

SPEAKING *for* OURSELVES



Summary of key findings and ideas for action

Minnesota is home to more than 400,000 immigrants and refugees. The majority live in the Twin Cities. *Speaking for Ourselves: A Study with Immigrant and Refugee Communities in the Twin Cities* looks at the experiences of Hmong, Karen, Latino, Liberian, and Somali immigrants and refugees living in Hennepin and Ramsey counties.

With the guidance of our advisory group (see a list on page 12), we interviewed 459 immigrants and adult children of immigrants about their lives – their families, education, jobs, health, and engagement in their communities to learn: What are the biggest needs of immigrant and refugee communities in the Twin Cities? What are the issues that are of greatest concerns? What assets are available to address them? For more information about the study methods and participants, see page 8.

This report summarizes key findings about the immigrant experience in the Twin Cities. Other *Speaking for Ourselves* summary reports focus on civic participation and social engagement; education; employment; health, mental health, and health care access; personal money management; and transportation, housing, and safety in the Twin Cities. All of these reports can be found at wilderresearch.org.

Cultural communities at-a-glance

The Latino population makes up the largest foreign-born population in Minnesota. About 7 percent of people living in the Twin Cities are Latino. The vast majority of these immigrants originate from Mexico, although Minnesota is also home to Latino immigrants from many other Central and South American countries. About 40 percent, or nearly 100,000, are foreign-born.

Hmong refugees began arriving in Minnesota in the 1970s and 1980s following the Vietnam War, with a smaller second wave arriving in the early 2000s as a result of the closing of a refugee camp in Thailand. The Twin Cities metropolitan area is now home to over 64,000 Hmong residents, making it one of the largest Hmong populations in the country. Karen refugees have recently begun to settle in Minnesota fleeing the violence of the Burmese civil war. At least 3,000 refugees have settled in the Twin Cities; 85 percent came to the U.S. within the last 10 years.



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Somali and Liberian refugees came to the United States following civil wars in their countries. Somali refugees first started arriving in the U.S. in large numbers during the 1990s. An estimated 32,000 or more Somalis reside in Minnesota, which makes it the largest Somali community in the United States. Over 10,000 foreign-born Liberian refugees have settled in the Twin Cities. About 80 percent have arrived within the last 15 years.

This report provides an overview of the key findings and recommendations across all of the topic areas covered by the *Speaking for Ourselves* study. For more information, see the [summary report](#) for each topic.

What are some of the most important issues to remember when communicating the study results?

- Because each cultural community is unique, any and all comparisons made between or across communities should consider the unique historical, social, and economic contexts of these communities.
- Recognize the difference between perception data and incidence data. The *Speaking for Ourselves* study mainly focuses on perceptions of respondents from immigrant and refugee communities; this study does not provide representative incidence data.
- Because immigrant and refugee communities are smaller and close-knit (including, in some cases, the interviewers who worked on this study), and the questions may broach subjects that are sensitive, interpretation of findings must take social desirability bias into account.
- In order to ensure positive impact, data from *Speaking for Ourselves* should be used in conjunction with other data sources. Any policy or programming decisions should be made only in collaboration with affected immigrant and refugee communities.

The immigrant experience in the Twin Cities

Key findings

- Health care, employment assistance, housing, and food support were identified as the most helpful resources for new immigrants.
- Basic needs (such as food, housing, and clothing) and jobs and employment training are the areas where more resources are needed to make the transition to Minnesota easier for immigrants and refugees.
- Participants want community leaders, organizations, and government agencies to learn more about their communities.
- Over half of participants have felt they are not accepted at least once in Minnesota because of their race, culture, religion, or immigration status; 2 out of 10 participants says they feel this way once or twice a month or more often.



