

# Barriers to Integration of Virginia's Immigrants

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## Challenges and Opportunities Identified through a Needs Assessment

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## Executive Summary

Immigrants have always been essential threads in Virginia's fabric, but the importance of this community to the commonwealth's future success is greater now than at any point in recent history. In the past 30 years, Virginia's immigrant population grew from just over 300,000 people and 5% of the population in 1990 to more than 1 million and 12.6% of the population in 2020. In 2019, immigrants in Virginia represented \$33.6 billion in spending power and paid \$13.4 billion in taxes, including \$4.1 billion in state and local taxes. Immigrants represent 22.8% of the STEM workforce, 31% of physicians, 14% of nurses and 18.7% of health aides in Virginia. Research shows that 19% of Virginia businesses were owned by immigrants in 2019 and these businesses made up 34% of the "main street" business community. Many of these contributions are made possible by Virginia's excellent education system, a diverse and highly-educated labor force, and a business-friendly tax and legal environment.

Alongside these critical contributions exist a range of challenges and missed opportunities that occur when recent immigrants encounter potentially preventable barriers to integration in Virginia society. Non-citizen immigrants own their home at less than half the rate of naturalized immigrants and are also more than twice as likely as naturalized immigrants to live below the poverty line and almost four times as likely to lack health insurance.

The Office of New Americans at the Virginia Department of Social Services commissioned a research team at Virginia Commonwealth University to conduct a needs assessment to identify barriers to integration that Virginia's immigrants encounter and to propose policy solutions to address the unmet needs and barriers to integration.

The research team interviewed 46 immigrants and 51 immigrant-serving organizations and other community stakeholders. The team also used Geographic Information System (GIS) to provide geospatial data on Virginia's foreign-born population by census tract, plot locations of immigrant service providers, and identify geographic areas needing additional service providers oriented toward immigrants.

The study identified the following barriers as those most often and/or most prominently mentioned:

1. Lack of a centralized source of information on statewide resources and services available to immigrants in Virginia
2. Language barriers to accessing services and education
3. Barriers to learning the English language
4. Challenges finding employment to match education and skills because of difficulties in transferring credentials earned in the home countries into the American labor market
5. Becoming trapped in (often difficult and sometimes exploitative) jobs
6. Immigration status and scarcity of affordable legal assistance
7. Barriers to accessing healthcare
8. Transportation
9. Access to affordable housing
10. Cultural barriers

11. Exploitation by unscrupulous employers and immigration attorneys (or those posing as immigration attorneys).

Based on the findings, the following recommendations are worth considering:

**Recommendation 1: Make information about services, benefits, and resources more widely available to immigrants.** One of the most frequently mentioned concerns in our interviews was lack of a central place/resource to learn about services available to immigrants in Virginia. Such a resource would be valuable both to immigrants directly and to immigrant service providers of one type who function as navigators for their clients in referring them to other types of services. To address this gap, we suggest a four-fold approach:

- a) **Create a centralized online portal/repository** that provides up-to-date information about services available.
- b) **Establish a toll-free multilingual hotline to disseminate information and referrals about resources and services available to immigrants.** The hotline needs to have operators able to provide information in multiple languages. The hotline is an important resource because some immigrants do not have access to technology and/or a sufficient literacy level to navigate an online repository of services.
- c) **Establish locality-based welcome centers using K-12 schools and/or existing non-profit organizations.** In addition to online centralized source of information and a hotline, there is a need, particularly in rural areas, for bilingual, culturally competent “navigators” who can direct immigrants to the right services and help them build the cultural capital necessary to understand government systems in their new home.<sup>1</sup>
- d) **“Welcome to Virginia” orientation videos in multiple languages spoken by Virginia’s immigrants.** Many immigrants arriving in the United States lack cultural capital: knowledge about how educational, healthcare, banking, housing, employment, and other systems work. Such videos would provide much needed orientation to the new arrivals.

**Recommendation 2: Linguistic integration of Limited English Proficient immigrants.** We recommend a three-fold approach to linguistic integration: 1) access to quality English-language classes, including at workplaces, community colleges, adult education centers, and community-based literacy organizations; 2) language access to services; 3) focus on recruiting and retaining bilingual frontline staff.

**Recommendation 3: Incorporate Virginia’s immigrants more fully in the commonwealth’s workforce development programs.** Incorporating Virginia’s immigrants in workforce development programs in a strategic and systemic way will allow the commonwealth to capitalize on the human capital and potential of immigrants to further strengthen Virginia’s economy, support resilient regional economies, and produce a high-quality, multilingual workforce prized by global employers.

- *Business Sector and Association Engagement:* In order for immigrant workers to integrate effectively into the economy of the commonwealth, it is critical to match labor where there are labor shortages and demand for their services. Thus, a key first step in the integration process is to perform supply and demand analysis across the sectors and vocations/occupations of the economy of Virginia. This analysis should include an evaluation of labor shortages by skillset, vocational certifications, and educational qualifications. Then, mechanisms should be instituted to guide immigrants to these sectors and help them develop the necessary skills to meet market demand.
- *Career counseling and assistance with credential recognition and certification:* Immigrant workers would benefit from access to career counselors who could advise them on how to get their foreign credentials recognized and certified, about occupations that would be a good fit given the immigrants' formal training and experience, as well as Virginia's labor market needs.
- *Apprentice/internship program* with a strong workplace guidance and mentorship component to orient recent immigrants to the U.S. workplace culture and enable them to obtain relevant professional experience.
- *Occupation-specific language training:* foreign-trained professionals would benefit from language training focused on the terminology and business processes related to their occupation in the United States.
- *Cultural orientation/cultural capital:* It is necessary to find a way to transfer cultural capital to new immigrants to facilitate their integration. Non-technical, soft skills that are not attuned to North American requirements are a strong impediment for immigrants' attainment of jobs commensurate with their education.
- *Alternative licensing pathways for immigrants* who are unable to overcome regulatory barriers to enter the professions in which they were trained abroad. Regulatory barriers prevent a large number of immigrants from entering professions, such as medicine, nursing, engineering, and others. The commonwealth would be well advised to develop alternative licensing pathways that integrate immigrant professionals more quickly and effectively while maintaining standards for public safety.
- *Refugee employment opportunities:* public-private partnerships could be developed to incentivize employers to implement evidence-based initiatives to recruit, hire, train, and retain refugees and SIVs. If implemented strategically, these programs could address participating employers' chronic labor shortages and expedite the immigrants' self-sufficiency.

**Recommendation 4: Develop a Future Talent Pipeline.** The commonwealth needs to groom internally and attract externally bilingual, culturally competent service providers, especially in primary care and mental health services.

**Recommendation 5: Improve public transit networks throughout the commonwealth and offer driver education programs in multiple languages.** Transportation is a major barrier for immigrants, both for those without access to a personal vehicle and/or those who do not know

how to drive. This is especially true in areas of Virginia without reliable public transit. Offering adult driver education courses in major languages spoken in Virginia localities would enable immigrants to learn to drive faster, putting them on track toward independence. Lack of transportation impedes their access to employment, education, healthcare, and impacts their integration in multiple ways. Investing in quality public transit in Virginia would significantly strengthen the economy by creating jobs, reducing the carbon footprint of commuters, and enabling better mobility of the workforce.

**Recommendation 6: Increase the number and capacity of immigration legal aid organizations and other pro-bono or affordable legal representation.** Our interviews and focus group discussions demonstrate that there is a dire need among the immigrant community for quality legal representation in immigration cases. The most urgent need appears to be in the Afghan community: the 7,000 parolees admitted and resettled in Virginia in the aftermath of the U.S. withdrawal from Afghanistan in the summer of 2021 need immediate legal assistance to achieve permanent legal residency or maintain temporary work-eligible status in the United States. Moreover, interviews suggested existing legal resources within resettlement agencies are overwhelmed by the volume of need.

High-quality immigration counsel is costly in the United States. The capacity and funding of reputable legal aid clinics is very limited and they are not able to provide legal representation to all who need it. As a result, immigrants seeking affordable immigration counsel often fall prey to fraud by unscrupulous immigration attorneys (or those posing as immigration attorneys). The commonwealth would address a pressing need by increasing the capacity of pro-bono or affordable legal aid.

**Recommendation 7: Support leadership training programs for immigrant community leaders.** Because immigrants are such a diverse and heterogenous population, there is a need for different groups to have a voice in the political process and be their own advocates. Leadership training programs to develop and empower cohorts of community leaders would facilitate their integration into Virginia, develop valuable social capital across immigrant communities, and lead to greater integration among the communities they serve.

**Recommendation 8: Support for studies on the cultural nuances of various immigrant groups** to increase cultural competence of service providers.

**Recommendation 9: “Meet them where they are:” a thoughtful and intentional approach to program design.** As discussed in this report, immigrants often face multiple barriers to accessing services. Effective programs identify these barriers and take steps to remove them.

**Recommendation 10: Increase the supply of affordable housing and reduce administrative barriers to accessing housing** through Virginia Housing Trust Funds and capitalizing on available federal funds.

**Conclusion:** Virginia has much to be proud of: an excellent education system with world-class research universities and unparalleled community college coverage, a diverse and highly-educated labor force, and a business-friendly tax and legal environment. In order for immigrants to be well integrated and reach their full potential so that they can contribute to the economic success story of Virginia, they must participate in the formal economy as quickly as possible by matching supply with demand. The Commonwealth would be well advised to develop strategic, well-thought-out, and well-designed immigrant integration programs that are market driven, where immigrant labor can be directed and incentivized to work with industries, and in vocations and regions with the most need. Immigrants are a key factor in maintaining vibrant and thriving local businesses and an attractive environment for global corporations. Maximizing the human capital of its immigrants, alongside analysis of market-based drivers of chronic and temporal labor shortages, both by sector and region, will position Virginia as a competitive force in the global economy. In turn, this would enable the Commonwealth of Virginia to reap benefits in the form of higher tax revenues to public coffers, and happier, productive, and more engaged new members of the society.

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## Section 1: Background

### Study Goals

This report presents the findings of a needs assessment conducted to identify barriers to the integration of immigrants in Virginia. The needs assessment was commissioned by the Office of New Americans, Virginia Department of Social Services in June 2021. A research team at Virginia Commonwealth University comprising Drs. Saltanat Liebert and Grant E. Rissler conducted the study.

The primary goals of the needs assessment include:

1. Identify unmet needs/barriers to integration that are experienced by Virginia's immigrant population;
2. Identify federal, state and local government services available but not used by the immigrant communities in Virginia;
3. Provide recommendations in response to the following questions:
  - a. How can ONA best address the identified unmet needs and barriers at various levels (local, state, federal)?
  - b. What changes will improve access to services that are available but not used?

### Data and Methods

The needs assessment is comprised of two phases of research. The first phase of the research involved the following data collection methods:

1. Review of existing literature on barriers to immigrant integration and programs to integrate immigrants in the U.S. and other countries;
2. Semi-structured interviews with 51 representatives of immigrant-serving organizations and other community stakeholders;
3. GIS mapping of immigrant service providers in Virginia, including:
  - a. Map foreign-born population by census tract using both dot density and shading;
  - b. Utilize a 2021 ONA list of known immigrant service providers (ISPs) and plot locations;
  - c. Calculate service area covered by one-hour round-trip drive and tabulate immigrant population by county not within a service area (with a focus on noncitizen immigrants);
  - d. Identify geographic areas needing additional service providers oriented toward immigrants.

The second phase of the research centered on semi-structured focus group discussions and interviews with 46 immigrants from a cross-section of Virginia's regions, countries of origin and length of time living in the U.S.<sup>2</sup>

In conducting the interviews, we tracked the broad region where each participant lived, using a system of regional identification selected by ONA which is based on an analysis by the Cooper Center at the University of Virginia.<sup>3</sup> In reporting results throughout the report, regional location within Virginia is often provided using these regions. For reference, Table 1 provides a regional

breakdown for both immigrants and service providers interviewed and a graphic showing the delineation of the regions.

**Table 1: Breakdown of Interviews Conducted**

Region of Virginia	Phase I Service Providers	Phase II Immigrants	Total Participants
Central	16	12	28
West Central	6	13	19
Southside	0	1	1
Northern	11	13	24
Hampton Roads	4	5	9
Eastern	0	0	0
Southwest	0	0	0
Statewide	4	N/A	4
Valley	7	2	9
<b>Total</b>	<b>48</b>	<b>46</b>	<b>94</b>



Region of Origin	Immigrants	Time in U.S.	Immigrants
Mexico/Central America	5	Less than 5 years	12
South America	8	5-9 years	10
Africa	4	10-19 years	5
Europe	1	20+ years	19
Middle East	4	<b>Total</b>	<b>46</b>
Former Soviet	2	<b>Gender (inferred)</b>	<b>Immigrants</b>
East Asia	12	Male	12
South Asia	10	Female	34
<b>Total</b>	<b>46</b>	<b>Total</b>	<b>46</b>

The participation from the Eastern, Southwest and Southside regions of Virginia represents gaps in the representativeness of the findings and policymakers may want to keep this in mind.

### Defining Immigrant Integration

There are varying definitions of immigrant integration, depending on whether the receiving country espouses assimilationist or a multicultural integration perspective on immigrant incorporation. In the context of the United States, immigrant integration is defined as “the process of economic mobility and social inclusion for newcomers and their children. As such, integration touches upon the institutions and mechanisms that promote development and growth within society, including early childhood care; elementary, postsecondary, and adult education systems; workforce development; health care; provision of government services to communities with linguistic diversity; and more.

#### Integration

The process by which members of immigrant groups and host societies come to resemble one another.

Successful integration builds communities that are stronger economically and more inclusive socially and culturally.”<sup>4</sup> The National Academies of Sciences, Engineering, and Medicine in their 2015 report, *The Integration of Immigrants into American Society*, defined integration as “the process by which members of immigrant groups and host societies come to resemble one another.”<sup>5</sup> As such, the concept is distinct from assimilation or acclimation, which have often implied that immigrants adjust and the host society remains unchanged. Instead, integration implies that both immigrants and the society around them adjust to each other, ideally in a way that improves the well-being of both.

### Immigrant Integration in the United States

The United States has no coordinated national immigrant integration policies. Immigrants generally use their own resources and social networks, or assistance from community organizations, to adjust to life in the United States.<sup>6</sup> In doing so, they develop new skill sets and broader cultural capital (an understanding of how things work in the U.S.) often through relationships with non-immigrants. For host communities, integration of new immigrants entails programs that assist immigrants in gaining long-term skills and understanding, as well as specific services (e.g. language access services such as interpretation) and broad cultural competency by service providers (an understanding of the unique challenges immigrants from a range of cultures may face) helps bridge the gap for immigrants in the short-term.

Existing integration policies are difficult to characterize due to “patchwork quality, ceaseless alteration, and rich variety of policies across the fifty states.”<sup>7</sup> Public schools are primary mechanisms of youth integration as primary and secondary education, under settled constitutional law, is provided regardless of immigration status. English language instruction for adult immigrants is sporadic and varies in quality. English language and civics instruction is provided by federal government funding through the Adult Education and Family Literacy Act and by

community, faith-based, and nonprofit organizations.<sup>8</sup> Some businesses, such as McDonald's, provide English classes in the context of broader workforce development initiatives.<sup>9</sup>

Other integration programs are even more limited or non-existent. No housing assistance is available to newcomers except for short-term public housing for some categories of immigrants.<sup>10</sup> Public housing is often underfunded and lacking in community safety measures, so most qualifying immigrants choose not to live there despite potential cost savings. Similarly, no work training exists for immigrants outside of sporadic programs also available to the general public. The Affordable Care Act of 2010 requires all lawfully present noncitizens to purchase health insurance, but undocumented immigrants are barred from purchasing insurance through marketplace exchanges.<sup>11</sup>

**The lack of federal integration policy and comprehensive programs to assist the integration of immigrants in the U.S. is in stark contrast with most developed countries.**

The capitalist system in the United States underscores individual economic incorporation into the labor market as a successful integration model. The legal climate for labor market integration is generally favorable though wage theft and other exploitation of immigrants is well-documented. Constitutional rights to due process and equal protection give immigrant groups standing in society and facilitate their incorporation into society. If immigrants are aware of them and have access to legal counsel, anti-discrimination policies empower immigrants to redress experiences of disparate treatment, exclusion, harassment, threatening/harmful action, and retaliation based on personal characteristics, including religion, race, immigration status, and national origin.<sup>12</sup> But many immigrants lack awareness or legal counsel. Moreover, there is no institutionalized guidance and meaningful support available for immigrants to effectively integrate in the labor market in a way that maximizes their education and skillsets and addresses widespread labor shortages in the U.S.

Lack of federal integration policy and comprehensive programs to assist the integration of immigrants in the United States are in stark contrast with most developed countries. For example, the Canadian federal government funds language instruction for permanent residents<sup>13</sup> and provides qualified immigrants<sup>14</sup> with 90-day work training internships through the Federal Internship for Newcomers Program. This helps immigrants learn about workplace culture and the hiring process. All permanent residents and other eligible newcomers may access universal, free healthcare.

Similarly, the French government funds language classes, helps recognize foreign diplomas, and facilitates the immigrants' access to the labor market.<sup>15</sup> The government also provides housing assistance to immigrants, although there has been criticism that resettlement policies result in a geographical concentration of Muslims in socially disadvantaged areas.<sup>16</sup> French immigrants may also access the national free healthcare system.<sup>17</sup>

Conversely, in the Netherlands, government policies emphasize assimilation<sup>18</sup> that focus on instilling a sense of social cohesion of minority immigrant groups into mainstream society. Prospective migrants (excluding refugees and asylum seekers) must take a civic integration exam before entering the country. Once they enter the Netherlands, they participate in a government-funded integration program focusing on Dutch language, Dutch culture, and vocational training. Permanent resident status for migrants depends on completion of this program.

In the absence of federal integration policies in the United States, it has been left up to individual states, myriad localities, and non-profit and faith-based organizations to provide integration services to immigrants. As one of the interviewees from an immigrant-serving organization lamented:

*“The role of these types of programs – we call them “community initiatives” – by nonprofit organizations, this is a response to a huge gap in integration. Ideally, this support program should not exist because the state is prepared to provide services to everybody who's living here. Our ideal goal is for these kinds of programs to disappear and just become integrated into our system. That's utopia, I would say, but we should aim for that.”*

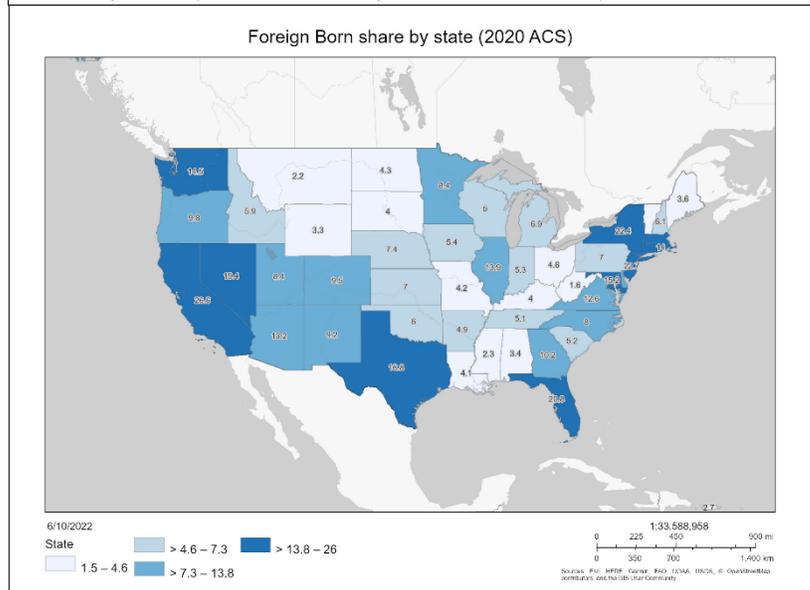
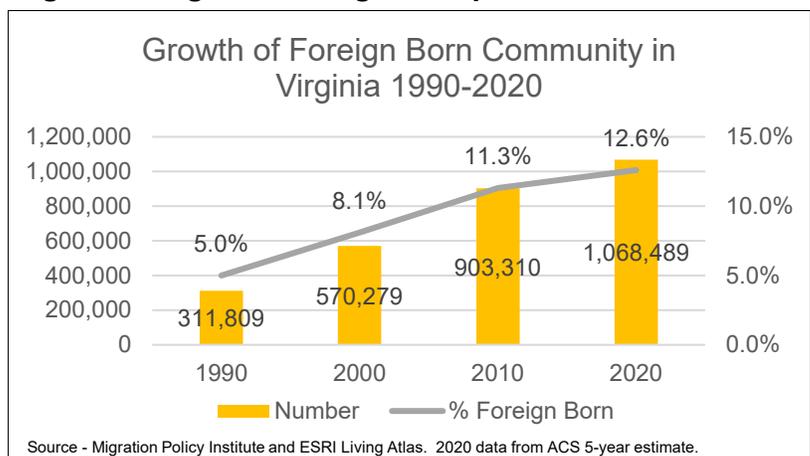
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## Section 2: Immigrants in Virginia

Immigrant integration scholar Jamie Winders points out a key factor about the ability of state and local governments to respond to the needs of immigrants in their community – immigrants must be “visible” to public officials through data, representative networks like governing councils/boards and neighborhood associations, and personal interactions with service providers. This visibility often increases when a critical mass of immigrants settles in one geographic area, but smaller or more dispersed immigrant groups can often stay invisible to public officials because immigrants often encounter cultural, linguistic, legal and resource barriers to entering many of these “visible” spaces. In light of this, reviewing what data is available on the immigrant population in Virginia serves as a key precursor to reducing barriers to integration for that same community. This profile updates and expands on the Office of New Americans’ “A Profile of Immigrant Virginians,” drawing heavily on data from the American Community Survey compiled both by the Migration Policy Institute’s state immigration data profiles and ESRI’s Living Atlas.<sup>19</sup> Additionally, where appropriate, the profile utilizes data from the Virginia Department of Education and the bi-partisan Commonwealth Institute.

The 2020 American Community Survey (5-year) estimates the number of foreign-born individuals in Virginia at 1,068,489 or 12.6% of the total population. Like most of the United States, Virginia saw its immigrant population grow over the past 30 years, from just over 300,000 people and 5% of the population in 1990 to more than 1 million and 12.6% of the population in 2020.<sup>20</sup> Among all U.S. states, Virginia now ranks 15<sup>th</sup> in the country based on the percentage of the population that is foreign born.<sup>21</sup> (Note, ranking is based on 2019 1-year ACS estimates. Due to COVID related interruptions of data gathering, the Census Bureau chose not to release standard 1-year ACS estimates for 2020, making the 2019 the most recent comparable data for ranking states and for more detailed breakdowns of the foreign-born population cited later in this section.<sup>22</sup>) The increase in foreign-born population

**Figure 1: Virginia's Immigrant Population Growth**



represented an 82.9% change from 1990-2000, a 58.4% increase from 2000-2010 and a further 18.3% increase from 2010-2020.

Immigrant Virginians are 37.1% White, 35.3% Asian and 11.6% Black. Latinxs, classified by the Census Bureau as an ethnic group distinct from racial background, comprise 32.9% of all foreign-born Virginians or 356,372 individuals.

### Immigrant Contributions to the Virginia Economy and Tax Base

Immigrants' contributions to the Virginia economy are significant. According to research by the bi-partisan New American Economy (NAE) organization (which merged in December 2021 with the American Immigration Council) immigrants in Virginia in 2019 represented \$33.6 billion in spending power with \$2.9 billion in rent paid by immigrant-led households. Immigrants also paid \$13.4 billion in taxes, including \$4.1 billion in Virginia state and local taxes.<sup>23</sup>

Immigrants represent a crucial element of the workforce, with nearly 80% of immigrants in Virginia between the ages of 18-64 years and a 71.5% labor force participation rate (compared to 62.7% for U.S.-born citizens.) Labor force participation rates are slightly higher for noncitizen immigrants (72.1%) than for naturalized immigrants (71.1%) – see Table 2. Immigrants represent 22.8% of the STEM workforce, 14% of nurses and 18.7% of health aides in Virginia. The Migration Policy Institute, based on 2019 Census Data, estimates that while immigrants make up slightly less than 13% of the total Virginia population, they represent 31% of physicians.<sup>24</sup>

**Table 2: Virginia's Labor Force Participation**

Category	U.S. Born	Naturalized Citizens (%)	Noncitizens (%)
Population (16 and older)	5,855,543	564,220	460,941
% in the civilian labor force	62.7%	71.1%	72.1%
Civilian labor force (age 16 and older)	3,671,425	401,160	332,338
% unemployed of the total civilian labor force	4.1%	3.0%	3.4%

**Source:** Migration Policy Institute tabulations of the U.S. Census Bureau American Community Survey (ACS) and Decennial Census. Unless stated otherwise, 2019 data are from the one-year ACS file. (<https://www.migrationpolicy.org/data/state-profiles/state/income/VA>)

Immigrant entrepreneurship is also an important factor in Virginia's economy. NAE estimates that more than 80,600 immigrant entrepreneurs generated \$2.5 billion in annual business revenue. Research shows that 19% of Virginia businesses were owned by immigrants in 2019 and these businesses made up 34% of the "main street" business community.<sup>25</sup>

Though significant, only 39.5% of immigrants in Virginia are limited English proficient, compared to a U.S.-wide rate of 46.4% and a rate in neighboring North Carolina of 43.7%. Participation in

the labor force is highest among Spanish speakers (78.6%, see Table 3). Those who speak other Indo-European and Asian/Pacific Island languages have a labor force participation rate of around 71%, compared to 65% for those who only speak English in the home.

**Table 3: Labor Force Participation by Language**

Category	Number	% in labor force
<b>Total Population (native and foreign born) Age 25 and older</b>	<b>5,872,757</b>	<b>66.6%</b>
Speak only English	4,892,538	65.0%
Speak Spanish	401,557	78.6%
Speak other Indo-European languages	226,985	71.3%
Speak Asian and Pacific Island languages	250,457	70.1%
Speak other languages	101,220	75.8%

**Source:** Migration Policy Institute tabulations of the U.S. Census Bureau American Community Survey (ACS) and Decennial Census. Unless stated otherwise, 2019 data are from the one-year ACS file. (<https://www.migrationpolicy.org/data/state-profiles/state/income/VA>)

Many immigrants in Virginia are highly educated – 46.9% have at least a bachelor’s degree compared to 45.9% for U.S.- born Virginians, a nationwide rate for immigrants of 36.5% and a rate for immigrants in North Carolina of 36.3%. However, within the immigrant population, significant differences remain in educational attainment between naturalized and noncitizens, indicating potential ground that can be gained by improving the integration of noncitizens into Virginia society. While nearly half (49.9%) of naturalized immigrants have a bachelor’s or graduate degree, only 35.7% of noncitizens do. Conversely, 49.3% of noncitizens have a high school diploma or less of schooling. The same is true for only 27.1% of naturalized immigrants.

**Table 4: Educational and Economic Indicators**

<b>Educational Attainment</b>	<b>U.S. Born</b>	<b>Naturalized Citizens (%)</b>	<b>Noncitizens (%)</b>
Population (age 25 and older)	4,935,186	535,331	402,240
Less than high school diploma	8.4%	10.3%	28.9%
High school diploma or GED	24.6%	16.8%	20.4%
Some college or associate's degree	28.2%	23%	15%
Bachelor's degree	22.1%	27.3%	19.1%
Graduate or professional degree	16.7%	22.6%	16.6%
<b>Economic Indicators</b>	<b>U.S. Born</b>	<b>Naturalized Citizens (%)</b>	<b>Noncitizens (%)</b>
Median Household Income	\$75,775	\$95,451	\$61,213
Home Ownership Rate	67.3%	72.7%	35.3%
Below 100% of the poverty level	9.9%	6.3%	15.0%
No health insurance coverage	6.0%	8.0%	35.4%

**Source:** Migration Policy Institute tabulations of the U.S. Census Bureau American Community Survey (ACS) and Decennial Census. Unless stated otherwise, 2019 data are from the one-year ACS file. (<https://www.migrationpolicy.org/data/state-profiles/state/income/VA>)

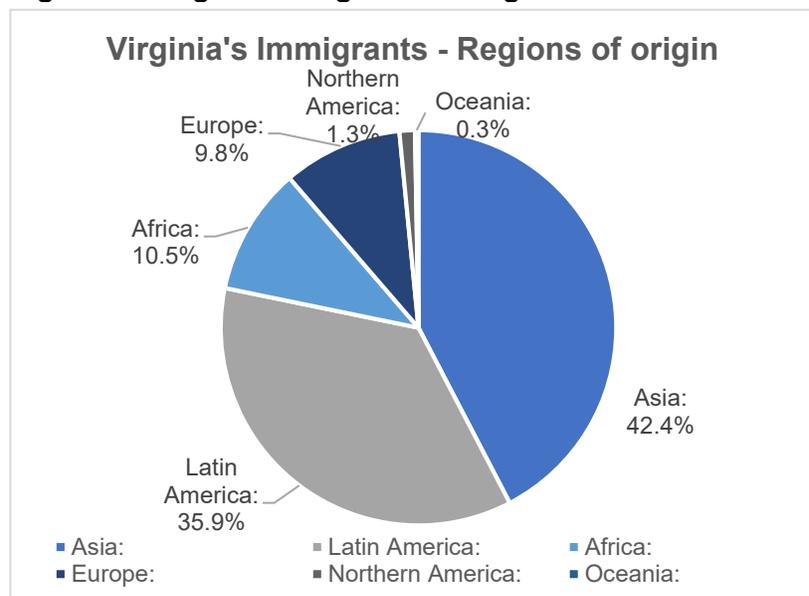
The same significant differences exist between naturalized and noncitizen immigrants in terms of income, home ownership and poverty rates. Naturalized citizens garner a median household income of more than \$95,000 while noncitizens have a median household income of \$61,000. Homeownership rates show a 37.4 point difference between immigrants who are citizens (72.7% own their home) and those who are not (only 35.3% own a home). Noncitizens are also more than twice as likely as naturalized immigrants to live below the poverty line (15% vs. 6.3%.)

### Origins of Immigrants in Virginia

Virginia’s immigrants were born in more than 122 different countries. More than 42 percent immigrated from Asia, nearly 36 percent from Latin America and 10.5 percent from Africa. Europe, at nearly 10 percent, constitutes the fourth major region with Northern America and Oceania being the birthplace of relatively small numbers of immigrants to Virginia.

Based on 5-year ACS estimates, in 2019 there were five sending countries with more than 50,000 persons living in Virginia: El Salvador (109,924); India (89,861); Mexico (56,607); Korea (52,817) and the Philippines (52,634). The top African nation is Ethiopia (30,114) and the top European nation is the United Kingdom (19,450).

**Figure 2: Origins of Virginia's Immigrants**



**Table 5: Top 10 Sending Countries**

Country	Estimated Population
El Salvador	109,924
India	89,861
Mexico	56,607
Korea	52,817
Philippines	52,634
Vietnam	43,801
China, excluding Hong Kong and Taiwan	41,722
Honduras	33,982
Guatemala	31,987
Ethiopia	30,114
<b>Source – ACS 2019 5-year estimates</b>	

## **Documentation Status of Immigrants in Virginia**

Individuals without papers are individuals who reside in Virginia without legal status. Although many crossed the southern border without presenting themselves to immigration officials, others overstayed student, work or tourist visas. Following the practice of the Virginia Office of New Americans, this profile uses the more common term “undocumented” immigrants while acknowledging that many in that community do not use the term.

Estimating the number of undocumented immigrants living in Virginia is a complex undertaking. Reliable estimates from the Migration Policy Institute put the number at approximately 251,000 in 2019, down from 269,000 in 2016. The top countries of origin are: El Salvador (27%), Mexico (13%), Honduras and Guatemala (both 11%) and India (7%). In regional terms, 62% of undocumented immigrants were born in Mexico and Central America, 19% in Asia and 10% in South America. MPI reports the top languages spoken at home by undocumented immigrants as Spanish, English, Korean, Tagalog and Chinese.<sup>26</sup>

Most undocumented immigrants have lived in the U.S. for a significant period – 74% have five or more years of residence and 33% have 15+ years in the United States. Sixty-nine percent are in prime workforce age groups between 25-54. Seventy percent of the undocumented population are employed. Twenty-two percent have a high school degree/GED as their highest level of formal schooling and 23% have bachelor’s, graduate or professional degrees while 16% (or about 31,000 individuals) were not able to pursue schooling beyond a 5<sup>th</sup> grade level. This means a significant number of Virginia residents likely lack literacy (the ability to read or write) in their native language, limiting the usefulness to them of written translations of key information.

The undocumented population also includes an estimated 20,100 entrepreneurs, about a quarter of the number of immigrant entrepreneurs overall. Estimates by New American Economy show undocumented household income at \$5.7 billion and tax payments of \$673.8 million (including \$258.8 million in Virginia state and local taxes).<sup>27</sup>

A significant number of undocumented Virginians live in mixed-status families in which family members hold different citizenship or immigration statuses. One in three undocumented adults lives with a U.S. citizen child; 18% are married to a U.S. citizen or Legal Permanent Resident. While 23.9% of the total immigrant population in Virginia has never been married, that proportion reached 42% among the undocumented population.

Many undocumented immigrants are economically vulnerable – 58% have no health insurance, compared to 20.9% of the immigrant population as a whole and 6% of the U.S. born population; 21% live below the poverty line compared to 10.3% for immigrants as a whole; only 30% own a home compared to 58.5% of immigrants as a whole.<sup>28</sup>

## **Linguistic Profile of Immigrants in Virginia**

Virginia’s immigrant residents bring a wide range of linguistic diversity to the commonwealth. Almost seventeen percent (16.8%) of Virginians over age 5 speak a language other than English

(OTE) at home. Additionally, within the immigrant population, 39.5% report speaking English less than “very well,” which the Census Bureau categorizes as Limited English Proficient (LEP). This compares to a U.S. rate of 46.4% LEP among the immigrant population. Importantly, limited English proficiency is much lower among Virginia’s naturalized citizens (28%) than it is among noncitizens (52.8%). Virginia’s LEP population grew by 78.7% from 2000 to 2019.

After English, Spanish is, by far, the most common language spoken at home by Virginians (more than 600,000). Chinese, Vietnamese, Arabic and Korean round out the top 5 languages other than English that are spoken at home. In terms of the LEP population, Spanish speakers represent more than half, with Vietnamese, Chinese, Korean and Arabic LEP speakers making up the rest of the top five. However, when it comes to the portion of the linguistic population that is LEP, Spanish ranks fifth, following Vietnamese, Korean, Chinese and other languages of Asia.

