

# A LANDSCAPE SCAN of Immigrant- and Refugee-supporting Organizations in Southeast Michigan

*Prepared by*



**PUBLIC SECTOR  
CONSULTANTS**

*Funded by*

**Community  
Foundation**  
FOR SOUTHEAST MICHIGAN

THE  
**KRESGE**  
FOUNDATION





**PUBLIC SECTOR  
CONSULTANTS**

*Prepared by*

Public Sector Consultants  
Lansing, Michigan  
[www.publicsectorconsultants.com](http://www.publicsectorconsultants.com)

*Prepared for*

Community Foundation for Southeast Michigan  
Detroit, Michigan  
[www.cfsem.org](http://www.cfsem.org)

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## INTRODUCTION

Refugees and immigrants are important to the fabric of our society. They contribute to the economic well-being of the communities we live in and bring stories of courage and indomitable spirit against great odds, a value and experience many Americans share with them. More than 100 million Americans can trace their ancestry to immigrants who arrived at Ellis Island between 1892 and 1954 (Keeling 2018). In 2016, the total foreign-born population in Michigan reached 6.7 percent, and 51.8 percent of the 653,196 foreign-born residents were naturalized citizens (U.S. Census Bureau n.d.). Of these citizens, 455,146 reside in southeast Michigan. Many families from this population have made their new homes in southeast Michigan, which is defined as Wayne, Oakland, Macomb, Washtenaw, and Genesee Counties for this report.

Southeast Michigan is a place of activity where many different nonprofit organizations provide an array of services to refugees, immigrants, and asylees.<sup>1</sup> However, the services that this population receives are threatened as the United States undergoes a period of fundamental transformation in immigration policy. Significant changes in current policy priorities include building a border wall with Mexico, cutting legal immigration, deporting millions of unauthorized immigrants, and banning refugees from certain Muslim-majority countries (Pierce et al. 2018). On August 31, 2018, the U.S. Department of State announced the withdrawal of all financial support to the United Nations Relief and Works Agency for Palestine Refugees, an agency that supports around five million refugees through education, healthcare, microfinance, infrastructure improvement, and emergency response services. The withdrawal culminated in a \$360 million reduction in the agency's annual budget in just over two years. Though many national organizations rely on this type of federal aid for services, much of this funding has been greatly reduced or eliminated altogether. These immigration policies have far-reaching implications for refugees, asylees, and immigrants worldwide and in southeast Michigan.

In order to address these policy changes and meet the needs of the region's foreign-born population, developing a regional strategy in southeast Michigan that includes collaboration between refugee-, asylee-, and immigrant-serving organizations as well as grantmaking organizations on unified goals is crucial. Currently, southeast Michigan lacks an organized, formal structure for the local philanthropic community to collaboratively learn, share, and fund issues that support immigrant and refugee populations in the region. An initial step toward building the Southeast Michigan Immigrant and Refugee Funder Collaborative is to understand the current philanthropic landscape that supports immigrant/refugee populations, as well as how nonprofits in the region are meeting these populations' needs. This report outlines the priorities of service and grantmaking organizations as well as the bodies of work that they each manage. By highlighting the needs expressed by these organizations, this report builds a better understanding of the gaps in services and overall funding and provides recommendations on opportunities for creating a sustainable infrastructure to support refugee, immigrant, and asylee communities in southeast Michigan.

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<sup>1</sup> The U.S. Department of Health and Human Services' Office of Refugee Settlement (2015) defines "refugee" as any person outside their country of nationality who is unable or unwilling to return to it because of persecution for reasons of race, religion, nationality, membership of a particular social group, or political opinion; it defines "asylees" as those who travel to the United States and subsequently apply for/receive a grant of asylum. For more information on these populations, visit <https://www.acf.hhs.gov/>.

The Immigration and Nationality Act (INA) of 1952 defines an "immigrant" as any alien in the U.S., except one legally admitted under specific nonimmigrant categories (INA Sec. 101 (a)(15)). For more information, visit <https://www.uscis.gov/ilink/docView/SLB/HTML/SLB/0-0-0-1/0-0-0-29/0-0-0-101.html>.

## PROBLEM STATEMENT AND METHODOLOGY

While studies have been conducted on the economic impact of refugee and immigrant households in the Midwest by the New American Economy, the Michigan Economic Center, and Global Detroit, an inventory of philanthropic investments made to these communities has not been developed. To address this information gap, the Community Foundation for Southeast Michigan (CFSEM) contracted Public Sector Consultants (PSC) to conduct a landscape scan of immigrant- and refugee-serving programs and nonprofit organizations in southeast Michigan—a five-county region comprising Wayne, Oakland, Macomb, Washtenaw, and Genesee Counties. The landscape scan identifies current funding structures as well as strengths and gaps in overall funding and services. It also builds a collaborative response to support immigrant and refugee communities in southeast Michigan.

PSC conducted the scan by analyzing Worldwide Refugee Admissions Processing System (WRAPS) data trends in Michigan (2012 to currently available) and identified local, state, and federal funding structures for immigrant-, refugee-, and asylee-serving organizations. PSC performed a Form 990 analysis of organizations that serve these populations in the study area and conducted stakeholder surveys and interviews of select organizations and thought leaders in the field.<sup>2,3</sup>

Key findings and recommendations based on these findings are summarized below.

## KEY FINDINGS

Based on its research, PSC found that:

- The number of refugees entering Michigan fell by 85.7 percent since fiscal year (FY) 2016. Nationally, the federal cap on the number of refugees the U.S. accepts has declined from a high of 85,000 refugees in FY 2016 to a low of 30,000 refugees in FY 2019.
- Federal funds given to Michigan through the Refugee Cash Assistance (RCA) program and the Refugee Medical Assistance (RMA) program have declined, as have the number of refugees receiving funds under the Temporary Assistance for Needy Families (TANF) program. In response to these drops in funding, grants to Michigan from the Office of Refugee Resettlement (ORR) for social services and targeted assistance have increased.
- Service organizations face increased financial pressures due to decreases in federal assistance. They have adapted to these changes by raising more revenue through philanthropic donations, optimizing their operational structures, and relying on volunteer staff.
- During interviews, service organizations expressed the view that despite the reductions in new refugee arrivals, the need for their services is growing.
- Grantmaking organizations do not have a specific focus on refugees or immigrants but rather focus on broader themes, such as reducing poverty, encouraging arts and culture, etc. Their effect on the lives of refugees and immigrants is incidental to their primary grantmaking mission.
- In order to qualify for grants from philanthropic organizations, service providers must often creatively fit their programs and services into categories that may not actually match in definition or design.

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<sup>2</sup> Form 990 is financial documentation required of nonprofits by the Internal Revenue Service.

<sup>3</sup> The year 2012 was used as a starting point for this analysis because it showcased changes under a previous presidential administration.

- In southeast Michigan, no regional strategy prioritizes what areas of service are funded. As a result, funds available and the services provided form a patchwork. This regional patchwork creates numerous gaps in much-needed services.

Based on the research findings, PSC also made a specific set of recommendations for CFSEM. The recommendations are not prescriptive; however, if followed, they could allow southeast Michigan to better meet the needs of the refugee and immigrant communities they serve.

## RECOMMENDATIONS

PSC's research found there is broad support for creating a new collaborative of existing organizations in southeast Michigan to develop a sustainable infrastructure to support immigrant and refugee communities. PSC recommends that:

1. CFSEM lead efforts to organize a new collaborative in southeast Michigan focused on building supports for refugee and immigrant communities.
2. While leading these efforts, CFSEM should be explicit in the goal of the collaborative to build infrastructure support for refugee and immigrant communities.
3. The collaborative should include grantmakers, service providers, and thought leaders. Grantmakers are necessary to make resources available for the collaborative. Service providers understand the needs encountered in the community and their recommendations surrounding regional priorities are important. However, service providers may add their own bias toward priority areas based on their organizational missions. Thought leaders have a pulse on refugee and immigrant community needs but not the same operational and logistical knowledge as service providers, so including them in the collaborative will make the current patchwork of funds and services more streamlined and build supports effectively.
4. The collaborative should not simply be another resource for providing monies for direct services but should focus on telling stories about immigrant and refugee experiences to the broader regional and statewide community.
5. The collaborative should develop a regional strategy for southeast Michigan by prioritizing areas for funding and services. Priority areas for the collaborative could include healthcare/medication, mental healthcare, entrepreneurship, transportation, English-as-a-second-language (ESL) classes, and housing, with the recognition that many areas are linked inextricably and cannot be discussed as separate.
6. The collaborative should foster dialogue and collaboration between member organizations to reduce service overlap and competition and to increase efficiency.
7. The collaborative should lead advocacy efforts in the region, state, and nationally through the combined power of its constituent members.

# REFUGEE STATISTICS

## BACKGROUND

To understand the inflow of immigrants into the U.S. and Michigan since FY 2012, PSC conducted an analysis of WRAPS data for refugee admissions and arrivals. Each FY ran from October 1 of a given year to September 30 of the following year. WRAPS is a collaborative computer information system provided by the Refugee Processing Center (RPC)—operated by the U.S. Department of State—to collect data on the movement of refugees from countries around the world to the U.S. for resettlement. The RPC uses this data to achieve its annual refugee admissions objectives.

