

Texas State University
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Fall 2013

Culturally Sensitive:
Anthropology and Social Work in Refugee Resettlement

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Abstract: In the fall of 2013, I interned at Refugee Services of Texas in the Extended Case Management and Human Trafficking departments. While there, I conducted intakes, worked with interpreters and the variety of clients at ECM, and contributed to the Human Trafficking division as well as its city-wide counterpart, the Coalition against Human Trafficking. I will analyze the relationships between Social Work and Cultural Anthropology in the field of Micro Social Work as well as the application of cultural sensitivity in a refugee resettlement setting.

Refugee Services of Texas

Refugee Services of Texas (RST) is a non-profit organization that works with Church World Service, Episcopal Migration Ministries, and the U.S. Committee of Refugees and Immigrants to provide services for refugees, asylees, human trafficking survivors, and other displaced people in an attempt to help them regain their self-sufficiency in their resettlement in the United States. The Austin location is the lead agency in Texas and has been open for ten years (Refugee Services 2012).

RST assists in the resettlement of three classes of individuals: refugees, asylees, and Cuban and Haitian parolees.

Refugees, as defined by the U.S. Department of Homeland Security, are people who find it necessary to leave or flee their country because they are persecuted for, among other things, their religion, sex, political views, and sexual orientation (<http://www.uscis.gov/tools/glossary/asylee>). They generally leave their home country and go to refugee camps nearby where they apply through the United Nations for refugee status. This is a long and arduous process, filled with multiple moves and interviews to verify the legitimacy of their claims. Once their claims are verified, they are sent to countries that have pledged to take in refugees, such as the United States.

Asylees are similar, except they don't go through official channels, instead appearing at U.S. Customs and Immigrations borders without immigration papers. According to the United States Citizenship and Immigration Services, an asylee is "an alien in the United States who is found to be unable or unwilling to return to his or her country of nationality, or to seek the protection of that country because of persecution or a well-founded fear of persecution" (<http://www.uscis.gov/tools/glossary/asylee>). They are moved from their points of entry to holding facilities until they are established as legitimate, non-threat asylum seekers. They are

then transferred to cities where they wish to stay with family or friends, or to cities that are able to take in more asylees.

Parolees are special in that they don't have the same visas as refugees and they are not automatically legal permanent residents. Unless they acquire this or citizenship, they are only allowed to stay in the U.S. until the reasons for their parole cease in their home country (<http://www.uscis.gov/tools/glossary/parolee>). The United States has opened its borders to Cubans and Haitians; however, logistically speaking, it is very rare to see Haitian parolees in Texas. Although refugees get extra stipends and housing assistance from the U.S. government, asylees and parolees do not. RST's job is to help all of these people start their lives over again in the U.S. through financial and housing assistance, employment services, ESL and American culture classes, and more.

In 2012, the United States took in more resettlement individuals than any other country in the world (Department of State 2013:3). This year, the United States continued this pledge of exceptionality by raising its acceptance ceiling to 70,000 refugees, asylees, and parolees for the fiscal year 2013 (4).

RST Austin has various short and long term programs to help get its clients back on their feet in their new homes, including the divisions with which I interned, Extended Case Management (ECM) and Human Trafficking.

Extended Case Management

The initial services at RST - which include among other things, job classes, English learning classes, resumé construction, monetary aid for initial arrivals and for those who are actively searching for jobs through RST's Employment Agency, appointments for clients' required vaccinations and physical exams at the Refugee Screening Clinic, and mental health

services - are only available for clients within their first 8 months of arrival. If the clients require further assistance, they can enroll in Extended Case Management (ECM) for an additional five years. ECM encompasses much of what the other departments do and applies to it to long-term scenarios. They also provide this assistance to recent arrivals as asylees or parolees, clients of other refugee resettlement organizations, human trafficking survivors, and secondary migrants from other states.

Clients who come to ECM are generally looking for help enrolling in programs like TANF (Temporary Assistance for Needy Families), Food Stamps (SNAP), Medicaid, or MAP (a low-income insurance program for those who do not qualify for Medicaid). They may also come to us looking for help enrolling in the Refugee Screening Clinic; applying for a Texas ID, Green Card, or EAD (employment card); or looking for assistance with housing, food, utilities, etc. Although we don't physically provide food or money to our clients, we refer them to services (such as the Refugee Cash Assistance Program) that may help them while also encouraging their own self-sufficiency.

