Keys to Cultural Competency:
A Literature Review for Evaluators of Recent Immigrant and Refugee Service Programs in Colorado

Prepared for The Colorado Trust by

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The mission of The Colorado Trust is to advance the health and well-being of the people of Colorado.

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INTRODUCTION

The landscape of immigration to the United States[1] changed in 1965 when Congress passed the Hart-Cellar Act, which eliminated racial criteria from immigration laws and refocused immigration on family reunification rather than on skill-based employment.[2] Since this time, the number of immigrants who have arrived on American soil has more than doubled, averaging more than 500,000 a year, as compared to about 206,000 per year prior to 1965. Refugees and asylees now seek resettlement in the U.S. at a rate of approximately 65,000 per year.[3] In addition, some 173,000 temporary workers on short-term work visas and approximately 275,000 undocumented individuals cross U.S. borders each year.[4]

Overall, approximately one in ten individuals residing in the United States today – nearly 30 million people – are foreign-born immigrants or refugees. Two-thirds of these people are not naturalized citizens. In Colorado, there has been a 180% increase in the immigrant and refugee population in the last decade.[5] This segment of our population, taken as a whole, faces multiple challenges, including high poverty rates, low levels of educational attainment, limited English proficiency, lack of affordable housing and transportation options and minimal health care coverage. In addition, these culture groups are confronted by a society that is increasingly hostile to the newly arrived, particularly those immigrants who are dark-skinned.[6]

Indeed, an important distinction between immigrants arriving prior to 1965 versus those more recently resettling in the United States is their diverse racial and ethnic makeup. Many of today's immigrants come from Asian, Latin American and African countries, whereas most former immigrants arrived from the European continent.[3] Another distinguishing factor is that recent immigrants and refugees now arrive into an "hour glass" economy where there are wide gaps between the rich and the poor, and where most immigrants increasingly find themselves relegated to low-paying jobs with few benefits and little opportunity for advancement.[7] Meanwhile, today's new arrivals find themselves at the mercy of policies fueled by anti-immigrant sentiment, such as the 1996 Personal Responsibility Act, which excludes immigrants and refugees from receiving many basic forms of assistance.[2]

In response to the growing needs of the immigrant and refugee population in the United States today, a multitude of diverse programs have sprung up, providing services such as English language and life skills training, physical and mental health care, and counseling, and legal and tax assistance services.[8]

According to Dr. Cynthia Grace of City University of New York, evaluators of these service programs for immigrant and refugee populations "need to know where and how to look for information and resources and how to understand what they have acquired."[9] Awareness of cultural relevance and significance of various beliefs and behaviors is critical for accurate problem definition and solving. Conversely, misinterpreting target group behaviors presents a serious threat to the outcome of evaluation. Lack of awareness and appreciation for cultural differences will also lead to inaccurate assumptions about service program functioning and outcomes.

Thus, the central question guiding the research for this paper is: ***What is the feasibility of conducting a quantifiable outcome assessment of services for immigrants and refugees?***

Before one can begin to properly evaluate program process and outcomes, one must first determine culturally sensitive ways of identifying not only the topics of interest, but also the people themselves. In other words, how does one determine the right issues and obtain valid information in a culturally competent way?

To address this challenge, this paper provides a review of literature pertinent to nine recently arrived immigrant and refugee groups, paying particular attention to what the unique issues are for each group. Culture groups include populations from Bosnia-Herzegovina, Central America, Kurdistan, Laos, Mexico, Somalia, Sudan, the former Soviet Union and Vietnam. This report also provides brief summaries of salient themes that cross cultural boundaries yet are critical to culturally competent work with immigrant and refugee populations. These themes include such topics as social networks, intergenerational and gender conflict, social identification, at-risk youth, education and employment, war trauma and discrimination. Important implications for conducting research and program evaluation also are addressed in detail, including issues regarding accounting for past experiences, building trust, providing for participant needs, evaluator qualities, data gathering and analysis.

CULTURE GROUPS

Immigrants and refugees come to the United States from many walks of life and carry with them distinct cultural and psychological backgrounds. Dr. Sherman Yen, president of the Chinese American Alliance for Anti-Smoking, reminds researchers that "gaining a clear understanding of the targeted population is the crucial first step toward any planned evaluation, which itself should be a significant component of the design process."[10]

Inherent in immigration is the process of acculturation, which involves adjusting to a new culture and environment, redefining interpersonal relationships, as well as sense of self. Social isolation, cultural shock, cultural change and striving to reach specific personal or familial goals are four stressful experiences that all immigrants share.[11] Beyond this generalized stress, specific culture groups have issues that are particular to their experience as immigrants, refugees, asylees, migrants or undocumented people. This report focuses on some key factors that most immigrants and refugees experience as they adjust to the new cultures. These key factors are:

- *History* of the place of origin.
- *Entry Status* – Voluntary immigrants adapt more easily than involuntary refugees.[12] Additionally, the nature of the relationships that the immigrants or refugees have with people who are receiving them (e.g., receiving context) in the United States makes a difference.
- *Educational Level* – Higher levels of education and English competence diminish risks of depression, anxiety and psychosocial dysfunction and increase economic and psychological adaptations, reported Professors Victor Goldberg and Leonard Saxe from Center City University of New York.[13]
- *Employment Experience* – Several studies suggest that employment is an important factor in the psychological adaptation of immigrants and refugees and their adjustment to and satisfaction with life in their new culture.[14]
- *Social Networks* – Factors that help to retain traditional cultural patterns (even if in modified forms) include strong immigrant communities, institutions and ethnic networks, as well as transnational ties to countries of origin.
- *Family Relations (including youth and elders)* – The primary ideological conflict between migrant cultures and American culture is focused on the family as compared to an emphasis on individual freedom. This discord is at the heart of the dilemmas faced by many migrant families, causing conflicts within families, between genders, across generations and within broader ethnic communities.
- *Stress Experiences* of many types.

This literature review highlights some of the most prevalent issues affecting each group's resettlement experiences. These include a set of unique issues for each group that are drawn from the literature available, as well as overlapping issues between culture groups. ***The challenge for evaluators is to examine the unique cultural characteristics of various immigrant and refugee populations and adjust the general key factors in ways that are appropriate and useful.***

EUROPE AND THE MIDDLE EAST

While the culture groups of Bosnia-Herzegovina, Kurdistan and the former Soviet Union are very different from each other, they all share parts of the geography of the European/West Asian landmass.

People from Bosnia-Herzegovina and Kurdistan share the experiences of violent wars. Additionally, those experiences were often related to religious beliefs. All three groups have entered the United States primarily as refugees.

BOSNIA-HERZEGOVINA

Brief History

Bosnian Muslims, Croat Catholics and Serbian Orthodox have traditionally populated the Bosnia-Herzegovina region, located in the center of former Yugoslavia. Though racially homogeneous, Bosnians consider themselves multiethnic and multicultural. Until recently, these people coexisted peacefully as neighbors and equals, with a high rate of intermarriage. In 1991, the presidents of Croatia and Serbia planned the partitioning of Bosnia between their two countries. Armed conflicts ensued, beginning in Croatia. The Bosnian people meanwhile voted for sovereignty and declared themselves independent in 1992. A civil war in Bosnia began at this time, fueled primarily by nationalism and power struggles over land. Bosnian Serbs and Serbian military and paramilitary forces initiated a campaign of "ethnic cleansing" wherein Muslim and Croat civilians were persecuted. Escaping the ravages of war, Bosnian refugees began to resettle in the United States in 1993.[15] Today, approximately 7% of Colorado's refugee population has come from Bosnia-Herzegovina.[4]

Entry Status

An important determinant of adaptive ability is whether a refugee or immigrant came to the United States voluntarily or involuntarily. Many of the Bosnia-Herzogovina refugees are involuntary refugees who came to the United States because of the ethnic and faith-based killings occurring in the civil war of their republic of former Yugoslavia.

Education and Employment

While living in Bosnia-Herzegovina, Bosnians were typically either urban or rural dwellers. Those living in cities were well-educated and professional. Both men and women worked outside the home. Bosnians living in agrarian communities often terminated their education following the 8th grade in order to help with work on family farms. Of those who attended high school, many focused on learning a trade. Most elderly rural Bosnians have not attended school and may be illiterate.

Social Networks

Whether individuals are from urban or rural backgrounds, family is the primary pillar of the Bosnian social structure. Typically, multiple generations live in the same household or near one another. Despite recent domestic upheaval, Bosnians also have a strong tradition of neighborliness.[15] This has helped them to adjust in the United States.

Family Relations

When the family relations are broken in resettlement, families learn to recreate traditional kinship structures in an effort to adapt to their new surroundings. Professor Nancy Foner from the State University of New York at Purchase reported that "these 'invented traditions' can have a life of their own in that immigrants may interpret and act upon the present in light of their models of the past."[16] However, a great deal of stress occurs in family relations partially influenced by the American cultural emphasis on individualism rather than on family unity. Foner notes, "Typically, women are more eager than men to endorse values that enhance women's position, just as young people generally support new

forms that give them greater freedom which their parents may resist."[16] This is an example of gender and generational dissonance.

Immigrant and refugee families experience varying degrees of generation consonance or dissonance. Professor Min Zhou from the University of California, Los Angeles, defined these ideas: "Generational consonance occurs when parents and children both remain unacculturated, or both acculturate at the same rate, or both agree on selective acculturation. Generational dissonance occurs when children neither correspond to levels of parental acculturation nor conform to parental guidance, leading to role reversal and intensified parent-child conflicts."[17] Rural Muslim families from Bosnia-Herzogovina may experience more dissonance than urban Catholic and Orthodox families.

Youth

Many newly arrived immigrant and refugee families are unable to support themselves financially due to poor English skills, lack of appropriate job skills and relatively large family sizes. In addition to supporting the family unit residing in the U.S., immigrants may be trying to support extended family in their country of origin. These circumstances put pressure on the parents. Therefore, children of immigrant families are often unsupervised during non-school hours. Youth may additionally work in family businesses without compensation. Time, transportation options and money, to afford various youth activities, may be severely limited as well. All of these factors place immigrant and refugee children at high risk of getting into various types of trouble.[18]

War Trauma

In 1992, at the beginning of the civil war in Bosnia-Herzegovina, 40% of marriages in urban areas were between ethnically and religiously mixed individuals. Dr. Mary Fabri, Director of Refugee Mental Health Training at Heartland Alliance, and Esad Boskailo, a former physician from Bosnia-Herzegovina and mental health counselor for Chicago Health Outreach, explained the consequences of the civil war: "The influence of the incited nationalism created by the war had resulted in many tragic schisms within families, communities and regions."[15] Women were targeted in particular and many were held in "rape camps" for soldiers' use. In urban centers, "cities were partitioned, curfews imposed, essential supplies (e.g., food and fuel) cut off, home invasions and sniper shootings occurred frequently, and strategic and random bombings targeted civilians."[15] Ultimately, many regions were "ethnically cleansed" and residents of these areas were forced to flee, taken to concentration camps or were killed. It is important to recognize that the war in Bosnia broke many trusted relationships between friends and neighbors and broke a strong tradition of personal and family "sharing" known as "*komsiluk*." "Atrocities were often committed, not by strangers, but by long-time friends."[15]

Psychological Stress

Bosnian refugee experiences should not be over-generalized as these are highly varied in nature. Some escaped the war with their families intact; many did not. Refugees have come to the United States either directly from Bosnia, from concentration camps or from refugee camps. In most of these cases, however, Bosnian refugees were forced from their homes, separated from family members and experienced or witnessed horrific violence. Many Bosnians, now in exile, struggle to restructure their lives.

Massive psychological trauma has been found in several research studies with this population. For example, one study, by Stevan Weine and associates from the Psychiatric Institute of the University of Illinois in Chicago, found that "approximately 75% of the refugees met the criteria for at least one psychiatric diagnosis, 65% had post-traumatic stress disorder (PTSD) and 35% had a depressive

disorder."[19] Fabri and Boskailo also reported that "many Bosnian refugees have problems with sleep, appetite, mood, anxiety, concentration and memory." [15] Another assessment – from Weine and associates – of Bosnian adolescent refugees found that 25% suffered from PTSD and 17% had depressive disorders.[19]

The initial phase of resettlement in the United States tends to be the most stressful for refugees. In another study, Weine and colleagues concluded, "This phase is characterized by psychological stressors associated with recent (or continued) traumatization, social isolation, language difficulties, unemployment and family instability, but it is also characterized by psychological gains through adjustment and recovery in these same realms."[20] This study also found that older Bosnian refugees are significantly more likely to suffer from PTSD than are younger refugees, both upon arrival in the United States and over time. Weine and colleagues hypothesized that the relatively lower levels of PTSD in youth may be due to "normal prior development, time-limited adversity, absence of physical or sexual traumas, rejoining nuclear families or inadequate time for the development of delayed-onset PTSD. In addition, it may be understood as a reflection of the resiliency of adolescence."[20]

In many respects, the typical daily experience of Bosnian families in Bosnia was somewhat more closely related to the mainstream American lifestyle than those of, for example, Loatian or Sudanese families. Becker and colleagues from Mills-Peninsula Health Services in Burlingame, California, and the University of California, San Francisco, concluded that the acculturation process for families arriving from Bosnia-Herzegovina to the United States has been somewhat smoother than for some other refugee populations.[21]

KURDISTAN

Brief History

Kurdistan has never existed as an independent state, though the Kurds are the fourth largest distinct ethnic group in the Middle East after Arabs, Persians and Turks. The Kurdish region falls across contiguous lands in Iraq, Iran, Syria, Turkey, Azerbaijan and Armenia. In this area, approximately 24 to 27 million Kurds live, about half of whom reside in Turkey. Several hundred thousand Kurds now also live in Europe.

The Kurdish people have long been a marginalized, minority population in the various countries of their origin. As such, their cultural history includes a tremendous amount of forced assimilation, discrimination and persecution. At times they have been forbidden to speak their native language, dance their traditional dances or wear their customary clothes. They have also frequently been used as pawns by warring governments and their allies. Despite these persistent forms of persecution, the Kurdish people have maintained a surprisingly strong sense of cultural heritage and common identity.

