

1986

# An education, employment and health needs assessment of Southeast Asian refugee women living in Central Iowa

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**Dhawan, Gita**

**AN EDUCATION, EMPLOYMENT AND HEALTH NEEDS ASSESSMENT OF  
SOUTHEAST ASIAN REFUGEE WOMEN LIVING IN CENTRAL IOWA**

*Iowa State University*

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An education, employment and health  
needs assessment of Southeast Asian refugee  
women living in Central Iowa

by

Gita Dhawan

A Dissertation Submitted to the  
Graduate Faculty in Partial Fulfillment of the  
Requirements for the Degree of  
DOCTOR OF PHILOSOPHY

Department: Professional Studies in Education  
Majors: Education (Curriculum and Instructional Technology)  
Education (History, Philosophy and Comparative Education)

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Iowa State University  
Ames, Iowa

1986

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## INTRODUCTION

The twentieth century has been called the "century of refugees, prisoners and homeless man" (Beyer, 1981). The number of persons permanently displaced for political, religious or economic reasons resulting in wars, revolutions, division of countries, annexations and treaties, and eventually terminating in refugees is startling (Beyer, 1981; Cohen, 1981). The 1980 world refugee survey published by the U.S. Committee for Refugees has placed the worldwide refugee population close to 16,000,000 persons (Cohen, 1981). During World War II (1944-46) nearly 40 million civilians were forced from one place to another. Since 1945 an additional 60-70 million people have become victims of forced migration (Beyer, 1981). Thus, during the first half of the twentieth century, more than 100 million people of the world's Northern hemisphere left their homelands or were forcefully separated from it. For instance, since 1948 approximately two million Palestinian refugees have dispersed over Lebanon, Syria, and Jordan in the Middle East. Since 1967, another 680,000 refugees are in the Gaza strip and West Bank territories occupied by Israel (Beyer, 1981).

A brief review of recent developments in the world refugee situation during the latter half of the twentieth century seems to indicate that primary refugee problems have come to be concentrated in three general locations in the world: Latin and South America; Sub-Saharan and South Africa; Southwest, South and Southeast Asia. In Sub-Saharan Africa, the Sudan has become host to an estimated 665,000 refugees, the majority of

whom are from Ethiopia. Also, there are approximately 21,000 Sudanese refugees of rural background in Ethiopia's Gambela and Ganduar areas. Another 10,000 Sudanese refugees are in Ethiopia's Illubar region (Date-line, 1984). In Southwest Asia, Pakistan has been host to approximately 3 million Afghan refugees. Another 500,000 Afghans are in Iran (Date-line, 1984). In South Asia, the influx of Tamil refugees from Sri Lanka who have come to India since early February 1985 has gone up to 13,240 (Times of India, 1985). From Southeast Asia (Vietnam, Laos and Cambodia), since 1975 approximately 6.2 million Southeast Asian refugees have sought shelter in the United States alone (Iowa Refugee Service Center, 1983).

#### Background Information

The war in Southeast Asia (which formally ended on April 30, 1975), was followed by an exodus of millions of people from their homelands in this area. It caused millions of people from Vietnam, Laos and Cambodia (now Kampuchea) to flee their countries with centrifugal force and to seek shelter in other countries. (See Appendix A for geographical location of Southeast Asia.) From this area refugees moved in all directions. For instance, there has been an exodus of millions of people into Australia, Canada, France and the United States (Iowa Refugee Service Center, 1983). On the other hand, the tremendous flow of refugees spilled over into the neighboring Southeast Asian and East Asian countries. (See Appendix B for Southeast Asian Refugee Population in Southeast and East Asia.)

From an estimated 6.2 million Southeast Asian refugees who have sought haven in the United States, approximately 8,700 have been resettled in Iowa (Iowa Refugee Service Center, 1983). (See Appendix C for Southeast Asian Refugee Population in the United States.) These people have come from three distinctly different countries: Vietnam, Laos and Cambodia representing different cultures with different languages and different histories.

Vietnam, on the East or right-hand side of the Indochinese Peninsula, stretches along the coast with Hanoi in the North and Saigon in the South. (See Appendix A.) A tortuous border, marked in many places by mountains, divides it from inland Laos, which also stretches from North to South along the peninsula. The Mekong River runs along most of the border between Laos and its neighbor Thailand before entering Cambodia and Southern Vietnam, providing the fishing and irrigation upon which the people of the area depend for their livelihood (Chang, Lie & Yee, 1980).

