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# The Wisconsin Hmong Resettlement Taskforce: An Ethnographic Analysis of Public Policy as a Cultural Process and Product

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THE WISCONSIN HMONG RESETTLEMENT TASKFORCE:  
AN ETHNOGRAPHIC ANALYSIS OF PUBLIC POLICY  
AS A CULTURAL PROCESS AND PRODUCT

by

KAREN FINK DEVIVO

Under the Direction of Kathryn A. Kozaitis

ABSTRACT

This thesis focuses on the Governor of Wisconsin's Hmong Resettlement Taskforce that was charged in 2004 with making policy recommendations for the State about a large resettlement of Hmong refugees. Through participant-observation, interviews, and document analysis, the process of policy formation by the Taskforce is examined. This empirical, ethnographic study depicts this taskforce as a group of cultural agents and its work as a cultural process. Findings in this thesis center on the taskforce report and the constraints on the narrative that limited possible recommendations.

INDEX WORDS: Refugee, Refugee resettlement, Hmong, Wisconsin, Taskforce, Anthropology of public policy

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A Thesis Submitted in Partial Fulfillment of the Requirements for the Degree of  
Master of Arts  
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Georgia State University

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**LIST OF ABBREVIATIONS**

DHFS – Department of Health and Family Services

DWD – Department of Workforce Development, the state office under which the Office of Refugee Resettlement resides.

MAAs – Mutual Assistance Associations, community-based, refugee organizations. Also called Hmong Associations.

NGO – Non-Governmental Organization; these are the international, non-profit agencies that identify and assess refugee situations overseas.

OGHA – Office of Global Health Affairs, part of the US Department of Health and Human Services.

ORR – Office of Refugee Resettlement; there is both a federal and a state Office of Refugee Resettlement.

TANF – Temporary Assistance for Needy Families; the federal public assistance program.

UNHCR – The United Nations High Commissioner for Refugees; the branch of the UN responsible for humanitarian refugee situations.

Volag – Voluntary agency, also known as resettlement agencies.

W2 – Wisconsin's TANF program.

WHEDA – Wisconsin Housing and Economic Development Authority

WRA – War Relocation Authority; the federal office concerned with Japanese internment during World War II

## **INTRODUCTION**

June 2004 saw the start of one of the fastest and most distinctive resettlements of refugees since the modern U.S. refugee resettlement program began in 1980. That month, the governor of Wisconsin created an advisory taskforce to provide recommendations for how the State could prepare for the arrival of the new Hmong refugees anticipated in this resettlement. This empirical, ethnographic study depicts this taskforce as a group of cultural agents and its work as a cultural process. This research builds upon the work of anthropologists and social scientists who have studied the cultural production of policy formation.

This thesis is divided into four sections:

1. History of the Hmong People in the Context of the U.S. Refugee System.

Resettlement of refugees and associated policies are a continuous challenge for state governments. By studying the Wisconsin taskforce's process of policy formation, we can learn valuable lessons that can be applied to other resettlements. This is the first known anthropological study to examine a state's resettlement policy process.

2. Theoretical Framework. Anthropological research has a long history of influencing policy. Many early anthropological studies were used to support government programs and policies aimed at establishing direct administrative control in colonial settings over native populations. As the focus of anthropology shifted after World War II, anthropologists began to concentrate more on policy evaluation. This research was concentrated in three areas: the

effects of a policy on particular segments of society, reasons for policy failure or success, and the production of more culturally informed and responsive programs. However, anthropologists have only recently begun to study policy-making as a cultural process. This thesis builds upon the work of the pioneers in this field of anthropological inquiry including Laura Nader, Susan Wright, and Cris Shore.

3. Research Design. This study, which was conducted between July 2004 and August 2005, examines how the dominant discourse produced by the Taskforce evolved. Through participant-observation in the taskforce meetings in Wisconsin, semi-structured interviews with taskforce members, and document analysis of the final report, I attempt to reveal the competing narratives and show why these did not become dominant in the final report. Through this methodology, I unveil embedded assumptions and constraints in the taskforce discourse.
4. Data and Analysis. This thesis is not intended to be an evaluation of the quality of the recommendations made by the Taskforce, nor does it seek to trace implementation of the proposals made in the final report. Instead, this study examines and interprets the process of policy formation by the Taskforce. As such, this section includes a discussion of the dominant discourse of the Taskforce and the constraints on other potential narratives. I also will show how the taskforce members define themselves and their organizations within the policy field.

## **HISTORY OF THE HMONG PEOPLE IN THE CONTEXT OF THE U.S.**

### **REFUGEE SYSTEM**

The history of Hmong resettlement in the United States is complicated and tied to the development of the entire refugee system. To understand the intricacies of the Taskforce and this incoming resettlement of Hmong, it is necessary to understand how the U.S. refugee policy functions and the history of Hmong resettlement in the United States.

Each year the United States admits an average of 70 thousand refugees from around the world for permanent resettlement (Office of Immigration Statistics 2004). This federally-funded and state-administered program provides cash assistance, medical assistance, health screening, and social services to recent refugees. A complex public-private partnership between national and local affiliates of international non-governmental organizations (NGOs), the U.S. Department of State, the United Nations, the U.S. Department of Health and Human Services, and local non-profit organizations has developed to identify, transport, and provide initial support to these refugees.

#### **U.S. Refugee Definitions**

According to the Refugee Act of 1980, a refugee is a person who has fled his or her country of origin and cannot return because of “past and/or a well-founded fear of future persecution due to race, religion, nationality, membership in a particular social group, or political opinion” (1980). People fleeing natural or manmade disasters, such as famine or tsunami, economic migrants seeking better living conditions, and people who

are displaced within their own country who have not crossed an international border are not eligible for U.S. refugee status.

Asylum-seekers and refugees are different. Refugees are adjudicated overseas with no judicial review of the overseas determination. Asylum-seekers first reach the United States, often on visitor or student visas. They then apply for permanent status by establishing the same “well-founded fear of persecution.” Unlike refugees, they can use the U.S. court system to appeal the asylum determination (Churgin 1996).

According to a recent Senate Judiciary Committee hearing, there are approximately 14 million refugees living outside of their home countries, many in crowded camps in bordering nations (Subcommittee on Immigration 2002). Civil war, human rights violations, and repression have all caused mass migrations of peoples (Keely 1996). In the 1990s, the sudden withdrawal of Cold War funding that fueled ethnic and political rivalries by giving arms and sanctuary to resistance movements was suddenly withdrawn from several countries, including Cambodia, Nicaragua and Angola. This caused state “implosion,” a complete breakdown of a country’s infrastructure. The chaos and instability left behind caused thousands of people to flee these countries (Keely 1996; Newland 2003). Increasingly, whole groups are driven from their homes by governments and insurgent groups attempting to depopulate or shift the ethnic, religious or other composition of an area (Martin 2000). It is people in these types of situations, such as the “ethnic cleansing” in Bosnia or the tribal massacres in Rwanda, that both the United Nations and the United States consider humanitarian refugees.

In the United States, refugee policy differs from that applied to other types of immigrants in several ways. First, refugees are authorized to work upon admission.

After one year, they may apply for permanent residency, a “green card”. Five years after admission, they are eligible to apply for citizenship (Bureau of Population, Refugee and Migration 2002). Second, unlike immigrants who must wait until citizenship, qualified refugees are immediately eligible to apply for all federal assistance programs, including TANF, food stamps, SSI and social security (Barnett 2002). For example, refugees over age 65, can immediately begin to collect social security benefits. However, if a refugee does not qualify for any assistance, the Office of Refugee Resettlement (ORR) in the U.S. Department of Health and Human Services provides funding for Refugee Cash Assistance and Refugee Medical Assistance, which are administered by the states, for up to eight months after arrival. Third, refugees differ from (legal) immigrants because they are admitted on humanitarian grounds, and there is no requirement that they demonstrate economic self-sufficiency or have a sponsor who guarantees their financial support (Violet 2000).

### History of US Refugee Admissions Policy

Mass migrations of peoples have always occurred; however, “refugees” are a creation of the twentieth century state (Malkki 1995). U.S. recognition of refugees as an issue of concern that requires policy is still relatively new, originating in the aftermath of World War II. Before that time, refugees were lumped together with immigrants under U.S. law and subject to the same quota restrictions on admission, based on country of origin. As a result, many refugees from Nazi Germany were denied asylum because their country’s immigrant quota had already been met (Foreign Policy Association 1992). After the war, the United States enacted the Displaced Persons Act of 1948, the first refugee legislation ever passed by Congress, and admitted 202 thousand refugees to both

alleviate the waves of refugees pouring out of Eastern Europe and to potentially embarrass the Soviet Union (Foreign Policy Association 1992). The initial refugee processing took place overseas, with screening and selection done on foreign soil far from the United States (Churgin 1996). This same processing structure is still used today.

During this same period, the international community focused on the failure to protect victims of Nazi persecution and the looming threat of Stalinist repression, created what was intended to be a short-term United Nations High Commissioner on Refugees (UNHCR) to manage the refugee problem in Europe (Newland 2003). Legal and humanitarian status was first mandated to refugees through the 1951 UN Geneva Convention and applied only to European nationals. In 1967, a UN protocol extended the convention to include any forced migrant, anywhere in the world. Together, the convention and protocol remain the foundation of refugee law and a cornerstone of international human rights legislation. Mass migrations and refugee situations, of course, were not confined to post-war Europe and have continued to fall under the scope of UN concerns. The UNHCR, which started as only a three-year program, celebrated its fiftieth anniversary in 2001.

The Geneva Convention and 1967 Protocol also became the foundation upon which the modern US resettlement policy was established in the Refugee Act portion of the Immigration and Nationalities Act. As part of this act, each year the President, in consultation with Congress, determines the number of refugees who may be admitted to the United States during the coming fiscal year. This annual ceiling is divided by the President among five regions – Africa, East Asia, Europe, Latin America/ Caribbean and



the Near East/South Asia, usually leaving some slots unallocated for use in emergencies or spillover. The UNHCR works with the U.S. government to identify those refugees most in need of urgent resettlement (Patrick 2002). To facilitate this process, the State Department, in consultation with the Congress, the Department of Homeland Security, UNHCR and various NGOs, determines a set of "refugee processing priorities" once a year to respond to changes in the world refugee situation (Foreign Policy Association 1992).

Until the early 1990s, refugee admissions policy in the United States reflected Cold War aims and tensions. Generally the U.S. welcomed refugees from communist countries but did not accept refugees from governments friendly with Washington, despite documented human rights violations (Foreign Policy Association 1992). After the 1956 Hungarian uprising, the U.S. took in several thousand Hungarian refugees. Fidel Castro's rise to power in 1959 prompted the U.S. to accept more than 200 thousand Cubans over the following three years (Foreign Policy Association 1992). After the American withdrawal from Vietnam, thousands of refugees were admitted for resettlement, especially South Vietnamese who had collaborated with the United States.

It was during this phase of the program that Hmong refugees first came to the United States. Their refugee status resulted from their collaboration with the U.S. military in what many Hmong call the "Secret War" in the 1970s. Through participation in the French-Lao resistance to the Japanese occupation of Laos during WWII, the Hmong had gained the reputation of being fierce guerrilla fighters. During the 1970s, Hmong guerillas, with training and monetary support from the American CIA, organized a temporarily effective resistance to the Pathet Lao, the Lao Communist movement.

However, with the fall of the Royal Lao government to the Pathet Lao in May of 1975, thousands of Hmong were killed for their cooperation with the American military and for their guerrilla activities (Miyares 1998). In total, about ten percent of the Laotian population eventually fled across the Mekong River to refugee camps in Thailand (Yang 2001). By the end of 1975, the Hmong had slowly begun to resettle in the United States and other countries.

With the end of the Cold War, the context in which the U.S. refugee admissions program operated dramatically changed. The focus shifted from primarily large groups concentrated in single international locations, for example refugees from Vietnam, the former Soviet Union and Cuba, to the admission of smaller numbers of refugees of more than 65 nationalities and ethnic groups scattered in often remote locations in the world (U.S. Department of State 2003). Compared with Cold War resettlement, refugees who have arrived in recent years have had far fewer close family members living in the United States who are available to provide support and smooth the integration process (Office of Refugee Resettlement 1998). The combination of significant linguistic diversity, wide-ranging educational and employment histories of these refugees, and a shortage of affordable housing has caused resettlement agencies and state refugee systems to adapt to meet the increasing demands of the program (Bureau of Population 2002).

### The U.S. Resettlement System

The U.S. Department of State works alongside the UNHCR and several international NGOs to identify those refugees who are in most need of permanent resettlement in a third country. Generally, it is the joint policy and philosophy of all of these organizations that there are three “durable solutions” to a refugee crisis. The most

desired outcome is a peaceable repatriation to the country of origin when tensions and danger have subsided (Foreign Policy Association 1992). However, when this is not possible, the second preference is for local integration into the country of first asylum to which the refugee initially fled. This, too, is not always feasible because of volatile ethnic tensions, or the strain on the infrastructure and resources of the host government from a large population influx (Russell 2002). The third solution is permanent resettlement in a third country, especially for refugees who are in urgent need of protection. Presently, Australia, Canada, Denmark, Finland, the Netherlands, New Zealand, Norway, Sweden, Switzerland and the United States all have resettlement programs. The United States resettles more refugees than all of these other countries combined, though this still only accounts for one half of one percent of the refugees in the world (U.S. Department of State 2003). However, when countries of first asylum where refugees have integrated (the second durable solution), such as Iran, Tanzania, and Pakistan, are taken into account, the number of refugees resettled in the United States is comparatively negligible (Barnett, 2002).

When the Hmong began to flee to Thailand in 1975, the UNHCR set up a series of refugee camps along the Lao-Thai border. Though Laos shares borders with five countries, the topography of the country made it difficult for refugees to flee anywhere except Thailand (Chan 1994). As a result, these camps swelled with more than 100,000 refugees. Local integration in Thailand, the second durable solution to a refugee crisis, was not possible because of the large number of refugees and because of the refusal by the Thai government to allow permanent Indochinese immigration.

The third durable solution, resettlement in a third country, began slowly for the Hmong in 1975. Though they also were resettled in France, Australia, Canada, Argentina and French Guyana, the vast majority of the Hmong came to the United States (Vang and Flores 1999). By the end of 1976, the U.S. had resettled only 750 Hmong; thereafter the numbers steadily began to rise. In 1980, the peak year for Hmong resettlement in the U.S., 27,000 Hmong were admitted. By 1980, approximately 100,000 Hmong resided in the United States (Yang 2001). According to the Office of Refugee Resettlement, there were approximately 200,000 Hmong living in the United States in 1998 (Vang and Flores 1999), primarily concentrated in California, Minnesota, Wisconsin and North Carolina.

Once a refugee has been approved for resettlement in the United States, responsibility for that individual is passed from the Department of State to one of 11 U.S.-based non-profit voluntary agencies (volags), also called resettlement agencies, to arrange placement and transportation. If the refugee has relatives living in the United States, efforts are made to resettle him or her nearby (Patrick 2002). However, if the refugee does not have relatives in the United States, the resettlement agency determines where in the country the refugee will be resettled. The availability of housing, employment, needed services, readiness of the host community, and a variety of other factors determine exact placement.

In the 1970s and 1980s, scatter policies were designed to disperse refugees across the country. These policies were intended to impede the development of ethnic communities “in order to bring about rapid assimilation into the host communities” (Miyares 1998:3) Eventually, in the 1990s, volags recognized that the community support found in ethnic enclaves actually helped the refugees gain self-sufficiency more

rapidly (Miyares 1998). As a result, some resettlement agencies began to try as much as possible to resettle refugees in areas where there were pre-existing ethnic communities. For example, in 2000 Florida resettled more Cubans than all other states combined. New York settled the most refugees from Liberia and Sierra Leone. The largest number of Sudanese resettled in Texas, and California received large numbers of Iranians (Patrick 2002). However, the US refugee program simultaneously maintains the policy that no one state or community should become overburdened with high numbers of refugees (Ruefle and Mandell 1992).

As part of the Refugee Act of 1980, every state is required to establish a refugee program headed by a State Refugee Coordinator. This person is responsible for managing the state's program, including the dispersal of federal funds and the collection of data about the refugees within the state. Additionally, the Coordinator works with local non-profit and ethnic organizations to prepare for incoming refugees and to provide services for those who have been in the country less than five years. The State Refugee Coordinators work in conjunction with the volags to determine where in the state new refugees should be resettled.

It is important to note that there is no requirement that refugees remain for any length of time in the community in which they are originally resettled. Because many sign an apartment lease upon arrival and because initial financial support is pre-arranged by the resettlement agencies, many refugees remain in the host community for at least their first year in the United States. However, secondary migration to areas with friends and family, employment opportunities, a larger ethnic community, or more generous public assistance programs is common. For example, several Somali families were

resettled by a volag in Portland, Maine at the beginning of 2000, but the only available housing was expensive and in poor condition. Lewiston, Maine's population had been in decline for over a decade, and many apartments in the downtown area stood vacant. When Lewiston landlords heard about the housing shortage in Portland, they called officials and told them that many apartments were available in their town (Bouchard 2002). Word quickly spread, and the Somalis that relocated began inviting family and friends to join them. By October 2002, more than 1,000 Somalis had moved to Lewiston from across the country and more were arriving at a rate of about a dozen each month (Graham 2003).

A similar secondary migration occurred with the Hmong to California's Central Valley in the mid-1980s. Though scatter policies initially dispersed Hmong throughout the country during this period, by the end of 1986, more than half of the Hmong in the United States were residing in California (Yang 2001). The Hmong population in Fresno grew from one family in 1977 to approximately 35 thousand by 1993. Wisconsin also experienced high numbers of secondary Hmong migration. Attracted by a strong ethnic infrastructure and high employment rates, thousands of Hmong have settled in the state. By 2004, there were close to 50 thousand Hmong living in Wisconsin (Hmong Resettlement Taskforce 2005:7).

Typically, through a network of over 450 local, mostly faith-based affiliates across the country, the volags provide air transportation for the refugee directly to the host community. Additionally they are responsible for reception at the airport, cultural orientation, housing and initial medical screenings. The volags receive \$800 per refugee from the Department of State, which they are expected to supplement with private

donations and in-kind contributions to cover the refugee's expenses for the first thirty days (Patrick 2002).

A unique part of the refugee program in the United States is its flexibility. The volag system must have the ability to expand and contract as the volume and ethnicity of refugees quickly change. With these shifts in immigration, some needs change dramatically and others remain constant. As a result, the refugee system requires a combination of a consistent, basic infrastructure that has the flexibility to expand and contract rapidly.

The volag provides each new refugee with a caseworker who usually speaks his or her language to help with initial resettlement and orientation. Upon arrival, the caseworker arranges for furnished housing, which the refugee usually must take responsibility for by signing a lease. During the first few days in the United States, the caseworker takes the refugees to register with the Social Security Administration, enrolls refugee children in school, and provides a medical screening by local health personnel. Additionally, the caseworkers familiarize the refugees with public transportation systems, orientation to appliances and other features of their new homes, show them how and where to buy food and clothing, and help the refugees find English as a Second Language (ESL) classes in their communities.

As stated previously, refugees are admitted on humanitarian grounds, with no requirement that they demonstrate economic self-sufficiency or have a sponsor who guarantees their financial support (Violet 2000). However, the stated goal of the resettlement program in the United States is economic self-sufficiency within ideally 90 days, though subsistence funding can be extended for up to eight months (Violet 2000).

As a result, many volags have employment programs to help refugees get jobs soon after arrival.

### Refugee Community-Based Organizations

Mutual Assistance Associations (MAAs) are another key component of the current U.S. refugee system. While the volag system is designed to handle immediate needs, the MAAs have a more long-term approach to refugee assistance. Southeast Asian refugee groups, especially the Vietnamese and the Hmong, were quick to organize aid associations to help fellow refugees. In 1975, as the first of these forced migrants began to arrive, many refugee leaders and Americans argued that self-help organizations could provide assistance as well as, if not better than, mainstream organizations. According to Majka and Mullan, early refugee resettlement policies “strongly encouraged South East Asians to retain and build upon their ethnic, class and family resources as a means of adapting to life in the US” (2002:76). They argue that refugee MAAs were viewed as organizations that could provide a broad range of assistance to refugees, and in so doing, could ease the social and economic adaptation difficulties that these groups often face when resettling in the United States.

Currently, the Hmong have established MAAs in at least 23 states and have a national Hmong organization in Washington, DC that convenes conferences, seeks grant funding, and helps to build the capacity of local MAAs across the country. In Wisconsin there are 17 active Hmong MAAs located throughout the state. Eight of these were represented on the Taskforce.

In the 1980s, the Department of Health, Education and Welfare established an Indochinese Mutual Assistance Division to coordinate and provide technical assistance to



the MAAs. The Office of Refugee Resettlement, after its formation within the Department of Health and Human Services, gave direct grants to a small number of MAAs nationwide for a variety of services including orientation, counseling, employment assistance, and interpretation. In 1992, ORR began an MAA incentive grant, designed to encourage states to fund MAAs as part of their refugee programs. By the end of the 1980s, more than 1,200 Southeast Asian and non South-East Asian refugee MAAs had been created within the US (Majka and Mullan 2002).

The federal Office of Refugee Resettlement, which had an annual budget in fiscal year 2001 of \$433.1 million (Office of Refugee Resettlement 2001), still offers a variety of targeted grants to MAAs each year to aid refugees who have been in the United States for less than five years. Additionally, ORR also offers block grants to state governments who may disperse these funds to MAAs and other organizations that continue to aid refugees in the first five years of their transition to U.S. life. Examples of recipients of these block grant dollars include volags, local governments, local school boards and non-profit organizations that provide medical services, language training, employment services and community awareness programs (Patrick 2002).