For PSC's purpose, this data provided context for emerging trends regarding the effects of federal policy on refugees. Moreover, it also helped determine how refugee admissions changed in Michigan and in the U.S. since 2012 as well as the makeup of these populations (where they came from and where they stayed). Understanding this broader context also helped inform and implement the online survey and interview instruments. Using Tableau 10.5, a visual-analytic software, PSC also illustrated these changing trends, making the data accessible to different audiences.

## MICHIGAN REFUGEE TRENDS

Texas, California, New York, Michigan, and Ohio are the top five states in refugee acceptance since FY 2012. While Texas and California have accommodated an average of more than 5,000 refugees per year, New York and Michigan accommodated more than 3,000 each since FY 2012. Plotting these arrivals shows that the Midwest has generally accepted more newly arriving refugees than other parts of the country.

Out of the 428,355 refugees admitted into the U.S. since FY 2012, the top five states accounted for 34.2 percent (146,630) of the total number admitted, while the top ten states accounted for 54.4 percent (232,867). Michigan accounted for 5.3 percent of this total, a larger admittance rate than other states. This may be due to southeast Michigan's large Arab community, which attracts many immigrants (The New Economy Initiative 2016).

Even though Michigan has been a top-five state in accepting refugees, the changing national priorities have resulted in an 85.7 percent decline in total refugees entering Michigan since FY 2016 (Exhibit 1), a drop in refugees from 4,258 refugees in FY 2016 to 610 refugees in FY 2018. Between FYs 2016 and 2017, Michigan witnessed a reduction of refugees entering the state by 1,722 individuals. This accelerated to 1,926 refugees between FYs 2017 and 2018. Comparing across seven years, refugee arrivals in Michigan during FY 2018 account for only 2.7 percent of all arrivals from FY 2012 onwards.

The policy priorities at the national level have had profound impacts not only on the total number of refugees entering Michigan but also on the nationality of those who enter the state. Since FY 2012, Iraq, Burma, and Syria accounted for 73.5 percent of the 22,667 refugees who had arrived in Michigan. Between FYs 2017 and 2018, refugee numbers from Iraq dropped from 802 to eight; Syria from 683 to three; Sudan from 50 to two; and Iran from 25 to zero. In contrast, refugee numbers increased

from four to 45 from the Ukraine and zero to 13 for Pakistan. The reduction in refugee acceptance from Iraq, Syria, Iran, and Sudan is primarily due to Executive Order 13780, titled Protecting the Nation from Foreign Terrorist Entry into the United States. On June 26, 2018, the U.S. Supreme Court upheld the order, which bans entry of individuals from Iran, Libya, Somalia, Syria and Yemen. North Korea and Venezuela are also on the list. Chad, Iraq, and Sudan have been removed from the list.

#### EXHIBIT 1. Distribution of Total Refugees within Michigan, by Country of Origin (FY 2012 to FY 2018)

Country of Origin	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	Total	Total Percent
Iraq	2,484	3,431	2,759	1,442	1,119	802	8	12,045	53.1%
Burma	539	489	409	434	284	126	94	2,375	10.5%
Syria	1	6	1	179	1,374	683	3	2,247	9.9%
Congo	79	120	226	251	618	427	255	1,976	8.7%
Somalia	98	196	275	287	255	102	3	1,216	5.4%
Bhutan	317	165	187	121	140	135	92	1,157	5.1%
Afghanistan	0	4	11	33	210	55	46	359	1.6%
Sudan	16	99	24	90	55	50	2	336	1.5%
Eritrea	7	13	42	30	49	53	23	217	1.0%
Burundi	3	22	0	51	54	23	8	161	0.7%
Iran	8	9	11	22	9	25	0	84	0.4%
Cuba	12	40	26	3	0	0	0	81	0.4%
Ukraine	4	0	0	7	8	4	45	68	0.3%
Ethiopia	1	4	12	11	17	8	5	58	0.3%
Rwanda	5	18	0	11	7	9	2	52	0.2%
Total **	3,594	4,651	4,006	3,012	4,258	2,536	610	22,667	100%
<b>Total % **</b>	<b>15.9%</b>	<b>20.5%</b>	<b>17.7%</b>	<b>13.3%</b>	<b>18.8%</b>	<b>11.2%</b>	<b>2.7%</b>		

Note: \*\* Totals include numbers for all countries. Exhibit 1 shows only the top 15 countries of origin.

## NATIONAL REFUGEE TRENDS

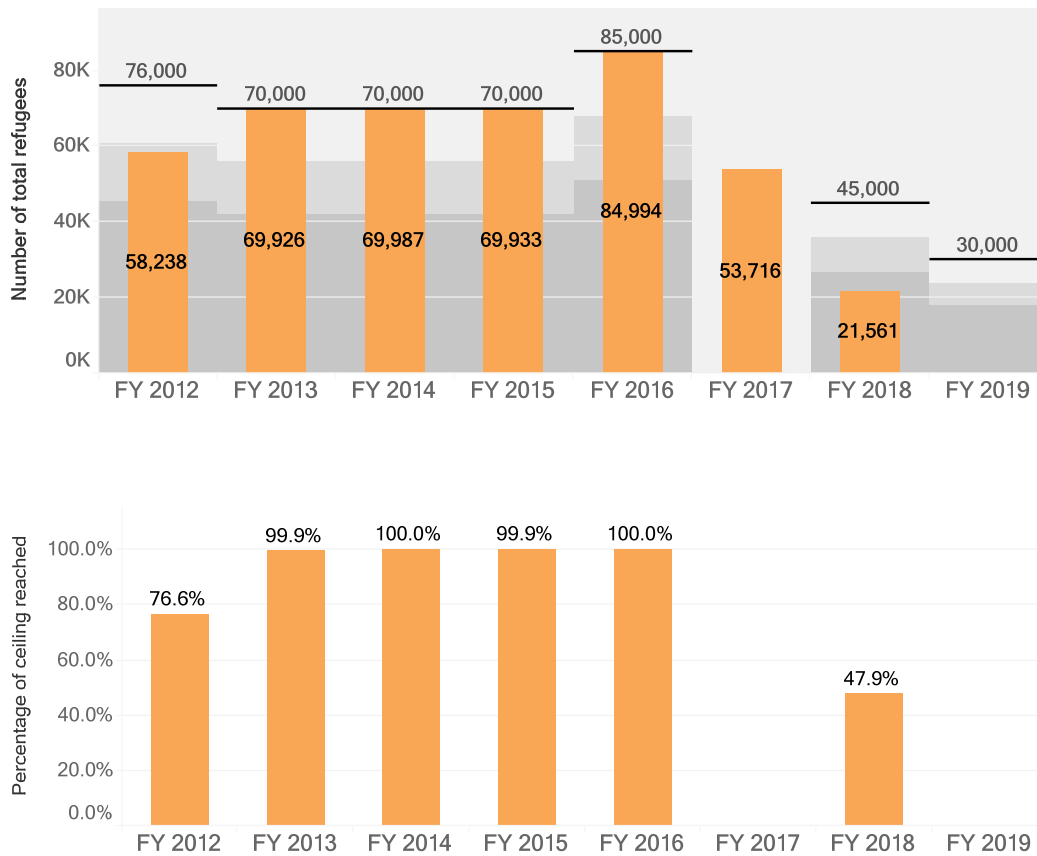
Every year, the executive branch of the government sets a cap on the total number of refugees who can be legally admitted into the U.S. This cap can be adjusted based on administration priorities and as a response to refugee crises. Additionally, refugee applications can be processed at rates that allow the annual cap to be met, exceeded, or not reached.

According to the WRAPS data, 428,355 refugees were admitted into the U.S. from FY In these seven years, the U.S. came close to meeting its annual admission cap, except for 2012 (Exhibit 2). In response to the Syrian refugee crisis of 2016, the government increased the cap to 85,000—100 percent of this cap was met. In FY 2017, there was no defined cap, but 53,716 refugees were allowed to enter the U.S. In FY 2018, the cap was cut to 45,000, a 47 percent reduction from 2016, despite continued crises in Syria and emerging crises in Yemen. For FY 2018, 47.9 percent of the cap was filled (Exhibit 2). The data at the national level shows that not only have the caps been reduced, but the federal government is processing refugee applications at a lower rate than before.



The United Nations High Commissioner for Refugees (UNHCR) (2017) estimated that there were approximately 25.4 million refugees worldwide at the end of 2017. However, current trends show that even as the need for refugee services grows, the U.S. government has continued to reduce its annual ceiling for refugee admissions. The 30,000 U.S. cap for FY 2019 represents 0.11 percent of the total worldwide refugee population—a small fraction of actual needs. Given that less than 50 percent of the refugee cap was filled in FY 2018, PSC estimates that a similar pattern will occur in FY 2019.

