for a sense of belonging for the immigrant and refugee youth who have little or no family and friends in their new community. Another contributing factor is that parental supervision is often limited. Many immigrant and refugee parents or caregivers struggle to achieve economic viability, and therefore find themselves working long hours, multiple jobs, or night shifts, making it difficult to supervise children when they are not in school. Participants noted that while caregivers are working many of the youth are in search of activities and companionship. One service provider noted that many immigrant and refugee youth with whom she worked in the juvenile justice system are members of gangs. Interviewees and liaisons alike agreed that one of the most important service needs for the youth is free, positive activities for them to participate in after school.

Recommendation:

1. *Organizing group activities that are free or affordable* and operate around school hours was a suggestion of many participants. One service provider reported that programs such as dance classes, group tutoring, and other events have provided a safe place for the youth to go in the past. A liaison suggested allowing children to remain after school to work on assignments, suggesting it solves two struggles: concerns with schoolwork and search for activity. These community activities can also assist with creating the sense of belonging that many of these children crave.

School and family: Support and communication

The third theme identified, and mentioned by many service providers, was the role of school in the lives of immigrant and refugee youth and families. Most providers and liaisons said the Lincoln Public School System was a major strength for the immigrant and refugee communities. They shared that schools provide a safe place for the youth to learn and that they have activities for the students to engage in academically and socially. However, one frequent

concern reported by the interviewees was the communication among the school, students, and parents. Several participants shared that information often is lost or confused when relying on the student to relay messages in regard to behavioral and academic performance. Unfortunately, a prolonged communication barrier between the school and parents can result in youth becoming involved with the juvenile justice or child welfare system due to behavior, academic, and/or truancy issues. Another commonly mentioned misunderstanding between parents and the school was the role of teachers and their authority in disciplining students and carrying out behavior management.

One service provider articulated the need for a greater number of bilingual liaisons for the schools. Bilingual liaisons are individuals who are trained to serve as a communication link between schools, students, and their families. Some of their primary services are interpretation, assistance with school placement and enrollment, and resolution of culturally sensitive issues. A large portion of students that they serve are immigrant and refugee youth. Currently, Lincoln schools employ about 18 liaisons to help approximately 2,526 ELL students. Additionally, several participants reported that many immigrant and refugee students are simply unaware of their options after high school. Several suggested that providing career and academic guidance for the youth would be helpful, so they could choose their next step after graduation and understand the consequences of not graduating or performing poorly in school.

Additionally, several bilingual liaisons in the focus groups commented on the stress commonly taken on by older siblings in immigrant and refugee families and how it affects their academic performance. Many mentioned that older siblings are relied upon to provide income for the family and therefore work long hours after school. One liaison reported that high school-age immigrants and refugees are often the first in their families to receive their driver's license and often they transport their parents and siblings to appointments. Several others commented on the use of the children as interpreters between parents and service providers. The combination of adjusting to a new culture while also dealing with complex life stressors can take an obvious toll on academic performance. Several liaisons agreed that these responsibilities create immense stress on the individual youth and often result in the child dropping out of high school.

Recommendations:

1. *Expanded availability of school tours, orientations, and open houses* were among the recommendations suggested by several participants to facilitate the relationship between the school system and immigrant and refugee families. Many of the participants stated that parents do not understand completely the role that school plays in their children's lives. Several participants reported that orientations at the beginning of each year are helpful to begin conversations between parents and school workers, but that this relationship needs to be continued through allowing parents to come in for open houses and tours as well as when they have questions or concerns.
2. *Academic tutors* were recommended by many of the participants. Participants voiced that many immigrant and refugee students are intellectually capable of understanding

- the material; however, they need a more customized approach due to issues such as language and cultural differences.
3. *Adding more bilingual liaisons* was a common suggestion by both the service providers and the bilingual liaisons. Service providers reported that this would assist in providing a communication bridge between the school and families if the parents had more identified individuals to whom they could speak about their children's school performance. Others suggested that more liaisons could serve as a voice for those students who are assuming a large responsibility for their families outside of school by working, caring for siblings, providing transportation for parents, etc. Several liaisons stated that these students are misunderstood as “tired” or “unmotivated” by their teachers. More liaisons could mean more communication between these students and their teachers, as one liaison said “[The students need] someone who can speak up for them ... they are scared, they need someone to advocate for them.” The bilingual liaisons can also assist the youth in determining their options subsequent to high school graduation.