Although ECM has a huge number of Cuban parolees, our clients also include Nepali, Tigrigna, Amharic, Karen, French, and Arabic speakers from a wide swath of countries across the Middle East and South East Asia. Most of the countries are unstable, in the midst of religious wars, ethnic conflicts, and/or civil wars. They may alternatively or additionally be repressive nations with ruling parties or ethnic groups oppressing or persecuting certain groups with which our clients are affiliated.

Because we are a federally funded program, we have many requirements that we must meet: we provide interpretation for any clients who speak languages other than English, provide

parenting classes or information sessions to clients learning to acclimate and navigate in America, and provide statistics and auditing materials to federal institutions when required.

In ECM, my duties included:

- working collaboratively with interpreters to provide accurate information;
- finding resources for clients in areas such as medical, financial, housing, and insurance assistance;
- compiling resources in a city-wide resource guide;
- providing Spanish interpretation or translation when necessary;
- calling clients over the phone (with or without interpretation) to remind them of appointments, to set up appointments, to ask them for information, etc;
- calling other programs and organizations for information on their services or to schedule appointments;
- compiling names, languages, and addresses for surveys, invitations, and other mailing notifications;
- calling Texas Health and Human Services to change client information, request information, and schedule and confirm appointments; and
- other services as needed to assist caseworkers.

However, my main responsibility was to conduct intakes with clients in order to process them into the ECM program and start assisting them.

Intake Interviews

All intakes have a base line format of paperwork, demographic questions, and a needs assessment. However, the vast majority of intakes are not so pure and simple; not counting asylees and parolees who come in needing complete resettlement services, we have some clients

who have family members still in their countries of origin, some who have complications with their services for a variety of reasons, and some who are homeless or who have been days without food. Then there are some who are more or less self-sufficient with only one or two items needed on our needs assessment list. Although clients are allowed to stay with ECM for five years after their arrival to the United States, most clients do not require additional services after six months.

In theory, intakes start with a copy of the referral form with the contact and demographic information on it, as well as the reason for their referral to ECM. The caseworker looks this over and copies it to an intake profile and asks for supporting documents such as passports, I-94's (immigrant arrival documents), social security cards, Medicaid cards, and other documents and proofs of identity. The caseworker then goes through paperwork with the client detailing their rights and responsibilities, confidentiality disclosures, 911 information, and a medical assessment. Then the caseworker will go through the needs assessment to determine what the client requires from ECM. Clients can come back at any time during their stay with ECM to add more needs to the needs assessment if necessary.

Since the goal of ECM is to move refugees toward greater independence, case workers must avoid doing too much for clients while working to help them learn to navigate complex bureaucratic processes for themselves. Although sometimes clients get frustrated and may feel like their caseworker is not doing the work required, caseworkers know that the independence their clients will take away will help them function in the United States on their own after they've left ECM. After all, they only have five years with us and although that may seem like a long time, when you plan on spending the rest of your life in America, it isn't long at all. How will these clients learn to function effectively without their caseworkers if they're not

encouraged to be independent? As such, home visits are not very common and people are urged to come into the office so they can learn better how to maneuver with American business practices as well as with everyday practices, such as riding the bus. However there are some cases where caseworkers do make house calls – mainly in situations where the client is not healthy enough to get to the office on their own such as an advanced age or pregnancy, disability, or bodily injury.

The needs assessment list is a fairly basic list of needs our clients generally require and then plans of action to meet these needs. These needs include but are not limited to:

- applying/renewing various medical insurance plans;
- applying or renewing food stamps;
- Refugee Screening Clinic referrals;
- Refugee Cash Assistance and Employment referrals;
- applying for an EAD or Green card;
- applying for a social security number or Texas ID;
- finding public, government, or subsidized housing or shelters;
- additional family services such as WIC or Gabriel Project;
- accessing rent or utility assistance;
- reconciling past medical bills;
- enrolling children in school;
- English class referrals; and
- accessing legal, medical, or mental health services.