**EXHIBIT 2. Total Refugees Admitted into U.S. and Percentage of Annual Ceiling Reached (FY 2012 to FY 2018)**



## KEY FINDINGS

Federal policies regarding refugees are having a profound impact on Michigan and the country. Though a ban on individuals entering the country from predominantly Muslim countries affected refugees worldwide, federal policy affected those arriving in Michigan by country of origin considerably in FY 2018 (Liptak and Shear 2018; Pierce et al. 2018). Those admitted from Iraq, Syria (historically, among the highest numbers admitted to Michigan), Somalia, and Iran were reduced from 807, 683, 102, and 25 in FY 2017 to eight, three, three, and zero in FY 2018, respectively. Overall, Michigan has seen an 85.7 percent drop in refugee admissions when compared to FYs 2016 and 2018. Having been the fourth-ranked state nationwide in refugee admissions, Michigan’s decrease in FY 2018 is likely to have a far-reaching impact on organizations that serve these populations and the state. Service organizations within

Michigan that rely on monies linked to refugee numbers are likely to experience further funding disruptions. Federal monies and state monies with formulas that consider total number of refugees are likely to have a disproportionate impact on Michigan due to the large overall decline in refugee numbers. Service organizations will face pressures to maintain their level of service despite possible federal and state funding cuts. As government plays a lesser role in funding services for this population, the importance of grantmaking organizations will increase. Grantmaking organizations will face pressures to fill the void left by possible funding cuts at the federal and state levels. Beyond economic implications, there are also cultural consequences to consider. With fewer refugees, there is less diversity and a less vibrant Michigan—attributes difficult to financially quantify.

## **MICHIGAN'S REFUGEE FUNDING STRUCTURES AND THE NATIONAL RESETTLEMENT PROCESS**

PSC conducted a review of refugee resettlement processes and monies available through federal and state funds to better understand overall funding gaps for service providers in southeast Michigan. Though local funds were considered in this review, only data on federal and state monies for refugees were available directly. However, local funds for refugees and immigrants available at the aggregate level are summarized in this report's Form 990 analysis. Important providers of these funds are reported in the later interview section.

PSC also conducted a literature review on Michigan's resettlement process and models. PSC contacted the Michigan Department of Licensing and Regulatory Affairs to provide data on the RCA program, TANF, and other grants for FYs 2016, 2017, and 2018. Data was available on RCA dollar amounts received by the state, but dollar amounts for refugee TANF amounts were not.

### **THE NATIONAL RESETTLEMENT PROCESS**

The U.S. receives referrals on refugees needing resettlement through the UNHCR, U.S. embassies, nongovernmental organizations, and self-registration (Boland and Gaffney 2017). Prior to admission, refugees undergo overseas vetting that includes interviews, extensive security checks, and medical screenings. After this process, the Department of Homeland Security approves or disapproves admission. The U.S. Department of State processes the applications of those accepted.

#### **Resettlement Agencies**

Nine national U.S. resettlement agencies determine where newly arrived refugees will live, and coordinate with local resettlement agencies to secure housing (Elkin et al. 2018).<sup>4</sup> Local resettlement agencies provide refugees initial reception and placement services during the first 90 days of arrival. These services include taking refugees to their new homes, applying for social security numbers, registering children for school, setting up medical appointments, accessing public benefit programs and ESL classes, and aiding with everyday expenses, such as rent, clothing, and food (Elkin et al. 2018).

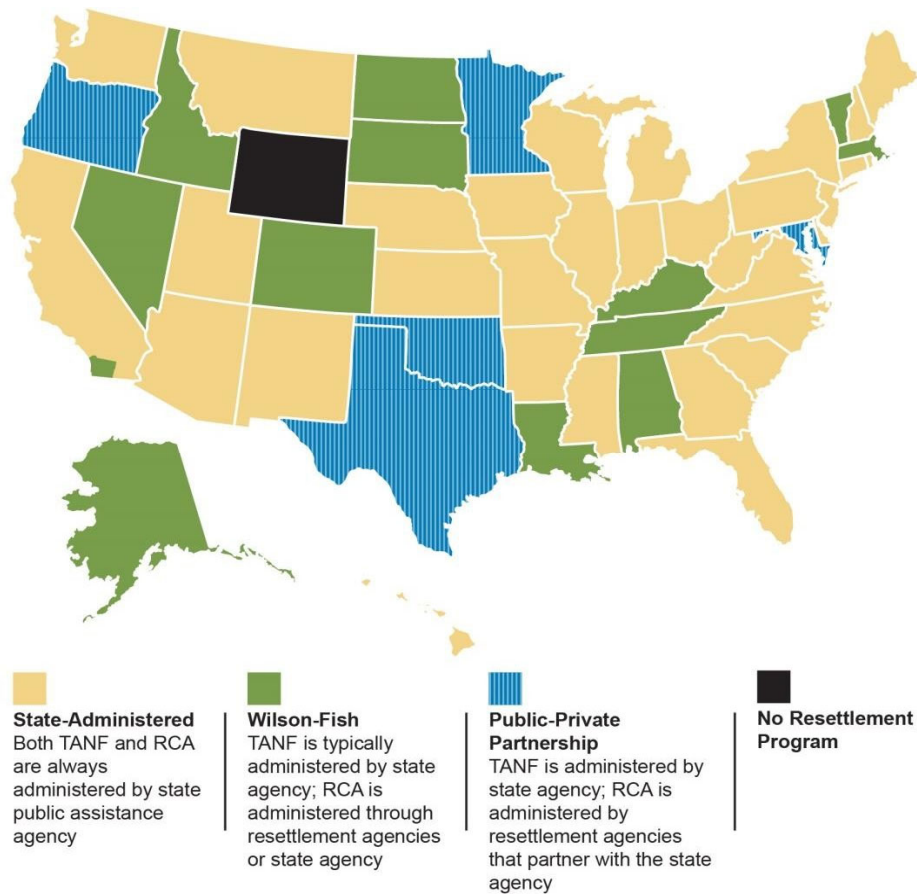
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<sup>4</sup> These nine organizations include Church World Service, Episcopal Migration Ministries, Ethiopian Community Development Council, Hebrew Immigrant Aid Society, International Rescue Committee, Lutheran Immigration and Refugee Service, United States Conference of Catholic Bishops, U.S. Committee for Refugees and Immigrants, and World Relief.

## Cash Assistance Programs

Once in the U.S., refugees are eligible for three cash assistance programs: TANF, RCA, and the Matching Grant Program. TANF benefits are not refugee specific and are typically available for five years after they enter the country. RCA is available for up to eight months from arrival and matching grants are available for up to 180 days after arrival. Apart from cash assistance, local resettlement agencies help refugees enroll in medical assistance, such as Medicaid or RMA, through the ORR and the Supplemental Nutrition Assistance Program, depending on eligibility. In southeast Michigan, the Michigan Department of Health and Human Services (MDHHS) is responsible for administering TANF and RCA grants for refugees. Nationally, there are three different models for administering RCA grants (Exhibit 6).

**EXHIBIT 3. RCA Models since January 2016, by State**



Note: Since January 2016, Kansas, Maine, and New Jersey no longer offer state-administered programs, and Texas no longer administers a public-private partnership model.

Source: Elkin et al. 2018.

## MICHIGAN'S REFUGEE FUNDING STRUCTURES

In Michigan, refugees apply for TANF and RCA benefits at local public assistance offices. These offices have specialized units with multilingual staff who understand refugee eligibility rules. The advantage of the Michigan model of funding is that refugees who do not qualify for TANF can be easily enrolled into RCA by the MDHHS (Elkin et al. 2018). Refugees enrolled in TANF, RCA, or both are provided access to an array of employment-related programs, including career and technical education programs and on-the-job training. These services are provided by refugee-serving organizations after eligibility for cash assistance is determined. Exhibit 3 shows how the employment service model works in Michigan.

### EXHIBIT 4. RCA and Employment Service Model in Michigan



Source: Elkin et al. 2018.

The average number of annual RCA recipients in Michigan fell by 83.8 percent and direct benefits to individuals fell by 86.4 percent between FY 2016 and FY 2018 (Exhibit 4). Between FYs 2017 and 2018, the numeric and percentage change is even greater. The average annual dollar amount in assistance received by a refugee from the RCA program was \$317.20 in FY 2016 and \$266.40 in FY 2018. In addition, refugee medical spending fell by 24.5 percent since FY 2016. Combined, RCA and medical assistance fell from \$3,733,240.40 in FY 2017 to \$1,042,355.50 in FY 2018—a 72.1 percent reduction. Dollar amounts spent on refugees through the TANF program were not available; however, the total number of TANF recipients fell by 34.2 percent between FYs 2017 and 2018.

### EXHIBIT 5. State-provided Assistance to Refugees (FY 2016 to FY 2018)

Year	Total RCA Recipients (Monthly Average)	Annual Number of Refugee TANF Recipients (Monthly Average)	RCA Spending by FY (Direct Benefits to Individuals)	Refugee Medical Spending
2016	3,552 (296)	24,324 (2,027)	\$1,126,817.50	\$1,176,922.30
2017	4,968 (414)	33,468 (2,789)	\$1,455,981.00	\$2,277,259.40
2018	576 (48)	22,008 (1,834)	\$ 153,465.50*	\$888,890.00
<b>Percent Change FY 2016 to FY 2018</b>	-83.8%	-9.5%	-86.4%	-24.5%
<b>Percent Change FY 2017 to FY 2018</b>	-88.4%	-34.2%	-89.5%	-61.0%

\*Does not include data for September 2018.

Between FYs 2017 and 2018, monies received through the ORR grants by the state increased by 27.1 percent for social services and targeted assistance (Exhibit 5). During the same period, monies available for services to older refugees increased by 52.7 percent and school impact services grew by 16.3 percent. Data on social service employment case load was unavailable for FY 2018, but between FYs 2016 and 2017, the employment case load rose by 11.9 percent.