### Context and Unit of Analysis

The context of analysis in this study includes both the refugee resettlement system in Wisconsin and the Hmong community in the state. The unit of analysis for this study is the Governor's Hmong Resettlement Taskforce.

### *The Hmong People in Wisconsin*

The Hmong is an ethnic group that traditionally lives in the highland areas of Laos and Thailand. The CIA and U.S. military recruited many Hmong during the

Vietnam War to fight as insurgents against a growing Communist group in Laos. After U.S. troops withdrew from Vietnam in 1975, Laos fell to the communist Panthet Lao movement. The Hmong were persecuted, and many were massacred, causing a mass exodus across the Mekong River into Thailand, where refugee camps were established by the United Nations. Thousands of Hmong escaped to Thailand over the next decade. Many were eventually resettled in third countries, most of them coming to the United States. In 2001, there were approximately 200 thousand Hmong living in the U.S., concentrated in Minnesota, Wisconsin and California (Yang 2001).

The first Hmong arrived in Wisconsin in 1976. As has been the case with most refugee movements, the first to arrive were those deemed the most likely to assimilate quickly. This included the most highly skilled, those with the most education, those who could speak English, and those with ties to the United States. For the Hmong, this included the officers in the resistance movement. Later waves of Hmong were largely agrarian workers, with little to no education; many could not read or write in their native language. According to documents presented by the Wisconsin Department of Workforce Development (DWD) at the second taskforce meeting, most Hmong in Wisconsin are currently employed in manufacturing, production, sales, and the service industry.

Thousands of Hmong chose not to be resettled in the 1970s and early 1980s, when the U.S. was accepting large numbers. Fear of moving to an unfamiliar part of the world fueled by rumors of American doctors who hurt patients and ate livers, of urban violence and gangs, of not being able to sacrifice animals, and of being imprisoned without foundation caused many to remain in the refugee camps (Fadiman 1997). Additionally,

the guerilla resistance continued, though to a much smaller scale, throughout the 1980s. Many hoped that the communist regime in Laos would be eventually fail allowing the Hmong to return (Koltyk 1998).

By 1992, the Thai government began to change its policy toward the Hmong living along its borders. After allowing the camps to exist for more than fifteen years, the Thai government began to protest in the early 1990s that the Hmong were no longer political refugees but instead were economic migrants. Thai authorities gave the Hmong two options: either return to Laos, or apply to immigrate to a different country. Faced with only two options, most of the Hmong applied to the United States for refugee status. However, U.S. policy toward the Hmong had changed and more restrictions were being placed on attaining refugee status. Additionally, approximately ten thousand Hmong rejected both options and fled the camps, fearing repatriation to Laos (Fadiman 1997).

By the mid-1990s, approximately 15,000 of these Hmong had found a home on the grounds of Wat Tham Krabok, a Buddhist temple in central Thailand. The Thai government repeatedly tried to close the settlement over the ensuing decade, but the Abbot, who had official authority over the temple, refused. The Thai government never provided any infrastructure for the settlement. Access to medical care and education were limited. Most of these Hmong relied on physical labor at a nearby rock quarry or needlework and other handicrafts for economic support. They were not allowed to attain Thai citizenship or permanent residence, making life there precarious (Office of Global Health Affairs 2004).

In 2003, the Abbot died. Soon after, the Thai government warned the United States and United Nations that it was considering repatriation of these Hmong to Laos.

After years of lobbying by the Hmong community in the U.S., the State Department announced in December 2003 that it would finally accept the 15 thousand Wat Hmong for resettlement between the months of June and December 2004. However, due to processing delays and several cases of active tuberculosis, the resettlement was extended through summer 2005 (Boucher 2005). This resettlement was unique for three reasons. First, it was to be one of the most rapid resettlements in the history of the US refugee system. Second, nearly 98 percent of these refugees joined family members in only three states – Minnesota, Wisconsin, and California. Finally, prior to this resettlement, there was a ten-year period when almost no Hmong immigrated to the United States.

On July 1, Jim Doyle, the Governor of Wisconsin, announced the creation of a Special Advisory Hmong Resettlement Taskforce. The 27-member taskforce was charged with providing recommendations to the Governor and Secretary Roberta Gassman of the Department of Workforce Development (DWD) on matters relating to a large resettlement of Hmong refugees from Thailand.

According to the official website for the taskforce, its goals were to make recommendations about:

system improvements, best practices, employment connections, housing, citizenship, and access to needed services to successfully integrate this new refugee population into our state. The Task Force supported community resettlement efforts and advised the state agencies on communication strategies and collaboration opportunities (Hmong Resettlement Taskforce 2004).

### *Cultural Background*

Clan and kinship form the foundation of Hmong culture. Alliances of families, created through marriage, reflect social, economic, and political ties (Koltyk 1998). An extended clan and lineage system which is patrilineal, patriarchal, and patrilocal characterizes the Hmong social organization and family life. Marriage is the key that maintains social organization. As anthropologist Jo Ann Koltyk explains, “Marriage is the creative principle which links clans and individuals. To the Hmong, marriage means having a family and also having good relationships with other clans” (1998:42). Because clan is considered family, a cultural taboo forbids Hmong from marrying within their own clan, thus extending social organization (Fadiman 1997).

Hmong culture includes about twenty clans, with more than a dozen represented in Wisconsin (Koltyk 1998). The taskforce included members of nine clans, though more were represented through kinship and marriage ties. Based on interviews with taskforce members, though it remains an important cornerstone of Hmong life in Wisconsin, clan was correctly not a factor in recruitment to the Taskforce. Instead, the Hmong member responsible for recruitment sought “those who have very much influence on the community and have already served the community for many years.” This is consistent with Koltyk’s finding that although Hmong families continue to practice traditional forms of decision-making in Wisconsin, often leadership positions are based on an individual’s education and knowledge of American culture and service systems rather than on their status as the household’s eldest male member (1996).

Family size presented important challenges for the Taskforce. Because of the importance of kinship ties and their agrarian roots, the Hmong in Southeast Asia tend to

have large families with many children, and define *household* as consisting of a man, his wife or wives, his sons, and their wives and children (Koltyk 1998). The Wat Hmong are no exception. More than sixty percent of the new refugees are under age 18, and most families include more than four members.

During “welfare reform” in the late 1990s, Wisconsin overhauled its public assistance program. The former system had determined aid based on family size. However, the new system, known as W2, limits monthly assistance to \$673 per family, irregardless of size, and is time-limited to only two years. Additionally most low-income housing in Wisconsin is based on a family of four. Both of these policies contradict the needs and expectations of the Hmong. Additionally, the large number of children in the group at the wat was expected to put strain on the school systems in the areas where the Hmong settled.

#### *Development of the Wisconsin Resettlement System*

In Wisconsin, the refugee system began in the mid-1970s to help the federal government relocate 1,500 refugees resulting from collaboration with U.S. troops in South East Asia during the Vietnam War. Throughout the 1970s and 1980s, Wisconsin continued to resettle mainly Hmong refugees. As a result, the state system invested heavily in programs designed to serve the Hmong, especially in mutual assistance associations. The volag network in the state began to breakdown in the 1990s as Hmong migration decreased.

The state refugee coordinator can only invest federal funds into programs that target refugees within the first five years after resettlement. In the late 1990s, the Wisconsin MAAs hit this five-year time limit because Hmong immigration had ended.

During this same period, the federal refugee program shifted focus away from Cold War-era refugees to a more broad-based system that included smaller groups of more than 65 ethnic groups. The Wisconsin program stopped funding the Hmong organizations and began to reinvest in the volags so that they would be able to resettle these new refugee populations. During the last five years, in addition to smaller resettlements, the program has brought in several hundred Somali Bantu and former Yugoslav refugees.

By the time the Department of State announced in 2003 that the Wat Hmong were eligible to resettle in the United States, Wisconsin's refugee program had focused its efforts on other populations. As a result, much of the infrastructure that had previously existed for new Hmong refugees had deteriorated. For this reason, the Taskforce was seen by many members as an important way to revitalize these former networks.

## **THEORETICAL FRAMEWORK**

Anthropologists have a long history of conducting research for policy. In fact, most early anthropological studies were used to support government programs and policies aimed at establishing direct administrative control in colonial settings over native populations (van Willigen 2002). During WWII, anthropologists worked with the War Relocation Authority to conduct ethnographic studies of Japanese culture that the U.S. government used to make policies for post-war reconstruction in Japan (Spicer 1976). Margaret Mead was very active in the policy arena throughout her career, testifying before congressional committees on issues ranging from NASA, housing, urban development and education reform. She also had a close friendship with President Carter and his wife and advised him on various policy matters (Dillon 1980).

In more recent years, anthropology has been used to design more effective medical and environmental programs. For example, Omidian and Lipson (1996) conducted participatory action research to assess health in an Afghan community in Northern California and to plan a culturally appropriate health education program. They found that the state's goals were incompatible with the community's perceptions of health care needs and provided suggestions about ways that the project could be altered to be more effective. In an ethnographic study of a North Carolina initiative to reduce chemical exposure among farm workers, anthropologists found that migrant laborers and farmers had very different beliefs about the risk and responsibility of chemical exposure. They suggested ways in which the program could be made more effective through the use of this analysis (Quandt et al. 1998).



These were studies *for* policy; they did not delve into policy construction and did not give a face to the policy-makers. These studies examined the product of policy but not the process through which it was created. Many studies of development projects and policies, such as Art Hansen's (2002) study of famine in Zambia, and Mark Grey's (1999) study of migrant workers in meatpacking plants, have been effective in rooting local conditions in the larger context of national political economy and globalization. However, these types of studies do not give a face to those people responsible for decision-making. They are effective in showing why a particular policy is not working, or the degree to which it affected a segment of the population. However, these studies do not analyze the policy-makers in the culture from which the policies are produced. As James Peacock asserted in the Presidential Address at the 1995 annual meetings of the American Anthropological Association: "Applied anthropology is often a mop-up operation, identifying and solving problems caused by bad policy" (1997:13). In this thesis, I attempt to delve into the decision-making process to reveal how the Taskforce created its policy recommendations.

### Defining Policy

Essential to the anthropological study of *policy* is to first define the word itself. *Policy* is a reaction to a perceived problem, and every level of policy construction and implementation uses its own discourse to define the problem and its solution. In this work, *policy* refers to three different levels of thought and action within institutions. First, it is a written statement that defines a problem and explains how it is to be resolved. This is the outward face of public policy. In this study, the final taskforce report (see Appendix C) is this written policy statement.

Second, policy is the unwritten, embedded assumptions, ideology, and images that policy professionals hold about ‘the people’ and ‘the problem’ that shape their actions and can be at odds with the written statement (Wright 1995). This is the level of policy at which hegemony thrives because it is often based on “common sense” or that which is “obvious” or “natural” about the problem. Policy-writing is not a value-free endeavor. In any organization -- governmental, non-profit or private for-profit -- the decision-makers have their own perspective, philosophy, ideology, and product to sell, be it their ideology, policy, service, or a commodity (Weaver 1985). The Taskforce encompassed several key assumptions that affected its final product.

Third, policy encompasses the procedures and routines that practitioners and bureaucrats follow on the street- and field-level. As political scientist Robert Lineberry writes: “The implementation process is not the end of policy-making, but a continuation of policy-making by other means” (DiNitto 2003:16). Of course, the people at this level have their own set of assumptions, ideology, and images about “the people” and “the problem,” which makes policy-implementation also embedded with values (Wright 1995). Implementation may produce results that vary greatly from those articulated in the written statements or the shared ideology of the policy professionals (Wright 1995). For example, Mizrachi and Shuval found that formal medical and discipline-wide policy and discourse drew a line between “proper biomedicine” and “improper alternative medicine”. However, through participant-observation and interviews, they found that biomedical and alternative medical practitioners collaborated regularly in hospitals and shared a mutual respect at odds with the biomedical field’s discourse (2004:1649). In this thesis, the Hmong MAAs, resettlement agencies, and state and local social service

providers are the groups that would eventually implement the policy changes that result from the recommendations of the Taskforce.

There is, of course, a crucial fourth level of policy: “The people” to whom the policy is addressed. In this study, the new Hmong refugees are the focus of the taskforce policy recommendations. It is important to question the degree to which the policy narrative is defined by the people, or in this case the new refugees, and to what extent their own reality is defined by this narrative (Wright 1995). Because anthropology has traditionally drawn much of its strength from understanding and identifying with the emic, local perspective, a number of anthropological studies have examined how public policies affect different populations. For example, Hall et al. (2001) used focus groups to understand why recidivism was high among substance-abusing women on parole in California. They uncovered several policy problems with both the Temporary Assistance to Needy Families (TANF) regulations and the Forever Free initiative that made women unlikely to attend the program’s community treatment sessions after leaving prison. Similarly, in an anthropological study of a sustainable development project in rural Honduras, Loker (2000) found that though the project’s planning documents demonstrated an attempt to involve the poor of the region, implementation of the project was not so inclusive. He found significant problems with the top-down policies employed by the international non-profit organizations responsible for the project that prevented the local population from embracing the reforestation program. In both cases, policies failed to work as planned because they were not devised with input from the intended beneficiaries. In the Data and Analysis portion of this thesis, I discuss the lack

of input from the new refugees and their anchor families in the policy process employed by the Taskforce.

### Beyond the “Subaltern”

Anthropological studies like those discussed above are important because they reveal inequities in society while they simultaneously give voice to previously silenced segments of the population. However, they also usually offer an incomplete picture of the policy that they investigate. As Edward Spicer recounted about his employment with the War Relocation Authority (WRA) during World War II, when the new policy of “separation and segregation” of Japanese-Americans was first discussed, he contemplated resigning twice.

Over a period of weeks I learned something of the nature of the variety of factors which the policy-makers had considered, and considered carefully, in making their decision. My view had been limited to only one of those factors, namely, the opinion and behavior in the evacuee community (Spicer 1976:123).

He learned that there was great pressure on several sides including the House Un-American Activities Committee, a Senate investigating committee, The American Legion, state governors, and powerful activists to close the relocation centers and actually turn them into concentration camps. The WRA was opposed to this drastic step, but was under pressure to take some action, lest Congress step in and create concentration camps. “To put it simply, they saw the greatest good for the greatest number of evacuees being served by segregation” (Spicer 1976:126). Though he morally opposed the policy of segregation, when he spoke to policy-makers about the constraints under which they had to make decisions, the anthropologist agreed not to resign.

As the Spicer example illustrates, to believe that only those to whom the policy is addressed, “the people,” have a stake in how the problem is defined is to miss an enormous part of the picture. By calling it a cultural product, public policy can be seen as a means through which the various actors define themselves within the policy arena and within the larger scope of the culture, be it, for example, “the victim,” “the decision-maker,” “the expert,” or “the person who gets things done”. It is important to realize that policy not only affects the lives of those for whom the policy is intended, but also the lives of the people involved in the policy process. As discussed in the Data and Analysis section of this thesis, taskforce members had a variety of reasons to be personally concerned about the discourse that the group constructed.

The field of anthropology was traditionally rooted in the study of the exotic “other”. This perspective is in part the legacy of the Boasian goal of preserving cultures that focused anthropology away from complex society, bureaucracies, policy-makers and politicians (Weaver 1985). As more and more anthropologists over the last thirty years have shifted their focus inward, this perspective has manifested itself in favor of the study of the subaltern in our “own” societies (Nader 1969; Shore 2002; Wright 1995). The traditional, emic approach to ethnography has led to “the appearance of a persistent bias for the powerless and against the powerful”(Weaver 1985:200).

This bias has also caused anthropologists to redefine “the other”. Instead of an exotic native of another culture, as was the Boasian model, the “political elite” within the anthropologists’ home cultures has become the anthropological “other”. By creating an antagonistic framework for viewing policy-makers as outside of the cultural context in

which they operate and actually create and implement policy, anthropologists make effective advising and assessment problematic (Weaver 1985).

When concentrating on the subaltern, it is easy to see policy as hegemonic. The very idea of policy-makers and decision-makers brings to mind images of power, exclusivity and separation from “the people” (Shore 2002). However, by adopting this view of policy as outside of the cultural realm and only studying the subaltern in society, anthropologists actually perpetuate these hegemonic forces.

In 1969, Laura Nader warned that by concentrating on the powerless, anthropology frames certain issues and social “problems” as the domain of only the poor. This approach has helped to mold our view of how social problems are conceived and where solutions may lie. For example, drugs and crime are often seen as issues of the lower-class or youth that are the product of the subculture in which they thrive. Few ethnographies in the late 1960s concentrated on drug usage among the elite or middle-class. Likewise, white collar crime received scant attention from ethnographers (Nader 1969). Anthropological studies that concentrate on the problems of the powerless can serve to perpetuate the dominant discourse about the problem and its solutions.

Hegemony is an important concept in the study of policy but can also be a limiting, catch-all framework. Policy is complicated because it is fluid and is constantly being negotiated. Attributing policy to hegemonic forces does not tease out the very real human and cultural negotiation that constantly shapes and reshapes policy. In van Willigen and Channa’s (2002) study of dowry death in India, the authors argue that the government policies directed at the elimination of “bride burning” focus on punishment but do not address the cultural causes of the practice. Many policies are designed with a

similar approach. Anthropologists are in the unique position to contribute to effective policy formation by showing why these policy-makers ignore the underlying causes of the problem.

Viewing policy as a process that exists outside of the cultural realm also presumes that policy comes from the centers of ‘power,’ from inside the Washington beltway, and ignores the necessity of two-way communication between communities and institutions in creating sound public policy. Public policy-makers often act sluggishly, making changes to catch up with the more rapid changes in societal behaviors and beliefs, as was the case with the Civil Rights Act following slowly in the wake of the civil rights movement (Preister 2003). Additionally, by not studying public policy as a cultural process, anthropologists ignore the constant renegotiation of policy at the varying levels of construction.

Like Nader, George Marcus argues that by excluding sites of systemic power, such as “institutions of media, markets, states, industries, universities – the worlds of elites, experts and middle classes” ethnography is an inadequate representation of culture (Marcus 1998). Different facets of culture are revealed when the point of reference is those to whom power has been delegated (Nader 1969). For example, Lyon-Callo’s study of the Massachusetts homeless sheltering industry revealed that funding agencies, through their grant requirements, reinforced the dominant narrative about the causes of homelessness and thus restrained resistance and alternative solutions among shelter staff and residents (1998). Similarly, this study shows that the federal policy structure, which separates short-term and long-term refugee services, influenced the dominant narrative of

the Taskforce that equates employment and self-sufficiency. Because of this federal structure, policy alternatives for the Taskforce were suppressed.

### An Anthropological Study of Policy Construction

The anthropological study of policy goes beyond evaluating or advising on a particular policy product. Instead, it looks on public policy as a process that constitutes and is constituted by culture. In doing so, it shows how a particular policy discourse becomes dominant while others are marginalized. In this thesis, I examine how the Taskforce constructed the dominant discourse embodied in the final report and the reasons for the suppression of other narratives.

Because policy-making has the added complication of being a political endeavor in which power dynamics can be explicit (Wright 1995), anthropologists should apply the same kind of detailed ethnographic study to the culture of power and policy-making as they do to the study of a Balinese cockfight (Geertz 2004). Without the development of theories of public policy based upon anthropological principles and methodology, we are in danger of blinding ourselves to the intricacies of the process and only seeing the dominant narrative and the subaltern discourses. Such a narrowed perspective limits the way a problem can be defined, and thus the ways in which it can conceivably be solved (Preister 2003).

In the study of policy, the empathy that anthropologists cultivate through participant-observation can be extended beyond just those to whom the policy is addressed, but also to the actors at the levels of creation and implementation. By pursuing dialogical relationships with people at the varying levels of policy formation, an anthropology of public policy uncovers more than just the dominant narrative. Each of



these discourses reveals important parts of the larger picture of why a particular policy narrative is the one that defines the situation and another does not (Wright 1995).

Ethnography of policy means the anthropologist will gain empathy for people at varying levels of power who are often in conflict with each other. Policy-makers must become more than just a vague, slightly hostile, faceless image. They must become tangible, cultural actors. The policy anthropologist may study policy formation, decision-making, the policy-maker's culture, and organizations where policy is administered, with the goal of an empathic understanding of the values of these people and their organizations (Weaver 1985). In this study, I attempt to achieve an empathic understanding of the taskforce members and the challenges that they faced in their own organizations. Additionally, I seek to gain their perspectives about refugee resettlement in general and this incoming population in particular.

By studying "up" instead of "down," the power dynamics between the anthropologist and subject of study change. As Susan Wright explains: "It was easier to achieve a dialogical relationship with farmers, as it was the researcher who was committed to conceding power, than with bureaucrats who do not readily concede the power to define" (1995:77). Nader views this reversal of power roles as an important step forward because for so long anthropology was steeped in fieldwork that sprang from this uneven power structure (1969). The inversion of this relationship is bound to produce new theories as the anthropologist is compelled to be conscious of, and reflexive about, her position within the wider system of power and policy (Shore 2002). I gained access to the Taskforce through a fellowship with the federal government. As a result, I

was always careful to differentiate my personal opinion from a federal government perspective during participant-observation of taskforce meetings.

A study of the policy-making process has positive implications for applied projects, as well. Eventually the study of a policy process must become a study for improving policy. Evaluation studies of a policy are not necessarily effective if they do not include an understanding of the process through which it was created. One way to do this is to examine how a particular policy and the discourses surrounding it are transformed through time (Wright 1995). Policy is not static and to study it as a snapshot and outside of its historical and political context loses many of its cultural nuances. The anthropologist can explain the processes of this ideological transformation; how some discourses within the policy structure become authoritative and others do not (Wright 1995). In this study, interviews were conducted with taskforce members throughout the six months in which the group was convened. This allowed me to understand the evolution of the Taskforce's discourse over time.

