Overview

This research explores factors affecting integration among war-affected Arab refugees in the U.S. Two indicators of refugee integration including local language proficiency and social connections are examined as outcome variables. This study finds education, health status, and the U.S. length of stay as significant factors predicting these outcomes.

Learning Objective

1- To learn more about the positive dimensions of integration of war-affected Arab refugees, which has often been neglected
2- To increase the knowledge regarding the factors affecting integration of war-affected Arab refugees in the U.S.

Background: Between 2004 and 2016, more than 813,000 refugees arrived in the U.S. and 33 percent of them were originally from Arab countries (U.S. Department of Homeland Security, 2017). This population is understudied and highlights the importance of studying them. In general, the studies of refugee population have been frequently focused on negative aspects such as trauma and integration challenges (Betancourt et al., 2015; Bishop & Makki Alamdari, 2018). To address this gap, the current study examines indicators of positive integration.

The purpose of this study is to examine the association of post-migration stressors and demographics (e.g., gender, education, health status) in relation to refugee integration outcomes among war-affected Arab refugees in the U.S. For this study, domains of language and social connections (social bonding and social bridging) are considered integral parts of successful integration (Ager & Strang, 2004; Lichtenstein, Puma, Engelman, & Miller, 2016).

Methods: Data was collected using three inclusion criteria for participants: 1) age 18 and above; 2) war-affected Arab refugees living in the U.S.; 3) ability to read and write Arabic. The questionnaire included the following: Post-migration stressors were conceptualized as feeling of loss and perceived discrimination and measured using Demands of Immigration scale; Health status was measured using a self-report five-point Likert question; A question with eight options was used to operationalize education; Length of stay was measured using an open-ended question, “when did you enter the U.S.?” A question with three options was used to measure gender; Language was operationalized using a self-report five-point Likert question; Social connections were measured with two sub-scales of the Refugee Integration Survey and Evaluation. The questionnaire was translated into Arabic. Two pilot studies were implemented to ensure accuracy, relevance, and clarity of the questionnaire.

Recruitment took place in a Midwestern state through non-probability convenience sampling. The researchers contacted various places Arab residents frequently meet including refugee resettlement agencies, mosques, etc., and asked for permission to post the study flyer. After getting permission, the researchers went to the places to administer the survey on site. A paper-based survey was offered and completed in person in a group setting.

Results: Of 130 individuals who responded to the survey, the majority were from Syria (26.9%) and Iraq (22.3%), followed by Yemen, Palestine, Sudan, and Somalia. Around 60% were male. The average age was 41 years. Nearly 20% had an educational level less
than high school. One-third had high school diploma. Participants have been in the U.S. for average 8.6 years. More than 80% reported strong feeling of loss (missing home) and nearly 27% reported high level of perceived discrimination.

Multiple regression analyses were conducted for both integration outcomes. In the first regression analysis, social connections was an outcome variable and the regression model was significant (F(6, 106)=7.5, p<0.01). This model explained 30% of variance in social connections using variables of post-migration stressors, gender, education, health status, and U.S. length of stay. Health status (Beta=0.19, p<0.05) and length of stay (Beta=0.26, p<0.01) were significant factors in predicting social connections.

In the second regression analysis, English proficiency was an outcome variable; the regression model was significant (F(6, 107)=37.1, p<0.01). The model explained 68% of variance in language proficiency using the aforementioned variables. Educational level (Beta=0.62, p<0.01), health status (Beta=0.31, p<0.01) and length of stay (Beta=0.22, p<0.01) were significant factors in predicting language proficiency.

**Conclusion:** On a 5-point scale, the mean score of social connections was 2.7 (N=122; SD=0.8), and the average of English language proficiency was 3.6 (N=130; SD=1.2). These findings demonstrate that the level of social connections with people of the same and different backgrounds is not very strong among war-affected Arab refugees. The degree of language competency in the respondents is mediocre. The study also shows having a better health status and staying longer in the U.S. can increase social connections and language competency among the target group. Further, refugees with higher educational levels are more likely to acquire higher degree of proficiency in language. These findings are supported with the existing literature (Cheung, & Phillimore, 2012; Iversen, Sveaass, & Morken, 2014; Van Tubergen, 2010).

Improvements in refugee integration policy and practice are needed to enhance this group’s social connections and language proficiency, which consequently improves their well-being. In this endeavor, investing on this group’s health and education is beneficial. Given the importance of U.S. stay length, more service is also required at the earlier times of refugees’ arrival.

**References:**