#### EXHIBIT 6. ORR Grants (FY 2016 to FY 2018)

	Social Services and Targeted Assistance	Services to Older Refugees	School Impact Services	Social Service Employment Services Caseload
<b>2016</b>	\$3,279,366.0	\$121,500.0	\$797,133	2,441
<b>2017</b>	\$2,683,231.0	\$121,500.0	\$631,145.0	2,732
<b>2018</b>	\$3,409,544.0	\$185,523.0	\$733,776.0	N/A
<b>Percent Change FY 2016 to FY 2018</b>	4.0%	52.7%	-7.9%	N/A
<b>Percent Change FY 2017 to FY 2018</b>	27.1%	52.7%	16.3%	N/A

## KEY FINDINGS

Between FYs 2017 and 2018 in Michigan, total RCA recipients fell by 88.4 percent, refugee TANF recipients fell by 34.2 percent, RCA spending fell by 89.5 percent, and refugee medical spending fell by 61.0 percent. On average, the annual cash assistance provided in FY 2018 by the RCA program was \$266.40 per individual, enough to cover approximately one month's car payment. Given that the refugee cap for FY 2019 was lowered to 30,000, the RCA and RMA programs may face further financial strain. However, ORR grants to Michigan increased between FYs 2017 and 2018, allowing grant recipients to provide much-needed services for refugees.

## FORM 990 DATA ANALYSIS

### PURPOSE OF FORM 990

Nonprofit organizations recognized by the Internal Revenue Service (IRS) in the U.S. must file tax Form 990, which provides the public with financial information about these organizations. PSC analyzed this data of immigrant- and refugee-serving organizations to determine organizational revenues and expenditures in 2015 and 2016. Data from the analysis showed the direct economic impact of service organizations, provided information on their solvency, and highlighted gaps in financial support.

## METHODOLOGY

Initially, Michigan 2-1-1 services provided PSC with the employer identification number (EIN) of every refugee and immigrant service organization within the five counties of southeast Michigan.<sup>5</sup> Using each organization's EIN, PSC extracted their 990 forms from GuideStar, an online service that provides information on IRS-registered nonprofit organizations.

Michigan 2-1-1 services provided PSC with the employer identification number of seven refugee and immigrant service organizations within the study area, and CFSEM added another 21 organizations to this list. PSC was able to find 2015 and 2016 tax forms for the seven organizations from the 2-1-1 services list and 16 organizations from the CFSEM list within GuideStar. PSC was unable to find 2015 or 2016 tax forms for the remaining five organizations. In addition to the 23 organizations with available tax forms, PSC added another 15 by searching within GuideStar for all organizations classified as refugee- and immigrant-serving organizations (code P84 under Human Services).

Organizations with a zero budget in 2015 or 2016, or those classified as defunct by the IRS, were not included in this analysis.

PSC analyzed organizational revenues (Part VIII of the form) and expenses (Part IX) from the 2015 and 2016 tax forms for the 38 organizations in the final list. The balance sheet, Part X of the form, which covers assets, liabilities, and fund balances of the organizations, were not analyzed since PSC determined this information to be tangential to the project's focus. In addition, the activities and governance section of the tax forms were often missing information; therefore, PSC did not include them in the analysis either. Information from the activities and governance section on the total number of employees within the organizations was collected through the online survey instrument.

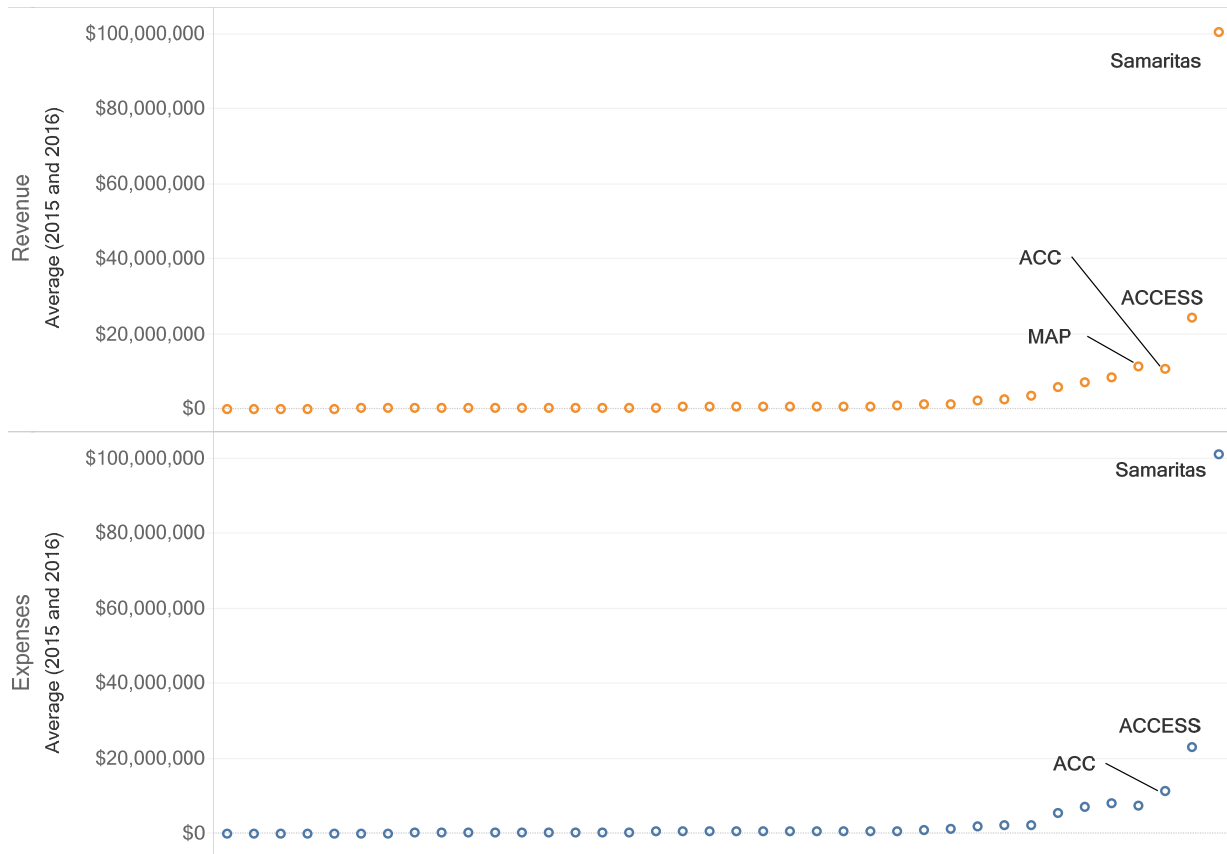
## RESULTS AND DISCUSSION

A plot of the average revenues and expenses (2015 and 2016) shows that most (26) refugee- and immigrant-serving organizations in southeast Michigan have an average budget of less than \$1 million and very few (four) organizations have an average budget greater than \$10 million (Exhibit 7). Samaritas is the largest organization, with an annual average budget exceeding \$100 million. The Arab Community Center for Economic and Social Services (ACCESS), Arab American and Chaldean Council (ACC), and the Michigan Advocacy Program (MAP) are the other three organizations with average revenues greater than \$10 million. These four organizations combined account for 79.3 percent of total revenues and 79.6 percent of all expenditures across all organizations within southeast Michigan.

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<sup>5</sup> Michigan 2-1-1 is a free service connecting state residents to assistance for health and human services agencies and resources, such as bill payment assistance and community, crisis, employment, food, and health services.

**EXHIBIT 7. Average Revenues and Expenses of Organizations within Southeast Michigan**



Note: Organizations with revenues and expenses greater than \$10 million are indicated with their name.

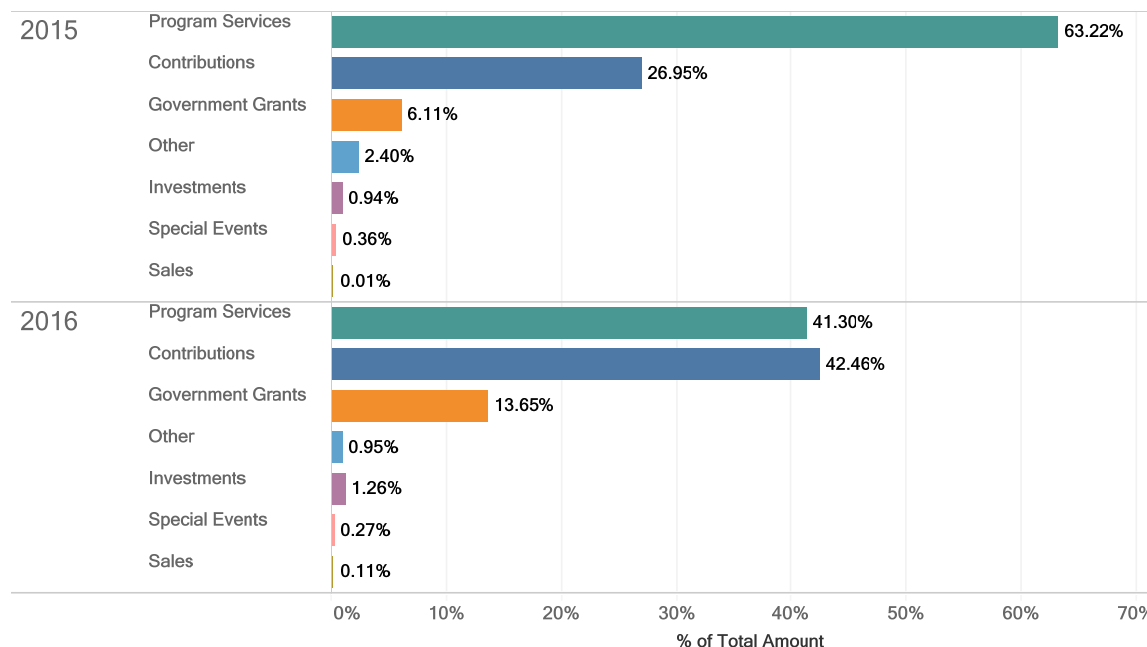
The total revenue for all organizations within southeast Michigan increased by \$9.02 million (5.02 percent) between 2015 and 2016, while expenses grew by \$480,000 (0.27 percent) (Exhibit 8). Correspondingly, average revenues increased by \$240,648, while average expenses rose by \$21,861. The slower growth in expenditures compared to revenues may be an indication that organizations are exercising caution about spending. The annual budget of the smallest organization was 0.01 percent of the budget of Samaritas, while the median annual budget of all organizations was 0.48 percent of that of Samaritas. Due to economies of scale, those with larger budgets may have more advantages, including the ability to provide stronger advocacy.