Mental health services

Fourth, mental health services were reported to be an important need for immigrant and refugee youth by nearly all service providers and liaisons. Participants stated that immigrant students, especially refugees, are more likely to have experienced traumatic situations prior to arriving in the United States. Often the youth struggle to perform well in school and behave in a socially acceptable manner while suffering from untreated trauma. One interviewee stated, “Refugee youth come over under persecution and fear of death, they didn’t plan to leave...and maybe have even seen loved ones killed...how can we expect them to concentrate and do well in school?” To further exacerbate the psychological stress, many refugee children arrive to the United States alone either due to unintended separation from their family or the loss of their caretakers. After arriving in the states many invest significant time and energy trying to reconnect with their family who arrived at a different location, while others may be concerned with the welfare of their family abroad (Bates et al., 2005; Derluyn & Broekaert, 2008). The search for the remaining family members may also cause extreme anxiety and make concentrating on academics nearly impossible.

However, refugees are not the only ones that could benefit from mental health services, many liaisons and service providers reported that immigrant youth also face unique issues in adjusting to their new society. Some may also have had trauma in their past, however one focus group member reported that they more commonly hear immigrant youth voice concern with issues regarding the legal status of themselves or their families. They reported that many individuals struggle with the citizenship process, which can be lengthy, and worry about their caregivers’ statuses as well. Additionally, the study participants reported that both immigrant and refugee youth experience stressors associated with home life, economics, acculturation, and stigmatization issues.

Recommendation:

1. *Well-trained, culturally competent mental health providers* are needed to serve immigrant and refugee youth and their families. As mentioned, many of the service providers and bilingual liaisons reported that the youth they serve experience a myriad of life stressors due to legal, familial, academic, cultural, and trauma issues, among other things. Service providers and liaisons alike believed that youth and families would benefit from mental health services that were administered in a culturally competent way. Several of the participants reported that sharing the same language and culture is important when working with mental health providers due to the sensitivity of information with emotional content and the difficulty to directly translate specific ideas. One liaison warned against the use of an interpreter in mental health services, stating that it creates “a wall in their connection.” Another liaison stressed the importance of a culturally appropriate approach to the family, stating, “...a Latino immigrant family cannot be approached from the same frame of reference as a white American family.”
2. *Mental health support groups* were also suggested by many of the participants. One liaison shared the story of an immigrant mother whose child was receiving services at a residency program and the difficulties she experienced in “feeling alone.” The liaison suggested a parents’ group where individuals from similar backgrounds could come together to support each other, share helpful information, and normalize the struggles of being an immigrant or refugee family in the community.
3. *The need for mentors* was also a common recommendation across interviews with providers and the focus group with the bilingual liaisons. Many participants believed that cultural mentors or family advocates who had previous experience in navigating similar struggles would be helpful aides to youth and families. These mentors could serve in a variety of ways addressing many of the service needs that were cited in this report, including mental health support, assisting in resource navigation, helping youth in school understand their options post-graduation, encouraging cultural competency between families and the community, and educating families on cultural norms and available resources.

Navigating resources and understanding systems

The fifth service need that was reported by many providers was education on navigating the benefits and resources available to immigrant and refugee youth and their families, as well as understanding the legal and health systems.

Navigating benefits and resources. Many of the providers commented on the difficulties immigrant and refugee families and youth have in navigating the resources available to them. One service provider reported that her clients often become frustrated with the process of finding and applying for benefits. She stated that one of her clients struggled to understand instructions on a phone operated system to apply for benefits and decided to hang up before completing the

process. Another bilingual liaison reported that individuals she works with have similar difficulties in navigating the system to receive benefits. She reported families often say, “I don’t know how to keep these services or apply for these services...do I have a responsibility for them, they aren’t as “free” as they say, [agencies require] a lot of work to get benefits.” One bilingual liaison reported that many of the undocumented immigrant families fear asking for help due to their legal status. And still other providers said that several of the immigrant and refugee families are unaware of the services available to them and whether or not they qualify.

Legal systems. Liaisons and service providers agreed that education on the legal, educational, and health systems would also be helpful. One provider spoke about the usefulness of hosting an event with the local police department to inform newcomers of federal, state, and county laws. Another liaison stated, “ [It is] important for families to know American law. [For example] the laws about driving, what are you supposed to do if you get in a car accident? [What is] insurance?” Another commented on working with families to understand the legal process of citizenship: “[We] need to talk about legal status too; it is easy to miss facts about the law, because there is so much [to learn].”

Health care system. Both service providers and the bilingual liaisons reported the need for educating youth and families about the American health care system. One liaison reported that preventive care is a new concept to many of the families with whom she works and that parents may actually become involved with the child welfare agency due to concerns about, simple preventable issues such as their children not having proper dental health. Other participants commented on the complexity of health insurance and the confusion it can cause when immigrant and refugee families are not being served in their language of origin. One service provider spoke about the fear experienced by undocumented immigrants when seeking health care services. She reported that this fear often deters families and youth from seeking and receiving the care they need.