**Table 6: Top 10 Languages (Other than English) Spoken at Home**

Table 6: Top 10 Languages (Other than English) Spoken at Home ranked by						
	Number of Speakers		Number of LEP Speakers		Percentage LEP	
1	Spanish	616,226	Spanish	257,781	Vietnamese	53.1%
2	Chinese (including Mandarin, Cantonese)	66,186	Vietnamese	30,522	Korean	51.6%
3	Vietnamese	57,496	Chinese (including Mandarin, Cantonese)	29,738	Chinese (including Mandarin, Cantonese)	44.9%
4	Arabic	56,632	Korean	24,911	Other Lang. of Asia	44.4%
5	Korean	48,255	Arabic	16,108	Spanish	41.8%
6	Tagalog (including Filipino)	44,005	Tagalog (including Filipino)	13,678	Thai, Lao, or Other Tai-Kadai Languages	39.8%
7	Urdu	38,489	Amharic, Somali, or Other Afro-Asiatic	13,352	Amharic, Somali, or Other Afro-Asiatic	38%
8	Amharic, Somali, or Other Afro-Asiatic	35,162	Urdu	11,583	Persian (including Farsi, Dari)	35.6%
9	French (Including Cajun)	33,050	Persian (including Farsi, Dari)	11,571	Nepali, Marathi, or Other Indic	35.5%
10	Persian (including Farsi, Dari)	32,472	Nepali, Marathi, or Other Indic	6,724	Portuguese	34%

**Source:** Migration Policy Institute tabulations of the U.S. Census Bureau American Community Survey (ACS) and Decennial Census. Unless stated otherwise, 2019 data are from the one-year ACS file.  
<https://www.migrationpolicy.org/data/state-profiles/state/language/VA>

Table 6 draws on a 42-language estimate based on 2019 data and reported at the state level by the Census Bureau each year as part of the American Community Survey. Language usage broken down by county would be helpful data in assessing interpretation and translation needs at the local level. However, due to standing privacy protections, the Census Bureau only provides estimates for a very limited group of counties that are home to enough speakers to avoid privacy

concerns. In Virginia the 42-language breakdown (Drawn on for Table 6 above) is available for only two counties (Fairfax and Loudoun).

**An estimated 488,000 Virginians are limited English proficient, with the largest portion (161,000) living in Fairfax County.**

A more collapsed 12 language breakdown is available for eleven localities (Albemarle, Arlington, Chesterfield, Fairfax, Henrico, Loudoun, and Prince William Counties and the cities of Alexandria, Norfolk, Richmond and Virginia Beach). Appendix 1 provides these locality estimates for the number of persons speaking each language at home and the number for each language who are “limited English proficient (LEP),” meaning they report speaking English less than “very well.” The table also reports the same data for Virginia as a whole and then calculates a subtotal for all 11 big localities and subtracts that from Virginia totals, thereby providing the number and percentage of the total located in the rest of the state for each category.

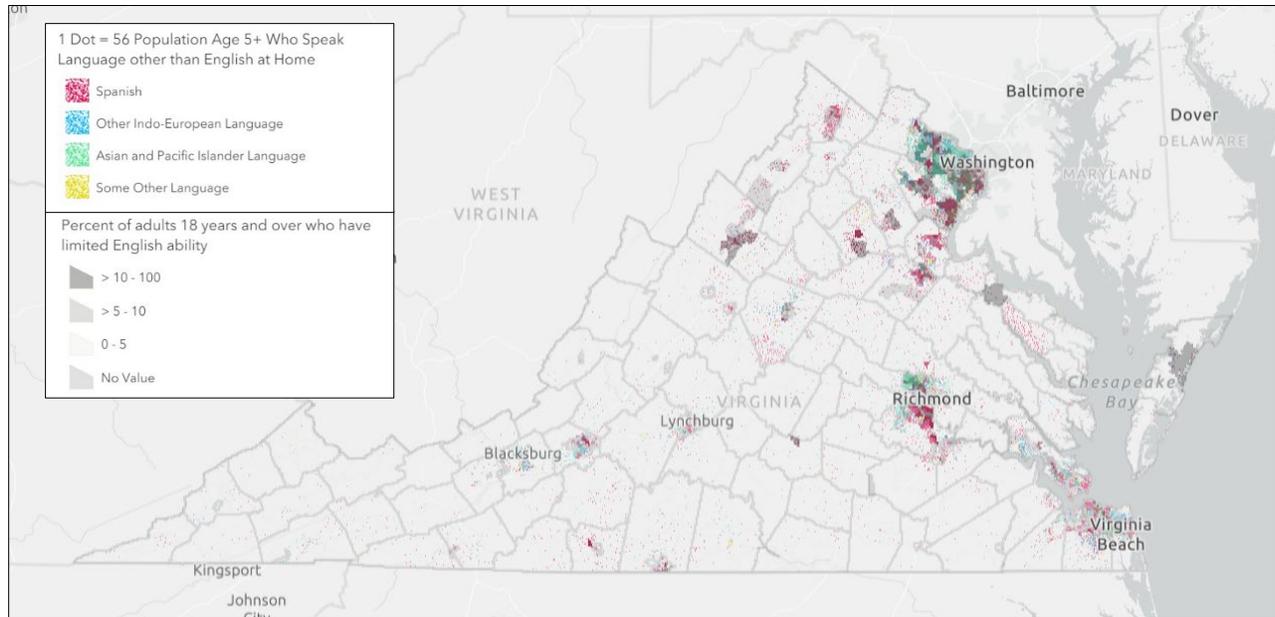
From an integration barrier standpoint, an estimated 488,000 Virginians are limited English proficient, with the largest number (161,000) living in Fairfax County while 113,000 (or 23.2% of the total) live outside the 11 large localities listed above. As noted above, the largest language group is Spanish with more than 616,000 persons who speak Spanish at home and 258,000 who are classified as LEP. Of the Spanish-speaking LEP group, 27.9% live outside of the 11 large localities. Notably, non-European language speakers appear to be more concentrated within the major localities than is the case with Spanish speakers – only 11.0% of LEP Vietnamese, 15.9% of LEP Koreans, 13.1% of LEP Chinese, and 7.2% of LEP Arabic speakers live outside the eleven large localities.

Another insight rests in calculating the portion of the Other than English (OTE) speaking population that is LEP for the state as a whole and each locality. Statewide 36.1% of those who speak a language other than English at home report being limited English proficient. However, several localities stand out for higher rates of LEP within the OTE population – Prince William County (41.1%); Henrico County (41.2%); Chesterfield County (42.8%), and Richmond City (56%). These areas likely face greater challenges in integrating their immigrant population in a meaningful way and likely would need to pay more attention to language access measures.

Finally, the Census Bureau provides a four-category breakdown of languages other than English spoken in homes at the tract level. The four categories are Spanish, other Indo-European, Asian and Pacific Islander Languages, and Other Languages. This information is less helpful for policymakers in understanding what languages are most in demand for language access, but provides a level of geographic detail that allows a more meaningful visualization of the other than English speaking population in Virginia. The map below uses data on the rate of limited English proficiency in the population to shade census tracts in gray (darker indicates a higher rate) and overlays this with a dot density distribution at the census tract level of the four categories of languages spoken at home. An interactive narrative of this and other linguistic data is available

in the Linguistic Profile of Virginia's Non-English Speakers Story Map, developed by the VCU research team, available at <https://immigrationva.maps.arcgis.com/home/index.html>.

**Figure 3: Distribution of Major Language Groups**



### Linguistic Profile of Virginia School Systems

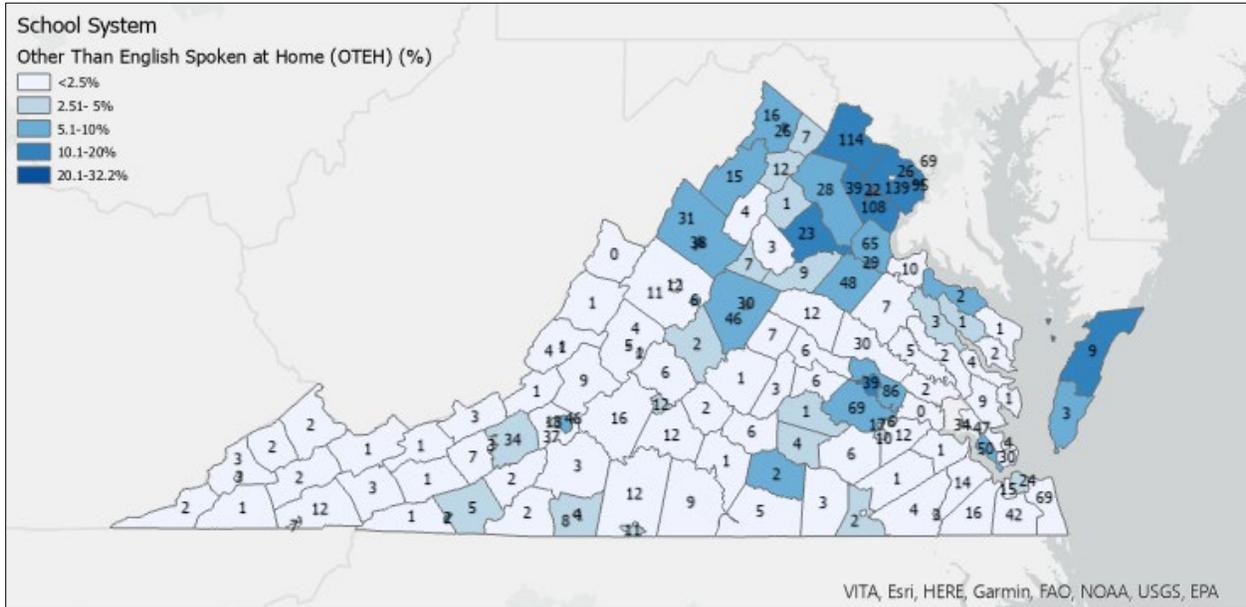
In addition to Census data, another way of understanding Virginia's linguistic diversity is to examine data collected by school systems on the number of students enrolled who speak a language other than English (OTE) at home. This data from Fall 2020, though collected at the local level, is compiled and published annually by the Virginia Department of Education.<sup>29</sup> Figure 4 on the next page shades localities by the percent of all students who are recorded as speaking a language other than English. Numeric labels indicate how many different languages (other than English) are spoken within the school system.

A selection of information is provided for the top 15 school systems ranked by the concentration of Other than English speaking students within the school system in Table 7. The full breakdown of information, including the top three languages spoken in each school system, are provided in Appendix 2.

Clearly, many of the highest concentrations and number of different languages are found within Northern Virginia localities such as Fairfax (16.8%, 139 languages), Loudoun (11.4%, 114 languages), Prince William (17.3%, 108 languages) and Manassas City (32.1%, 39 languages). However, Harrisonburg City schools rank 3<sup>rd</sup> (with 31.8% and 38 different languages) and Winchester City Schools are 5<sup>th</sup> (with 20.2% of students speaking at least one of 26 languages other than English at home). Accomack County and Galax City also stand out as localities outside of Northern Virginia who have more than 13% of students speaking a language OTE at home.

**Figure 4: School Systems Shaded by Percent of Students who Speak Language Other than English (OTE) at home**

(Numbered labels show number of OTE languages within school system)



**Table 7: Top School Systems - Percentage of Other than English (OTE) Students**

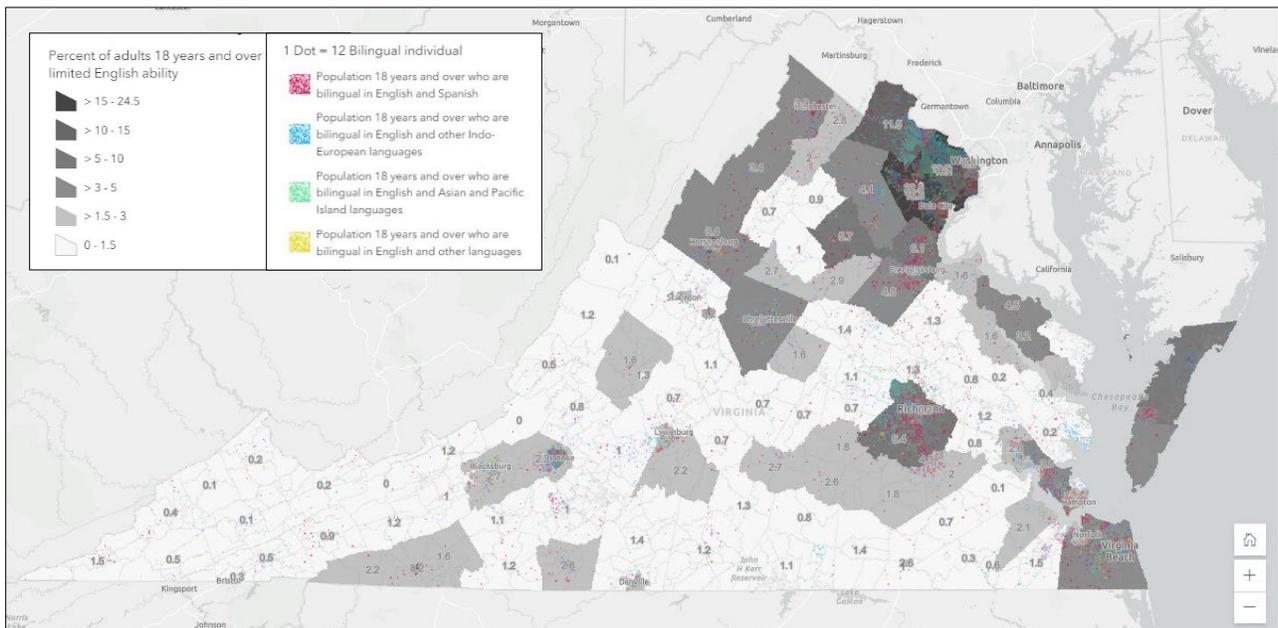
Division Name	Students	OTE Students	% OTE	# Lang.	# Lang. w/ (10+ stu.)	Span % of OTE	Top Lang
Manassas City	7,607	2445	32.1%	39	6	93%	Spanish
Manassas Park City	3,500	1124	32.1%	22	3	93%	Spanish
Harrisonburg City	6,508	2070	31.8%	38	11	78%	Spanish
Alexandria City	15,845	4773	30.1%	95	18	66%	Spanish
Winchester City	4,269	862	20.2%	26	1	95%	Spanish
Prince William County	89,577	15497	17.3%	108	44	74%	Spanish
Fairfax County	180,076	30178	16.8%	139	59	65%	Spanish
Fredericksburg City	3,545	570	16.1%	29	6	61%	Spanish
Arlington County	26,833	4104	15.3%	69	20	65%	Spanish
Accomack County	4,864	664	13.7%	9	2	79%	Spanish
Galax City	1,323	173	13.1%	2	1	99%	Spanish
Loudoun County	81,319	9269	11.4%	114	38	58%	Spanish
Culpeper County	8,256	913	11.1%	23	3	83%	Spanish
Charlottesville City	4,259	463	10.9%	30	10	37%	Spanish
Richmond City	28,226	3029	10.7%	39	4	96%	Spanish

## Language as an Asset: Distribution of Bilingual Individuals

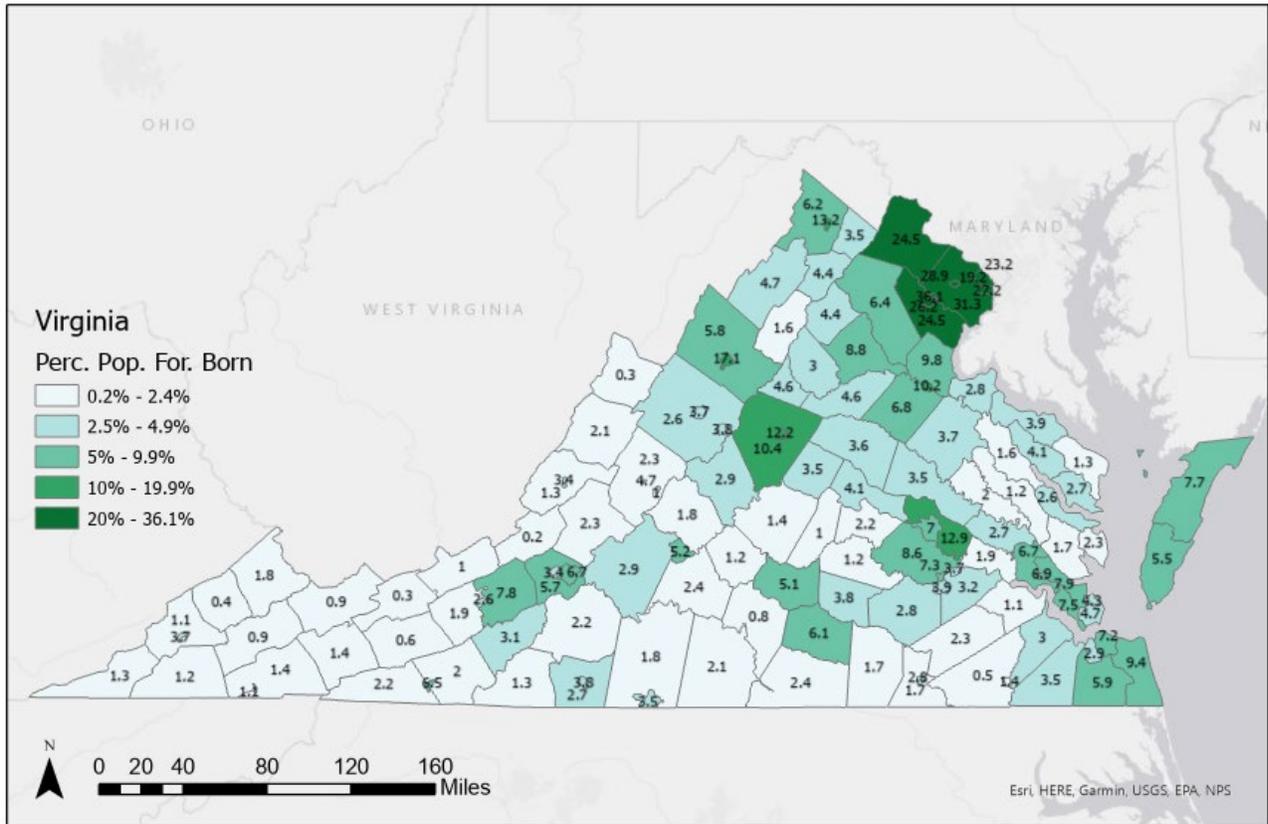
Primarily speaking a language other than English can be a barrier early in an immigrant's integration journey. However, once English proficiency is attained, bilingual community members are a significant asset. They can serve in key roles linking local industries to the global economy, provide outreach to long-time immigrant communities that celebrate and preserve the rich traditions of original cultures, and serve as ambassadors to more recently arrived immigrants who speak the same language. (Of course, native English speakers can also undertake these same roles by achieving proficiency in another language, a fact recognized by long-standing policies encouraging the study of languages other than English in K-12 school settings.) Visualizing the distribution of bilingual capacity provides a sense of where this aspect of human capital is concentrated within Virginia.

The map in Figure 5 shows both of these dimensions simultaneously. The grey shading and the numeric labels visualize the portion of the population 18 years and older who are limited English proficient (LEP) at the level of cities/counties. On top of this is a dot density map, similar to the one above, but this time showing the estimated number of persons in each census tract who are bilingual in English and Spanish (red), another Indo-European language (blue), an Asian or Pacific Island language (green) or a language outside those groupings (yellow). As noted above, not all of these bilingual residents are immigrants, but immigrants contribute greatly to the bilingual capacity of the commonwealth. By clicking on a particular locality in the interactive map on Virginia's linguistic profile, available at <https://immigrationva.maps.arcgis.com/home/index.html>, you can access more detailed information for each census tract.

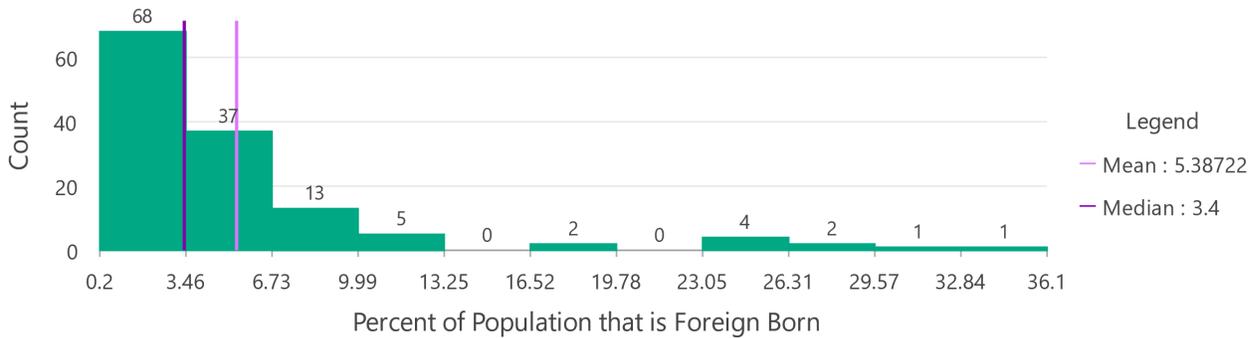
**Figure 5: Bilingual Population in Virginia**



**Figure 6: Distribution of Virginia's Immigrants**



**Histogram - 133 Virginia Localities by Percent Foreign Born**



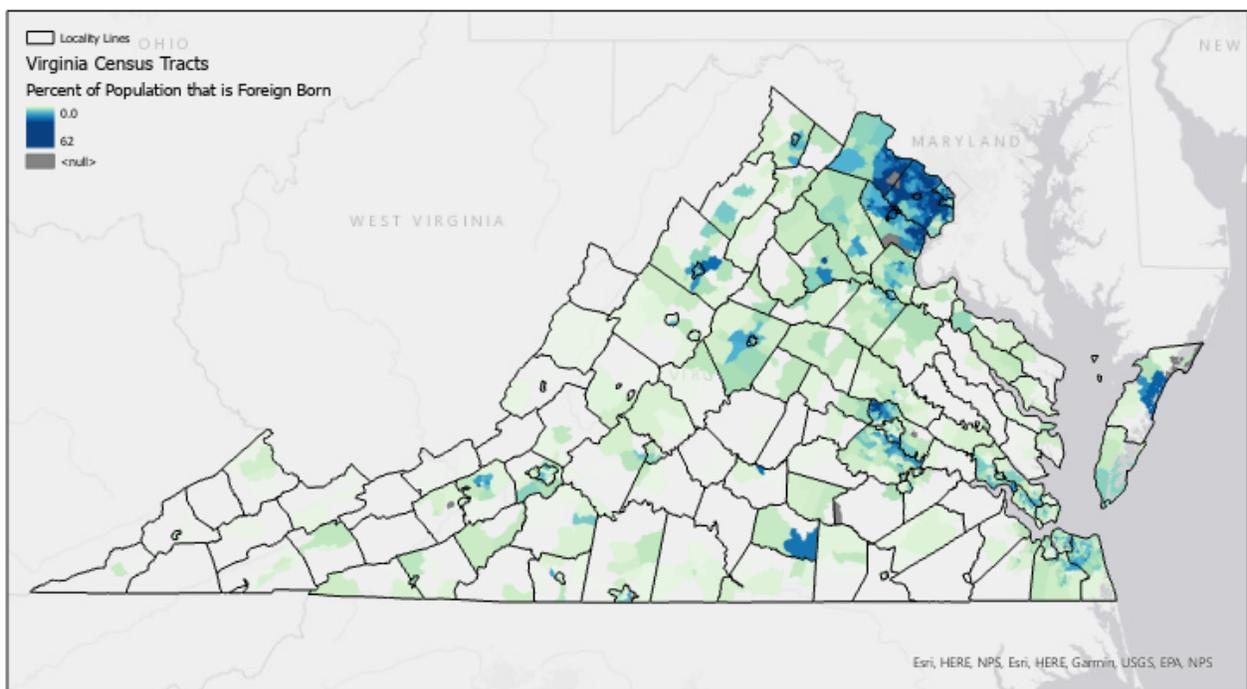
**Distribution of Immigrants within Virginia**

Two-thirds of all immigrants live in Northern Virginia, but sizable immigrant communities exist in Richmond, Roanoke and other metropolitan areas throughout the commonwealth. As can be seen from the histogram at the bottom of Figure 6, the immigrant population exceeds 10% of the population in only fifteen of 133 localities, while sixty-eight localities have an immigrant community that represents less than 3.5% of the population. Manassas Park City (36.1%) and Fairfax (31.3%) are the only localities where more than 3 in 10 residents are immigrants. Craig County is at the other end of the spectrum – only 0.2% of its population is foreign-born. An interactive

narrative of this and other demographic data presented in this section is available in the Immigrants in Virginia Story Map accessible at <https://immigrationva.maps.arcgis.com/home/index.html>

Smaller cities, such as Harrisonburg (17.1%), Winchester (13.2%) and Charlottesville (12.2%), alongside Henrico County (12.9%), represent the localities with the greatest concentrations of immigrants outside of Northern Virginia. Importantly, not all localities where immigrants make up more than 5% of the population are cities. The Eastern Shore as well as Prince Edward and Lunenburg Counties represent non-urban contexts that still contain significant immigrant populations.

**Figure 7: Virginia Census Tracts Shaded by Percent Foreign Born**



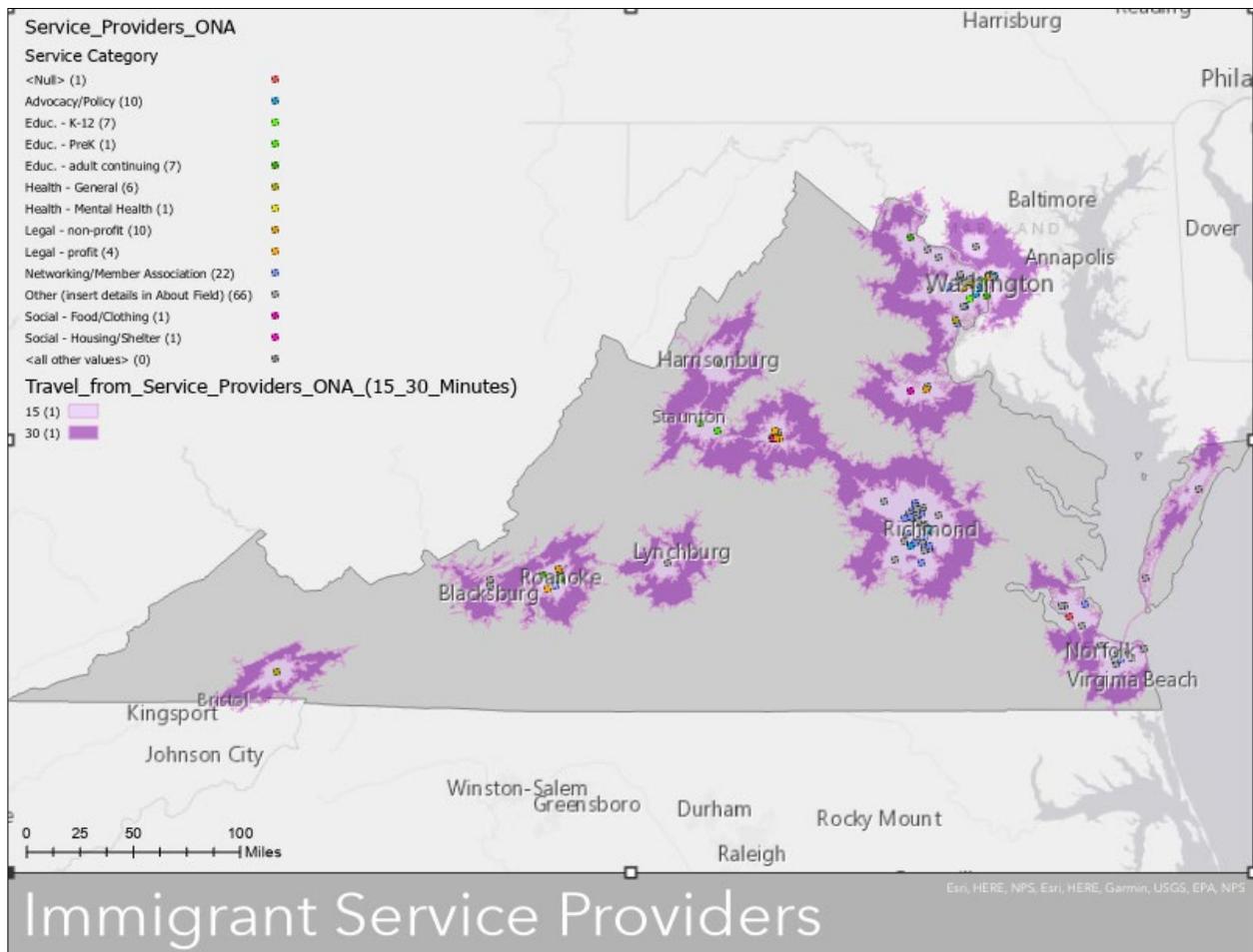
This more nuanced diversity of where immigrants reside is highlighted by mapping the portion of the population that is foreign born at the census tract level (see Figure 7). In this view, while Northern Virginia remains the clear home to most of Virginia’s immigrants, certain tracts in Accomack, Rockingham and Lunenburg Counties have immigrant density similar to many parts of Northern Virginia.

### Immigrants’ Geographic Access to Immigrant Service Providers

Integration support networks include more than just government services. A range of non-profit and private entities help support immigrants, whether through the development of co-ethnic networks, meeting basic needs such as food, providing legal services, or advocating for changes in policy. In light of this network, one way of determining immigrant isolation is to ask how much of the immigrant population does not have access to at least one node within this network of immigrant-serving organizations.

To analyze this question, our study team mapped the locations of a list of immigrant-serving organizations developed by Virginia’s Office of New Americans, then used a 15- and 30-minute one-way drive-time analysis (at 5pm on a weekday) to identify coverage areas for the total set of immigrant service providers. The map above shows that coverage area, with a 15-minute travel time in light purple and a 30-minute travel time in darker purple. This analysis provides two things. First, it is clear that most service providers are based in urban areas with large swaths of rural Virginia outside of the coverage area. Second, the coverage area provides a building block for further analysis, allowing the estimation of the noncitizen foreign-born population that lives outside the coverage area. The noncitizen immigrant population is selected as the population most likely to be in need of support from immigrant service providers.

**Figure 8: Existing Immigrant Service Providers (ISPs) and Coverage Areas**



This second level of analysis is accomplished by calculating the portion of each census tract in the state that lies outside the coverage area (i.e. the underserved area), then multiplying the noncitizen foreign born population of the tract by the underserved area proportion. These estimations of population are then aggregated up from the census tract level to the county level.

Table 8 provides the total underserved population of noncitizens for both the 30-minute and 15-minute coverage areas at the state level, as well as for the top 20 counties (ranked by 30-minute underserved population.) This can serve as a reference for integration advocates regarding the areas where a new immigrant service provider might most effectively reduce the underserved population. Specifically, the far exurban counties of Northern Virginia represent the areas of greatest opportunity.

**Table 8: Estimates of Underserved Noncitizen Immigrants - Top 20 Localities**

Localities	Foreign Born % of Total Pop	Underserved Noncitizen Pop (30min)	UndServed30 (%) of Noncitizen FB	Underserved Noncitizen Pop (15min)	UndServed15 (%) of Noncitizen FB	Noncitizen FB Population
<b>Virginia Total</b>	12.4	35,979	7%	104,333	21%	501,148
<b>Frederick County</b>	6.2	3,327	100%	3,327	100%	3,327
<b>Winchester City</b>	13.2	2,615	100%	2,615	100%	2,615
<b>Culpeper County</b>	8.8	2,522	98%	2,567	100%	2,567
<b>Fauquier County</b>	6.4	2,161	91%	2,363	100%	2,363
<b>Prince William County</b>	24.5	1,301	2%	14,249	27%	52,741
<b>Loudoun County</b>	24.5	1,288	3%	10,182	25%	40,324
<b>James City County</b>	6.7	1,081	54%	1,949	98%	1,994
<b>Shenandoah County</b>	4.7	1,050	90%	1,167	100%	1,167
<b>Prince Edward County</b>	5.1	956	100%	956	100%	956
<b>Warren County</b>	4.4	879	100%	879	100%	879
<b>Danville City</b>	3.5	860	100%	860	100%	860
<b>Accomack County</b>	7.7	784	41%	1,020	53%	1,914
<b>Henry County</b>	2.7	693	100%	693	100%	693
<b>Pittsylvania County</b>	1.8	675	100%	675	100%	675
<b>Suffolk City</b>	3.5	634	48%	1,229	93%	1,321
<b>Orange County</b>	4.6	554	54%	1,010	99%	1,018
<b>Mecklenburg County</b>	2.4	527	100%	527	100%	527
<b>Stafford County</b>	9.8	519	9%	4,963	82%	6,025
<b>Franklin County</b>	2.2	484	75%	642	100%	643
<b>Westmoreland County</b>	3.9	469	100%	469	100%	469

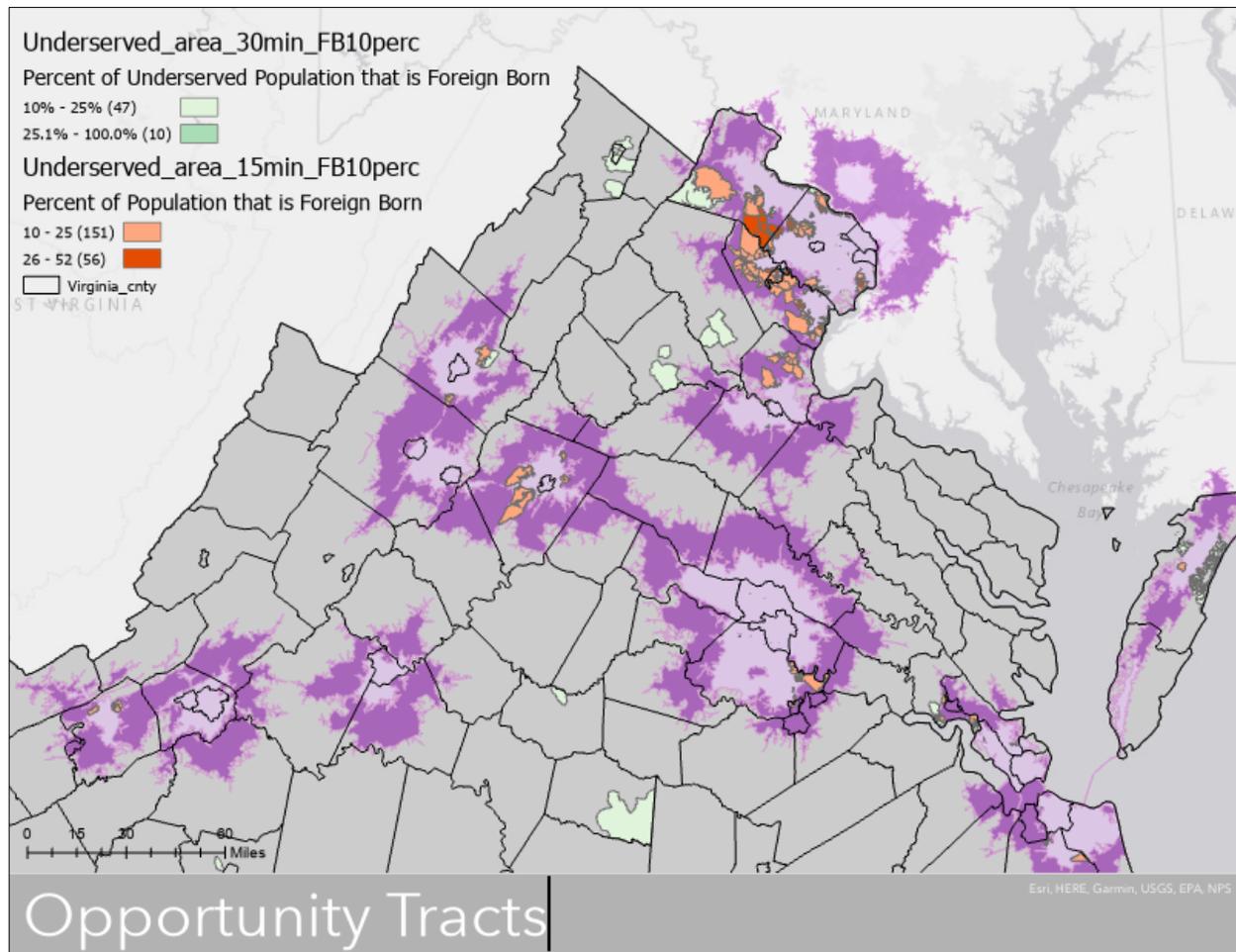
**Source & Method Notes:** 2019 ACS 5yr estimates of Foreign-Born Population in ESRI Living Atlas; dot density distribution of population at tract level; Immigrant Service Provider coverage area based on geocoding of ISP list developed by Virginia Office of New American with a 15 and 30 minute one-way drive-time analysis at 5pm on a Monday to any ISP; underserved estimate based on portion of tract level not within drive window, aggregated to the county level.