### EXHIBIT 8. Summary Statistics of Organizational Revenues and Expenses within Southeast Michigan

Statistical Measures	Revenue		Expenses	
	2015	2016	2015	2016
<b>Average</b>	\$ 4,755,393	\$ 4,996,041	\$ 4,711,298	\$ 4,733,159
<b>Median</b>	\$ 522,846	\$ 487,006	\$ 476,948	\$ 498,105
<b>Mode</b>	N/A	N/A	N/A	N/A
<b>Minimum</b>	\$ 19,440	\$ 877	\$ 15,978	\$ 12,583
<b>Maximum</b>	\$ 101,224,100	\$ 99,763,132	\$ 101,566,638	\$ 100,302,147
<b>Total</b>	\$ 179,686,313	\$ 188,708,619	\$ 178,159,318	\$ 178,639,363
<b>Number of Organizations</b>	38	38	38	38

Revenues grew between 2015 and 2016, and the composition of revenues changed. Program service revenue, defined as revenue earned by selling products or services related to the mission of the organization, fell from 63.22 percent to 41.30 percent (Exhibit 9). Program service revenue includes income earned from providing a service, facility, or product to a government agency that benefited that government agency directly instead of the whole public. This contrasts with government grants, which increased from 6.11 percent to 13.65 percent, and are grants from local, state, federal, or foreign government sources that enable an organization to provide a service or maintain a facility for the direct benefit of the public. Contributions grew from 26.95 percent to 42.46 percent and are the combined total of income from federated campaigns, membership dues, and fundraising events related to organizations minus government grants.

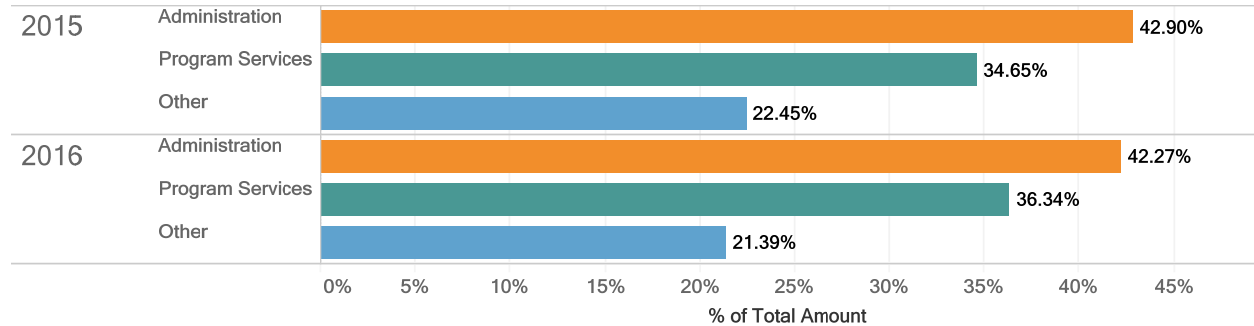
### EXHIBIT 9. Source of Revenue for All Organizations, by Year





Expenses did not show major changes between 2015 and 2016. Administrative costs fell from 42.90 percent to 42.27 percent (Exhibit 10) as did other expenses that year, dropping from 22.45 percent to 21.39 percent. Program service expenses grew by 1.69 percent from 34.65 percent to 36.34 percent. These calculations suggest organizations were paying for their program expenses by reducing administrative and other costs.

**EXHIBIT 10. Source of Expenses for All Organizations, by Year**



## KEY FINDINGS

Between 2015 and 2016, revenues for service organizations increased by \$9.02 million (5.02 percent) compared to a \$480,000 (0.27 percent) increase in expenditures. Organizations grew revenues by relying more on contributions and government grants than on program service revenues. On the expenditure side, organizations increased service expenditures by redirecting administrative and other expenses.

Samaritas, ACCESS, ACC, and MAP showed the highest revenues and expenditures. More broadly, eight other organizations had revenues and expenditures greater than \$1 million: Catholic Charities of Southeast Michigan, Catholic Social Services of Washtenaw County, Southwest Solutions, Chaldean Community Foundation, Jewish Family Services of Washtenaw County, Chaldean Federation of America, Zaman International, and Michigan United. Because of their size, these 12 organizations are key in shaping the public’s and policymakers’ opinions on refugee, immigrant, and asylee policy.

Most organizations in southeast Michigan are reacting in a proactive manner to the challenges they face, but some may not be able to sustain operations without additional funding sources. When service organizations fail, the resulting service gaps must be filled by others, increasing the strain on funding streams.

# SURVEY OF IMMIGRANT- AND REFUGEE-SERVING ORGANIZATIONS IN SOUTHEAST MICHIGAN

## PURPOSE OF THE SURVEY

PSC conducted a 25-question online survey of 38 organizations identified in the Form 990 data analysis from southeast Michigan. The purpose of this survey was to gain insight into the philanthropic investments made to these organizations, as well as the needs, barriers, and gaps in services for refugees, immigrants, and asylum seekers living and accessing human services in southeast Michigan. The survey consisted of questions within four topic areas: services, clients, funding, and organizational characteristics. PSC did not seek to differentiate between refugees, immigrants, and asylum seekers. A total of 18 organizations answered the survey—a response rate of 47.3 percent.

## RESULTS

### Service Types

Question three of the survey asked respondents about the types of services their organizations provide to refugees, immigrants, or asylum seekers. PSC created a list of 15 preselected service types from which organizations could choose: adult education; job training; employment/job placement; healthcare/medication; mental healthcare; English language/translation services; immigration services; other legal services; food; housing; transportation; youth education, mentoring, and/or tutoring; social services; advocacy for refugee/immigrant rights; and an open-ended other category. Out of the 15 service types, respondents noted immigration services (72.2 percent), English language/translation services (72.2 percent), and advocacy for refugee and immigrant rights (66.6 percent) most frequently. The four types of services least likely to be provided were healthcare/medication (22.2 percent), mental healthcare (38.9 percent), transportation (38.9 percent), and other legal services (38.9 percent). Most other services, such as adult education; job training; employment and job placement; housing; youth education, mentoring, and/or tutoring; social services; and others were provided by 50 percent or less of the organizations.

### Service Areas

Question four of the survey asked respondents about the percentage of their organizational annual budget allocated to the 15 service types. The top five service types where organizations spent most of their revenues were in youth education, mentoring, and/or tutoring ( $\bar{x}$  = 23.7 percent, SE = 13.8 percent); social services ( $\bar{x}$  = 15.6 percent, SE = 7.1 percent); immigration services ( $\bar{x}$  = 15.2 percent, SE = 5.4 percent); employment/job placement ( $\bar{x}$  = 12.0 percent, SE = 4.3 percent); and other legal services ( $\bar{x}$  = 10.7 percent, SE = 4.1 percent).<sup>6</sup> The three service areas where organizations spent the least of their revenues were in healthcare/medication ( $\bar{x}$  = 1.8 percent, SE = 1.2 percent), mental healthcare ( $\bar{x}$  = 4.7 percent, SE = 2.2 percent), and adult education ( $\bar{x}$  = 4.8 percent, SE = 1.9 percent).

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<sup>6</sup>  $\bar{x}$  stands for the mean. SE refers to standard error, a measure of the statistical accuracy of an estimate, equal to the standard deviation of the theoretical distribution of a large population of such estimates.

## **Funding Sources**

Question five of the survey created a grid where organizations could select source(s) of funding by service type. Respondents reported receiving monies from 185 funding sources. The largest number of funds were from private donors (44.9 percent), followed by the federal government (21.6 percent), state government (20.0 percent), and local/municipal government (10.3 percent). Private donors included organizations such as the Jewish Federation of Metropolitan Detroit, the W.K. Kellogg Foundation, the Ford Foundation, and the Michigan State Bar Foundation. Federal government sources of funding included the U.S. Department of Health and Human Services, the U.S. Department of Justice, and the U.S. Department of Housing and Urban Development. State monies for services were provided by the Michigan Department of Education, the governor's office and the MDHHS. Local and municipal contributors included the Cities of Dearborn and Detroit as well as Washtenaw County.