Recommendations:

1. *A Multicultural Center* was a common suggestion by the members of the focus group, a one-stop location for immigrant and refugees to be connected to a spectrum of information and resources. Several participants reported that they believed a central multicultural center could assist in preventing many of the problems immigrant and refugee family and youth experience by providing information, resources and a safe place for families to ask for assistance. Several participants thought it would be helpful if the center could house individuals who could either provide or connect immigrant and refugee families to legal service resources to inform them about the process of citizenship, what to do if they were to get in a car accident, etc. The participants also thought it would be beneficial for health care representatives to use the center as a location to provide information about the American health care system. A popular suggestion among the focus group was for the center to disperse resource booklets in multiple languages, to serve as a resource directory for individuals and families. Many of the participants realize that funding is always a practical concern,

- but still stress the usefulness such a center would have. In terms of staffing such a center, one participant stated “there is probably a lot of people, like us as liaisons, which would donate time to help... we have that passion to help because we are part of them.” They also reported seeing such a center as an opportunity for immigrant and refugee youth to volunteer and utilize their bilingual skills to provide tours, resource information, and mentorship to others. The liaisons and service providers stated that the center could be a “welcome center” for newcomers, where they could immediately go to upon arrival to “start out on the right foot.”
2. *English learning classes* was another suggestion made by multiple participants. Liaisons and service providers agreed there needs to be a “communication connection.” Information about resources should be provided to individuals in their native language, to ensure understanding, however English classes would assist the individuals in learning to navigate resources independently.
 3. *Presentations and tours* of benefit agencies, police departments, schools, and hospitals, were suggested by many of the participants in order to increase immigrant and refugee youth and families’ familiarity of the resources and systems. Presentations from benefits advisor would be helpful to inform individuals on what they may qualify for and allow individuals to provide feedback on their experience in applying for these benefits. Some suggestions made by the study participants were for agencies to create a more streamlined application process in multiple languages. Presentations from the local police department could assist newcomers in understanding basic laws such as obeying crosswalks and driving and the citizenship process.. Tours could also be given of the local police department. Similarly, for the health care system, professionals could offer public health presentations about preventive care and basic insurance information and offer tours of local hospitals.

Transportation

Transportation is an additional need worth mentioning. One liaison reported that many of the immigrant and refugee adults do not receive their license when immigrating to the United States and rely on their children to drive them to appointments, work, and other commitments. According to this liaison, the youth often will drive even without a license, which can have obvious legal ramifications. For those parents and children who do not obtain a license, transportation to and from school can be difficult for the youth. The city does have public bus transportation; however, the liaisons commented on the inconvenient routes, stating that children are often confused when connecting busses and are often boarding hours before school in order to arrive on time.

Recommendation:

1. *Direct bus routes* from a central location to high schools with high populations of students without a driver’s license was a suggestion made by one liaison.

Community strengths

Many of the participants also commented on the strengths of Lancaster County's service to immigrant and refugee youth. Many service providers commented on the relative safety of Lincoln compared to most major cities. Several providers and liaisons said that Lincoln Public Schools provide a safe place for children to socialize and receive a quality education. There are aspects of the school system that could be improved to better serve these individuals and their families as mentioned above. However, there are also great services currently in place, such as the Bilingual Liaison program. The Bilingual Liaison Program is a federal Title III program in the Lincoln Public School system that employs 18 liaisons who serve as "a link" between the school and families. These liaisons provide cultural and language services to teachers, students, and their families in multiple areas (See for more information: <http://home.lps.org/federal/title-iii/>).

Other participants commented on the good work of local agencies in helping youth and their families. One provider stated that a student was unable to feel safe in his home and it was causing academic issues. After connecting this child with a youth housing agency, the child was able to feel safe, maintain a relationship with his family, and focus on his academic work. Another worker mentioned the appreciation she had for the limited mental health services that were currently being provided to students in school from a local agency.

Other strengths that were mentioned include that individuals in Nebraska are eligible to attend Lincoln Public Schools until the age of 21, which allows them to be eligible for any services that the schools provide to students, in contrast to that of other states that commonly allow benefits only until the age of 18. Also mentioned was the Families Learning in Partnership (FLIP) Literacy Program of Lincoln. Liaisons commented on the helpfulness of this program because parents of the youth can be involved. One drawback stated by many of the participants, however, was the cost of the books necessary for the language classes.

Concluding Note

This report was created with the intention to guide service need planning for immigrant and refugee youth who have current or previous involvement with the juvenile justice and/or child welfare systems. The recommendations in this report were generated from the information provided by the service providers and bilingual liaisons who continuously serve immigrant and refugee youth and their families.