With an empirically based understanding of the nature and culture of policy-making, decision-makers could be more aware of their own cultural biases and how these influence the policy that they create. The anthropologist also can investigate whether something in the process of decision-making at the top in Washington or in the middle, at the bureaucratic level, "were causes of , rather than solutions to, some of the 'problems' on the ground"(Wright 1995). Additionally, the anthropologist can uncover how much input "the people" have in defining their own situation, where the power in the process lies, where the policy fails, and thus where to concentrate efforts at positive change.

As the discipline makes strides toward taking a more active role in public policy formation, it is important to keep in mind Paulo Freire's caveat that real social change is created through dialogue. He warns that treating the "oppressed" as objects to be studied and then, based on this analysis, writing a prescription for how to behave simply reinforces the system of oppression, the dominant policy narrative (1970). Any attempt at change must involve their participation. I would extend this to say the same of policy-makers. Without the acknowledgement of policy-makers as cultural actors through their involvement in a dialogical relationship, any critique of policy becomes functionally irrelevant.

This thesis builds upon the work of Nader, Wright and Shore by offering a case study of a policy process. Through a dialogical relationship with the taskforce members, this study examines how this taskforce and the policy recommendations that it constructed are both a reflection of culture and a human product. I explore not only the dominant discourse of the Taskforce's final report, but also the constraints that prevented other narratives from becoming dominant.

## **RESEARCH DESIGN**

This empirical, ethnographic study relies on participant-observation, semi-structured interviews, and document analysis to reveal the dominant discourse and to uncover the other narratives that taskforce members expressed about their role in the new resettlement. Additionally, a study *of* a policy process inherently becomes a study *for* policy. As such, this research will also provide insight into how future taskforces, and preparation for resettlements, can be more effective.

### **Research Questions**

Specifically, research questions focused on four areas:

- What was the dominant narrative, as evidenced through the report presented to the Governor, and who controlled it? What assumptions were embedded in this narrative? In other words, how were the problems and the solutions framed, and by whom?
- What factors constrained other narratives, the other interpretations of the issues presented during the interviews or during committee discussion from either being voiced or eventually becoming part of the report?
- Each taskforce member represented a different organization, usually as its head or director. This included state and local government agencies, non-profit organizations, and local Hmong mutual assistance associations. How did these representatives see themselves and the role of their own organization in the resettlement? Additionally, how did this compare to the way taskforce members viewed the roles of the other types of organizations involved in the resettlement?

- Many local communities have used taskforces to prepare for a new resettlement of refugees. What was successful about this taskforce, and how could this type of taskforce be more effective?

### Field Research Site

Fieldwork is the hallmark of anthropology. Traditionally this has entailed a long period of time, six months or more, of “intensive hanging out” in a remote community followed by a period of reflection and analysis away from the field. James Clifford asserts that in anthropology “the exotic exemplar –co-residence for extended periods away from home, in the ‘tent in the village’ – retains considerable authority. But it has, in practice, been decentered” (1997:60). As technology and the world have changed, so has the definition and practice of fieldwork in anthropology. Clifford also explores the idea that native anthropologists study “down” or “out” within their own cultures in order to have that same kind of fieldwork experience, intensive and displaced from the academic environment. However, when studying “up,” the fieldwork orientation must follow those with the power to define. George Marcus suggests that “to do ethnographic research, for example, on the social grounds that produce a particular discourse of policy, requires different practices and opportunities than does fieldwork among the situated communities such policy affects”(1998:84).

In this study, the field site was the Taskforce itself. Because this was a group of people who only convened for the taskforce meetings, participant-observation took place during these meetings, and more informally before and after each meeting and during lunch breaks. Additionally, during the first taskforce meeting, the group broke into six committees, which were essentially workgroups to cover particular policy areas. These

committees were: Health, Mental Health, Housing and Transportation, Economics, Family Issues, and Education. The committees generally met at the end of each taskforce session and conducted telephone conference calls and wrote on-going emails about drafts of reports and relevant issues that arose as the refugees began to arrive. I conducted participant-observation with three of the committees – Health, Mental Health, and Family Issues.

The Taskforce met in person, as a whole, five times between July 21, 2004 and February 23, 2005. Four of these meetings were held in Madison, Wisconsin, and one was held in Wausau, Wisconsin. Generally, the meetings lasted three to four hours and were arranged by the State Refugee Coordinator, Sue Levy, and her staff. The meetings were chaired by Kaying Xiong, a Hmong elementary school principal from Eau Claire, Wisconsin. The Chair and State Coordinator worked together before each meeting to devise an agenda of the topics to be discussed. The Governor made opening remarks at the initial taskforce meeting, but thereafter was not involved in the meetings.

Each committee was headed by a chair, and workgroup meetings were held at the chair's discretion. The Health Committee conducted a conference call an average of once every three to four weeks from August through December. The Family Issues Committee, on the other hand, met only twice outside of the full taskforce. The Mental Health Committee had conference calls approximately once every six weeks. (See Appendix A for a breakdown of taskforce and committee members.)

### Role of the Researcher

I became involved with this taskforce through my fellowship with the Humanitarian and Refugee Division of the Office of Global Health Affairs (OGHA), U.S.

Department of Health and Human Services, located in Washington D.C. in the summer of 2004. I attended the initial taskforce meeting along with the OGHA team leader, who made a presentation about health conditions of the Hmong in the Wat. After the meeting, the team leader, the state refugee coordinator and I spoke about the need for an OGHA representative to act as a liaison between the federal office and the Taskforce. Though my fellowship ended in August 2004, I continued to attend the taskforce meetings and to pass relevant information to OGHA. Additionally, I acquired information from OGHA for the Taskforce about federal issues that would affect their recommendations.

My role in the Taskforce was two-fold. During full taskforce meetings, I acted as a participating-observer, sitting outside of the taskforce circle along with presenters and other adhoc members. Because this was the Governor's Taskforce, only members appointed by him became official taskforce members. As such, I was careful not to speak or participate in these meetings unless invited to by the Chair or the State Refugee Coordinator. During committee meetings, I was an observing-participant, providing input and evaluation to discussions that occurred surrounding particular issues and anticipated problems. Additionally, because of my connection to OGHA, when issues of federal policy arose, such as health screening requirements in unique situations, I was able to get the relevant information and pass it back to the committee.

### Rapport

Rapport is essential for any ethnographic study. It involves breaking through the boundaries that exist between the anthropologist and the research participants. According to van Willigen, "through the building of rapport, we erode the informants' tendency to protect private personalities" and personal information (2002:51). I was in a unique

position to be able to establish rapport in three different ways. First, through my connection to OGHA, I was able to contribute necessary information in the committee workgroups and thus establish legitimacy with the state and local government officials on the Taskforce. Second, I had worked with Tibetan and Burmese refugees in India and Thailand in 2000 and 2001, and had volunteered with a resettlement agency in Atlanta, Georgia. This allowed me to empathize with the concerns and perspectives of the resettlement agencies and local non-profit agency heads represented on the Taskforce. Finally, I had spent six weeks in Laos and had visited two Hmong villages in Thailand in 2001. These experiences helped me to build rapport with the Hmong members of the Taskforce.

### Research Participants

Research participants were the 27 members of the Governor's Hmong Taskforce. They ranged in age from late-20s to mid-60s and included people from eight communities in which the Hmong were scheduled to resettle. They represented a variety of Hmong agencies, public social service agencies, schools, city offices, and churches. The Taskforce included two city mayors, two resettlement agency heads, eight people representing Hmong mutual assistance associations, two Hmong police officers, six officials from state government agencies, five representatives of local and county government agencies, once church director and one retired activist. Fifteen of the members were Hmong; twelve were women. It should be noted that three taskforce members never attended a single meeting. A list of the taskforce members, which is a matter of public record, is provided in Appendix A.



## Specific Methodology

### *Participant-Observation*

As stated above, this study involved the use of participant-observation of the taskforce meetings and three of the six committees' meetings. During all of these meetings, I took descriptive notes and used an observation protocol that included:

- Attendance: who was present
- Topic Discussed: amount of time discussed, who spoke about it and what was said
- Participation: who spoke and how often, divided by type of organization (MAA, local government, state government, non-profit) and type of taskforce member (male/ female, Hmong/ non-Hmong)

After each taskforce meeting, I wrote analytical field notes giving my initial impressions about what had happened during the meeting.

Additionally, I took extensive descriptive notes during committee meetings and telephone conference calls. After each of these, I wrote analytical field notes about what had happened during these meetings. I digitally recorded all telephone conference calls to be used for later reference and for additional analysis.

### *Semi-Structured Interviews*

This study also employed the use of semi-structured interviews with taskforce members to gain insight into their views about the Taskforce, their definitions of success in a resettlement effort and for individual refugees, the role of their organization in this resettlement, and their views about how this type of taskforce could be more effective. According to Bernard, semi-structured interviews are especially useful in projects

focused on bureaucrats, managers and people in power because they are “accustomed to efficient use of their time” (1995:191). The use of an interview protocol demonstrates that the researcher is prepared and in control of what is to be gained from the interview, but still allows for both the researcher and interview participant to follow new leads (Bernard 1995).

Twenty-one of the 27 taskforce members participated in the interview portion of this study. Of the additional six members, three never attended a taskforce meeting and three never responded to my attempts to arrange interviews. Additionally, the State Refugee Coordinator was interviewed because of her intimate role in the construction of the group, the organization of the meetings, her participation in the meetings and ultimately the dispersal of federal funding from the Office of Refugee Resettlement to many of the organizations represented by taskforce members. The State Refugee Health Coordinator was also interviewed because of her attendance at the taskforce meetings and participation in the Health Committee. Two rounds of interviews were conducted: one while the Taskforce was in existence, and the second in summer 2005 after the Taskforce had made its recommendations. (See Appendix B for a copy of the interview protocol used.) Each interview participant signed a consent form before the interview took place.

The first round of interviews was conducted in English with all twenty-three participants between the months of August 2004 and February 2005. Eight of the interviews took place in person and the remainder were conducted via telephone. Interviews lasted between 30 minutes and one and a half hours.

Interview participants for the first round of interviews broke down as follows:

- Ten were Hmong

- Fourteen were women, including the Hmong chair
- Two mayors
- Eight were affiliated with an MAA
- Six represented local or county government agencies
- Seven represented State government agencies
- Geographically, three represented Milwaukee, two came from LaCrosse, five represented Wausau, three from Sheboygan, six worked in Madison, two represented Green Bay, one from Eau Claire and one represented the Fox Valley.

The second round of interviews was conducted in summer 2005 between the months of June and August with a subset of seven of the original 23 interviewees. These key informants were chosen based upon how informative they had been during the first interview, their attendance at taskforce meetings, gender and ethnicity. These interviews included: three Hmong members, four women, three men, and representatives from five cities in Wisconsin.

All interviews were digitally recorded and later transcribed and analyzed using grounded theory techniques such as open coding, constant comparison, and thematic grouping with the use of Atlas ti qualitative software. This technique was effective for this study because as codes were grouped into themes, the various discourses emerged. This categorization allowed me to develop an understanding of how issues became identified as problems and solutions were proposed. Additionally, the coding system allowed me to identify discourses across interviews, while incorporating the perspectives of multiple participants. As Strauss and Corbin explain, “grounded theories, which are

abstractions quite like any other theories, are nevertheless grounded directly and indirectly on perspectives of the diverse actors toward the phenomena studied” (Strauss 1994:274).

The limitation to fracturing and categorizing data in this manner is that it can lose the contextual relationship that one statement or idea has with another (Maxwell 1998). However, the “memo” function in the Atlas ti software package was valuable in this ethnographic research. After each interview was conducted, descriptive and analytical notes were taken. After transcription, these analytical notes were revised and expanded. These were downloaded into the memo function of the software and continual analytic memos were added as the data were examined in depth.

#### *Pre-Fieldwork Research*

During the summer of 2004, during my fellowship with the Office of Global Health Affairs, I was charged with finding a community in which the Hmong would resettle that would be open to working with OGHA on a new health promotion initiative. I chose to concentrate my efforts on Wisconsin, primarily because it was the smaller of the three states and the one about which the office knew the least. I began by using a snowball technique to conduct fifteen open-ended telephone interviews in June 2004 with service providers in nine Wisconsin communities. Participants included health department personnel, resettlement agency workers, a Hmong doctor, two Hmong mental health workers, a Hmong nurse, an English as a Second Language coordinator, school system personnel, Hmong mutual assistance association workers, translators, interpreters, and local housing personnel. The purpose of these interviews was to study how local communities prepare for a new resettlement and to provide insight into where service

gaps and overlaps existed. These interviews were not recorded; however, I took extensive notes both during and after each interview. I discovered that since the mid-1990s, no Hmong had been resettled in the state. The service networks that had existed throughout the 1980s and into the 1990s had disappeared because no new Hmong refugees were arriving. These interview notes were used as background information for assessing the breadth of topics that the taskforce discussed, as well as acting as a comparison for the preparation work conducted in Wisconsin before any of the refugees had arrived and before the taskforce was convened.

### *Document Analysis*

The final taskforce report to the Governor is the official and dominant discourse in this study. As such, it has been analyzed using the same grounded theory techniques utilized with the semi-structured interviews. Open-coding, constant comparison and the emergence of themes were used to compare the semi-structured interviews with the discourse embodied in the final report. This is effective because it “provides a rigorous and detailed method for identifying categories and concepts that emerge from text”(Bernard 1998:607-608). By comparing these themes and concepts to the semi-structured interviews, the control of the dominant discourse emerged. Additionally, early drafts of the report were used to trace the emergence of these themes and how they evolved over time.

## **DATA AND ANALYSIS**

The Hmong Resettlement Taskforce was not inevitable or destined. Instead, it was a human product that was organized by humans, consisted of humans and made recommendations intended to affect humans. Thus, the Taskforce was inherently cultural. In the following discussion, the Taskforce and the final report that it produced are analyzed as a cultural process. The final report is a blueprint for how the State of Wisconsin should act toward these new Hmong refugees, and in turn, how the new Hmong should act in society. This is the dominant discourse of the Taskforce. Through a combination of participant-observation, semi-structured interviews, and document analysis, I discuss the evolution of this dominant discourse and the restraints that prevented competing narratives from becoming dominant. Whenever possible, I let the taskforce members speak for themselves.

The first section of this analysis discusses how the Governor's initial charge to the Taskforce affected this discourse. Within these written objectives was a tension between long-term and short-term goals that was reflected in the final report, the interviews, and the taskforce discussion. The underlying assumption that the Hmong elite on the Taskforce could adequately represent the incoming refugees also affected the way that the Taskforce saw its charge and prioritized needs for these newcomers. Finally, this section concludes with an analysis of the definition of refugee success as described in the report. During participant-observation and interviews with taskforce members, it became apparent that competing definitions of success caused some issues to become contentious. The example of drivers' licenses is used to illustrate these competing narratives.

The second section focuses on additional constraints on the narrative. These are divided into two categories. Procedural constraints are those that governed how the Taskforce conducted itself. These include the breakdown into workgroups, as well as time and membership constraints. Macro constraints were caused by the larger context in which the Taskforce operated. These included the Wisconsin economy, the budget climate within the State, and the State's existing social service network.

The third section of this analysis contains a discussion of the roles that organizations play in a resettlement such as this one. The final report reflects the "ideal" relationship among MAAs, resettlement agencies, and government social service providers. However, the taskforce members made recommendations that would help refugees in the "real" system in which their own organizations must operate. If the policy recommendations put forth in the final report were enacted, these organizations would eventually become the implementers. Therefore, the way that the dominant discourse defines their roles in this ideal vision was vital to them. This section concludes with a discussion about the applicability of the taskforce report and its recommendations to the resettlement of other refugee populations.

The final section of this analysis focuses on intended and unintended consequences of the Taskforce's policy process. This includes a discussion of the political meaning of the Taskforce for the Hmong community in Wisconsin. Additionally, this section reveals positive outcomes of the policy process itself.

### Dominant Discourse

During the initial meeting on July 21, 2004, Wisconsin Governor Jim Doyle laid the foundation for the Taskforce that included five objectives:

- Study the data about the Hmong population, and learn about their demographics, distribution and needs;
- Examine the efforts of DWD, WHEDA, DHFS and local private and public agencies in the resettlement process;
- Provide a link to Hmong communities so that local agencies and individuals can have their voices heard by policy makers in the Capitol;
- Make recommendations for changes in policy, new activities, and partnerships to improve the resettlement process; and
- Tell the story of the Hmong in Wisconsin as a success story in the history of Wisconsin. (Hmong Resettlement Taskforce 2005:2)

These objectives were broad enough that the Taskforce could have approached them in a variety of ways. During early interviews with taskforce members, three distinct approaches to policy change emerged. For some members, this was an opportunity to completely reform the state's resettlement system and to lay out an ideal blueprint for the resettlement process. Other members wanted to work within the present system. They envisioned the Taskforce examining the resettlement system in Wisconsin and recommending incremental changes that would permanently make it more effective. These changes would not necessarily involve legislative action, but could instead be made within the state's bureaucracy. A third subset of members sought only to temporarily modify the present system to accommodate these incoming Hmong refugees.

These approaches reflect an ongoing tension within the resettlement system between short-term and long-term goals. A bifurcated federal funding scheme, which separates initial resettlement from ongoing refugee services, contributes to this tension.



The Department of State only provides funding for the first 30 days after arrival. The Office of Refugee Resettlement, through the State Refugee Coordinator, provides grants to social service programs designed to aid refugees during the first five years after resettlement. However, refugee populations have continuing needs long after these five years elapse. As one member said, “They want a plan for dealing with the refugees from Wat Thom Krabok, and we’re going to try and give them that. But then we have to go back to our agencies and still have all of the other issues and all of the other people there that haven’t been addressed.” Another taskforce participant said: “This is one opportunity, even though we were talking about new Hmong resettlement, ... to get the Governor and the Cabinet to focus on integration issues. Important recommendations for me were things like... to get DHFS to fund the mental health project. Do the new Hmong need that? Hopefully not. But we know there’s a lot of Hmong who do need it.”

This separation between long-term and short-term resettlement goals within the policy structure was never discussed in the general taskforce meetings nor in the three committees in which I participated. However, the split was built into the taskforce membership itself. The resettlement agencies, school systems, public health officials, housing experts, and job training organizations represented on the Taskforce are all focused on immediate needs. Mental health workers, college access officials, and the MAAs are involved with refugees in a much longer timeframe.

In the interviews, many participants expressed the need for an integrated long-term and short-term approach, despite the policy system that separates them. For example, one taskforce member described the need for education, job-skills training and language training. “We have to do some high impact things up front to soften the impact

of coming to the United States, but there is no way you could escape long-term needs. This is not [a situation in which] they get a job and then you forget about them. [Their needs are] too complicated for that.”

The final report has elements of the three policy change approaches, and thus reflects both long-term and short-term needs. Table 1 contains an outline of the recommendations constructed by the Taskforce, which I have broken into these three policy change approaches.

As Table 1 illustrates, the policy change approach is centered on long-term needs. The incremental change approach includes both long-term and short-term needs, and the emergency measures approach focuses on short-term needs. In constructing an ideal blueprint for resettlement, the policy change approach, a new statewide mental health program is proposed. Additionally, a recommendation on housing outlines a new program that would encompass job training, language training, and home-ownership.

Table 1. Taskforce Recommendations Divided by Policy Change Approach &amp; Timeframe

	<b>Policy Reform</b>	<b>Incremental Change</b>	<b>Emergency Measure</b>
<b>Education</b>			
Support superintendent's 2005-2007 budget	Not classified because this was a pre-existing policy proposal that the committee is supporting, not proposing.		
Increase number of ESL classes at technical colleges		Short Term	
<b>Employment</b>			
Employment orientation			Short Term
Job training program			Short Term
Partial wage subsidies			Short Term
Employer advisory taskforce			Short Term
<b>Housing and Transportation</b>			
Increase federal and state Section 8 funding	Long Term		
Emergency housing assistance program			Short Term
Identify surplus properties for immediate occupation			Short Term
Revise Hmong drivers' manual and drivers' test		One time only	
Employment/ model housing program	Long Term		
<b>Health and Dental Care</b>			
Increase MA reimbursement for dental	Long Term		
MA reimbursement for interpretive services	Long Term		
Link refugees with culturally appropriate health education.		Long Term	
Build surge capacity into public health system	Long Term		
<b>Family Issues</b>			
Orientation for new refugees and anchor families			Short Term
Provide bilingual case management		Long Term	
Assist elderly attain citizenship		Long Term	
Support culturally and linguistically competent domestic violence services		Long Term	
<b>Mental Health</b>			
Develop statewide culturally competent mental health services	Long Term		

Other recommendations suggest incremental changes to the current resettlement system to make it more effective. For example, the taskforce report proposes that additional English classes be added to the technical college network across the State. Other recommendations include a re-translation of the driver's manual to replace the poor quality of the one in use, and assisting elderly and disabled refugees attain citizenship within the current policy structure.

The report also recommends a number of short-term measures designed to specifically target these new Hmong refugees. For example, the report suggests that housing authorities should identify surplus units for immediate occupancy by the new refugees. A short-term vocational skills training program is also proposed.

Most taskforce members felt that the use of all three policy change approaches was appropriate because of the complexities of resettlement. For example, one taskforce member acknowledged that "even though from the Governor's framework it was a short-term taskforce to deal with a crisis, it appropriately addressed some of those longer-term issues." Throughout this analysis, the tension between short-term and long-term goals resurfaces repeatedly.

### *Embedded Assumptions*

One role that anthropologists can play in the study of policy is to reveal the underlying assumptions upon which policy-makers rely (Wright 1995). Embedded in both the Taskforce itself and the report that it produced was the assumption that the Hmong members of the Taskforce could speak for the incoming Hmong refugees and their host families. This assumption became "common sense" among members. Neither the main Taskforce nor any of the three subcommittees in which I participated discussed

this issue. No site visits or interviews with the newcomers or their host families were conducted. An important function of the Taskforce was to set priorities for the new refugees. This embedded assumption influenced both what was discussed and the way that these priorities were framed.