The map below (Figure 9) also visualizes the opportunity areas for additional immigrant integration services. Green tracts are those that lie in part or in whole outside the 30-minute coverage area and that have a foreign-born population above 10% (the darker shade indicates tracts that have more than 25% foreign born population). Orange shaded tracts are those outside

the 15-minute coverage area, but inside the 30-minute area, again with the darker shade indicating tracts with more than a quarter of the population being foreign born.

An interactive narrative of this and other demographic data is presented in the Immigrants in Virginia Story Map available at <https://immigrationva.maps.arcgis.com/home/index.html>.

**Figure 9: Opportunity Tracts Outside Existing ISP Coverage Areas**



This analysis shows that, even in Northern Virginia, a number of tracts exist that require more than a 30-minute round trip to access any agency that serves immigrants. Additionally, the analysis highlights areas in Lunenburg and Prince Edward Counties that lie outside of an hour round-trip coverage area.

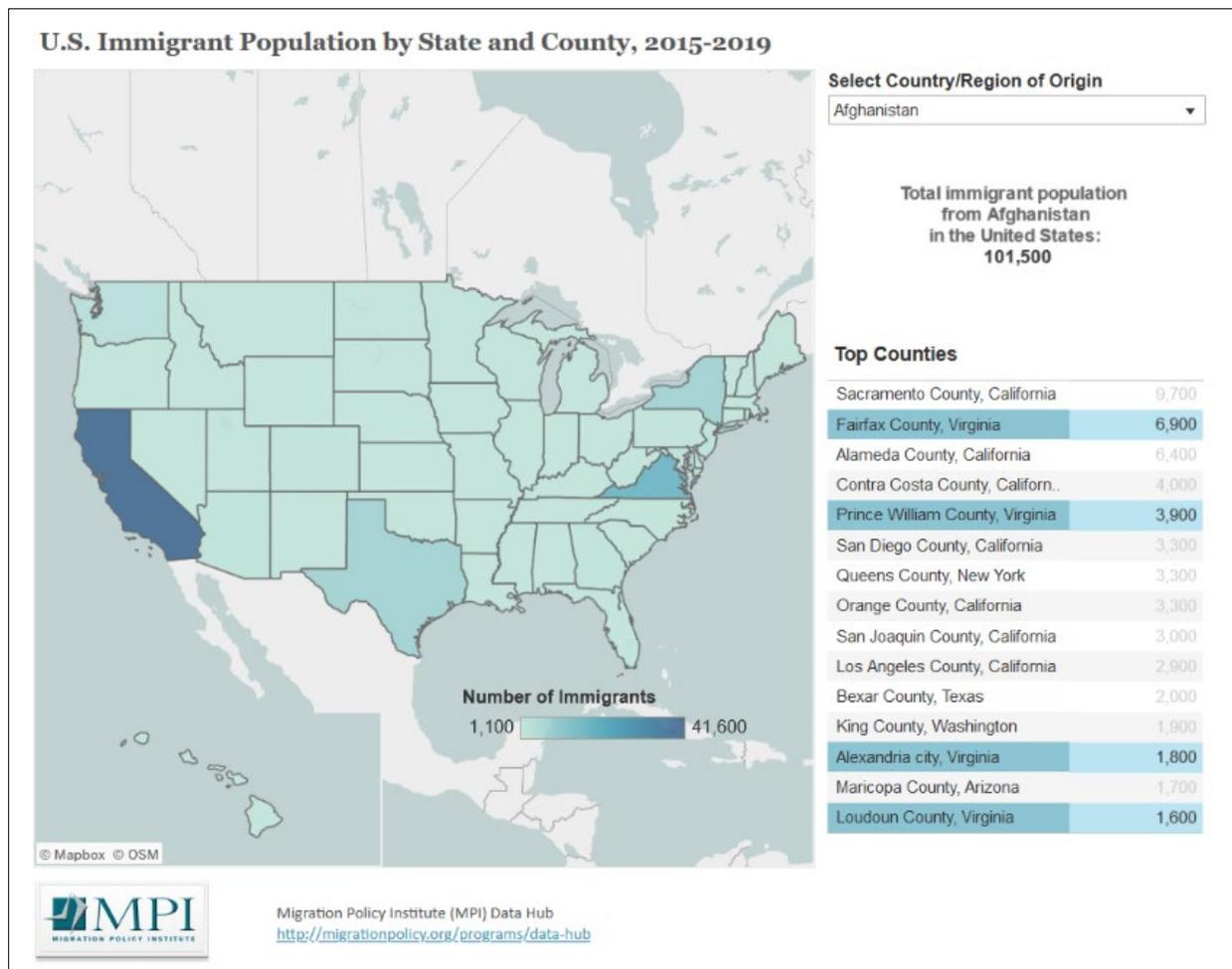
While useful, this analysis also comes with a key caveat – many immigrants do not have access to a car, requiring them to travel by even slower or limited-route public transit. As such, this analysis should be understood as a conservative estimate of the underserved population. With that in mind, it is worth noting that only 7% of the noncitizen foreign-born population is outside the

30-minute (one-hour round-trip) coverage area. This still represents close to 36,000 individuals. For the 15-minute coverage area, the estimate rises to 21% of the noncitizen foreign-born population, or more than 104,000 individuals.

### Afghan Diaspora – A Special Case of Note in Virginia

The recent withdrawal of U.S. forces from Afghanistan accelerated the growth of the community of Afghan immigrants in the United States. Approximately 132,000 Afghans lived in the U.S. in 2019 (up from 54,000 in 2010) and the U.S. government has resettled more than 76,000 additional Afghans in the U.S. who fled their country at the time of the U.S. withdrawal in August 2021.<sup>30</sup>

**Figure 10: Afghan Settlement in U.S.**



As shown in the map above (developed by the Migration Policy Institute), in 2019, Virginia was home to the second largest group (about 18 percent of the total) of Afghans who immigrated to the United States. Moreover, four Virginia localities (Fairfax, Prince William, and Loudoun Counties and Alexandria City) are among the top counties for Afghan immigrants.<sup>31</sup> Since August 2021, Virginia has already welcomed 7,000 newly arrived Afghans,<sup>32</sup> but the networked nature of immigrant settlement (where immigrants move from their initial location in the country to another

that offers a greater community of fellow nationals) suggests that Virginia is likely to be the long-term home of a significant portion of the new arrivals. Support for the integration of this group, therefore, represents a likely opportunity and challenge for the commonwealth. New arrivals may differ in some aspects from Afghans already in the United States, but examination of the existing population's characteristics can provide a window into those opportunities and challenges.

One opportunity is the ability to link many arriving Afghans with federal resources of support. In 2019, 77% of new Afghan legal permanent residents obtained their green card through the Special Immigrant Visa (SIV) status created by Congress to support immigrants who served alongside U.S. forces in Afghanistan and Iraq. Another 9% obtained a green card as refugees or asylees. This SIV status allows recipients to access federal support in the same way that refugees can, providing such key resources as health insurance. As a result, only 8% of Afghans in 2019 were uninsured, compared to 20% of the total immigrant population. Since the vast majority of those admitted in 2021 (72,500 of the 76,000 total) were given a parole status that includes access to similar short-term supports as those received by refugees, similar access to work visas and health insurance is expected, assuming continuation of their parole or a permanent status.

This opportunity is balanced by challenges faced by many recently-arrived immigrants. In 2019, twenty-nine percent of Afghan immigrants lived below the poverty line, compared to 14% of immigrants overall. Moreover, unlike refugees or asylees, parolees face the uncertainty of having only a temporary status without any clear path to permanent residence.

Afghan immigrants present in the U.S. as of 2019 were less likely to speak English at home (6% compared to 16% of all immigrants) and more likely to be limited English proficient (50% vs. 46% for all immigrants). Twenty-two percent of Afghans in the U.S. in 2019 were under the age of 18 (compared to 6% for all immigrants) and the proportion of minor children in the group of recent arrivals is expected to be closer to 50%, which suggests that school systems may see an increase in English Language Learners who speak the major Afghan languages, Pashto and Dari. (Note, though sometimes grouped linguistically, speakers of each language cannot always understand the other distinct language). One quarter of Afghans in the U.S. in 2019 lack a high school diploma – on par with the immigrant population as a whole but significantly higher than the U.S.-born population. This lower level of educational attainment is partly driven by gender differences – among recently-arrived women in the Afghan community, 49 percent lacked a high school diploma, compared to 19 percent of men. This gender difference reflects longstanding barriers to education for women in Afghanistan and likely impacts labor force participation – 43 percent of Afghan women ages 16 and older were part of the labor force in 2019, compared to 57 percent of the immigrant female population as a whole.

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### Section 3: Factors that Impact Immigrants' Integration

Existing scholarship on immigrant integration highlights several dimensions that can create different barriers in an immigrant's integration journey:

- The legal framework that determines a person's immigration status and eligibility for different benefits;
- Socioeconomic factors, like working or learning new skills that help get a better job;
- Sociocultural factors, like learning a new language or political and social views;
- Health and getting access to medical care;
- Civic and political factors, such as participating in the community by volunteering or speaking at a meeting;
- Family relationships, including whether one marries within or outside of a home culture, and
- Spatial factors, such as access to immigrant specific service providers and whether immigrants settle in "ethnic enclaves" or alongside native-born community members.

This section provides insight on each of these dimensions in turn, but it is also worth noting that in the integration journey of immigrants, these dimensions overlap, interlock and interact with each other in significant ways. One immigrant's description of the challenges encountered in moving to the U.S. from China illustrates this combined nature:

*"So, the language, I would say is first of the barriers for old and new immigrants. You know you cannot understand anything of what the people around you say, and you cannot even understand the TV. And the first one year or a couple months I was even afraid of pick up the phone call because - if you're [with] people in person, we can also better understand this through the body language, right, but over the phone you have not any indication or any body language - that was my first fear - I cannot understand anything, even though we had basically been learning English back in China for years. So I would say, the first thing would be the language.*

*And the second thing I would say will be the housing, plus the transportation. . . Back in China [we were always biking], so we didn't have a license, we didn't know how to drive so that was the second hard thing . . . Then the housing. It was hard as well, the reason for that, because number one we didn't know the new environment around us. We didn't even know where to go to get the information regarding how to find our apartment and also because of the language, that was hard. Fortunately, we had friends by that time, locally there, and they actually helped us to settle down for the first couple weeks. I think that it's not just me. I believe everyone would say first of all, when you come here in the States, this pretty much the first of the couple of things they have to overcome and settle in with some help.*

*After the first couple weeks or months, I would say, next the stage will be for them to find a place to learn your language. And find a job. Basically, for the job it was hard, because, you know, you have another language skill, you have no working skill here, so I want to say the training for both language and the working skills will be essential for the next stage. . .*

*I will say, yes, first five years is the most difficult time for the new integration. If everything goes smoothly, after five years, everything getting so much better. But like I said, is a milestone for some immigrants - they may not be able to overcome the [barriers] and some of them, maybe give up or go on the other way to be illegal because of how difficult it is going through the language barrier, the work [to] settle the family and going through the legal system for the legal status. At least I felt exhausted after first five years - and also, like I said, we went through all this journey, fortunately, quite smoothly. Not very difficult, but I still was exhausted.”*

## **Immigration Status**

Immigration status of immigrants is a key determinant that affects multiple aspects of their integration: from where they are able to work, to whether or not they are able to rent or buy a home, whether they are eligible for government benefits and services, and their ability to access medical care. There are numerous types of immigration statuses that can be broadly divided into four categories: permanent, temporary, discretionary, and undocumented. They range in stability from precariousness of the undocumented and temporary status to full stability afforded by permanent residency and citizenship. Table 9 provides examples of each category of immigration status.

**Permanent immigrants** typically include the following individuals: 1) immigrants who became U.S. citizens through the naturalization process; 2) foreign nationals who have legal permanent residency (LPR) in the United States (aka “green card” holders); 3) refugees and asylees (both are eligible for permanent residency (LPR) after physically being present in the U.S. for at least one year since being granted refugee or asylee status); 4) EB visa holders (EB-1, EB-2, EB-3, EB-4, EB-5), who typically include immigrants of extraordinary ability (such as Olympic medal winners, Pulitzer or Oscar winners, renowned professors or researchers), other skilled workers sponsored by their U.S. employers, or foreign nationals who invest a minimum of \$900,000 in the U.S. economy, creating at least 10 full-time jobs.<sup>33</sup>

**Temporary migrants** include the following categories of visa holders: 1) highly-skilled foreign workers who are sponsored for H1-B or other types of employment visas (such as H1-C, H-3, L-1, O-1, P-1, P-3) by American employers; 2) unskilled or lesser-skilled foreign workers sponsored for H-2A and H-2B visas; 3) international students studying in American colleges and universities and exchange program visitors, and 4) diplomats representing their countries in the United States and staff of international organizations present in the United States (such as the United Nations, the World Bank, the International Monetary Fund, the Inter-American Development Bank, and others).

**Table 9: Types of Immigration Status in the U.S.**

<b>Immigration status</b>	<b>Examples</b>
<b>Permanent</b>	<ul style="list-style-type: none"> <li>• U.S. citizens</li> <li>• Legal permanent residents (LPR, aka “green card” holders)</li> <li>• Refugees and asylees (have a right to apply for LPR status)</li> <li>• Special Immigrant Visa (SIV) holders</li> <li>• Employment-based visa holders (EB1-5)</li> </ul>
<b>Temporary</b>	<ul style="list-style-type: none"> <li>• Highly-skilled foreign workers who are sponsored for H1-B or other types of employment visas (such as H1-C, H-3, L-1, O-1, P-1, P-3) by American employers</li> <li>• Unskilled or lesser-skilled foreign workers sponsored for H-2A and H-2B visas</li> <li>• International students and exchange visitors (F-1, J-1 visas, H-3, L, P, Q visas)</li> <li>• Diplomats and employees of international organizations (A-1, A-2 and G visas)</li> </ul>
<b>Discretionary</b>	<ul style="list-style-type: none"> <li>• Deferred Action for Childhood Arrivals (DACA)</li> <li>• Temporary Protected Status (TPS)</li> <li>• Parolees (i.e. Afghan nationals evacuated to the U.S. and awaiting processing of their immigration application)</li> </ul>
<b>Undocumented</b>	<ul style="list-style-type: none"> <li>• Foreign nationals who crossed the border without authorization</li> <li>• Foreign nationals who arrived with a valid visa but stayed in the U.S. after its expiration</li> </ul>

**Discretionary** status holders include foreign nationals who were brought to the United States as children (under the age of 16) without appropriate legal immigration status and who received temporary legal status under 2012 **Deferred Action for Childhood Arrivals (DACA)**. DACA gives young undocumented immigrants protection from deportation and a work permit. DACA beneficiary’s status expires after two years and must be renewed.

Other discretionary immigration status holders include **Temporary Protected Status (TPS)** beneficiaries. TPS is a temporary immigration status granted to nationals of certain countries due to ongoing armed conflict, an environmental disaster or an epidemic, or other extraordinary and temporary conditions. Countries whose nationals are eligible for TPS status (as of 2021) include Sudan, South Sudan, Somalia, Myanmar, El Salvador, Haiti, Honduras, Nicaragua, Venezuela, Syria, and Yemen. TPS status grants protection from deportation, a work permit, and (in some cases) travel authorization to undocumented immigrants who were already physically present in the United States when their country of origin became TPS eligible.<sup>34</sup>

Another category of immigrants who have a temporary discretionary status in the United States are foreign nationals who were granted admission based on **Humanitarian Parole**. Humanitarian

Parole is issued on a case-by-case basis if the applicant has a compelling emergency that requires travel to the United States, such as a specialized medical treatment not available in the applicant's home country. In 2021 most parolees admitted to the United States were Afghan nationals evacuated from Afghanistan in the aftermath of U.S. military withdrawal. This status allows for temporary legal presence in the United States but does not provide a path to permanent residency.<sup>35</sup> Once in the United States, the parolee must apply for lawful immigration status based on available channels.

**Undocumented immigrants** are foreign nationals who crossed the border without authorization or those who arrived with a valid visa but stayed in the U.S. after its expiration.

Possessing a legal status (rather than being undocumented) represents a profound step in possibilities for integration - documented immigrants can earn more, contact police and other public officials without fear, and engage more fully in the community. This logic of a public good resulting in bringing long-time, but undocumented, immigrants more fully into U.S. society underpinned efforts during the Reagan administration to pass the 1986 Immigration Reform and Control Act, the most recent large-scale legalization of undocumented immigrants. An estimated 3 million immigrants continuously present since 1982 received permanent residency via the Act. Though Congress proposed numerous immigration reform efforts since 2000 that included a path to legalization for some significant portion of the current undocumented population, political gridlock on the issue of immigration prevented any reforms from passing Congress. Presidential discretionary action in 2012 that created the temporary Deferred Action for Childhood Arrivals (DACA) status is the most recent example of a federal effort to increase the opportunities for integration of a subset of undocumented individuals - since its launch more than 835,000 young people received temporary protection from deportation and work authorization.

Surveys of DACA recipients provide some of the best insights into the difference that legal status provides in an individual's ability to integrate into society. In 2021 - during the recovery from the COVID-19 pandemic, 79.8 percent of DACA recipients surveyed reported being employed, 44.7 percent got their first job and 43.8 percent of respondents said they had moved to a job with better pay after receiving their DACA authorization. Average hourly pay for recipients since receiving DACA increased from \$10.94 to \$22.90. Among the 31.8 percent of recipients in school at the time of the survey, 60.3 percent said DACA allowed them to access "educational opportunities that [they] previously could not" and of those not in school, 44.7 percent reported having at least a bachelor's degree, while 12.9 percent of all respondents said they had obtained a professional license after receiving DACA. In addition to such socioeconomic impacts, DACA produced positive impacts for individual mental health - 44.8 percent reported "no longer being afraid" due to immigration status.<sup>36</sup>

### **Immigrants' Eligibility for Public Benefits**

Permanent immigrants (except refugees and asylees) are barred from federal means-tested public assistance for five years after their arrival (which coincides with when most<sup>37</sup> are typically eligible for U.S. citizenship), while foreigners on employment and other types of non-immigrants visas are not eligible for public assistance at all. Undocumented immigrants are barred from all

types of public assistance with the exception of a narrow set of specified emergency services and programs.<sup>38</sup> (For a current overview of the categories of immigrants eligible for federal benefits, please see Broder, Tanya, Gabrielle Lessard, and Avidah Moussavian. “Overview of Immigrant Eligibility for Federal Programs,” June 2022, available at <https://www.nilc.org/issues/economic-support/overview-immeligfedprograms/>)

The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 states that undocumented immigrants are ineligible for most state and locally-funded benefits. The restrictions on these benefits parallel the restrictions on federal benefits. However, the PRWORA allows the states to provide undocumented migrants with state and local benefits that otherwise are restricted. Respective state legislatures would need to pass laws allowing this population to access specific state-funded public benefits. Public assistance that is co-funded by the federal government cannot be included though, as it is considered a federal benefit under the law.<sup>39</sup>

### Socioeconomic Integration

Socio-economic integration is a key factor in gauging how well immigrants integrate in their destination because it is an indicator of whether they (and their children) reach parity with the native-born population in the overall quality of life. Indicators of socio-economic integration are educational and occupational attainment, employment and income, and poverty level.

Research on immigrant integration argues that the following factors are key to how successfully newcomers integrate socio-economically into destination countries: human capital and characteristics (such as risk- and initiative-taking) brought with them and instilled into their children;<sup>40</sup> whether destination countries are “settler” countries or nations with a shorter history of immigration;<sup>41</sup> existence of supportive and well-established ethnic diasporas;<sup>42</sup> multiculturalist or assimilationist traditions of receiving countries;<sup>43</sup> nature of the destination countries’ welfare regime (liberal, corporatist-statist, or social democratic);<sup>44</sup> state regulation of the labor market,<sup>45</sup> and whether migrants experienced trauma.<sup>46</sup> These factors work in tandem; individual factors are typically a piece of the puzzle that explains why some immigrant groups integrate more successfully than others. Table 10 further explains these factors.

**Table 10: Factors that Impact Socioeconomic Integration**

Factors	Description
Human capital	Well educated, fluency in the language of the destination country, personal traits such as risk- and initiative-taking.
Destination country: “settler” or with no/minimal history of immigration	Immigrants tend to feel more accepted in societies with a long history of immigration, such as the United States and Canada.
Multiculturalist or assimilationist traditions of receiving countries	In countries espousing assimilation, the newcomers are expected to give up their prior linguistic, cultural and social characteristics and adopt the values and practices of the mainstream receiving society. In multiculturalist countries the society recognizes the diversity of cultures and social

Factors	Description
	patterns, and acknowledges that a homogenous national identity cannot easily be imposed on culturally distinct immigrant groups.
Existence of supportive and well-established diasporas	Diasporas can help recent arrivals with information about jobs, housing, and access to capital, as well as navigating unfamiliar institutional systems.
Nature of the destination countries' social welfare regime	Liberal, corporatist-statist, or social democratic regime usually determines availability and the range of publicly-funded benefits to immigrants.
State regulation of the labor market	How workers are protected from dismissal; anti-discrimination legislation.
Legal status	Legal status is a necessity to obtain white-collar jobs in the United States. Undocumented immigrants resort to self-employment or jobs in the informal economy.
Length of stay in the destination country	Scholars estimated that it takes new immigrants 8-15 years to reach wage parity with the native-born workers. Some scholars argue that first-generation immigrants do not reach wage parity.
Whether migrants experienced traumatic events	Refugees fleeing war or violence, for example, might have post-traumatic stress or other psychological trauma that could impede their integration.

### Sociocultural Integration

**English language proficiency** is a key determinant of how well immigrants integrate in the United States and is a marker of their socio-cultural integration. It affects immigrants' employment options and educational outcomes, residential choices, access to healthcare and government services, ability of parents to support their children's education and participate in parent-teacher associations, as well as intermarriage and political participation.<sup>47</sup>

Another indicator of immigrants' cultural integration in the United States is the extent to which their views on political and social issues (such as the role of the federal government and same-sex marriage) are similar to the native-born. **Public attitudes** of immigrants tend to favor a greater extent of government services than native-born Americans. Their support for same-sex marriage is lower than their native-born counterparts'.<sup>48</sup>

**Religion** is an important social network link and interpreter of meaning for immigrants adjusting to their new country. Faced with a new language, unfamiliar culture, separation from their families, and, for many, the need to reinvent oneself in a different professional role, migrants cope with such difficulties in various ways. For some, religion serves as a support in dealing with adjustment and acculturation, but also downward professional mobility that some migrants experience after migration.<sup>49</sup> Indeed, people often turn toward religion in times of emotional distress, suffering, and

crisis<sup>50</sup>, to manage feelings of uncertainty<sup>51</sup>, or when they feel like their lives are lacking meaning or purpose.<sup>52</sup> These are all circumstances likely thrust upon immigrants to a new country.

According to 2014 Pew Research Center survey, 80 percent of immigrants were affiliated with a religious group or faith, compared to 77 percent of U.S.-born respondents.<sup>53</sup> Faith-based organizations in the United States play a major role in the integration of immigrants. Their role ranges from sponsoring refugees and helping them acclimate to their new country, to provision of free- or low-cost English language courses, to dissemination of public service announcements (such as the importance of COVID-19 vaccination) among their congregants, to providing informal networks that connect immigrants with employment, housing, child-care and other services.

**Level of criminality** among immigrants is another indicator of their socio-cultural integration. Despite popular perceptions, levels of criminality among immigrants are much lower than among native-born Americans. Foreign-born men between the ages of 18 and 39 are incarcerated at a rate that is one-fourth the rate of the native-born men.<sup>54</sup> Neighborhoods with higher concentration of immigrants have much lower rates of crime than non-immigrant neighborhoods.<sup>55</sup>

### **Political and Civic Integration**

Citizenship in the United States is acquired at birth<sup>56</sup> or, for immigrants, through the naturalization process. Acquisition of U.S. citizenship by immigrants is considered an indicator of integration, as it affords them equal rights and responsibilities with native-born Americans. Further, voting, seeking political representation through elected office, participating in local governance bodies such as parent-teacher or homeowners' associations, and civic volunteerism are all indicators of integration.

The naturalization rate of immigrants in the United States is a little over 50 percent<sup>57</sup> (excluding the undocumented population that is not eligible for naturalization). This is significantly lower than in Canada and Australia - immigrant-receiving countries like the United States - and many European countries that do not have a tradition of immigration. The reasons for low naturalization rates of immigrants in the United States are not known at present and warrant further research.

### **Family Dimension**

Intermarriage of immigrants with native-born Americans from different ethnic or racial group, religious affiliation, national origin, or socioeconomic background arguably is a marker of social integration. Marriages between immigrants and native-born Americans create an associational bridge, introducing a different culture to each partner and their families.

Most marriages are still between homogenous partners: the likelihood of a marriage among the native-born and among immigrants is 30 times greater than the intermarriage between an immigrant and a native-born partner. However, in the United States, marriages between immigrants and the native-born have increased over time: more than half of marriages involving immigrants between 2008 and 2012 were to a native-born partner.<sup>58</sup> In 2009, 8 percent of all marriages and 14.6 percent of new marriages (within the last year) were between partners of

ethnoracial groups.<sup>59</sup> See Appendix 3 for a detailed distribution of marriage patterns in the United States.

### Spatial Dimension

When immigrants first arrive in the United State, their starting point for housing and employment is often in “ethnic enclaves.” An ethnic enclave is a complex of economic sectors that include housing and small businesses owned by members of an ethnic group who rely mostly on a co-ethnic labor force.<sup>60</sup> Annandale, VA, for example, is considered to be home to a sizeable Korean enclave while Langley Park-Adelphi in Prince George’s County, MD has a large Salvadoran population.<sup>61</sup>

Some scholars argue that because immigrants rely on their co-ethnics to find work and housing, they often end up in “ethnic occupational-and-residential ghetto.”<sup>62</sup> At their best, ethnic enclaves offer economic opportunities that enable recent immigrants to pursue alternative paths for social mobility.<sup>63</sup> However, ethnic networks and enclaves can actually hold some immigrants back<sup>64</sup> because they rely on limited, imperfect information available through their networks and, therefore, often do not maximize their skills and education in selecting post-migration occupation.

### New Destinations

In most of the 20<sup>th</sup> century, incorporation of immigrants concentrated in traditional gateway cities such as New York, Los Angeles, Philadelphia, and Miami. In the past four decades, driven by structural changes in the labor market and a decrease in cyclical migration from Latin America that resulted from hardened borders and increased penalties for undocumented presence created by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996 (IIRIRA), immigrants began moving to, and putting down deeper roots in, new destinations in the United States that previously had little experience with immigration.<sup>65</sup> Metropolitan areas such as Atlanta, Austin, Charlotte, Dallas, Portland, and Washington, D.C. became some of the fastest-growing immigrant destinations – the “twenty-first-century gateways”<sup>66</sup> - communities that lacked experience or infrastructure for working across multiple languages and cultures.<sup>67</sup> Additionally, immigrants increasingly dispersed across the United States - a decade into the 21st century, half of all immigrants in the U.S. lived in localities with a population between 5,000 and 200,000.<sup>68</sup>

**A decade into the 21st century, half of all immigrants in the U.S. lived in localities with a population between 5,000 and 200,000**

New demands on local schools, hospitals, and social service providers accompanied this shift, as well as pressure on state and local governments bearing the bulk of the cost of accommodating the new arrivals.<sup>69</sup> As a result, immigration presents particular challenges for the public administration apparatus and the mid- and street-level bureaucrats who staff it, who must provide constitutionally-envisioned, court-mandated, and statutory benefits to immigrants and/or their children despite potential political and financial pressures to limit the same.

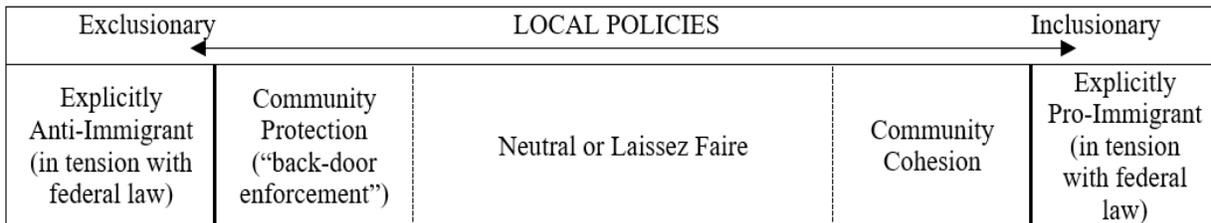
## The Role of State and Local Governments in Immigrant Integration

Relationships at the level of neighborhoods, broader local communities and even state policy have long been important for immigrant integration, but the role of these governance levels increased with the dispersion of immigrants to new immigrant destinations.<sup>70</sup> Researchers have identified five broad categories of response outlined in Figure 11.

Rubaii-Barrett, based on survey responses from local administrators in 500 communities, identified four categories running along a spectrum from exclusionary to inclusionary, noting that most localities adopt either laissez-faire or community cohesion approaches:<sup>71</sup>

- Anti-immigrant (targeted crackdowns on undocumented immigrants that may violate federal equal protection guarantees);
- Neutral or laissez-faire (no action);
- Community Cohesion (strategies targeted toward immigrant integration such as language access or welcome centers);
- Pro-Immigrant (e.g. sanctuary designations where localities refuse to assist federal immigration enforcement authorities).

**Figure 11: A Spectrum of State/Local Policy Toward Immigrants**



Varsanyi drew attention to immigration policing “through the back door” - actions taken by a locality that do not explicitly target immigrants, but make it harder for immigrants to thrive in a community.<sup>72</sup> Steil and Vasi highlight a list of such actions that includes mandating that local businesses use E-Verify to confirm employee’s documented status, English only provisions, restrictions on soliciting work in public, and laws discouraging immigrants from accessing housing by capping allowable family sizes.<sup>73</sup> Because these measures are often framed as preserving the quality of life for the broader community, Rissler identified these as community protection responses.<sup>74</sup>

Within the community cohesion category, Brenner identified six general strategies used by new immigrant destinations to facilitate immigrant integration:<sup>75</sup>

- Economic Development – locality sees immigrants as economic revitalization assets;
- Public Safety (inclusion) – locality sees immigrants as crime victims;
- Community Building – locality sees immigrants as local citizens with particular access barriers and provides targeted outreach and multi-lingual access to services;
- Employment Diversity – locality hires immigrants to have more representative staff;

- Partnership focus – local government forms links with immigrant-trusted non-governmental organizations to facilitate service delivery;
- Advisory Councils – local government officials recruit immigrants as volunteer brokers between elected officials and the community.

These types of strategies are often encountered with the “welcoming communities” movement which “aims to make sure that long-time residents and recent immigrants alike participate in creating stronger communities with equal opportunity . . . [by] removing barriers that traditionally prevent immigrants from fully participating in decision-making while being mindful that long-time residents have concerns about changing demographics. . . [These] policies yield positive outcomes for both native- and foreign-born residents of a city.”<sup>76</sup>

### Virginia’s Integration Infrastructure

In 2004, the Joint Legislative Audit and Review Commission (JLARC) report titled “Acclimation of Virginia’s Foreign-Born Population” termed Virginia’s overall approach to “acclimating” the foreign-born population as “inefficient” and one that “does not meet the needs of the foreign-born population.” The report recommended several areas of work:

- a comprehensive state plan for supporting Virginia’s limited English proficient (LEP) residents to access services via interpretation and translation;
- State-level planning and non-financial technical assistance to local adult ESL programs via the Virginia Adult Learning Resource Center (VALRC);
- Collect data and resource school divisions on best practices for K-12 ESL programs;
- Increase outreach activities by State and local government agencies to assist immigrants in learning about available resources and help in orienting them to the American “system;”
- Help noncitizens understand and navigate the naturalization process;
- Convene state-sponsored regional forums that could be used to better coordinate local efforts aimed at addressing the needs of immigrants;
- Seek additional federal funding to assist Virginia’s immigrant residents.

While a number of those interviewed for this study pointed to the continuing need for many of those same efforts, it is also worth noting that the commonwealth already possesses some key existing infrastructure for supporting immigrant integration:

- The [Office of New Americans \(ONA\)](#), established in 2020 to promote the economic and civic success of Virginia’s diverse immigrant communities. The Office is comprised of an Immigrant Services unit and Refugee Services unit (formerly known as the Office of Newcomer Services) and is responsible for the implementation of a statewide strategy to provide immigrants with comprehensive assistance related to employment, housing, healthcare, education, citizenship and other services for which they may be eligible.
- The [Office of New Americans Advisory Board \(ONAAB\)](#), also established in 2020 to advise the Governor, cabinet members, and the General Assembly on strategies to improve state policies and programs to support the economic, linguistic, and civic integration of New Americans throughout the Commonwealth.
- A public K-12 education system with established, though sometimes imperfect, mechanisms for identifying and supporting English Language Learners (ELLs) and

connecting to immigrant families. (These efforts are often referred to with the designation “Title III” reflecting the section of federal legislation that provides and governs federal funding to support ELL success - for Virginia Department of Education’s (VDOE) list of relevant resources, data and legal background see [https://www.doe.virginia.gov/federal\\_programs/esea/title3/index.shtml](https://www.doe.virginia.gov/federal_programs/esea/title3/index.shtml)).