Recently, Kurdish refugees have begun to move to the United States. Most of these refugees have come from Iraq following the 1991 Gulf War. The Iraqi government began mass deportations and executions of the Kurds in the 1980s. Chemical attacks on Kurdish villages killed thousands of civilians during this time. After the United States defeated Iraq's invasion of Kuwait in 1991, Kurdish forces attempted a revolt against Saddam Hussein's government but were overpowered by the Iraqi military. Consequently, approximately 1.5 million Kurds were forced to flee their homes. A large number of these individuals have since resettled in the United States.[22]

Social Networks
The majority of Kurds are Sunni Muslims (75%), while the remainder is mostly Christian, Jewish or Zoroastrian. A small percentage of Kurds are also Shiite Muslim. With the exception of some who live in urban areas, Kurds typically structure their principle authority, trust and loyalty according to a tribal system. The staff from the Center for Multicultural and Multilingual Mental Health Services, in Chicago, Illinois, reported that "the size and form of the tribe unit varies significantly across Kurdistan. Tribes usually share a common mythology of the past. . . most have their own real or imagined ancestry. . .share a sense of territorial identity or belonging to a specific region."[22]

Julienne Lipson and Afaf Meleis from the University of California, San Francisco, reported that Middle Eastern immigrants and refugees have been found to "value family ties, trust family members over outsiders and respect age, education and the Western health care system."[23] When meeting with non-family members, Middle Eastern etiquette involves informal chatting and sharing of food and drinks before moving into a more formal context, such as an interview.

Education and Employment
In urban areas, many Kurds are well educated and professional. Conversely, Kurds from rural areas have experienced a shortage of schools and financial resources and are thus typically not well educated. Nevertheless, whether from rural or urban backgrounds, Kurdish families tend to highly value education for their children.

With respect to employment opportunities in the United States and the ability to be self-supporting within a relatively short period of time following arrival, it appears that immigrants and refugees who move to smaller cities fare better than those who resettle in larger cities. It has been suggested that this discrepancy may be in part attributed to resettlement agency staff having smaller caseloads and state policies affecting access to public assistance.[14]

Women
Conflicting gender roles serve to highlight immigrant and refugee struggles to adjust in their new host society as both men and women are caught between two worlds and opposing worldviews. In many cases, prevalent economic conditions have granted women opportunities for greater independence in American society compared to what they experienced in their home countries. Foner concluded from her research that "the immigration literature is filled with examples of immigrant women gaining authority in the household and increased leverage in relations with their spouses now that they have greater opportunities for employment and contribute a larger share of the family income in the United States."[16] Nevertheless, according to Amado Padilla of Stanford University and Nelly Salgado de Snyder of the Mexican National Institute of Public Health, some "immigrant women have significantly higher scores of generalized distress than their male counterparts."[24]

War Trauma
The majority of Kurdish refugees who have resettled in the United States suffered brutal, traumatic experiences in their homelands, particularly during the Iraqi government's attacks on Kurdish villages. Kurdish men, women and children were humiliated, threatened, beaten, raped and massacred. They also experienced severe shortages of food, water, shelter and medical assistance.

Communication Style
It is common in Middle Eastern cultures for people to distinguish between the "public self" and the "private self." In a formal interview situation, respondents may thus present themselves as they think is

appropriate, rather than expressing what it is they really feel. The impulse to "save face" is particularly strong among Middle Easterners. In Arabic, the term "*ayb*" connotes social and religious norms regarding behavior or communication that would be shameful. "For example, it is '*ayb*' for a woman to talk about sex with her male physician, sexuality is '*ayb'* and the woman should not 'uncover her husband's face' or discuss her husband's sexual performance with an outsider. *'Ayb,'* or shame, brings back '*fudeeha*,' which means 'showing the family's dirty laundry' to someone outside the family. Such disclosure potentially damages the family's honor and reputation, and such damage can extend even outside the country,"[23] warned Professors Lipson and Meleis.

Psychological Stress

As a consequence of traumatic events experienced in their country of origin, many Kurdish refugees exhibit symptoms of trauma-related stress, anxiety and depression. Some of the stress-related symptoms observed specifically in Kurdish children include intense fear, anxiety, lack of attention, nightmares, distrust of the world, avoidance of traumatic reminders and sleep disorders. According to a report from the Center for Multicultural and Multilingual Mental Health Services, "often the worst feeling for these children is the fear that their parents cannot protect them."[22] Such symptoms may in turn be manifested in psychosomatic pain, low-energy and loss of self-esteem. "Persons from the Middle East tend to use the body as a metaphor to express their emotional pain and discomfort. Some feel that there is a stigma attached to mental health problems. Individuals may not receive the necessary care because family and friends may minimize or deny any problems."[22]

FORMER SOVIET UNION

Brief History

The majority of people moving to the United States in recent years from the former Soviet Union, including Jews, non-Jews, immigrants and refugees, have come from Russia and the Ukraine. More than half a million Jews from the former Soviet Union have migrated to the United States since the early 1970s.[14] Most of them have entered with refugee status. Colorado's population includes 4% Russian and 2% Ukrainian immigrants, and 15% Russian and 11% Ukrainian refugees.[4]

Education and Employment

Psychological adaptation among adult Soviet immigrants and refugees is largely dependent on their ability to find appropriate employment opportunities. There is an important Soviet cultural distinction between being employed in one's chosen professional field versus in other fields. The term "*po spetsial nosti*" literally means "according to specialty." Professors Andrey Vinokurov, Dina Birman, and Edison Trickett from the University of Maryland, College Park, reported that "*ne po spetsial nosti*" or "not according to specialty" "has a strong connotation of a downward shift in professional status. Because this highly educated group of men and women were almost all employed prior to their move, the issue of work status is thus of central importance to their psychological adaptation."[14]

Complicating this issue are two related factors. One is that most resettlement programs encourage near immediate employment and early economic self-sufficiency. The other is that Soviet people have trouble understanding the flexibility of the American system as compared to the relative rigidity of the former Soviet market. Thus, when these immigrants and refugees first find employment in the U.S. that is well below their skill and education levels due to poor English ability or lack of congruence between their skills and the American labor market, they tend to suffer a significant loss of self-esteem and believe that they will be "stuck" in that type of job.[14]

Women
In one study, women reported feeling more alienated from greater American society than men, though as compared to other culture groups these women were comparable to males in terms of employment and acculturation scores.[14] This alienation may be due to inconsistent gender role expectations.

For example, women have traditionally played a subordinate role in the former Soviet Union culture. Professors Victor Goldenberg and Leonard Saxe from City University of New York reported that "neither independent women's organizations nor a feminist movement has existed, and sexist values have been widely evident. Attitudes toward women in the family have remained traditional."[13] In the U.S. they no longer are as subordinate since they have comparable jobs and are treated more equally in society. This is increasing household stress.

Psychological Stress
Former Soviet refugees tend to keep their identity and behavior even as they become increasingly Americanized. Though immigrants and refugees from this part of the world may on some levels appear to share much in common with Americans as compared to other culture groups, there are nonetheless vastly distinct ideological and social traditions that separate the two. Soviet immigrants and refugees, to varying degrees, struggle to adopt American political and social attitudes. Studies have found that both depression and physical symptoms that overlay depression are significantly elevated in immigrants and refugees from the former Soviet Union.[25]

According to Vinokurov and colleagues, immigrants and refugees from this part of the world who are "employed in the same field as in the former Soviet Union reported the highest levels of income, level of American acculturation, comfort speaking English and life satisfaction. Those unemployed were lowest on each of these variables. Alienation was significantly lower only among those employed in the same professional field and was equally high for both the unemployed and the underemployed."[14] This indicates the critical importance of matching past experiences with current realities as much as possible.

THE AMERICAS

Historically, the United States has experienced movement back-and-forth with people from Mexico for centuries. The movements fluctuate depending on the political and economic realities of both countries. More recently, Central America has been the source of the largest group of immigrants and refugees from war-torn countries coming to the United States (approximately 2 million since 1975). About half of these immigrants are children. In addition, an unknown number of Mexicans and Central Americans reside in the United States illegally.

CENTRAL AMERICA

Brief History
Central Americans are the most recent group of refugees and immigrants coming to the United States from Latin America.[26] In the state of Colorado, Census figures show that the Hispanic/Latino population that is *not* of Mexican, Cuban or Puerto Rican descent has jumped from 1,095 in 1990 to 188,641 in 2000.[27]

Most Central American immigrants and refugees come to the U.S. for economic or political reasons, or both. The majority of these immigrants come from Guatemala, El Salvador and Nicaragua, where civil wars have resulted in extreme forms of violence including killings, torture, kidnappings and disappearances of loved ones.[24] For example, during the 12-year civil war in El Salvador, Salvadoran migration to the United States quintupled from 94,447 in 1980 to 565,081 in 1990.[28] Despite being characteristic of a refugee population, these individuals were not admitted under refugee status.

Entry Status

Many Central American refugees live in the United States illegally and thus are denied social services such as welfare and medical care. Despite their clear similarities with other refugee profiles and their flight from civil war and human rights abuses, most Central Americans are defined as "economic immigrants" and thus are ineligible for government assistance extended to other refugees. This situation has placed a heavy burden on receiving communities and has tended to keep Central Americans in highly disadvantaged circumstances.[29] In the 1980s, community organizations serving this population grew to fill the void caused by the lack of government services for Central Americans. Those who have had access to these community organizations have used the resources heavily, though these types of organizations are typically at the mercy of vacillating conditions in the broader economy.

Education and Employment

Central Americans express concern about their prospects for regular employment. According to one study in San Francisco, all Salvadorans who were employed when the interviews for the study were conducted in 1990-1992 held low-paying jobs in the service sector. The majority were working without documents and most held temporary and/or part-time jobs. Cecilia Menjivar from the University of California, Berkeley, reported, "Regardless of difference in educational level or age, the men were concentrated in food services (mostly as busboys or dishwasher), in gardening and in construction, whereas the women held jobs as housekeepers and/or babysitters." [29]

A 1993 study of Latin American immigrants in the U.S., conducted by professors Mary Waters of Harvard University and Karl Eschbach from the University of Wisconsin, found that "undocumented workers earned lower wages than legal immigrants – they earned 30% less than their legal counterparts from the same regional origins."[30] Also, according to Professor Roger Waldinger from the University of California, Los Angeles, "employers operate with a hierarchy of ethnic preferences, with native blacks [e.g., U.S.-born African Americans] at the bottom,"[31] which further reduces employment conditions.

Social Networks

A stressor that is characteristic of newly immigrated individuals is the split-family, where one member of the household moves and is later joined by other family members. This scenario is common in the experience of migrant workers. Periods of separation can span many years, and these situations can be particularly stressful for culture groups that place high value on family cohesiveness. Thus, a split-family situation in itself may constitute a significant risk factor.[10]

Kinship networks to some degree are able to compensate for the deficiencies of public assistance, although in the case of Central Americans, these networks are frequently weak. For example, a study of migrants from El Salvador found that while they typically received adequate help for their journey into the United States, once they arrive here the continued assistance they expected was unavailable to them. In many of these cases, social relationships disintegrated as a consequence of conflict and unmet expectations.

By comparison, Mexican and Vietnamese support networks did not dwindle after arrival. According to Menjivar, "For Salvadorans, a constellation of factors in the receiving context [e.g., area where the immigrants and refugees emigrate to] has given rise to extreme poverty and marginality where resources become depleted rapidly and people have little to share."[29] Some of these factors include undocumented status, fear of deportation, lack of employment opportunities, extreme poverty, lack of health insurance, lack of counseling services, etc. In those cases where family networks had existed in the U.S. for longer than 10 years, the situation was more stable and families were able to provide more support to newly arriving immigrants.

Women

A study conducted from 1986-1993 documenting the adjustment of Guatemalan Mayan Indians from Totonicapan found that social networks developed differently over time according to gender and varying degrees of isolation. Professor Jacqueline Hagan from the University of Houston wrote, "As U.S. born minority groups shift out of domestic work, the vacuum is filled increasingly by immigrants, especially newcomer Central American women who rarely move out of this job niche."[32] In this sample, the women worked as live-in domestics in upper-class Caucasian households. These women worked long hours, six days a week, in the confines of their employer's home. There, they became extremely isolated and generally suffered from the lack of a social support system.

Conversely, the men in this sample developed a sophisticated support structure based on their employment in a supermarket chain. This support network was managed by an "encargado." Among Mayan men, such an individual holds an important supervisory position among co-ethnics, though other non-Mayan employees and mangers in the store may not recognize this position. An encargado may control recruitment, work schedules and promotion of other Mayan workers. "Social control of the recruitment process translates into social comfort for Maya workers . . . Over time, the structure of men's and women's networks diverge. Men's networks expand; women's contract,"[32] reported Hagan. One long-term ramification of this situation was that many of the men in this sample were able to obtain the necessary documentation for legal residency in the U.S., while the women did not.

Family Relations

A common phenomenon in families where parents do not speak much English is for children to take on adult responsibilities. Much of this entails becoming the spokesperson for the family. The obvious role reversals implied in this may cause stressful situations between the adults and children in the family, as parents and elders lose their traditional authority status and children lose respect for the incapacitated adults. Another common area where youth may lose respect for their caretakers, and where adults lose status and self esteem, is in circumstances where adults take on "demeaning" jobs in order to support the family.[18] This stress is especially high as youth are able to obtain more mainstream positions.

Youth

Today's immigrant youth often find themselves in underprivileged neighborhoods, surrounded by poverty and subject to poor schools, violence and drugs, and a generally disruptive social environment. In addition, there has been a dramatic increase in immigrant one-parent family households in recent years.[17] Sadly, well-known researchers Alejandro Portes from Princeton University and Min Zhou from the University of California, Los Angeles, conclude, "Children of non-white immigrants may not even have the opportunity of gaining access to middle class white society, no matter how acculturated they become. Joining those native circles to which they do have access may prove a ticket to permanent subordination and disadvantage."[33]

Refugee and immigrant children are often said to be at heightened risk due to psychological problems stemming from war-related trauma, displacement and chronic poverty. If symptoms of serious stress are not detected by adult-caretakers, problems can become chronic and disabling. Children are particularly at risk when their parents have been killed or adversely affected by historical events.