Ideas for action

- When a refugee moves to Minnesota from another state, they do not have access to any refugee resettlement funding once they arrive in Minnesota. These funds are a resource to meet the basic needs that the immigrants and refugees who participated in this study say they need and appreciate. Consider public policy solutions.
- As a broader Twin Cities community, we should learn more about the needs, preferences, attributes, and assets of immigrant and refugee communities and build relationships by working together to create a more welcoming environment and improve the quality of life for immigrants and refugees, and everyone, in our community.

Education

Key findings

- Most participant households (75%) with young children (age 0-4) receive child care from someone living in the home. Very few participants (9%) send their children to child care centers or early childhood education programs.
- Most school-age children (82%) from participant households attend public school.
- Children of Karen respondents make up the largest share of English Language Learners, whereas children of Liberian respondents make up the smallest share; however, cultural and language challenges related to education impact all immigrant and refugee communities that participated.
- More than one-third (37%) of participants reported they speak and understand spoken English “only a little bit.” When asked about challenges related to their children’s or family’s school experiences, learning English or challenges transitioning between different languages at school and at home was the most commonly mentioned issue.
- Just one-quarter (24%) of participants who have school-age children feel “fully able” to help their children with homework (in English), and only one-third (34%) feel “fully able” to volunteer at their child’s school. On the other hand, three-quarters (77%) of participants feel “fully able” to provide a home environment that is good for studying.
- Parental encouragement was the most commonly mentioned key strength of culture or family that helps children to be successful in school.
- The most commonly mentioned barriers to postsecondary education access, named by three-quarters (75%) of participants, are financial issues. Despite these barriers, nearly all participants (98%) believe that their children will go to college.
- Three-quarters (78%) of participants want to obtain additional education for themselves.

Ideas for action

- Support legislation that increases the accessibility and affordability of early education for all preschool age children.
- Address the cultural responsiveness of child care centers in the Twin Cities (including staffing diversity) and support informal caregivers in using best practices to promote literacy and to address other key developmental and educational needs of children in their care.
- Promote language immersion and bilingual child care.
- English learning programs and bilingual outreach and support efforts should be a priority for schools to address the issues parents and other caregivers have related to helping their children with homework and participating in afterschool events and parent-teacher conferences.
- School staff should include individuals who are fluent in the native languages of their student's families and should have the training to provide families with the information they are looking for. Additionally, accessible interpreting services should be available and promoted to parents.
- Strengths identified by each cultural community should be recognized by educators.
- Provide busing for afterschool programs and/or facilitate a carpooling system to and from school activities.
- Provide forms regarding extracurricular activities in parents' native languages.
- Colleges and universities should assess the needs of first generation students and design effective retention programs that use an integrative approach to target non-academic factors, in addition to traditional academic factors, that contribute to the retention rate for immigrant students.
- Provide more information about and access to financial aid to immigrant and refugee communities, and build better relationships among local postsecondary institutions and immigrant and refugee communities.
- Consider developing a clearer pathway or "education to employment pipeline" for new immigrants and refugees. This could specifically include a pipeline for students from immigrant and refugee communities who want to be educators to get jobs in Twin Cities-based child care centers and schools.

Employment

Key findings

- Three-fifths (59%) of participants are employed.
- More than half of the participants who are employed report they receive benefits such as paid time off, health insurance, and dental insurance.
- Participants who report being unemployed (41%) most often said that the main reasons they do not currently have a job are because they are a stay-at-home parent or have a disability.
- Participants report the main challenges to getting a job for their cultural communities include language barriers (47%) and needing more education (30%); immigration status is a community challenge according to two-thirds of Latino respondents but none of the other cultural communities.



Ideas for action

- Increase access to vocational education and English classes for employment-related purposes (vs. conversational English), and consider more options for on-the-job training and English language learning approaches.
- Provide better employment-related benefits to all employees, including immigrants and refugees, including paid time off for sick time as well as for personal reasons, as well as health and dental insurance.
- Provide better transportation options that link geographic communities where many immigrants and refugees live with locations of jobs and educational institutions.
- Advocate for organizational transparency, data tracking, and benchmarking for employee recruitment and retention of a diverse workforce that is representative of the community it serves.