The history of Laos is believed to be 2,700 years old. Laos was created as a nation by the French in late 1800s. It is a landlocked Southeast Asian country, deeply Buddhist, consisting mainly of densely forested hills and mountains. The majority of the population lives mainly in the river valleys, primarily involved in agrarian pursuits (Laos, 1978). Originally, Laotians were a group of people living along the Yangtze River in South China and shared border with Tibet. Their land also included the areas of Assam in India, Northern Burma, and stretched as far South as Malaysia. Before the war (which lasted from March 1970 to April 1975), approximately 50% of the population in Laos

were ethnic Lao and 50% were tribal groups, the largest of which were the Hmong, Tai Dam, Upland Lao and Kha (Mosher, 1985; Chang, Lie & Yee, 1980). The dominant culture and language in Laos was closely related to those of the Northeast and of the North Thailand, which was also once a part of old Lao kingdom (Laos, 1978). The United States' involvement in Laos was primarily military. Laos played the role of a buffer state between the East and West of the Indochinese peninsula. Thus, during the 1970-1975 Vietnam war, Laotian refugees were the victims fleeing the war and the mass destruction of their countryside caused by the strife between the American and Saigon forces.

Cambodia is the remnant of a once mighty empire, which some seven-hundred years ago, stretched across much of the Lower Mekong River Valley. It is not easy to trace the origin of the Cambodian people. They seem to be the result of the union of local tribesmen with successive invaders and immigrants from India, Indonesia, Java and China. The period between 802-1432 A.D. is considered the peak of their Khmer empire. Often, it is referred to as the "period of greatness" or the "Angkor Period" or the "Golden Age". During this Golden Age, there were high achievements in culture, arts, and temple building. Now Cambodia has shrunk into a tiny Southeast Asian country. (See Appendix A.) The country is rich in agricultural land and fertile soil. It is underpopulated and shows the strong influence of the Buddhist religion (Chang, Lie & Yee, 1980).

The people from these three countries are dissimilar in many ways. They have come from different geographic areas, such as seacoast vil-

lages, rural mountain farms and modern cities. They represent various professions such as doctors, government workers, fishermen, lawyers, and laborers (Chang, Lie & Yee, 1980). They also come from different ethnic backgrounds; five of these include the Tai Dam, Vietnamese, Laotians, Cambodians and Hmong (Iowa Refugee Service Center, 1983).

For instance, the Laotian refugees number more than 70,000 from different parts of Laos with different cultural, educational, social and economic backgrounds. They are comprised of the Highlanders (such as the Lao Hmong and the Khmer) and the Lowlanders (such as the Lao, the Red Thai, and the Black Thai).

The Hmong are an important minority group which migrated to the Uplands of Laos from South of China, most of them descendants of coolie laborers (Mosher, 1985; Vang & Smalley, 1979). Since there was no competition for land on the mountains, they established themselves in small villages in Xieng Khouang province (which is largely a plateau with an altitude of 4,000 feet). In 1890, the French gained control of the region, and they became subject to the French colonial tax system which was based on population rather than income. The Hmong achieved economic strength through the cultivation of opium poppy. Later, they earned for themselves the reputation of guerrilla fighters because of their revolt over the French tax system and their involvement during World War II in fighting back the Japanese (Vang & Smalley, 1979). In the mid-60s approximately 15% of the Laotian population were Hmong. They were the largest of the minority groups to flee Laos. About 1,300 Hmong live in Iowa, mostly in and around Des Moines, Davenport and Ottumwa (Stout, Reilly, & Nelson, 1983).

Another ethnic group from Laos resettled in Iowa are the Tai Dam. Approximately 4,000 Tai Dam have settled in over 60 Iowa communities. The ethnic and geographic origins of Tai Dam people remain unclear. With the division of Vietnam into North and South, the Tai Dams are believed to have migrated from the Northwestern area of North Vietnam (Sip Song Chu Tai) to Laos. Later, with the fall of Saigon in 1975 and with the overturning of political and social structures of Laos, the Tai Dams fled to refugee camps (Stewart, 1985; Reilly et al., 1983).

Cambodia entered the war during the last phase of the Vietnam war, after being associated with the United States. From an estimated 6.2 million Southeast Asian refugees admitted to the United States, the Cambodians number only 5,000. Most of them are resettled in the North West, the West Coast, or the East Coast in the Washington, D.C. area.

Vietnam is a long strip of land extending from North to South in an "S" shape. The North is bounded by China, the South and East by the Pacific Ocean, and the West by Cambodia and Laos. It used to be called Cochinchina or "peninsula". It has three distinct regions--North, Central, and South. All of it is tropical and agricultural. About 85% of the Vietnamese people are either Buddhists, Confucianists or ancestor worshippers.