Physical Health
Similar to other refugee populations, Central American refugees suffer from common physical ailments such as intestinal parasites and respiratory tract infections.[26] However, the majority of this population does not have health care coverage. For example, 57.4% of El Salvadorans are without health insurance.[5]

War Trauma
Central American immigrants and refugees exhibit high degrees of psychiatric disorders as well. Many suffered through more than a decade of civil war and thus carry with them deep emotional scars, posttraumatic stress disorder and a high frequency of family separation resulting from political turmoil. Professor Laura McCloskey from the University of Arizona and Dr. Karen Southwick, University of North Carolina-Chapel Hill, concluded that "recovery from physical deprivation appears to be more rapid and complete than recovery from emotional trauma and loss."[26]

Psychological Stress
Beyond war-related trauma, many of the various experiences associated with immigration and resettlement discussed above are stressful for many refugees and immigrants. In one recent study of Central American youth, multiple stressors were found to compound earlier war-related trauma. Generally, Central American youth have more academic and behavior problems than other immigrant children. In one study, Central American children were 27% depressed, 22% aggressive, 32% hyperactive and 13% delinquent or antisocial, according to their mothers. All of these factors were significantly higher than in a Mexican immigrant comparison group. "Those refugee children whose fathers had died or disappeared (but not through divorce or voluntary separation), or whose mothers manifested elevated symptoms on a posttraumatic stress index, showed the worst psychological profiles,"[26] reported McCloskey and Southwick.

MEXICO

Brief History
Mexican immigration into the U.S. has been gradual compared to other culture groups. Some Mexican descendents live in areas that were part of Mexico before they became the United States' territory following the 1848 U.S.-Mexican war. Since then, the flow of immigrants from Mexico has continued at a relatively steady rate. Mexican immigrants' cultural and psycho-social adaptation is therefore greatly influenced by this long collective history because it has provided for them what Professors Aida Hurtado, University of California, Santa Cruz, Patricia Gurin and Timothy Peng from the University of Michigan have called "multiple constructions of ethnicity" that may be used to define personal and cultural identity.[34]

It must be emphasized that Latino culture, in general, is by no means homogenous. Professor Min Zhou from the University of California, Los Angeles, addressed this: "On the contrary, this group is quite heterogeneous, composed of subgroups that vary by Latin American national origin, racial stock, generational status in the United States and socioeconomic level."[17] In addition, classic characteristics

such as "Catholicism" and "family orientation" are continually modified through the process of acculturation.[17]

According to 1990 U.S. Census figures, 90% of Latinos live in large urban centers in the United States. However, the common perception of Latinos in the U.S. is that they are predominantly agricultural migrants. The vast majority of Latinos do, nonetheless, hold low-income, semiskilled or unskilled jobs. Approximately 35% of Colorado's immigrants are of Mexican descent.[4] The Mexican population in the state of Colorado has nearly doubled in the last decade. According to recent census figures, there were 282,478 Mexicans in Colorado in 1990, as compared to 450,760 in 2000.[27]

Entry Status
Over time, several immigration reform laws have made it possible for undocumented Mexicans to gain legal status in the U.S., though many Mexicans today reside illegally in this country. These undocumented individuals frequently experience multiple stressors. However, since they are without legal rights and can be deported at any time, they are the least likely to seek assistance from service providers.[12]

Social Networks
Family networks provide Mexican immigrants with their primary source of support and information upon arrival in the United States and thereafter. "Mexican descendants have consistently shown a strong commitment to family, especially extended to kin, in comparison not only to Anglos but to other groups as well,"[34] claimed Hurtado and colleagues. For example, family support is extended through "compadrazgo" (e.g., godparents), which creates socio-religious relationships between children, parents and godparents. In general, children are highly valued in Mexican culture.

Ethno-specific communities and kinship networks frequently lend immigrants and refugees a support structure that provides valuable access to emotional counseling, living arrangements, employment and other opportunities. Some researchers also suggest, however, that such networks may be detrimental to the adjustment of immigrants if they keep members from establishing broader-based connections outside of their immediate group. Immigrants may accept poor labor conditions if they feel the need to show loyalty to friends or relatives who recruited or recommended them for jobs, for example. It has also been argued that in some instances, the potential value of existing kinship networks may be superceded by extraneous circumstances such as high poverty rates.[29] Professor Mark Granovetter, University of Michigan, found that weaker network ties often provide greater opportunities for new information than stronger ties. [35] For example, immigrants with weaker social ties to their immigrant communities seek out information and resources from the larger society. It is also generally true that immigrants in higher social classes have greater access to broader networks where weaker acquaintance links can be very useful; while immigrants in lower social classes frequently cluster in dense networks that are more isolating.[36]

Mexican immigrants' social networks are typically well established and "dense" compared to other immigrant groups. Both transnational immigration and internal migration patterns are primarily related to kinship and Mexican "social networks," where family, friends and community members provide valuable support, in terms of lending money and offering assistance for housing and employment. For Mexicans, such networks are often in many places depending on work site and type.[36] According to Menjivar, "The informal networks that have developed over a long migratory history have been further strengthened and expanded in recent years as more Mexican immigrants have settled in the U.S. In contrast to the predominance of men and the sojourn patterns that characterized Mexican migration in

the past, more wives and children have joined men in their journeys north in the past 20 years, extending their stays and settling more or less permanently."[29]

Social Identity

Despite the obvious strong influences of country of origin, in many cases it is not enough to think of ethnic identity purely as related to nationality. Rather, it is important to understand the malleability of ethnic and cultural identity, particularly in the context of later generations. This is especially true for later-generation Mexican immigrants.[34]

The geographic proximity between Mexico and the United States has been an important factor in the development of Mexican immigrant culture in the United States. As Mexican families increasingly establish residence in the U.S., while relatives and friends remain in Mexico, the back and forth communication of information and circulation of goods has become very active. Several researchers argue that the variations between Mexican immigrant generations are thus highly distinct, mainly because first generation immigrants continue to base their social identities on affiliations they have with social groups remaining in Mexico, while second and later generations perceive their social identities as linked more closely to current contact groups in the United States. "Thus for historical and ecological reasons, first and later-generations of Mexican descendants live in two different social contexts, different enough that the content and structure of their social identities differ markedly," [34] reported Hurtado. For example, first generations are much more likely to accept labels such as "Mexican" or "immigrant," while later generations are more likely to think of themselves as "Mexican-American." First generation Mexican immigrants will also classify themselves as "farm workers" and "poor," while later generations think of themselves as "middle class." While both groups tend to identify with a broader Latin American consciousness, political consciousness is markedly different, with later generations more likely to be strongly influenced by the social and political movements in the U.S. that strive to fight historical discrimination against Latinos. By contrast, first generation Mexicans continue to relate more specifically to social contexts of their country of origin, with the primarily focus being family.

The issue of cultural identity is more difficult for later-generations. According to Hurtado and colleagues, "It is the Mexican self that is problematic in being an American of Mexican descent for these members of the later generations."[34] While the first generation generally is not concerned with issues of cultural identity, later generations need to address that issue to better adapt to the United States. Though both groups frequently develop a sense of bi-nationality, these individuals tend to eventually identify strongly with one or another classification such as a distinctly Chicano Raza [e.g., Chicano race] sense of self that has been fueled by the Latino political movement in the United States, a strong family identity, or an American Middle Class identity. These cultural adaptations appear to develop independently of length of residence in the U.S. and other demographic and structural variations. Hurtado and colleagues conclude, "It is critical to know how Chicanos have come to think of themselves, not merely how long they have resided in the United States or how structurally integrated they have become, to understand how they are apt to adapt culturally."[34]

Education and Employment

Mexican immigrants benefit from a highly integrated system of job recruitment, though these jobs are usually low paying and often temporary. Professor Roberto Cervantes and colleagues Amado Padilla and V. Nelly Salgado de Snyder determined that a predominant cause of stress for Latinos residing in the U.S. is concern over occupation and finances. [37]

Low literacy skills are a significant barrier to Latinos in finding and retaining employment, which is in turn reflected in adverse health outcomes.[38] For better or worse, native language usage has been maintained by Mexican descendents more than in any other cultural group, including other Latino groups. In part, this may result from the dense ethnic networks that Mexicans often live in. It has been suggested by Professors Kristin Espinosa and Douglas Massey from the University of Pennsylvania that "the costs of *not* acquiring English are significantly lower for Hispanics in areas with greater concentrations of Spanish speakers . . . Latino immigrants living in urban areas with large Hispanic populations were, in fact, less likely to learn English."[39] These factors, along with relatively low levels of education, combine to deter English language acquisition for Mexicans in the United States.

In the case of Mexicans in particular, and perhaps for other immigrant groups as well, the degree of English proficiency should not necessarily be assumed to indicate degree of identification with American culture or how often they use the English language. Many studies have found, however, that English language capabilities are strongly and positively correlated to greater economic success. It has also been found that the relationship between English proficiency and education is reciprocal and that men learn English more often than women, though women speak it more often once they do learn English. The presence of children, especially if they are enrolled in American schools, also encourages the learning of English among family members. On the other hand, undocumented migrants, or other immigrants who plan on returning to their country of origin may feel less incentive to learn English. Espinoza and Massey concluded, "If one's stay in the United States can end at a moment's notice, then it makes little sense to invest heavily in English language training."[39]

Familial Relations

Another major stressor for Mexican immigrants is related to parenting (e.g., dealing with overt sexuality in the U.S. culture, bleak educational completion rates for Latino youth, children demanding too much independence). As is true for other immigrant culture groups, Latino youth typically acculturate more quickly than their parents do, with the resulting generation gap causing rifts in family structure and functioning.

Youth

Due to high rates of poverty and immigrant and ethnic/racial status, Latino youth are at high risk for experiencing psychosocial stressors. Latino student dropout rates are high, for example. Many students, especially low-income males, leave school to financially support their families. Children of migrant laborers frequently change schools and have irregular attendance, which adds greatly to their dropout risk.[38] Alcohol and drug abuse is also prevalent with Latino youth, which is in turn related to deviant behavior, low self-esteem and poor psychosocial adjustment.[24] There has also been a dramatic increase in single-parent Latino households in recent years.

Women

Latina women have often been stereotyped as being passive and submissive to Latino males. Changes in the last few decades have increasingly called this stereotype into question, however, as marriages and family relationships have evolved with time and circumstance. Increased levels of acculturation, education and labor force participation for females are some of the factors contributing to this change. Compared to Anglo women, Latinas as a whole are still highly disadvantaged, however, and are at significant risk for a variety of potential problems. Aside from educational and economic differences, for example, there is a greater likelihood that Latina women will begin childbearing in their teenage years, "which in turn is likely to contribute to the development of various psychological as well as physiological problems for both mother and child,"[24] wrote Padilla and Salgado de Snyder. Latinas have also been

found to be less likely to be in treatment programs than their male counterparts.[12] Latina women who are undocumented may refuse to seek assistance from service agencies for fear of being deported and losing their children.[38]

Physical Health
Migrant farm workers are exposed to toxic chemicals, frequently earn less than minimum wage and live in substandard housing. "The median income for U.S. farm workers is between $2,500 and $5,000 annually. Despite high levels of poverty among all farm workers in 1994-1995, only 16% used Medicaid, 10% used WIC and 17% used food stamps," summarized Jeff Garnas, from the Latin American Research and Service Agency in Denver, Colorado.[38] An unusually high percentage of 52.6% of Mexican immigrants do not have health insurance, Al Knight reported in *The Denver Post*.[5]

Communication Style
The concept of *simpatía*, which mandates politeness and respect in social circumstances, is important to more traditional Latinos. This may result in Mexican immigrants feeling obligated to appear to understand and agree, when in fact they do not. Another common tradition among Latinos in *personalismo*, which implies a preference for relationships with people of the same social group. *Plática*, or friendly conversation, is usually the preferred mode of conversation.

Psychological Stress
In Latino communities, poverty, resource deprivation, violence, discrimination and social oppression lead to poor mental health outcomes. For adults, these conditions are exacerbated by under-education and underemployment.[38] Currently, of the eight largest immigrant groups in the U.S., Hurtado and colleagues report that Mexicans are "most likely to be manual workers, they have the lowest proportions of professionals and managers, and they join communities that are among the most concentrated ethnic communities in the country."[34] Compared to American Caucasians, Latinos in the U.S. are younger, less financially well off, are poorly educated and have a higher rate of unemployment. "All social indexes point to the fact that Hispanics, especially youths, constitute a population that is at high risk for experiencing a greater incidence of physical and psychological problems,"[24] concluded Padilla and Salgado de Snyder.

First generation Mexicans in particular struggle with social class. They are the poorest of the Mexican immigrants and have to constantly deal with the American negative stereotypes of them as menial laborers. "In this group, there is a clear 'working class' identity that reflects this problematic status, and it is the most psychologically powerful identity for their cultural adaptation,"[34] reported Hurtado and colleagues.

Mexican immigrants have been found to underutilize mental health services in the United States, though they may use general practitioners. Psychiatrist William Vega and colleagues Bohdan Kolody and Sergio Aguilar-Gaxiola found that "overall use of mental health care providers by persons with diagnosed mental disorders was 8.8%, use of providers in the general medical sector was 18.4%, use of other professionals was 12.7% and use of informal providers was only 3.1%."[40] It has also been noted that due to the strength of family relations in this culture group, many Mexican immigrants will seek the assistance of family members for personal and psychological help to avoid taking personal problems outside of the family.

ASIA

Two culture groups from Asia that have entered the United States as refugees are the Hmong and Vietnamese. Both were deeply affected by the Vietnam War. The Hmong and Vietnamese acculturation process has been very different over the past several decades because of different experiences in their areas of origin.

LAOS

Brief History
Laotians who migrated to the United States are predominantly Hmong. Hmong means "free people." They are traditionally a nomadic tribal folk, with a strong cultural identity, who have lived in relative isolation in the high mountain areas of Laos. As such, the Hmong maintained their physical, cultural and linguistic distinctions intact for hundreds of years. They have had no written language and have depended on a tradition of oral history and artwork to carry their cultural heritage forward.