Health, mental health, and health care access

Key findings

- Study participants were slightly less likely than the overall population of Minnesota as well as Hennepin and Ramsey counties to rate their overall health as “good” or better.
- The biggest health-related concerns participants have for their community are diabetes, unhealthy eating, and lack of access to healthy food.
- Lack of health insurance, cost of health care, and cost of insurance are major barriers to participants in terms of accessing needed health care for their families.
- The self-reported emotional health of respondents is good; however, much stigma around mental health problems exists in these communities, and many participants reported at least some symptoms of stress, depression, or other related issues.

Ideas for action

- Request that the Minnesota Department of Health (MDH) dedicate Statewide Health Improvement Program (SHIP) funds to immigrant and refugee communities.
- Support existing and further legislative steps toward improving the health and mental health of immigrant and refugee populations, such as stratification of health care quality data and other health-related data (disease incidence, etc.) by ethnic group.
- Address the gap in health care/insurance access for undocumented immigrants.
- Use Health Impact Assessments to examine the real or potential health impact of various programs, developments, etc., and consider the specific impact on immigrant and refugee communities.
- Consider ways of promoting and supporting healthful behaviors in immigrant and refugee communities including using culturally-based and culturally acceptable forms of physical activity and healthy foods.
- Address limited mobility and financial resources by bringing activities and nutritious foods directly to communities.

- Decrease stigma around mental illness by developing programs to educate the members of immigrant and refugee communities and promote a more accurate view of mental illness.
- Service providers should continue to ensure the confidentiality of patients and communicate to patients how their confidentiality will be assured, and find ways to use a “trauma-informed approach” to providing services and interacting with immigrant and refugee communities, in particular.
- Provide more education and outreach for immigrant families who are of “mixed status” to apply for Medicaid and Children’s Health Insurance Program (CHIP) and cover dependents without citizenship status.

Transportation, housing, and safety

Key findings

- Two out of five participants said they have transportation problems; these issues are more common for respondents who are women and those who were born outside of the U.S.
- One-third of participants reported problems paying for their housing; this was most commonly a problem for respondents with lower levels of income and education, as well as for older respondents.
- Of participants age 65+ (includes only Hmong and Latino participants), about one-third (34%) have no plans for where they will live as they age and start needing help to take care of themselves.
- Most participants reported feeling safe where they live.
- Participants indicated several different reasons people from their community might not report crimes to the police.
- Self-reported experiences with profiling or discrimination by law enforcement vary across cultural communities; one-third (33%) of participants overall indicated there are “always” or “often” problems in their community.

Ideas for action

- Support carpooling or community-based transit services (leverage assets such as strong ties within these communities).
- Provide education in multiple languages on public transit options and usability, and encourage public transit policy to consider ways to alleviate language barriers so that those with limited English proficiency may use the system comfortably.
- Make the Section 8 housing choice voucher more accessible to low-income immigrant families.
- Provide outreach and education on housing assistance programs in appropriate languages for these communities.
- Build trust and relationships between the immigrant community (including community leaders and organizations, as well as individual community members) and the police.
- Develop or enhance language services within police departments, and increase the diversity of police and other emergency response staff.



- More resources are needed to support immigrant elders and their adult children regarding living arrangements after they can no longer live on their own. In particular, consider more support to continue and sustain traditional approaches to in-home elder care or have more culturally competent options for elder care.
- More information is needed about available resources to support elders in the community, housing options, paying for long-term care, and related topics.

Personal money management

Key findings

- The biggest financial access concern for their communities among participants is the ability to get credit.
- More than half of respondents (58%) have sent money to relatives outside of the U.S. and about one-third (32%) have sent money to relatives in the U.S.

Ideas for action

- Find ways to increase access to credit for immigrant and refugee communities.
- Through partnerships with community organizations, financial institutions should adjust products and services to accommodate immigrants and refugees who cannot access credit due to citizenship status.

