Clarifying Refugees v. other Immigrant\(^1\) (foreign-born, newly arriving) Populations

Who are Refugees?
- Per the Immigration and Nationality Act, a **refugee** is defined as a person who is outside his/her home country or country of residence and is unable or unwilling to return due to a **well-founded fear of persecution and lack of protection (on account of race, religion, nationality, political opinion, or membership of a particular social group)**. [Section 101(a)(42) of the Immigration and Nationality Act].
- **Refugees** (and asylees) are **incredibly strong survivors** whose perseverance and tenacity helped them through their long journey to the U.S., overcoming many obstacles, exposure to threatening situations, and often navigating complicated bureaucracies. Along their journey, refugees (and asylees) may often experience denial of basic rights, interruptions to work and education, loss of support networks, separation from their families, and displacement for extended periods in multiple relocations.
- **Many newly-arrived refugees have immediate healthcare needs upon resettlement**. Refugee displacement often means waiting 5, 10, or even more than 20 years, sometimes entire generations, **for a chance at resettlement**. Whether that time is spent in refugee camps or urban settings, sanitation, food supplies, and access to health care and social services are often limited.
- Newly arriving refugees (and newly-granted asylees) have **fled persecution** and are granted humanitarian admission and status under **U.S. government protection**.
- As **U.S.-citizens-in-waiting**, newly-arrived refugees (and newly-granted asylees) are able to pursue Lawful Permanent Resident status (LPR) and later, U.S. citizenship.\(^2\)
- **Refugees** (and asylees) are **children, families, youth, and adults of all ages, including LGBT\(^4\) populations**. Some refugees arrive as unaccompanied minors.

What is the U.S./HHS’ role in Refugee Resettlement?
- **Over the past 30 years, more than 3 million refugees have been resettled in the U.S.** (with more continuing to arrive every year).\(^5\) The U.S. Resettlement Program is managed by three separate Cabinet-level Departments: Homeland Security (DHS, created after 2001), State (DOS), and Health and Human Services (HHS). After DHS and DOS process incoming populations and determine admission status and placement, HHS’ Office of Refugee Resettlement (ORR) in the Administration for Children and Families (ACF) serves as a bridge to help with the initial transition of refugees through targeted funding and programs.

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\(^1\) **Note**: The terms “immigrant” and “alien” have a legal, technical definition that may differ from its popular use throughout mainstream communications (e.g., “immigrant” as an umbrella term for all foreign-born, newly arriving populations). For ex, the term “immigrant” technically refers to a person with Lawful Permanent Resident (LPR) status, evidenced by the Form I-551 (green card). The term “alien” means any non-U.S. citizen, which would include all LPRs, refugees, asylees, parolees, persons in the U.S. on a tourist visa, student visa, other non-immigrant categories, and those who are undocumented. For the purpose of this document & other talking points/outreach, ORR will be referring to “immigrants” as the umbrella term used in the mainstream (i.e., foreign-born, newly arriving).

\(^2\) **Note**: Applicants for refugee status are located outside the U.S., often in refugee camps operated by the United Nations (UN). Applications for U.S. refugee status are processed overseas by the U.S. Department of State (DOS) and Department of Homeland Security (DHS). U.S. asylum applicants apply from within the U.S. If approved, asylum status is granted by DHS, and in other cases by the Immigration Courts of the U.S. Department of Justice (DOJ).

\(^3\) **Note**: Newly-arrived refugees are **required** to apply for LPR status after 1 year, while asylees are **eligible** to apply after 1 year. Once LPRs, refugees are eligible to apply for U.S. citizenship 5 years after date of admission to the U.S. as refugees. Once LPRs, asylees are eligible to apply for U.S. citizenship 4 years after date of grant of LPR status.

\(^4\) Sexual and gender minorities such as Lesbian, Gay, Bisexual, and Transgender (LGBT) populations

\(^5\) **Note**: This number is specific to refugee populations and does not include asylees/other resettlement populations served by ORR.
ORR provides time-limited resettlement benefits and services for newly arriving refugees as well as the following populations: Asylees; Cuban-Haitian Entrants; Certified (foreign) Victims of Human Trafficking; Certain Amerasians from Vietnam; and Special Immigrant Visa (SIV) holders from Iraq and Afghanistan.6

What is the Intersection between Refugee Resettlement & Health/Human Services?

- Unlike other non-U.S. citizen populations who are barred from accessing public benefits for 5 years, **refugees and the other abovementioned resettlement populations may immediately access mainstream public benefits** (for those who are categorically eligible), including Medicaid, CHIP (Children’s Health Insurance Program), TANF (Temporary Assistance for Needy Families), SSI (Supplemental Security Income), and SNAP (Supplemental Nutrition Assistance Program).

- ORR strives to **facilitate successful long-term integration** by connecting and increasing refugees’ access to critical resources as they seek to rebuild their lives in the U.S.—particularly since they’re expected to immediately work upon arrival to become economically self-sufficient. Ensuring timely access to health care and social services is essential. In order to promote refugees’ health and socioeconomic well-being, **it is crucial to connect them to mainstream resources as soon as possible.**

- **Although highly resilient and resourceful, many face distinct challenges during their transition to the U.S.** such as learning English, a new culture, social norms, and systems (i.e. financial, transportation, health, human services, housing, child care, education, food, legal, etc.). As new members of the U.S. society, **refugees can benefit greatly from access to culturally and linguistically competent systems.**

- Refugee resettlement is intended to occur in close cooperation and consultation with federal, state and local entities. As part of the U.S. population who qualify for federal/state public health and social service benefits—and mostly represent racial and ethnic minorities—**refugees and other resettlement populations are part of a government and community-wide, shared responsibility for underserved and underrepresented populations.** This is why key partners across sectors and shared services agencies are crucial for ensuring successful U.S. resettlement and long-term integration7.

- **In partnership, we can all support our nation’s humanitarian commitment,** as well as the Administration8 and federal government’s efforts to promote refugee and immigrant integration across mainstream federal, regional, state, and local programs and initiatives. **Serving refugees requires a government and community-wide engagement across this nation,** particularly for programs and agencies responding to the health, education, and human service needs of low-income and underserved populations.

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6 Note: For the purpose of this document and other talking points/outreach, ORR will often use the term “refugee” to encompass all of these populations as listed here. The majority of these other populations are also U.S.-citizens-in-waiting except for certain exceptions. Regardless of their individual immigration status, all of these populations can receive resettlement benefits and are also eligible for mainstream federal public benefits (per categorical eligibility).

7 Note: Integration refers to increasing access to services and opportunities to thrive/achieve potential in new country (not to be mistaken for assimilation)