In 1959, the U.S. Central Intelligence Agency began recruiting the Hmong people to help guard against the growing insurgence of communists in Southeast Asia. The Hmong fought alongside American soldiers during the 1960s and '70s in what is called the "secret war" in Laos, which ended in 1975. Following the departure of the Americans from Indochina, the Hmong were persecuted for their involvement in the conflict. Approximately 100,000 Hmong died at the hands of the Lao People's Democratic Republic and their Vietnamese allies. Initially, many Hmong refugees fled to detention camps in Thailand, where they were imprisoned for several years in overcrowded, grim conditions. The largest of these camps, the Ban Vinai Refugee Camp, held 40,000 refugees from Laos by 1979. Since 1975, approximately 125,000 Hmong have permanently resettled in the United States.[41]

Education and Employment
The Hmong people, particularly the adults, typically have low levels of formal education and literacy, which has in turn limited their employment and economic prospects. Most Hmong adults who are employed work in low-paying jobs in the service, clerical or manufacturing sectors. Despite these obstacles along with the hardships of poverty, discrimination and conflicts embedded in the acculturation process, Hmong youth have generally performed well academically in the United States. This is thought to be in part the result of a strong cultural appreciation for teachers and education. In one study by Professor Donald Hones from the University of Wisconsin, Oshkosh, a Hmong respondent said, "In Laos, they call the teacher the 'second parent'."[41] It is also commonly said that the Hmong see education as a principle way to preserve and strengthen their people in their new environment. In the extreme, Hmong parents may hold unusually and unrealistically high academic expectations for their children, causing conflict in the family. This situation is further complicated by the fact that there tends to be little communication between Hmong parents and their children's teachers.[41]

Hones reports that the Hmong are known for the "resourcefulness and tenacity of a people who have learned to adapt to rapidly changing conditions without sacrificing cultural and linguistic practices central to their identity. The Hmong have learned to defend strong cultural traditions in the face of adversity, and this learning must not be overlooked by focusing too narrowly on their overall low levels of adult literacy or high unemployment rates."[41]

Social Networks
While they are predominantly animists and hold some Buddhist beliefs, many Hmong converted to Christianity while in the detention camps in Thailand. A number of Christian churches in the United States now play a powerful role in helping the Hmong maintain their ethnic ties and cultural identity while also providing a bridge to the broader American society. "The connection is supported in the historical relationship between Christian missionaries and the spread of Hmong literacy in China and Southeast Asia,"[41] wrote Hones. While Christianity rejects some of the traditional Hmong cultural beliefs, it also nevertheless offers a sense of commonality between Hmong refugees, and between Hmongs and American Christians.

Family Relations
Many Hmong came to the U.S. in extended patrilineal clan networks, which have to a large degree been sustained. Nonetheless, similar to other immigrant groups, the Hmong have experienced a good deal of familial discord resulting from relocation to the United States. For example, Hmong adolescents may identify themselves in three ways. Either they see themselves as primarily identifying with the dominant American culture and secondarily as Hmong; they may perceive their self-identity as the reverse with an emphasis on holding Hmong traditions; or they are rebels who reject both the dominant culture and that of their parents. Parents, meanwhile, face tough competition from mass media, schools and their children's peer group. Professor Emerita Selma Berrol of Barach College reports in her study of immigrant children that "parents who differ from the dominant society culturally, linguistically or socio-economically often experience additional difficulties in communicating with children who believe that to become like other 'Americans' they need to distance themselves from the home. Yet when children turn their backs on these parents, they lose touch with a valuable source of learning and wisdom, and their parents may become further isolated from both their children and the dominant culture."[42]

One area of conflict is seen in teen relationships with members of the opposite sex, for example. In traditional Hmong culture, youth do not have friendships with the opposite sex. Parents therefore often mistake such friendships, which are common in the U.S., for sexual approaches. Hmong parents and elders also are known to be somewhat uncomfortable with their children developing relationships with non-Hmong friends.[41]

According to many studies, age is inversely related to positive socio-cultural adaptation, with elderly immigrants and refugees being the least well adapted and youth being the most adapted. Elderly Hmong refugees and immigrants have experienced a radical decline in their status as they no longer control important family resources such as land. Additionally, they have been brought into a culture that does not confer respect to the elderly in the same ways that many traditional cultures do.[43]

Women
Hmong women typically try to bridge cultural norms by gaining some independence while at the same time fostering traditional gender roles. As do their male counterparts, Hmong females typically see themselves as living between two worlds. In the Hmong culture, women do the housework and obey their husbands. Drs. Sehwan Kim of Database Evaluation and Research, Jonnie McLeod, a pediatrician and Carl Shantzis of Substance Abuse Prevention Services report that traditionally, women are seen as "demur, docile, passive and humble people who practice reluctance in self-expression."[18]

However, others believe that women have their own rights. Furthermore, as with other immigrant and refugee groups who resettle in the U.S., traditional roles of females are continually called into question in the context of American culture, which places tremendous value on individualism and independence.

Communication Style
In general, the Hmong and other Asians share some cultural aspects with traditional Asian behaviors. For example, children are taught not to look adults in the eyes, for doing so is considered a sign of disrespect. Adults will also avoid direct eye contact in formal settings. A limp handshake is also a sign of humility and respect, not a sign of weak character. Many show little expression about their personal feelings in general, particularly those who have suffered from political oppression. Yet, silence is considered virtuous. Though it may appear unfriendly and disrespectful, it is not. Asians are particularly unlikely to complain openly, preferring to rely on self-awareness as a method of resolving issues. On the other hand, outward expressions of importance of self are considered immature and lacking in social skill. Likewise they find it difficult and awkward to give or accept compliments. Rather, the sharing of small gifts, particularly useful household items, is a common way of showing appreciation.[18]

Asians, in general, tend to place emphasis on proper authority. One manifestation of this is that they will recognize stature and respect professionals, preferring to work with professionals over paraprofessionals once they become involved with an organization. In many Asian subgroups, there is a clear line separating professionals from paraprofessionals and blue-collar workers.[10]

Psychological Stress
There are several commonalities across most Asian culture groups. For example, both Hmong and other Asian youth and adults tend to feel a sense of isolation, alienation and identity conflict "due to their small size, lack of political power, physical appearance, skin color and passivity, as well as to the perceptions of them held by the majority population," [18] wrote Kim and colleagues. Another commonality is that these populations typically have low overall rates of drug and alcohol abuse, particularly for females. However, those who do use these substances are often heavy users. The rate of heavy users is close to standard American rates. In addition, the Hmong population struggles with the post-traumatic stresses of the war in Indochina, limited literacy and English proficiency, marginal employment opportunities, lack of affordable housing and the multiple stresses of adapting to a drastically different culture.

The Hmong have experienced a great deal of conflict in their resettlement in the United States. Their native culture is vastly different from American culture, making the acculturation process a difficult transition. Within one generation's time, the Hmong have moved from a slash-and-burn agricultural life in isolated mountain villages to high-tech urban residence in a country famous for its pop culture. Partly due to this inherent culture clash, and partly due to their historical fight for freedom and cultural identity, Hmong families have struggled to adapt to American culture while maintaining Hmong cultural values and beliefs.

In general, they place a high value on stoicism. While such values are admirable, they can also be barriers to help-seeking behaviors. For example, according to Berrol, traditional Hmong people tend to believe that "the length of a person's life is predetermined and life-saving health care is worthless."[42] They tend to deny the existence of problems, resist outside intervention and under-utilize social services. A good deal of personal and social shame and stigma is attached to mental health and other problems such as substance abuse. Yen summarizes, "The [Hmong and other] Asian family associates shame and stigma with the admission of mental illness within the family. Such a cultural view of mental illness reinforces denial rather than open admission of problems. The tendency toward denial extends not only to elders and authority figures within the [Hmong and other] community, but also to outsiders, namely physicians and counselors, who are viewed as authority figures."[10] It should also be noted that many Asian cultures generally prefer private to public meeting places.[18]

VIETNAM

Brief History

Prior to the 1970s, there were few Southeast Asians living in the United States. Following the fall of Saigon in 1975, the first wave of Vietnamese refugees flooded into this country. Approximately 130,000 Southeast Asian refugees arrived at this time. Most of these were Vietnamese from the urban, elite classes. A second wave of "boat people" began arriving in 1978. These refugees were poorer, less well educated and tended to come from agrarian areas. Most of these refugees came via their eligibility for the Orderly Departure Program, which allowed Vietnamese residing in the U.S. to bring immediate or distant relatives into the United States under family sponsorship. Once in the U.S., Vietnamese automatically qualified for a variety of social, economic and medical assistance programs offered by the federal government, as well as by some state and local governments.

By 1990, there were approximately 614,500 Vietnamese living in the United States. Professor Laura Uba from California State University, Northridge, notes, "Many had severe health problems attributable to starvation, abuse, injuries from hostile action, confinement and servitude in camps, inadequate health care during the war years and in camps, and the overcrowded, poverty-stricken circumstances in which many have been forced to live in this country."[44] Thirty-nine percent of Colorado's refugee population and 8% of the state's immigrant population is Vietnamese.[4] The U.S. 2000 Census recently recorded 14,886 Vietnamese residing in Colorado.[27]

There are two subcultures within the Vietnamese culture group that are worth noting. One is the ethnic Chinese-Vietnamese people whose "social, historical and political backgrounds and experiences are very different compared to the Vietnamese,"[45] reports Minh-Hoa Ta of the University of San Francisco. The other subculture is that of the Amerasians. Both of these groups have had the experience of being "twice a minority." They first suffered discrimination in Vietnam and subsequently suffer discrimination in the United States. Largely, this is due to historical factors and their mixed racial and ethnic backgrounds (including Asian, African, European and Latino). Amerasians, for instance, are known as "*doi-doi*" in Vietnam, meaning "children of the dust." They are considered children of prostitutes, half-breeds and are a constant reminder of the enemy of Vietnam. In the U.S., Amerasian youth have demonstrated high levels of maladjustment, poor academic performance and unusually aggressive behavior. This is thought to be related to the fact that many of their mothers were socially rejected and extremely poor in Vietnam. Many Amerasian youth were rendered homeless in Vietnam, received little formal education and learned to fend for themselves in a tough environment. They also lacked positive male role models.[46]

Family Relations

Family is said to be the most important social institution in Vietnam and is, to a large extent, based on Confucian ideology, which emphasizes solidarity, hierarchal relations and filial piety. According to Karen Pyke from the University of Florida, "Status distinctions guide the way in which members are to interact with one another. Younger members are expected to display respect, deference, and obedience to elders (including to older siblings, especially brothers), and wives are expected to show the same to their husbands and parents-in-law. Children, including adult offspring, are forbidden from expressing dissenting opinions or confronting parents, which is viewed as disrespectful. Emotional expressiveness, including displays of affection, is discouraged, while self-control is emphasized."[47]

Living in a culture that idealizes autonomy, conflicts commonly arise when young people openly assert themselves and challenge parental authority. Vietnamese youth tend to see their parents as overly strict and emotionally distant. "Public images of the 'normal American family' constitute an ideological

template that shapes respondents' familial perspectives and desires as new racial-ethnic Americans,"[47] reported Pyke. Overall, Southeast Asian immigrant and refugee families continue their struggle to find balance between dueling cultural norms. "On the one hand is the centrality of family structure, hierarchy and filial piety taught by Confucian philosophy. On the other hand is the acceptance of fate and the values of bending with the winds of change and survival taught through Buddhist religious beliefs. Although in some ways these two philosophies may appear contradictory, they might also be seen as fostering a continuing and useful dialectical process between generations in which they can address fundamental values in the dramatically altered contexts of their lives,"[48] wrote professor Daniel Detzner, director of the Refugee Studies Center, University of Minnesota.

Women

Many Confucian patriarchal norms have transferred to the United States with respect to the role of women as well. Foner reports that "American notions about the equality of men and women and acceptance of women who smoke, drink beer and wear 'clothes that show their bodies' challenges Vietnamese norms of feminine behavior and gender relations."[16] Nevertheless, many households have become less patriarchal and more egalitarian as women obtain access to broader social and economic resources.

Social Networks

Despite gender and generational difficulties, the Vietnamese extended family remains a valuable source of support throughout the migration and acculturation process. Kinship networks provide economic, social and emotional support to newly arriving Vietnamese. Those who came in the second wave (leaving Vietnam from 1978 on) have had to rely more heavily on family networks since community organizations were more readily available to assist immigrants of the first wave than they are now.

Several studies have shown that Vietnamese refugees are less likely to participate in their broader ethnic social networks than are other refugees from Southeast Asia and elsewhere. It has also been found, however, that elderly Vietnamese who participate in these networks to a greater degree were more content than those who do not.[43] This is an important finding since it has also been determined that elderly Vietnamese with the most pre-arrival trauma are the least well adjusted of this migrant group. Interestingly, this same study found that the relationship between age and ethnic networks was inversely related to subjective adaptation. Unlike the elderly, youth and younger adults with relatively less involvement with ethnic social networks were more satisfied with their new life.

Education and Employment

In general, Vietnamese have benefited from a broad range of government assistance packages compared to other culture groups, largely due to the United States' involvement in the Vietnam War. Their eligibility for cash assistance and medical benefits has also required them to take English language classes and enroll in job training programs.

Physical Health

Southeast Asian refugees typically under-use the American health care system though they experience a variety of health problems related to physical trauma, poor healthcare in their native countries and low socioeconomic levels in the United States. Cultural explanations for this low rate of help-seeking behavior include divergent beliefs about sources of illness, as well as appropriate forms of treatment. "Many Southeast Asians are reticent to seek health services because of their cultural attitudes about the nature of life and the inevitability of suffering. Instead of seeing suffering as an aberrational health condition requiring improvement, many Southeast Asians see some suffering and illness as an

unavoidable part of life,"[44] reported Uba. According to Southeast Asian cultural beliefs, illnesses may be seen as resulting from an imbalance of yin and yang, a blockage of the life energy known as "chi," a failure to be in harmony with nature, a spiritual curse or punishment for immoral behavior. Meanwhile, many Southeast Asians are unfamiliar and distrustful of Western medicinal techniques. Western health care providers in turn lack knowledge of Asian cultural beliefs. Uba continues, "Culturally irrelevant services or misinterpretation of side effects of Southeast Asian folk medicines" is a common result of such misunderstanding.[44] For example, folk medicine treatments may leave marks on the body that can be misinterpreted as signs of abuse.

Communication Style
It is possible that due to respect for authority, desire to be polite and a wish to avoid embarrassment, Southeast Asians will not ask questions, voice concerns and may indicate a willingness to follow service provider recommendations, though in fact they have no intention of doing so.