Civic participation and social engagement

Key findings

- Almost two-thirds (63%) of all respondents reported they are not affiliated with any political party.
- About one-third (36%) of participants voted in the 2012 presidential election and slightly more (44%) are currently registered to vote. Across all cultural communities, the most commonly cited reason for not voting was not being eligible to vote due to immigration status.
- Participants are more likely to have heard about or visited a public library than other local arts, science, and cultural organizations.
- Participants more commonly do informal volunteering such as helping a neighbor with yard work, running errands for elders, and helping a friend with child care than formal volunteering through an organization or program.
- Participants hear about what is going on in their cultural communities through word of mouth, TV programs, and radio.

Ideas for action

- Work to support programs that successfully prepare and assist immigrants and refugees in becoming United States citizens. Citizenship efforts should also be paired with voter outreach and engagement.
- Provide opportunities for all members of immigrant and refugee communities to effectively be involved in the political process, regardless of citizenship status.

- Ensure that Arts and Cultural Heritage Fund (ACHF) dollars and other public funding for informal education and cultural amenities are used specifically to engage and address the needs and interests of immigrant and refugee communities.
- Look to libraries for ideas on how to do effective outreach as they are the most frequently visited.
- Hire and promote qualified members of immigrant and refugee communities at informal education organizations.
- Create volunteer opportunities in the broader community that align with traditional cultural practices of helping others.
- Provide outreach to communities through informal social networks (including informal networks on social media, such as Facebook groups geared toward specific cultural communities' interests). Outreach approaches should be tailored accordingly with consultation from community-based organizations.

Study methods

A community advisory board made up of individuals who are members of and/or work with one or more of the participating communities provided guidance throughout this study. Wilder Research designed the survey instrument, developed and implemented the data collection approach, and conducted the analysis and reporting after gathering input from the advisory board and directly from the community.

An innovative data collection approach called Respondent Driven Sampling was used to identify and recruit eligible community members to participate in the study. This approach involves randomly selecting a handful of “seed” respondents within each community and asking those respondents to refer up to three additional people from their community. Those respondents are then asked to refer other respondents, ultimately creating respondent referral “chains” that in some cases carried out as far as 11 “waves” (Figure 1).

Adults who were born outside of the U.S., or had a parent who was born outside of the U.S., who were from one of the cultural communities included in the study, and who live in Hennepin or Ramsey counties were eligible to participate. Respondents who were referred to the study could **not** be a biological family member or live at the same address as the person who made the referral.

Speaking for Ourselves **Buy-A-Question Partners**

The following partner organizations contributed to this study by funding one or more study questions and by committing to using the results to improve service access or delivery:

- Hennepin County Public Health
- Metropolitan Library Service Agency
- Minnesota Children’s Museum
- Minnesota Historical Society
- Minnesota Humanities Center
- Minneapolis Institute of Arts
- Science Museum of Minnesota
- Family and Community Knowledge Systems Project, Wilder Research, and Training and Development, Inc., with funding from the Kellogg Foundation



1. Respondent Driven Sampling: Number of seeds, referrals, and waves in the referral chains

Total number of:	All respondents ^a	Hmong	Karen	Latino	Liberian	Somali
Seeds	52	11	7	11	3	9
Referrals	407	94	94	90	57	60
Maximum number of waves	--	11	7	8	9	6
Total number of respondents	459	105	101	101	60	69

^a In addition to the five main cultural communities listed in the table, the “all respondents” group also includes 6 Lao, 7 Oromo, and 10 Vietnamese respondents. We did not obtain enough completed surveys from members of these cultural communities to be able to report data for these communities separately.

Wilder Research hired bilingual staff from participating communities to help with data collection; interviews were conducted in the respondents’ preferred languages, either over the phone or in-person. Respondents received \$20 for completing the survey and \$5 for each referral they made, up to three.