Most of our clients need help with food stamps or Medicaid, although a large number also need help with housing and utility costs. Because the Health and Human Services

Commission of Texas (HHSC) provides both food stamps and Medicaid, there is a single application for these and related services, such as TANF and CHIP. Although the application itself is simple, sometimes it is a challenge to get the required documents from clients such as lease agreements, bank statements, and pay stubs. Generally the process of obtaining these documents requires multiple phone calls (usually with interpreters) and trips by the clients to drop off this paperwork.

What can be most trying is when caseworkers know the available resources, but are unable to help the clients due to the insufficient supply for the demand. This is especially true for family housing, which many clients request, but for which the waiting lists stretch into years. Caseworkers always warn the clients that there is a long wait and tell them exactly how long it will be, but there is still frustration on the part of the client when they so desperately need help and we are unable to provide it. As an alternative, I would suggest to my clients to enroll in utility and rental assistance programs and to call HHSC for a list of churches in their area that may be able to provide rent or utility assistance. However, these forms of assistance are a little harder to obtain than others and there are few options caseworkers can provide. This year, ECM submitted a proposal from its funding agencies for additional funds, specifically to form an emergency housing and rent assistance program. When I left, it was still undecided if ECM would get these funds.

The most important tool in intakes, I find, is empathy. Many clients come in frustrated or upset because they have hit walls trying to get help or have been struggling without food, shelter, and/or medical assistance. As part of my intakes, I made it a point to listen to my client's grievances or frustrations while remaining calm and empathetic. In the field of Social Work, it is important not to take a client's complaints personally. There is a practice called "Trust the

Process” which means that you must be confident in your abilities and that of your co-caseworkers and trust that you can get the project done, even if certain tasks may take more time or effort. If a caseworker is stressed or upset, he or she will have a harder time focusing on the needs of others and working to fulfill those needs. Taking that into account, I wanted to give my clients someone who would listen, especially since many come from backgrounds that necessitated that they hide their grievances or emotions. By listening, I was better able to understand exactly what the client needed rather than just throwing them into a mold created by the needs assessment list. For example, if a client were to come in for help reconciling medical bills and I didn’t ask him or her how he or she was feeling, I may not know if they have further resultant health problems for which I could send them to a free doctor. Or, if I don’t ask a client about his or her family, I may not discover that they support an ailing mother or father, qualifying them for additional benefits.

Similarly, I became a sound board for clients who were scared about certain aspects of American life. Listening to these concerns, I was able to alleviate some by providing information about the culture or practices that they didn’t understand or know. The caseworkers at RST are not just there to get the clients benefits, but to ease their transition both financially and mentally.

Special Immigrant Visas

A Special Immigrant Visa (SIV) is granted to individuals who work with the United States government in their countries of origin, and as a result are subject to ongoing or serious threat. They are allowed to bring their spouses and unmarried children under 21, but must leave behind all other relatives and children, putting them at risk. Only 50 applicants are accepted per year. SIVs are eligible for the same resettlement benefits as other refugees. However, as

violence escalates and the waiting list lengthens, many SIVs opt to forgo these benefits in order to flee their home countries.

I met a few such refugees during my time with ECM and each case was upsetting and frustrating for both the caseworkers and clients. Many times, these clients have nowhere to go and may spend nights out on the streets before they find out about or are able to get transportation to RST. These are emergency situations where caseworkers put everything else on hold and pool together resources to find these individuals or families shelter, food, and medicine as fast as possible. Despite their best efforts though, sometimes caseworkers are forced to tell these clients that they must stay in shelters until they or RST can get funding to get them hotel rooms or apartments. If it's a family, they must be divided by sex and placed into separate shelters, possibly across the city. We were, luckily, able to take care of the clients I worked with, but this is not always the case.

These clients, for me, are especially hard to work with, not because they are difficult clients, but because our government promised them security and then they are left destitute on the streets. They come in disillusioned and I struggle not only to provide the services they need, but also to give them hope that they did not sacrifice their lives, and that of their families, for nothing.