Psychological Stress
"While in some respects the Vietnamese population has adapted surprisingly well overall to life in the United States, it is also a community with high rates of depression, anxiety, post-traumatic stress disorder and somatic symptomatology [e.g. physical symptoms that are psychologically based]," [49] reported Professors Johanna Shapiro and Olivia de la Rocha from University of California, Irvine, Kaaren Douglas, M.D., of Motion Picture and Television Fund, and colleagues.

When three generations of Vietnamese immigrants were compared, Shapiro and colleagues found the youth to be the most acculturated, healthy and least depressed. They also, however, report the most dissatisfaction with their lives in the U.S., and are continually caught in the clash between two cultures. Middle-aged adults experienced the worst of the Vietnam War and suffer lingering effects of direct involvement in the conflict, confinement in "re-education camps" and long separations from family. Elderly Vietnamese meanwhile have difficulty mastering a new language, skills needed for daily living and radically differing social norms.[49] Shapiro and associates write, "Elders in this category are coping with an overwhelming number of non-normative losses. Perhaps most difficult is the loss of the honored position within families. Though elders continue many functional roles in families, they no longer have important status roles as economic provider, sage, family head and moral leader because their experience is perceived by the young as not relevant in the American context."[48]

AFRICA

Recent refugees from the African continent are escaping the violence of war intensified by religious beliefs and differences in social class. These characteristics and the U.S. attitudes toward native African-Americans affect their acculturation process.

SOMALIA

Brief History
Somalia is a rural nation in Eastern Africa. Most of its people (80%) are farmers, raise sheep, goats, cattle or camels. A revolt against the Somali government began in 1988 and a full-scale civil war broke out in 1991. As a result of this domestic conflict approximately 400,000 Somalis were killed and nearly half-a-million more fled their homeland, many of whom were severely traumatized. The United States has accepted thousands of these refugees inside its borders. The first Somalis who resettled in the U.S. were

wealthy and well educated, while later refugees have come primarily from middle- and lower-class backgrounds. An important part of the Somali national identity is that they are predominantly Sunni Muslims.[50]

Social Networks
The Somali family unit is central to their cultural identity. Filan Darman, Elani Getachew, Dahir Jabreel and other colleagues from the Center for Multicultural Human Services in Falls Church, Virginia, note: "The importance of family is reflected in the common Somali question, 'Tol maa tahay?' (What is your lineage?). When Somalis meet, they ask, 'Whom are you from?' rather than 'Where are you from?' Genealogy is to Somalis what a birthplace is to Americans."[50]

Family Relations
Both Somali men and women are traditionally highly respected as elders. The oldest man in the family makes decisions even for his adult sons. Females, meanwhile, are raised to obey all males in the family, including their older brothers. Family size is typically large with each couple having between five and ten children.

Social Identity
For African immigrants and refugees in particular, a sense of community in embedded deep within their sense of self. Jacqueline Butler, president of African American Parents for Drug Prevention writes that this is sometimes referred to as the "extended self."[51] According to Hugo Kamya of Boston College, "An African's identity is found in the community's identity. Individuals are viewed as a part of or an extension of the environment because of the belief that everything is functionally connected. Self is viewed as interdependence and relationship. There is an integrated sacred and secular reality that is fused into a harmonious, cooperative and communal orientation."[11]

Many refugees and immigrants experience serious conflict in attempting to redefine their self-identity. This may be particularly true of Africans as they struggle within a society that frequently exhibits racist tendencies, projects unfamiliar stereotypes of African Americans onto African immigrants and where other ethnic minority groups consistently discriminate against them. According to Kamya, "African immigrants in the United States may see themselves as black people, immigrants or distinct ethnic groups. These levels are compounded by African immigrants' own self-perception, the immediate host community's (African Americans') perception and the general ordering of forces within the larger host community."[11]

Discrimination
Ethnic awareness of immigrants and refugees depends in part on whether they perceive inequality in their status as newcomers in a host country and/or as a minority in racial and ethnic terms. Kamya concluded that "although immigrant energy and labor fuel the economy, each wave of arrivals is greeted with skepticism. The benefits of immigration are recognized only in retrospect. For African immigrants, this ambivalence has been compounded by the legacy of racism and oppression."[11] For years, the media has spurred negative stereotypes of Africa leading to misunderstanding and the devaluing of African immigrants. The same holds true in varying degrees for other Euro-American groups.

Education and Employment
Education in Somalia begins with several years of religious teachings before children enter regular school. Most university courses are taught in either Italian or English.

One way in which overall discrimination manifests itself can be seen in the significantly lower returns on education that are experienced by many African immigrants.[52] Professor Kristin Butcher of Virginia Polytechnic Institute found that "on average, black immigrants from Africa have completed 15.7 years of schooling – or the equivalent of 3.7 years of college. A higher percentage of the Africans (53.3%) than any other group, including the white natives and white immigrants, are college graduates and have attended some graduate school. The African immigrants, however, have the lowest earnings; they also have the lowest probability of having been employed in the previous year (66%)."[53] Therefore, they have one of the largest status inconsistencies – a gap between their experiences and education in their former country and their current employment in the U.S. – of any of the groups.

Women

In general, an African female is "encumbered by four strikes – race, immigrant status, gender and national (African) origin – interacting to place her at the bottom of the American stratification ladder,"[52] concluded Dr. F. Nil-Amoo Dodoo of Vanderbilt University. Somali women additionally have difficulty becoming acculturated in the United States for a number of other reasons. In families, men are the primary authority and decisionmakers, while women take care of the home and children. Somali women also frequently work outside of the home, though most women, especially in the older generations, have no formal education, "as it was not considered proper for a good Muslim girl to go to school with boys,"[50] wrote Darman and colleagues.

Another area of concern for Somalis surrounds the issue of female circumcision as it relates to relocation to the United States. This issue presents both psychological and medical concerns for Somali refugees, and also creates barriers to reproductive health care in the United States. Dr. Mary Ann Gali from the Wright Institute reported that "circumcised immigrants are at risk for receiving poor medical treatment in western cultures because of the lack of knowledge of this procedure on overall reproductive health. Of particular concern are the psychological effects of utilizing services within a system which socially, morally and medically pathologizes a specific population."[54] Changing cultural identity and gender roles in the pull between assimilation and traditional family expectations further complicates the issue. Migrant women who are circumcised "must first confront our uneasiness around their roles as women before they have room to explore their own personal feelings as immigrants and circumcised women,"[54] concluded Dr. Gali. The practice of female circumcision is also widespread in Sudan, Ethiopia, Eritrea and Egypt.

War Trauma

Civil war in Somalia pit clan against clan, neighbor against neighbor. The traumatization that many Somali people experienced was severe. For example, Somali custom dictates female circumcision in order to keep women pure until marriage. When women were raped, this experience was not only extremely painful, but also rendered them permanently "unclean" and unfit for marriage. As Somalis talk about fleeing their country they describe "a second hell" where many children died and family members were frequently separated. Refugee camps in Kenya and Ethiopia lacked food, medical care or security. "Women and girls were often sexually and physically assaulted when they went in search of necessities such as food, water and firewood,"[50] reported Darman and colleagues.

Communication Style

Somali values include a respect for strength, honor, loyalty, dignity and pride. They also believe in independence, individualism and democracy.[50] However, Darman and colleagues state that "Somalis do not express their appreciation verbally, which sometimes leads Westerners to feel that their efforts are not appreciated."[50]

When asked how they are doing, most Somalis will say they are fine, even if they are not. They also will tend to define their difficulties in physical terms, complaining of headaches, stomach upsets, fatigue, etc. This tendency to protect and isolate psychological problems hinders Somalis from accessing services that could potentially help them. Darman and colleagues suggest, "However, if you ask questions tactfully and with empathy, Somali people will often tell you more about their problems. In spite of all they have been through, Somalis are basically a trusting, open, caring people." [50]

Psychological Stress

After surviving the horrors of civil war and abysmal refugee camp conditions, Somalis face further challenges as they attempt to readjust to their new lives in the United States. A variety of stress factors they may face include lack of English skills, limited employment opportunities, need for affordable housing, lack of health care coverage, social isolation, worry about missing family members, academic problems, cultural conflicts in acceptable disciplining of children, discrimination based on race and other aspects of their being such as traditional clothing and religion.[50]

Somalis generally do not admit to serious psychological problems and family members with mental illness are usually kept at home. Partly this is due to their strong religious belief that whatever happens to them is the will of Allah, which should not be questioned. Psychotherapy is non-existent in Somalia and personal difficulties are usually discussed only within family units.

SUDAN

Brief History

In 1987, fighting broke out in Sudan between the Islamic government in the north and Christian and animist rebels of the south. This conflict has been in large part a religious war with light-skinned Arabs fighting dark-skinned Africans. It has also been a war over Sudan's undeveloped oil fields and arable land. Caught between the warring factions are the Dinka and Nuer tribes, whose villages and people have been deliberately decimated. It has been estimated that due to a combination of civil war, famine and disease, more than two million Sudanese have died, and another four million have been displaced. The war in southern Sudan can be counted as one of the last century's most brutal wars due to the systematic violence and destruction in.[55]

A unique group of Sudanese refugees are known as the Lost Boys. Sara Corbett, a reporter for *The New York Times Magazine,* wrote: "As government troops cut a swath through southern Sudan, reportedly killing the adults and taking girls as slaves, scattered groups of surviving boys, suddenly orphaned, were discovered by the rebel army and pointed toward Ethiopia."[55] This culture group consists of approximately 10,000 individuals (mostly parentless, homeless boys between the ages of 8 and 18) who fled the civil war and crossed some 1,000 miles from Sudan to Ethiopia, Ethiopia back to Sudan and then to refugee camps in Kenya. While on this long voyage, the children encountered attacks from the army, bandits, lions and crocodiles. Many also died of starvation and thirst, or drowned while attempting to cross the Gilo River in Ethiopia. Originally, there were approximately 17,000 youth in this group, yet by the time they began entering the Kakuma Refugee Camp in Kenya in 1992, nearly half of them had died. Corbett noted that "various psychologists documented the group's extreme exposure to violence and death: as many as 74% of the boys survived shelling or air bombardment, 85% saw someone die from starvation, 92% said they were shot at and 97% witnessed a killing." The Lost Boys have thus been described by Corbett as "among the most badly war-traumatized children ever examined."[55]

In 1999, it was decided that about 3,600 Lost Boys should be resettled in the United States, thus constituting the largest group of unaccompanied refugee children ever to migrate to this country. About 500 of these children were placed in foster homes and apartments across the U.S. The remaining 3,100 were resettled as adults with initial cash assistance from the federal government.

Other Sudanese immigrants and refugees fall into different categories. They tend to be aged 30 to 39 and are typically college graduates who were professionals in Sudan, though many now work in the service sector. Abusharaf writes, "Although many migrated for political reasons, educational pursuit remains significant, especially for Northern Sudanese; women often cite spouse accompaniment [e.g., following her husband]"[56] as the reasons they moved. Currently, approximately 2% of Colorado's refugee population is from Sudan.[4]

Family Relations

For Lost Boys destined for foster care, an effort to keep the boys in "family groups" of five or more, which they developed by sharing huts in Kakuma Refugee Camp, has proven difficult to fulfill. In addition, this group of children is unique in that they have governed themselves for many years and are accustomed to their independence. Beyond the typical tendency of adolescents to yearn for greater freedom, these boys are unusually resistant to restrictions. There have therefore been frequent reports of conflicts between foster parents and the Sudanese boys, as well as between these boys and other children in the household.

For those who are meant to live on their own, government assistance may be inadequate. In Corbett's article, three brothers living together said they received $107 in food stamps and $510 in cash for rent and utilities each month. "We are not eating enough here . . . my brothers are suffering" said one of the boys.[55] In addition, service providers fear that after the initial euphoria of arriving in the U.S. wears off, post-traumatic stress symptoms will manifest.

Psychological Stress

While the Lost Boys have received much media attention, historically, limited attention has been given to African refugees and immigrants, despite the fact that they are a particularly vulnerable population. A host of challenges confronts this particular group of refugees as they attempt to resettle in the United States. One of these is race. As with all black African immigrants and refugees, race is an undeniable component of their experience that will be troublesome in any racist society. Kamya reports, "Some researchers have referred to this as the 'double invisibility' African immigrants experience because of their race and their origin." Others have noted tensions even between native Africans and African-Americans who often see the former as receiving special treatment that they themselves do not enjoy.[11]

For the Lost Boys, it is assumed that as time goes by, there will be a growing feeling of isolation that will develop in this population as there are few people in this country that understand their particular circumstances. Nevertheless, this culture group also shows healthy signs of resilience. Overall, the Lost Boys of Sudan are reasonably well educated and speak surprisingly good English due to rigorous schooling provided for them in the Kakuma Refugee Camp. The also have a strong sense of communion amongst themselves, one which has already supported them through the worst of times. In addition, they have the vitality and fundamental flexibility that their youthful age offers them.[55]

IMPLICATIONS FOR CONDUCTING RESEARCH AND EVALUATION

Although there are many definitions of cultural competency, the following comprehensive definition is provided by Professors T.L. Cross, K. Dennis, B.J. Bazion and MR Isaacs from Georgetown University. "Cultural competence is a set of congruent behaviors, attitudes and policies that come together in a group of people to work effectively in cross-cultural situations such as an evaluation of programs and services provided to immigrants and refugees. The word 'culture' is the integrated pattern of learned human behavior that includes thoughts, communications, actions, customs, beliefs, values and institutions of a social group. The word 'competence' implies having the capacity to function effectively. A culturally competent system of evaluation incorporates – at all levels – the importance of culture, the assessment of particular cross-cultural relations, vigilance regarding the dynamics that result from cultural differences, the expansion of cultural knowledge and the adaptation of services to meet culturally unique needs and processes."[57]

ACCOUNTING FOR EXPERIENTIAL ELEMENTS

Understanding Cultural Variations

Cultural competency begins with an understanding of cultural variations between and among different racial and ethnic populations, including history, traditional beliefs and values, language proficiency, reasons for immigration and migration patterns. "The cultural understandings, meanings and symbols that immigrants bring with them from their home societies are so critical in understanding immigrant family life,"[16] wrote Foner.

In addition, a culturally competent evaluator must gain an understanding of the relevant psychosocial stressors and traumas of the target population, including war trauma, voyage trauma, unique aspects of cultural survival and maintenance, socioeconomic status, ethnic and racial discrimination, gender and intergenerational conflict within families and other struggles in adapting culturally-based belief systems through the process of acculturation.