- A network of adult education and literacy providers that support adult ELLs in developing greater English proficiency. VALRC (<https://valrc.org/network/>) plays a key resourcing and linking role for service providers while VDOE oversees the implementation of federal and state funding for adult learners, including ELLs, through 22 regional programs - [https://www.doe.virginia.gov/instruction/adulted/regional\\_programs/index.shtml](https://www.doe.virginia.gov/instruction/adulted/regional_programs/index.shtml).

In addition to these standing institutions, significant stakeholder engagement and strategic analysis took place in 2021 under Governor Northam’s Executive Leadership Team on Immigrant Integration (ELTII), co-chaired by then Chief Diversity Officer Dr. Janice Underwood and Department of Social Services Commissioner Dr. Duke Storen with key staff support by Deputy Chief Diversity Officer Dr. Mona Siddiqui, Deputy DSS Commissioner Gena Berger, DSS Executive Assistant Jessica Liston and Management Fellow Celeste Chalkley. The ELTII process identified four key priority findings/recommendations:

- Language access remains the number one challenge for state government entities in supporting immigrant integration and a comprehensive plan for language access is needed.
- A state-wide, trauma-informed cultural competency strategy needs to be implemented in order to shift public and state worker perceptions of immigrant communities toward a recognition of immigrant contributions to the commonwealth in addition to incomplete focus on service use.
- Economic integration, including transportation, housing and workforce development is a key area of opportunity.
- A statewide strategy across the Health and Human Resources secretariat is needed to strengthen access to health care and support the public health of immigrant communities.

While this work created important interchanges within state government and with external stakeholders, the background information and outcomes of these processes are currently difficult to access. Some key documents were publicly available at one point via the website of the Governor’s Office of Diversity, Equity (now Opportunity) and Inclusion but have not yet been reposted during the Youngkin administration’s transition into office. From an institutional wisdom standpoint, renewing such a repository of past state-level conversations may be worthwhile.

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## Section 4: Socioeconomic Integration of Immigrants in Virginia

As noted in Section 2, many immigrants in Virginia are highly educated – 46.9% have at least a bachelor’s degree. However, within the immigrant population, significant differences remain in educational attainment between naturalized and noncitizens. While nearly half (49.9%) of naturalized immigrants have a bachelor’s or graduate degree, only 35.7% of noncitizens do. Conversely, while 49.3% of noncitizens have a high school diploma or less in formal schooling, the same is true for only 27.1% of naturalized immigrants. And while labor force participation is higher among both naturalized (71.1%) and noncitizen immigrants (72.1%) than the U.S. born (62.7%) and unemployment is lower, it’s important to note that immigrants lost jobs more during COVID than non-immigrants.<sup>77</sup>

Many immigrants, and refugees in particular, expressed gratitude to the United States for resettling them and providing a safe place to live and raise their families. The sentiments below were typical:

*“For the first three months, of course, you know, we had to learn things quickly, and it is so much to learn: getting to know the bus rides and other things. Then slowly, after a few months, six months - a year, I got my driver license. And I was working and I was saving money and I bought a car. About a year and a half ago we even bought a house. America was very great to us and we appreciate that.”*

*- Refugee, West Central Virginia*

*“America opened their own country to us, we are now safe, America gave us these opportunities, which I’m grateful for.”*

*- Refugee, West Central Virginia*

*“I want to work for the benefit of this country that I owe a lot, the country here, the people. The hospital here saved my father’s life when he got a heart attack and saved my mother when she had heart failure. So, I owe the people here for my parents’ lives.”*

*- Immigrant, West Central Virginia*

**“First things first. It is a great blessing. I’ve met many, many people in the past 26 years who helped me and my family to survive in the US. Always, always grateful, that’s why we are very proud of living in the US, as our home country.”**

*“First things first. It is a great blessing. I’ve met many, many people in the past 26 years who helped me and my family to survive in the US. I’m very grateful and always grateful to all of those people who, you know, supported us, physically, spiritually and even financially. Always, always grateful, that’s why we are very proud of living in the US, as our home country.”*

*- Immigrant, Central Virginia*

Some interviewees also spoke about **self-reliance** and independence:

*“It is up to us immigrants. We have to do our best. You cannot only rely on the government, you have to do your part too, and then you'll be successful, on your feet.”*  
- Refugee, West Central Virginia.

Nevertheless, interviews with immigrants and service providers show several significant barriers to socioeconomic integration for some immigrants:

- Lack of information about benefits and services available to immigrants;
- “Brain waste” that occurs when highly skilled workers are unable to transfer credentials obtained in their home country and work in less skilled jobs as a result;
- Becoming trapped in (often difficult and sometimes exploitative) jobs due to lack of information about other possibilities, a lack of English capacity and educational attainment;
- A lack of transportation;
- A general lack of affordable housing in Virginia;
- A lack of financial systems knowledge and barriers to establishing a credit history and difficulty in obtaining loans;
- A need for dependable and affordable childcare, and
- Barriers to education at multiple levels.

#### **Lack of Centralized Place with Information about Government Benefits and Services**

The most frequent theme that emerged from focus group discussions and interviews with immigrants was lack of information about services and resources available to them. Many immigrants are unaware about how to find affordable English-language classes, free health clinics or FQHCs, legal aid clinics, and other resources to facilitate their integration in Virginia.

*“What the government needs to do is provide information to immigrants. I came here in 2017 and I did not know English. I found out about ESL classes at [name of community-based literacy organization] only in 2021. So, I have been taking classes there for two semesters. But I didn't learn any English for the first four years that I was here. I am so behind on everything because of that, like getting a better job.”*

**“What the government needs to do is provide information to immigrants.”**

– Immigrant, West Central Virginia

*“An immigrant family (whether they're documented or undocumented) arrives, has to rely on their friends and family who don't always give them the right information or on the other organizations that they're able to connect with, like ours or others. And if they don't find those resources, these families struggle more and become more isolated as well.”*  
- Service Provider, Richmond Metro Area

*“The first barrier was not knowing about the system, not having any information, how the system works: how to get a bank card, youth card, EBT card, apply for a job or apply for everything. Because, you know, the system back in Afghanistan is completely different.”*  
- Refugee, West Central Virginia

With the exception of those who worked as immigrant service providers, almost none of the immigrants interviewed knew which state services and benefits they were eligible for or how to access them. Some refugee respondents reported receiving federally-funded benefits and services, such as SNAP, TANF, WIC, and Medicaid after caseworkers from resettlement agencies helped them enroll in these programs. Participants who were enrolled in a state program Virginia Initiative for Education and Work (VIEW) did not know it was a state program and were enrolled by their caseworkers. It was apparent that there is a significant information void about state benefits and services among the immigrant population of Virginia.

*"The lack of information, that's one [barrier]. If they don't have the information that they need to start, for example, if they arrived and they don't know about the schools, they don't know about the access to the health care, they don't know what are the job options that they have. Because when you arrive to a place and you don't have this information - you don't have nothing, and there is no, like, One-Stop Center. If you had a One-Stop Center where you can get all this information and you don't have to go to the different organizations to get information that you need for a specific necessity that you have, I think it would be easier for people."*

**"So, it is sad for me to see that the government sometimes is wasting money by providing the services and people are not coming because they don't know."**

*- Service Provider, Shenandoah Valley*

*"I don't know if you ever lived in Europe, but I lived in Germany. Every time you move from one town [to another], you need to go and register in that city. And when you register, they send you to another level that offers it to you - all the resources - they tell you everything that is available. We don't have that. And they don't [just] have it in German, they had it in German, English, Spanish, all of the languages that are the most spoken in Europe. What I'm saying is they're open. If I had a perfect solution, I would have a Center or resources where people can come to in each of the cities, where they can feel safe, where they can feel welcome and find information about economic development, education initiatives, mental health, general health."*

*- Service Provider, Tidewater*

Others highlighted the costs and missed opportunities that come from a failure to let immigrants know about resources that exist. One immigrant and service provider in Northern Virginia highlighted the lack of targeted advertising or promotion as a missed opportunity:

*"If I turn on the [Spanish language] news, right now, and I want to know what's happening [in my area], I don't see it. I may see some [notices] from Maryland, but northern Virginia - it's not advertised. So, we are wasting services, sometimes it kills me because - I'm a car seat trainer for low-income families, and here we are spending the money to pay me, we're spending the money to train me, we are buying the car seats, it's \$3,000 for every simulator that we use, and then one*

*family shows up. Because they don't know that we have the resources. So, it is sad for me to see that the government sometimes is wasting money by providing the services and people are not coming because they don't know."*

## **Need for Navigators**

While some immigrants can access and digest the information online, others need the assistance of a knowledgeable navigator. Numerous immigrants and immigrant service providers highlighted the lack of publicly supported navigators in most communities.

*"When I say 'system navigation' I'm speaking about understanding that if you're going to apply for Medicaid for your children, you need to first figure out what locality do you live in and then you need to go to that social service department to apply for your child. So, even just having that knowledge can be a barrier, if you don't have that knowledge, if you don't have someone to share that knowledge with you."*  
- Service Provider, Richmond Metro Area

*"I don't think any immigrants get [enough] orientation. I feel like, if there were support groups or this orientation once a month, then you can actually send one person from your house, right? I feel like I would go, even if it was boring, because, if you are just very new to the country and a person like you, if someone who looks like you comes and tells you, you would believe that, right? Where to look [for information] or how does Medicaid work, how does food stamp work or how does leasing [an apartment] work, how do many other things - how does the DMV work. How does banking service work - those very basic necessary things - then I think that would be really helpful. Because I do not know if this happens so far, like it's been 13 years that I've been here, I don't think [I've heard of something like that]. Just you have to actually figure it out. You get a problem, then you have to - it's like a fight or flight - you figure it out, or you just forget it, right."*  
- Refugee, Central Virginia

Respondents also emphasized the positive impact that a skilled and trusted navigator can make in the lives of immigrants and the impact a system of such navigators could have for integration efforts as a whole.

*"We don't know how . . . we were lucky to find the right people around us that guide us . . . where to get education - we went to school and learned [English] really quickly. . . [And] we were lucky we came before September 11. So, it was easier for us to get everything straight. That's why I said we found the right people [a neighbor] around us, and so the next day that we came here, we went to Social Security Administration office and we got social security [numbers], the next day, we went to the DMV and got the driver license. And the government here - to open the business, it was really easy since we have the social security [number]. It wasn't an issue at all."*  
- Immigrant, Northern Virginia

Another immigrant, who originally came to the U.S. as an exchange student in high school, also highlighted how lucky she was to have a host family.

*“I really think it has a huge impact on all those barriers that you’re asking [about]. If I didn’t have the host family that I did - helping with transportation and filling out forms for [college] . . . but I can definitely see that for someone that they didn’t have the support [it would be a huge barrier]. That support system, it’s huge and many people don’t have it.”*

Persons who can explain and help navigate this complex system can be critical determinants of whether immigrants succeed.

*“The [local] YMCA here has a cultural navigator and basically that person - they use the system and help you connect to resources. I think other agencies need, like, a cultural navigator to help talk about those myths, help them connect families, to give that big agency a warm face - someone that understands what it’s like to be new in a country and help them connect to all kinds of resources. Almost like a case manager - ‘You need help to find a doctor? We can’t help you here, but let me help you call this agency.’ Some people just need the phone number. [Others need someone] to call with them, to teach them how to leave a message with your name and phone number and all those things that we are taking for granted.”*

**“There also used to be a place that I used to volunteer for in [nearby city], and it was like a Hispanic Liaison. They used to help the Community a lot when they were open.”**

*- Service Provider, Central Virginia*

A few immigrants mentioned organizations or local government offices that played this navigation role and were very important in assisting the immigrants.

*“I have to say that the Catholic Church was a big help. I feel like they had a lot of resources. They were one of the few people that had a lawyer or some sort of legal help, and they were the ones that told me that I could go to [college]. There also used to be a place that I used to volunteer for in [nearby city], and it was like a Hispanic Liaison. They used to help the Community a lot when they were open. I even got to live with her for a while, because my whole situation was a little complicated. But I did volunteer with her, so I would translate from time to time for them and they had help with medical - they have this thing, Casa de Salud - they would get like lawyers and they would come and talk to you about your options and stuff like that.”*

*- Immigrant, Central Virginia*

One strategy mentioned for developing volunteer navigators within the community is the creation of “leadership academies.” With civic engagement, one service provider from the West Central region noted,

*"I think [the] city tries really hard to do these leadership cohorts - it was a part of a previous effort to be kind of welcoming and inclusive - to hold cohorts and you could recruit, if you knew somebody, you could recruit them to be a part of this leadership "team", and they would go through city services, election offices, you know different engagement offices and municipal trash services and [better knowing your local government]. And, so, they did a pretty good job with that."*

The service provider also sounded a small cautionary note about the need for good vetting of participants.

*"But a lot of times when you do that, you create your own sort of caste system where somebody who got involved because they got recruited, they gain some sort of perceived authority over the remaining elements of the community."*

### **"Brain Waste" and the Immigrant Community**

According to the Commonwealth Institute, "brain waste" occurs when individuals have at least a college level of education and are either working in a field that does not require this credential or are unemployed. In Virginia, 21% of college-educated immigrants 25 and older are working in low-skill jobs or are unemployed. . . well above the average for U.S.-born Virginians."<sup>78</sup>

**In Virginia, 21% of college-educated immigrants 25 and older are working in low-skill jobs or are unemployed. . . well above the average for U.S.-born Virginians.**

Numerous interviewees raised the issue of brain waste:

*"I think the biggest barrier to integration is that you have professionals working in poultry plants. You know, they spent all this time and education and effort at home getting to a good career, and then they have to come here and they, you know, lose everything."*

*- Service Provider, Shenandoah Valley*

*"The other one [challenge] was not being able to find a decent job. I have a university degree, I have 10 years of experience, I was a lawyer. And when I came, they put me to work in a factory. I never worked in a factory, I never even saw a factory before. I was so shocked, I got really depressed... So, the issue was: you didn't evaluate each refugee to find out 'Okay, what is their profession? What kind of jobs do they have experience in? So, they didn't know anything about any refugees... I knew, you know, that you have to accept this first job opportunity but I told them: 'You know, I'm an attorney. Even if I have to do the cleaning job in some kind of law firm, I accept that so that I can learn things from the people working there.' But, unfortunately, they did not do that."*

*- Refugee, West Central Virginia*

*"[The] next barrier, I feel strongly - I'll call it the credential barrier. Some of the highly-educated immigrants - doctors, engineers - they immigrated to the U.S. [but] they don't have the U.S. diploma or license in their profession, so they cannot practice their profession . . . Off the top of my head, I'm thinking nurses, the doctors, which we need desperately. We lose a lot of taxes from them, we need to put them back to work for us, so we can collect their revenues."*

*- Immigrant, Hampton Roads*

*"[When] we came here [as refugees], we just finished our degrees, like my husband his MBA and I was an accounting BA. I had never done work in a factory and when our caseworker is like offering us [that type of work], it was really like a depression or a stress, more stress. Because, you'd never done that work and they're asking you, and you have to, because you are just with two, three pieces of your clothing - you don't have anything when you're moving to a new country."*

*- Immigrant, Central Virginia*

*I tried to try to get some jobs, you know, in my field of qualification or my interest. I have a university degree and a graduate degree in economics. So, I applied to a bank, I'm not gonna mention the name, for a teller position. I know you don't need much experience for a teller position, a high school graduate can do the job of a teller position. Well, I put all my qualifications there on the application, but they rejected me. They said I was overqualified for that position. Then the same thing happened when I applied for another position with customer service. They said the same thing: "You are overqualified." ... So, now I work as a cashier at a grocery store.*

**"You know, it always kills me . . . I've taught students who were OB-GYNs and pharmacists . . . in their country and they come here . . . and the best job they can get here is like maybe a CNA if they go back to school."**

*- Immigrant, Central Virginia*

*"The biggest problem for me really coming to the U.S., and that's not something I was anticipating, was the difficulty of being relevant and finding a job. I came with, let's say, quite a few degrees: I have two master's degrees and a doctorate from a European University. I grew up speaking English. I speak a few other languages. But none of my background translated into what I was looking for here... So, entering the labor market - that was the most difficult barrier."*

*- Immigrant, West Central Virginia*

*"[Policy change is needed to] provide a means of being able to bring their education, their degree from there and validate it here. I've known of lawyers, I've known of nurses, doctors - that's what they were in their country - but because,*

*you know, they weren't able to validate their studies here . . . [they can't use those skills]."*

*- Service Provider, Northern Virginia*

*"I worked very hard in Afghanistan, I did my education and also I taught for five years at the school for blind and deaf. I even brought all of my documentation: certifications, school records that I've been a teacher at a university in Afghanistan for five years and I have a degree and diploma. But every time I apply for a job, it is not accepted, because I don't have a degree from here... It will be hard for me to get those certificates again in America, because I have small children, I work, and taking those classes - that takes all my time. My goal is just to use the degree and do what I love. I put many years to go to college and get that degree, I'd like to use that."*

*- Refugee,*

*West Central Virginia*

**"It will be hard for me to get those certificates again in America, because I have small children, I work, and taking those classes - that takes all my time."**

*"You know, it always kills me... I've taught students who were OB-GYNs and pharmacists and engineers and architects in their country and they come here. They've invested all this time and effort into training in the home country and the best job they can get here is like maybe a CNA if they go back to school. And so I think that's something, whether it's a state or a federal [initiative], that's really a policy question as refugees come to this country. How do you, if not just accept credentials from wherever, what are some really intentional career ladder options for people who may not be able to work as an OB-GYN again in this country . . . but certainly having been a doctor in another country would qualify you for something more than cleaning a hospital room."*

*- Service Provider, Charlottesville Metro Area*

*"If employers recognize our certificates and education degrees, it will be much easier, so we can use it. We are not asking for free money; we want to work."*

*- Refugee, West Central Virginia*

*"When somebody is educated, who has some kind of degree, some experience and some profession, but then you send him to work in the factory, that's a waste."*

*- Refugee, West Central Virginia*

This represents potential ground that can be gained by improving the integration of immigrants into Virginia society through improved access to workforce development programs, paths for recognition of skill sets and credentials obtained abroad, and orientation of immigrants to cultural expectations of the Virginia workplace. Some persons interviewed noted the gaps in Virginia's workforce development program while others highlighted efforts they knew of within their geographic area.

*"The employment commission is such a big function [and] has no knowledge of the immigrant population in America, in Virginia. Yeah, so that's very bad because what is missing? Education, training, retraining certification, job assistance, counseling, resume writing, career preparation. Seven, 8, 10 elements of Workforce Development - zero for the Asian community or Hispanic. Why? Because it's so big. It's not something you build in 10 years, you have to build it in 100 years. And this country does not have that workforce development. It would be great if they get some funding [for targeted workforce development]. But you have to stress, [Asian immigrants] have the leadership, but you have to pay attention, so that will be great business. Asian immigrants are very self-reliant, they find ways. They are doing it without the state. But if the state is more involved, imagine how would it be."*

*- Immigrant and Service Provider, Statewide Organization*

*"If you are a healthcare provider [in] your country, like international medical graduates, it is harder in the US - [not because of] the academic steps that you have to go through [but] it is more the money that you have to invest - how expensive it is to take any test, to prepare - everything is based on money - [the tests] require a lot of money that we don't have and I think, in order for us to go into the healthcare system sooner, this is one of the challenges."*

**"Workforce development, I think that would really help. There are workforce certificate programs, but pretty much nobody in our community knows [about] that."**

*- Immigrant, Northern Virginia*

*"Workforce development, I think that would really help. There are workforce certificate programs, but pretty much nobody in our community knows [about] that. I know that because I went to college and I actually went to Google it. Because you know, back in our country, we call those like vocational courses, vocational work training. Here they call it workforce and if people know that and they know, like, I can do that, right, but that they do not know how. My uncle learned and got into automotive mechanics from workforce [training]. And there is another uncle who started doing training - electrician training and then he started working there. And there are so many people, immigrants, who already come with a workforce background, right?"*

*- Refugee, Central Virginia*

*"Piedmont Virginia Community college has a program called Network to Work. It's basically a job training program and it's founded by guys who used to be with the Chamber of Commerce. They work with large employers like UVA and others who usually pay at least \$15 an hour and then they also work with community members who are navigators and employers - a job training program that's pretty intensive. I don't know how many of the people they work with are immigrant or foreign born. I do know at least one or two of their staff members speak Spanish. I think a lot of*

*the adult education programs have some sort of career readiness and job training, but my understanding is, this is a pretty intensive course for people, and so I think there's probably opportunities to do more of that across the state for refugees, certainly.”*  
- Service Provider, Central Virginia

The federal Office of Refugee Resettlement at the U.S. Department of Health and Human Services has initiated the Refugee Career Pathways program in 2018, which is designed to help refugees initiate professional careers in their new communities. Examples of services provided under this program include

- “Assistance in creating personalized career development plans
- Classroom and work-based learning opportunities
- Career coaching and mentoring
- Connections with educational opportunities, apprenticeships, and on-the-job training
- Re-credentialing and credential recognition
- Vocational English language training”<sup>79</sup>

However, at the time of this writing in 2022, the program did not operate in the Commonwealth of Virginia. It also does not offer career services to non-refugee immigrants.

### **Trapped in Poor and Exploitative Jobs**

At the other end of the skill spectrum, some immigrants find themselves trapped in low-wage jobs or jobs that erode their health because they lack English skills or don't know how to search for other jobs. One service provider noted:

*“I know families that have worked [in the poultry plants] for years and have problems with their wrists, arthritis on their hands, swollen joints because of, you know, the difficulty of the job. I think it's difficult for them to get out of that, and you know for some it's just like: “This is what I have, this is the best I can get, and it's good pay.” So it's hard for families to leave, but I think opportunities for education around how to find a better job, like the steps to get to a better job that won't be as difficult on their bodies, would be a great thing. I think it's hard that they come and they essentially get trapped in this job.”*

**“So, after cleaning 4 big houses, a woman might make \$40. The people that hire them tell them: ‘Well, you have no documents, . . . so this is all that it's worth to pay you.’”**

When combined with a lack of documentation, this scenario can lead to outright exploitation by employers or supervisors. Another service provider shared:

*“People have very basic work skills that are lacking. That forces them to take bad paying jobs. For example, for the women, they typically might get hired to clean a*

house, and then they get \$10 as payment for cleaning the entire house. So, after cleaning 4 big houses, a woman might make \$40. The people that hire them tell them: 'Well, you have no documents, you're undocumented. You don't have your own car, so I have to go pick you up and then drop you off. And you didn't bring your own cleaning products, so this is all that it's worth to pay you.'

"Years ago, that was typical thing - "you don't do that for me, I call immigration. I call the police." You know you [are] quiet. As a woman, I know it even myself, I was still working in cleaning. And one night, that supervisor was from Guatemala. He sent me to the last building in [the complex]. Some of this [felt] this is not right, but okay, I start cleaning. It was like 10[pm], something, I hear some steps. He entered the room, he locked the door - - I was cleaning the bathroom - and he approached me, and he said 'I love [nationality] women.' So, the only thing that I could do - because I'm small and he was taller, so I was able to fly under, open the door and run as fast as I could. And I didn't know that I should say something. I didn't show up the next day to work because I was afraid. I didn't have my documents. Nowadays, I know that I will send that man to jail for what he did to me. Basically, . . . they do with us a lot of things that people don't say because they are afraid. They are scared."

**"I didn't show up the next day to work because I was afraid. I didn't have my documents. Nowadays, I know that I will send that man to jail for what he did to me."**

- Immigrant, Central Virginia

Feeling trapped or exploited is not only experienced by those who lack documentation, but also is experienced by immigrants with work-based visas that are tied to a single employer. (With most work visas, an employer must apply for the visa on behalf of the immigrant. In these situations, an immigrant cannot switch employers easily.) As one highly-educated immigrant from the Hampton Roads region noted:

"This is a big problem when the immigrant . . . you have a job but you need to worry [about] the job stability and also you may lose your [legal] identity, your visa, if you lose your job. That is quite a struggle in the first couple of years, you know . . .and some employer and they know, under your visa status, he will utilize this, your struggle on this, and maybe push you and they squeeze you."

Several of those interviewed noted that immigrants lack access to legal support for confronting such exploitative practices, either because of language barriers or cost (or both).

### **Lack of Transportation**

Another major barrier for immigrants is the difficulty of reaching employment, government offices or service providers until one obtains a car.

"But couple of months I was working for this contract company. This last month, I worked three days [one week], two days [the] next week. There are a lot of jobs

*around me, but the problem is I don't have a car. The total distance to get over here - it's very difficult to ride a bike and walk over there [to a] good job. This company is a little [easier for] me because I can walk half hour, I can go by bike about 10 minutes. But I think, yeah, if I find a car, I'm sure I can find a better job than this company."*

*- Refugee, West Central Virginia*

This barrier can be especially difficult for those who move to the U.S. from places and cultures with dense networks of shared transit (whether publicly funded or private operators) and little experience driving a car.

*"One of the biggest barriers is transportation because in our country, we have public transportation and here if you don't have a car, you get stuck. At the time that I got here [20 years ago], because of the lack of transportation [someone] can charge me even \$30 or \$40 for a 15-minute ride. On top of that, they charged me, maybe \$20 just for the interpretation service [at my appointment]."*

*- Immigrant, Central Virginia*

*"In terms of transportation, that's one of the biggest barriers - not only they don't have transportation, but the people that do provide transportation ask a large amount of money, I mean they take advantage of them in terms of paying for transportation. We see it here, I think, on a daily basis here in our office, and that is something that we need to address - try to help them with transportation to go to work, go to their meetings, come to the office meeting and home visits that we have here in our office and for work purposes, too."*

**"One of the biggest barriers is transportation because in our country, we have public transportation and here if you don't have a car, you get stuck."**

*- Service Provider, Central Virginia*

*"I'm lucky to live in this area, no need all the time to have a car because I'm not driving. You know, maybe second obstacle [to integration] is driving. For me, it is not easy to move [around]. I need my husband to pick me up all the time."*

*- Immigrant, Northern Virginia*

*"For myself, and for most of us – as women from Afghanistan, the big problem is not knowing how to drive. Personally, I think there should be courses, classes to teach us about the rules, about the driving test, there should be classes to teach us how to drive. Speaking for myself: it's been two years and I have not been able to take the test, not able to have a permit and be able to drive. And that's a big part for us to be independent."*

*- Refugee, West Central Virginia*

*"I take buses, public buses, and I have to transfer, and it is another challenge. You have to be on time, sometimes you miss the bus or the bus is late and I have to*

*contact my Professor to say 'I'm going to be late because I missed the second transfer bus, so that's another challenge.'* - Refugee, West Central Virginia

### **A Lack of Affordable Housing**

Virginia's dynamic economy, especially in faster growing urban and suburban areas, generated significant added wealth for property owners as land and home values increased. Virginia's growing population, driven in part by immigration from other countries, contributed to this increase in property values. (Half of the population growth in the U.S. from 1965-2015 was due to immigration.)<sup>80</sup> However, for New Americans, a lack of affordable housing is exacerbated by these rising home values. A September 2021 report from the news site DCist highlights the challenges Afghan refugees face in finding affordable housing, noting that the State Department recently "published a list of 19 cities it considers suitable to SIV holders" but that no localities in the D.C. area or Virginia made the cut, despite the region's relatively large Afghan population.<sup>81</sup>

Numerous interviewees from such locations as Charlottesville, Harrisonburg and Roanoke, as well as Northern Virginia, highlighted the lack of affordable housing as a barrier to immigrant integration.

*"I think the main problem for us here is the income. If the government provides something - like it's a [low cost] housing facility to help us to save a little money [for] supporting my family . . . that will mean a lot. . . honestly I can't save anything in the end of the month."* - Refugee, West Central Virginia

*"The biggest thing that I always advocate for our families is housing. Housing is always a huge concern. It is an issue, whether you're an immigrant or not, so I think that the struggles that they face with the language barriers and everything else, on top of the affordable housing, is just - it makes it that much more difficult for them . . . so they're being forced to stay with their family members or to be sharing homes with other families that they don't know. Similarly to that, I find that legal support for whenever there are housing concerns or issues has been a problem. We've had families that have, like, black mold in their home and the landlords don't come and take care of the issue, or just completely avoid the situation in general. And, I think obviously it's expensive for a family to hire a lawyer or somebody to represent them whenever they're doing something against their landlord."* - Service Provider, Shenandoah Valley

### **Lack of Financial Knowledge and Difficulty Obtaining Loans**

These housing issues are also compounded by difficulty that immigrants have in learning how financial systems work in the U.S. and in obtaining loans, either because of discrimination or lack of a credit history. One service provider noted, "[We hear of] discrimination, like they don't get the housing, because they don't feel that they're qualified because of their look, or the broken language, or the lack of credit."

A few respondents pointed to the challenges of learning how the U.S. financial system works.

*“Another most [challenging] thing I see - they're coming, they're working really hard, they get some finance [cushion], they get some money. [But] they don't know any person to invest, how to invest, to save safely. If you're going to invest on a stock or anything they are losing so quickly, because they don't have the knowledge of a stock and they couldn't do anything.”*

*- Immigrant and Service Provider, Central Virginia*

*“I knew in an abstract way that everybody uses a credit card here. But it took me a really long time to actually go and start having, you know, my own line of credit. I had to start with the credit builder because I didn't have any credit history. Creating credit scores was very important to everything that I wanted to do. But it took me longer than necessary because I had hesitation: “I have money, why would I use borrowed money?” And not many people would go into details and tell me why I needed to establish credit history right away.”*

*- Immigrant, West Central Virginia*

Immigrants, several service providers noted, can struggle to build up a credit history if they are sub-leasing or informally paying rent for their current housing or if they avoid borrowing money because of cultural assumptions. One said:

**“I knew in an abstract way that everybody uses a credit card here. But it took me a really long time to actually go and start having, you know, my own line of credit.”**

*“I just learned that [our city] is a credit desert, so I think credit is another big issue with immigrants. [The city] is equivalent to like rural Alabama and like rural Alaska in terms of credit deserts. You can't buy a house, can't buy a car without borrowing money and it even affects your renting your first house, because when they do a credit check to rent a first house, they don't have any [credit history].”*

Efforts to increase the supply of affordable housing would, of course, benefit more than just the immigrant community. Other potential supports specific to the immigrant community might be financial literacy training in their native language.

### **A Need for Dependable and Affordable Childcare**

As many parents discovered during the pandemic, childcare for those not old enough to attend school can be a barrier to entering or staying in the workforce. This theme also emerged for immigrants who, especially early in their time in the U.S., lack the social networks needed to patch together informal childcare and who may lack the funds to purchase quality childcare.

*“It was difficult - and I know it's hard for many mothers who will come with small children - it was difficult to not be able to count on somebody who's trustworthy or somewhere safe and trustworthy to leave their kids with all the work. I think that that's quite the obstacle that is faced as a mother.” - Immigrant, Northern Virginia*

*“Also, when you want to work [and] you have a child - that makes it difficult to put in daycare because it's unsafe. I'm waiting now [for] my son to go school - after [I will start] searching for work.”*  
- Immigrant, Northern Virginia

Another immigrant who works in the medical profession in Northern Virginia noted the importance of an assistance program covering part of the cost of preschool.

*“Yeah, for kids under five - the latest one was in December - the system for childcare assistance. This is what I am still using for my daughter. She's a pre-K and she's using the childcare assistance until this month - co-pays are being paid for by the government.”*

### **Barriers to Education at Multiple Levels**

Education, especially participation in the K-12 school system, is a powerful channel for immigrant integration and a key existing infrastructure system that can be leveraged at the federal, state and local levels to support immigrant integration. This importance is partly due to the universal access provided to K-12 education - under long-standing constitutional law, any resident, regardless of immigration status, is entitled to attend the local public school system.<sup>82</sup> Additionally, constitutional precedent requires schools to provide sufficient translation and interpretation services to overcome language barriers that limited English proficient students and adults may encounter.<sup>83</sup> In the 2019/2020 school year, Virginia reported enrolling 115,800 English Language Learners (ELLs), approximately 9.2% of the total K-12 student population, and enrolling 440,200 children from immigrant families (about 25.1% of the total student population.)<sup>84</sup> Those immigrants who arrive at an age where they can still attend public K-12 schools often acquire English and cultural capital at a much faster rate than their parents.

*“I think I integrated very well, especially because I had the chance to go to school. So, I actually went to school and you know, I like, learned English there and just American culture, I guess. It is a little bit easier to integrate but I definitely see how language is, like, a barrier for many.”*  
- Immigrant, Central Virginia

Despite these key legal protections and the opportunity represented by participation in the K-12 system, several of those interviewed still mentioned barriers to education as an ongoing concern. One theme, from those who moved to the United States as children, was the difficulty they encountered during the period where they were learning English and the cultural ways of U.S. schools. In some cases, the barriers described were the standard challenges of learning a new language and culture.

*“I mean, I came at a really young age, here in the United States, so, that was really the major part. It was just, like, I couldn't make any [friends], couldn't, like, talk to them in English, so that was also a barrier.”*  
- Immigrant, Central Virginia

For others, the barriers extended beyond this initial period and included a pattern of low expectations. One Southeast Asian refugee who came to Central Virginia in the early 1980's named the greatest barrier to integration as a racism of low expectations, recounting a school

system unprepared to support English Language Learners and indifferent to the unique needs of a refugee.

*Well it's - I'm new to racism - that's what- I'll be blunt with you - it's racism, it's gonna be confusing when you come into the state. You don't speak the language, no one in the family, no one really speaks the language, right. And so, long story short, when I first came, none of my family speaks English and my first day of school, they just dropped me off, and I was basically a mute for a whole year. No communication, I literally just sat, like sat in the classroom for the first year and did nothing. And, I mean, it's not the teacher's fault, what's she going to do? But there was no like "hey, this kid is not doing [anything], what do we do [to help]? You see what happened with the first [immigrants] – okay, you can't blame because [not prepared.] But the fourth-grade teacher wanted to put me an LD [Learning Disabled] class, you know. The second- and fourth-grade teachers didn't really attempt [any help], they just say 'Oh, what the hell. I'm just going to pass them along.' Literally, just going to pass them [on]. I didn't really get any education, they just sent me through and then, luckily, I'm not a moron, you know, basically . . . if I didn't have the will to do it myself, I will be messed up - I'll probably be in jail basically. My situation was not really great, you know. So, yeah, let's say it, so the racism was really the worst part and it was just crazy, but as a little kid, what do you do, who do you talk [with] if the teacher's racist?"*

**"The moment that they figure it out that I was an immigrant, I immediately became the dumb girl. I don't know exactly what happened, but they wouldn't let me take advanced classes, even though most of my teachers were like, 'Why are you in my normal course? You should be in my advanced class.'"**

Another immigrant, who in the last decade moved from Guatemala to a rural county in Central Virginia, entered 9th grade and also recounted barriers of low expectations from counselors.