Human Trafficking

Human trafficking is a secreted crime in the United States; little exposed but shockingly present. According to the U.S. Immigration and Customs Enforcement, it is “akin to modern day slavery” whereby individuals generally pay to be illegally transported into the United States and then are forced into slavery, classified as either sex or labor trafficking (www.ice.gov/human-trafficking). Among RST's clients there is a fairly even distribution between the two with about

half of clients forced into the sex trade and half into labor. However, the majority of trafficked individuals are female, at least in RST's Survivors of Human Trafficking program. RST's clients mostly come from Central America, specifically Mexico, are both male and female, and range anywhere in age from young children to seniors.

Once a victim escapes and finds law enforcement, the victim must be interviewed and legitimized by a law enforcement agent in the United States. They cannot be identified in another country and then brought here later, or if they do they must apply for a Green Card just like every other immigrant (or possibly as a refugee if they feel they may be persecuted or unsafe in those countries). They are then sent to an agency like ours to receive financial assistance, food stamps, medical (mental and physical) assistance, counseling, and many other services that we offer our refugees. They are eligible for 9 months of services during which time we apply for their T Nonimmigrant Status Visas (T-Visas) to continue services.

T-Visas are special visas granted to human trafficking survivors identified in the United States, U.S. territories, or ports of entry. This allows the individual to stay in the United States and assist law enforcement with prosecuting their traffickers. However, if the individual is a minor or has been physically or psychologically traumatized, they are not required to assist law enforcement. Sometimes, these visas don't come in within those 9 months and then our clients are left in a gap where we can't help them, but they can't do anything on their own, many times resulting in them working and staying here illegally until their visas come in. Once their visas arrive, the clients can re-enroll with us and qualify for more benefits and support while they restart their lives. It can be very frustrating for caseworkers working with the time gaps in T-visas grants, but our office manages as much as possible, such as contacting charities that may be able to support clients in this political limbo.

The identities of these victims are protected much more closely than our usual refugees – using only initials as references, never names. Many of their traffickers are still trying to find them.

It is shocking to have lived in Austin the majority of my life and to never have had the slightest inkling that human trafficking could even be possible in my city. The overwhelming majority of our clients are found in Texas, with about $\frac{3}{4}$ found in Austin.

Our Survivors of Trafficking program has 15 clients and their families for a total of 36 people. 8 of the 15 clients are pre-certified, which means that they don't yet have a T-Visa, but they have made reports to ICE (U.S. Immigration and Customs Enforcement) about their situations.

If the family of a survivor remains in their home country, but is at risk either for physical harm by the traffickers, or is financially or medically dependent on the identified survivor, there is a program to reunite the family here in the United States. In the month of October, two parents were reunited with their children and now all of them are enrolled in our program. That is the crux of working for these non-profits: navigating the political necessities and jumps to be able to serve these people with the best of what they need. Even with standard refugees for whom the government is prepared and expecting, it is difficult. Sometimes our hands are tied, but the caseworkers at RST work very quickly and stay on top of things in order to use opportunities and options as soon as they're available or approved by the government.

Central Texas Coalition against Human Trafficking

Because Human Trafficking is such an under-recognized domestic crime, the Central Texas Coalition against Human Trafficking was developed to increase public awareness of trafficking as well as to identify trafficking cases. Directors and CEOs of various non-profit

organizations, Austin Police Department (APD) detectives and officers, and various caseworkers and other officials come together every month to exchange information, plan strategies and events, and unite forces against human trafficking and slavery.

The week I attended the Coalition against Human Trafficking meeting was Free Austin Week – dedicated to improving awareness of and actions against slavery in Austin. Throughout the week were conferences, lectures, and screenings. The entire week culminated in RST’s event, “An Evening to Honor Survivors,” reception and art silent auction where survivors supplied art and speeches. All profits went to the fight against human trafficking.