In conducting evaluations of service programs, particularly those dealing with mental health issues, researchers must also access knowledge about differences in symptom expression, thresholds of psychiatric distress, attributions of mental illness to religious or supernatural forces, use of indigenous healing practices, nuances of verbal and nonverbal language, levels of stigma attached to personal problems specific to culture groups, acceptability of various types of communication and conduct, and help-seeking behaviors.

Receiving Context

Immigration itself is a stressor and may significantly contribute to adjustment problems as pressure is placed on families, including displacement, culture clash, family dysfunction, economic strain and various forms of discrimination. The way immigrants and refugees are first received in the U.S. is vitally important to the positive adjustment of immigrants and refugees no matter what their country of origin, though this process will vary for different culture groups. Forces such as local economic opportunities, political and legal frameworks and resources in the social community determine to a great degree how well immigrants and refugees will adjust to their new circumstances.

BUILDING TRUST

Perceived Threats

In working with different culture groups, there may be serious resistance to outside intervention and what is seen as obtrusive meddling into personal and family affairs. There may also be outright distrust of the evaluators themselves. When cultural barriers exist, a researcher may be seen as a potential threat to individuals, to communities or to the organizations that serve them. There may also be a general distrust based on fear of sharing sensitive information, particularly if someone in the respondent's family is undocumented or has had disturbing war trauma experiences.[12] Lipson and Meleis reported that "in some cases, such distrust is engendered by research studies that negatively stereotyped immigrants or represented them as being marginal people who have higher rates of maladjustment or mental illness than the general public. There is also much justifiable paranoia because of expired visitors' visas and the fear that undocumented relatives may be found during the interview and possibly deported. Strong political schisms, particularly among recent immigrants whose countries are torn by political problems and war also foster distrust of strangers."[23]

Other immigrant and refugee groups may previously have had experiences with journalists conducting "research," which later amounted to "sensationalized publicity."[58]

Past experiences, such as those of Middle Easterners, where "neutral researchers" were actually investigative arms of the government or other powerful institutions[23] also affect trust. These collaborative relationships between societal organizations are not unusual in some Latin American countries as well.

In other cases, potential respondents felt uncomfortable being seen living in marginal conditions, or were not confident about their English-speaking ability.[58] Additionally, Dr. J. Manuel Casas of Stanford University comments that other communities have felt used by researchers who "enter ethnic/racial communities, collect their data and then leave without ever taking any pragmatic feedback about their findings and, more important, without ever taking any visible actions based on their findings to benefit these communities substantively."[12] This response is common in native communities of color as well. These experiences have created a situation where "outside" researchers and evaluators are mistrusted.

Clarifying Process and Purpose of the Evaluation

A thorough and careful explanation of research techniques and intentions will alleviate some of the potential fears and complications that may hinder the process and outcome of an evaluation. Through a combination of personal contact and introductory letters, participants in the study should be clearly informed of the nature and purpose of the study. Participants should also be told who sponsors the work, who the researcher is and how to contact that individual if they have questions or concerns. Throughout the process, participants should also be continually assured of the confidentiality of their responses.[14] It may behoove evaluators to refer to themselves as "service support providers" as opposed to the "evaluation team."[12]

One reason to clarify the value and purpose of evaluation is that community members may not understand why precious resources are being spent on evaluation rather than on program services. Casas explained, "Evaluators must understand and respect this perspective [and], at the same time, be prepared to explain their role non-defensively. Such an explanation should emphasize, with a great deal of specificity and examples, what a comprehensive evaluation process can do to help make the program more cost-effective while also helping to increase the probability of attaining desired outcome objectives

and, in turn, increasing the likelihood of maintaining current funding and obtaining future funding for the program."[12]

Involving Community Members

Researchers will need to form positive relationships with community leaders in order to gain access to information and resources, as well as to help develop a clearer understanding of key issues affecting that particular community. Grace suggested that "some analysis of the formal and informal leadership both within and outside of the community-based organization could be very useful."[9] Evaluators should be aware that the true community leaders may not be easy to identify and that individuals recommended by a given organization may not be those that are regarded as the community leaders by the majority of the local community.

Leaders – Involving community leaders may be a several stage process, including identifying and contacting appropriate individuals, convincing them to support the study and having them disseminate information about the study throughout the community. Community leaders might include heads of local service agencies, religious leaders, merchants, teachers and school administrators, medical personnel, social workers or local public officials.[59] Professor Regina Pernice from Massey University, New Zealand comments that, "once the leaders have been approached, the researcher needs to acknowledge that he or she is requesting favors from the community and therefore is in no position to set the agenda as to how the research should proceed."[58] It is possible that community leaders will have unrealistic expectations, assuming the research will provide immediate tangible benefits to the community or to individual community members. It may therefore be necessary to hold several meetings to clarify the process, intent and progress of the study. In addition, community leaders will likely expect such conversations to continue beyond the data collection phase. "This requires that the researcher not only send out the final conventional statement of results (in a popular [e.g., reader friendly] form) but be available in person to each community to be questioned or challenged and to demonstrate that the research has been or will be of some benefit or interest to the community,"[58] suggested Pernice.

Program Staff – Likewise, evaluators should strive to involve program staff in meaningful ways so as to develop trusting and mutually beneficial relationships. Evaluators may encounter resistance from program personnel, clients or both. This may reflect a negative view of evaluators, territoriality and/or various kinds of fear such as the fear of "losing face" if the program does not succeed, or a fear of deportation on the part of clients. Evaluators will also need to clarify how the evaluation will benefit rather than harm the organization, its staff and its clients. Program personnel can be asked to serve as co-evaluators in the effort to determine the program's strengths and needs (i.e., versus weaknesses).[10]

Advisory Board – An advisory board composed of members who are representative of the target community should be involved in framing the questions and interpreting the data in order to develop a better understanding of the cultural norms, values and behavior codes that are embedded in the responses of a particular culture group.[9] It is further suggested that advisory boards represent a range of community members including, for example, agencies, businesses, parents and adolescents.[12] Authority figures from within the culture group, such as clergy, elders and traditional medicine men may prove to be a valuable resource for evaluators as well.[10] Yen advises that, "If the community sees that its own concerns are driving the evaluation effort, it will be more willing to participate in the research process. Moreover, when the community feels the evaluation is addressing its needs, it will be more willing to apply the results of the evaluation."[10]

In an effort to create more cooperative and collaborative relationships, evaluators may also need to participate in nontraditional ways such as attending community events. Yen suggests that evaluators plan on spending additional time "doing the legwork of gaining entry to schools, clubs and community organizations of talking to people in the community and of gaining the trust of the community. This can only be accomplished by demonstrating a knowledge of the ways of the people being served and a willingness to continue that learning process."[10] Most importantly, evaluators must demonstrate respect for respondents' heritage, immigration and acculturation experiences. "Establishing rapport depends on the interviewer being considered a trustworthy and courteous person who knows how to behave. Trust in encouraged when both the interview guide and the interviewer are culturally sensitive,"[23] concluded Lipson and Meleis. Overall, access to information and resources will be limited when trust is lacking.

Confidentiality

Confidentiality is often a new idea for immigrants and refugees. Some of their histories are filled with broken trust and ravaged relationships, as demonstrated by the experiences of refugees from Bosnia-Herzegovina. Others have experienced small communities where lives are scrutinized constantly. This may continue to be an aspect of their life in the United States.

Undocumented immigrants provide a particular challenge to researchers as they are in constant fear of deportation. Evaluators must therefore discretely and informally obtain information on an immigrant's legal status, or not look for it at all. Accessing this information will provide a better understanding of the prevailing stressors that an individual or family experiences. Yet, since a court could legally subpoena research materials, the interviewer should warn the interviewee *not* to share information that may be considered illegal in the United States. An obvious example is whether or not the person is in the country with legal documents. However, other issues may also arise that could imperil the ability of the immigrant or refugee to stay in the country. If legally sensitive information is shared with interviewers during the course of an interview, transcribers-translators should be directed *not* to transcribe this information.

Using community leaders to explain the concept of confidentiality may be beneficial. Pernice found that "people were not prepared to accept even the most persistent interviewers' assurances of confidentiality. The most important assurance was not what was written in the questionnaire but the one given by the leader who interpreted and explained the research to the people. If they trusted their community leader, they were prepared to participate."[58]

It should also be made clear to prospective respondents that their participation is voluntary and that deciding not to participate will not affect their services. This agreement must also be made with the providing agency.

Another way confidentiality can be protected is by using interviewers and translators who are not from local immigrant or refugee communities. "Respondents who would not hesitate to disclose information to an unfamiliar professional interviewer if anonymity is assured can be expected to refuse when the interpreter is an acquaintance or friend from the neighborhood or is a well-known leader of the community,"[58] reported Pernice. It is also possible that an interpreter from the same culture group will filter what is said through their own emotional, intellectual and spiritual lens. It is suggested that evaluators meet with interpreters and interviewers before and after interviews in order to minimize distortions.[58] This poses a challenge since information is more openly shared with interviewers who communicate in the refugee or immigrant language and share some of their experiences.

However, no matter who the interviewers are, they should be carefully trained about what *not* to ask about, what to do when legally sensitive issues surface and to not talk with anyone outside the research team about their findings. All members of the evaluation team should be prepared to repeatedly and consistently explain the importance and meaning of confidentiality in ways that are comfortable for those providing the information.

MEETING PARTICIPANT NEEDS

When preparing to gather information in an immigrant or refugee community, it is critical to use the appropriate community-based communication channels to let the community know about the research, why it is being conducted and who the sponsor is. In some communities, such as the Vietnamese, it is important to stress the credentials of the people involved in the effort, while in other communities the common background experiences are more important.

Invitations

For many immigrant and refugee populations, formal letters requesting participation for a meeting or interview are inappropriate because this is an unfamiliar form of communication. Such requests made in person, by a trusted local person especially, will be far more effective. At minimum, a letter or written announcement should be followed by a phone call.[18]

Food and Refreshments

Food and refreshments play an important role in social gatherings. Providing these at meetings outside of the home will not only be culturally appropriate, but will likely facilitate the data collection process. Similarly, it is important for researchers to accept offers of food and refreshments from participants. In some cultures, the sharing of food and drink connotes trust. In Arabic, for example, there is a phrase "we ate bread and salt together," which means that one would not hurt someone with whom one ate. "There are few acceptable excuses for refusing such hospitality,"[23] reported Lipson and Meleis.

Transportation and Childcare

When meetings are held outside of the home, it may also be necessary to provide transportation, childcare or reimbursement for such costs. It should be noted that many culture groups are accustomed to bringing their children with them to such semi-formal meetings.[18] The researchers should be prepared to care for the children's needs as well as for those of other family members.

Compensation

Ideally, participants should be paid for the time they give to evaluation activities. This may be particularly important since the concept of evaluation is foreign to many immigrant and refugee groups. Many of these people will therefore not participate just to "add to the body of knowledge. But [many] do have respect for a job, and they will do the best they can if they are paid to do the task,"[18] concluded Kim and colleagues.

Time

Concepts of time and corresponding modes of behavior are culturally distinct. Evaluators should therefore be aware of such distinctions and be flexible and patient. "Conflicts of time are avoided when community members and program staff join outside evaluators in deciding when the evaluation or certain evaluation activities should take place,"[9] suggested Grace. In general, it is wise to allow time for arrival and social interaction prior to beginning scheduled activities.

Reciprocity
For some culture groups, the concept of reciprocity, particularly if they are not paid for their participation, may result in concrete requests for assistance. Examples of such requests range from simple advice or letters of recommendation, to help in finding employment. Furthermore, for some cultures, such as for Middle Easterners, requests for reciprocity symbolize trust and a desire for a more meaningful relationship. Lipson and Meleis found that "after some informants shared parts of their private lives, the interviewer was 'admitted' to the realm of the extended family/friends network, of whom it is appropriate to ask favors."[23] One can use the concept of reciprocity to gain access to cultural group members by setting up a structure that provides for this, such as providing health-screening services at a local agency. Such activities help increase the visibility and enhance the reputation of the research team.

Feedback to the Community
Another way the researcher can reciprocate to participants for providing evaluation data, is to give feedback to the providing agency and community in a culturally appropriate manner. This is also a way of validating the researcher's interpretation of the data, particularly as the data are affected by cultural elements.

The challenges inherent in this process are:

- Protecting the confidentiality of those providing the data. This is a key concern ethically for "doing no harm" and is a foundational principle of research.[60]
- Accepting multiple interpretations. While field validation is very important, the data interpretation given by researchers tends to be more abstract than interpretations given by community members. Sometimes community members feel that their reality becomes "objectified" and are uncomfortable with that. Therefore, the researcher must carefully explain the differences in viewpoints when presenting the material to the community and stress how the community might use the information for their own purposes.
- Additionally, careful attention and negotiated agreements will need to be made regarding the power of community members to modify the research findings.

These issues must be considered in following the suggestion that information about evaluation outcomes should be easily accessible to the target community.[9]

EVALUATOR QUALITIES

In social research, particularly in the data-gathering phase, the characteristics of the researchers are important. In particular, the interviewers themselves become a tool of the evaluation process. Therefore, they need to be carefully selected and trained.

Personality Characteristics
Personality characteristics of individuals who work well with immigrant and refugee populations include genuine open-mindedness, cultural empathy, good communication skills and having minimal levels of prejudice or ethnocentrism.[58] "The evaluator may be perceived as patronizing or racist if he or she either verbally or behaviorally expresses attitudes that are inconsistent with the culture of the community,"[9] warns Grace. Furthermore, Uba contends that "poor communication may be worsened by culturally insensitive behaviors that unintentionally insult or frighten"[44] the individual.

Crosscultural Experience
Culturally competent evaluation begins with culturally competent evaluators. Ideally, this involves individuals with both advanced academic training and intense personal experience in working with issues of culture, the interface between two or more cultures and the experience of operating in the environment of a culture that is not one's culture of origin.

Direct personal experience in one or more cultures that are different from one's culture of origin permits immersion into every aspect of the culture: language, religion, education, politics, the home, health practices – in short, every conceivable realm of human activity relevant to that culture. There is virtually no substitute for what these types of experiences provide in knowledge and appreciation of culture and for the self-knowledge of one's place in culture.