By using Respondent Driven Sampling, we were able to survey a group of study participants who are more representative of these cultural communities in the Twin Cities than if we had used convenience sampling methods (i.e., survey people who are all affiliated with one program, religious organization, housing site, neighborhood group, etc.) However, study participants are **not** statistically representative of their broader cultural communities because scientific random sampling was not used, and the full Respondent Driven Sampling method for weighting and analyzing data was not appropriate given these data.

Therefore, the data presented here should be interpreted with caution; we do not claim that the results exactly mirror the overall experiences of the broader community. Rather, we suggest that in many cases the data produced by this study are better than any other existing source of data about these immigrant and refugee communities in the Twin Cities. The key findings included in this report have been endorsed strongly enough by a wide enough range of study participants and community stakeholders to be considered valid and actionable for all practical purposes.

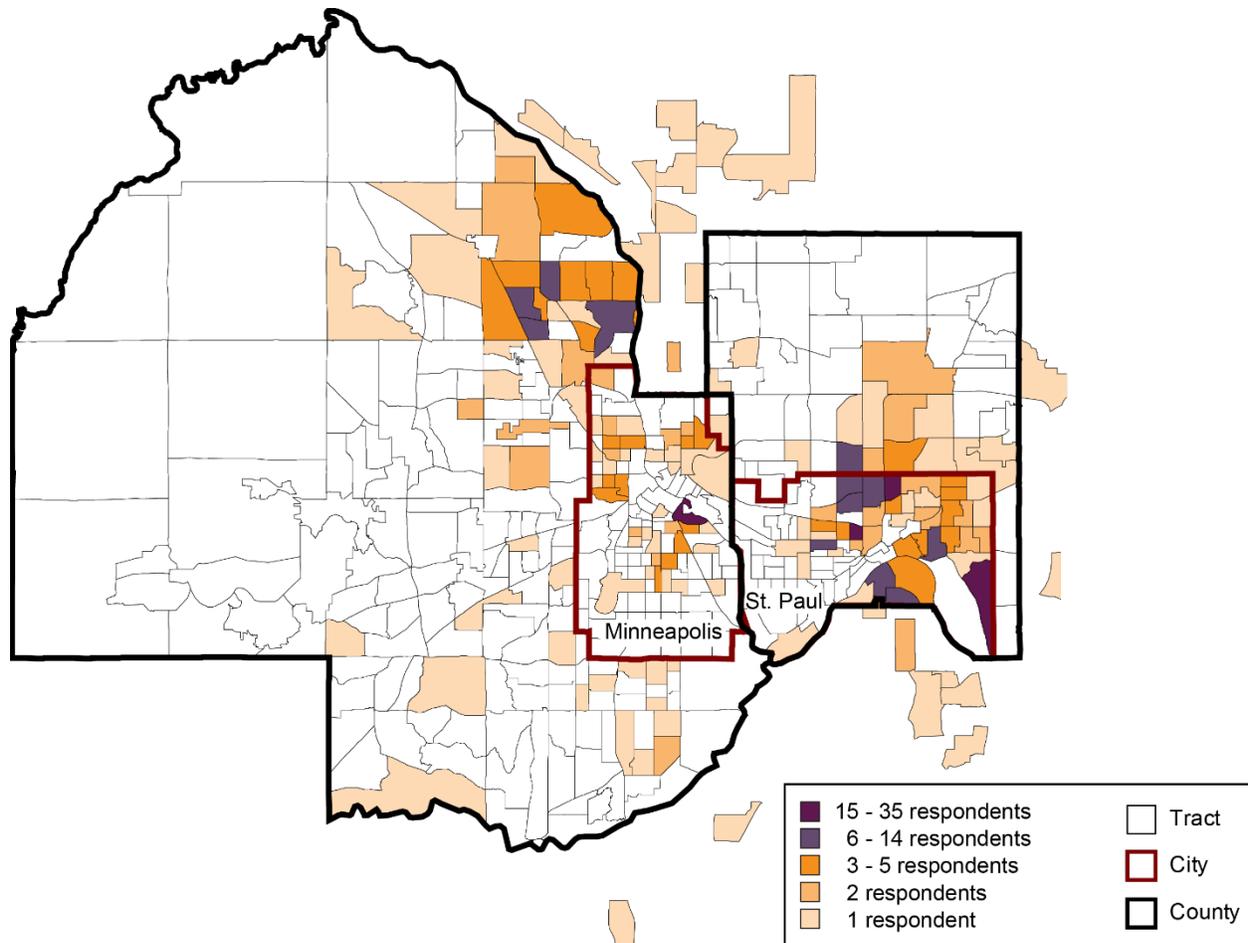
Differences among groups may be attributable to actual differences in their experiences, but may also be due to differences in survey responding patterns (e.g., some groups are more likely to give moderate responses, other groups are more likely to give extreme responses, regardless of the type of question). Therefore, as noted previously, comparison across communities should be done with caution and only with consideration of the unique contextual factors that influence these and any research findings.