A variety of non-profit groups are regularly in attendance, creating new programs and resources which APD, District Attorneys, and others can use to help identify, protect, and rehabilitate survivors. These include groups such as Restore a Voice - a service that helps identify and rehabilitate domestic minors. There were a variety of wonderful groups that lifted off during Free Austin week as well, such as the Hope through Health Clinic. This clinic is a partnership with Seton and CommUnity Care that was founded because many survivors have never been to a doctor, don’t trust their doctor, or have general anxieties about the experience. The clinic is held in a house to alleviate some of these fears by providing a more comfortable and welcoming environment than an office does. It provides regular clinics, OB/GYNs, and mental health services. Another new group was Key2Free, a church-funded group that provides state-wide education and awareness programs, and is opening safe-houses across the state. There is a great need for safe houses; per 3000 victims, there are generally only 250 beds available. These safe houses will provide rehabilitation and education services for 2-4 girls per house for at least 24 months.

Where there are huge gatherings of men, trafficking generally becomes an even bigger problem and anti-trafficking groups must devise plans to combat the trafficking rings that spring up at many sports games and championships. Across the world, many anti-trafficking groups set up strike teams during these events to find and rescue any traffic victims that may be brought in. Austin now has such a strike force in response to the new Formula 1 Races at the Circuit of the Americas. However, because the Formula 1 races are generally only attended by the rich, the men who come bring their own women, attend strip bars, or deal with high-end escorts. As such, it is harder to find any trafficking rings if there are any in attendance.

The Coalition faces many problems, such as “How do you find a middle ground in alerting the public to the horrors many victims face without over-horrifying them and scaring them away?” and “What do we do with victims when we find them when the only safe houses we have are for long-term and they run away from temporary over-night shelters?”

It’s disheartening to know that many girls and boys are found and taken to shelters, but when left in these shelters overnight they generally run away, possibly recaptured by the world they had just escaped. Many traffickers will hunt down their victims, and it is difficult to find a place both where the individual is safe and where they feel safe. Although there are safe houses in other cities, they both won’t and can’t take individuals from Austin; they already don’t have enough beds for those they have found in their own cities. Austin is severely lacking in emergency housing for trafficking survivors, especially minors. There is hope for the future, however, as organizations such as Key2Free work to open emergency safe houses in the Austin area.

Social Work and Cultural Sensitivity

It is sometimes challenging to know that I have the tools to help a client, but can't necessarily give them to the client because of the unwieldy nature of state bureaucratic procedures and requirements. In addition, social workers are guided by a set of cultural values with which they are imbued, but which may differ from those of their clients.

Of course, these refugees are coming to a country with cultural values that are perhaps different from their own and must learn to acclimate and assimilate to these values and their related laws or else face punishment. Sometimes this becomes confusing for our clients. For instance, at the beginning of the required cultural orientation for newly arrived refugees, the class was told that it is against the law for people to discriminate against them based on their sex, age, ethnicity, etc. However, they were not given the distinction of between what is against the law in a civil case versus criminal offenses for which a person is arrested. When they were asked what offenses would get them automatically arrested and they responded with discrimination, they were confused when the guest police officer told them this was wrong. Ignorance of these laws and their applicability may contribute to the workplace discrimination that many immigrants, especially Arab- and Muslim-Americans, face (Malos 2010: 297-310).

Across the board, our clients who come from backgrounds most similar culturally to the United States have an easier time acculturating or assimilating. In her research on the acculturation of Arab-American immigrants to the United States, Mona Faragallah found that "Arabs affiliated with the Christian faith... may find life in the United States less challenging" than their Muslim counterparts who have to struggle in a society that not only has a strong Christian base, but also harbors a lot of discrimination against Muslims in general (1997: 182-183). It is a very difficult and trying experience coming to the United States as a refugee, asylee,

or parolee, but these and similar clients have an even harder time transitioning and assimilating or acculturating.

In a society where women and men are promised the same rights and social status, it can be difficult for clients who have previously lived without those promises to intermingle with others of opposite sex. Very commonly, I interacted with clients from cultures where women are not guaranteed the same social status as they are in the United States. Some of my female clients weren't supposed to touch men that were not their husbands, make eye contact, or talk in situations such as our intake interviews. It is sometimes very difficult to encourage a woman in these situations to speak to or confide in a caseworker about their individual concerns or problems of which their husbands may not be aware or concerned with. It may be equally as challenging to convince the wife/mother of a struggling family that she must also learn English and go out into the work force to support her family where her husband cannot. Some of our benefits programs or employers do not account for these factors. For many of our clients it becomes an issue of what is more important: providing for the family or honoring their culture and/or religion.