Reflecting the Target Population
Efforts should be made to find people whose identity (i.e., racial, ethnic, gender, age, etc.) is reflective of the target culture group. Universities are a potential source of culturally appropriate students from selected departments such as sociology, anthropology or education. Evaluators should also consider hiring individuals who are respected and trusted members of the target communities. In addition, older individuals should be considered since many culture groups traditionally hold the elderly in high esteem.[12]

Sharing the same background is important when talking about refugee and immigrant specific information. In many instances, an immigrant or refugee will only express these experiences to an interviewer of the same background. On the other hand, sometimes a participant may be more open and honest with a researcher who does not share the same heritage, especially when discussing topics that might reflect poorly on the respondent's family or clan. In this case, participants may trust that the outside evaluator is objective and will hold personal information in confidence, while they may fear that someone from within the same culture group would gossip.[23]

Since the influence of the interviewer's characteristics varies by age, gender, culture group and topic sensitivities, the evaluators will need to assess all of these issues in selecting the best possible research team.

Gender Issues
Norms around gender issues and what types of issues are discussed between genders may warrant the use of gender specific interviewers, or may require that male-female pairs of interviewers conduct family interviews. In some cultures, such as some Asian and Middle Eastern groups, any form of physical contact between members of the opposite sex, including handshakes, is seen as a sexual advance.[18] Since this is a common greeting in the U.S., evaluators need to be especially sensitive to its cultural appropriateness.

Another area requiring gender sensitivity is with issues about gender relationships within families' and women's experiences. The dominant traditional expectations in the culture groups examined in this review are that women are subordinate to men. Therefore, it is important for evaluators to first address a male in the family. Engaging elderly, especially elderly males, may also be necessary in order to access information about the rest of the family. Failure to follow these traditional guidelines may seriously restrict the data gathering process.[18] On the other hand, it has been documented that by dealing predominantly with the adult male representatives of the household, researchers and providers often overlook the needs of women, children and the elderly.[8]

One of the stressors immigrants and refugees experience in the U.S. is that male authority is eroded by the types of available jobs for men and women and by the changes in gender-based and intergenerational relations. Additionally, rates of single female parent households are increasing. Other stressful factors include female circumcision, other gender-specific traditions and war-based experiences such as rape. Given traditional cultural values, however, immigrant and refugee women will rarely discuss these issues, particularly with male interviewers. Additionally, values of "saving face" and "public presentation of self" will make it difficult for male refugees and immigrants to talk openly about these issues. The possibility of open conversations between women and male interviewers is further reduced by cultural beliefs that men and women should not be in a room alone, or that women should not interact with men or be in public without a male family member being present.

Language
While the use of native language speakers is critical to the success of any evaluation, this is most true with older immigrants and refugees. Attention should be paid to dialectic variances as well. Yen observed, "Reliance on spoken and written regional variations of the native language may be more evident in older generations than in younger generations with more formal education."[10] Native languages better express the refugees' and immigrants' experiences.

EVALUATION DESIGN

Methodology
Literature-based information on culture groups should be used judiciously as commonalities and differences will vary from one community to another. Evaluators should be careful not to over-generalize, and instead plan to take the time to research the unique characteristics of the specific community.[12] For instance, evaluators should determine whether the target population is composed primarily of first or later-generation immigrants. Other subtleties may also be of consequence, for example, whether a refugee family from Laos is Buddhist or Christian.

Because of the uniqueness of specific communities, it may be difficult to find appropriate control groups for outcome evaluation. Evaluations may need to be based on single-system evaluation designs, which do not need control groups. Longitudinal studies with baselines and outcomes over time may be the better design for measuring change. Evaluators may also "estimate the expected changes in the pre- and post-test scores based on a meta-analytic review of existing literature along the attitudinal and behavioral measurements that are used with similar groups in the target population and with the similar scale or measurement used in the program being implemented,"[18] said Kim and colleagues. As in other research, units of analysis may include individuals, families, households and communities as the basis for explanation and prediction[61] depending on the programs being assessed.

Sampling
Sampling strategies for refugee and immigrant groups need to address the same issues as when working with other specialized populations. Some of these issues include:

1) Lack of population listings
2) Scattered places of residence
3) High mobility with no forwarding addresses
4) For some, no telephones, driver's license or social security identification cards.

These issues make it difficult for researchers to develop a true representative sample of refugee and immigrant populations.

Traditional methods will be particularly inappropriate for finding undocumented individuals to work with.[59] Because immigrants and refugees may not live in identifiable ethnic communities, significant effort will be needed to create an adequate population listing. If immigrants and refugees cluster in ethnic enclaves, there may be a greater chance of finding available lists of names and addresses to piece together.

Aside from using lists provided by local service agencies, another way of finding potential study participants is to look for them in their natural social settings such as in certain restaurants and bars, churches, community health clinics, workplaces and union halls, English as a Second Language classes or in apartment complexes where high concentrations of the target population live.[59]

In light of the above challenges, another technique that has proved useful for Wayne Cornelius of University of California San Diego to gain access to undocumented individuals is the "snowball method."[59] The snowball method requires that "each successful interview is done with a relative or friend of a previous interviewee, who has provided the interviewer with appropriate introductions and assistance in making contact with other members of his social network."[59] This technique takes advantage of the natural social networks that many culture groups develop in this country. Having one person within this network refer the evaluator to another immigrant also transfers the trust and credibility of the evaluator from one study participant to another and keeps refusal rates low. Another advantage of this strategy is that it is cost effective.[59,23]

One drawback of this method is that it may not accurately reflect the overall characteristics of the population. Another is that even here there may be difficulties in reaching people because immigrant and refugee populations tend to have a high rate of mobility. "It is not unusual, especially for unattached individuals, who constitute a sizable portion of the population, to move at least eight times per year. In addition, most of the refugees had moved without leaving a forwarding address,"[58] reported Pernice. Another difficulty is that official statistics may easily misrepresent a population's characteristics by undercounting individuals, while subjective estimates offered by community leaders tend to overestimate these numbers.

KEY RESEARCH QUESTIONS

Measurement Issues

Evaluators must first determine the appropriate measures of program performance given the socio-cultural circumstances of a particular population being studied. "To be culturally sensitive, evaluators need to look at the practices, attitudes, knowledge, skills and aspirations of the target population before deciding on potential indicators of program success,"[18] said Kim and colleagues. These will be influenced by the level of acculturation of the refugees and immigrants served by the program.

Acculturation – Acculturation is a very complex, yet important concept which affects the outcomes of a program's services. Some of the factors influencing the path of acculturation are, for example, similarity or dissimilarity between the originating and host cultures, level of education and skills, gender, age, marital status, language ability, size of municipality of residence, race and ethnicity, socio-cultural networks, psychological and spiritual strengths, sponsorship, voyage and other previous trauma, the host culture's political and social attitudes toward newcomers and length of residence in the United States.

These factors have different impacts at varying levels or phases of acculturation. Professor Randal Montgomery of Toronto, Canada, gave an example: "What has significant effects on adaptation at one 'length-of-stay' stage (e.g., type of sponsorship, skill in the host country's language, educational or vocational skill, ethnic social network involvement) may have no effect or the opposite effect at a different stage."[43]

Montgomery[43] also found that while gender was a major factor in predicting economic adaptation, it was not a reliable predictor of socio-cultural or subjective adaptation. On the other hand, education was the most powerful predictor of socio-cultural adaptation, age and voyage trauma were predictors of socio-cultural adaptation only and size of municipality and ethnic social network involvement were predictors only of subjective adaptation. Since length of stay was deemed to have significant effects on all acculturation measures, it is recommended that researchers use a time frame approach and analyze various duration groups (e.g., one-year residence in the U.S. versus three years following arrival, etc.).[43]

Overall, it is extremely important for evaluators to assess varying levels of acculturation and determine if members of the target population are highly traditional, somewhat acculturated, or highly acculturated. Casas wrote, "The importance of assessing the level of acculturation cannot be overestimated: failure to understand and assess the acculturation level can greatly weaken the entire evaluation and programmatic process."[12]

As a measure of overall well-being, it may be useful to employ a variety of acculturation scales such as:

1) The Behavioral Acculturation Scale,[62] which assesses the degree to which individuals exhibit behaviors that signal acculturation such as listening to music, reading books and observing holidays of each culture
2) The Alienation scale, which assesses responses to statements such as "I feel awkward and out of place in America"
3) The Perceived Quality of Life scale, which asks how satisfied individuals are with such aspects of their life as health, family, job and neighborhood. Additionally, Kamya discusses the use of the Family Hardiness Index, the Spiritual Well-Being Scale, the Coping Resources Inventory and the Coopersmith Self-Esteem Inventory. [11]

It should be noted that traditional tools developed to assess personal traits such as self-esteem may be perceived as implying that personal difficulties are the fault of the individual and may ignore the effects of institutional and cultural factors such as racism or gender inequities. Assessments should thus strive to include a broader range of experiences, and instruments should be pilot tested to determine their appropriateness.[9] This is especially true since instruments developed for one culture group may be inappropriate for use with another.[24]

Background Information – It may be difficult to obtain accurate data on certain characteristics of immigrant and refugee populations. Pernice notes that "separations from close family were often inevitable, and the uncertainty surrounding the whereabouts of loved ones combined with the loneliness of individual refugees in an alien environment led some refugees to living arrangements that are not socially acceptable in their culture."[58]

Similarly, researchers should be aware that some immigrants, particularly agricultural migrants, reside in the United States on a periodic basis. Espinoza and Massey warn, "A seasonal migrant who happens to be in the United States at the time of the census or a survey may answer the question [about length of stay] by saying 'six months,' indicating the time elapsed since most recent entry, even though he or she

may have accumulated 60 months across 10 earlier trips."[39] Evaluators may therefore want to ask about total time spent in the U.S. since first entry, months or years elapsed since last entry and age at first entry.

Socio-demographic variables are important indicators of social attitudes and levels of acculturation. For instance, aging tends to slow attitude changes and elderly populations are thus more likely to adopt conservative positions. In contrast, higher levels of education typically correlate with more tolerant opinions. "The emphasis on bicultural adaptability is an important characteristic of most resilient families,"[48] said Detzner. Strict cultural traditionalism on the other hand, characterized by a clinging to the culture of origin and a refusal to accept the new culture, serves to further isolate and marginalize immigrants and refugees from the larger American society, which in turn lessens their ability to understand, adjust and find meaning in their new surroundings.[63]

Other Concepts

Social Attitudes – With regard to assessing social attitudes, information might be solicited about attitudes held prior to migration since traditional ways of thinking are in many instances strongly attached to country of origin. Such information can be important in understanding immigrants' current perceptions, which may be mildly or greatly modified by present circumstances. Of particular interest will be those views that are central and dominant to a specific culture group, that have a long history of reinforcement, occur frequently in practice or are set in verbal expressions. Social attitudes can then be tested against a set of socio-demographic variables such as age, gender, level of education and length of stay in the United States.[13]

Youth – Evaluators must have a keen understanding of the struggle to find balance between youths' relatively rapid rate of acculturation and the need to strengthen entire family units. Several studies have found higher rates and levels of stress among adult refugees than in children and adolescents. Becker has suggested that youth may be better at forming new social connections than adults, and "this factor, along with the flexibility conferred by personality development during adolescence, appeared to have facilitated their healing process." [21] Becker and colleagues also suggest, however, that youth, particularly adolescents, are less able to articulate their distress and that the full impact of their trauma will not manifest until adulthood. In addition, youth who are the most at-risk for delayed-onset PTSD tend to be those whose parents have the greatest difficulty adjusting.[21] Ample time should be allowed for youth to answer questions on their own, as adults and older siblings will tend to be more vocal during family-based sessions.

Social Capital – "Acculturation researchers have long noted the importance of the community context for the adaptation of immigrants and refugees,"[14] reported Vinokurov and colleagues. The existence or absence of social capital, that reflect resources individuals and families may have from being members of networks or other social structures is an important key to understanding the immigrant experience. [61]

In an effort to assess the level of social capital that was available for a group of Mexican migrants to the U.S., Espinoza and Massey asked these migrants about immediate and extended family members and whether they had ever been or were currently in the United States. [39] They also asked whether the individual was associated with an American sports club or whether he or she associated with people of other cultural backgrounds. In addition, these researchers recommend assessing social capital by asking whether the immigrant stayed with a friend or relative upon arrival to the United States.

Language and Translation Issues

When working with immigrant and refugee populations, it is likely that respondents will have relatively lower levels of education and English speaking ability. Evaluators therefore must develop instruments that use simple language, are translated using appropriate phraseology and use culturally appropriate idioms.[12]

Research instruments should be translated from English to another language, then back to English, by people who speak both languages. This allows bilingual speakers to check for accuracy and assess semantic equivalence. Ideally, translators who are unaware of the original version should do translations back to English. Alternatively, the data may be spot-checked for accuracy by having an independent translator compare the tape with the transcription. The original document can then be compared to the version translated back to English and adjustment can be made where confusions and incongruence exist.[13]

Evaluators should also be prepared to read a questionnaire in the respondents' native language, if necessary. Casas suggests that "this will enable the persons collecting the information to explain any questions that are unclear and will thus ensure the validity and reliability of the information that is obtained."[12] Bilingual machines may be used, such as tape recorders or voice-activated recorders with pre-recorded messages and questions.[18]

Caution should be practiced in translating and using tests and self-rating scales with culture groups other than the ones they were originally intended for. Pernice reported, "It is always advisable to use an instrument that has either been developed for a particular culture and has been cross-validated, or has at least been translated and . . . translated [back] into the original language to check for consistency of words." [58] Self-rating scales that respondents are not able to read are particularly problematic in that bias may result from "the interpreter's relationship with the participant and the pressure to provide socially desirable responses,"[58] warned Pernice.

DATA GATHERING AND ANAYLYSIS

Communication Style

Some culture groups that are unfamiliar or distrustful of services may not communicate this lack of knowledge or distrust openly. Out of politeness, respect for authority or wanting to avoid embarrassment and conflict, many immigrants and refugees (e.g., Southeast Asian populations) may not ask questions, raise concerns or follow through in the way they indicate they will.