## **Populations Served**

Organizations varied greatly in the average number of people served in a month, ranging from ten to 2,300, with a mean of 461 individuals and an SE of 266. Out of 18 organizations, 11 reported serving individuals already receiving aid through public assistance programs (TANF, Supplemental Security Income, food stamps, and Medicaid), with 10 to 90 percent of the clients receiving public assistance. Refugee-, immigrant-, and asylee-serving organizations reported, on average, that 75 to 100 percent of their clients live below the federal poverty line. Most organizations specifically served women, men, and minors, while two reported serving families as well as those in the lesbian, gay, bisexual, and transgender communities. Almost 90 percent of organizations referred refugees, immigrants, and asylees to services within their county, while almost 67 percent referred individuals to services outside their county. Ten organizations (55.6 percent) served their clients from one to three years, while five (27.8 percent) served their clients for more than three years. The five most-referred services for these populations were healthcare and medication (72.2 percent), mental healthcare (72.2 percent), housing (66.7 percent), adult education (66.7 percent), and English language/translation services (61.1 percent).

## **Organizational Budgets**

For FY 2017, the average organizational budget for was \$4.32 million, with a range from \$52,614 to \$26.26 million. The median budget was \$1.57 million, indicating a right-skewed distribution of budgets (Exhibit 7). This skewed distribution was also observed in the Form 990 analysis, and the survey data further validated the results of the Form 990 analysis. The proportion of the annual budget dedicated to immigrants, refugees, and asylees ranged from 5 to 100 percent of organizational budgets, with a mean of 55.8 percent (SE = 9.8 percent). The largest source of funding for organizations came from private donations (44.6 percent of budget, SE = 8.8 percent), followed by the federal government (mean = 18.9 percent, SE = 5.9 percent), state government (13.8 percent, SE = 6.0 percent), local government (2.8 percent, SE = 1.4 percent), other sources (0.8 percent, SE = 0.5 percent), and investments/endowments (0.4 percent, SE = 0.4 percent). Private donations include philanthropic investments and foundation grants.

## Staffing

In terms of staffing, organizations serving refugees, immigrants, and asylees had between zero to five executive-level positions (1.8 full-time equivalents, or FTEs, SE = 0.3 FTE), zero to 16 director-level positions (3.9 FTEs, SE = 1.1 FTEs), zero to 250 program-level positions (29.9 FTEs, SE = 15.5 FTEs), zero to 30 administrative-level positions (4.2 FTEs, SE = 1.9 FTEs), and zero to 21 other paid positions (two FTEs, SE = 1.4 FTEs). Almost all organizations relied heavily on the help of volunteers. Volunteer hours ranged from 720 to 19,500 annually, with a mean of 7,145 hours. If a full-time employee works 2,080 hours a year, the mean number of volunteer hours is equivalent to having 3.44 FTEs annually.

Within the service organizations, if the mean number of executive-level, director-level, program-level, administrative support, and other paid staff positions is added, there are approximately 42 employees. The average number of clients served per month by the service organizations was 461. Even after including volunteer hours, the ratio of employees to clients served per month within service organizations was greater than ten, an indication that these organizations may be stretching their staffing resources to meet community needs.

## KEY FINDINGS

In southeast Michigan, the need for refugee, immigrant, and asylee services is high, with service organizations helping hundreds of clients monthly and on an ongoing basis. Most individuals and families receiving services live in poverty. While it is unclear whether services provided are enough to get individuals and families out of poverty, it is clear that without these services the individuals and families would be worse off. Private donations are the main source of revenue funding these services, followed by federal, state, and local government funding. Access to these services is important because it is likely to determine the success of settlement and integration within the broader southeast Michigan community.

The survey showed that strengths and gaps in services exist within southeast Michigan and were created by four factors. The first factor was that not all service providers offered services across all 15 service areas. Service areas of relative strength in which there were many providers were immigration services, English language/translation services, and advocacy for refugee and immigrant rights. Gaps were most pronounced in healthcare/medication, mental healthcare, transportation, and other services. Other services include entrepreneurship, financial empowerment, emergency services, etc.

The second factor creating strengths and gaps in services was how much of finite budgetary resources was allocated to different program areas by service organizations. Service organizations allocated more of their budget to service areas within youth education, social services, immigration services, employment/job placement, and other legal services. Fewer monies were allocated to the areas of healthcare/medication, mental healthcare, and job training.

The third factor creating strengths and gaps in services is how much money was available from grantmakers to fund programs within the 15 service areas. PSC's survey did not collect this information directly, but information based on 185 total sources of funding indicated some service areas received more support than others. The areas that received more funding support from external organizations included immigration services, English language/translation services, transportation, and adult education. The areas that received less support were other services, healthcare/medication, and other legal services.

In southeast Michigan, the service areas that received the greatest support were immigration services and English language/translation services, while those receiving the least support were healthcare/medication, mental healthcare, and other services. The remaining ten service areas aligned differently on the factors either as strengths or weaknesses or a combination of both.

The fourth factor that could have resulted in gaps in services was a lack of adequate staff to meet the needs of the community. Quantitatively, it can be said that service organizations in southeast Michigan rely heavily on volunteer staff and have a client-to-staff ratio of greater than ten to one. However, it is not known whether this staffing level is adequate or inadequate. In order to better determine how the needs of the community were being met, PSC paired the survey with qualitative interviews of service organizations, grantmakers, state agencies, and individuals with expertise in refugee/immigrant issues. The findings from the interviews are presented in the next section. When combined with the quantitative survey data, they present a better picture of the strengths, gaps in services, and resources available to the community, as well as the interest that organizations have in creating a collaborative to address gaps.

## **INTERVIEWS OF IMMIGRANT- AND REFUGEE-SERVING ORGANIZATIONS IN SOUTHEAST MICHIGAN**

### **PURPOSE OF THE INTERVIEWS**

PSC conducted interviews with multiple organizations that work on issues impacting the lives of immigrants, refugees, and asylees. The purpose of these interviews was to gain additional insights into the services being provided, projects being funded, barriers, and gaps in services to immigrants and refugees. Interviewees included service organizations, grantmaking organizations, state government offices, and individuals with expertise in immigrant/refugee issues. PSC conducted 14 interviews—five face-to-face and nine via telephone. The interviews consisted of 36 questions and took approximately two hours to complete. Questions stayed within ten topics: general, settlement and integration, housing, employment, health and mental health, language training programs, policy landscape, funding structure, funding collaborative, and open ended. The interview script was modified for conversations with state agencies.

### **GENERAL**

Organizations support immigrants and refugees in southeast Michigan in different ways. Typically, grantmaking organizations fund a wide variety of projects or services related to immigrants and refugees incidentally (e.g., funding for projects aimed at people in poverty where refugees are a subset). Some funded projects for immigrants and refugees specifically (e.g., having an arts and culture team within the organization that focuses their grants on ethnic communities). Service providers and grantmaking organizations have collaborated with CFSEM either directly or indirectly in the past.

### **SETTLEMENT AND INTEGRATION**

Service and grantmaking organizations provide an array of services for settlement and integration. Almost all organizations provided examples of programs that have led to improved outcomes for refugees and immigrants. Organizations provide advocacy and help refugees and immigrants with necessities, such as finding affordable housing, obtaining legal services, finding ESL classes that include technological literacy, and joining initiatives that help change the narrative around refugees and immigrants.

The overarching issue that emerged regarding settlement and integration was the lack of access to services. PSC was able to organize the lack of access to services into specific barriers that prevented better access. The barriers included language, culture, employment/financial, transportation, inability to obtain a legal Michigan ID, lack of positive stories about this population, and duration of services. The barriers were often intricately linked and could not be neatly separated into distinct and separate pieces. For example, not being able to speak English well could put a refugee/immigrant/asylee at a disadvantage during a job interview, which directly impacts employability.

### **Language Barriers**

Many refugees, immigrants, and asylees do not speak English. One interviewee shared that some refugees, immigrants, and asylees they encountered do not know how to sign their name as they were only used to fingerprints for identification in their country of origin. Teaching refugees, immigrants, and asylees basic reading, writing, and speaking skills was an important step in the integration process according to this interviewee. Another interviewee mentioned a refugee client who was able to obtain a job at the Detroit airport but could not read bus signs or maps that would allow them to commute to work.

Another interviewee talked about how businesses in their area had called and asked if a bilingual bank existed in the neighborhood. Others shared examples of how refugees/immigrants/asylees trying to get a social security number or a driver's license had navigate a minefield of services difficult to access without a strong grasp of English.

One interviewee shared their story regarding the Flint water crisis, during which information was not translated correctly to residents. Government translations were literal and failed to convey the intended message. The interviewee's organization hired translators who translated materials at third- and fourth-grade reading levels into Spanish and Arabic, and the information was then disseminated in a way the community could understand. During the same crisis, refugees and immigrants who went to centers for clean bottled water had to show identification, which many people did not have. Advocacy efforts by this organization led to individuals not having to show identification; instead, they could simply state their individual zip code.

As one interviewee put it "...there are many social service initiatives to help people face the economic challenges, but these are not linguistically accessible or culturally competent in the way they provide their services, so utilization among immigrants and refugees is lower."

### **Cultural Barriers**

One barrier impacting many refugees and immigrants is the difficulty of bridging cultural gaps. An interviewee shared a story about a refugee client who attended a job interview. During the job interview, the refugee candidate was asked what animal he would choose to be if given a choice. The candidate answered that he would choose to be a lamb. In the U.S., it may be typical for candidates in the given situation to choose an apex predator, such as a wolf or lion, to showcase their skills in leadership; however, the candidate chose a lamb because of his Christian faith, representing his humility, which is an important part of his culture. The candidate got the job because his employers understood the cultural context of the candidate's response. According to this interviewee, for every instance where cultural context is understood and appreciated, there are many more instances where they become a barrier.