*"I think one thing that I forgot to mention: The moment that they figure it out that I was an immigrant, I immediately became the dumb girl. Yeah, I think I forgot to mention that. It wasn't just one school, it was both schools. Freshman year I was just like - they put me in easy classes because I didn't speak the language. But I did so well, you know, like my freshman year and history, I got [a high score] on my history SOL [when] I barely spoke English. But they wouldn't put me in any sort of advanced classes, because I was the immigrant child. I was just - my counselor even - I don't know exactly what happened, but they wouldn't let me take advanced classes, even though most of my teachers were like, 'Why are you in my normal course? You should be in my advanced class.' And it took me until my senior year until they allowed me to take dual enrollment and AP classes. I'm pretty sure you know what it's like - if you take advanced courses, your GPA is higher. Well, they wouldn't let me do that, and so my GPA is a 3.4. And then, like it just really sucks because I had, like, A's and B's throughout high school. But I guess,*

*like, that was it . . . and I know that I'm not the only one, because I've talked to other immigrant kids [where] that was the [same]. Yeah, I was immediately dumb, because I was an immigrant."*

Others noted language access in key moments as a continued struggle.

*"K through 12, right? We are [usually] very good [here] but, like, I had an appointment the other day and I requested an interpreter because my kids . . . we speak Spanish at home and my kids' native language is Spanish and then we were trying to test if my son had some, like, speech thing going on here. And I request that [they] do it in Spanish, but even that I had to fight for and it's weird - I shouldn't be fighting for this - I'm telling you my kid's first language is Spanish, [it should be] easy. I was advocating for me, for my family and my son, [but] many people don't feel like they have that right, but I feel like I do that for a living . . . I know I can fight for this. And, finally, the lady agreed, but then the interpreter never showed up. So, I'm like 'Great! All this and then I ended up having to translate and do all that stuff."*  
- Immigrant, Shenandoah Valley

While some immigrants who came as children faced challenges in K-12 settings, additional challenges exist for accessing higher education. Existing research suggests that English Language Learners (ELLs) face barriers to college access at different places than other students - ELLs are less likely to voice an aspiration to go to college, become qualified in terms of coursework, or apply to four-year schools (which though costing more often also provide more financial aid.)<sup>85</sup>

**"Sometimes institutionally I could find them \$500 to \$1,000, but when your tuition is \$16,000, it doesn't really make a dent."**

Some of these factors were illustrated by the comments below, made by the same immigrant who shared that counselors automatically routed her into less advanced coursework.

*"I think, especially for me, one of my biggest struggles was that I was a pretty smart kid and I thought, if I worked really hard, I could go to college. But it's not as easy as it sounds. Especially because depending on your immigration status, it changes, like, you're going to get out-of-state tuition when I graduated. But they didn't really explain, like, how college works, how it was paid for, how much it was gonna cost. I wish they would have told me that it just wasn't going to be easy to go to school as an immigrant."*  
- Immigrant, Central Virginia

In other cases, barriers to college involved a lack of financial assistance, or complications with loans due to limited English proficiency among parents.

*"So, I would say: after access, I would say financial barriers. Most of the students I know were on full scholarships: from community scholarships, piecemeal scholarships - finding \$2,000 here, \$1,000 here. Sometimes institutionally I could*

*find them \$500 to \$1,000 - but when your tuition is \$16,000, it doesn't really make a dent.*

*- Service Provider, Northern Virginia*

*"I have a passion to be a doctor. That's what I want to do, but college or universities - education fees are very high here, I don't have that support to pay for that, I don't think I'd be able to."*

*- Refugee, West Central Virginia*

Others pointed to preschool as an area where immigrants were experiencing barriers due to a lack of transportation. In a follow-up email to the interview, a refugee advocate in the Central Virginia wrote:

*"Actually, I want to let you know [the school system] has a shortage of buses for preschool. One of our 4-year-old boys got into Head Start at*

*his elementary school, but has not ever been able to participate because there is only one bus available with no space for him. Initially they said the bus would start in 2 weeks after school actually started, then they set the date out 2 more times and this week they acknowledged there may not ever be a bus for him. His mom can't pick him up after school (she could get him there on [the local bus system]) but at school dismissal time she has 3 other children in elementary school to be home for when they arrive. His father can help in the morning but is at work in the afternoon. You can imagine how vital preschool is to a 4-year-old refugee kid whose family speaks no English and are all illiterate. This will be such a big loss for him."*

**"One of our 4 year-old boys got into Head Start at his elementary school, but has not ever been able to participate because there is only one bus available with no space for him."**

## Section 5: Sociocultural Integration of Immigrants in Virginia

Sociocultural integration includes such factors as learning the host country's language(s), understanding and operating within a new and often different cultural environment, navigating institutions like schools, faith communities and local government services, and understanding legal codes and expectations. In interviews with 50 immigrant service providers and 46 immigrants, the following themes emerged as barriers that immigrants encounter in their immigration journey:

- The language barrier, including both the challenge of obtaining services or information in their native language and challenges that often delay or prevent immigrants from acquiring proficiency in English;
- Barriers created by different host/home cultural understandings;
- Experiences of welcome and discrimination in the broader society;
- Immigrants' vulnerability to being the victim of crime.

### The Language Barrier

*"I think one of the first things that people need to know - and it's not just a problem from the organization or from an agency or the government. I think this is important to let people know - prepare with the language, because it's like a key to access to the other services that they might need, and they will have the possibility to access more resources if they learn the language. So, I think it's very important."*

*- Service Provider, Shenandoah Valley*

In Virginia, an estimated 488,000 immigrants (39.5% of the total) report speaking English less than "very well," and are categorized as Limited English Proficient (LEP). This compares favorably to a U.S. rate of 46.4% LEP, but also points to the fact that, in the short term, a significant number of Virginians, a number that grew by 78.7% from 2000 to 2019, need information in a language other than English to access services in an equitable manner. While federal law mandates such language support for those accessing federally-funded services (e.g. public hospitals, K-12 education), the COVID-19 pandemic has also highlighted the government's interest in maintaining a capacity to disseminate critical information in a way that is clearly understood by speakers of a diverse range of languages.

### A Need for Language Access

In interviews conducted for this report, the most frequently cited, and often first cited barrier to immigrant integration, was the language barrier, the lack of access to information in other languages, and relatively sparse infrastructure available to immigrants for learning English. The quote above, as well as the following comments by an immigrant from the Shenandoah Valley, a service provider working in the Shenandoah Valley and another working statewide, are indicative.

*"I have seen an improvement on interpreters and things like that, but I think there needs to be more of those. Like going back to the DMV example how - I mean many times, I had to be the interpreter . . . when you see people working at DMV, they just start getting louder and louder and I'm like: 'It doesn't mean that they're*

*going to understand you now.' So, I know there are a lot of forms now that are, like, in English and Spanish and stuff and that's great - I'm happy for that - but it's also the speaking [and having an interpreter available]... But I would say, you know, just making sure those interpreters, those free sources are there, having forms in different languages, right, and making sure they are translated properly, not just Google translate, but properly translated."*

*"I mean language affects everything from, like, the DMV - here it has historically been pretty hideous with language access – so, everything from getting a driver's license, to going to school, to getting a better job, to . . . I mean . . . everything."*

*"The biggest obstacle is the language. It's a language barrier, and it's the root of many other things . . . [we] have issues and other problems due to the fact that a lot of the immigrant community that we work with does not speak English and does not read in English."*

The challenge of working across language barriers is not only a challenge for government organizations, but also pan-immigrant groups. One service provider who is also an immigrant said:

*"So, the first thing is to be aware of it, not to be aware only about the language barrier, but about the diversity of these languages, and the sub-diversity among those who come from different countries. Some communities speak the language that no other in the same country understands. Because of that, our work in helping them is extremely difficult. I would say that working with immigrants is the most complex work that any nonprofit is embarking on, but it is not as appreciated."*

## Tackling Language Barriers

Excerpted from [article](#) "Roanoke tackles language barrier" by Jeff Sturgeon, *The Roanoke Times*, September 26, 2021

About 95,000 of the 100,000 people who live in the city of Roanoke speak English well enough to work, attend school, receive health care, interact with government, use the transportation system and access the other necessities of life.

A language barrier inhibits that engagement for the other 5,000.

The city of Roanoke next month intends to take that barrier down.

The city has contracted with a company that can bring interpreters of 286 languages to the phone within half a minute, officials said.

The program is up and running in the courts, jail, emergency services, police, Department of Social Services and other municipal offices. It is intended to facilitate conversation between city offices and employees and members of the public with limited English ability. It works from a phone, tablet, laptop or computer.

Principles of language equity say that essential information should be available to members of a community in the specific language each person is most comfortable using, said Katie Hedrick, the city's bilingual COVID-19 support

*Continued on the next page*

For those helping immigrants access critical services, the lack of language capacity at government offices is familiar and frustrating. One service provider said:

*"But a lot of the services that do nominally exist in rural areas for immigrant populations are not very culturally competent. So, for example, I had a conversation with the Director of Children's Services for the [local] community service boards - essentially the main Community services clearinghouse for the five counties - who herself was a second-generation immigrant. As we were talking about different services that they offered for children who had experienced trauma, I got very excited and was like: 'This is great! How can I refer? Like, who should my clients call?' And then she kind of sheepishly said: 'Well, we don't have anybody that speaks Spanish right now.' And I was, like: 'There's no way this is going to happen.'"*

Some locations and agencies have proactively recruited bilingual staff and increased the level of cultural competence among all employees, and interviewees cited cases where this made a significant difference.

*"The health department in our community has always done a fantastic job of serving refugees and immigrants. They have a ton of programs. And they had Spanish speakers when I came in 2000 or so - they were far ahead of the curve. And the school system is unbelievable. [The city schools] I would put them up against any system in the country. Oh, and [the local Department of] Social Services. I stopped working with social services in 2009 when they still didn't have anything in any other language and I started again now, and they have Swahili, they have Spanish, everything, any paper that they send out, they have a variety of languages. So in between 2009 and 2021, they've really stepped up their game. They have a bunch of*

## Tackling Barriers (cont'd)

specialist, who is heading up the program.

It's not good enough for an agency such as social services to tell clients to bring their own interpreter to their appointment, said Steve Martin, agency director. It's not good enough or even practical for children to translate for parents the logic goes.

Nor is Google Translate sufficient because, according to reviews, it makes errors.

The gold standard is live, two-way interpretation through a trained translator.

The city purchased its language access system from Roanoke-based Volatia Language Network, a private company that says it has built a network of 18,000 interpreters who provide on-demand translation 24 hours a day, seven days a week.

Complete cost information was not available, but information from Hedrick indicates the system could cost a few tens of thousands of dollars this year. Volatia charges a per-minute fee while interpretation is underway, but no monthly rate.

Roanoke is the first Virginia municipality in the state to offer two-way, or "bidirectional," language access, Volatia CEO Baraka Kasongo said. The first school systems in the state to offer

*Continued on the next page*

*bilingual workers. The folks that they have are a lot more culturally competent and try a lot harder. They don't always hit that cultural competency mark, but they definitely try."*

*- Service Provider, Shenandoah Valley*

The role of bilingual staff in helping immigrants locate services in other agencies was also highlighted in several interviews.

*"[They] have a Spanish-speaking case manager who is very effective at serving clients . . . totally overwhelmed by the internal load but is well placed. She receives a lot of requests for help from the community because she is serving people, is becoming known as a resource. And she and I have also . . . like she has a very regular referral, and so, if a client gets to her, and they have immigration legal needs, they will get to me. So, I think outcomes can be very rich and very rewarding if local agencies or service providers do make that investment."*

*- Service Provider, Northern Virginia*

Bilingual staffing represents a worthwhile investment in areas with relatively few languages spoken within the LEP immigrant community. In other areas, the diversity of languages makes it impossible to hire bilingual staff for every language needed. Several interviewees noted that this reality also creates disparities in access to services between language groups. One statewide service provider who is also an immigrant shared:

*"I do not see a whole lot going on with state agencies, providing language capacity. . . they have problems themselves. Mainstream [they are there] to serve "regular" people, let alone have specific funding to help Asian immigrants. Now Spanish . . . everything [is in] Spanish. And we're very upset about it . . . but for Asians, nothing. Why? Because we're too diverse, [the state] doesn't have money to serve all our community. So, we have been the ones that have been out there telling them 'Why? You gotta pay attention to both communities.*

## Tackling Barriers (cont'd)

it are those in Henrico County, the city of Richmond and Waynesboro.

Roanoke's system even has an edge even over those organizations that offer connection with an interpreter through a hotline or call center, Kasongo said. In Roanoke, persons can directly dial the office or person they seek – just like, Kasongo noted, people who readily speak English do.

Kasongo, 35, is a native of Rwanda who came to Roanoke years ago. His company, which is based on his own experience as a limited-English speaker, was founded in 2003.

To understand how the system works, it's simplest to imagine a hypothetical caller contacting Roanoke by phone for a new trash can, library card, information about a neighborhood group or such.

Most municipal phone lines in Roanoke are answered by a recorded message that says, "For English press 1. For all other languages, press 2."

Volatia software activates when the second option is selected. "We have an algorithm that's listening to them talk," Kasongo said.

It identifies the caller's language and summons an interpreter to the line. The interpreter stays on the line as the caller is put through to the city office originally dialed. A three-way conversation ensues.

*Because they pay taxes too, they're contributing to the economy, you gotta pay attention."*

Another immigrant from the exurbs of Northern Virginia voiced the challenge communities face as the immigrant community grows and diversifies.

*"When we got here, they were very attentive to immigrants because it was a few. Now there are more immigrants . . .this is a lot. From our perspective, since we are Spanish speakers, there is help, but I don't know with the other [languages]. . . from Syria, from Afghanistan, from Sudan, because they are from everywhere. I [don't] know that they have somebody to speak the language.*

Another key tool for government agencies without bilingual staff is use of an on-call translator or a language line.

*"I don't know how much they cost but little kiosks where you can access a video interpreter, there's almost like a telephone interpreter, and a lot of those are cost-effective because it's by the minute, because you're not paying somebody to drive across town and so there's no minimum [cost] for this service. Our city's actually doing that now - they're piloting that and I think it's going pretty well. I think probably some larger cities are doing that and I think that the next phase is some of them getting together and sharing that with smaller communities, like a consortium, if you will, of like smaller governments so that they can share the cost or apply for a grant or something that could help them with that, but just that basic language access is something that [should be looked at]."*

*- Service Provider, Roanoke Valley*

At the same time, a language line, especially one that is in great demand, can suffer from its own set of barriers. Waiting for a translator to be located can greatly increase the time immigrants need to invest just to get basic information. Some agencies who draw on the capacity to call persons back, rather than keeping them on hold, still fail to bridge the gap.

**"They're not going to give that [personal] information to [an interpreter] who called from who knows where"**

*"If my client calls and nobody answers or is told in English that someone's going to call them back, and then they get a phone call from an unknown number, they're not going to pick up."*

*- Service Provider, Northern Virginia*

If they do pick up, the service provider continued, the standard intake form for a translator asks a number of personal questions. "They're not going to give that information to somebody who called from who knows where," the service provider concluded.

A final, but often flawed resource, are translation engines such as Google Translate, which are often utilized for websites and translation of documents. Some interviewees saw this type of technology as a step in a positive direction.

*"One of the big things that we have pushed for here, locally, in the seven cities is something as simple as: 'Hey, if I want to be an entrepreneur and start a business, that I should be able to go on any city website . . . I should be able to click the button that allows me to pick whatever language is easy for me to consume that information.' So that's one of the things that has been big for us to say: 'Hey, just make the information accessible. The Small Business Administration does a good job at . . . they make it [available] in Spanish.'" - Service Provider, Hampton Roads*

Others highlight the drawbacks of depending on translation engines, which often produce unclear or incorrect translations.

*"Our son is actually five, and so he started kindergarten this year, and so one of the questions they asked us was, 'What language do we speak at home?' We said 'Spanish' and so, ever since then, we've been getting e-mails and everything we get in Spanish. I'm a native [speaker] but I cannot stand the e-mails that they're sending me in Spanish. It feels like they're just copying and pasting it into Google Translate and sending it. So, I choose not to read the Spanish ones - I choose to read the English. . . I don't know what the Spanish [only] families do . . . I'm thinking: "My God, they're not even putting in effort - there's no effort into communicating with the Spanish speakers."*

*- Service Provider/Immigrant, Northern Virginia*

In light of these perspectives, it is no surprise that numerous interviewees named improved language access in state and local government offices as a needed policy change. One interviewee listed "Evaluating language access at all state agencies and then ensuring quality access" as their top recommendation. "Oh, it would take a lot of effort," they continued, "but I think it would make the most difference. So that every State Agency, including law enforcement,

knows how to use an interpreter, knows how to access the language line, knows how to ask people if they need an interpreter, has a basic level of cultural competence. That's a huge low-hanging fruit."

In 2021 the Virginia Office of Diversity, Equity, and Inclusion (in collaboration with VCU) developed a comprehensive Language Access Plan for state agencies, which offers specific recommendations to address most of the above-mentioned problems.

**"I'm a native [speaker] but I cannot stand the e-mails that they're sending me in Spanish. It feels like they're just copying and pasting it into Google Translate and sending it. So, I choose not to read the Spanish ones - I choose to read the English. . . I don't know what the Spanish [only] families do . . ."**

## Barriers to Learning English

Alongside this need for translation and interpretation of critical information is a need for immigrants to increase their English proficiency, a process that takes place at some rate organically - the LEP rate is much lower among Virginia's naturalized immigrants (28%) than it is among noncitizens (52.8%). However, learning English presents its own set of barriers, including a lack of time to focus on learning English, a lack of comprehensive or intensive affordable English language programs, a lack of transportation to, or childcare during, those classes that are offered, and programs that may be ill-scheduled or a poor fit for the realities and needs of immigrants working long hours.

*"When you meet a person who's been here in the country for 10 years and doesn't speak English - you don't have an understanding of the struggle during their first five or 10 years. I have had nurses saying: "I can't believe they have been here for 10 years and they don't know English yet." Understanding the challenges, busy life, financial limitations . . . learning the language becomes an extra commitment, a luxury."*

*- Service Provider, Central Virginia*

*"Another barrier that I found is how to learn the new language. We can find free classes - it helps - but the free classes don't help too much. Then what we can do is continue with more advanced but at the moment of payment you don't have enough money to pay that. And one of the problems that I can remember is that people . . . if they provide a service, it is at night but there's nothing to do during the day."*

*- Immigrant, Northern Virginia*

**"So it's not as easy as it may sound, to say: 'Hey, you know, not only run your business all day and then, after business is closed, I need you to go in and take care of the books and all the back office stuff, but on top of that, I want you to go learn some English.'"**

*"And sometimes the language might be a barrier, right? And we can put out the simple solution of: 'Hey, you should go out and learn English.' But the challenge they're realizing - that our business owners are tied into the day-to-day nitty gritty of running the business. They are trying to keep the lights on; personally, you know, fulfilling orders, they are doing everything. So, it's not as easy as it may sound, to say: "Hey, you know, not only run your business all day and then, after business is closed, I need you to go in and take care of the books and all the back-office stuff, but on top of that, I want you to go learn some English."*

*- Service Provider, Hampton Roads*

*"But due to the grueling work schedules that they have in the number of jobs that they need to take on, they cannot afford to attend English lessons, not for a cost [reason] but because of time. Many people are working 12 to 14 hours a day, and then they have to come home to take care of their families, to do things at home,*

*feed their families, go to bed, and wake up the next day to do this all over again."*  
– Service Provider, Statewide Organization

In addition to the basic challenge of finding courses that meet at times when immigrants can attend, another issue raised was the potential for mismatch between the emphasis of an ESL class and the needs of the immigrant. Several service providers noted that many non-profit based classes emphasize basic conversation, but lack focus on the professional vocabulary that many immigrants need within the workplace. Missing in a different direction, one immigrant from central Virginia noted that her need to improve her spoken English was hard to match with the classes provided during the COVID pandemic when courses moved to Zoom and became less interactive.

*"I started my ESL classes and I was more comfortable and I was speaking very good because they're speaking classes, mostly. [Later] I searched all community college [offerings], they are so like, one or two classes more as writing and reading. And especially this last two years because of COVID, everything is go to the Zoom and there's no more conversation. I really, like, lost my confidence in conversation and the ESL program was really not helpful, the only thing it's helped me to is my, like, formal writing."*

**Some scholars argue that social and cultural capital are as important to career success as educational credentials.**

*- Refugee, Central Virginia*

These insights point to a need for strategies to bring English learning opportunities closer to those who need the services - either by co-locating classes with employment or other regular activities alongside child care. Virginia Initiative for Education and Work (VIEW)<sup>86</sup>, in which some categories of TANF-eligible refugees participate, offers intensive English language instruction and childcare. This combination enables English-language learners to focus on language acquisition while they are in the program, as one VIEW participant shared:

*"I'd like to continue my education. For now, I'm enrolled in English classes. I'd like to go to college and continue my education and they supported me through the social services to provide me with daycare for my children. They paid for it and that's through social services. Without daycare, I could not take English classes because my children are young."*

*- Refugee, West Central Virginia*

### **Lost in Cultural Translation**

Numerous interviews noted ways in which, even with language access, cultural understandings from either the home culture or the new host society can still create barriers to integration.

Almost all recent immigrants lack American *cultural capital*, which takes time to acquire and is critical to their full integration. Cultural capital is defined as "a set of cultural competencies needed for the effective understanding of and participation in those cultural activities which are recognized and rewarded by the education system, giving access to social and economic advancement and

so reproducing existing class divisions” and “possession of knowledge, tastes and dispositions by individuals... which are used to negotiate social position.”<sup>87</sup>

*“If you follow the rules, learn the language, stop at a stop sign. . . if you follow the rules, everybody’s happy. And then your habits that you used to have at home, leave them at home. I think that’s a problem that many people face. I mean, [if] you try to integrate yourself to the society, to the community, it is easy. I mean, you need to leave your flag and [have] the American flag. It’s the same that you need to learn, not only the language, the roles . . . what to say, what not to say. For us - small things, for example - [back home] we kiss a lot, if he is our brother, my coworker, we kiss. Here, it is a handshake. So, you have to change. If you are open to change, it’s easy - people make it easy for you.”*

*- Immigrant, Northern Virginia*

Cultural capital also includes “cultural resources that are, first, institutionalized and, second, broadly understood to be prestigious.”<sup>88</sup> Examples of cultural capital is a degree from a prestigious university, ability to bond with a co-worker based on a common alma mater and/or support of a common sports team, and ability to host a dinner party or a social event that the members of a dominant majority would consider, even if foreign, relatable and fun. Several highly-educated immigrants, with more than 10 years in the U.S. and proficient in English, shared that understanding the spoken language is only part of the process of fitting in:

**“At work, you know, the small talk is challenging for me, not only because of language barriers but also cultural differences. I’m not very familiar with pop culture, sports, that kind of thing.”**

*“[When] some people are chatting and I want to fit in always and cannot, I don’t know how to learn to interrupt them, and they have some joke, and I can’t understand why they are laughing.”*

*- Immigrant, Hampton Roads*

*“At work, you know, the small talk is challenging for me, not only because of language barriers but also cultural differences. I’m not very familiar with pop culture, sports, that kind of thing. So, it’s challenging for me to, you know, before and after the meetings, to have small talk with people. So, that makes it difficult to develop a more, like, personal relationship with coworkers.”*

*– Immigrant, Northern Virginia*

At a basic level, cultural capital is also manifested by immigrants in the job search process: starting from the ability to write a persuasive cover letter and a resume that catch the attention of the employer, to dressing to a job interview according to industry standards, and then to the ability to make a good impression during the interview process through professional demeanor, competence, and effective communication. Cultural capital in the labor market is aptly

summarized as “cultural equipment needed to push off with a career.”<sup>89</sup> Cultural capital is a key factor in social and economic mobility.<sup>90</sup>

Immigrants typically do not arrive with the cultural capital necessary to seamlessly integrate in the destination country, and it takes a lot of time and effort to acquire it. New arrivals need to be proactive in seeking to acquire the social and cultural capital and develop the local know-how.<sup>91</sup> Some scholars argue that social and cultural capital are as important to career success as educational credentials, and that lack of cultural capital is a significant obstacle to professional integration of immigrants.<sup>92</sup>

Often immigrant service providers noted a dual need - for immigrants to be oriented to cultural expectations in their new home and for those interacting with immigrants from a position of authority to have the cultural competency to recognize when cultural understandings may be creating barriers.

*“We should recognize the difficulty that people have with adaptation of the language and even the culture, or the understanding of the culture of timeliness on appointments. There should be a way that we incorporate these people with a language and new culture into [the] dominant culture but while respecting and enhancing the practice of their own culture at the same time.”*

*-Service Provider, Central Virginia*

*“It’s not that [parents] don’t want to be involved. It’s not that they don’t care. It’s that, again, they don’t know how to be involved, they don’t - they’ll take the teacher’s or the counselor’s word and they’ll say: ‘Well, they said my son needed this and I guess it’s true.’ Because they don’t know any better. That’s how it was back in our countries. You know, it’s that sort of sense of respect for those authorities that are over you.”*

*- Service Provider/Immigrant, Northern Virginia*

**“It’s not that [parents] don’t want to be involved. . .they’ll take the teacher’s or the counselor’s word and they’ll say: ‘Well, they said my son needed this and I guess it’s true... That’s how it was back in our countries.’ You know, it’s that sort of sense of respect for those authorities that are over you.”**

The misunderstandings created by a cultural barrier can have serious consequences. An immigrant and service provider from West Central Virginia related the following:

*“Recently I was working with this immigrant family from Afghanistan and a lawyer to file documents for their family to be reunited with a son - [during their journey] at the border between Iran and Turkey, the [14-year-old] son got lost. . . You just need to coach people through this process because it’s difficult to navigate any legal system of a different country. So [they] met with a lawyer [who explained the need to apply for reunification and then a year went by.] The lawyer was like ‘Okay, your grace period [to apply], that deadline has passed. Why are you not filing?’*

*[The mother said], but I already filed, and [the lawyer] was like “When?” and she was like ‘But I talked to you.’ So, basically, she thought just talking with a lawyer is the same as filing a document, right. So, this also needs some sort of education . . . whether it’s language or culture, because they just, they missed the deadline.”*

Because immigrants are diverse in their prior experiences, for policy makers and service providers, a key question is how to provide cultural orientation that is appropriate for the particular immigrants they are serving.

*“They wasted time teaching us some basic stuff we know about and that we were doing in our own country. Very, very basic things like, how do you brush your teeth, how you clean your body – hygiene, deodorant, you know, how to clean your toilet. I found that insulting. They need to cancel those basic classes and teach people how to drive, how to use the banking system.” - Refugee, West Central Virginia*

### **A Welcoming Society?: Immigrants and Experiences of Welcome or Exclusion**

In addition to language and cultural barriers, another potential barrier is a more general sense of whether immigrants are welcomed in the local community or U.S. society in general. As several study participants highlighted, this general sense of welcome or exclusion, sometimes felt in demands to speak English, a professed inability to understand proficient but accented English or stares in public spaces when immigrants speak their native language, can have profound effects.

**“A lot of research [shows] the impact of the Trump years on the undocumented population correlates to a lot of behaviors and anxieties that are really close to, if not, post-traumatic stress disorder.”**

*“I would say, first and foremost: it’s the receiving community and if the receiving community is welcoming or not, and then I do think everything else kind of flows out from that, because then you have things like language access and documentation barriers and system navigation barriers. So, if the community that’s receiving is welcoming, then you may see more accessible policies in place. If they’re not as welcoming, there’s not going to be resources prioritized or policies in place. So, I do see that as kind of the foundation and then, you know, layered on that are some of these other areas.” - Service Provider, Central Virginia*

While immigrants from a variety of national origins related experiences of exclusion, a persistent sense of barriers to belonging were felt especially deeply by participants from the African diaspora. One participant spoke about experiences of discrimination from some Whites, but also not feeling welcomed or that it was easy to relate to Black Americans.

*“One barrier that I can say that has persisted is the feeling of not belonging and . . . because nobody welcomes . . . I think it’s in American culture, they just simply don’t welcome strangers that well, especially people of color they do not. [When I first arrived] to the Dulles Airport, I didn’t know there were Black Americans here.*

*[White Americans that I'd met before immigrating] never told us there were Black people here. So, I went to [the immigration] line of a black woman and she was so mean to me. And she said 'yeah, you guys, you sold us [into slavery] and now you're coming to our country' . . . it was [often] easier for me to make friends with White people because I knew how to talk to them, more than these people whom I looked like but we had very different cultures. . . I met [white] friends and I'll take them to my country for mission trips and that was a blessing, but then I found out about the friendships - they're kind of elusive transient - they don't keep up. . . So that has frustrated me."*

*- Immigrant, Northern Virginia*

Participants from the African diaspora, who grew up speaking and attending schools in English in their home country, shared that they also still encountered barriers to being understood because of many listeners' lack of familiarity with different accents among English speakers. "The one that kills me," said one African immigrant, "is you speak better than [many others]" but still encounter barriers or are passed over for jobs. Another African immigrant agreed, saying:

*"You can't get far before they asked me 'Where are you from?' before they isolate you basically some more - 'Do I detect an accent? Where are you from?' Or sometimes they say 'I can't [understand] . . . can you repeat yourself?' They pick and choose and they do that, I think, to intimidate or throw you off, because, even if your mind was rolling with things that you needed to share, it stops right there."*

**"You can't get far before they asked me 'Where are you from?' before they isolate you basically some more - 'do I detect an accent? Where are you from?'"**

*- Immigrant, Northern Virginia*

Immigrants from non-Christian majority countries also shared stories of exclusion or disrespect for their religious identity. A refugee from a predominantly Buddhist country who considers himself unaffiliated religiously related the following:

*"My wife was really sick and they gave me a number to call, and I said, 'My wife probably might need surgery, right?' And then they asked me what my religion was, and I said I don't [have one.] The person told me they can't help me because I'm not a Christian. It's a religious organization that helped with medical and all that kind of stuff [but] since I am not a Christian, she said I'm not qualified for it. It was like flat out "No", it is not like "go get this note," it is that we can't help you, hang up the phone, "Bye."*

*- Refugee, Central Virginia*

One immigrant from a Muslim majority country noted a feeling that one's name was the greatest barrier to integration.

*"When your name is [distinctly Muslim] people already know that they are dealing with a Muslim, right, or a cultural Muslim or a person who was born in the Muslim*

country or something like that. That's not the kind of information that you want to volunteer up front, you know, because that might not even be correct, you know but that's just based on their stereotypes and assumptions that people already make. And you never know who you're dealing with, so you don't want to volunteer that kind of information about your ethnicity, about your religion. . . I mean, I lived in [Southwest Virginia] for two years, where my husband was going to college. And it was one of the most [traumatizing] periods of my life because people - the people that I was in contact with, and I do not mean to speak ill of those people that were really super kind people - but the majority of them were the older generation missionaries that actually like evangelized, who would just approach you and because of how you look and because of your name they know that you are not a Christian. And when they approached you, they're super kind, super nice and . . . eventually, they give you a pamphlet to convert you. [I was invited to] Bible study classes, [they said] they want to know how a person from a different background thinks, but that was not how . . . they were trying to convert me. I wouldn't say it was a pleasant experience - I mean I enjoyed reading the Bible, learning about [their perspective] . . . but I don't enjoy the experience of being converted against my will.”

**“I don't enjoy the experience of being converted against my will.”**

- Immigrant, West Central Virginia

Several Asian-American immigrants, or those related to them, also shared about experiences of discrimination or exclusion, especially since the onset of COVID.

“We never experienced it before. Personally, I haven't experienced anything [but from news reports] and from the social media, we heard a lot about, you know, shoving the old Asian peoples on the street and language assaulting or some physical assaulting as well. So that's like, more than doubled, for the past two years, or three years, ever since 2020. So that, I don't think that is a good indication of a tolerance, of the nature of this country. This country, it's all immigrants from different countries, from different background, so I think that's something we need to do more work for. The pandemic, because of the hatred against the Asians, we work together, we protest, at least locally here, we rallied with the help of the local police department against the hatred against the Asians. So, that attracted a lot of Asians and local residents here, including the local Congressman and a local mayor and the police department was really helpful . . . and we feel more comfortable.”

- Immigrant, Hampton Roads

“My parents were here and they couldn't go back to China because of COVID. In China we make tea from the flower that blooms in the spring. It's very popular in China. My parents saw that tree in a public place and wanted to pick some of the flowers to make tea. Then there was this guy. He was standing there. And he is like: 'What are you doing with that?' And we said we'll make tea with it. And then

*the guy says, with a look of disgust: 'Eww, Chinese eat everything.' That made me feel so sad in my heart."*

*- Immigrant, Shenandoah Valley*

*"I do not feel that I belong here. People are calling COVID a China virus. You cannot put a name of a country on a virus. Like I said, I feel some people are unfriendly here. I don't walk outside alone in the evening. I feel unsafe."*

*- Immigrant, Northern Virginia*

One Latino immigrant from the Shenandoah Valley related the following:

*"And [my husband] being Asian - you know we talked about that the model minority - because I pass as a white person, I don't get a lot of those microaggressions, you know - other people are not questioning where I'm coming from unless I talk - they're like, 'wait, where - you talk kind of funny - where are you from?' We talk [about] when COVID hit, he was the one experiencing the discrimination and the one like 'okay, now I feel like people are staring at me.' I'm, like, what are you talking about . . . so, he became like, all right, now we gotta be careful right, and now we were like, afraid, right, because our kids, they look like him, not like me. We don't want them to get hurt. We started thinking and being just more aware because, before, none of us experienced any discrimination, to be honest, and COVID has changed a lot."*

**"The police officers where I live in [Central Virginia] just stop you for no reason, because they probably [think] you don't have a license or something. It's just for the simple reason that they see you as a Hispanic."**

Some Latino immigrants also reported a sense of being targeted by law enforcement.