Overall, researchers' communication style must approximate the style of the culture group. For instance, formal and direct questioning may be appropriate for one culture, while informal conversation will prove more effective with another. Lipson and Meleis remind evaluators that "if the content or style of an interview is culturally inappropriate it will be misunderstood, objected to and perhaps terminated early."[23]

Kim and colleagues wrote, "Different cultures have different nuances. Even the use of the same words, gestures, symbols and behavior connote different meanings, leaving plenty of room for uncertainty, misconception and misinterpretation."[18] In particular, culturally competent evaluators must be able to determine what is "normal" from within the context of a given cultural group's perspective so as not to misinterpret certain behaviors as resistance or dysfunction. For example, Asians will typically avoid direct

eye contact during formal conversations. This is a sign of respect, but may be misinterpreted as resistance. Another example of where evaluators must use particular caution is in estimating simple yes and no answers, for they may mean the opposite of what one would assume. If an evaluator asks, "You didn't fill out this form yet, did you?" a Korean or Japanese respondent may say yes, meaning that she did *not* yet fill out the form. A Chinese respondent, on the other hand, would answer no and mean the same thing.[18]

Evaluators must be careful to frame issues so that they are culturally understandable to the population they are working with. For example, in encouraging help-seeking behavior, a service provider might stress that relief of suffering may better enable the individual to fulfill family obligations. When discussing female circumcision, researchers may frame this issue with an understanding that this practice is a "purification ritual" that is accepted and widespread in several countries. The greatest risk is that evaluation is highly likely to be rooted in the unexamined assumptions of the observer's own culture. Likewise, how immigrants and refugees feel about their own adaptation is as important as objective measures judged from an external perspective. For instance, more highly educated and skilled immigrants may adapt better to their new circumstances than less educated or skilled immigrants, but they may not feel better about their experiences.

For the majority of these culture groups, it is advisable to communicate vital information directly to familial authority figures. Other family members may also be used as resources as appropriate, though evaluators should proceed with caution. For example, while in many families children have become the official interpreters for their parents and elders, the use of children for such purposes may alienate adults who are uncomfortable with being placed in a subordinate role.

It is also true that many of these culture groups tend to avoid divulging personal information outside of the family circle. Some subjects, such as racial and ethnic discrimination, mental illness and sexual topics, are often considered taboo and are not to be discussed with outsiders or in public.[10] Evaluators therefore need to carefully determine which family member will be most comfortable speaking openly and honestly about sensitive issues.

Unlike in traditional American or Western European studies, where the research relationship ends following the dissemination of the evaluation results, some immigrants and refugees (e.g., Middle Easterners) may consider their relationship with the researcher to be beginning, rather than ending. "The interviewer may be considered a new friend who is telephoned months after an interview 'just to keep in touch' or to be asked a small favor. This is common in many immigrant and ethnic groups in which people interact more by relationship than by role,"[23] said Lipson and Meleis. If the evaluator or interviewer is uncomfortable with this, he or she can explain that the research study is striving for "objectivity," and that in the U.S. those calls are not appropriate.

Obtaining Consent for Participation

Obtaining consent, particularly written consent, from immigrants and refugees is challenging for a number of reasons. One reason is that asking an individual to sign a contract may be viewed as implying lack of trust and is therefore considered an insult. Alternatively, those who are unfamiliar with the evaluation process may feel confused or afraid about being asked to give written consent simply in order to answer a few questions. Some may think they will be held legally responsible for what they disclose. "Furthermore, the assurance of anonymity that the researcher gave to the respondents appeared to be contradicted by the signature, which in turn contributed to distrust and anxiety on the part of the

migrant,"[58] reported Pernice. Alternatively, the researcher may audiotape a spoken consent from the interviewee to be interviewed.

An introductory statement and consent form should be written in the language of the interviewee, given to the interviewee and reviewed before beginning the interview. Yet, it may also be difficult to encourage participants to read a consent form prior to signing it, because they may feel that doing so will appear impolite and distrustful. Researchers may need to probe as to whether participants understand the nature and purpose of the study, that their participation is voluntary and that their individual responses will not be shared with anyone outside of the evaluation team. Lipson and Meleis suggest that "in such situations, a clear statement such as, 'I know that you understand that we will keep this information confidential, but the university says I have to read this to you anyway' gives the participant 'permission' to read or be read the statement without appearing rude."[23]

It may be necessary for interviewers to provide information about themselves that goes beyond their name, affiliation and the intent of the research study. "The best interviews occur when informants feel that they have developed a relationship with the interviewer. This usually occurs through chatting before beginning the interview. . . If the interviewer is embarrassed by or reluctant to answer personal questions about spouse, children, job and, perhaps, income, the quality of the interview could be jeopardized,"[23] warned Lipson and Meleis.

Data Gathering Methods

Face-to-Face Interviews – Many immigrant and refugee groups may be unfamiliar with personal or household interviews as a way of collecting data. In fact, some groups such as Southeast Asians and other individuals who experienced certain types of war trauma may have tremendous fear associated with being "interviewed." Other groups may simply see this method of data gathering as overly intrusive. "Standard interviewing methods are derived from European cultural models which assume that direct questioning is the most effective route to finding out what one wants to know. It is quite likely that these methods may not be as culturally appropriate and effective when used with [immigrant and refugee] subgroups who are more traditional in nature and/or come from a low socioeconomic background,"[12] warned Casas.

Cultural specifications such as variances in signs of respect, meaning of silence, taboos regarding physical contact, gift giving and so forth are particularly important to be aware of in the face-to-face interview setting.[18] Due to distrust of research in general, and/or the researcher in particular, individuals may not be allowed to be interviewed alone. For example, in a study of Middle Eastern immigrants, mothers were sure to be present during interviews of their teenaged children. Husbands were also likely to want to sit in on interviews with their wives. "Indeed, because some husbands translated their wives' responses into Arabic, . . . in several instances, [the researcher] was unable to ascertain the women's viewpoint at all,"[23] reported Lipson and Meleis. Many culture groups see family as a unit "in which harmony should reign, with a solid expression of accord being presented to an outsider,"[58] wrote Pernice.

Highly structured surveys are generally inappropriate when working with immigrant and refugee populations. Cornelius reflected, "It is virtually impossible, even with extensive pre-testing, to design a highly structured questionnaire which would adequately capture the full range of attributes and experiences represented among this group of people. A more open-ended interview schedule will capture much more of this variation. In addition, interviewers should be instructed to take maximum advantage of the more flexible, open-ended interview format by introducing new 'probe' questions to explore

unanticipated responses in greater depth."[59] A combination of structured and open-ended questions may thus be more appropriate.

The order in which questions are asked also is important. It is wise to ask the least threatening questions first, while more sensitive subjects should not be broached until some level of trust has been established. This is particularly true when communicating with culture groups where the desire to "save face" is strong, where taboos exist regarding the disclosure of certain types of personal information, when respondents feel obligated to provide the "right" answers in order to please the interviewer and/or when they are intent upon displaying only their "public self." This public self is characterized by respondents giving information that is consistent with what the participant finds acceptable to disclose, and what the participant thinks will be expected and understood. "Although more pronounced among older and more traditional immigrants, this 'public self' presentation is a sign of respect to those whom one perceives to be in a position of authority,"[23] said Lipson and Meleis.

When developing survey questions, evaluators will need to be sensitive to the conventional language uses of various culture groups. For example, according to Yen, "East Asian languages are very contextualized in that the context often establishes the tensed status of the person . . . In responding to the item 'I have difficulty making decisions,' an Asian respondent would want to know the time period involved (e.g., during which month) and the type of decisions considered (e.g., financial, career or family) before making an appropriate response."[10]

Researchers should also be aware that respondents at times may appear to be avoiding a question when they are not. Responses by some culture groups may be circular or answered by means of a story. Lipson and Meleis report that "stories stimulated by the questions were the source of rich qualitative data. Indeed, sometimes the best data was obtained during 'chats' before the interview began or as the informant and interviewer were taking leave of each other. Interviewers carefully recorded such information because it often seemed to be more accurate or important than some answers to questions in the interview schedule."[23]

Telephone Interviews – The challenges of telephone interviewing are similar to those of face-to-face interviewing, and may in fact be more limiting. Trust remains a central issue, particularly for respondents who fear divulging personal information. Prospective interviewers should be well prepared to explain the process and purpose of the interview. It is also possible that refugees and immigrants may not have easy access to a telephone.[12] In addition, limited English proficiency may be a further challenge since it is generally more difficult for second language learners to converse on the telephone than in person. These factors will create low response rates.

However, the telephone may provide a way of by-passing some of the other barriers to data gathering when the refugees and immigrants are proficient in English. For example, this type of interview would allow a busy single parent to converse at his or her convenience without exposing his or her home to the interviewer.

Mail Surveys and Questionnaires – Mail surveys typically have lower response rates than telephone interviews. Pernice reports that "the strategy of sending out questionnaires with a stamped addressed envelope inviting people to participate has not worked. Although this has been cost effective and an efficient way of conducting research, it has yielded extremely low response rates,"[58] partly due to unfamiliarity and distrust of this impersonal process. In addition, prospective participants may be transient (e.g., migrant farm workers), leaving no forwarding address.

The target population should be alerted to the forthcoming survey. Community leaders can be recruited to assist in this effort. It is further recommended that these community leaders sign the letter that accompanies the survey. Ideally, surveys are provided in both English and in the language of the community.[12]

Low response rates to questionnaires are common when they are distributed to refugees and immigrants who have not met or don't know the researcher. To counter this, the "snowball method" of using existing social networks can be employed to maximize response rates. Though this method may introduce bias into the sample, low response rates incurred by using more standardized techniques may also create a biased sample. Researchers must be careful to find reasonable representation of the target population if they use existing social networks to find willing participants.[14]

Alternatives to Direct Questioning – In cases where cultural barriers or distrust of the evaluator will seriously limit data collection, information might be gathered through indirect and less obtrusive methods than direct questioning. Kim and colleagues suggest that data gathering might include "anecdotal data, key informant data and data reported by other governmental and nongovernmental agencies such as those engaged in law enforcement, corrections, mental health, public health, social services, child protection, income maintenance and rehabilitation."[18] Data collection may also include pre-post surveys capturing the perceptions of local schools, churches and community organizations[10] regarding the refugee and immigrant community.

One suggestion is to use volunteers or paid local informants to observe program impacts, though such informants must be trained properly. Another is to recruit local leaders to assist in the data collection process. Kim and colleagues remarked, "Informants and local leadership, however, may have their own reasons for serving in that role, which may not always be in the best interests of the evaluation."[18]

Collection of evaluation data can also be done through the use of focus groups and roundtable discussions. It should be noted that some culture groups will prefer private meetings to public ones. Many Asians, for example, generally prefer to meet in the home rather than in a public place.

Interviewing Traumatized Populations – Immigrants and refugees who experience stress and trauma prior to arriving in the U.S. will have more difficulty adjusting to the socio-cultural realities of this country. As a consequence of recent war-related trauma and other cultural difficulties, some refugees may need to receive information several times. Evaluators must practice patience and compassion in dealing with highly traumatized individuals.

The three most frequent symptoms occurring for recently arrived refugees are: avoiding thoughts of the war, intrusive memories and being upset when reminded of the trauma. Later symptoms additionally include a high level of anxiety over an unclear future. Mitigating factors include:

1) The passing of time since experiencing severe trauma
2) Passing of time since shock of displacement
3) Acculturation
4) Increased stability within family, employment and community
5) Having the opportunity to communicate traumatic memories.[20] Padilla and associates note that "it is known that victims of extremely traumatic events may deny or dismiss the personal effects of such experiences."[24] However, according to McCloskey and Southwick immigrants and refugees "benefit in both their physical and mental health profiles from confiding about a traumatic event in their lives."[26]

Because most interviewers are not mental health specialists, a mental health professional experienced in working with severely traumatized individuals should be available in case they are needed when evaluation interviews are conducted. Interviewers will need to be trained for such occurrences.

Analysis and Presenting Results

To protect the confidentiality of the refugees and immigrants, the information shared by the respondent should be associated only with categories of experiences rather than with individuals. When there are three or fewer people in a particular category of experience, their responses will need to be blended with a similar type of experience to protect their identity. Additionally, names and other identifying information should be separated from surveys and destroyed as soon as possible.

Similarly, since data collected from various culture groups as well as from subgroups within culture groups (e.g., Amerasians versus Vietnamese and Central American versus Mexican Latinos) may vary significantly depending on factors unique to each group, evaluators must be cautious when collapsing data across subgroups for the sake of analyses.[12] In addition, historical and contemporary community circumstances should be factored in, including political, educational, social service agency and other relevant concerns.[24]

In presenting results of a study, evaluators should be careful not to reinforce negative stereotypes of a given population and to highlight program strengths in addition to limitations.[9] It is the responsibility of both evaluators and program staff to find appropriate mediums (e.g., *not* necessarily a professional journal) for disseminating results to the community, in particular to the formal and informal leaders of that community.[12]

CONCLUSION

Whether immigrants and refugees come to the United States voluntarily or involuntarily, they will experience some level of culture shock and stress of acculturation, and they must find ways to integrate their old and new lives in a manageable way. Lifelong ties to friends, family, community, values, beliefs and behavioral norms are broken, while new ones must be renegotiated and redefined.

Successful program evaluation will provide baselines to establish needs for services, promote better service delivery and help communities more effectively use the resources available to them. Any meaningful and accurate evaluation of program services for immigrants and refugees, however, must first account for the demographic, socio-cultural and psychological characteristics that are unique to various culture groups and differentiate them from one another as well as from mainstream American society. Culturally competent evaluators must strive to appreciate not only inter-group diversity, but intra-group variability as well. Furthermore, evaluators must strive to comprehend the multi-faceted and complicated change that is inherent in the process of acculturation before assessing program outcomes.

Establishing the evaluator's credibility in the community may be challenging. Program staff and community leaders should therefore be involved from the start. Grace suggested "Where there is cultural congruency and genuine inclusion of the community in running and evaluating programs, program professionals and evaluators will have access to a wider array of resources, will find communication to be more open, efficient and productive and will encounter less resistance to their work. Moreover, program outcomes and evaluation findings will be more relevant and useful to all concerned."[9]

Culturally competent evaluation is characterized by careful attention to the dynamics of difference. It involves an acceptance and respect for those differences, continuing self-assessment as regards culture, and continual expansion of cultural knowledge and resources in order to better understand the needs and strengths of different culture groups. These elements must be present in every aspect of the evaluation approach and methodology.

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