I question this assumption for a variety of reasons. First, the taskforce members were among the Hmong elite. They were leaders in the community, including the first Hmong school principal, one of the first Hmong elected to public office, and the first Hmong to work on a state gubernatorial campaign. Additionally, all taskforce meetings and correspondence were conducted in English, requiring a cultural and linguistic competence that many of even the early Hmong refugees do not possess. Finally, these Hmong immigrated more than 20 years ago into a country that had no infrastructure to provide for their unique needs. Their refugee experience was very different from the newly arriving refugees, who would stay with relatives upon arrival and would be able to gain access to some services through bilingual, bicultural providers. The challenges of the refugee experience for the newcomers could potentially be unlike those encountered by the earlier refugees. Finally, culture is not static. For both the Hmong in the Wat and the Hmong in the United States, norms have changed. Though both groups are Hmong, what it means to *be* Hmong may be very different for the two groups.

Because the Hmong on the Taskforce were former refugees, it was assumed that they understood both the cultural adjustment and the refugee experience that these newcomers would undergo. As one non-Hmong member explained, “No one can understand as well as a person who has gone through an experience. None of the rest of us, no matter how much we’ve worked with the Hmong community, have an idea of what

it is like to go through a refugee experience.” One female Hmong member said, “I think that I’m just an extension of the people that we are trying to help here... I’ve become a voice for Hmong new arrivals, voicing their concerns, voicing their needs and bringing their experiences to the forefront.” As these quotations illustrate, many taskforce members felt that Hmong members of the Taskforce adequately represented the anchor families and the incoming refugees. An important role for anthropologists in the study of policy formation is to determine to what extent the policy narrative is defined by “the people”, or in this case, the new refugees, and to what extent this narrative is being placed upon them (Wright 1995).

Throughout the interviews, Hmong members expressed how different their life and their refugee experience were from that of these new arrivals:

There is quite a difference in terms of the refugees that are arriving now and those of us who came many years ago. ... We didn’t have to stay in a refugee camp very long. Our experience in the refugee camp was probably quite different than this refugee group that has been living [at the wat] in Thailand for the last ten, 20, nearly 30 years. So they do have different life experiences as refugees than many of us who came years ago.

As the above quotation illustrates, the new Hmong refugees had been living at Wat Tham Krabok for decades. Many, in fact, had been born and raised in the camp and had never experienced life in Laos or life outside of the confines of the camp. In contrast, the Hmong on the Taskforce were generally among the first to emigrate from the refugee camps in Thailand and all had experienced life in Laos and outside of the camps.

Additionally, some Hmong taskforce members discussed how culture does not remain static. Two examples follow:

I think the new Hmong that are coming here may find themselves frustrated with the change that we have already made in this country. [As part of] their preparation for their new life here, they need to

accommodate the changes already made here. When they come here, they are going to have to look at the family that they have here and not try to apply the common law that they have in Thailand or in Laos, here in the United States.

The Hmong here and the new Hmong, they are like two different people now. [The former refugees] tend to be Americanized. The kids are Americanized, and the newcomers want it to be like in Thailand. ...The Hmong society is different from here, I think, as far as how you treat your kids and each family member's responsibility and accountability.

This second speaker additionally expressed the different expectations of the two groups.

“We were careful and worked hard because we wanted to make sure that the relatives that were left behind could come after. But this group, when they come in, they're the last group...They expect the people here to take care of them. They want the [anchor family] to take care of them.... Expectations are different; it's a different culture from the camp and from here.” As these quotations illustrate, Hmong culture has not remained static, either in the camp or in the United States. As such, additional burdens will be placed on the new Hmong and on the anchor families when these differences become apparent.

As stated earlier, though Hmong in the United States practice traditional forms of decision-making, often leadership positions are based on an individual's education and knowledge of American culture rather than on their status as the household's eldest male member. In adapting to American life, family practices have also changed. Early marriage and polygamy are common practices in traditional Hmong culture. However, they are illegal in the United States. Additionally, the social service network in the United States defines *family* as a nuclear family for the distribution of goods and services. In many ways this has undermined the Hmong conception of family as the extended family (Chan 1994).

In the Taskforce, it was also assumed that because many of the Hmong members worked with MAAs and thus interacted with the anchor families and newcomers, they could adequately represent newcomers' needs. For example, one non-Hmong member said, "I think the Hmong leaders from the MAAs know the needs of these folks better than anyone else." A Hmong member explained, "I think [a taskforce] does take people who work hands-on and who actually have that experience to get involved because they are speaking on behalf of the experiences that people are having in real life." Some of the MAA representatives did work closely with the new Hmong refugees. However, others were more administrative and in charge of program development and grant management rather than working day-to-day with the new refugees. Additionally, at least one MAA representative expressed his feeling of distance from the new refugees: "Sometimes I forget I am Hmong. Sometimes I forget I am a refugee. When these people come, I sometimes tend to treat them as an outsider and not as an insider." As this quotation illustrates, some Hmong on the Taskforce felt that they were different from the incoming refugees.

Only one taskforce member, a Hmong female, questioned these assumptions. Her expectation when the Taskforce was formed had been that members would visit newcomers and anchor families at MAAs across Wisconsin to gather information. As she said, "All we did was meet and talk, talk, talk. We don't know realistically ... how it *is* because we haven't seen it. All we did was sit and talk, but we could have gone out and seen it for ourselves. Maybe then we'd have had better ideas." As this interview revealed, not all Hmong members felt that the Hmong on the Taskforce adequately represented the incoming refugees and their anchor families. When asked about this



assumption, the state refugee coordinator said that in the past her organization had conducted focus groups and administered surveys to refugee populations but that these methods were not effective in getting a true grassroots perspective. The question remains, however, how these refugees could have been adequately represented.

### *Economic Self-Sufficiency*

The dominant discourse, as presented in the final report, defined refugee success in economic terms. In describing the Hmong population in Wisconsin, the report states:

These Hmong refugees and former refugees have become very successful. They have a median household income of \$36,000, less than 1% of households receive W-2 assistance, and more than 55% of families own their own homes. Hundreds of businesses in Wisconsin are owned by Hmong (2005:7).

In other sections, the report states that “Hmong refugees have successfully obtained jobs and become productive citizens of their new communities,” and repeatedly mentions the goal of “economic self-sufficiency as rapidly as possible”(2005:12-14). An introduction to the Taskforce’s recommendations includes the following statement:

“Through this comprehensive package of services, refugees could move from unemployment and subsidized rental housing to financial independence and home-ownership” (2005:15). Additionally, the taskforce report describes the services necessary for the “new Wisconsin residents to reach the American dream of financial security, home ownership, and continuing education” (2005:12). As these statements indicate, success and economic self-sufficiency became synonymous in taskforce discussion and in the final report.

This focus on success in economic terms is partially a result of the international resettlement system. Anthropologist Liisa Malkki (1995) argues that the international

definition of the term *refugee* naturalizes the contemporary geopolitical order of sovereign nation-states. Essentially, everyone has a place; everyone belongs somewhere. Once they become stateless, people are normatively deviant. Without a country, the refugee becomes less than a full-human (Harrell-Bond 1992). As Keely (1996) explains, the nation-state system assumes that each person is the responsibility of their own country. Refugee flows contradict this concept and thus threaten geopolitical structures based upon the sovereign state.

After refugees have established their helplessness and statelessness to an American official, they can be admitted to the United States for resettlement. Upon entering the U.S., the policy discourse changes. The refugees are no longer stateless. Because the United States has given them a place in the world, they are no longer helpless.

This new policy discourse is part of the larger neo-liberal framework that has dominated many social programs in the United States since the mid-1980s (Morgen and Maskovsky 2003). Once they arrive in this country, resettlement policy stresses personal responsibility and discourages refugees from reliance on public assistance. Neo-liberalism views individuals as responsible for utilizing opportunities (Christie and Sidhu 2004). This framework holds refugees responsible for developing the opportunity given them when they are granted residency in the United States.

As Senator Orin Hatch's statement in a 2002 Immigration Committee hearing asserts, by simply being in the United States, refugees' lives are inherently better:

Each year, as a consequence of the refugee program, thousands of lives are saved and bettered through relocation into the United States where immigrants take refuge under the blanket of liberty and freedom that our

Constitution provides. In short, generations are changed for the better, one life at a time (Subcommittee on Immigration 2002:75).

In exchange for no longer being helpless, it is the refugee's responsibility to not become a burden. Many of the interviews echoed this belief. For example, one member said that the goal of the Taskforce was to "integrate them as quickly as possible into our system so they don't become a burden to the tax payers." Another member said that the Taskforce was convened to "facilitate the ability to incorporate these people into our state without being an overwhelming burden on local communities or state resources." A Hmong member of the Taskforce said that he hopes the new refugees "can be self-sufficient and don't rely on social services all the time." A social service official on the Taskforce described the goal as "making sure that people have access to our programs and ... there are resources for them to become contributing citizens of the state of Wisconsin." All of these quotations refer to the high rate of welfare dependency that the Hmong demonstrated in the 1980s. Participant-observation and the interviews revealed that both Hmong and non-Hmong members of the Taskforce were aware of this legacy and were anxious to show that the Hmong community in Wisconsin had become "productive members of society" and that the new Hmong would not exhibit the same high rates of dependency on social service programs.

As stated previously, refugees are admitted on humanitarian grounds, with no requirement that they demonstrate economic independence. However, the federal resettlement program pushes refugees to gain economic self-reliance within months of arrival in this country. One taskforce member representing a resettlement agency explained: "Technically our goal is self-sufficiency, meaning employment. That's entirely how we are based, and that is what we are judged on." Federal policy requires

that volags provide access to a number of services for new refugees, which include orientation sessions, ESL classes, social service programs, and medical screenings. However, the volags' ability to resettle future refugees is entirely contingent upon employment statistics of resettled refugees. Additionally, the welfare program in the state, W2, has a two-year lifetime cap on public assistance. This puts additional pressure on the refugees, and on the service providers dependent upon state and federal funds, to find employment as soon as possible. This contributes to the dominant discourse that equates independence with a job. For example, a Hmong member described the main goal of the Taskforce as "helping the new refugees try to reach their employment goal, self-sufficiency."

Despite this dominant discourse that equated *self-sufficiency* solely to employment, many on the Taskforce had a broader definition of what encompasses self-sufficiency. For example, one Hmong member discussed "economic and *social* self-sufficiency." An MAA director described his role as helping the new refugees "maintain their cultural identities and become self-sufficient, become tax-payers and homeowners." Another taskforce member equated self-sufficiency with control: "control of their destiny and the ability to act independently. [Ideally the refugee] obviously has a job, has opportunities for continuing education and has the beginnings of assets and savings." As these interviews revealed, most taskforce members had a broader and more long-term definition of success and self-sufficiency than the final report reflected. Because of the federal policy structure, however, these competing definitions were suppressed in the final report.

These competing narratives that contain a broader definition of self-sufficiency and independence manifested themselves in the taskforce discussions about drivers' licenses. While most of the Hmong members regarded driving as a priority for the incoming refugees, some of the state and local service providers viewed it as a waste of resources. As one Hmong member explained, "For these individual refugees to be successful, you can have an overall plan that provides for basic needs, but a driver's license is a good example. You need to obtain that as a means to get a job and move on." Another Hmong member equated driving with independence. His goal in working with the new refugees is to "get each person to the point where [they are] able to get a job and get a car and be able to live independently. Freedom, that's what it is." By equating driving to independence and then to freedom, this interview participant revealed that obtaining a driver's license is far more than a practical necessity for refugees. It is instead a means for the refugees to obtain control in their lives.

However, some members, consistent with the dominant discourse equating self-sufficiency solely to having a job, thought that driving should not be a priority. Because a driver's license was not necessary for jobs in most areas, they believed that the Taskforce should not focus on it. This issue also reflects the tension between long-term and short-term resettlement goals. As one member said, "[The new refugees] can't afford a car right away. [They] can't afford the insurance right away. We are more concerned with housing issues, with communicable diseases [than in] getting families a drivers license. We'll arrange mass transit. It's a real difference in priorities in terms of what's important." Another member recalled the debate about driving: "Well, the [Hmong] were saying, 'yeah, that's a real need.' Cars are important to them... [there was a taskforce

member] with apparently not a lot of knowledge of the community saying, well they don't really need to have that." These quotations illustrate the tension caused by conflicting definitions of self-sufficiency.

One Hmong member summed up the issue of drivers' licenses:

I would like to have the federal government or the State invest money to help the people be able to drive so they can go to work. ...Is that a realistic goal? Eventually, that was not a very high priority for the Taskforce, but I think that it is a very high priority. Using myself as an example and being a refugee myself in the same position they are, getting a drivers license and a car was the number one priority for me. But again if you set the goal of getting a driver's license for every employable refugee, it's going to be a lot of money that has to be invested. Therefore [the final report left] it up to the individual and focused more on training and something that is doable.

The final report reflected a compromise between the two viewpoints by recommending simply that the state driver's manual and written driving tests that were originally translated into Hmong in the 1990s be revised and re-translated into Hmong and distributed across the state.

### Narrative Constraints

Any sort of structure inherently limits possibilities. However, lack of structure can also mean lack of effectiveness, and therefore also lead to limits. The limits placed on the Taskforce were not inevitable or fated. Instead, they were the result of choices made by individuals. These choices put constraints on the nature of the dialogue that took place within the Taskforce, and ultimately affected the final report and policy recommendations that the Taskforce made.

As discussed above, the Governor's list of objectives affected the direction that the Taskforce took. However, these objectives were only a broad outline of information to be addressed by the Taskforce. The manner in which these objectives were met was at

the discretion of the Taskforce. Both the taskforce chair, Kaying Xiong, and the State Refugee Coordinator, Sue Levy, exercised considerable power over the manner in which the Taskforce operated. Together, they scheduled and planned for the meetings, which included the length and frequency of full Taskforce meetings and the creation of each meeting agenda. Additionally, the chair facilitated each meeting and thus controlled the length of discussion on a particular topic.

#### *A Typical Taskforce Meeting*

As stated previously, five taskforce meetings were held between July 21, 2004 and February 23, 2005. Four took place in Madison, Wisconsin and one took place in Wausau, Wisconsin. The meetings lasted three to four hours and were arranged by the State Refugee Coordinator and her staff. Prior to the meetings, name cards were placed around the conference tables that were arranged in a circle by staff members, leading participants to sit where they were assigned. Additionally, extra seating was available at every meeting for presenters, ad hoc members, and the public.

The meetings began with an update from the State Refugee Coordinator about the number and location of Hmong refugees that had arrived in the state to date. Additionally, she discussed funding issues and upcoming grant opportunities. This update was followed by presentations from state agencies about topics that could affect the taskforce recommendations. For example, at the third meeting a representative of the Department of Public Instruction discussed ESL financial support and the way Hmong students who arrived late in the school year would be counted for federal funding purposes. At the second taskforce meeting, representatives from WHEDA discussed housing resources in the state. During the initial taskforce meeting in July, a team of

teachers who had visited the wat in Thailand presented information about the educational background of the Hmong refugees. According to the State Refugee Coordinator, these speakers were chosen by her and her staff. If a committee requested information about a particular topic, she would find someone to present information. Otherwise, she chose presenters based upon topics that she felt were important.

Each taskforce meeting also included an update from each committee chair about the ongoing prioritization of issues within each committee. Typically, the meetings also provided 30 to 60 minutes for committee meetings. Because I was involved with three of the committees, it was difficult for me to divide my time and still maintain a presence on each committee. Similarly, several taskforce members participated in two committees. During interviews, they discussed the difficulty that these committee meetings posed for them because they missed key discussions that took place during this time in some of the committees.

Taskforce meetings usually ended with a group discussion about future steps for the Taskforce. Initially, this involved discussion about committee deadlines and reporting protocols. In later meetings, this time was spent discussing how the final report would be presented and ways in which the taskforce could follow-up on its policy recommendations to monitor implementation.

As with any group, some members dominated discussion while others were quieter. However, I noted that during the taskforce meetings, several members never spoke at all. This was particularly true of some of the Hmong men on the Taskforce. Individual interviews with these members revealed that they either felt that they had nothing to add to the discussion or expressed their opinions during committee meetings



and felt that the committee chairs could adequately represent their views during taskforce meetings. Additionally, during full taskforce meetings, members typically, though not exclusively, limited their comments to topics that fell within the issue area of their committees. As a result, there was little cross-committee discussion of issues.

### *Committee Constraints*

During the first taskforce meeting on July 21, 2004, members brainstormed about issues that would affect the incoming refugees. These issues were then grouped into six categories that became the six committees of the Taskforce: Health, Family Issues, Housing and Transportation, Economics, Mental Health, and Education. Members were asked to choose a committee, and volunteers within these groups became committee chairs. These workgroups met outside of the larger taskforce meetings, at the discretion of the chairs. During each full taskforce meeting, committee chairs presented a five-to-ten minute summary of the issues that their group was tackling. I believe that this was meant to be a time for other taskforce members to comment on these issues and make suggestions to the committees. However, little feedback was given during these presentations. The policy recommendations of the Taskforce came directly from this committee work.

Mancur Olson's (1965) classic study of group size and cooperation found that smaller groups are more effective than larger groups for two main reasons. First, in small groups, non-participation is more obvious, forcing members to contribute. Second, because there are fewer perspectives, it is easier to reach agreement upon common goals. It is not surprising, therefore, that the Taskforce divided into smaller workgroups to develop recommendations in particular policy areas. As one MAA director explained,

“when you want to get things done, you don’t get too many people involved. If you get too many, then you have conflict.”

Once the brainstorming session was completed and taskforce members had joined the six committees, these workgroups and their division of issues became a “natural” part of the Taskforce. Because some issues spanned across this categorization, it made coordinated discourse difficult. For example, childcare is both a family and an employment-related issue. English language training is an education and an employment issue. Within the Hmong culture, wellness spans both physical and mental health. Additionally, the categorization caused the taskforce members to narrow their perspective to these six topic areas. As a result, issues that fell outside of the range of these six categories could not exist within the Taskforce’s discourse.

During open-ended interviews conducted prior to the formation of the Taskforce, I interviewed community leaders expected to be involved with the new Hmong refugees. These leaders raised issues relating to the new refugees with which they had concerns. The Taskforce committee discussion included many of these issues such as the lack of affordable large family housing, job orientation needs, and the decrease in public assistance allowances. However, other issues that these leaders raised fell outside of these narrowly defined committee categories, such as the need for prenatal care, the high rate of teen marriage and pregnancy within the Hmong community, pressure on anchor relatives, and youth integration with the “Americanized” Hmong youth. Because they did not fall under the purview of these six topics, they were not discussed.

The committee chairs controlled the frequency and type of interaction that their committees had about the issues. Each of the three committees in which I participated

operated quite differently. One committee conducted a conference call every three weeks throughout the duration of the Taskforce. A second committee only had two conference calls outside of full taskforce meetings. The third committee conducted conference calls every four-to-six weeks and had a full-day, face-to-face meeting early in the Taskforce timeframe to explore the issues. The committee chairs also exercised considerable power over the recommendations that their workgroup produced.

Most taskforce members felt that they were able to express their opinions and affect the recommendations that their workgroup produced. However, several members in one of the committees felt that the chair wrote the recommendations for their committee with almost no input from other members. One member described the situation: “We had almost no discussion. That was what was really my big concern or regret. Our chairperson was going to get us together in a conference call, and it never happened. I fell behind because, in waiting for the chair to convene us again, I didn’t put forth anything. And all of a sudden, time was up and we hadn’t met again.” Other members of this same committee also felt that important issues were not addressed in the recommendations because they never got the chance to discuss them. As one member said, “[the chair] pretty much wrote the whole thing.” Interestingly, in an interview, the chair told me that “pretty much the whole committee was in agreement” about the policy recommendations. These interviews revealed that without guidelines for how to conduct the workgroups, some issue areas were inadequately discussed.

As shown above, the simple act of breaking into committees constrained some potential narratives. By establishing policy categories, issues that did not fall within these six areas became extraneous. Additionally, the power that the committee chairs

exercised over the amount and type of discussion also affected which topics received the most attention in the final report. The full taskforce did not revisit the issues raised in the initial brainstorming session that led to the creation of the six committees. Instead, each committee was solely responsible for prioritizing issues that fell within its area. By returning to the initial list before a draft form of the final report was created, the Taskforce may have considered more of these issues that fell outside the narrow confines of the committee discussion.

### *Time Constraints*

Time caused constraints on the narrative and on the Taskforce's effectiveness in three ways. First, some members felt that the short duration of the Taskforce did not allow enough time for issues to be investigated and debated fully. Second, the timeframe of the Taskforce did not correspond with the state budget cycle. As a result, recommendations that would have required legislative action were not even considered in the 2006 budget negotiations. Finally, when the taskforce first convened, the first refugees had already arrived.

By the time the final report was released in February 2005, more than 70 percent of the expected Hmong had already been resettled. In practical terms, this made some of the taskforce recommendations, such as an orientation program for new refugees and their host families, irrelevant. The state, through a federally funded grant, did eventually implement a series of orientation sessions in some communities beginning in fall 2005, more than a year after many of the refugees had arrived. However, these workshops were focused on more long-term needs and not on pre-arrival coordination with the anchor family that the Taskforce recommendation had stressed.

This timeline also played into the struggle between short-term and long-term resettlement issues discussed previously. As one member explained, “I think this taskforce is too little, too late for the Hmong. We should have been doing this beginning in January [2004] ...when you’re planning recommendations, it helps if you can have those recommendations made before two-thirds of the population has already arrived.” Because of this timing, some members were more inclined to focus on long-term issues that affect the entire Hmong population rather than targeting recommendations specifically at the new refugees. This affected the three policy change approaches discussed previously and outlined in Table 1.