*"The police officers where I live in [Central Virginia] just stop you for no reason, because they probably [think] you don't have a license or something. It's just for the simple reason that they see you as a Hispanic male or female and they immediately just turn the lights on you and give you a ticket for no license and it feels frustrating to have to fear the police around instead of, you know, being protected by them."*

Other immigrants, including those with fluent English, U.S. citizenship and several decades of experience in the U.S., also shared about moments where they doubted whether others saw them as equals within society.

*"I'm fluent in the language and educated, you know [but] it's still like you feel like 'Oh my gosh, what did I do wrong?' I feel, many times inside, like, judgment. [Sometimes] I felt like 'Wait, did I fill out the form correctly?' And you just . . . in a way I felt, like, judged - just this feeling, right? Like, I learned, I'm here, I haven't*

*done anything wrong. Why am I feeling judged if I'm going by the book, doing what I'm supposed to do?"*

*- Immigrant, Shenandoah Valley*

While the examples above were related by persons who mention no issues with maintaining legal status, the broad feelings of exclusion related by these immigrants can intensify significantly for persons who are undocumented.

*"So, I would say a lot of my work now, especially during COVID, has been around social emotional factors. . . Now it's much more about how are they coping? There's something that - you can research this but - we're calling it the Trump effect and it's very predominant right now, and a lot of research [shows] the impact of the Trump years on the undocumented population correlates to a lot of behaviors and anxieties that are really close to, if not, post-traumatic stress disorder."*

*- Service Provider, Northern Virginia*

In addition to the general sense of welcome or exclusion, local government's policy choices can also contribute to the same sense of welcome or exclusion. Asking for a social security number or a form of ID can often have a chilling effect on immigrant participation in an activity such as a food bank distribution or the process of starting a business, as explained below.

*"What's more important is the municipality aspect of it and there are rules governing who can and can't start a business. So, for example, the city of Virginia Beach: a few are here undocumented, and you go to the city of Virginia Beach to start a business. It's going to be pretty difficult if you don't have the right type of paperwork, if you don't have any number and so on. And so comparatively, if you go to the city of Norfolk and you're here illegally and you go to Norfolk, you try to start business, it's much easier: they don't require you to have a Social Security number; they don't ask for a lot of paperwork. So, typically, we don't ask what a person's immigration status is. We focus on the business as an entity and as an individual and help them start the business and then from there, we guide them and we tell them, you know, here's the rules."*

*- Service Provider, Hampton Roads*

For policymakers, a key insight is that even simple choices like asking participants to fill out a form with basic information about their identity and home address can cause worry to significant portions of the immigrant population who may lack documentation or count someone lacking documentation as a family member.

## Immigrants Vulnerable to Crimes

Another theme highlighted by immigrant service providers and immigrants themselves is the vulnerability of immigrants to being the victims of crimes or exploitation. One refugee from Central Virginia interviewed noted how different cultural understandings about what might be normal in their home culture, but dangerous in the U.S., can make new immigrants vulnerable.

*“So, in our culture that's very helpful if you are driving and pick up people and give them a free ride. The people will be happy and they will pray for you, [they will say] ‘Thank you so much!’ [Soon after I arrived in the U.S.] I was driving at like 3am and there was a guy walking [and I] pick him up and give him a ride. When I rolled down my window, he just got in my car . . . and he just grabbed my phone - at that time I realized, ‘Oh, it does not look good.’ I said ‘Okay, I understand what you're doing - I don't have money. If you want my phone, that's my phone, you can take it, and this is my wallet, you can take my wallet but leave me alone.’ [And] he punched me in the face right here [points to cheek]. So that was not a good day for me.”*

Another immigrant from Spain who suffered domestic violence after moving to the U.S. related the vulnerability that a lack of immigration status can create.

*“I fell in love with a man and he managed everything because Narcissists - that's what they do - to make me believe that I should move. So, I did, and as soon as I put a foot in this country, [he] started abusing me. I found myself in a shelter with nobody - didn't know what to do - I was so scared to even call the cops - we were talking about that earlier because he was telling me ‘You call, because they gonna take you [away and deport you].’ In the immigration issues I didn't know what a green card was [but someone told me about] something called VAWA, that is for victims of domestic violence. You apply for [it] and that's why I got my [green] card and I'll be . . . I'll get my citizenship this year.”*

**“There was one gentleman, he just broke my heart: he owed \$10,000 in taxes and he earned \$40,000 in the entire year. And there was no doubt in my mind that he should have been an employee, but he was in the middle of his immigration case with his son, so he didn't want to cause any waves at his job.”**

*- Immigrant, West Central Virginia*

In addition, the lack of English proficiency and knowledge of how to navigate institutional systems in the U.S. make immigrants dependent on others to guide them on what is correct and some people take advantage of that vulnerability.

*“I tried to buy a car, and he was a fraud. Because I don't understand very well English, I signed the papers and the people in the dealership take advantage of that and they receive more money than what we agreed at the beginning. I don't*

*know how to deal with that kind of thing. I tried to find help [but didn't know who to turn to.]”*  
- Immigrant, Northern Virginia

*“I'm working currently with a group of Mexican workers who all came on H2-A visas. Then [they] were trafficked by the company once they got here to the United States. They are made to work more hours than what they were promised, they are made to work different jobs than what they are promised, they are provided insufficient housing and food, and then they are pressured to overstay their visas to continue.”*  
- Service Provider, Northern Virginia

*“And then the exploitation that's occurring . . . I saw many families . . . that had done their taxes at other places in prior years and then are just being, forgive my language, but just being screwed over. And sometimes it was by other paid tax preparers and sometimes it's their employer - saw many employees that were categorized as independent contractors when they should have been employees. So that means their tax liability is much higher, right? There was one gentleman, he just broke my heart: he owed \$10,000 in taxes and he earned \$40,000 in the entire year. And there was no doubt in my mind that he should have been an employee, but he was in the middle of his immigration case with his son, so he didn't want to cause any waves at his job.”*

- Service Provider, Central Virginia

Immigrant interviewees also shared that lack of knowledge about the American legal system and laws in general is a problem. They lamented the lack of awareness about legal rights and how to seek redress. One immigrant's story illustrates this problem. This immigrant homeowner had a roommate in her house. The U.S.-born roommate knowingly brought somebody infected with COVID to stay overnight. The interviewee shared:

**“I do not know the law, so I don't know how to use my rights and I also don't know who to ask.”**

*“I messaged her and I said: ‘You cannot bring a person who has COVID to stay overnight.’ They said they would leave but didn't. So, I got COVID too... It was a very bad experience... The problem is about rights, I don't know what rights I have or who to ask. In China, in Beijing, I know I can call the police, I can do that, but here I don't know.”*  
- Immigrant, West Central Virginia

Another immigrant shared,

*“I do not know the law, so I don't know how to use my rights and I also don't know who to ask. I don't know how people here deal with normal things like a ticket. For example, when I got a ticket, even though I thought the ticket was wrong, I was thinking ‘I have to pay the fee online and not go to court.’ But then some lawyer*

*said 'Oh, but if you go to court, you have the chance to dismiss the ticket.'*

*- Immigrant, Northern Virginia*

In light of these realities, building ways in which immigrants can access legal support as well as report instances of exploitation or fraud are important to reduce these barriers to integration.

## Section 6: Political and Civic Integration of Immigrants

One key measure of political integration is the rate of naturalization “because the greatest barriers to immigrants’ political participation, especially participation in elections, are gaining citizenship and registering to vote after becoming a citizen.”<sup>93</sup> The United States is generally notorious among immigrant-receiving nations for low naturalization rates. However, within the U.S. context, the picture of naturalization rates in Virginia is a relatively positive one. 2019 Census Bureau estimates (ACS 1-year) show that 53.2% of the foreign-born population are naturalized citizens, compared to 51.6% for the U.S. as a whole, and up from 44% in 2007 and only 40.8% in 2000. Virginia’s current naturalization rate also outpaces that of neighboring North Carolina (41.8%), Tennessee (42.7%) and Maryland (51.9%).

Alongside this relatively positive picture of naturalization is a distinctly different sense of integration for noncitizens. As noted above, economic outcomes for the noncitizen immigrant population are starkly lower than for naturalized immigrants. Some of this may be due to the general lack of systematic support for orienting and helping new immigrants navigate the ways and institutions of their new home.

Interviews with immigrants and service providers show several significant barriers to political and civic integration for immigrants:

- Uncertain legal status is a barrier to civic integration;
- A trust deficit that government officials must overcome to convey important information, especially in times of emergency or crisis;
- Immigrant groups not seeing their contributions to the American story recognized.

### Uncertain Legal Status as a Barrier to Civic Integration

Among the consistent barriers identified in interviews was the current legal framework for immigration in the United States, both due to the large number of undocumented immigrants that remain in limbo for years or decades, and the complexity of navigating the immigration process if one does have a path toward legal status.

*"I think immigration law would be the biggest [barrier] because people have [a] desire to live here and be a part of this country but they're not always welcomed by the United States immigration law. I think immigration law is a morass of different laws that are really hard to understand and tease apart and so people... it's also a venue where people get taken advantage of a lot. The best way I've ever heard anyone describe immigration laws - is like on one end of the pendulum there's orderly entrance of more people. On the other hand, you know, it's - keep everyone out, kick everyone out. And as the pendulum shifts back and forth, a layer of laws [gets] laid down that doesn't do anything else [to what came before]. So, if you cut through, it's like a hillside - [layer on layer.]"*

*- Service Provider, Shenandoah Valley*

*“For example, the President in power promised to us a kind of status or immigration reform for the 11 million [undocumented] immigrants which didn’t happen, and I think we’re all waiting for that. There’s also a lot of people who have temporary protection or young people with DACA who dream about being legal residents of this country and who pay into this country, who work into this country with their labor, paying taxes yearly. But, unfortunately, they’re just a shadow because they have that fear of being told at some point you’re done - at any moment go back home. There’s a fear, and as an American, I would like to see a law exist where we get that chance to be able to be legally in this country. And also you could say that sometimes it’s unfair - I don’t want to say it that way, but to me it feels unfair - that there are so many people who are in this country working 40 to 50 hour weeks, but who don’t have a status or paperwork and it seems unfair that people who are coming in from let’s say Central America are getting in and getting asylum when there are in this country so many people waiting for a work permit, waiting for something, to be able to get something to work legally in this country.”* - Immigrant, Northern Virginia

The impact of uncertain legal status is likely greatest for those who lack documentation.

*“Oh, so . . . I’m going to trust you here . . . I was an illegal immigrant for a while and by the time I was 17, I had to get a fake ID to work. You know, I had a single mom and, you know, we didn’t even have enough money to pay insurance, like, on the car. And, unfortunately, job opportunities are very, very hard. You’re always going to find almost the same types of jobs - you cannot really get anything better because you’re an illegal immigrant. So, I got a job working at a hotel cleaning rooms. I had to get an ITIN (Individual Taxpayer Identification) number to do my taxes. . . [Now] to be honest, my legal situation has changed and I’m so*

## Overcoming Barriers

Excerpted from [article](#) *“Gracias a Dios:’ how Latinos became the most-vaccinated group in Richmond and Henrico after 18 months of enduring loss”* by Sabrina Moreno, *Richmond Times Dispatch*, Nov. 6, 2021

The past year and a half made enduring loss a routine part of living. Yet moments after her first Moderna shot at Sacred Heart Center — the nonprofit that was a crutch for her and thousands of Richmond-area Latinos when the virus devastated their communities — she felt triumphant. Safe. Cared for.

Eight months ago, those emotions seemed out of reach. Statewide, Latinos were the most likely to be infected, hospitalized or die from COVID as vaccine eligibility based on age largely shut them out.

Now, Latinos are the most-vaccinated group in Richmond and Henrico County.

At 73% fully vaccinated, eligible Latinos across the city and county also exceed the state average — the result of grueling efforts to ensure accessibility by community organizations like Sacred Heart when the state had failed to.

They fought for weekend clinics, translated materials, made thousands of weekly calls, used food banks to connect with more

*Continued on the next page*

*grateful for that, because that by itself – oh, my God, the anxiety, like, I didn't even see how much it was affecting me - I was in a constant, like, flight or fight, kind of just trying to survive, you know. Just I didn't want to get deported and I was constantly like 'I don't want to do anything wrong', like, involved with the police, or, like, be in trouble. And I never knew how much anxiety that was giving me until I was able to apply to change my legal status. Literally, the day after I sent those papers to immigration, it's like, I calmed down, I was, like, 'Oh my God, I don't have to worry about it anymore.'*

*- Immigrant, Central Virginia*

But many other immigrants who have straightforward eligibility to adjust their status to legal permanent residency (e.g. spouses of U.S. citizens) face delays and periods of uncertainty as they navigate the backlogged immigration services system, making it difficult to make detailed or long-term plans related to careers or family. One immigrant from a predominantly Muslim country who is now a U.S. citizen shared the following:

*"The biggest worry that I had when I was applying for my Green Card was the travel ban, you know, the quote unquote Muslim ban. Because of that the process just lasted longer than expected and basically did put a hold on everything and so it's not because of something I had done . . . it was just because suddenly one day they decided that they did not want any new immigrants from that country and that gave me a hard time, you know. Because my husband is a refugee, he cannot go back to [their home country], and I was like, I cannot stay here, so what exactly are we doing. [Starting out in the process we thought] 'this should be good', [but] it was a confusing time.*

*– Immigrant, West Central Virginia*

The pervasive uncertainty around legal status can cause some immigrants to avoid even support services for which they are legally eligible.

## Overcoming Barriers (cont'd)

people and hosted COVID segments on Spanish radio.

Other incentives, made possible through donations, allowed each person who received a first or second dose at the center to get a \$50 Walmart gift card for groceries and enter into a \$200 raffle. A bag with food items, toilet paper, laundry detergent, shelf-stable milk and canned meats is compiled for each household. Free child care is provided on-site for parents, and family members are able to accompany individuals getting a shot for additional support. . . .

Sacred Heart's decades-long investment into building relationships among Latinos in the Richmond area and having a completely bilingual staff — many of whom are immigrants themselves — positioned it to know what would work and what wouldn't when vaccines arrived in December.

Sunday clinics scheduled around church times? Yes.

A vaccine event held during the week's work hours? No. . . .

When infection rates among Latinos in Richmond became so severe that the Centers for Disease Control and Prevention deployed its first all-Latino COVID response team to the city in May 2020, the federal agency noted the lack of sufficiently translated

*Continued on the next page*

*"Because of clients' undocumented status, they are unwilling to provide the information needed to become eligible for certain types of assistance, out of fear of you know, giving information to an agency that could lead to immigration learning that they're there or not wanting to disclose all members that are in a household because some members may have outstanding deportation orders."*

*- Service Provider, Northern Virginia*

According to several study respondents, the impact of legal uncertainty intensified during the Trump Administration due to attempts to tighten the public charge rule in immigration cases, which bars immigrants who receive some categories of public benefits from gaining certain types of immigration benefits. (For more detailed information about the public charge rule, see the Immigrant Legal Resource Network's information page on the topic - <https://www.ilrc.org/public-charge>.) Lacking detailed legal counsel, immigrants with a pending application for a green card, or who plan to apply for naturalization, sometimes refuse certain types or all assistance, even from non-profits, because they don't want to take a risk that it might impact their application. This period of limbo can last years.

*"Many clients have started their application, have submitted it, right, but now their immigration court hearing is not for four years. Their visa application is going to take five years to be processed and so they're normally doing the right thing, but they're just stuck in the ability to move forward and their ability to feel stabilized."*

*- Service provider, Northern Virginia*

*"I was working with a mom who is. . . she has legal status, she's a permanent resident, and she was homeless because of domestic violence. And I said, you know, gave her a list [of resources/agencies], and she says, 'Do you think I can go over there, because I'm a resident and I don't know if that's going to affect my*

## **Overcoming Barriers** (cont'd)

resources and bilingual staff made efforts ineffective — especially for a population with a lack of insurance and paid leave and little to no access to safety nets.

Among their recommendations: Lean into partnerships like Sacred Heart, and expand language access.

Eighteen months later, Richmond and Henrico's health districts have invested \$9,000 into translating materials and partnered with nonprofits to provide rent and utility relief. At the height of the COVID response, 40 of the 200 contractors the agency employed spoke Spanish. Of those, 16 were contact tracers or case investigators, according to officials.

Now, it's about 15 to 20 full-time Spanish-speaking employees across Richmond and Henrico's 180-person workforce.

Statewide, the Virginia Department of Health expanded its outreach team, using door-to-door campaigns and where infection rates were the highest to determine the locations of vaccine clinics — a model patterned after Fairfax County's "long tradition of community outreach," said Henry Murdaugh, acting director for the VDH's Office of Health Equity.

Fairfax County is one of the few localities to have as high a vaccination rate among Latinos as Richmond and Henrico.

*status?’ And I mean, she was sleeping in her car with her children. And she really needed the services and what she was thinking about? - would that impact her ability to stay if she went and asked for help! I was surprised. I didn’t expect to hear that. She, unlike other families, has the ability to go ask for unemployment [benefits], the ability to ask for food stamps and all those other services and she was hesitating because she thought that if she did, her status would be taken away. You know, I’ve heard a lot of times [other incorrect understandings] - ‘I don’t want to ask for that, because,’ they say, ‘my son is going to have to pay it back when he’s older.’ Or I’ve heard in the past, also ‘Now I don’t want to ask for food stamps because they send my son . . . make him go into the military.’ So, I’ve heard that before, but this was the first time that I heard that someone wasn’t looking for services because they thought their status would be taken away.*

*- Service provider, Central Virginia*

*“My friend told me ‘Try food stamps, try something called SSI because your father is disabled, so he cannot work, so the social service can help him with the pension or with something like that.’ So, I was helping my father apply for food stamps, but another friend said “No-no, you shouldn’t apply for them as you still have this Trump law.”*

*- Immigrant, West Central Virginia*

Though rooted in questions about legal status, uncertainty and fear mean that many immigrants avoid social and community events, which leaves their voices unheard and cuts them off from valuable social networks outside the immigrant community that can often help in their integration journey.

**“So, I was helping my father apply for food stamps, but another friend said “No-no, you shouldn’t apply for them as you still have this Trump law.”**

*“But I think the communication, [so] they have the information available. Nothing specific but, for example, there are immigrants that they’re arriving now to the city and they don’t know anything. They are afraid to go downtown. They don’t want contact with the police. So, the only place where they go is the Latino market where they buy produce that they have back home. If there will be any way to get information there where they can see it, that will be better.”*

*- Immigrant, Northern Virginia*

*“City Council - I don’t think anybody, any of our people would even approach the Council. Probably be afraid. Fortunately, we stopped asking who isn’t documented and who’s not. [But] just association with any kind of government organization is . . . just scares them. They’d rather their names not be out there, they don’t want to expose themselves. So, the fear again, being undocumented or not.”*

*- Service provider and immigrant, Northern Virginia*

Immigrants shared the experiences trying to find legal representation in their immigration cases.

*"I've seen the worst time ever in my life dealing with USCIS. It was really hard dealing with lawyers, it was suffering. We want to know the right way, or the right path, so we called a lawyer and then she said: 'OK, for your parents (I was filing for my parents first), for each one of them we'll take \$6,000.' This is too much - \$12,000. We just got here and we don't have any resources, even from Egypt, because we are good there, but everything was cut from us, because of our state. What happened is that our VISA cards and link to the banks expired, so you can't withdraw anything. So, we are just living with the money that we came with... So, we found another lawyer on the Internet. Explained our case. She said 'Okay, send me the money, send me the papers to this address.' And she was a scammer. Thank God, God saved us. I suspected something, from the tone of her voice and language, the way she talks. I didn't feel right, so I put the address in Google Maps, and then I found the address in Washington, this is something - it's not an office, it's a piece of land. Then, I did a 360-degree view, and there is nothing there. And can you believe it? We were going to rent a car and drive three and a half hours to Washington. Then we'd find nothing and then she would take the money and the papers, and the originals, and we would think that she applied for us. So, it was going to be a real mess, I hope it doesn't happen to anyone. So, this is one of the lawyers that I dealt with."*

**"I didn't feel right, so I put the address in Google Maps, and then I found the address in Washington, this is something - it's not an office, it's a piece of land. Then, I did a 360-degree view, and there is nothing there. And can you believe it, we were going to rent a car and drive three and a half hours to Washington."**

*- Immigrant, West Central Virginia*

Service providers who help refugees also noted the looming legal issue for Afghan parolees who are unsure what next steps to take as they complete the first year of their two-year parole. A refugee and service provider in Central Virginia shared:

*"Nowadays it's really another struggling and [we get] many questions [about] that document problem. Most people coming from the last evacuation of Afghanistan, they all have their parole and it's for two years and almost they've been here eight months or nine months. They are asking: 'How we are applying for U.S. Green Card, what should we do if we are talking with a lawyer?' It's a lot of money and where families are big and we are out of answers because it's not our responsibility and we don't have any information about that. Mostly we are giving them the direction to go to their case worker in the resettlement agency. Mostly the [name of organization] is helping because they have a department for that, but the [name of organization], there are a lot of complaints about all the service they're delivering - most of the clients, they are not happy. I hear that a lot, where their parole is almost over, and they have to - they don't know how to apply for asylum. And their benefits are getting canceled. They have to work, they have to start paying rent on their own and stuff and then they don't have jobs, yet. So, yeah, I hear that a lot. I*

*don't think when they go to the offices of those organizations that they, I think they're just, like, telling them that their caseload is too much right now, because, with all the Ukrainians coming in, the new refugees coming and the waitlist is pretty long right now.”* - Immigrant and Service Provider, Central Virginia

In terms of civic integration, one area of learning for immigrants is how national, state and local levels of government in the U.S. federal system have different roles and different requirements. Responsibilities toward the federal government are sometimes most visible. When asked about which government services they had accessed, one immigrant living in Northern Virginia responded:

*“The IRS. It was an office - they will do your taxes for free. You just got to bring all your pay stubs - I mean the regular taxes, not the business tax - for us the regular 1040 form, they will fill it out for you. But not the state [tax return], you have to do it. That's something that the state may be able to do, and that will be nice for . . . because the first year, I remember, we [file] the Federal taxes [but] we didn't know that we had to [file state taxes]. So the first year, we had to pay a penalty because we miss the deadline.”*

### **Overcoming a Trust Deficit**

A variety of respondents to the study mentioned an overriding lack of trust in government as a barrier to services. Some of this distrust may be rooted in experiences of autocratic government in immigrants' home country. Another part is due to the many immigrants that fear contact with the government because of uncertain legal status, either their own or of someone they love. This lack of trust has profound implications for overcoming other barriers to integration, such as accurate information about services or public emergencies.

*“You know, around here, the vaccination resistance - and there's all this garbage going around about ‘they're injecting the chip in you so they can follow you’ - so we see a lot of that kind of [mis]information - outweighs anything that comes from any source related to the government and that goes back to the huge barrier of lack of trust. . . Probably the biggest barrier to overcome [for improved services] is that lack of trust.”* - Service Provider, Roanoke Valley

*“When they go to some place to get a vaccine, for example, and maybe they don't need to provide details about something, but some people ask for details, and this is something that they face and they go and spread the word - ‘I went and tried to get the vaccine, but I was asked for this and that’ and again they lost the trust in the system. And it's not a problem of the system actions - it's not necessarily the local health department that is asking for that, but you know, one of the vaccine centers or sites.”* - Service Provider, Shenandoah Valley

This means efforts to convey critical information often need to move outside of government press releases and leverage the power of one-to-one interactions and word of mouth referrals (often facilitated by social media or applications like WhatsApp) on which many immigrants depend.

*“And also you have immigrants that not only don't know the language [here], they don't even know to write or read the Spanish neither. So if they see a [paper] saying, they don't read the paper because . . . You should . . . they just listening. I mean, because we know . . . there was this girl, 18 years old, she had two kids, four years old, maybe and a three month old baby. Well, and she didn't write or read the Spanish. I don't know . . . just . . . telling her is the only way to communicate.”*

*- Immigrant, Northern Virginia*

*“So, getting to your original question - I'm a huge proponent of outreach. Policy also always needs funding for outreach support and that's something that you know, certainly on the public health side, there's been a huge push towards. Policy changes [are] absolutely really important, but I still think when you're working with populations that maybe don't speak the language or from a different*

*culture, the actual talking to people face-to-face is huge and that's something I saw with the vaccine rollout. We got funding that came down to hire community health workers - people in Spanish, they'd be promotores for this alone, people who can go out and talk to people. So I think one thing I would say on that policy side is you still need people, navigators, outreach workers, whatever, who can actually go out and talk to people and help people work through the process, because the policy is never as easy as it seems like it is on paper. And so, whether that's the DMV or what not, there has to be local organizations that are helping people because, unfortunately I don't think we're ever going to solve government agencies being bureaucratic with lots of red tape. That is frustrating to people with PhDs in systems operations and it's I think overwhelming to people who don't know how to navigate that.”*

*- Service Provider, Charlottesville Metro Area*

*“I don't know if there needs to be public service ads . . .if it's like it is here, everyone has their Spanish TV stations, they watch Telemundo and so on. And so, if there could be a way that a Spanish speaker - it couldn't come from me or from you - but come from a native Spanish speaker who shares little sound bites of honest information about anything, [someone] that is very warm, inviting, a soundbite that says ‘Know your rights: Do you know that when you go to the doctor, you have the right to request a highly-qualified interpreter? Do you know that when you're working at your job, whether you have a legal presence or not, you still have human rights because you are a human being? Do you realize that if you go to the health department to do anything, you will be charged on a sliding scale. So, do you know what a sliding scale is? It means that you will bring in your income stub’ . . . you know, but in simple, step-by-step language that people can become educated.”*

*- Service Provider, Roanoke Valley*

**“So I think one thing I would say on that policy side is you still need people, navigators, outreach workers, whatever, who can actually go out and talk to people and help people work through the process, because the policy is never as easy as it seems like it is on paper.”**

## Missing the Contributions of Immigrants in the American Story

One theme that emerged from interviews with immigrants is the way that some immigrant contributions to the American story are often missing from the history lessons learned within K-12 education settings. A Chinese-American immigrant highlighted the Chinese Exclusion Act of 1883 as a shameful part of U.S. history and said:

*“We have to learn from history . . . We should have Asian Americans’ history included in our textbook. I’m trying to work with some people to promote this idea to make it our law for Virginia to include Asian history in their K to 12 history textbook. Our contribution is a very important - partly for the transcontinental railroad that’s essentially important for development of this country - it is our country right? Our history is part of the country’s history . . . [and] should not be excluded from the educational system.”*

**“Our history is part of the country’s history . . . [and] should not be excluded from the educational system.”**

Participants noted that other states are already taking these steps. A recent news story specified that Illinois and New Jersey have existing laws that require lessons on Asian Americans and Pacific Islanders in public schools, while Connecticut and New York are considering similar legislation.<sup>94</sup>

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## Section 7: Health Status and Access to Care

Access to health care services in the United States depends to a great extent on the nature and availability of insurance coverage. Those who lack insurance either must pay for health care services on their own or look to the existing healthcare safety net consisting of hospital emergency rooms, community health centers, and free clinics. If someone has an emergency medical condition though, the hospital must provide care that stabilizes the person regardless of the patient's insurance status (the Emergency Treatment and Labor Act 1986). One interviewee expressed how grateful he was for this provision of the U.S. law.

*“My father had a heart attack on the bus and the driver was very smart. He parked where the EMS ambulance was on the corner, our good luck there. EMS came into the bus with equipment and everything, and then they told him that you have a heart attack and you have to ride with us to the hospital. We were so worried, we were so afraid, we didn't know what to do, we know that something like this could cost us everything we have and it won't be enough. But we went there, they (hospital staff) were the most caring and sympathetic people, the kindest people ever. They said he should have an operation right away. We said we don't know how much this will cost, we don't know if we can pay you. But the doctor, the nurse, they said ‘We don't care about that, we have to save human life.’ Here they value human life, there is humanity. Not like in our country. If I was in our country, I would have lost my father, because I can't get him as quickly with an ambulance to the hospital. And they want right away \$10,000 or something like that. Unless you pay, the doctors will not save him, they will not operate unless they've already been paid... We are now paying back the hospital on a sliding scale, a little bit each month.”*

**“Here they value human life, there is humanity.”**

*- Immigrant, West Central Virginia*

While accessing non-emergency health care though, immigrants in Virginia face several barriers in accessing healthcare, including immigration status, lack of health insurance, lack of information, cultural/linguistic barriers, fear of detection and deportation, and fear of bureaucratic hurdles and of high fees charged by healthcare providers.<sup>95</sup>

### Immigration Status

Lack of legal or even permanent immigration status affects one's social determinants of health - “conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes.”<sup>96</sup> Those lacking permanent status are less likely to have economic stability, access to quality healthcare, and safe housing that meets occupancy standards. As a result, the COVID-19 pandemic has had more adverse effects on immigrants than on the native-born. In Virginia, the Latinx community was hit by the pandemic particularly hard. As one service provider lamented:

*“6% of our [population] are Latinos in the central Virginia but they represent 30% of the cases... An emotional impact that they had is: ‘We’re not only in bad shape. Now we are in worse shape [because] they see us as the people that carry the disease.’ And that’s why many Hispanics decided: ‘Perhaps I don’t want to get tested. I’m just gonna weather the storm at home.’”*

An immigrant from Central Virginia noted the role of misinformation in suppressing Latinx participation in vaccine campaigns during the pandemic.

*“I feel like that was a very complicated time. I mentioned that I worked with this [health] program. I remember, it was kind of challenging at the time, because there was so much misinformation out there, especially in the Hispanic community, like people just don’t want to get vaccinated. Like they said there were [electronic] chips in it, they were going to be tracked. With the illiteracy and misinformation out there, it was a little bit chaotic.”*

An immigrant who, in retirement, works as an interpreter with the local health department in Northern Virginia, highlighted how worries about immigration status and the spread of misinformation around the Trump era public charge rule within the immigrant community affects health outcomes.

*“When the community are saying, for example, don’t take Medicaid, don’t use any of the medical mental health services, because when your child turns 18 they’re gonna make him go fight for the government or they’re going to make him pay for all the services . . . so when [misinformed people in] the community start spreading things like that, the community stops using the services. They don’t care if the children are not drinking or eating. They stop using the services because they really believe that that’s what’s going to happen and they don’t want their children to have, you know, a big debt when they turn 18. So those are the issues. Also, there’s the legal issues. If you, for example, are applying for a visa for adjustment of status because you have refugee status or you are applying for political asylum [it] could take five to 10 years for you to wait and the lawyer that you hire tells you ‘Don’t use any of the services for the government, because otherwise they’re not going to give you a visa.’ So, then, the client stops using the services and then you come to their homes - I also interpret sometimes when I go to the provider and real bad cases we go to their house - and they don’t have anything to eat. There’s no formula, the mom is not eating because she doesn’t have any money to eat, so therefore she’s not producing breast milk. So those are*

**“When the community are saying, for example, don’t take Medicaid . . . because when your child turns 18 they’re gonna make him go fight for the government or they’re going to make him pay for all the services . . . when [misinformed people in] the community start spreading things like that, the community stops using the services.”**

*the issues that we have in the community, right now. If we can reach them and we can explain to them, yes, the resources, use them, because otherwise you're not going to be able to eat, if you don't eat your child can't breastfeed, if your child doesn't breastfeed your child can't grow and therefore your child is not going to develop normally and all these other issues that come with it."*

### **Lack of Health Insurance**

Employment circumstances of legal and undocumented immigrants vary significantly. Highly-skilled immigrants typically hold jobs that provide (or enable them to purchase) health insurance for themselves and their families. Lesser-skilled and undocumented immigrants often work in lower-paying or hourly jobs that do not provide health insurance. Navigating the insurance marketplace is challenging for immigrants (and many native-born Americans), as recounted by one respondent:

*"You kind of need to figure out what's "in network" and "out of network" and all the acronyms – lots of acronyms everywhere. So that was a confusing thing for me. But then, there are the differences here, so you will have bronze, gold and silver plans with different pricing. But just trying to do the comparison, trying to figure out something that is affordable, but also comprehensive, that was really difficult."*

*- Immigrant, West Central Virginia.*

Regardless of employment circumstances, immigrants tend to be insured at much lower rates than the native-born Americans, whose rate of healthcare coverage is estimated at 87.8 percent in one study<sup>97</sup> and at 85 percent in another.<sup>98</sup> In Virginia, 2019 data shows that 94% of U.S.-born Virginians have health insurance, compared to 79.1% of immigrant Virginians. However, coverage rates among noncitizen immigrants are much lower – 64.6% have coverage, compared to 92% of naturalized immigrants.<sup>99</sup> Migration Policy Institute estimates that 58% of undocumented immigrants in Virginia are uninsured.<sup>100</sup> This pattern may be due to the fact that more noncitizen immigrants are likely to have immigrated more recently than naturalized immigrants. A nationally-representative survey<sup>101</sup> showed that only one-third of recent **legal immigrants** had health insurance. Uninsured undocumented immigrants are thus essentially confined "to the bottom of the health hierarchy."<sup>102</sup> This point was illustrated by an immigrant interviewed from Central Virginia.

*"Immigrants [who] come as refugees, that is easier because they [have] documents. So being refugee you have eight months on Medicaid, you have services, you have actually a caseworker that is going to tell you what you have to do and teach and everything. But a normal immigrant like me, when I came, I was undocumented for a year and a half until our political asylum was completed, so you were on your own nowhere and [it's] still the same."*

Lacking health insurance, when they do seek medical care, immigrants rely on safety net providers. In the U.S. health care system, a "safety net" is a locally organized system of health care delivery intended to fill gaps in access to health care services for the uninsured, low-income,

and other vulnerable populations in medically underserved communities. Safety net providers are largely comprised of free clinics, community health centers, including federally qualified health centers (“FQHC”), hospitals, and local health departments. These providers depend on funding from a variety of sources, including federal, state, and local government; private corporations; foundations; local health systems; civic and social groups; faith-based communities, and others.