## **Employment/Financial Barriers**

Refugees, immigrants, and asylees struggle to access employment and are thus impacted financially in a variety of ways, including being unable to access necessities such as bank accounts, loans, or other forms of assistance. One interviewee raised an issue surrounding asylees. Approval for asylum applications may take five to six years before the applicant is granted legal asylee status. Until granted the status, asylees cannot work legally, which bars them from receiving public aid and opens the door for them to experience various forms of abuse and harassment that stem from being paid under the table.

One interviewee discussed work being done by the Michigan Office of New Americans (MONA) that is helping alleviate employment barriers by finding ways for refugees to transfer their degrees and skills gained abroad to be used in Michigan. The interviewee used the example of a refugee doctor in another country who may be teaching a biology class or pursuing a pharmaceutical practitioner license in Michigan. The goal is to help individuals who have the requisite knowledge and skills to continue providing related professional services to the communities they live in.

In addition, multiple interviewees explained that immigrants, refugees, and asylees had a difficult time accessing capital. One grantmaking organization attempted to rectify this barrier by working with the entrepreneurial ecosystem in Detroit. They have made collaborative investments in the New Economy Initiative, a project of the Community Foundation for Southeast Michigan, and helped start the Entrepreneurs of Color Fund, now a \$22 million program that provides financing from \$50 to \$150,000 to people of color to start their own businesses. This organization also supports the ProsperUS program, a training program for entrepreneurs targeted at Detroiters. Both Entrepreneurs of Color and ProsperUS are built with very strong pre- and postloan technical assistance. One example of the impact of these programs was shared by an interviewee. The 2017 winner of Comerica's Hatch contest, an immigrant from East Africa and graduate from the ProsperUS program, will open an East-African restaurant in midtown Detroit.

## **Transportation Barriers**

Unlike immigrants, refugees arrive in the U.S. with almost no resources. Finding the means to afford transportation is a challenge. Many interviewees also discussed southeast Michigan's lack of adequate public transportation as a barrier.

## **Obtaining Legal ID**

To one interviewee, an imposing first step in integration was the ability to obtain legal identification. While this issue may be more acute for undocumented immigrants, this interviewee felt that the inability to obtain a legal ID prevented many members of this population from getting much-needed services. The lack of legal ID meant that these individuals often worked outside the legal framework and were subjected to exploitation.

A few interviewees talked about their efforts to help develop a new form of identification (a municipal ID) that could be issued by a city government. The municipal ID would be provided to individuals in the community who did not want to document their legal status in the U.S.

## **Holistic View of Refugees, Immigrants, and Asylees**

Multiple interviewees talked about the importance of presenting positive stories about refugees, immigrants, and asylees and their struggles to be successful in the U.S. They felt that most stories surrounding this population were negative and that the narrative needed to change in order to help facilitate integration. Interviewees also felt conversations of this population revolved around their economic benefit to society and missed many of the other salient features that communities and individuals bring to the U.S.

## **Time Frame when Resources are Available**

One interviewee mentioned that resettlement agencies only work with refugees for 90 days after arrival, which is not long enough for someone to integrate into a new culture. This interviewee has worked to try to extend these services for up to five years (including applying for a social security card, driver's license, and extended English-language training).

The issues surrounding integration were summed up by one interviewee, who suggested that many people mistakenly believe that refugee, immigrant, and asylee communities are uninterested in or incapable of integration, and that these people do not see that integration is more than simply arriving in the U.S., receiving benefits, and living like a natural-born citizen. There are inequalities that must be addressed before true integration can happen.

## **HOUSING**

Housing service providers help refugees and immigrants find permanent housing and sometimes provide rent support. Generally, grantmakers do not provide funding for housing. Resources for housing are made possible through federal monies.

Multiple interviewees expressed that there was a lack of access to affordable, acceptable housing in southeast Michigan. A service provider who worked on housing issues mentioned that settlement housing expired after 30 to 90 days and that refugees and immigrants were then put in temporary housing (motels) that were too expensive. The monies for temporary housing would then run out quickly and these individuals would find themselves experiencing homelessness. Housing, according to one interviewee, comprised 65 to 70 percent of an individual's gross income, and problems associated with cost made it expensive and "woefully inadequate." This interviewee also mentioned knowing refugees and immigrants who had been on Section 8 housing waiting lists for ten or more years.

Another interviewee talked noted that immigrants and refugees are exploited by landlords and often lived in substandard housing. They mentioned instances where speculators had convinced immigrants to sign land contracts to buy houses at very low prices only to lose their equity in the house and face eviction when they missed a payment due to an unstable job situation.

Another interviewee discussed the work of Freedom House and how the organization worked with landlords by signing six-month rental contracts on behalf of refugee or asylee applicants. After paying for six months, Freedom House would put the rental agreement in the resident's name. Landlords typically did not want refugee clientele, but Freedom House acted as a bridge, helping refugees with this issue.



One interviewee had completed a housing study where they had surveyed immigrants within the city of Detroit. This interviewee was in the process of mapping out the housing ecosystem in southwestern Detroit to identify how newcomers and immigrants were accessing homeownership. The same interviewee also worked with the United Community Housing Coalition providing outreach to refugee and immigrant families facing tax foreclosure. They mentioned the dire need for homeownership among this community, but the challenges faced by refugees and immigrants, who often do not have bank accounts or know their credit score, make homeownership difficult.

## **EMPLOYMENT**

Many service providers talked about the challenges regarding employment in southeast Michigan. Service providers and grantmaking organizations discussed successful employment programs in southeast Michigan and the barriers to employment within the region. For example, the State of Michigan was heavily invested in funding service providers that helped refugees and asylees find employment that provided a living wage.

One successful employment program mentioned in interviews was a partnership between the Henry Ford Health System (HFHS) and ACCESS. In this partnership, HFHS provided ACCESS with professional development regarding the sorts of jobs they needed filled and ACCESS trained immigrants and refugees to specific job descriptions. It is possible that the model created by HFHS and ACCESS can be replicated.

Another interviewee talked about MDHHS's PATH (Partnership. Accountability. Training. Hope.) program that helps refugees and immigrants eligible for cash assistance find employment. The PATH program was being administered through Michigan Works! agencies and this service provider offered employment services along with ESL classes. One requirement of the PATH program is that individuals had to be working or training for 35 hours per week. This provider mentioned that time spent in ESL classes did not count toward the 35-hour requirement, which made it difficult for those with language barriers to learn English and meet PATH requirements. A policy suggestion was made by this provider to allow ESL language classes to count toward the 35-hour weekly requirement for PATH.

Another interviewee talked about their work in connecting immigrant talent to the unmet talent needs of the regional economy. The organization manages the Global Talent Retention Initiative (GTRI), which was the first international student retention initiative in the country. The interviewee helped international students from the University of Michigan, Michigan State University, Wayne State University, Eastern Michigan University, and Oakland University connect with employers in the region by hosting job fairs on campuses. In addition to GTRI, the interviewee also managed the Cultural Ambassadors Professional Networking Program (CAPNP), which matched international students, underemployed immigrants, and refugees with immigrant professionals. By creating professional networks, the CAPNP aimed to reduce the talent gaps within the region.

One service organization noted that refugees and asylees were not permitted to work until they received authorization. During this time, families had to wait, which placed greater emotional stress on them. They also discussed refugee clients with high educational backgrounds that had to work as custodians, airport workers, or other jobs that this service provider called "survival jobs." These jobs presented psychological challenges for this population, since individuals had to start all over again despite their prior accomplishments. If they were a doctor, engineer, or nurse in their country of origin, they suddenly were working jobs that paid far less than they were used to.

Another barrier mentioned by multiple service providers was the lack of knowledge employers have regarding legal pathways to hiring immigrants and refugees. Educating employers on this issue was recommended as a solution.

One interviewee talked about increased enforcement of I-9 audits at the federal level, which has led many employers to hire staff only through staffing agencies. For employers, this is a positive move as the burden of proof to be able to work legally falls upon staffing agencies and not the employers directly. Staffing agencies can also be more familiar with, and more adept at handling, I-9 audit requests because their business revolves around consistent application of human resource rules and regulations. However, shifting responsibility for I-9 compliance from the employer to a staffing agency can also have a negative ripple effect: greater exploitation of refugee and immigrant employees due to lack of consistency or certainty with work schedules as a staffing agency is now involved between the employer and employee. To prevent abuse, the interviewee argued for the need for state- or county-level policies that regulate the behavior of temporary staffing agencies, along with increased state enforcement of wage and hour laws.

## **HEALTH AND MENTAL HEALTH**

Interviews found that there was little or no funding from the private sector for health and mental health services for refugees and immigrants. MDHHS funds public health departments and other health service organizations to provide healthcare to this population; however, healthcare in general was largely inadequate and mental healthcare was even more lacking.

Only one grantmaking organization provided examples of their work in the health area. The organization had helped translate state materials into Arabic and Spanish during the Flint water crisis and established a mobile mental health unit. The mobile mental health unit was a retrofitted bus that travelled with translators to neighborhoods with immigrants and refugees. One stop of this mobile unit was the Our Lady of Guadalupe Catholic Church, which catered predominantly to the Hispanic community. Apart from mental health, the purpose of the mobile unit was to enroll individuals in programs they would qualify for. This grantmaker also set up three help centers that are open 12–16 hours a week that provide bottled water and food, including fresh produce, to help the community.