### *Macro Constraints*

The political and economic climate in Wisconsin played a significant role in the Taskforce’s recommendations. As discussed previously, the social service networks that had been in place for the Hmong began to deteriorate in the late 1990s when no new Hmong were immigrating to the United States. This was an unexpected resettlement that threatened to strain local and state resources.

One taskforce member explained that “this influx of refugees is coming at a time when all the supports that had been built have really been decimated as far as the economic resources.” Another member explained, “We’ve had a lot of lost jobs, and people struggling.” A third member called the issue of affordable housing “political dynamite.” Trying to find housing for the new refugees was very difficult when “there are years-long waiting lists for low-income, homeless people to get housing subsidies.” This economic environment put additional focus on equating employment with self-sufficiency as discussed previously.

As most taskforce members explained, the State had a large budget deficit and funding for social service programs had decreased dramatically over the previous five years all across the state. Additionally, the new refugees were only going to be resettled in about twenty communities in Wisconsin. One taskforce member speculated that state representatives from the other parts of the state would not support programs that would have no impact on their own constituents.

A committee chair explained that in this economic climate, making recommendations for expensive new programs was unrealistic: “There are places we don’t go with our thought process because where would we get the money to do something like that?” Another taskforce member discussed the frustration of making recommendations with no guidance from the Governor’s office about budget decisions. “We had no idea how any recommendation would be paid for. That makes it difficult to ask for things and still be seen as credible in a budget situation as serious as Wisconsin’s.” Participant-observation of the committees and individual interviews revealed that funding was one of the largest constraints on ideas and recommendations.

In interviews, other participants also talked about making “actionable” recommendations. For example, members of the mental health committee felt constrained by the lack of bilingual, bicultural mental health professionals in the state. Similarly, a member of the education committee talked about the advantage of bilingual education and how much the committee would have liked to recommend an increase in the number of bilingual teachers in classrooms. However, these professionals did not exist. As she explained, “you don’t go there because you know it’s not a possibility.”

Without an infrastructure equipped to provide particular services, the Taskforce was constrained in the types of recommendations it could make.

### The Role of Organizations and Individuals

Taskforce members had a variety of reasons to be personally concerned about the policy discourse that the group constructed. If enacted, the Taskforce's recommendations would not only affect the arriving Hmong, but also the organizations that would aid the newcomers in their adjustment to life in Wisconsin. Therefore, the final report was a blueprint for both the new refugees and for the organizations and individuals responsible for helping them. Because the Taskforce was composed of individuals who would be responsible for implementing many of the proposals, members had a direct stake in the way problems were framed and solutions proposed. This is not to say that the taskforce members manipulated discussion and recommendations out of self-interest. However, it is important to note that the taskforce report potentially affects not only the lives of the new Hmong refugees, but the lives of the people involved in the policy process.

### *Ideal and Real Resettlement Roles*

The final report of the Taskforce includes a two-page description of the "ideal" relationship among resettlement agencies, the federal government, state and county social service agencies, the Office of Refugee Resettlement, and the Hmong mutual assistance associations (MAAs). It is useful to differentiate between the "ideal" and the "real" in these relationships. By ideal, I am not referring to a perfect system, but instead to the way in which the resettlement policy discourse defines these relationships.

Anthropologists differentiate between ideal and real culture. "The ideal culture consists

of what people say they should do and what they say they do” (Kottak and Kozaitis 2003:19). Real culture is what people actually do, as observed by the anthropologist.

Because I was unable to observe program implementation at these organizations, I did not directly observe the “real” system. However, through the interviews and participant-observation during the committee meetings, I learned that there was confusion among taskforce members about the roles of these various organizations in a resettlement. Despite an “ideal” system described in the final report, taskforce members explained that these roles are not so clearly defined. One member stressed the importance of “a general understanding of what happens to people when they get here. Who facilitates all of that?” Another member explained her agency’s difficulty in answering that question:

We had to learn what each agency saw their roles and responsibilities as being. That was very unclear when this whole refugee resettlement process started. Our staff thought that the volags, that had the contract with the federal government, were responsible for much more than they actually are. So we learned that pretty quickly and had to change our expectations.

Through the process of the Taskforce, some members gained a better understanding the roles of these organizations in a resettlement.

The report also reflects the large MAA presence on the Taskforce. For example, the employment section of the final report states that “success [of this proposal] depends upon the proven leadership and active participation of mutual assistance association staff” (2005:12). Additionally, all six committee sections of the final report recommended active partnerships with MAAs. One Hmong association executive on the Taskforce felt that this was a positive step for these organizations: “The MAAs are mentioned frequently and time after time in the report. It certainly encourages or



suggests that all resettlement efforts in the State should be working closely with the local MAAs in order to be effective in helping those serving refugees.” However, another taskforce member described sections of the report as “somewhat self-serving to the Mutual Assistance Associations”. Though this taskforce member felt that the MAAs play an important role in resettlement, he worried that creating special programs for the Hmong would take funding away from other populations and cause political tension for the Hmong. He explained, “any time you single out a population for special funding and you have other people throughout the state in very similar situations, you’re asking for trouble.” In spite of this hesitation, the majority of taskforce members stressed the importance of MAAs. Phrases such as “crucial” and “vital” were used repeatedly when describing the role that MAAs should play in a resettlement. Through participant observation and the individual interviews, it became apparent that in Wisconsin, the Hmong MAAs have become the key organizations to delivery services to the Hmong population.

#### *Usage with Other Refugee Populations*

In many interviews, taskforce members, both Hmong and non-Hmong, expressed the hope that the taskforce report and its policy recommendations could be used for the resettlement of other refugee populations. For example, the Refugee Health Coordinator said, “I saw a broader implication beyond the Hmong refugee resettlement because...we anticipate that we’re going to see future refugee resettlement efforts and ... anything developing out of this taskforce should have applicability no matter what refugee population we’re going to be working with in the future.” A Hmong member hoped that “whatever recommendations we make can be applied to other populations as well.” An

MAA director said, “Hopefully this process won’t be used only for the Hmong but for any new arrivals who come to the state.” Participant-observation revealed, however, that other refugee populations were almost never discussed, and the applicability of these recommendations to other populations was not a factor in the way that they were constructed.

Several taskforce members explained that the recommendations would be applicable to other populations because all refugees face similar needs in terms of employment, housing and health. Additionally, one taskforce member explained that “the barriers to service” are similar for all refugee populations. For example, “issues of finances, of transportation, of language, of adequate translation and interpretation and then the cultural barriers.” Another taskforce member expressed similar thoughts:

If we had a large influx of say Somalis, I think it would be very applicable to use some of the same recommendations and thought processes for any group of people, because none of this is really specific to just Hmong families. A lot of it was just the basic things like housing and education and healthcare, and all people need that. I think it would be very applicable to any group that comes in, with a little bit of tweaking.

While the problems that all refugees face are similar, the solutions are not so universal. The solutions proposed in the taskforce report require an established, ethnic-specific resettlement infrastructure to provide bicultural, bilingual services. When examined independent of the entire document, many recommendations would positively impact any refugee population. However, the final report stresses service delivery through the MAAs and through bilingual, bicultural providers. The only MAAs in the state of Wisconsin are Hmong. In recent years, a few of the MAAs have included programs for other ethnic groups. For example, one MAA had a Russian-speaking caseworker for a few months to aid refugees from the former Yugoslav states. Another

MAA runs a housing program that serves both the mainstream population and the Hmong in the community. However, these are exceptions. Most MAAs are entirely focused on the Hmong in their communities. The taskforce report relies heavily on the role of MAAs in resettlement and the need for bicultural, bilingual service provision. In Wisconsin, these two provisions are currently only possible for the Hmong population. Therefore, the very things that make these recommendations appropriate for the Hmong make them unrealistic for the resettlement of other populations in Wisconsin without considerable alteration. However, in other states that do have a significant infrastructure of MAAs for other refugee groups, these recommendations could be quite useful.

#### Intended and Unintended Outcomes

This study was not designed to be an evaluation of the merit and worth of the Taskforce and its recommendations. Additionally, this was not an evaluation of the implementation of these recommendations. Instead, this study was intended to be an ethnography of the process through which the Taskforce created its recommendations. In the following section, I discuss how the policy process itself was productive. I divide this accomplishment into three categories. First, the Taskforce itself created real-time feedback loops for at least one of the committees, which aided in the resettlement of these new Hmong refugees, irregardless of the committee's recommendations. Second, the announcement of the Taskforce worked as a catalyst in some communities for local action. Third, the existence of the Taskforce was important politically for the Hmong community.

### *Taskforce as Successful Process*

In some ways, the taskforce meetings and committee work itself helped the taskforce members in this resettlement. When refugees first arrive in the United States, they receive a health screening in the local community to assess any communicable diseases or long-term health problems that they may have. Because Hmong were coming to so many different communities, this was very difficult to coordinate. Due to the timeframe of the Taskforce, these screenings occurred while the Health Committee was active. The committee meetings became a forum for the coordination of these screenings and to disseminate information about communicable diseases that were being identified among some of the refugees. This helped health workers to revise the screenings so that they would be more effective.

Additionally, several taskforce members spoke of increased communication and information-sharing in other areas. One member said that “being in the same room with people and trying to have a uniform service delivery across Wisconsin” was the most helpful part of the Taskforce for him. Another member agreed: “Cooperation among agencies seems to be improved when you have such a group come together to share information, ideas, and suggestions.” The taskforce process was useful, not necessarily based on the originality of the ideas it created, but because it established a consensus around a set of ideas.

### *Catalyst for Local Action and Cooperation*

Other taskforce members described the Taskforce as a catalyst that either encouraged or organized preparation for the Hmong on a local level. For example, one taskforce member explained that in his community the publicity produced by the

Taskforce was important because it “allow[ed] our public to know that this was happening...so that people know that there is a concerted effort.” Similarly, an MAA director expected that the Taskforce would “bring local initiatives together ... people are currently learning from their mistakes, and each agency is almost learning independently. When this work is produced, I hope that locally it’s going to draw a lot of groups that are already working in the resettlement effort to work together.” Another taskforce member said: “the taskforce report had some value in terms of alerting people to certain issues, and helping facilitate things happening within the existing structure, within the existing resources.” A fourth member said that she thought the existence of the Taskforce helped to “mobilize the community. I think the community was interested in mobilizing itself before the Taskforce, but I think the Taskforce helped focus. It put together a lot of information and disseminated a lot of information and brought focus to issues.” As these interviews revealed, the process of the Taskforce and the media attention that it generated helped to organize local efforts and, again, created agreement about a set of ideas.

#### *Political Significance to Hmong Community*

In addition to advocating for an increased profile for the Hmong associations, the final report also reflected the political significance of the Taskforce for the Hmong community. The existence of the Taskforce was in itself an important political statement for the Hmong in Wisconsin. One member described the Taskforce as “a coming of age” for the MAAs and the Hmong community in Wisconsin. Many of the other taskforce members echoed this sentiment. For example, one non-Hmong member stated, “Since the Hmong were ... deliberately a majority of the committee, it was their opportunity to make a statement, to have all these folks look at them.” Another member stated that by

commissioning the Taskforce, the Governor “recognizes the fact that there is a large community of Hmong people in the Wisconsin area and there will be more.” Another taskforce member expressed the hope that “as a result of the work that we’ve done, policy-makers and the Governor and other people involved in decision-making would really include the Hmong as full partners in planning and implementation of many of these ideas and strategies.” As these quotations revealed, the Taskforce was an affirmation for the Hmong members that they were considered a political force in Wisconsin.

One Hmong leader eloquently summarized the importance of the Taskforce for the Hmong:

Refugees have come to the point where they are also part of policy-making. I was not part of any sort of government policy in resettlement in 1975, ‘79, ‘80, ‘81. But if you look at today, all recommendations for resettlement programs will involve the people who are former refugees. So this report demonstrates that former refugees are not just refugees, but they have become productive people in society. So therefore, refugees in general are not a burden to society.

Interestingly, this quotation reinforces the economic focus of the dominant discourse in the final report. This speaker equated the idea of political activism with being “productive” and rather than being a burden.

The final report reflected this narrative of Hmong activism in several areas. The Executive Summary contains the following sentence: “Bilingual, bicultural Hmong leaders from WI communities must play a leading role in planning, implementing, and overseeing these recommendations”(2005). In another section, the report urges that “policy makers at all levels include the Hmong community as equal partners in the further planning, implementation and evaluation of these recommendations” (2005:25). Participant-observation of the taskforce meetings revealed that many Hmong members

saw the Taskforce as an opportunity to solidify their political importance in Wisconsin. Some members advocated a “Hmong desk” in the Governor’s office as a means to focus attention on issues related to the Hmong. In the final report, this recommendation was not included because many members felt that it fell outside of the purview of the Taskforce’s mission.

## **CONCLUSION**

This thesis describes and analyzes the Governor's Hmong Resettlement Taskforce in Wisconsin as a cultural process. The goal of this study was to create dialogical relationships with the taskforce members in order to understand how the recommendations made in the final report were constructed. This is both the first known anthropological study to examine a state's refugee resettlement policy process and the first to examine a statewide taskforce as a cultural process. As such, this thesis begins to fill a gap in existing anthropological knowledge of policy formation.

This research project built upon the studies of Nader (1969), Wright (1995), and Shore (2002; 1996; 1997), among others. I answered Laura Nader's (1969) challenge to anthropologists to study "up" and examine institutions and people in power rather than solely concentrating on the subaltern. My unit of analysis, the 27-member taskforce, was comprised of key state and local government officials, Hmong leaders, and community activists. As Wright (1995) suggested, I uncovered embedded assumptions made by taskforce members that affected their policy recommendations. This work also revealed how both macro and procedural constraints limited the discussion and solutions proposed by the Taskforce. This thesis produced a case study of the cultural process of policy formation that can be used to inform communities involved in other refugee resettlements and other types of taskforces.

The recommendations produced by the Taskforce were more than just a written statement or list of goals and operating procedures. The final report was a cultural product meant to affect peoples' lives, created between people, for people, and used by



people. As such, these policy recommendations were innately anthropological. As Shore and Wright note, policies are "codifications of norms and values; charters for action; blueprints for a future society and guides to conduct and practice" (1996:476). The final report of the Taskforce contains a model of both how society should react to the new refugees and how the new refugees should act within society (Shore and Wright 1996).

In this study, the definition of *policy* extended beyond simply legislators or public executives. Policy is also negotiated at the levels of conception and implementation. This study examined how the various members of the Taskforce defined themselves and the incoming refugees within the policy arena and how these definitions were manifested in the final recommendations of the Taskforce. Additionally, this thesis studied constraints that affected the discussion and final narrative of the Taskforce, as well as intended and unintended consequences of this policy process. This analysis of the Taskforce contained six key findings.

### Key Findings

First, resettling refugees is a long-term endeavor. However, the federal resettlement policy structure creates a distinct separation between short-term and long-term resettlement needs. Though all taskforce members were aware of this division, there was no full-group discussion about how to address this issue. Additionally, no discussion about the group's policy approach took place. As a result, some committees created recommendations designed to overhaul the resettlement structure in the State. Other recommendations focused on incremental changes within the present resettlement structure. A third group of recommendations involved crisis management measures, focused only on these arriving Hmong. The three policy change approaches coupled with

the ingrained split between long-term and short-term needs left a blueprint for resettlement that was, as one taskforce member called it, “somewhat disjointed.” A group discussion at the first taskforce meeting about the type of approach necessary may have lead to a more cohesive set of policy recommendations.

Second, the Taskforce operated with the underlying assumption that the Hmong members could adequately represent the needs, experiences, and desires of the incoming refugees and their host families. However, the background and refugee experiences of these newcomers were vastly different than that of the elite Hmong members of the Taskforce. Additionally, the Hmong culture had not remained static, either in the United States or in the Wat. Therefore, the Hmong members of the Taskforce had a different definition of *being Hmong* than the new refugees. By questioning this assumption and either interviewing or conducting site visits to MAAs and anchor family homes, the taskforce members may have devised different strategies and prioritized needs differently.

Third, the dominant Taskforce discourse defined refugee success in economic terms, often equating *self-sufficiency* with *employment*. However, most members had a much more encompassing view of success and self-sufficiency. As a result, some issues became contentious, such as the importance of drivers licenses.

Fourth, the timing of the Taskforce had repercussions on the recommendations that it could make. The timeframe did not coincide with the state budget cycle, ensuring that the recommendations would not be considered for inclusion in the 2006 state budget. Additionally, most of the refugees had already arrived in the state by the time the final report was presented. A discussion within the Taskforce about this issue may have led to

recommendations that would have made more sense given the resettlement timeframe. For example, “Family Issues” is so encompassing that by concentrating on an orientation plan for the new refugees, many issues were overlooked. However, because so many of the refugees had already arrived by the time the recommendations were published, the orientation plan created by the committee was inappropriate for satisfying the needs of these refugees.

Fifth, the large Hmong membership on the Taskforce was important for several reasons. The Taskforce itself was a statement that many members felt welcomed the Hmong into the political arena of Wisconsin. As a result of this membership, the recommendations stressed the importance of MAAs in a resettlement. However, because of this stress, the recommendations would not be appropriate for other populations that do not have the infrastructure that the Hmong have developed in Wisconsin.

Finally, the Taskforce had unintended positive consequences outside of the policy recommendations. For at least one committee, the Taskforce meetings became a forum for the coordination of resettlement efforts and provided real-time feedback loops to improve the delivery of resettlement health services. In some communities, media attention garnered by the Taskforce acted as a catalyst that encouraged and coordinated preparation for the new refugees on a local level.

#### Implications for Applied Anthropology

Though this was not an applied project, this study has considerable practical implications for the planning of future refugee resettlements. Preparation for an influx of refugees is an important part of any resettlement policy structure. This research was a case study that gave insight into how one state prepared for such an influx. Additionally,

the ethnographic data gathered uncovered how the various members of the taskforce defined themselves and their organizations' role in the resettlement process. This could be of particular interest for other communities preparing for a similar resettlement. The view that organizations have about their own role and the view of other agencies about them are often at odds. The ways in which these views converge and diverge are important in revealing overlaps and gaps in service provision for the new refugees.

By coupling the Wisconsin Hmong Resettlement Taskforce final report with this analysis, other states that have a strong refugee services infrastructure could adapt these policy recommendations to their own needs. Additionally, this study provides insight into the division between long-term and short-term needs imposed by federal funding schemes. This, together with the discussion of the definition of self-sufficiency, could be used by resettlement agencies and MAAs to improve their programs and to align their services more accurately with the needs of new refugees.

This study also has practical applications for future state or local taskforces. The procedural and macro constraints upon the Taskforce revealed in this analysis could be used to make future taskforces more effective. By evaluating the breakdown into committees and being cognizant of the constraints created by this practical division could make future taskforces more deliberate in creating these types of workgroups. Also, an awareness and discussion of time as a constraint when a taskforce is convened could prevent making inappropriate recommendations or missing the necessary budget cycle.

#### Strengths and Weaknesses of this Study

There were three main strengths to this research. First, I gained access to the general taskforce meetings and its elite members and was able to participate in the

committee meetings. Access can be one of the most difficult obstacles to conducting a study of policy construction. Second, the combination of participant-observation, in-depth interviews, and document analysis provided necessary triangulation in this study. The highly structured taskforce meetings did not allow for much discussion. The committee meetings were much more loosely run, however they were focused on a particular policy issue. The interviews allowed me to uncover competing narratives and other ideas. Third, by situating the Taskforce and its recommendations within the broader national and international resettlement policy structure, within the Hmong resettlement history, and within the history of the Wisconsin resettlement system, I was able to show the reasons for some narratives to be constrained while others became dominant.

However, this study also had some limitations. First, the Taskforce and its members were located in Wisconsin, and I live in Georgia. This meant that some interviews had to be conducted via telephone. Additionally, I was unable to attend a full-day Mental Health committee meeting held in Madison, Wisconsin in October 2004. These factors could have adversely affected rapport-building, causing my informants to be less open during interviews. Second, I did not meet or interview any of the incoming refugees or their anchor families. Because the Taskforce similarly did not, I do not feel that this adversely affected my analysis of the policy process. However, I think this analysis may have been stronger if I had been able to include data to show how the refugees and their anchor families prioritized needs.

### Implications for Future Research

This study has focused on the 27 members of the Hmong Resettlement Taskforce and the cultural process through which they created policy recommendations about the resettlement of new Hmong refugees for the Governor of Wisconsin. If I were to continue research on this topic, I would trace the implementation of these recommendations in Wisconsin. I would also conduct interviews with refugees and anchor families in Wisconsin to compare the assumptions and priorities that the Taskforce made about “the people” and “the problem” with input from the intended beneficiaries of the recommendations. Additionally, a comparison of this taskforce with another taskforce centered on a refugee resettlement in a different state could provide additional insights into the obstacles for refugees and local resettlement workers created by the national and international resettlement policy structure.

Through the course of this study, it also became apparent that more research is needed in several areas. New methodologies are needed for attaining input from refugee populations. Focus groups and surveys have not been effective in Wisconsin in the past. Anthropologists could provide insights into new ways to obtain information about priorities and needs of refugee populations. Additionally, few studies have explored policy formation as a cultural process. This study has only been a small step toward filling a large gap in anthropological knowledge.