These safety net providers, especially those that are free or charge sliding scale fees and address language barriers, make a qualitative and positive difference in the lives and integration journey of immigrants, for those who can access them. One immigrant from Northern Virginia recounted:

*"We didn't have any problems [accessing healthcare]. We have [name of university related hospital]. I mean [the provider] is a nonprofit organization, so they - they won't even take it to court if we owe the money. For example, my other son, we've still been paying for my other son[’s birth] - he's 20. Okay, for the treatment, we pay \$25 a month. And they told us 'How much can you pay? If you're paying, we don't bother you.' Okay, [\$25], that's fine. And they don't bother you. If you come in, they don't deny your treatment. And you can go to the doctor, here we have the same doctor that we found 20 years [ago]. Even they have the - always since I remember - they had the phone to translate if you need help and also they have translators in the building. Okay. So, it wasn't an issue."*

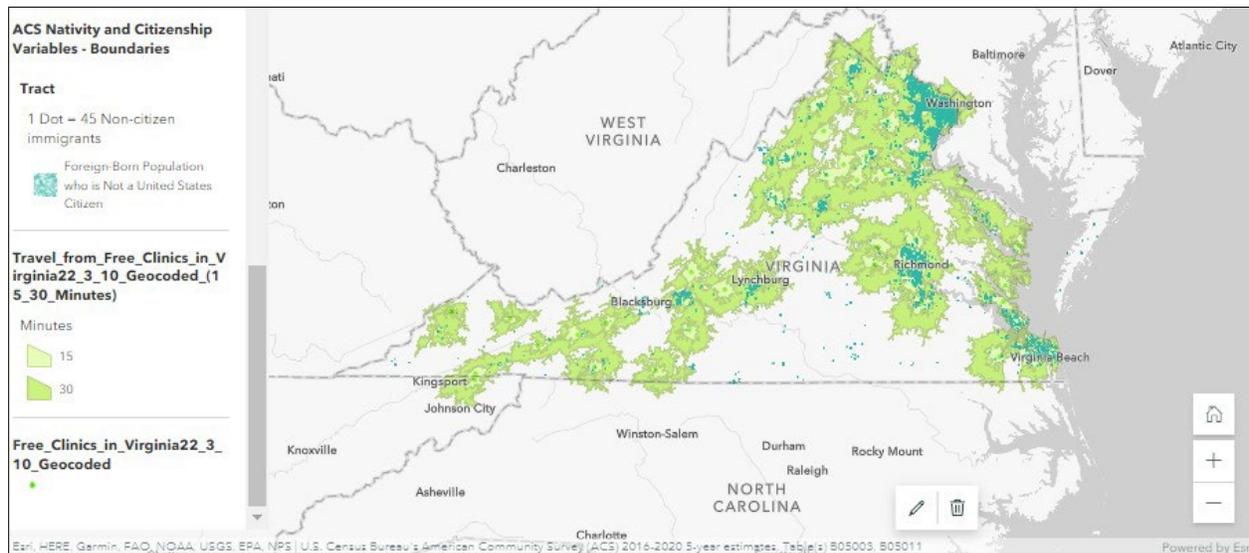
**“For example, my other son, we’ve still been paying for my other son[’s birth] - he’s 20. Okay, for the treatment, we pay \$25 a month. And they told us ‘How much can you pay? If you’re paying, we don’t bother you.’”**

However, access to safety net providers varies significantly across Virginia. Northern Virginia and the Richmond metropolitan area have a fairly robust network of free clinics, but access in other parts of the commonwealth is limited. As one service provider recounted:

*"We try to mitigate some of these health issues, but again there's not an across-the-board solution. There is a free clinic in Newport News that the people go to. But that doesn't exist anywhere else, and then you have to be a resident in Newport News to go to it. So how are we helping health wise? We're not."*

The map in Figure 12 provides a visual basis for understanding the potential reach of free clinics (based on a list compiled by the Virginia Association of Free and Charitable Clinics).<sup>103</sup> As with prior analysis of immigrant service providers, the map shows a 15- and 30-minute one-way coverage area by car at 5pm on a Monday (given average traffic patterns). Those areas outside the darker green regions are outside this one-hour round-trip coverage area. The blue green dots each represent 45 noncitizen foreign-born residents. Many of the largest immigrant population centers have access to a free clinic but key areas such as the Eastern Shore and parts of Southside Virginia are notably lacking in coverage.

**Figure 12: Coverage Area of Free and Charitable Clinics in Virginia**



Even when there is geographic access to a free clinic, other barriers such as language access and limited capacity to see patients may still impede access to health care. One immigrant interviewed from Central Virginia highlighted how access is still sometimes limited.

*For undocumented immigrants, [access to healthcare] is not happy, there is not places to get [healthcare] unless you go to the health department of the locality or [free clinic] - it's kind of impossible to get into all those free clinics because [of demand].*

### **Lack of Information or Paternalism from Medical Personnel**

Previous research demonstrates that the migrant population in general is unaware of free or low-cost health care providers.<sup>104</sup> Free clinics and FQHCs typically do not advertise, relying on word of mouth. In contrast, emergency rooms are highly visible, advertising their services on highway billboards and elsewhere. Consequently, some uninsured immigrants turn to emergency rooms even in non-emergencies, resulting in significant costs that they are often unable to pay. At the other end of the spectrum are immigrants who, frightened by such costs, avoid emergency rooms even in life-threatening health situations. An immigrant service provider shared a recent tragic story of a young woman from South Korea who was a student at a local Virginia college. Experiencing severe abdominal pain, she took over-the-counter pain relief medicine but did not seek medical assistance. She did not have insurance and was reluctant to go to the hospital due to high cost. This young woman died of a ruptured appendix.

Though less serious, others shared examples of how a lack of good communication regarding services and programs can shape health outcomes, even without a language barrier. One immigrant from the Shenandoah Valley with fluent English shared the following:

*“When I was pregnant, I remember I didn't know, like, I could get like a free breast pump through my insurance, right? It wasn't until a friend told me: ‘Do you know*

*you can do that?' And, again, I don't know if this just happens to immigrants or everyone, right? But those were things that they're not communicated to people, and even how to go about it. So, again, going back - language hasn't been an issue, but just like having the information, right? Like, you don't know what you're missing out on because you don't know it even exists. So, why are we not making this more public to everyone - not just like immigrants . . . anyone, honestly."*

In other instances, immigrants may be treated with disrespect or paternalism by medical providers based on biased assumptions about immigrants' level of education or capacity.

*"My sister, who worked as a pharmacist for 20 something years, had a brain injury. These people [at the county hospital] had the guts to tell us, whether we like it or not, they don't need our permission to take out the life support . . . that's when I told him . . . this is America. I'm not flipping burgers in America, that's what I told him. I said, look, this sister is a lawyer, this sister is an engineer, this one is a school nurse - our collective education is more than, you know, so we know - unless we give you permission [you can't stop life support]. I say no, it doesn't work that way, this is America. So that . . . these are the small inherent things that happen."*

*Immigrant, Northern Virginia*

**"These people [at the county hospital] had the guts to tell us, whether we like it or not, they don't need our permission to take out the life support . . . that's when I told him . . . this is America."**

### **Linguistic and Cultural Barriers**

Lack of proficiency in English and cultural differences present significant obstacles for immigrants' access to healthcare. Many hospitals and clinics do not have bilingual staff and/or interpreters and some do not have translation services even though "by law, hospitals and community clinics must provide medical translation."<sup>105</sup> As one immigrant from the Richmond Metro area noted, a lack of cultural awareness by hospital staff can increase reluctance by immigrants to seek medical care.

*"I feel like, for the older generation within the immigrant communities, it's harder for them to go to the hospitals and stuff to seek help with anything that has to do with health because sometimes the medical personnel don't understand where they're coming from. Like, they just want to treat them the way that they're used to, but, like, they don't really know what their culture is. They don't know what they might be comfortable with. I used to work in the hospital and I've seen that happening a lot. Because, like, they go in there and try to make them undress [to] examine them and all that but they might not be comfortable with that."*

Linguistic problems in medical settings can result in serious and, sometimes fatal, mistakes. A recent report states,

*“We learned of terrible cases, such as that of an adolescent girl suffering from stomach pains who was taken to the emergency room where neither she nor her parents could properly explain her symptoms in English. The attending doctor gave her some pills and sent her home where she died of appendicitis.”<sup>106</sup>*

## Trauma and Mental Health

Several immigrants interviewed as part of this research stressed the need to remember that the transition to a new country and culture can be a difficult and sometimes lonely process that creates strains on mental health, even in the best scenarios.

*“To leave your country, for any reason - because you want a better future, because you met your husband, your partner here, because you come to United States for the American dream - no matter what is the reason, there is a trauma [involved]. They're changing [their lives] fully 360 [degrees]. I'm talking about mental health, that can be more than important than [physical] health, and there is no way that you can receive mental health services here.”* - Immigrant, Central Virginia

In addition to the mental health toll that transitioning to a new culture can create, other immigrants interviewed noted the mental strain that comes from being an immigrant and being seen and treated as different.

*“You know, as a teenager it created a lot of insecurity. I remember, there was a point in high school where I was just not comfortable, almost like I was being ashamed that I was an immigrant because everyone is kind of, like, trying to remind you that you don't really fit in with, like, how things are here. I always felt like I wasn't*

*being accepted for who I was because I wasn't Americanized, because I was an immigrant. . . To be honest with you, I think that's where the whole healthcare thing comes in. I didn't have the opportunity to, you know, go to a psychologist and be like ‘Oh, this is what's happening, something's wrong with me’ and I didn't even know if there's any groups that would help me out. And it was until I was, like, 19 when I finally went to a psychologist - once I was an adult and I was working - unfortunately I burnt out at 19 because the life of an immigrant is . . . it's really hard and I didn't know how hard it could be, yeah. So, it wasn't until I was 19 that I had a chance to talk to a professional and, you know, she brought it into perspective,*

**“So, it wasn't until I was 19 that I had a chance to talk to a professional and, you know, she brought it into perspective, that my life hadn't been normal.”**

*that my life hadn't been normal. So, I found help there and that helped me accept what had happened.*  
- Immigrant, Central Virginia

Finally, many immigrants have experienced severe trauma prior to migration, during their journey, and, sometimes, once they are already in the United States. One service provider stated:

*“Children, women, girls in particular have experienced sometimes multiple sexual abuses, both within the family and in the community. The journey to the United States is very dangerous, and many of my clients report sexual assault by the so-called coyotes -- the guides -- that are supposed to bring them. [This is common] to the point that it is a regular practice for families to have their daughters go on birth control prior to making the journey because it's just expected that they will be raped somewhere along the way.”*

*“The other thing that I think that we should be thinking about it is getting mental health for, not just the refugees - they qualify - not just the people that come with political asylum, like I did, but for all the immigrants. Have anybody thought about what you have to get through to get the journey to cross the border? Have anybody thought about [how] immigrants are coming now are going to marry our citizens? And if we don't start giving them mental health resources right now do you know that problem that we're having on our hands? I think that the mental health issues for children it's going to be very bad if we don't start fixing them right now.*

- Immigrant and Service Provider, Northern Virginia

For refugees and asylum seekers fleeing violence and civil war, experience of trauma is particularly widespread. In addition, asylum seekers have to recount and, thus, relive what happened to them during the immigration process. This often re-traumatizes the victim, "because a client is qualifying for legal protection based off of the worst thing or things that have happened to her," explained a legal services provider. One refugee from Central Virginia recounted how he'd heard that refugees have one of the highest suicide rates in the U.S. and felt fortunate that he only knew of two suicides within his community.

**“I was like, ‘Wow!’ people really went through a tough time, you know.”**

*“I was like, “wow!” people really went through a tough time, you know. I was young, maybe I did not really see through my lens a lot, because I used to go to school and that would distract me but . . . I think one of the most important things [they] never really worked on us [with] was maybe, like, mental health because I feel like the government should have known that something should be there [for] mental health, because when you bring in certain group of people to completely different land where nothing matched, right - there should have been a support group.”*

Seeking mental health services is stigmatized in many immigrant communities and is not a cultural norm. Those who overcome the cultural barriers to seeking help are often unable to find quality

care. Mental health services with culturally competent staff and with interpretation are hard to find and are not available at all in rural areas of the commonwealth, as described by one study immigrant service provider:

*"So, in northern Virginia we've always addressed these needs and have been able to do so through referrals, through memorandum of understanding with other agencies. We really recognize that some of those partnerships are not just going to be available, because in more rural area services do not exist or if they exist there's very limited or have no interpretation capacity."*

Many other interviewees agreed with this assessment. The following is one example:

*"I had a client here in Fauquier County who was receiving mental health therapy through telehealth through the local free clinic, in theory. But she would get the email on how to log on to the telehealth, it was completely in English, she would never be able to figure out. And if she tried to call the clinic, the clinic didn't have immediately Spanish speakers to be able to walk her through, and so it never happened. It got rescheduled three or four times and she finally was just like 'I can't do this'."*

An immigrant from Northern Virginia also highlighted a shortfall of mental health support for young people and a lack of capacity in schools to provide that support.

*"Something I've experienced as a mother and something I'd like to see a change in schools, would be for better access to mental health, because there are many, many young people nowadays struggling with that. And I think that happened after our kids are stuck at home so long from the pandemic. . . for example, in my case, my 14-year-old daughter, I was able to see a stark change from before to after the pandemic. I've thought a lot for my daughter, to be able to get help at school in that regard, but unfortunately, they've said that, since there are so many children, they can't have a psychologist for each child. They're just struggling and as a mother that's something very stressful but that kind of help is not available for my child."*

**"There are so many children, they can't have a psychologist for each child. They're just struggling and as a mother that's something very stressful but that kind of help is not available for my child."**

Some states, like Oklahoma, have decided to invest additional resources available from the American Rescue Plan funding into expanded mental health capacity. A recent report noted Oklahoma would put \$35 million into a grant program to facilitate "hiring 300 counselors and other mental health professionals, with 181 [school] districts matching it with another \$35 million."<sup>107</sup>

## Fear of Bureaucratic Paperwork and Detection of Undocumented Status

Some undocumented migrants are reluctant to turn to clinics and hospitals for needed care because of fear that their immigration status will be detected and they will be deported.

*“When they go to some place to get a vaccine, for example, and maybe they don't need to provide details about something, but some people ask for details, and this is something that they face and they go and spread the word - 'I went and tried to get the vaccine, but I was asked for this and that' and again they lost the trust in the system. And it's not a problem of the system's actions - it's not necessarily the local health department that is asking for that, but you know, one of the vaccine centers or sites.”* - Immigrant and Service Provider, Shenandoah Valley

When presented with a plethora of forms to fill out before seeing a medical professional, immigrants may be unable to navigate the complex forms on their own and might fear detection based on lacking or only having an invalid Social Security number or ID.

*“I don't know if you've ever seen the application for social services - Medicaid or food stamps - it's outrageously large and you're supposed to do it online and sometimes in the middle of it, it crashes on you - then you have to start all over. Some people are just doing it on their phones . . . families need support to get through that process before they even can be helped. . .”*  
- Service Provider, Central Virginia

*“Let me give you a particular problem we're facing right now. [The] local hospital - so they used to have a local office just to deal with financial assistance. They closed that office and everything was moved to Norfolk. So, in order to get a hold of that office, people have to call. On a call they don't give the option if you want to speak Spanish, everything's in English, so people get lost in the long messages that give you a lot of instructions. So then, once they access the people, they will not know how to ask for the financial systems, you know, what is required, what they will need to ask. And they get confused because when they go to the hospital they receive a bill from the hospital and from each of the doctors - radiologists - depending on what they're going to the hospital for. So, when they asked for financial assistance and they get approved, they don't understand that that's only for the hospital - all the other bills are pending. So, three months later, they get a notification that they're in collection, they even go to court.”*  
- Immigrant and Service Provider, Shenandoah Valley

## Fear of the High Bills from Healthcare Providers

Healthcare bills can be daunting for many Americans, but they can be particularly insurmountable for uninsured immigrants, most of whom work in low-wage jobs. As a result, uninsured immigrants delay seeing a doctor until the problem becomes unbearable, which is often a point when the cost of treating such a person is exponentially higher. A candid remark from a director of an emergency

room in Florida reported in another study aptly illustrates that fear, “Every patient who arrives here carries a dollar sign on his forehead... One way or another, he or she will be billed.”<sup>108</sup>

Interviews with immigrants confirmed this also happens in Virginia, sometimes even without treatment, but simply an exam that results in being referred elsewhere.

*“This situation about the health system is really, really hard, especially when you come. The first year is really complicated if you don’t have any insurance and sometimes it doesn’t matter if you have insurance or not. Sometimes the price in some hospitals is really, really high without a reason. One time my wife was having some teeth problem and we go to the emergency room and we paid about \$1400 for some people to check us and say [there is] nothing [we can do], you gotta go to the dentist.”*

**“One time my wife was having some teeth problem and we go to the emergency room and we paid about \$1400 for some people to check us and say [there is] nothing [we can do], you gotta go to the dentist.”**

*- Immigrant, Southside*

Others reported encountering barriers to paying for treatment over time, potentially because of discrimination by individual staff.

*“[In] the medical field I have had a [bad] encounter - they denied me [a payment] plan when someone had told me that they were available. But once I went to speak with a nurse to find out more information or how to do it, she was really just mean and she was like ‘There’s no plan payment, you have to pay in full.’ ”*

*- Immigrant, Central Virginia*

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## Section 8: Policy Recommendations

The United States is one of the few developed countries that receives significant numbers of immigrants each year, yet does not have a comprehensive integration policy at the federal level. In the absence of federal leadership, states and localities have had to develop their own initiatives to help newcomers integrate into their communities. The Commonwealth of Virginia has taken a number of positive steps, including the establishment in 2020 of the Office of New Americans (ONA) under the Department of Social Services and the ONA Advisory Board, as well as the convening of the Executive Leadership Team for Immigrant Integration in 2021. The commonwealth provides significant support to refugees and SIVs, often in partnership with nonprofit and faith-based organizations. Virginia's response to the sudden evacuation of Afghan refugees in the summer of 2021 has been extraordinary: the commonwealth received more than 53,000 Afghans at the Washington Dulles airport and rapidly deployed its services to assist the new arrivals, mobilizing state and community resources. The refugees interviewed in this study expressed their profound gratitude for the safe haven that the United States provided to them.

Immigrants to Virginia are diverse in their educational background, proficiency in English, professional occupation, and familiarity with the U.S. culture. Consequently, their needs for integration services vary significantly. Some immigrants hardly need any assistance: they move to the United States with employment secured, have the financial and social resources to quickly find quality housing with access to good schools for their children, and generally get settled rather quickly. Others need substantial assistance to overcome language, immigration status, financial, and transportation barriers and have their foreign-earned credentials recognized to fully realize their potential and share that potential through Virginia's workforce and network of civic organizations.

As interviews with stakeholders demonstrate, there are significant barriers that various categories of immigrants in Virginia face in integrating and utilizing their full human potential. Most of these barriers are not unique to Virginia and are common throughout the United States. The commonwealth can play a key role, though, in minimizing or removing many barriers to integration. Many of these barriers were discussed throughout this report and the authors have done their best to convey the lived experiences of immigrants on their integration journey in their own words.

In this section, based on both insights from immigrants and service providers, we focus on **barriers mentioned most often and/or most prominently**:

1. Lack of a centralized source of information on statewide resources and services available to immigrants in Virginia
2. Challenges finding employment commensurate with education and skills: difficulty of transferring skills and credentials earned in the home countries into the American labor market (including licensure and credential recognition)
3. Becoming trapped in (often difficult and sometimes exploitative) jobs due to lack of information about other possibilities, a lack of English capacity and educational attainment
4. Language barriers to accessing services and education

5. Barriers to learning the English language
6. Immigration status and scarcity of affordable legal assistance
7. Barriers to accessing healthcare
8. Transportation
9. Access to affordable housing
10. Cultural barriers
11. Exploitation by unscrupulous employers and immigration attorneys (or those posing as immigration attorneys).

Interviews conducted for this study showed that significant positive work is being done in areas such as refugee resettlement, providing pro bono legal assistance to some immigrants, and offering free or low-cost ESL classes. The availability of such services varies, however, depending on the geographic region and whether a given area possesses a robust network of non-profit organizations. Our recommendations acknowledge the positives but focus on opportunities to improve comprehensive and consistent access for New Americans across the entire commonwealth. The authors of this report are not subject matter experts in each of these areas, so what we propose is a broad outline. Formulation of a plan of action for each recommendation requires further stakeholder engagement through such mechanisms as a focused taskforce or well-organized ad hoc working sessions with experts for each respective area, such as pro bono legal representation or workforce development.

Based on the obstacles to integration faced by immigrants in Virginia, we suggest the following:

**Recommendation 1: Make information about services, benefits, and resources more widely available to immigrants.** One of the most frequently mentioned concerns in our interviews was lack of a central place/resource to learn about services available to immigrants in Virginia. Such a resource would be valuable both to immigrants directly and to immigrant service providers who function as navigators for their clients in referring them to other types of services. To address this gap, we suggest a four-fold approach:

- a) Create a centralized online portal/repository to provide up-to-date information about services and resources available to immigrants statewide.
- b) Establish a hotline where immigrants can call for information/referral about services. The hotline needs to have operators able to provide information in multiple languages.
- c) Establish locality-based welcome centers.
- d) "Welcome to Virginia" orientation videos in multiple languages.

**Recommendation 1a: Create a centralized online portal/repository that provides up-to-date information about services available.**

The Office of New Americans is well positioned to house and maintain this portal (with appropriate IT and personnel support). The ONA website could be revamped to become a central contact point for immigrant services. The front page could have links to resources organized by topics, such as housing, employment, school enrollment, banking, food assistance, health insurance, and other relevant topics. The visual organization of the webpage could look similar to the Figure 13, with a user-friendly interface. This portal could also have forms and other resources that have already been translated into other languages by various state agencies.

**Figure 13: Sample Concept for Centralized Website**

Housing	Learning English	School enrollment
Employment	Rental assistance	Transportation
Driver's license	Healthcare	Immigration status/legal help
Food assistance	Childcare	College enrollment

**Recommendation 1b: Establish a toll-free multilingual hotline to disseminate information and referrals about resources and services available to immigrants.**

The hotline needs to have operators able to provide information in multiple languages. The hotline is an important resource because some immigrants do not have access to technology and/or a sufficient literacy level to navigate an online repository of services. The ONA would need additional staff: 10-12 bilingual navigators to explain what services are available to immigrants and to make referrals.

In light of reports of exploitation of immigrants by some employers and smugglers and fraud by unscrupulous immigration attorneys (or those posing as immigration attorneys), the same hotline could also receive and refer complaints of fraud and other related crimes against immigrants (including human trafficking) to appropriate government offices.

**Recommendation 1c: Establish locality-based welcome centers.** Immigrants overwhelmingly prefer in-person interactions with service providers to virtual interactions. Therefore, in addition to online centralized source of information and a hotline, there is a need for bilingual, culturally competent “navigators” who can direct immigrants to the right services. This is especially critical in rural, small city or exurban areas with less density of immigrant service providers. Options include *enhancing local school systems’ registration/welcome center offices*, through partnership with local non-profits. Center staff trained in cultural awareness and possessing diverse language skills would serve as navigators of local, state, and nonprofit resources. One service provider described a vision for such welcome centers as follows:

*“Some of us around here have been dreaming [about] a [more comprehensive] Welcome Center in the school system. It’s the idea of laundry and literacy - [there are examples where] a public library system might partner with a laundromat - we would want to do that here in our school system welcome Center. So, mom or dad, whoever, can do some laundry while the two-year-old is not climbing the walls of*

*the laundromat - they're in some safe environment where they're exposed to early literacy. Not only projects like that, but also pretty much any service like mental health services, family counseling services . . . What we notice is families don't necessarily access them because of multiple barriers, but also that trust barrier or sometimes there's a stigma attached with those kinds of services. But if it's attached to school, maybe it's okay. So then, if we had this Welcome Center, we wouldn't have physicians on staff, but we would have people that could get you referred out and find ways to access, free or low-cost services to meet your needs. And it's not just for immigrants - it would be available for anybody who's new or anyone who's feeling like they don't have the connection to the support network that they need. Like you walk into school and you don't know how to enroll and you're not sure you got the answers - you can come over and we'll at least get you on the right track. Same thing, like you want to find a physician, we can help you find them; you want to find a dentist, we can help you find them. So, maybe it's more city and school system coordinated together as a community that wants to be welcoming and wants to be inclusive."*

The second option includes *supporting bilingual, culturally competent service navigators at nonprofit organizations*. The Commonwealth of Virginia could fund such navigator positions to be located at well-established, reputable nonprofit organizations, requiring several nonprofits to apply collaboratively (perhaps with in-kind contribution, such as office space) and make referrals to each other. Such navigators cannot be based solely out of government offices (other than schools), as undocumented immigrants are unlikely to seek out services there. In selecting the non-profits to receive such funding, the reputation of an organization needs to be verified through discussions with various stakeholders (peer NGO's and immigrant communities). Well-established NGOs can apply for funding to extend the range of services they offer and/or expand to underserved areas.

**Recommendation 1d: "Welcome to Virginia" orientation videos in multiple languages spoken by Virginia's immigrants.** Many immigrants arriving in the United States lack cultural capital: knowledge about how education, healthcare, banking, housing, employment, and other systems work. There is a need for a comprehensive orientation for newcomers. At the federal level, there is a guide published by the U.S. Citizenship and Immigration Services (USCIS) entitled "Welcome to the United States: a Guide for New Immigrants"<sup>109</sup> but it contains a bit outdated material (section on phone books, for example) and is virtually unknown among immigrants as a resource.

The suggested orientation videos would be organized around specific topics (such as "How to enroll your child at school," "How to obtain a driver's license," "How the American healthcare system works," "How to find housing," "How to find a reputable immigration attorney"), created using modern multimedia technology, and presented in an engaging way in multiple languages. Such orientation videos could be hosted on the ONA site suggested above. Similar orientation videos could also be made and disseminated at the local government level focusing on municipal

services and resources, similar to local orientation programs such as “My Chesterfield Academy”<sup>110</sup>.

Additionally, short excerpts of such videos could be used as public service announcements on Spanish and other language television and radio and be shared through social media, providing a counterbalance to misinformation in key areas.

**Recommendation 2: Linguistic integration of Limited English Proficient immigrants.** We recommend a three-fold approach to linguistic integration: 1) access to affordable high-quality English-language classes, including at workplaces, community colleges, adult education centers, and community-based literacy organizations; 2) language access to services; 3) focus on recruiting and retaining bilingual frontline staff.

1) Key barriers to immigrants’ *acquisition of English language* include the lack of time/childcare, cost, transportation, and inconsistent quality of available language classes. In addition to increasing workplace access to language instruction discussed above, the capacity of several existing resources could be enhanced to more effectively serve a larger number of New Americans: community colleges and adult education centers.

Virginia has an excellent community college system with wide reach across the state. Its campuses need to be better utilized as English-language instruction hubs. They already have the infrastructure and the faculty. Community colleges also benefit from establishing/expanding a pipeline of potential students graduating from ESL classes and continuing on to Associate’s degrees. For those categories of immigrants who have limited education, a community college setting might be intimidating and/or inaccessible due to lack of a personal vehicle. Local public schools, many of which already host adult ESL instruction, remain an important resource, especially for immigrant parents. (In some cases, the time that children are in school may represent the best opportunity for an immigrant parent to focus on learning English.)

In addition, Virginia has a robust and geographically comprehensive network of adult education centers. They are well positioned to become a go-to place for English language learners but need additional funding to be able to offer a greater number of ESL classes during the times that are convenient for working adults. Many of the in-person classes have waitlists due to limited instructional staff who are often only hired in a part-time or adjunct capacity due to financial limitations. This also makes it harder to retain high-quality instructional staff over time.

Beyond support for instructional capacity, the community-based literacy organizations that are part of Virginia’s network of adult education face challenges in recruiting additional students. The data from our interviews and focus groups indicate that English Language Learners who find community-based literacy organizations often hear about them through word of mouth or, in the case of recent refugees, from referrals from the Department of Social Services. Marketing class offerings through other channels to reach a broader segment of the immigrant population would significantly increase accessibility of ESL classes to those who need them. However, marketing or recruitment expenses cannot be covered by federal funds, requiring organizations to rely on

other funding sources to promote their programs. Collectively, the community-based literacy organizations would benefit from a well-thought-out and appropriately funded marketing strategy to ensure that ESL learners throughout Virginia are aware of their services, but the same organizations typically lack the economies of scale needed to develop and implement such a strategy.

2) *The Commonwealth of Virginia needs to implement a comprehensive language access plan to enable eligible immigrants to access state services.* Virginia's Office of Diversity, Equity and Inclusion, in partnership with Virginia Commonwealth University, has developed such a plan in 2021, so the present report will not duplicate this effort. We do want to highlight the concern among community stakeholders that the quality and promptness of interpretation is inconsistent among current language access vendors used by the commonwealth.

Translation and interpretation errors may have serious consequences. Multiple persons interviewed recalled the incident during the COVID-19 vaccine roll out where a state agency released information with a translation in Spanish that said vaccines were "unnecessary" as opposed to "not mandatory" as the original in English stated. Another example (from another state) is even graver:

*"On his initial medical history, a Spanish-speaking boy aged 18 years, of Cuban descent, presented with abnormal mental status complaining of "intoxicado." An untrained interpreter understood this to mean that the boy was intoxicated - though in the Cuban dialect, the boy was actually saying that he was "nauseated." He received care for a drug overdose attributed to substance abuse but developed paraplegia, subsequently found to be due to a ruptured intracranial aneurysm. The case led to a malpractice lawsuit with a \$71 million award to the plaintiff."<sup>111</sup>*

3) Immigrants who acquire English fluency also represent a significant asset to the commonwealth. As language acquisition by immigrant Virginians increases, the need (and costs) for language access services will decrease while the pool of bilingual or multilingual workers available to provide such services will increase. Having *bilingual staff at state agencies* will further reduce costs associated with language access and improve satisfaction with services. A note of caution: adding on additional interpretation/translation responsibilities to bilingual staff without appropriate support or reduction in other responsibilities could lead to burnout for already overextended employees. Therefore, adjustment of their existing responsibilities as well as stipends and/or professional development funds to bilingual staff (to obtain translation certification and develop their translation skills) to appropriately compensate them for the added responsibilities might be considered.

Linguistic diversity and bilingualism/multilingualism contribute to America's global economic competitiveness and innovation. In addition, there are significant cognitive benefits to bilingual children, including increased attentional control, better working memory, as well as social and emotional benefits.<sup>112</sup> Therefore, supporting second-generation immigrants to retain their parent's mother tongue in addition to English language fluency and providing more support to schools to

offer quality dual language or immersive foreign language instruction to all children would benefit Virginia's society and economy.

**Recommendation 3: Incorporate Virginia's immigrants more fully in the commonwealth's workforce development programs.** Incorporating Virginia's immigrants in workforce development programs in a strategic and systemic way will allow the commonwealth to capitalize on the human capital and potential of immigrants to further strengthen Virginia's economy, support resilient regional economies, and produce a high-quality, multilingual workforce prized by global employers.

As mentioned earlier in the report, 46.9 percent of Virginia's immigrants have at least a college degree. The commonwealth can benefit from the education and skills that immigrants bring with them through targeted integration programs that reduce the "brain waste" of having highly trained immigrants in low-skill jobs.

- *Business Sector and Association Engagement.* In order for immigrant workers to integrate effectively into the economy of the commonwealth, it is critical to match labor where there are labor shortages and demand for their services, whether by sector, vocation, or region. Thus, a key first step in the integration process is to perform supply and demand analysis across the sectors and vocations/occupations of the economy of Virginia, including by region, which have chronic as well as temporal labor shortages. This analysis should include an evaluation of labor shortages by skillset (e.g., skilled versus unskilled), vocational certifications (e.g., registered nurses, certified electricians), and education qualifications (GED, college degree). According to a recent survey of the members of the Northern Virginia Chamber of Commerce, 42% indicated that an "overall shortage of candidates has been a primary barrier to hiring over the last 12 months".<sup>113</sup> Thus, particularly during this critical COVID recovery phase with increasing inflationary pressures, it is important to direct immigrants to high demand sectors for labor to provide immediate employment opportunities for these families. It will be critical to work with the Virginia Chamber of Commerce and the regional and city level chambers of commerce across the commonwealth to identify the supply and demand drivers for labor shortages, including by vocation, certification, and qualification requirements by region and sector, so that these immigrants can both immediately find employment and develop the necessary skills to meet market demand.
- *Career counseling and assistance with credential recognition and certification.* The overwhelming majority of immigrants interviewed had difficulty having their foreign-earned credentials recognized and accepted when seeking employment in the United States. Immigrant workers would benefit from access to career counselors who could advise them on how to get their foreign credentials recognized and certified, about occupations that would be a good fit given the immigrants' formal training and experience, as well as Virginia's labor market needs. Career counseling could also include training on U.S. workplace expectations, including interview skills and business dress code. Since professional licensing is typically regulated at the state level, this intervention could be implemented at the same level of government, in close partnership with universities, which

already have career counseling centers that could be upskilled to provide career counselling to non-student adults. Another resource is Virginia Career Works. Given the geographic diversity of its locations, with additional capacity, Virginia Career Works is in a good position to address the needs of immigrants through career counseling, orientation and training on U.S. workplace culture and the recruitment process.

- *Apprentice/internship program* with a strong workplace guidance and mentorship component to orient recent immigrants to the U.S. workplace culture and enable them to obtain relevant professional experience. This initiative is well suited for a public-private partnership and could be implemented (in collaboration with universities or community colleges) at workplace sites by employers interested in addressing labor shortages through recruitment of foreign-trained professionals.<sup>114</sup> As one refugee lamented: “*If there is training about the profession that they love and they experience in, if they can get training for not such a long time - maybe three months, maybe six months – then they’d be in the workforce using their skills.*”
- *Occupation-specific language training*: foreign-trained professionals would benefit from language training focused on the terminology and business processes related to their occupation in the United States. A state initiative to increase (private) employers’ participation in workplace English language classes for their LEP employees would be very effective. This solves multiple barriers to language instruction access: lack of time, cost, and transportation. The arrangement at the worksites is a win-win for both employees and employers as it improves communication in the workplace, opens paths for career advancement from within the company, and engenders employee loyalty to the employers because they see the investment from the latter. Loudoun Literacy Council, for example, provides very inexpensive classes to small employers (\$200 dollars for a 12-week class). These classes are free to employees. The commonwealth could provide funding to hire instructors. Most ESL classes currently utilize volunteers, which is not scalable to meet the level of need for such classes and varies significantly in quality.
- *Cultural orientation/cultural capital*: It is necessary to find a way to transfer cultural capital to new immigrants to facilitate their integration. Non-technical, soft skills that are not attuned to North American requirements are a strong impediment for immigrants’ attainment of jobs commensurate with their education. Cultural capital could be developed through integration/transition programs. A study of foreign-trained engineers who went through an integration program in Canada found that access to an engineering workplace facilitated by the program’s internship component was a significant form of cultural and social capital. Effective mentors could help with the acquisition of cultural and social capital. In addition, an overlooked resource in this area is libraries, which are well suited for the production, dissemination and acquisition of cultural capital.
- *Alternative licensing pathways for immigrants* who are unable to overcome regulatory barriers to enter the professions in which they were trained abroad. Regulatory barriers prevent a large number of immigrants from entering professions, such as medicine, nursing, engineering, and others. The commonwealth would be well advised to develop alternative licensing pathways that integrate immigrant professionals more quickly and

effectively while maintaining standards for public safety. For example, programs could be developed for U.S.-born and foreign medical professionals who could not get a residency so that they continue working in the medical field in some other capacity. They could be employed in non-physician jobs in community clinics, testing centers, health departments, and hospitals.<sup>115</sup> Some states have already made adjustments to address significant labor shortages in health care. Missouri, for example, passed a law in 2017 that allows medical graduates who have completed two levels of the U.S. Medical Licensing Examination but did not get a residency to work as assistant physicians.<sup>116</sup>

Career pathway programs, modeled after the federal Refugee Career Pathways program, could be implemented at a state level. Ideally, these programs would be open to all categories of New Americans, not only refugees.