There may be a power imbalance between case workers and refugees as a case worker becomes a sort of cultural "broker" or arbiter of cultural values. In a Social Work training seminar with the Employment department, we were given the following scenario and asked to present a solution: A man whose religion does not allow him to touch alcohol accepts a job at a gas station where he will have to ring up alcoholic beverages for customers. Because the man is the sole provider in the family, he originally decides to waive this doctrine in order to work. However, after speaking to his wife, he determines that it would be unacceptable to take this position and tells his caseworker he wants to quit, violating his contract with RST and possibly

terminating him from the Refugee Cash Assistance program. As the caseworker, what do you do?

In this case, a solution presented involved the caseworker urging the client to take the job because, according to the contract each client signs, they have to take the first job offered. The caseworker should tell the client that his deity was indicating to him to take this job because it is the only one available. Another caseworker believed that it may be in the client's religious scripture that a man may touch alcohol or violate other edicts if it is the only way to provide for his family, thus reaffirming the caseworker's urging to continue the job.

In a similar scenario, what should a caseworker do if a client quits his or her job when he or she is scheduled to work on a religious day, even though previously being told they wouldn't have to? If the caseworker tells the client to go back to the job and sacrifice those religious edicts it would most likely result in the client's refusal and therefore the client's ultimate loss of Employment assistance.

These sorts of situations are difficult for an Anthropologist to assess because this now becomes an outside culture claiming authority and imposing its own cultural notions on another. While the client could come to the same conclusion, to interpret another's culture from a position of bureaucratic power is unethical; it is to take away a person's autonomy and their right to interpret their culture and/or religion on their own terms. Although the caseworker and client may come from similar cultures, a more Anthropological approach would be to direct the client to conclude this interpretation on his or her own, thus preserving his or her cultural and personal authority.

Unfortunately, in the current workplace many victims of national or religious discrimination go undefended. As in the case with the client refusing to work on a religious day,

employers are protected by *de minimus* burdens by showing undue hardship of this client's schedule on the employer to the courts (Malos 2010: 300). I heard some stories of women wearing hijab being told to remove them for work or they would lose their jobs. In this case, these clients were able to bring the problem to their caseworkers who then called the employers and refuted this claim. Others in similar positions who don't have this support or the language skills to combat these claims find it difficult to prove their cases (291-301).

However, there is still the issue of what to do in this sort of situation, where a client's job violates his or her religious or cultural values. The best solution presented was to take it a case-by-case basis; ask the client if they are willing to work despite their values. Perhaps even better would be to consider the clients' cultural/religious restraints as a sort of working limitation and search for jobs that won't go against them; just as they wouldn't find a construction job for a 70-year old or a night job for a mother with children. This is the most culturally sensitive solution that is also effective for the job market and clients would not be penalized for breaking their contract by refusing or quitting their job on moral grounds. This just proves how difficult it can be to navigate the values of differing cultures.

Knowledge of the cultural background of our clients allows caseworkers to interact with them in culturally sensitive ways and to understand some of where they're coming from. Of course, every person's experiences and perceptions are different, but knowledge of a shared culture will undoubtedly help ease their transition as caseworkers work with them.

Summary

Working with Refugee Services of Texas provides unique insight into the worlds of both Micro and Macro Social Work. Working on a day-to-day basis with clients individually allowed me to interact with people from cultures I knew little to nothing about. It introduced me to the

world of refugees and human trafficking, both spheres of which I had very limited knowledge. It also convinced me that to make the Micro world of Social Work more effective, there must be better policy change and implementation at the Macro level. The American public must be brought to greater awareness of Human Trafficking violations within U.S. borders. More case-by-case work is needed to preserve the autonomy and respect of refugees from the indifference of bureaucratic expediency. Policies need to be implemented at state and federal levels to protect refugees, particularly Arab- and Muslim-Americans against workplace discrimination. Through my work in Micro Social Work I was better able to grasp some ideas of what changes are needed at Macro levels to effectively serve the individual as well as the whole.

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