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**APPENDIX A. Taskforce Members**

Kaying Xiong, Chair Locust Lane Elementary School, Eau Claire  
 Members  
 Nell Anderson Wausau School District  
 Andrew Benedetto Children's Service Society of Wisconsin  
 Phyllis Bermingham Wausau Area Hmong Mutual Association  
 Melissa Borth ThedaCare at Home  
 Susan Gundlach Lutheran Social Service of Wisconsin  
 Bounnging Her Milwaukee Area Technical College  
 Sharon Hunter Department of Public Instruction  
 Dan Idzikowski Catholic Charities of the Diocese of La Crosse  
 Mary Ann Jackson Wisconsin Technical College System  
 Yang Max Kue Manitowoc Police Department  
 ThajYing Lee United Refugee Services of Wisconsin  
 Cheryl McIlquham Department of Health and Family Services  
 John Medinger Mayor, City of La Crosse  
 Yee Moua Wisconsin Housing and Economic Development Authority  
 Jim Schramm Mayor, City of Sheboygan  
 Hoyu Sayaovong Hmong First Baptist Church  
 Joe Vang Fox Valley Job Service  
 Ker Vang Hmong Association of Green Bay  
 Shwaw Vang Madison School Board  
 Thai Vue La Crosse Area Hmong Mutual Assistance Association  
 Ann Wondergem Sheboygan Health and Human Services  
 Bee Xiong Green Bay Police Department  
 Christa Xiong Xiong & Associates  
 Shoua N. Xiong Lao Family Community, Inc  
 ChaSong Yang Hmong Mutual Assistance Association of Sheboygan  
 Peter Yang Wausau Area Hmong Mutual Association

## **APPENDIX B. HMONG TASKFORCE INTERVIEW PROTOCOL**

### **BACKGROUND**

You work for \_\_\_\_\_. Could you tell me a little bit about that your organization, your role there and how it relates to the Hmong population? How long have you worked there?

Do you work with other refugee or immigrant groups besides the Hmong?

On a personal level, how involved with the Hmong are you? How long? In what capacity?

What do you think is the role of MAAs in resettlement?

### **TASKFORCE**

How did you come to be on the taskforce? (original member?)

Have you been on other statewide taskforces? Details

What does being a member the taskforce mean to you, professionally/ personally?

In your opinion what do you see as the main goals of the taskforce as a whole?

What do you see as the potential? Do you think that potential will be realized?

How much time do you anticipate devoting to the taskforce? What type of activities do you expect that to entail?

Who on the taskforce do you think has the most power?

What do you think was the governor's motivation for convening this group?

Do you know most of the taskforce members? Have you worked with them in the past?

Are there any glaring omissions on the taskforce?

Which committee(s) are you on? Why? (Who chose? Why this one and not another?)

### **NETWORK ANALYSIS**

Do you know most of the taskforce members? Have you worked with them in the past?

### **DEFINITIONS**

In your opinion, how would you describe a "successful" resettlement?

How would you define a successful refugee?

COMMUNITY NEEDS

How many Hmong live in \_\_\_\_\_? How many new refugees are you expecting?

What, in your mind, are the main issues/ gaps in services/ potential problems?

Do you think the taskforce has the ability/ potential to help with any of these problems that you have named?

What impact, if any, do you think the taskforce will have on your community? The state? The Hmong in general?

**APPENDIX C. THE FINAL REPORT OF THE TASKFORCE**



**Hmong Resettlement  
Task Force**



**Report to Governor Doyle  
February 2005**



February 23, 2005

Governor Jim Doyle  
115 East, State Capitol  
Madison, WI 53702

Dear Governor Doyle:

I am pleased to present you with the final report of your Hmong Resettlement Task Force. Our diverse panel of Hmong leaders, local political leaders and agency professionals have worked diligently to help ensure that the new Hmong population is able to integrate as quickly as possible into welcoming Wisconsin communities.

The Task Force has developed twenty, wide-ranging recommendations to help meet refugee needs in education, employment, economic development, housing, transportation, family strengthening, health, dental care and mental health. These recommendations follow two basic strategies:

- Fund proven, cost-effective programs designed to meet immediate needs. These include funding for language instruction for children and adults, emergency housing assistance, job skill training, orientation, and strengthening of health screening programs.
- Develop and maintain culturally and linguistically competent services so that refugees may access the full range of services available to all state residents. These include: adding Medical Assistance reimbursement for interpreter services provided for a Medical Assistance covered service; supporting culturally competent mental health programs; improving access to dental care; maintaining domestic violence intervention programs which meet the needs of underserved populations; case management, citizenship and other services for the elderly; development of a comprehensive employment and housing pilot program which would quickly lead to self-sufficiency and home-ownership; and translation of the drivers licensing education materials and exam.

One of the strengths of the Hmong Task Force is that it includes a wide variety of Hmong leaders, as well as dedicated individuals from partner agencies throughout the state. Active involvement of the refugees and former refugees in the planning and delivery of services has been a hallmark of the Wisconsin refugee service program, and one of its great assets. It is critical that the refugee-run mutual assistance associations, and other representatives of the Hmong community, continue to be active in the implementation of these recommendations.

Implementation of these recommendations will require some additional resources and a strong commitment by state agencies to ensuring access to services. Some of these resources will be sought from federal programs. However, implementation of some of these recommendations will require that they be incorporated into the 2005-2007 biennial budget. The members of the Task Force remain committed to meeting with you and your cabinet members, and with our legislative representatives, to clarify the need for these program changes.

The members of the Task Force and I would like to thank you for this opportunity to come together to initiate this project. The saga of refugees is a story of hope, motivated by a belief that they can create a brighter future for their children. The Task Force shares this hope and belief, and a commitment to working with you to build that brighter future.

Sincerely,

A handwritten signature in black ink that reads "Kaying Xiong". The signature is written in a cursive, flowing style.

Kaying Xiong  
Chair of Hmong Resettlement Task Force

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**State of Wisconsin**  
**Governor's Hmong Resettlement Task Force Report**

**EXECUTIVE SUMMARY**

During the past three decades, Wisconsin has become home for approximately 67,000 refugees and former refugees from a number of countries, including 47,192 Hmong from Laos. Now a new wave of approximately 3,190 Hmong refugees from Thailand will reunite with their families in approximately 20 counties throughout the state. These are remnants of the thousands who fled in the aftermath of the Vietnam War in the mid-70's. These new Hmong refugees began arriving at the end of June 2004 and are expected to continue to arrive through April 2005.

Wisconsin has a long tradition of delivering successful resettlement services through a close partnership among state and local governments, resettlement agencies, Mutual Assistance Associations, community based organizations and volunteers. As a result, the Hmong refugees have successfully obtained jobs and become productive citizens of their new communities. To ensure continued success for the new group, Governor Jim Doyle in June of 2004 created the Hmong Resettlement Task Force to study the demographics and needs of the population and to make recommendations for changes in policy, activities, and partnerships among parties involved. The Task Force also brought in experts from local communities and state agencies to help them develop recommendations for effective resettlement. The recommendations put forth in this report are a combination of ideas and experiences gathered through a wide representation of private and public service providers, as well as former Hmong refugees in the state of Wisconsin.

The priority areas of need identified by the Task Force and recommendations to address those needs follow. Bilingual, bicultural Hmong leaders from WI communities must play a leading role in planning, implementing, and overseeing these recommendations. Their experience as former refugees, their understanding of current refugee issues, and their cultural expertise are critical to success.

**A. Education**

- *Adopt Department of Public Instruction's Superintendent Burmaster's 2005-07 budget proposal to increase bilingual-bicultural categorical aids, fund all English Language Learners (ELL) in all districts, and provide full funding for 4-year-old kindergarten.*
- *Increase English as a Second Language funding for the Wisconsin Technical College System by \$600,000 to provide 44 additional course sections of 30 students each in the various impacted communities.*

**B. Employment**

- *Provide in-depth orientation activities to help Hmong adults become comfortable in their new home communities and prepare for employment.*
- *Develop short-term, bilingual skill training, which incorporates job-specific language training as needed, and which is designed with employer input to meet local labor market needs. Include training that offers opportunities for advancement and improvement in wages.*

- *Fund limited-time, partial wage subsidies as employer incentive to hire and train refugee adults.*
- *Create a Governor's Blue-Ribbon Employer Advisory Committee using nominations from local mutual assistance associations and other employment specialists, create an advisory group of employers from around the state who have successfully hired, trained, retained, and promoted limited-English Hmong employees.*

**C. Housing and Transportation**

- *Increase Federal and State funding for housing assistance and Section 8 housing programs.*
- *Create an emergency housing assistance program to prevent homelessness for refugees through a combination of public and private resources.*
- *WHEDA and other federal, state and local housing authorities should identify surplus properties which may be available for rent to meet the current, urgent need for housing. WHEDA, HUD and government bodies obtain ownership of housing through defaults on loans and taxes. These properties should immediately be identified and utilized as temporary housing until this critical need for housing is resolved.*
- *The Department of Transportation should revise and update the Wisconsin Hmong Drivers Manual and driver's test.*
- *WHEDA and the DWD should collaborate to develop a comprehensive, model housing and employment programs that will lead to stable employment and home-ownership.*

**D. Health and Dental Care**

- *Increase access to dental care for Medical Assistance clients and increase the number of dental providers accepting Medical Assistance clients.*
- *Provide funding for Medical Assistance reimbursement for interpreter services.*
- *Link refugees, especially those who are uninsured, with programs and resources that promote health.*
- *Build "surge capacity" into the public health system.*

**E. Family Strengthening**

- *Provide comprehensive orientation programs to new families and their sponsor families.*
- *Provide bilingual case management and interpretation services to ensure that refugees (especially vulnerable elderly and disabled refugees) have access to the same services as other residents.*
- *Assist elderly refugees to obtain citizenship and integrate into new communities.*
- *Support continued funding for culturally and linguistically competent services for victims of family violence.*

**F. Mental Health**

- *Develop and sustain linguistically and culturally competent mental health services.*

Wisconsin's  
Hmong Resettlement  
Task Force Report

**February 2005**

# Task Force Information

## 1. Background

Early in 2004 the Department of State (DOS) announced plans to resettle Hmong refugees from Laos who have been living for many years in a compound on the grounds of a Buddhist temple, the Wat Tham Krabok in Thailand. DOS has estimated that a total of 15,276 Hmong would be admitted to the United States, including an estimated 3,190 for Wisconsin. As of December 6, 2004 a total of 1,941 have actually arrived in the state. These new refugees are expected to resettle in 20 counties (see Attachment 1). This resettlement effort could well be the last opportunity for many of the Hmong currently living in Wisconsin to be reunited with their relatives.

The Hmong are remnants of the thousands who fled to Thailand in the aftermath of the Vietnam War. Hmong soldiers had fought on the American side in the war, destroying Vietnamese supply routes, rescuing American pilots, and fighting the Communist Pathet Lao. When the communist government took over Laos, Hmong fled their homeland in the face of genocide. More than 150,000 Hmong refugees were settled in the United States between 1975 and 1988. The refugees in the Wat fled to Thailand, but have not been able to resettle until now. Some have been in the refugee camps in Thailand for more than two decades. They have had an uncertain future for a generation. Through pressures from the Thai government and Hmong family members in the United States, the United States Department agreed to resettle all who were qualified and interested in coming to the U.S. and passed security and drug screenings.

DOS planned to have the majority of the population resettled within the 2004 calendar year; so statewide planning efforts accelerated throughout the year. The Wisconsin Department of Workforce Development has been working closely with the U.S. Department of State and the local voluntary resettlement agencies to obtain the most accurate possible information on the Hmong population in the Wat, and on their anticipated arrival in Wisconsin.

## 2. Task Force Charge

In June of 2004, Governor Jim Doyle created this Hmong Resettlement Advisory Task Force. He charged it with specific tasks to advise the Governor and the Department of Workforce Development Secretary, Roberta Gassman, on matters relating to the resettlement of the new Hmong refugees from Thailand.

Members of the Task Force play a crucial role in this effort. They will monitor and coordinate resettlement efforts and recommend additional steps that the Administration and local communities can take to ensure success.

The specific charge is as follows:

- Study the data about the Hmong population, and learn about their demographics, distribution and needs;
- Examine the efforts of DWD, WHEDA, DHFS and local private and public agencies in the resettlement process;
- Provide a link to Hmong communities so that local agencies and individuals can have their voices heard by policy makers in the Capitol;
- Make recommendations for changes in policy, new activities, and partnerships to improve the resettlement process; and
- Tell the story of the Hmong in Wisconsin as a success story in the history of Wisconsin.

### 3. Task Force Members

Kaying Xiong, Chair                      Locust Lane Elementary School, Eau Claire

#### Members

Nell Anderson	Wausau School District
Andrew Benedetto	Children's Service Society of Wisconsin
Phyllis Bermingham	Wausau Area Hmong Mutual Association
Melissa Borth	ThedaCare at Home
Susan Gundlach	Lutheran Social Service of Wisconsin
Boungning Her	Milwaukee Area Technical College
Sharon Hunter	Department of Public Instruction
Dan Idzikowski	Catholic Charities of the Diocese of La Crosse
Mary Ann Jackson	Wisconsin Technical College System
Yang Max Kue	Manitowoc Police Department
ThajYing Lee	United Refugee Services of Wisconsin
Cheryl McIlquham	Department of Health and Family Services
John Medinger	Mayor, City of La Crosse
Yee Moua	Wisconsin Housing and Economic Development Authority
Jim Schramm	Mayor, City of Sheboygan
Hoyu Sayaovong	Hmong First Baptist Church
Joe Vang	Fox Valley Job Service
Ker Vang	Hmong Association of Green Bay
Shwaw Vang	Madison School Board
Thai Vue	La Crosse Area Hmong Mutual Assistance Association
Ann Wondergem	Sheboygan Health and Human Services
Bee Xiong	Green Bay Police Department
Christa Xiong	Xiong & Associates
Shoua N. Xiong	Lao Family Community, Inc
ChaSong Yang	Hmong Mutual Assistance Association of Sheboygan
Peter Yang	Wausau Area Hmong Mutual Association



#### 4. Task Force Meeting History

The Task Force has been meeting since July 2004. The group discussed six basic but important areas of need that they felt warranted immediate attention from service providers and government agencies. Members of the Task Force then separated into six different subcommittees in order to work more efficiently within each area of need. (See Attachment 2—Subcommittee Members and Areas of Need.) The subcommittees met outside of the larger task force meetings to discuss best practices, to identify the resources currently available, and to further develop ideas on recommended solutions around each issue. Each subcommittee also invited individuals from their communities who had expertise in a specific area to work with the subcommittee. The Task Force also sought the advice and expertise of several groups such as the Department of Public Instruction, WHEDA, and Health and Family Services to assist in the process of working through each area of need. As a result, the recommendations put forth in this report are a combination of ideas and experiences gathered through a wide representation of private and public service providers, as well as former Hmong refugees in the state of Wisconsin.

“It has been a humbling experience to work with so many dedicated and caring community members throughout Wisconsin to ensure that our newest Hmong families have a welcoming and smooth transition to their new homes.”

*Kaying Xiong,  
Hmong Resettlement Task Force Chair*



# Overview of the Refugee

## Resettlement Program

### 1. Plan for Successful Resettlement

Resettlement is accomplished through a public/private partnership. The U.S. Departments of State and Homeland Security determine who will be admitted to the country. The Department of State then contracts with 10 private voluntary agencies for the resettlement. The agencies that do resettlement in Wisconsin include Catholic Charities, Lutheran Social Services, International Institute of Wisconsin and Jewish Family Services.

These voluntary agencies, also known as VOLAGS, form the backbone of the resettlement program. They have a long experience in the resettlement of refugees from many nations. These agencies use their existing local organizational networks to recruit volunteers, arrange transportation, help locate housing, employment, food and clothing, and other supportive services. VOLAGS have a grassroots, community network that has made it possible to resettle more than a million refugees nationwide, largely on a voluntary basis. They rely heavily upon the local anchor families, who provide a support system for the new arrivals.

The Departments of Workforce Development and Public Instruction receive grants from the federal Office of Refugee Resettlement in the Department of Health and Human Services to provide refugee-specific assistance and services through local agencies and schools.

The Department of Workforce Development is providing additional resources to local communities. Current refugee-specific services include cash and medical assistance for single adults (for the first eight months after arrival), employment and training services, mental health, health screening, elderly and youth services, and programs to prevent domestic violence.

The Department has:

- expanded employment and training services in key resettlement communities and developed an integrated employment system based on skilled, bilingual job developers who work closely with each family;
- allocated nearly \$2 million to provide W-2 services to new refugees and met with W-2 agencies and refugee service providers to ensure coordinated service delivery;
- provided more than \$1.6 million in health screening contracts with public health agencies in all affected communities;
- strengthened mental health services;
- expanded Refugee Family Strengthening Services using Temporary Assistance for Needy Families funds;
- developed communications and training for Income Maintenance and W-2 staff to ensure they are prepared for new caseloads; and
- participated in listening sessions sponsored by Senator Kohl to identify and respond to community needs.

DWD staff are collecting, reviewing and replicating bilingual materials to support local orientation programs offered by refugee service providers in health, employment, education and nutrition to help refugees rapidly adjust to Wisconsin life. Training is being provided to expand the pool of qualified medical interpreters. Culturally competent childcare resources are being identified.

The Department of Public Instruction (DPI) obtained a Fulbright grant to send a delegation of educators to Thailand to assess the educational needs of the children, review Thai educational systems and develop curriculum for use in Wisconsin schools. Over the last several years, the DPI has been supporting training for bilingual teachers and principals, so that nearly every affected school is equipped with highly trained, bilingual teachers, counselors and some Hmong administrators.

The Department of Health and Family Services Refugee Health Coordinator has met with public health agencies throughout the state, providing technical assistance and training so that local agencies will be prepared to conduct health education and screening. Other staff are preparing information to ensure that county income maintenance staff efforts will be well coordinated with other local agencies. The Community Action Agency network is also being mobilized to serve this population.

The Wisconsin Technical College System (WTCS) and DWD staff have met with the Deans of Adult Basic Education for the local technical colleges to help ensure that language and other training programs are available as refugees arrive. The WTCS annual ABE/ESL conference featured training on serving students with limited literacy skills, to prepare technical and community based agency teachers.

Staff from several members of the congressional delegation, DWD, the Governor's Office and local community providers are working to develop a joint funding strategy. Senator Feingold, Senator Kohl and Congressman Obey have been very helpful in discussing Wisconsin's needs with the Office of Refugee Resettlement and in securing enhanced refugee service funding in 2005.

## **2. Local Communities Respond**

Private voluntary resettlement agencies arrange for the refugees to arrive and provide for their initial resettlement needs. They help coordinate an array of community services which support refugees. Refugees are eligible for state and community services on the same basis as other residents, and therefore have a wide variety of resources to help them succeed. A number of elementary, secondary, university and vocational colleges have bilingual staff to help serve the new refugees. County social/human services agencies assist with social services, and with medical assistance, food share and other assistance programs.

County social/human service agencies provide mental health and other needed counseling services. Local W-2 agencies provide financial assistance and employment and training services. The local W-2 providers partner with other agencies to ensure coordination of ESL, transportation and other necessary services. Bilingual staff and/or paid interpreters are part of the social/human/income maintenance agency(ies) system. Health screenings, immunizations and follow-ups are provided by many local public health agencies to help refugees get needed health care and prevent the spread of communicable diseases. Bilingual health aides are available in many impacted communities throughout the state.

Refugee self-help organizations, the Mutual Assistance Associations (MAAs), provide services to help refugees become self-sufficient. They help refugees integrate into the community by providing employment-related services, educational services, bilingual support, advocacy, orientation, community relations and education, and cultural preservation. They form a natural support system in more than a dozen communities from across the state with large Hmong populations. They are becoming key resources centers and are funded by federal, local and foundation dollars.

Throughout the state thousands of anchor family members and volunteers have contributed time, money and goods to help the new arrivals. Warehouses are full of furniture and clothing that have been donated. Cash donations have helped families obtain rental housing. Sponsors and other volunteers are teaching refugees everything from how to ride the bus to how to speak English.



Wisconsin has a strong system of national, state and local partnerships. Its spirit of community and high quality, culturally competent services have helped the Hmong who currently live here to rapidly achieve success. We anticipate that these new families will soon join their relatives in enriching Wisconsin's cultural and economic fabric.

### 3. Demographics and Needs

During the past three decades, the Hmong have resettled in more than a dozen Wisconsin communities. Because of family reunification, these communities will also become home to the new group of Hmong. The Department of Workforce Development estimates that in July 2004 there were a total of 66,872 refugees, former refugees and children of refugees in Wisconsin: 57,735 of these were Southeast Asians, of whom 47,192 were Hmong. (This estimate reflects continued population growth since the 2000 census.) There were 9,137 refugees from the former Soviet Union, Former Yugoslavia, Africa and other parts of the world.

These Hmong refugees and former refugees have become very successful. They have a median household income of \$36,000, less than 1% of households receive W-2 assistance, and more than 55% of families own their own homes. Hundreds of businesses in Wisconsin are owned by Hmong. (See Attachment 3 for more Census Data on the Hmong.)

As mentioned earlier, the Department of State has estimated that approximately 3,190 Hmong from Thailand will resettle throughout the state. The majority of these new refugees will resettle in the communities that currently have larger Hmong populations.

This resettlement represents a significant increase over recent resettlement efforts, although it is consistent with the peak resettlement rates of the early 1990s. In each of the past two years, Wisconsin resettled less than 250 refugees. During State Fiscal Year 2005, Wisconsin expects to resettle an estimated 3,190 new Hmong and approximately 300 other refugees. This will be more than ten times our normal arrival rate.

According to Department of State, the new Hmong are an exceptionally young population, with 60% being under age 18. The chart below indicates the ages of the total 15,276 eligible for resettlement in the United States:

Age	Number	Percentage
0-3	3,040	20%
4-14	4,584	30%
15-18	1,545	10%
19-24	1,602	10.11%
25-44	2,598	17.01%
45-64	1,320	9%
Above 64	587	3.84%
<b>TOTAL</b>	<b>15,276</b>	<b>100%</b>

Children have had some access to schools in the Wat and in the neighboring Thai village. Approximately 50% of the children have attended school, but schooling is generally not available beyond the 9th Grade.