See the detailed study methodology report and data book for more information about the study methods and limitations ([*Speaking for Ourselves: A Study with Immigrant and Refugee Communities in the Twin Cities Data Book*](#)).

Study participants

A total of 459 immigrant and refugee community members participated in the study. Participants' locations (home address) generally reflect the geographical spread of these cultural communities in Hennepin and Ramsey counties (Figure 2). A few respondents live outside of the target counties.

2. Participants' locations in Hennepin and Ramsey counties



Most participants were born outside of the U.S. They are split nearly evenly between Hennepin and Ramsey counties, although some specific cultural communities are concentrated in one county or the other. Two-thirds of respondents are female; they are split fairly evenly across the age spectrum from younger adults to older adults. Although participants fall into all education levels, most have a high school diploma or less. Similarly, although all income ranges are reflected, over half have household incomes below \$30,000 annually (Figure 3).



3. Demographic characteristics of study participants

	All respondents (N=459)	Hmong (N=105)	Karen (N=101)	Latino (N=101)	Liberian (N=60)	Somali (N=69)
County of residence						
Hennepin	47%	40%	0%	58%	85%	57%
Ramsey	49%	51%	100%	40%	10%	35%
Other	4%	9%	0%	2%	5%	9%
Generational status						
1 st generation – born outside the U.S.	95%	87%	100%	92%	98%	100%
2 nd generation – born in U.S.	5%	13%	0%	8%	2%	0%
Gender						
Female	65%	61%	77%	81%	42%	55%
Male	35%	39%	23%	19%	58%	45%
Age						
18-29	25%	26%	24%	20%	37%	18%
30-49	54%	32%	68%	66%	48%	65%
50+ years	21%	42%	8%	14%	15%	18%
Education						
No formal education	17%	46%	21%	1%	0%	10%
Elementary/some high school (no diploma)	27%	21%	57%	30%	0%	33%
High school diploma or GED	27%	1%	20%	43%	17%	39%
Some college/Associate degree	21%	0%	2%	19%	62%	15%
Bachelor's degree or higher	9%	10%	0%	7%	22%	3%
Household income						
Under \$10,000	17%	10%	26%	7%	7%	33%
\$10,000 to under \$20,000	16%	5%	24%	22%	12%	17%
\$20,000 to under \$30,000	22%	8%	31%	28%	24%	22%
\$30,000 to under \$50,000	23%	20%	12%	31%	34%	26%
\$50,000 or more	9%	21%	1%	7%	9%	1%
Don't know or refused	13%	37%	6%	4%	15%	0%

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Wilder Research would like to thank the study participants and their communities who entrusted us with their perspectives and shared with us their time. The participation of the *Speaking for Ourselves* advisory board members, our partners, and the community members through each phase of the project, made this study possible and made its findings more meaningful. We would also like to thank our Wilder Research and Wilder Foundation staff who contributed to the completion of this study.



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For more information

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