References

- Bates, L., Baird, D., Johnson, D. J., Lee, R. E., Luster, T., & Rehagen, C. (2005). Sudanese refugee youth in foster care: The “lost boys” in America. *Child Welfare: Journal of Policy, Practice, and Program*, 84(5), 631–648.
- Capps, R., Passel, J. S., Perez-Lopez, D., & Fix, M. E. (2003). *The new neighbors: A user's guide to data on immigrants in U.S. communities*. Washington, DC: The Urban Institute.
- Chan, S. (2003). Psychological issues of Asian Americans. In P. Bronstein & K. Quina (Eds), *Teaching gender and multicultural awareness: Resources for the psychology classroom* (p. 179-193). Washington, DC: American Psychological Association.
- Derluyn, I., & Broekaert, E. (2008). Unaccompanied refugee children and adolescents: The glaring contrast between a legal and a psychological perspective. *International Journal of Law and Psychiatry*, 31(4), 319–330. doi:10.1016/j.ijlp.2008.06.006
- Dettlaff, A. J., Earner, I., & Phillips, S. D. (2009). Latino children of immigrants in the child welfare system: Prevalence, characteristics, and risk. *Children and Youth Services Review*, 31(7), 775–783. doi:10.1016/j.childyouth.2009.02.004
- Earner, I. (2007) Immigrant families and public child welfare: Barriers to services and approaches for change.
- Earner, I., & Rivera, H. (2005). What do we know about immigrant and refugee families and children? *Child Welfare: Journal of Policy, Practice, and Program*, 84(5), 532–536.
- Foa, E. B., Johnson, K. M., Feeny, N. C., & Treadwell, K. R. (2001). The Child PTSD Symptom Scale: A preliminary examination of its psychometric properties. *Journal of clinical child psychology*, 30(3), 376-384.
- French, D. C., & Conrad, J. (2001). School dropout as predicted by peer rejection and antisocial behavior. *Journal of Research on Adolescence*, 11, 225–244.
- Gibson, M. A. (1998). Promoting academic success among immigrant students: Is acculturation the issue? *Educational Policy*, 12, 615–633.
- Hazuda HP, Stern MP, Haffner SM: Acculturation and assimilation among Mexican Americans: scales and population-based data. *Soc Sc Q*. 1988;69:687-706. Solis JM, Marks G, Garcia M, Shelton D: Acculturation, access to care, and use of preventive services by Hispanics: Findings from HHANES 1982-84. *Am J Public Health* 1990;80 (Suppl):11-19.
- Jones, K. (2005). Review of Culturally Competent Practice with Immigrant and Refugee Children and Families. *Child & Adolescent Social Work Journal*, 22(1), 105–108. doi:10.1007/s10560-005-2557-1
- McBrien, J. L. (2005). Educational Needs and Barriers for Refugee Students in the United States: A Review of the Literature. *Review of Educational Research*, 75(3), 329–364. doi:10.3102/00346543075003329
- Olsen, L. (2000). Learning English and learning America: Immigrants in the eye of a storm. *Theory Into Practice*, 39, 196–202.
- Pine, B. A., & Drachman, D. (2005). Effective child welfare practice with immigrant and refugee children and their families. *Child Welfare: Journal of Policy, Practice, and Program*, 84(5), 537–562.
- Portes, A., & Rumbaut, R. G. (2001). *Legacies: The story of the immigrant second generation*. Berkeley: University of California Press.
- Pumariega, A. J., Rothe, E., & Pumariega, J. B. (2005). Mental Health of Immigrants and Refugees. *Community Mental Health Journal*, 41(5), 581–597. doi:10.1007/s10597-005-

6363-1

- Rong, X. L., & Preissle, J. (1998). *Educating immigrant students: What we need to know to meet the challenges*. Thousand Oaks, CA: Corwin Press.
- Segal, U. A., & Mayadas, N. S. (2005). Assessment of issues facing immigrant and refugee families. *Child Welfare League of America*, 563–583.
- Sinclair, M. (2001). Education in emergencies. In J. Crisp, C. Talbot, & D. B. Cipollone (Eds.), *Learning for a future: Refugee education in developing countries* (pp. 1–84). Lausanne, Switzerland: United Nations Publications.
- UN High Commissioner for Refugees (UNHCR), *The 1951 Refugee Convention and the Protection of People Fleeing Armed Conflict and Other Situations of Violence*, September 2012, PPLA/2012/05, available at:
<http://www.refworld.org/docid/50474f062.html> [accessed 30 April 2015]
- U.S. Census Bureau. (2012, May). *The Foreign-Born Population in the United States: 2010* (Report No. ACS-19) Retrieved from <http://www.census.gov/prod/2012pubs/acs-19.pdf>
- U.S. Department of State (2013), *Overview of U.S. Refugee Policy*.
- Zong, J., & Batalova, J. (2015, February 26). Frequently Requested Statistics on Immigrants and Immigration in the United States. Retrieved May 5, 2015, from <http://www.migrationpolicy.org/article/frequently-requested-statistics-immigrants-and-immigration-united-states>