#### School Statistics

- Two formal schools (Thai or Hmong)
- Half of camp children are in school
- Half can't afford school
- 9th grade maximum
- 37% of adults have formal education

The adults have limited education. They generally speak Hmong, some Thai, and some will have limited English ability. Since the resettlement program was announced, the Hmong have organized English classes in the Wat, but no formal instruction has been provided by the United States or Thai governments. Many of the adults are not literate in any language. However, for those who are literate, computers, cell phones and other western technologies are available in the Wat. Approximately 40% of the adults have been working, primarily in farming, sewing, small business, and quarrying. Many families have also been receiving financial support from their families in the United States.

The typical family structure consists of large, patriarchal families in which polygamy, early marriage, and authoritarian discipline patterns are common. To be economically viable in the U.S., it will be necessary for both husband and wife to work, for families to postpone marriage and child-bearing, and for them to develop new communication styles which will hold their families together when they are no longer supported by strong cultural and social norms. All of these factors require an extensive program of assistance to help families access services and to cope with the substantial transformations which they will experience.

The Task Force identified several critical areas of need:

- Employment and business development;
- Affordable housing for large families;
- Transportation;
- Health, including dental health;
- Mental health;
- Education for both children and adults; and
- Family support.

In every area, appropriate bilingual/bicultural access to program services is needed to enable the refugees to fully participate in their community, and to provide a sense of dignity and confidence in their ability to live independently.

As Wisconsin gears up to address these needs, it has experienced a recent decline in federal funding, which must be reversed. Refugees arrive as a result of federal foreign policy decisions, and it is critical that the federal government provide the funding needed for the refugees to quickly integrate into their new communities. At the same time, refugees are a part of Wisconsin communities, and the state must ensure that its programs and services are effective in meeting their needs.

Prior to the announcement of the Hmong resettlement, from CY 2003 to CY 2004 the state experienced a 75% reduction in social services and Targeted Assistance Discretionary program funding from the federal Office of Refugee Resettlement. Even though Wisconsin has recently received an award of \$675,500 under the Unanticipated Arrivals Grant for employment services to the new Hmong arrivals from Thailand, Wisconsin's refugee program continues to face a major challenge to serve the existing refugee population in the state, including the new arrivals.

Additional federal and state resources are needed to provide culturally and linguistically appropriate services.

The following sections identify how the Task Force believes the state can most effectively address the identified needs of the new refugees.



## Issues Identified and Recommendations

### A. Education

#### What is the Issue?

By gathering culturally sensitive educational experts from around the state, the subcommittee collected information, clarified needs, and identified best practices for the educational concerns from Pre-K through adult. The Task Force examined educational strategies for English Language Learners (ELLs), who also have limited literacy and academic skills (based on several presentations about schooling in the Wat Tham Krabok). The research indicates that it would take five to seven years for these ELLs to gain enough language to compete academically with their peers. Early educational intervention, based on language development and pre-literacy skills with first language support, is one of the most successful ways to secure language acquisition. Therefore, programs like 4-year-old kindergarten and Head Start should be supported.

Many larger school districts have developed a framework for effective ELL programs. School districts and the Department of Public Instruction have supported teacher training for the Hmong, thereby securing a certified Hmong bilingual teaching staff. Instruction is content based, accelerating language literacy development while enhancing academics.

Approximately 1,276 adults who are "unanticipated arrivals" from the Wat Tham Krabok will require English language instruction. An additional 80-100 Somali Bantu adult refugees have settled in Milwaukee this past year. These people are following the settlement patterns of previous family members and thus we anticipate that each of nine WI Technical College districts will receive 100—350 new ELL students. The technical college system, literacy councils, community based organizations and university system have educated and graduated a wide range of employable first and second generation Hmong individuals. However, the number of foreign-born people in Wisconsin has increased by 60%, without an increase in support for English language instruction, making it a challenge to serve the existing ELL population in the state, with insufficient resources for these new arrivals. Implementation of the following recommendations will help these new refugees obtain rapid self-sufficiency.

#### **Recommendation A1: Adopt Superintendent Burmaster's proposed 2005-07 budget proposal for the Department of Public Instruction.**

This would increase bilingual-bicultural categorical aid to reimburse districts at a proposed rate of 30 percent of eligible costs, which is a step up from the present 12 percent reimbursement.



Currently 39 districts provide reimbursable bilingual/bicultural programming, serving 23,021 students but 35,567 are in need of this service. This 2005-07 budget proposes funding for all English Language Learners in all districts. The 2005-07 budget also offers: full funding for 4-year-old kindergarten; an increase in funding for SAGE programming; transportation coverage for rural schools; and more flexibility and local control for districts under caps that limit school spending. The Task Force believes that these proposed increases will substantially improve the education of Hmong students.

**Recommendation A2: Increase English Language Learners (ELL) funding for the Wisconsin Technical College System by \$600,000.**

Based on geographic distribution, which places students in various communities within a district, we anticipate the need for 44 additional ELL course sections of 30 students each. Thirty students is a high teacher/student ratio but even at this rate the total amount it would cost to provide all of the necessary instruction would be in excess of \$1million. This recommendation is for additional funding for 23 sections serving 690 adult learners. The Wisconsin Technical College System has applied for a grant for \$469,000 with the Office of Refugee Resettlement. If approved, that grant would satisfy a portion of this need but an additional \$600,000 would be required from other federal and state sources. (See Attachment 4.) This would fund:

1. Twenty-three new ELL sections specifically for the new, preliterate refugees. New refugees' language needs are different from other ELL students and they will make much better progress in classes designed specifically for them. These classes would be taught by the existing network of vocational technical colleges, community-based organizations and literacy councils.
  - Programs offer at least 15-20 hours of instruction per week with 30 students per section depending on the location.
  - Students will learn language skills at the same time they are experiencing community orientation activities related to health care, public schools, finances, transportation, etc.
  - Career education and job skills will be provided and will also be interwoven across the curriculum.
  - Classes will teach parents the skills that will help them be the main supporter for their children's education. This is important because we need to keep the parents' influence dominant in the families.
2. Required books, materials and testing. All students will be pre and post tested using the BEST PLUS standardized test to assure accountability.
3. Training to volunteers, specialists and teachers to address the specific needs of these refugees.

## B. Employment

### What is the Issue?

Across Wisconsin, Hmong former refugees who were resettled in the late 1970s have become an important part of the fabric of local communities. After initial struggles with language and cultural differences, these families are now employed, home-owning, contributing community members. Local Hmong mutual assistance associations, in partnership with other community agencies, successfully created individualized employment training programs to meet local needs for a productive workforce. Bilingual/bicultural employer relations specialists were a key element of the most successful programs.

Today, as a new wave of Hmong families are being resettled in Wisconsin communities, a great sense of urgency exists for rapid employment for the approximately 675 employable adults. The average family consists of five individuals, but approximately 230 families consist of six or more members who will have extraordinary costs for shelter, clothing, etc. Wisconsin's W-2 program provides both financial assistance and employment assistance to refugees and other low-income families. It provides family payments of up to \$673 per month for participating families, and is not adjusted for family size. Because assistance is time-limited, it is essential that families move quickly into employment. Only with employers as active planning partners can the success of language and pre-employment skill training be assured. Employment of these adults may result in increased post-employment training costs for a short time. However, if funds can be obtained to partially reimburse these increased costs, many employers will welcome the opportunity to fill job openings with these loyal, hard-working job seekers, gaining long-term productivity while increasing workforce diversity.

Entry-level jobs will not meet these families' long-term financial needs. Advanced language training, other academic instruction, and further skill training must also be in place for these new Wisconsin residents to reach the American dream of financial security, home ownership, and continuing education.

Success depends upon the proven leadership and active participation of mutual assistance association staff and other bilingual, bicultural employment specialists. Thus, mutual assistance associations should be the fiscal agent and lead programmatic agency for these employment and training activities, working in partnership and subcontracting as necessary with technical colleges and other local employment and training organizations. With their bicultural/bilingual leadership and their long-term record of success in other contracts with the Department of Workforce Development for refugee services, mutual assistance associations are the natural choice for these additional contracts and services.

The following recommendations are designed to ensure economic self-sufficiency as rapidly as possible. Although these recommendations carry a price tag, long-term benefits will outweigh initial costs. We request \$2.4 million be designated to implement these recommendations. Funding for these initiatives could include any combination of existing employment and training resources (such as W-2 and Workforce Investment Act) and federal refugee discretionary programs.

**Recommendation B1: Provide initial, intensive “surviving/succeeding in Wisconsin” training.**

Provide in-depth orientation activities to help these Hmong adults become comfortable in their new home communities and, thus, able to concentrate on employment preparation. Minimum content areas should include help in using public transportation; survival English; orientation to Wisconsin’s world of work (job/career choices, employer expectations, successful job seeking/keeping strategies, communicating with supervisors and co-workers); available community resources; financial management; obtaining a driver’s license and the costs of automobile ownership; and general information about western concepts about life-long learning, self-esteem, motivation, and physical/mental health.

**Recommendation B2: Provide short-term vocational skill training.**

Design and implement intensive, short-term skill training programs that incorporate the specific language and math skills necessary for that vocational area. These skill training and vocational ELL programs must be designed with employer input to meet local labor market needs and match trainees with specific existing and anticipated job openings. Work with employers to obtain commitments to hire successful program graduates. The DWD and Workforce Development Boards should extend this effort beyond the initial job placement by developing linguistically appropriate skill training targeted at Limited English Proficient clients. This opens advancement opportunities to refugees who have made it to the first rung of the employment ladder. These efforts would be targeted at higher wage jobs, higher skill preparation, vocational English, and workplace math and computer operation instruction.

**Recommendation B3: Develop a wage subsidy program in partnership with local employers.**

Fund a limited-time, wage subsidy program as an employer incentive to hire and train these adults. Encourage employers to reinvest part of the incentive payments to help fund advanced workplace training opportunities. Provide on-going bilingual/bicultural support (job coaching, communication assistance, problem solving, cultural brokering) to both employers and employees.

**Recommendation B4: Establish a Governor’s Blue-Ribbon Employer Advisory Committee.**

Using nominations from local mutual assistance associations, W-2 agencies, voluntary resettlement agencies and other employment specialists create an advisory group of employers from around the state who have successfully hired, trained, retained, and promoted limited English Hmong employees. Utilize their expertise in on-going employment preparation and advancement programs.

## C. Housing and Transportation

### What is the Issue?

There is a serious lack of financial resources to provide housing assistance to the new refugee families. This is especially true for large families where limited housing stock drives up rental costs. There is also a shortage of affordable housing in nearly every resettlement community, especially for large families. A serious and urgent effort is needed to address these issues. The current W-2 cash benefit of \$673 barely covers the average rental costs of \$400-\$750 per month. Applicants for subsidized housing or Section 8 vouchers must wait many months or even years in most resettlement communities. This issue affects nearly all of the 682 Hmong refugee families, as well as many other refugees and other low-income families. Available information indicates that approximately 60% of the families who have arrived to date are living with anchor relatives in severely overcrowded situations, while 30% have moved into unsubsidized housing which is either not affordable or is severely overcrowded or substandard housing. This may cause unhealthy and unsafe living conditions for the refugee families. We estimate that approximately 600 Hmong refugee families are in need of immediate assistance. The Wisconsin Driver Manual in the Hmong language was produced in the 1990's and needs to be revised and updated. There is a high rate of failure among Hmong who take the computerized driver's licensure test, and the translation quality needs to be improved to reflect contemporary Hmong language.

### **Recommendation C1: Increase Federal and State funding for housing assistance and Section 8 housing programs.**

Housing assistance for low-income families needs to be substantially expanded in order to build strong communities. Assistance should address both the short-term needs for rental housing and the longer term need for home-ownership. Educational programs regarding financial literacy and home maintenance support these long-term goals.

### **Recommendation C2: Create an emergency housing assistance program to prevent homelessness for refugees.**

Define "homeless or threatened with homelessness" within emergency housing programs operated by WHEDA, the Housing and Urban Development and Workforce Development to include the housing needs of the families who are homeless but not living in homeless shelters. Extended families who are living together in unsafe or severely overcrowded situations that violate leases need assistance in order to prevent both families from becoming homeless.

**Recommendation C3: WHEDA and other federal, state and local housing authorities should identify surplus properties for immediate occupancy.**

WHEDA, HUD and government bodies obtain ownership of housing through defaults on loans and taxes. These properties should immediately be identified and utilized as temporary housing until this critical need for housing is resolved.

**Recommendation C4: WHEDA and the Department of Workforce Development should collaborate to develop a model housing economic self-sufficiency program for refugees.**

WHEDA, DWD and the resettlement agencies should conduct further research to identify the exact dimensions of the housing need and identify the most critical communities of need. They should work together with local housing systems and Mutual Assistance Associations to develop a comprehensive model for moving refugees to employment and housing independence.

Elements of this model (contingent upon available funding) would include initial rent subsidies, skill training in carpentry and housing rehabilitation skills to provide both employment and "sweat equity," financial literacy training and individual development accounts to encourage savings for home-ownership, and assistance through a first-time home-ownership program. Through this comprehensive package of services, refugees could move from unemployment and subsidized rental housing to financial independence and home-ownership. If successful, this could provide a powerful model for helping other low-income populations develop a key asset for independence, while improving low-income neighborhoods.

**Recommendation C5: Ensure the Drivers Manual and driving test are available in high-quality translation.**

The Division of Motor Vehicles should revise and update the Wisconsin Hmong Driver's Manual and test and have them reviewed by the Wisconsin United Coalition of MAAs, which can provide technical support and editing for the Hmong translation.



## D. Health and Dental Care

### What is the issue?

Health priorities for all refugees involve ensuring the safety of the public health through communicable disease screening and treatment, and maximizing the health of the individual through the provision of culturally competent health care services. Culturally competent health care incorporates not only the use of bilingual care providers or qualified medical interpreters, but also sensitivity to the unique needs of individuals – i.e. awareness of life experience, spiritual beliefs, health-beliefs, decision-making processes and communication styles. This group of refugees faces similar barriers to health care as those seen previously in Hmong and other groups with Limited English Proficiency. They include language, transportation, financial and cultural issues.

Overcoming these barriers requires communication, commitment, resources and time. Communication and commitment is necessary amongst resettlement partners in the community and within the government. To support this, resources at the local, state and federal levels of the resettlement process are required to see efforts through to their desired outcome, evaluating and refining the processes throughout the resettlement effort and well into the refugees' new lives in America.

The potential impact and benefits of coordinated effort are exemplified in the handling of a Hepatitis A outbreak among some of the Wat Hmong after their U.S. arrival. Hepatitis A is a communicable disease that is common to many areas of the world, including Southeast Asia. Past infection with resultant immunity are so prevalent in refugee communities, Hepatitis A was not included in initial screening requirements. Testing through a private provider in Sheboygan uncovered the initial case of acute contagious infection in a child. Other health departments began identifying cases as well and reported this information to the Division of Public Health. In turn, the Division of Public Health developed screening guidelines and transmitted the information statewide to other refugee screening providers. Health departments made tremendous efforts to screen school and family contacts, provide preventive treatment to exposed susceptible and offer ongoing education. The Centers for Disease Control and Prevention (CDC) was notified of the outbreak's drain on local resources. As a result of this communication, CDC worked with the Department of State to initiate a Hepatitis A vaccination program in the Wat. Through communication, commitment, resources and time, the system worked to limit disease in the community and to save hundreds of work hours.

Our identification of issues and recommendations seeks to maximize resources and quality of life for individuals and our state as a whole.

- Medical Assistance provides health coverage for the refugee population beyond the initial health screening. However, there is a lack of access to dental services in most areas of the state for this population.

- There are more than 165,000 Wisconsin residents whose limited English provides a barrier to receiving adequate health care. Extensive research indicates that the quality and outcomes of health care suffer unless qualified interpreters are provided when delivering care to these individuals. The need for qualified medical interpreters and the cost of providing this service is a further burden to the medical and dental providers. However, these interpreters are essential to the provision of culturally competent care. Medical providers who receive federal funds are required to have qualified interpreters to allow access to quality care. However, Medical Assistance does not provide any separate reimbursement to cover these costs.
- There is a need for ongoing health management and disease prevention beyond initial screening. Individuals whose health costs are covered under Refugee Medical Assistance (RMA), which is available only for the first 8 months from arrival, are often older individuals who may have ongoing health problems, but limited job abilities. They may be left uninsured or underinsured and unable to obtain ongoing health services.
- The large number of refugees arriving in a short time creates a burden on our public health systems, both at the local and state level. This is concurrent with the public health system's efforts to control a pertussis outbreak. Again this impacts the local public health providers, the Wisconsin State Laboratory of Hygiene (WSLH), and local physicians.

**Recommendation D1: Increase access to dental care for Medical Assistance clients.**

Increase access to dental care for Medical Assistance (MA) clients and increase the number of dental providers accepting Medical Assistance clients. Effective solutions such as financial incentives and loan forgiveness must be implemented to encourage dentists to accept MA. Not only Hmong refugees, but all MA recipients are affected by the lack of MA dental providers.

We appreciate the creation of the Governor's Task Force to Improve Access to Oral Health and urge that task force to consider Hmong refugees a priority. Attachment 5 contains a list of action steps the Oral Health task force should implement that would enhance the oral health of Hmong refugees and all Wisconsin residents that have limited access to oral health care.

Full implementation of the Governor's *KidsFirst* Initiative would greatly benefit the Hmong refugee population. In addition, the Governor could make a personal appeal to the dental providers in communities impacted by the surge in Hmong refugees, asking them to donate time to meet immediate needs (i.e. Wood, Marathon, Manitowoc, Sheboygan and La Crosse counties). An example of such an existing service exists in Eau Claire, where, dental care professionals annually offer their time to provide sealant and other preventive measures to the children in some schools.

**Recommendation D2: Provide funding for Medical Assistance reimbursement for interpretive services for health and dental health care.**

The Department of Health and Family Services should develop a budget initiative to provide reimbursement for interpretation when patients are receiving a covered Medical Assistance benefit. Federal funding for at least half of the costs of such a program would be available. The many states that have initiated this service have substantially improved care to Limited English patients.



**Recommendation D3: Link refugees, especially those who are uninsured, with programs and resources that promote health.**

Case managers in resettlement agencies, W-2 agencies and Mutual Assistance Associations should link refugees to supportive programs that can maximize health. This includes linkages to federally qualified health care centers, SSI when appropriate, nutrition services, and other health promotion/disease prevention services. In addition, provide funding to facilitate the coordination of existing and/or development of new culturally appropriate health education materials for providers and clients.

**Recommendation D4: Build “surge capacity” into the public health system.**

Continue support to local public health departments and other health providers through the refugee screening funds and technical support. Build “surge capacity” into the public health system to address multiple issues that may impact public health at any given time, including contracting out certain public health services at those times when service demands exceed health department capacity.



## **E. Family Strengthening**

### **What is the Issue?**

The Hmong refugees have and will encounter multiple family issues and stresses as they transition into Wisconsin communities. The Task Force identified three key areas of need:

- Initial and ongoing orientation and support for the refugee families and their sponsor families.
- Services and supports for the elderly refugees and refugees with disabilities.
- Service to deal with changing family dynamics, including but not limited to domestic violence, child abuse or neglect, youth gangs, truancy and school dropouts.

Refugees and their anchor families need to receive consistent information from all key players in the resettlement process, including:

- Voluntary Agencies (VOLAGs)
- W – 2 Agencies
- Income Maintenance Agencies
- Public Health Departments
- School/Education Partners
- Mutual Assistance Associations (MAAs)

This process needs to start before the refugee family even arrives, so that agencies and anchor families can work together to develop a common plan for resettlement.

With limited English speaking skills and schooling, the elderly and disabled refugees face great challenges in the resettlement process. Because of age and/or disability, many will have great difficulty in learning to speak English. This may make it impossible for them to obtain citizenship within seven years of arrival. As a result, they are likely to lose their eligibility for Supplemental Security Income. The elderly face an additional trial as federal funding for most current Wisconsin refugee elderly programs will end December 2004.

Refugees with a disability may be eligible for long term support funding such as Community Options or Community Integration programs but many counties have a waiting list for funds and services. This will further stress the family, as caring for a family member with a disability may conflict with the W 2 requirement to participate in employment and training.

Families will experience changes in roles and responsibilities based on gender and age. Without education, assistance and support, families will possibly encounter problems with depression, domestic violence, youth violence and gang involvement, truancy and dropouts and child abuse and neglect. Victims of family violence are isolated both by their language and cultural barriers and by their abusers.

A process that provides consistent initial and ongoing information and support to the new refugees and sponsor families will assist in a more successful transition.

**Recommendation E1: Provide comprehensive orientation to new families.**

To ensure long term and consistent efforts, the Bureau of Migrant, Refugee and Labor Services should add a staff position to develop a comprehensive orientation program to provide families with the necessary tools to experience positive change. This would include, but not be limited to:

- Conduct surveys to identify needs and available resources;
- Create a repository of orientation curricula and bilingual materials so that local agencies may provide a consistent orientation with minimal expense;
- Create a checklist of documents, forms and material used by all agencies/organizations involved in the resettlement process to minimize duplication; and
- Create a statewide orientation program to ensure consistency and quality in how services are provided by organizations that support the refugee families as they move through the various systems. Examples include:
  - The anchor family receives information from the Refugee resettlement organization prior to the arrival of the refugee family, which begins the coordination process with other key players such as Economic Support and Wisconsin Works, Public Health, the schools, the Hmong Mutual Assistance Associations;
  - The list of roles and responsibilities and process for contact/referral for county and other services should be standardized and shared with other key players in the system, including anchor families and Hmong Associations;
  - Prior to the arrival of the refugee family, a partnership of the key agencies would arrange for a contact with the sponsor families to provide information on programs, services, and application processes. This would help to coordinate financial and non-financial resources, develop housing alternatives, assess the other needs of the refugee family and develop resources to assist the sponsor family in filling any gaps;
  - After arrival, the partnership would again work with the refugee and anchor family to provide consistent information.