- *Refugee employment opportunities:* public-private partnerships could be developed to incentivize employers to implement evidence-based initiatives to recruit, hire, train, and retain refugees and SIVs. Immigrants tend to be a very loyal workforce, according to our interviews. Therefore, once such investments are made, employers are likely to reap long-term benefits and address chronic labor shortages.

A number of these programs could be implemented through public-private or public-nonprofit partnerships. For example, universities and community colleges have the infrastructure and expertise to implement short-term skills upgrade training, career counselling, assistance with credential recognition and certification (in partnership with state government agencies), language training and cultural orientation. Private sector/industry partnerships would be necessary to implement mentoring, internship/apprenticeship, and job placement programs.

**Recommendation 4: Future Talent Pipeline: need to groom internally and attract externally bilingual, culturally competent service providers, especially in primary care and mental health services.** The need for bilingual service providers in healthcare is immense. Patient outcomes are significantly better when physicians and other medical professionals can communicate with patients in their primary language.<sup>117</sup> In parallel, the costs of translation and interpretation costs are significantly reduced when there are in-house bilingual service providers. Several initiatives may be considered in order to increase the number of healthcare professionals in Virginia with linguistic and cultural competency skills:

- Offer scholarships to bilingual medical students in exchange for commitment to work in Virginia for a certain period of time.
- Similar incentives might be appropriate for bilingual nursing students: offer in-state tuition for out-of-state bilingual nursing students in exchange for a commitment to work in Virginia for 5 years or so. Offer scholarships and other financial assistance to in-state bilingual students with cultural competency in exchange for a commitment to work in Virginia. Given that medical and nursing licenses are not easily transferable to other states, the likelihood of medical professionals incentivized to work in Virginia through such initiatives remaining in the commonwealth long-term is very high.
- The commonwealth would also be well advised to build a pipeline of local Virginia pre-med students through mentoring programs. Initiatives in this realm could include

partnering with schools to organize workshops for middle schools and high schools to discuss the value of different medical careers, such as physicians, nurses, as well as X-ray, ultrasound and pharmacy technicians. Interested middle- and high-school students could be connected with university students who are already in pre-med or nursing undergraduate programs and medical schools through mentoring relationships.

**Recommendation 5: Improve public transit networks throughout the commonwealth and offer driver education programs in multiple languages.** Transportation is a major barrier for immigrants, both for those without access to a personal vehicle and/or those who do not know how to drive, especially in areas of Virginia without reliable public transit. Offering adult driver education courses in major languages spoken in Virginia localities would enable immigrants to learn to drive faster, putting them on track toward independence. Lack of transportation impedes their access to employment, education, healthcare, and impacts their integration in multiple ways. Investing in quality public transit in Virginia would significantly strengthen the economy by creating jobs, reducing the carbon footprint of commuters, and enabling better mobility of the workforce.

**Recommendation 6: Increase the number, capacity and geographic reach of immigration legal aid organizations and other pro-bono or affordable legal representation.** In the process of adjusting their immigration status, many immigrant interviewees noted the challenges they faced finding trustworthy immigrant attorneys whose fees they could afford. High-quality immigration counsel is costly in the United States, especially for new arrivals who have limited savings and/or are often employed in low-wage jobs. The capacity and funding of reputable legal aid clinics is very limited and they are not able to provide legal representation to all who need it. As a result, immigrants seeking affordable immigration counsel often fall prey to fraud by unscrupulous immigration attorneys (or those posing as immigration attorneys). Our interviews and focus group discussions demonstrate that there is a dire need among the immigrant community for quality legal representation in immigration cases.

The most urgent need appears to be in the Afghan community: the 7,000 parolees admitted and resettled in Virginia in the aftermath of the U.S. withdrawal from Afghanistan in the summer of 2021 need immediate legal assistance to achieve permanent legal residency or maintain temporary work-eligible status in the United States. Moreover, interviews suggested existing legal resources within resettlement agencies are overwhelmed by the volume of need.

In addition to Afghan resettlement, a range of immigrants remain in one form of temporary status or another – DACA recipients, Temporary Protected Status for Venezuelans, and others. Interviews showed the critical difference made when someone eligible for one of these, or a more permanent status, can receive documented status.

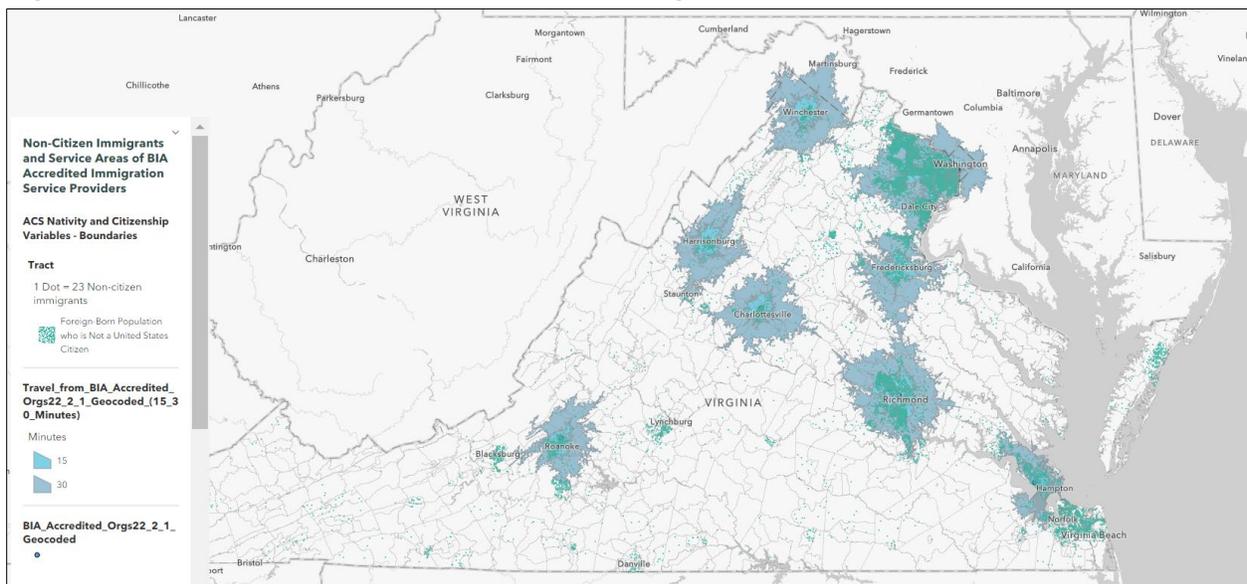
Finally, an estimated quarter of a million Virginia residents lack immigration documentation. Interviews show confusion about the complexity of the system and why some immigrants qualify for some status and others do not. Under current law, many of these undocumented immigrants may have no pathway to a documented status. But in the short-term, access to low-cost immigration services would provide many individuals with clarity about their choices as well as

their constitutional rights while in an undocumented status. More importantly, if the U.S. Congress should ever pass immigration reform that includes an earned path to legalization, the demand for legal services from Virginia residents will far outstrip the current crisis with Afghan parolees. Investing in immigration legal services planning and infrastructure now would be a smart long-term investment in the same way that investing in emergency preparedness is essential for successful service provision during rare natural disasters.

Meeting the need for legal immigration counsel will require a multi-pronged approach and creative solutions. The authors of the report are not immigration attorneys and do not presume to know how to solve this problem. Our data indicates that legal aid clinics throughout Virginia are doing stellar work representing the most vulnerable immigrants, but they need significantly more funding to expand their capacity to serve a greater number of immigrants in need. First steps in expanding access to affordable legal services and mitigating exploitation of immigrants by unqualified *notarios* include:

- development of a comprehensive list of immigration legal service providers, whether private (market-rate) or low-cost.
- establishment, in partnership with relevant bar associations, of a hotline for registering concerns about unscrupulous legal services.
- convening of both non-profit, university-based and for-profit immigration legal service providers to support the sharing of information on recent legal developments and to train staff in critical skills. Such meetings should also dedicate time to mapping community resources that could be drawn on in the event of a narrow or broad legalization opportunity.
- targeted technical and limited grant support for sharing best practices and to support organizations seeking BIA accreditation with a focus on expanding coverage to additional areas of the commonwealth with significant noncitizen immigrant populations. (See Figure 14 – a very cursory analysis shows a need for legal service providers in Norfolk/Virginia Beach, the Eastern Shore, Culpepper, Lynchburg, Blacksburg and Petersburg.)

**Figure 14: Service Areas of BIA-accredited Immigration Service Providers**



Two caveats to the map above are worth noting. First, private providers exist in some of the areas not covered by BIA accredited organizations but the cost of private legal counsel can often be prohibitive. Second, many non-profit providers face capacity limitations and may not be able to accept new cases at all times.

Another step toward improving access to legal immigration representation might be to expand the scope of (or replicate at the state level) the federal BIA Pro Bono Project, which matches some noncitizen individuals who have pending appeals of decisions of immigration judges with pro-bono legal representation through its network and collaboration with non-governmental legal services organizations, attorneys, and law school clinics.<sup>118</sup>

**Recommendation 7: Support leadership training programs for immigrant community leaders.** Because immigrants are such a diverse and heterogeneous population, there is a need for different groups to have a voice in the political process and be their own advocates. Leadership training programs to develop and empower cohorts of community leaders would facilitate their integration into Virginia, develop valuable social capital across immigrant communities, and lead to greater integration among the communities they serve.

**Recommendation 8: Support for studies on the cultural nuances of various immigrant groups to increase cultural competence of service providers.** For example, provision of mental health services to Afghan women will require the type of cultural competency that many providers do not yet possess. Encouraging research on issues surrounding immigrants' unique challenges and circumstances would be beneficial to service providers and immigrants alike. This type of research could be done in collaboration with Virginia universities and community organizations. The University of Virginia, for example, has the International Family Medicine Clinic. Medical students who worked with refugee and other immigrant patients prepared some informative research papers on cultural nuances of providing medical care to various immigrant groups as part of their training on topics such as "Trauma-informed Primary Care of Refugees" and "The Concept of Depression in Afghan Refugees."<sup>119</sup> These types of studies need to be supported, peer-reviewed, and then made widely available.

**Recommendation 9: "Meet them where they are:" a thoughtful and intentional approach to program design.** As discussed in this report, immigrants often face multiple barriers to accessing services. Effective programs identify these barriers and take steps to remove them. An interviewee who oversaw one of the most successful COVID-19 vaccination efforts among the Latinx population shared that to ensure that the members of the targeted community came to vaccination pop-up clinics, the organizers provided transportation to the vaccination site to those who needed it and childcare on-site. She summed up their approach as follows: "Meeting people where they are is listening to what barriers are there and really working to remove them."

**Recommendation 10: Increase the supply of affordable housing and reduce administrative barriers to accessing housing.** This could be accomplished through Virginia Housing Trust Funds and capitalizing on available federal funds. Lack of affordable housing is a long-standing

problem affecting all Virginians. Barriers to access specific to immigrants include the credit history required by potential landlords that most new arrivals do not have. Measures may be developed in partnership with private landlords to remove administrative barriers to immigrants' access to the rental market.

## **Conclusion**

Virginia has much to be proud of: an excellent education system with world-class research universities and unparalleled community college coverage, diverse and highly educated labor force, and a business-friendly tax and legal environment. In order for immigrants to be well integrated and reach their full potential so that they can contribute to the economic success story of Virginia, they must participate in the formal economy as quickly as possible by matching supply with demand.

The Commonwealth would be well advised to develop strategic, well-thought-out, and well-designed immigrant integration programs that are market driven, where immigrant labor can be directed and incentivized to work with industries, and in vocations and regions with the most need. Immigrants are a key factor in maintaining vibrant and thriving local businesses and an attractive environment for global corporations. Maximizing the human capital of its immigrants, alongside analysis of market-based drivers of chronic and temporal labor shortages, both by sector and region, will position Virginia as a competitive force in the global economy. In turn, this would enable the Commonwealth of Virginia to reap benefits in the form of higher tax revenues to public coffers, and happier, productive, and more engaged new members of the society.

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## Appendix 1: Major Localities and Languages Spoken at Home (2019 ACS 1yr)

	Virginia	Rest of State	Rest of State (%)	Subtotal the Eleven	Albemarle	Arlington	Chesterfield	Fairfax	Henrico	Loudoun	Prince William	Alexandria	Norfolk	Richmond	Virginia Beach
<b>Spanish</b>	616,226	190,239	30.9%	425,987	4,746	29,716	28,879	153,849	12,818	43,758	89,084	16,775	12,461	14,068	19,833
LEP	257,781	71,899	27.9%	185,882	1,886	9,621	14,475	69,321	6,506	16,918	40,542	7,279	4,796	9,467	5,071
<b>French, Haitian, or Cajun</b>	40,515	14,800	36.5%	25,715	585	2,536	1,789	7,718	861	2,205	2,811	3,620	1,631	823	1,136
LEP	6,404	2,520	39.4%	3,884	127	397	67	1,284	321	640	611	233	55	37	112
<b>German or other West Germanic languages:</b>	27,477	12,115	44.1%	15,362	293	1,272	938	5,892	577	2,369	816	628	423	715	1,439
LEP	2,433	877	36.0%	1,556	0	0	67	622	153	125	0	0	35	187	367
<b>Russian, Polish, or other Slavic languages:</b>	26,868	8,049	30.0%	18,819	347	1,401	179	8,653	1,794	1,436	1,898	1,102	104	690	1,215
LEP	7,037	2,383	33.9%	4,654	0	265	0	1,729	917	467	797	0	0	215	264
<b>Other Indo-European languages:</b>	200,271	38,312	19.1%	161,959	1,728	10,039	2,081	68,775	8,172	33,409	23,142	6,942	2,517	1,925	3,229
LEP	54,945	13,357	24.3%	41,588	261	2,747	545	19,318	2,343	4,773	7,438	2,335	611	821	396
<b>Korean:</b>	48,255	6,787	14.1%	41,468	300	1,872	1,575	27,979	557	3,061	4,362	426	195	708	433
LEP	24,911	3,967	15.9%	20,944	33	584	458	14,766	140	1,444	2,678	60	13	491	277
<b>Chinese (incl. Mandarin, Cantonese):</b>	66,186	10,782	16.3%	55,404	1,205	3,387	2,107	32,672	2,412	3,751	2,504	1,255	885	1,183	4,043
LEP	29,738	3,889	13.1%	25,849	475	975	1,118	14,885	1,442	1,731	1,194	685	464	627	2,253
<b>Vietnamese:</b>	57,496	8,677	15.1%	48,819	474	1,857	924	25,968	3,745	5,658	6,734	920	254	391	1,894
LEP	30,522	3,318	10.9%	27,204	35	525	635	14,767	2,691	2,834	4,042	197	166	223	1,089
<b>Tagalog (incl. Filipino):</b>	44,005	8,320	18.9%	35,685	141	1,531	1,271	9,517	1,020	2,919	2,780	695	3,104	45	12,662
LEP	13,678	3,059	22.4%	10,619	70	258	286	1,635	172	604	672	77	1,003	0	5,842
<b>Other Asian and Pacific Island languages:</b>	94,163	13,168	14.0%	80,995	929	3,083	1,379	38,173	9,289	18,419	3,059	1,640	795	680	3,549
LEP	24,248	4,082	16.8%	20,166	76	1,139	534	8,641	2,794	3,967	1,419	945	51	18	582
<b>Arabic:</b>	56,632	5,607	9.9%	51,025	1,130	4,220	1,427	23,989	4,235	7,202	2,905	3,281	396	666	1,574
LEP	16,108	1,160	7.2%	14,948	402	1,456	505	5,935	1,552	2,334	1,080	990	0	168	526
<b>Other and unspecified languages:</b>	74,492	11,023	14.8%	63,469	713	4,987	1,220	24,275	1,657	4,894	15,059	7,483	1,236	330	1,615
LEP	20,469	2,772	13.5%	17,697	160	1,229	61	8,030	407	630	3,243	3,576	59	198	104
<b>Total LEP</b>	488,274	113,283	23.2%	374,991	3,525	19,196	18,751	160,933	19,438	36,467	63,716	16,377	7,253	12,452	16,883
<b>Total OTE</b>	1,352,586	327,879	24.2%	1,024,707	12,591	65,901	43,769	427,460	47,137	129,081	155,154	44,767	24,001	22,224	52,622
<b>LEP % of OTE</b>	36.1%	34.6%		36.6%	28.0%	29.1%	42.8%	37.6%	41.2%	28.3%	41.1%	36.6%	30.2%	56.0%	32.1%

Source: 2019 1-Year ACS estimates – Table C16001

## Appendix 2: Language Data for Virginia School Systems

Division Name	Students	OTEH Students	OTEH (%)	# Languages	# Lang. 10+ speakers	Span %OTEH	Top Lang 1	# Students Top Lang 1	Top Lang 2	Top Lang 3
<b>Accomack County</b>	4,864	664	13.7 %	9	2	79%	Spanish	525	Haitian, Creole	Creoles
<b>Albemarle County</b>	13,532	1015	7.5%	46	10	72%	Spanish	732	Arabic	Chinese (Mand)
<b>Alexandria City</b>	15,845	4773	30.1 %	95	18	66%	Spanish	3159	Amharic	Arabic
<b>Alleghany County</b>	1,952	7	0.4%	4	0	43%	Spanish	3	Chinese (Mand)	Arabic
<b>Amelia County</b>	1,627	42	2.6%	1	1	100 %	Spanish	42		
<b>Amherst County</b>	4,045	29	0.7%	6	1	69%	Spanish	20	Arabic	Chinese (Mand)
<b>Appomattox County</b>	2,272	19	0.8%	2	1	84%	Spanish	16	Samoan	
<b>Arlington County</b>	26,833	4104	15.3 %	69	20	65%	Spanish	2656	Undetermined	Arabic
<b>Augusta County</b>	10,150	163	1.6%	11	2	80%	Spanish	131	Russian	Chinese (Mand)
<b>Bath County</b>	521	4	0.8%	1	0	100 %	Spanish	4		
<b>Bedford County</b>	9,175	62	0.7%	16	1	60%	Spanish	37	Chinese (Mand)	French
<b>Bland County</b>	670	1	0.1%	1	0	0%	German, Low	1		
<b>Botetourt County</b>	4,431	74	1.7%	9	1	84%	Spanish	62	Pashto, Northern	Arabic
<b>Bristol City</b>	2,214	26	1.2%	7	1	38%	Spanish	10	Vietnamese	Chinese
<b>Brunswick County</b>	1,451	23	1.6%	3	1	87%	Spanish	20	Arabic	Tagalog
<b>Buchanan County</b>	2,516	5	0.2%	2	0	40%	Chinese (Min)	3	Spanish	
<b>Buckingham County</b>	2,009	27	1.3%	1	1	100 %	Spanish	27		

Division Name	Students	OTEH Students	OTEH (%)	# Languages	# Lang. 10+ speakers	Span %OTEH	Top Lang 1	# Students Top Lang 1	Top Lang 2	Top Lang 3
Buena Vista City	916	3	0.3%	1	0	100%	Spanish	3		
Campbell County	7,787	169	2.2%	12	1	82%	Spanish	139	Vietnamese	Korean
Caroline County	4,131	70	1.7%	7	1	91%	Spanish	64	Chinese (Mand)	Chinese (Mand)
Carroll County	3,552	116	3.3%	5	1	90%	Spanish	104	Arabic	German
Charles City County	576		0.0%	0	0					
Charlotte County	1,726	11	0.6%	1	1	100%	Spanish	11		
Charlottesville City	4,259	463	10.9%	30	10	37%	Spanish	172	Dari	Pashto, South
Chesapeake City	39,673	804	2.0%	42	7	72%	Spanish	577	Arabic	Tagalog
Chesterfield County	60,904	4288	7.0%	69	14	88%	Spanish	3763	Arabic	Vietnamese
Clarke County	1,745	59	3.4%	7	1	78%	Spanish	46	Chinese (Mand)	Vietnamese
Colonial Beach	634	4	0.6%	3	0	25%	Portuguese	2	Spanish	Spanish
Colonial Heights City	2,784	111	4.0%	17	1	71%	Spanish	79	Arabic	Chinese (Mand)
Covington City	1,016	4	0.4%	1	0	100%	Spanish	4		
Craig County	546	1	0.2%	1	0	0%	Tagalog	1		
Culpeper County	8,256	913	11.1%	23	3	83%	Spanish	759	Quekchi	Mam
Cumberland County	1,223	15	1.2%	3	1	73%	Spanish	11	Arabic	Mongolian
Danville City	5,505	203	3.7%	11	2	78%	Spanish	159	Arabic	Urdu
Dickenson County	1,967	3	0.2%	2	0	0%	Amharic	2	Thai	
Dinwiddie County	4,209	91	2.2%	6	1	92%	Spanish	84	Chinese (Mand)	Afrikaans
Essex County	1,224	37	3.0%	3	2	54%	Spanish	20	Arabic	Gujarati

Division Name	Students	OTEH Students	OTEH (%)	# Languages	# Lang. 10+ speakers	Span %OTEH	Top Lang 1	# Students Top Lang 1	Top Lang 2	Top Lang 3
Fairfax County	180,076	30178	16.8 %	139	59	65%	Spanish	19509	Arabic	Vietnamese
Falls Church City	2,500	116	4.6%	26	1	58%	Spanish	67	Chinese (Mand)	Arabic
Fauquier County	10,292	717	7.0%	28	1	93%	Spanish	665	Vietnamese	Bengali
Floyd County	1,833	38	2.1%	2	1	95%	Spanish	36	Chinese (Mand)	
Fluvanna County	3,297	55	1.7%	7	1	85%	Spanish	47	Italian	Arabic
Franklin City	1,028	20	1.9%	3	0	30%	Arabic	9	Spanish	Vietnamese
Franklin County	6,533	90	1.4%	3	1	96%	Spanish	86	Arabic	Gujarati
Frederick County	13,521	830	6.1%	16	2	73%	Spanish	603	World English	Vietnamese
Fredericksburg City	3,545	570	16.1 %	29	6	61%	Spanish	346	Pashto, Northern	Dari
Galax City	1,323	173	13.1 %	2	1	99%	Spanish	171	Arabic	
Giles County	2,300	7	0.3%	3	0	43%	Arabic	3	Arabic	Ukrainian
Gloucester County	5,044	35	0.7%	9	1	66%	Spanish	23	Italian	Chinese (Mand)
Goochland County	2,582	41	1.6%	6	1	78%	Spanish	32	Urdu	Chinese (Mand)
Grayson County	1,517	18	1.2%	1	1	100 %	Spanish	18		
Greene County	2,928	121	4.1%	7	1	89%	Spanish	108	Nepali	Arabic
Greensville County	2,137	58	2.7%	2	2	69%	Spanish	40	Arabic	
Halifax County	4,691	50	1.1%	9	1	74%	Spanish	37	Arabic	Arabic
Hampton City	19,225	307	1.6%	30	4	48%	Spanish	146	Arabic	Vietnamese
Hanover County	16,519	290	1.8%	30	3	63%	Spanish	184	Arabic	Vietnamese
Harrisonburg City	6,508	2070	31.8 %	38	11	78%	Spanish	1607	Arabic	Kurdish
Henrico County	50,191	3375	6.7%	86	25	54%	Spanish	1818	Arabic	Dari

Division Name	Students	OTEH Students	OTEH (%)	# Languages	# Lang. 10+ speakers	Span %OTEH	Top Lang 1	# Students Top Lang 1	Top Lang 2	Top Lang 3
Henry County	7,130	315	4.4%	8	1	97%	Spanish	306	Albanian	Albanian
Highland County	184		0.0%	0	0					
Hopewell City	4,242	166	3.9%	6	2	83%	Spanish	137	Arabic	Nyanja
Isle of Wight County	5,396	44	0.8%	14	1	55%	Spanish	24	Khmer, Central	Igbo
King and Queen County	875	9	1.0%	2	0	78%	Spanish	7	Arabic	
King George County	4,297	44	1.0%	10	1	75%	Spanish	33	Thai	Thai
King William County	2,007	24	1.2%	5	1	67%	Spanish	16	Arabic	Bengali
Lancaster County	1,014	2	0.2%	2	0	50%	Chinese (Mand)	1	Chinese (Mand)	
Lee County	3,048	3	0.1%	2	0	33%	Vietnamese	2	Spanish	
Lexington City	465	14	3.0%	5	0	64%	Spanish	9	Pashto, Northern	Arabic
Loudoun County	81,319	9269	11.4%	11	38	58%	Spanish	5378	Arabic	Telugu
Louisa County	4,984	118	2.4%	12	1	72%	Spanish	85	Russian	Chinese (Mand)
Lunenburg County	1,622	97	6.0%	2	1	97%	Spanish	94	Arabic	
Lynchburg City	7,961	201	2.5%	12	2	75%	Spanish	150	World English	Arabic
Madison County	1,669	21	1.3%	3	1	86%	Spanish	18	French	Tiwa, Southern
Manassas City	7,607	2445	32.1%	39	6	93%	Spanish	2264	Arabic	Urdu
Manassas Park City	3,500	1124	32.1%	22	3	93%	Spanish	1043	Arabic	Arabic
Martinsville City	1,881	91	4.8%	4	1	97%	Spanish	88	Bulgarian	Bulgarian
Mathews County	932	5	0.5%	1	0	100%	Spanish	5		
Mecklenburg County	4,093	48	1.2%	5	1	73%	Spanish	35	Arabic	Swahili (Swati)

Division Name	Students	OTEH Students	OTEH (%)	# Languages	# Lang. 10+ speakers	Span %OTEH	Top Lang 1	# Students Top Lang 1	Top Lang 2	Top Lang 3
Middlesex County	1,166	22	1.9%	4	1	82%	Spanish	18	Chinese (Mand)	Hungarian
Montgomery County	9,711	330	3.4%	34	3	53%	Spanish	176	Arabic	Chinese (Mand)
Nelson County	1,596	54	3.4%	2	1	93%	Spanish	50	Chinese (Mand)	
New Kent County	3,040	24	0.8%	2	1	96%	Spanish	23	Chinese (Mand)	
Newport News City	27,118	1370	5.1%	50	10	70%	Spanish	961	Undetermined	Arabic
Norfolk City	27,955	877	3.1%	24	5	84%	Spanish	738	Undetermined	Tagalog
Northampton County	1,410	124	8.8%	3	1	98%	Spanish	122	Haitian, Creole	Haitian, Creole
Northumberland County	1,228	19	1.5%	1	1	100 %	Spanish	19		
Norton City	861	5	0.6%	3	0	60%	Spanish	3	Hindi	Hindi
Nottoway County	1,878	77	4.1%	4	1	94%	Spanish	72	Arabic	Malayalam
Orange County	4,907	190	3.9%	9	1	95%	Spanish	180	Chinese (Mand)	Afrikaans
Page County	3,213	28	0.9%	4	1	86%	Spanish	24	Arabic	Lao (Laothian)
Patrick County	2,517	47	1.9%	2	1	94%	Spanish	44	Arabic	
Petersburg City	4,045	160	4.0%	10	1	91%	Spanish	145	Arabic	Arabic
Pittsylvania County	8,213	185	2.3%	12	1	89%	Spanish	164	Ukrainian	Gujarati
Poquoson City	2,090	4	0.2%	4	0	0%	Bosnian	1	Bosnian	Bosnian
Portsmouth City	13,395	118	0.9%	15	1	69%	Spanish	82	Arabic	Tagalog
Powhatan County	4,212	27	0.6%	6	1	70%	Spanish	19	Russian	Pashto, North
Prince Edward County	1,949	45	2.3%	6	1	73%	Spanish	33	Vietnamese	Chinese (Mand)
Prince George County	6,099	81	1.3%	12	1	72%	Spanish	58	Arabic	German
Prince William County	89,577	15497	17.3 %	10 8	44	74%	Spanish	1148 8	Urdu	Arabic
Pulaski County	4,010	64	1.6%	7	1	77%	Spanish	49	Chinese (Mand)	Vietnamese
Radford City	2,520	15	0.6%	3	1	67%	Spanish	10	Arabic	Amharic

Division Name	Students	OTEH Students	OTEH (%)	# Languages	# Lang. 10+ speakers	Span %OTEH	Top Lang 1	# Students Top Lang 1	Top Lang 2	Top Lang 3
Rappahannock County	766	38	5.0%	1	1	100%	Spanish	38		
Richmond City	28,226	3029	10.7%	39	4	96%	Spanish	2921	Arabic	French
Richmond County	1,306	40	3.1%	1	1	100%	Spanish	40		
Roanoke City	13,854	1363	9.8%	46	11	69%	Spanish	946	Dari	Swahili (Swati)
Roanoke County	13,692	338	2.5%	37	4	55%	Spanish	185	Arabic	Vietnamese
Rockbridge County	2,711	32	1.2%	4	1	91%	Spanish	29	Burmese	Burmese
Rockingham County	11,354	890	7.8%	31	6	77%	Spanish	682	Russian	Arabic
Russell County	3,552	18	0.5%	2	1	83%	Spanish	15	Mult. languages	
Salem City	3,828	132	3.4%	18	2	59%	Spanish	78	Arabic	Swahili (Swati)
Scott County	3,538	4	0.1%	1	0	100%	Spanish	4		
Shenandoah County	5,769	416	7.2%	15	2	91%	Spanish	379	Amharic	Chinese (Mand)
Smyth County	4,110	25	0.6%	3	1	92%	Spanish	23	Chinese (Mand)	Chinese (Mand)
Southampton County	2,610	15	0.6%	4	0	47%	Spanish	7	Arabic	Tamil
Spotsylvania County	23,036	1480	6.4%	48	8	83%	Spanish	1233	Arabic	Farsi
Stafford County	29,395	1821	6.2%	65	10	71%	Spanish	1293	Dari	Pashto, North
Staunton City	2,607	62	2.4%	12	1	71%	Spanish	44	Malayalam	Arabic
Suffolk City	13,869	84	0.6%	16	1	70%	Spanish	59	Arabic	Chinese (Mand)
Surry County	679	2	0.3%	1	0	100%	Spanish	2		
Sussex County	1,045	9	0.9%	1	0	100%	Spanish	9		

Division Name	Students	OTEH Students	OTEH (%)	# Languages	# Lang. 10+ speakers	Span %OTEH	Top Lang 1	# Students Top Lang 1	Top Lang 2	Top Lang 3
<b>Tazewell County</b>	5,432	9	0.2%	1	0	100%	Spanish	9		
<b>Virginia Beach City</b>	65,612	1496	2.3%	69	15	51%	Spanish	767	Tagalog	Vietnamese
<b>Warren County</b>	5,160	150	2.9%	12	1	87%	Spanish	131	Nepali	Nepali
<b>Washington County</b>	6,760	54	0.8%	12	1	57%	Spanish	31	Urdu	Arabic
<b>Waynesboro City</b>	2,914	161	5.5%	6	1	93%	Spanish	150	Vietnamese	Otomian lang.
<b>West Point</b>	804	7	0.9%	2	0	86%	Spanish	6	Korean	
<b>Westmoreland County</b>	1,548	82	5.3%	2	1	99%	Spanish	81	Japanese	
<b>Williamsburg-James City</b>	11,152	510	4.6%	34	3	82%	Spanish	418	Chinese (Mand)	Arabic
<b>Winchester City</b>	4,269	862	20.2%	26	1	95%	Spanish	819	Chinese (Mand)	Arabic
<b>Wise County</b>	5,542	6	0.1%	3	0	67%	Spanish	4	Swahili (Swati)	Swahili (Swati)
<b>Wythe County</b>	3,858	2	0.1%	1	0	0%	Gujarati	2		
<b>York County</b>	12,492	297	2.4%	47	6	34%	Spanish	101	Arabic	Chinese (Mand)
<b>TOTALS</b>	1,252,756	104411	8.3%	246	116	71%	Spanish	73679	Arabic	Urdu

### Appendix 3: Intermarriage rates of Immigrants and the Native-born

TABLE 8-1 Percentage Distributions of Immigrants and Natives Who Married in the Previous Year, 2008-2012 (multiracial individuals excluded)

	Marriages Formed in the Previous Year							
	Same Race							
	Native-Born	Foreign-Born	White	Black	American Indian	Asian	Hispanic	N
Native-born								
Men								
White	89.9	1.6	—	0.6	0.5	2.0	4.2	60,440
Black	73.7	2.3	14.7	—	0.5	1.3	5.6	6,233
American Indian	43.3	0.3	47.9	1.1	—	2.0	4.7	669
Asian	35.6	26.4	28.7	0.6	0.1	—	6.1	967
Hispanic	46.6	13.3	33.6	2.0	0.6	2.4	—	6,039
Women								
White	90.2	1.5	—	1.6	0.5	0.8	4.2	60,229
Black	85.8	4.3	6.0	—	0.1	0.3	2.6	5,355
American Indian	40.8	0.0	46.6	4.6	—	0.6	6.7	711
Asian	31.5	17.7	37.5	3.6	0.6	—	6.9	1,093
Hispanic	42.5	17.8	32.4	4.8	0.3	1.0	—	6,622

Source: National Academies of Sciences, E., and Medicine. (2015). The integration of immigrants into American society. Panel on the Integration of Immigrants into American Society, M.C. Water and M.G. Pineau, Eds. Washington, D.C.: National Academies Press.

Foreign-born								
Men								
White	47.3	37.2	—	1.3	0.3	5.4	6.7	1,948
Black	23.6	55.2	12.7	—	0.1	1.6	5.3	973
American Indian	—	—	—	—	—	—	—	5
Asian	8.9	75.8	11.1	0.7	0.1	—	2.1	2,174
Hispanic	22.5	62.4	12.5	0.9	0.2	1.2	—	5,229
Women								
White	50.2	37.6	—	2.4	0.2	1.8	6.6	1,926
Black	18.7	68.8	7.2	—	0.1	0.7	3.3	780
American Indian	—	—	—	—	—	—	—	8
Asian	8.4	54.4	29.5	1.9	0.2	—	4.4	3,025
Hispanic	16.8	68.3	11.6	1.7	0.2	0.7	—	4,774

NOTE: “White” in this table actually means non-Hispanic white.

SOURCE: Adapted from Lichter et al. (2015a).

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The mission of the Wilder School is to:

- Engage, teach and inspire students and leaders to understand and solve challenges in our world.
- Advance research that informs public policy and decision making to improve our communities.
- Collaborate with communities through innovative partnerships to enhance quality of life.

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