Only one service organization interviewed provided health and mental health supports. In a culturally sensitive manner, the organization helped refugees and immigrants understand the treatment they needed, why they needed it, and the consequences of foregoing treatment. This service provider noted the extreme lack of funding for healthcare and the challenges they faced, and stated that they often provided free healthcare since it was against their mission to turn anyone away.

The same interviewee talked about multiple barriers to receiving healthcare. The major barrier in healthcare was the social stigma in refugee and immigrant communities associated with receiving mental and physical care. They provided an example of a woman who was diagnosed with breast cancer who did not want treatment because she was afraid that the news of her receiving cancer treatment would prevent her daughters from getting married. They also gave other examples of refugee women who had been sexually assaulted or tortured who were afraid that a mental health diagnosis would mean losing their children. Another barrier to receiving mental health services from the state was the initial telephone screening. Refugees and immigrants had to undergo a one- to two-hour phone screening and answer many culturally sensitive questions. Understanding the screening questions was difficult for those without the requisite language skills and for those who had faced trauma. Transportation challenges compounded

this barrier because many refugees and immigrants did not have the ability to get to appointment destinations. This interviewee also noted policy changes that affected healthcare where immigrants who entered the U.S. after August 21, 1991, and were not U.S. citizens were ineligible for Medicaid unless it was an emergency. Those under refugee status (rather than immigrant) received full Medicaid benefits for an initial eight months, but would be re-evaluated after that to determine need. Single individuals would typically lose their Medicaid benefits at that point and only those refugees with children would receive Medicaid extensions. Asylees did not receive any Medicaid until receiving their official asylee status, which often takes years.

## **LANGUAGE TRAINING PROGRAMS**

During interviews, service providers offering language training programs were mentioned frequently. In addition to service providers who conducted ESL classes, Wayne Community College, Oakland Community College, and the International Institute of Metro Detroit provided language training programs, according to interviewees. Grantmaking organizations funded language training programs, but participants stated that the demand for these classes outpaced supply.

Language training program barriers included lack of adequate funding and extremely long waiting lists for classes to open. Service providers noted that federally funded ESL classes run concurrent with the local school calendar year and times, which conflicts with the times when individuals are usually at work. An interviewee expressed desire for more flexibility in how the classes were run and for more class offerings during evening and weekend hours. Another noted that there were many entry-level English classes but fewer intermediate- and advanced-level classes unless individuals attended community college.

A service provider mentioned the lack of meaningful Title VI compliance. According to the Title VI provision of the Civil Rights Act of 1964, law enforcement agencies have to provide appropriate language access services to their limited-English-proficiency populations. In this interviewee's experience, refugee and immigrants within the court system were not being provided adequate interpreter services and, in many instances, were asked to pay for these interpreter services.

One interviewee discussed their success in getting biliteracy passed by the state board of education. This meant that students who demonstrated biliteracy upon graduating would receive a special seal on their diploma. Michigan became the 36<sup>th</sup> state to adopt such a policy. When the interviewee's organization started the initiative toward this student recognition, only 12 other states had similar policies.

## **POLICY LANDSCAPE AND FUNDING STRUCTURE**

All interviewees noted shifts in the current policy landscape regarding services to refugees and immigrants and the shrinking federal budgets related to this work. Specific examples of policy changes and the impacts interviewees noted were the ban on individuals from predominantly Muslim countries; greater difficulty for immigrants, asylees, and refugees being able to enter the U.S.; reduction in number of refugees; reduction in green cards issued; increased action of U.S. Immigration and Customs Enforcement; individual loss of temporary protection status; family immigration limitation; family separation; and general anti-immigrant sentiment.

As a result of policy changes at a national level, grantmaking organizations in southeast Michigan have become more involved in funding projects that help refugee and immigrant communities. Service providers are less reliant on federal funding and have tried to fund programs through alternate private sources. Service providers have continued offering the same or increased levels of service despite federal changes. By making changes to operational structures, service providers have become more adaptable, efficient, and resilient, despite external changes. Both grantmaking and service provider organizations have become more active in their advocacy efforts, as well.

All interviewees felt that the current funding structure and levels for refugee and immigrant communities were inadequate. One interviewee noted that the state should allocate general purpose dollars for immigrant and refugee programs, acknowledging the likely impossibility of this happening with the multiple needs in the state such as road and infrastructure repairs. Another interviewee suggested trying to find monies under the Workforce Innovation and Opportunity Act for Integrated English Literacy and Civics Education, providing immigrants and refugees with skill-based training while accomplishing the additional goal of learning English and civics. Skilled trades came up more than once as a mechanism for refugees and immigrants to acquire skills to earn better-paying jobs.

## **FUNDING COLLABORATIVE**

Interviewees were asked if they would support the formation of a new funding collaborative in southeast Michigan and if their organization would participate. There is overwhelming support among service providers, grantmaking organizations, and thought leaders to create a funding collaborative in southeast Michigan, and multiple ideas were shared about its possible role. One interviewee suggested the work being done in southeast Michigan should be emphasized and that a new collaborative should fund existing front-line organizations. Another interviewee suggested that the collaborative facilitate conversations among stakeholders to identify gaps in services, facilitate collaboration among partner organizations to efficiently use resources, reduce competition between members, and act as an advocacy arm for the region. A leader in the field thought the collaborative could bring together foundations and invest in an overall regional strategy and leverage government funds. This same interviewee felt the collaborative should educate and inform the broader region about the needs and experiences of refugees and immigrants. A grantmaking organization expressing interest in participating in a collaborative said a new collaborative should help the members learn together, build trust among the members, and define priorities.

## **CONCLUSION**

In this study, Public Sector Consultants conducted a landscape scan of immigrant- and refugee-serving programs and nonprofit organizations in southeast Michigan—a five-county region comprising Wayne, Oakland, Macomb, Washtenaw, and Genesee Counties. The landscape scan identified current funding structures as well as strengths and gaps in overall funding and services in southeast Michigan. PSC approached the scan by analyzing Worldwide Refugee Admissions Processing System data trends in Michigan (2012 to 2018); identifying local, state, and federal funding structures for immigrant, refugee, and asylee services; performing a Form 990 analysis of organizations that serve these populations; and conducting stakeholder surveys and interviews of these organizations and thought leaders in the field. PSC found that within Michigan, refugee numbers and the funding stream for refugee services from the federal government have declined, resulting in service providers making operational changes to their

structure. Service organizations are more reliant on philanthropy for funding and volunteer staff and have struggled to meet the demands placed on them due to funding inadequacy and a continued demand to maintain or exceed current levels of service. Alongside service provider issues, grantmaking organizations' lack of focus on refugee and immigrant communities is resulting in these communities receiving a patchwork of services in healthcare/medication, mental healthcare, entrepreneurship, transportation, English-as-a-second-language classes, housing, employment/job placement, and other legal services. If southeast Michigan's immigrant and refugee communities are to thrive, and if Michigan is to shift the narrative surrounding these groups, it is important for service providers and grantmakers to help build a better infrastructure of supports.

From its research, PSC sees broad support for creating a collaborative within southeast Michigan that would provide sustainable infrastructure to support immigrant and refugee communities. PSC does not advocate prescriptive steps, but if the Community Foundation for Southeast Michigan were to create such a collaborative, PSC offers the following recommendations:

1. Organize a new collaborative in southeast Michigan focused on supporting refugees and immigrant communities.
2. Be explicit in the collaborative's goal to fund projects targeting immigrant and refugee communities.
3. Include grantmakers, service providers, and thought leaders in the collaborative to provide diverse perspectives regarding community needs within southeast Michigan.
4. Proactively share immigrant and refugee stories with the broader regional and statewide community.
5. Develop a regional strategy prioritizing areas for funding and services. Priority areas could include healthcare/medication, mental healthcare, entrepreneurship, transportation, ESL classes, and housing, recognizing that many areas are inextricably linked.
6. Foster dialogue and collaboration between member organizations to reduce service overlap and competition and increase efficiency.
7. Lead advocacy efforts in the region, state, and nationally through the combined power of constituent members.

## ACRONYMS

ACC	Arab American and Chaldean Council
ACCESS	Arab Community Center for Economic and Social Services
CAPNP	Cultural Ambassadors Professional Networking Program
CFSEM	Community Foundation for Southeast Michigan
EIN	Employer identification number
ESL	English as a second language
FY	Fiscal year
GTRI	Global Talent Retention Initiative
HFHS	Henry Ford Health System
INA	Immigration and Nationality Act
IRS	Internal Revenue Service
MAP	Michigan Advocacy Program
MDHHS	Michigan Department of Health and Human Services
MONA	Michigan Office of New Americans
ORR	Office of Refugee Resettlement
PATH	Partnership. Accountability. Training. Hope.
PSC	Public Sector Consultants
RCA	Refugee Cash Assistance
RMA	Refugee Medical Assistance
RPC	Refugee Processing Center
TANF	Temporary Assistance for Needy Families
UNHCR	United Nations High Commissioner for Refugees
UNWRA	United Nations Relief and Works Agency for Palestine Refugees
WRAPS	Worldwide Refugee Admissions Processing System

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