This process would address the immediate and long-term orientation needs for new arrivals and their sponsor families, and address some of the family dynamic and stress issues. As sponsor families are often pulled in many directions, they would benefit from the assistance of a more comprehensive orientation and support process. The fragmentation of the current system at times conflicts with the sponsor families' own work and family commitments.

The Bureau should consider a lead staff position in Madison and local staff who would gather and compile the needed information and schedule the local orientations.

**Recommendation E2: Provide bilingual case management and interpretation services to ensure that refugees (especially vulnerable elderly and disabled refugees) have access to the same services as other residents.**

The DWD should expand grants to provide bilingual case management services that will help refugees access essential social and health services. These staff educate refugees about available services and remove language barriers that prevent refugees from obtaining dental, financial and other services.

**Recommendation E3: Assist elderly and disabled refugees to obtain citizenship and integrate into new communities.**

Meet the citizenship and social integration needs of the elderly. The Bureau of Migrant, Refugee and Labor Services should continue to seek funds for citizenship assistance programs and evaluate their effectiveness in helping refugees achieve citizenship. In addition, the Department of Health and Family Services and Area Agencies on Aging should develop culturally and linguistically appropriate services to meet the long term care needs of those with disabilities. Elderly residents who do not speak English face extraordinary levels of isolation and difficulty in obtaining needed care. Community based organizations have developed effective service models for these populations, but federal funding for them will not continue. Area Agencies on Aging and other programs for the elderly must support and integrate culturally appropriate services into the Aging programs throughout the state, including meal programs which provide culturally appropriate meals, bilingual case management, culturally and linguistically appropriate recreation programs for seniors, and bilingual access to the long term care system.

**Recommendation E4: Support continued funding for culturally and linguistically competent services for victims of family violence.**



Wisconsin has developed model programs for minimizing family violence and providing safety and security for refugee families which are experiencing family violence. These programs utilize the means of supporting families and controlling violence that are used by both cultures. TANF funding to maintain these programs must be provided in order to assure that victims have access to life-saving services.

## **F. Mental Health**

### **What is the Issue?**

The Mental Health Committee of the Governor's Hmong Resettlement Task Force was formed due to concerns generated from the experience of the first wave of Hmong refugees, as well as studies of those refugees residing at Wat Tham Krabok before relocation to the United States. Many Hmong refugees experienced the loss of loved ones, the loss of their own freedom, severe economic dislocation, starvation, and torture. These traumas led to significant mental health problems, including severe depression, post traumatic stress syndrome, anxiety and suicide ideation.

It is very difficult for Hmong refugees to understand the Western concept of mental health and even more difficult to reap the benefits of mental health services. For this reason the history of traditional therapy provided by English-only speaking therapists through translators has not provided encouraging outcomes. Both the therapist and translator in this situation have enormous cultural and linguistic hurdles to overcome to deliver a quality service.

In the best of all worlds there would be an army of trained bilingual/bicultural mental health professionals who could provide meaningful explanations and services to this population. Unfortunately, three decades after the first wave of Hmong migration from Southeast Asia there is only limited bilingual/bicultural mental health infrastructure that the new Hmong arrivals can access.

In fact, there is only a very small group of certified therapists available throughout the state to meet the needs of tens of thousands of Hmong. These therapists are the remnant of an infrastructure first started by grants through the Office of Refugee Services within the last ten years. With the reduction of financial support from the federal government over the past two years, the development of this modest infrastructure was not only halted but also reversed, with fewer Hmong mental health resources in the state today than there were three years ago.

The Mental Health Committee spent substantial time and energy discussing problems and solutions, considering long and short-term needs of the new arrivals and best strategies to meet the emerging needs of Wisconsin's Hmong Community. These have been encompassed in a single recommendation.

The dominant need identified by the Mental Health Committee is the development and maintenance of culturally competent mental health services throughout the state.

**Recommendation F1: Develop and sustain linguistically and culturally competent mental health services.**

The State of Wisconsin will offer up to seven mental health grants for seven areas of the state most affected by new arrivals. The purpose of the grants will be to develop and maintain the infrastructure necessary for community-based, bilingual/bicultural mental health services. The grants will be at least \$50,000 per agency each year, for an annual budget of \$350,000.

Based on the discussion of the Mental Health Committee the grants are to include the following service components:

- a Community Mental Health Education program;
- a culturally adapted Mental Health Assessment Tool;
- additional financial support from Medical Assistance, insurance and 51.42 Board funding;
- bi-lingual, bi-cultural case-management and treatment programs; and
- cultural competency training for mental health service providers.

The grant will also require establishment of an Advisory Committee for each geographic region, which includes Hmong leadership, to monitor and report on the progress of mental health infrastructure development to the State of Wisconsin. The Department of Health and Family Services will monitor and support the development of these programs, and evaluate their effectiveness. The DHFS will also provide technical assistance to grantees to help them access Medical Assistance and 51.42 board funding for clinical services.

## Conclusion:

In addition to the specific charges stated by Governor Doyle, the Task Force hopes that the work we have done and are sharing in this report fulfills the following objectives:



- Create a network throughout Wisconsin for "best practices" in working with Hmong refugees.
- Coordinate the efforts of private and public agencies to respond effectively to the needs of the Hmong refugees.
- Help all citizens of Wisconsin build community in response to the needs of any group of people or individuals who need it.
- Ensure that policy makers, agency directors, managers, and others who are in the position of influencing how staff and other resources are allocated use these recommendations to guide the decisions they make.
- Ensure that policy makers at all levels include the Hmong community as equal partners in the further planning, implementation and evaluation of these recommendations as a whole.

The Task Force gratefully acknowledges the support of Governor Jim Doyle, Senator Feingold, Senator Kohl, Congressman Obey, subcommittee members, and all of the citizens in our communities for their efforts in welcoming new Hmong refugees to the state of Wisconsin. All of these efforts will enhance and improve community building for all citizens in our great state. We wish to specifically thank DWD for allowing their staff members to join this very important endeavor. The Task Force on Hmong Resettlement would not have been successful without the effort and commitment of Susan Levy and Ying Lee.

**Estimated Hmong Arrivals and Needs**

County	Actual Arrivals as of 12/06/04 Individuals	Estimated by State Department Total Individuals	Estimated by State Department Total Families	Estimated 40% of Individuals Need Adult ESL	Estimated 90% of Families Need Housing Assistance
Brown	50	221	46	88	41
Calumet	13	64	9	26	8
Chippewa	42	27	5	11	5
Dane	73	67	13	27	12
Eau Claire	21	101	23	40	21
Fond du Lac	4	46	10	18	9
Jefferson	4	4	1	2	1
Juneau	4	6	2	2	2
La Crosse	147	244	50	98	45
Manitowoc	62	129	26	52	23
Marathon	276	427	90	171	81
Milwaukee	468	764	157	306	141
Ouagamee	89	169	41	68	37
Portage	82	136	30	54	27
Sheboygan	252	297	70	119	63
St. Croix	5	6	1	2	1
Washington	47	37	8	15	7
Wood	1,941	67	15	27	14
<b>TOTAL</b>		<b>3,190</b>	<b>682</b>	<b>1,276</b>	<b>614</b>

**Attachment 1 -- Estimated Hmong Arrivals and Needs**

Subcommittee Members and Areas of Need	
Sub-Committee	Sub-Committee Chairs and Members
<p><b>Education</b> (Early Childhood, K-12, ELL, Future of Children for College Education, Tuition, Services to 14-16 Year Olds, and Adult ESL)</p>	<ul style="list-style-type: none"> <li>• Nell Anderson, Chair, Wausau School District</li> <li>• Bounnging Her, Milwaukee Area Technical College</li> <li>• Mary Ann Jackson, Wisconsin Technical College System</li> <li>• Sharon Hunter, Department of Public Instruction</li> <li>• Hoyu Sayaovong, Hmong First Baptist Church</li> <li>• Shwaw Vang, Madison School Board</li> <li>• Bee Xiong, Green Bay Police Department</li> <li>• (*)Carolyn Brady, University of Wisconsin-River Falls</li> <li>• (*)Bonnie Dockry, Department of Public Instruction</li> <li>• (*)Linda St Pierre, Sheboygan School District</li> </ul>
<p><b>Employment</b> (Job Development, Economic Development, Basic Skills Training)</p>	<ul style="list-style-type: none"> <li>• Thai Vue, Chair, La Crosse Area Hmong Mutual Assistance Association</li> <li>• Phyllis Bermingham, Wausau Area Hmong Mutual Association</li> <li>• Joe Vang, Fox Valley Job Service</li> <li>• Shoua Xiong, Lao Family Community, Inc.</li> <li>• (*)Ying Lee, Department of Workforce Development</li> <li>• (*)Elizabeth Mahloch, Sheboygan County Economic Support /W-2</li> <li>• (*)Lesley Salas, Milwaukee Private Industry Council</li> </ul>
<p><b>Family Strengthening</b> (Domestic Abuse Prevention and Education, Bilingual, Bicultural Services and Interpretation, Services to the Elderly Population, Safety Issues, Supervision of Children, Cultural Orientation to the New Families and their Sponsors/Anchor Relatives, Teen Parents, Childcare).</p>	<ul style="list-style-type: none"> <li>• Ker Vang, Chair, Hmong Association of Green Bay</li> <li>• Bounnging Her, Milwaukee Area Technical College</li> <li>• ThajYing Lee, United Refugee Services of Wisconsin</li> <li>• Ann Wondergem, Sheboygan County Health and Human Services</li> <li>• Christa Xiong, Xiong &amp; Associates</li> </ul>
<p><b>Health and Dental Care</b></p>	<ul style="list-style-type: none"> <li>• Melissa Borth, Chair, ThedaCare At Home</li> <li>• Susan Gundlach, Lutheran Social Services of Wisconsin</li> <li>• Cheryl McIlquham, Department of Health and Family Services</li> <li>• (*)Jean Beinemann, Sheboygan County Health and Human Services</li> <li>• (*)Karen Fink, US Department of Health and Human Services</li> <li>• (*)Melee Thao, Marathon County Health Department</li> <li>• (*)Savitri Tsering, Department of Health and Family Services</li> </ul>

Attachment 2—Subcommittee Members and Areas of Need (formed to discuss and strategize in-depth issues identified by the Task Force as a whole)



**Housing and Transportation**

(Affordable Housing, Housing Conditions, Inspections, Safe Housing, Housing Assistance Programs, Etc.)

- ChaSong Yang, Chair, Hmong Mutual Assistance Association of Sheboygan
- Dan Idzikowski, Catholic Charities, Diocese of La Crosse
- John Medinger, Mayor City of La Crosse
- Yee Moua, Wisconsin Housing and Economic Development Authority
- Jim Schramm, Mayor City of Sheboygan
- Peter Yang, Wausau Area Hmong Mutual Association
- (\*)Mitch Birkey, Sheboygan County Economic Support/W-2
- (\*)Dave Coady, Department of Transportation
- (\*)Susan Levy, Department of Workforce Development
- (\*)Keith A. Pamperin, Green Bay Housing Authority
- (\*)Diane Poole, Department of Transportation
- (\*)Luann Scheer, ADVOCAP, Inc.
- (\*)Judy Wilcox, Department of Commerce

**Mental Health**

(Bilingual, Bicultural Services)

- Andrew Benedetto, Chair, Children's Service Society of Wisconsin
- Phyllis Bermingham, Wausau Area Hmong Mutual Association
- ThajYing Lee, United Refugee Services of Wisconsin
- Joe Vang, Fox Valley Job Service
- Shwaw Vang, Madison School Board
- Peter Yang, Wausau Area Hmong Mutual Association
- (\*)Tom Dodge, Sheboygan Mental Health Program
- (\*)Karen Fink, US Department of Health and Human Services
- (\*)Kay Heilmel, Outagamie County Department of Human Services
- (\*)Christine Wolf, Department of Health and Family Services

**Attachment 2—Subcommittee Members and Areas of Need (formed to discuss and strategize in-depth issues identified by the Task Force as a whole)**

### Census Data Concerning the Hmong

Hmong Alone, No Combination of Other Races

	Hmong in WI		Hmong in the U.S		Total WI Population	
	Number	Percent	Number	Percent	Number	Percent
<b>Male</b>	15,566	50.2%	85,900	50.6%	2,648,363	49.4%
<b>Female</b>	15,444	49.8%	84,059	49.4%	2,715,312	50.6%
<b>Median Age (years) Older than Age 25</b>	15.9 9,750	X 31.4%	16.3 54,258	X 31.9%	36.1 3,475,878	X 65.0%
<b>Median Household Income in 1999</b>	\$35,898	X	\$32,076	X	\$43,791	X
<b>Poverty</b>	7,928	25.9%	31,071	37.8%	451,538	8.7%
<b>Homeownership (Live in "owned home")</b>	17,213	55.5%	73,185	43.7%	3,814,620	73.2%
<b>School Enrollment (K-12)</b>	14,234	X	76,253	X	1,049,456	X
<b>HS Graduate or Higher</b>	6,451	47.9%	36,864	48.4%	3,367,835	84.3%
<b>Some College or Completed Degree (18 and Older)</b>	3,475	25.8%	20,703	27.2%	2,015,522	50.4%
<b>Employed (16 and Older)</b>	8,301		40,548		2,734,925	
<b>Unemployed (16 and Older)</b>	815		4,646		134,311	
<b>Labor Force Participation Rate (16 and Older)</b>	X	59.3%	X	52.3%	X	69.0%

### Attachment 3 - Census Data Concerning the Hmong

## English as a Second Language Initiative

Based on geographic distribution that places students in various communities within a district we anticipate the need for 44 ADDITIONAL ESL course sections of 30 students each. Thirty students is a high teacher/student ratio but even at this rate the total amount it would cost to provide all of the necessary instruction would be in excess of \$1million. This recommendation is for additional funding for 23 sections serving 690 adult learners. If \$600,000 is allocated to support these ESL sections, an additional \$469,000 would be required to support the overall need. The Wisconsin Technical College System has applied for a grant with the Office of Refugee Resettlement that, if approved, would satisfy the remaining need.

### PROPOSED ACTIVITIES:

1. Adult English as a Second Language Programs will add 23 new course sections specifically for the new Hmong or Somali Bantu people. New refugees' language needs are different from other ESL students and they will make much better progress in classes designed specifically for them.

- These classes will offer at least 15-20 hours of instruction per week with 30 students per section depending on the location.
- A minimum of 50% of the instruction will be experience based so that students can learn language skills at the same time they are experiencing community orientation activities related to health care, public schools, finances, transportation, etc.
- Career education and job skills will be provided and will also be interwoven across the curriculum.
- Classes will be scheduled to accommodate the majority of the students' schedules.
- Classes will be offered at a convenient location.
- Classes will have computer and video technology available.
- Classes will be taught by professional certified instructors.
- There is a need to emphasize teaching parents the skills that will help them be the main supporter for their children's education. We need to keep the parents influence dominant in the families.

2. Teachers and students require books and materials. It is an objective of this project to provide the new arrivals with classrooms that have adequate learning materials to support their goal of learning English quickly and well. All students will be pre and post tested using the BEST PLUS standardized test. This is a nationally standardized test and approved by the Department of Education. It must be:

- administered individually and while an excellent assessment tool, it consumes quite a lot of staff time which brings the cost up.
- Lower level language learners need to have texts that are consumable.
- Experiential learning requires a few additional resources which are very cost effective.

3. Volunteers, specialists and teachers will require some training in order to address the specific needs of these refugees. Professional development activities would include helping staff understand the cultures and recent living experiences of their new students. They would work with trainers to learn research based strategies that best suite these particular students.

- This project would provide four regional trainings for all instructional and para-professional staff in these ESL programs.
- This project would provide training for literacy volunteers to prepare them to work with these new refugees.

**ORGANIZATIONAL PROFILES**

The Wisconsin Technical College System and the Adult Basic Education Programs have a long and well documented history of culturally responsive services to refugees and immigrants for more than 30 years. In support of ESL students the System provides support services for special needs, financial aid for students seeking to attend post secondary education, counseling and coordination with other community services. Faculty are certified based on their academic and work histories. A curriculum has been developed to correspond to the six performance levels of the National Reporting System. The System Office will be the project recipient and coordinator. Sub-contracts will be made to nine technical college districts. At that level the Dean or Coordinator of the Adult Basic Education Program will be responsible for the management of the funds and compliance with the project goals and reporting. In Milwaukee Silver Spring Neighborhood Center and the Indo-Chinese Learning Center of Neighborhood House will also be direct project recipients.

Local programs have met or exceeded their federal/state performance standards in each of the prior two years. They have implemented personal education plans for students and learn each student's goals. Classes are provided at the main campus, at outreach campuses and in the community at sites to accommodate access for all students. All CBO's have 5.01(C)3 status that is verified for funding through this agency and have been reviewed by an on-site review team.

**BUDGET JUSTIFICATION**

This is a statewide project recommendation and will fund several different local colleges and CBO's. Thus the salary for a part time instructor is an average.

Cost per ESL class section of 30 beginning level students

1.	Staff Costs	\$25,000
	Part time instructor, including fringe	
	\$25/hr X 15 hours per week x 52 weeks + fringe	
2.	Classroom resources:	\$900
	Standardized testing	\$270
	Books and other materials	
	@ \$21 per student	\$630
Total cost of instructor and materials per course section:		\$25,900
<u>Total cost of 23 course sections</u>		<u>\$595,700</u>
	4 regional workshops @ \$825 ea.	\$3,300
	Volunteer training @\$1,000	\$1,000
<u>Related Professional Development:</u>		<u>\$4,300</u>

## Attachment 5—Action Steps that Enhance the Oral Health of Hmong Refugees and other Wisconsin Residents

Action steps listed below are in accord with recommendations made by the Governor's KidsFirst Initiative, the State Health Plan and coalitions of public health organizations. These steps would enhance the oral health of Hmong refugees and all Wisconsin residents that have limited access to oral health care. These recommendations will maximizing resources for all and address the Hmong Resettlement Task Force's concern for the ongoing health management and disease prevention for refugees beyond the initial refugee health screening.

1. Support the utilization of dental hygienists to the fullest extent of their licensed scope. Services include screening, triage, prevention services (age-appropriate fluoride treatments and dental sealants) and case management for follow-up treatment referral.

**Rationale:** Since dental treatment resources are limited, triage to prioritize urgent and early treatment needs. Prevention services such as dental sealants provide physical barriers, strengthen the resistance of the child, avert future disease and they are cost effective.

2. Support DORL and DHFS statutory interpretations (s.447) and MA Updates that enable dental hygiene services to be incorporated into settings such as health departments and schools.

**Rationale:** Since there is a limited pool of dentists participating in referral, these interpretations enable dental hygienists to screen, determine the need for and provide prevention services such as fluoride treatments, dental sealants and referral, in schools and local health departments on an ongoing basis without a dentist's prescription. It is a wise use of licensed workforce since dentists are needed to provide more complicated dental diagnosis, relief of pain/infection and treatment of oral diseases.

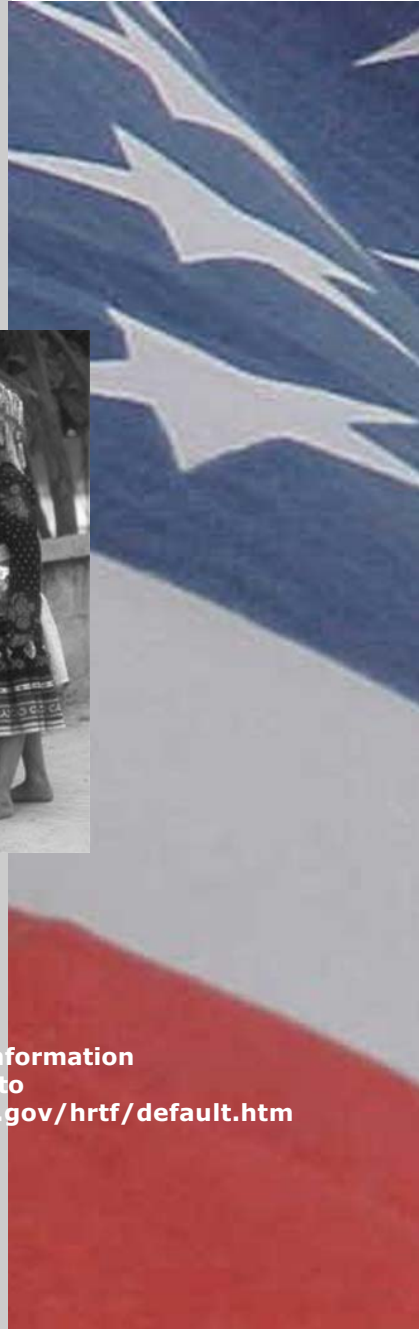
3. Consistent with the Governor's KidsFirst Initiative, support direct reimbursement for dental hygienists under medical assistance.

**Rationale:** Since dental hygienists can practice as independent contractors, this enables health departments and schools that are not HealthCheck agencies to contract with a dental hygienist for these services.

4. Promote training health department and other health care providers to provide oral screening, triage and age appropriate fluoride treatments (fluoride varnishes for infants and toddlers) As of February 2004, fluoride varnish is an MA covered service for physicians, nurses and dental hygienists.

**Rationale:** Dental caries is a transmissible bacterial infection (mother to child). The average age of infectivity is around age 2, earlier than most dentists see children. Early childhood cavities are preventable with early intervention (screening, age appropriate topical fluorides and parent education). Primary health care providers see infants and toddlers for well baby examinations, an ideal time to provide these services. The training is provided by DFS and also includes evaluating maternal oral health to help promote healthy birth outcomes:

[http://dhfs.wisconsin.gov/health/Oral\\_Health/oralhealthmanual.htm](http://dhfs.wisconsin.gov/health/Oral_Health/oralhealthmanual.htm)



For more information  
go to  
<http://dwd.wisconsin.gov/hrtf/default.htm>