Being of different cultural backgrounds, these refugees, the new American immigrants, have had many needs. They need to adjust to their new homes and environment; to become financially self-reliant; and to learn the English language. They have educational needs as well as a need to adapt to the American ways and customs. The adjustment process,

however, has not been easy for them (Safrin, 1980). Therefore, to assist in meeting these needs some assessment should be made. An accurate account of these needs can only be assessed through scientific inquiry. But to date, the literature reviewed seems to indicate that a systematic and scientific assessment of the needs of these refugee women living in the state of Iowa, has not been conducted. Hence the purpose of this study was to conduct an education, employment and health needs assessment of the Southeast Asian refugee women living in Central Iowa--specifically the Des Moines metropolitan area.

#### Southeast Asian refugee situation in the United States and Iowa

In the Spring of 1975, an Interagency Task Force for Indochinese Refugees was established in the United States. The agency was assigned the responsibility of coordinating the work of various governmental agencies. Four refugee camps were opened in the Continental United States; they housed refugees for eight months while sponsors were being located for them (Stein, 1979). No refugee was released from those camps without a sponsor. Most of the refugees were sponsored by either religious congregations or refugee resettlement agencies. Some refugees were also sponsored by individuals. The sponsors undertook the task of assisting the refugees with jobs (primarily blue-collar), housing and acculturation (Stein, 1979). A few vocational-English training programs were also established. However, these programs did not have provisions for transferring the skills and training of the more skilled and educated refugees.

In March 1980, the United States government through the Department of Health and Human Services established offices of Refugee Resettlement throughout the United States (Refugee Act of 1980). These offices were basically assigned two responsibilities: One, they were authorized to develop and administer programs on education and training, job training, English usage, and provide for specific needs. Two, they were authorized to administer funds and programs of the Federal Government.

Upon arrival in the United States, the majority of these people settled along the West coast, particularly in California and Washington where they first landed (Andrews, 1979; Choung, 1981; Tran, 1983). These Western states already had a significant Asian immigrant population. Moreover, the climate was favorable to the new refugee immigrants because it was similar to that of their Asian homeland (Andrews, 1979; Choung, 1981; Tran, 1983). While the Western states continued to have the largest number of Southeast Asian refugee families in America, the state of Iowa became unique in that over 90% of the Tai Dam refugees came to live in it (Choung, 1981; Iowa Refugee Service Center, 1983). This occurred perhaps because Iowa was the first state to respond to their plea for resettlement. This response was followed by the recommendations of then governor Robert D. Ray to grant them refugee status in the state (Iowa Refugee Service Center, 1983).

In September 1975, the Governor of Iowa's task force of Indochinese (used interchangeably with the term Southeast Asian refugee) resettlement was created. The Iowa Refugee Service Center, as it was later called, in cooperation with the U.S. Department of State resettled approximately



8,700 Southeast Asian refugees in the state by the year 1983 (Iowa Refugee Service Center, 1983). Newly arriving refugees entered the state from overseas refugee camps at an average rate of 110 per month (Iowa Refugee Service Center, 1983).

As of January 1985, the estimated population of Southeast Asian refugees in Iowa by ethnic group was as follows (Grimrine, Education Coordinator, Iowa Refugee Service Center, Personal Communication, 1985):

Laotian	2,000	Vietnamese	2,300
Tai Dam	2,500	Cambodians	400
Hmong	1,400		

The Des Moines greater urban area contained approximately 3,000 Southeast Asian refugees from all ethnic groups, mainly Vietnamese (and Chinese-Vietnamese), Laotian, Hmong, Tai Dam and Cambodians. Due to refugee mobility and migration, there are no complete statistics available pertinent to age, sex or exact number of refugees in Iowa (Iowa Refugee Service Center, 1983). However, nationally, 80% of the refugees are under the age of 35 years. The Iowa Department of Social Services reports that 68% of the refugees receiving medical assistance are under the age of 25 years and 52% are males.

#### Statement of the Problem

Since their arrival in the United States, the Southeast Asian refugee women have adjusted to a variety of new cultural traditions, many of which are quite different from those previously familiar to them. Due to the various pressures (social adjustment, acculturation), some have

changed their names, ideas, ways, religion and even the contour of their noses--sometimes out of genuine belief, but usually out of courtesy and an irrepressible desire to please (Safrin, 1980). Above all, the language barrier has represented the most obvious obstacle to their American adjustment process (Lischwe, 1983; Stein, 1979; Safrin, 1980).

For these women, adjustment to life in this new land has been especially hard due to differences in cultural traditions and ties. They are drawn between the need to belong to their present commitments and a pull to remember their past ties, a need to adapt to their new country and a desire not to lose their identity with the past along the way (Safrin, 1980). They are affected in different ways by this pull toward duality. Psychological factors of depression in adjustment were studied by Dr. Minora Masuda at the University of Washington in Seattle. She found a depression factor in adjustment and also that the survivor's depression lasts longer in women than in men. The study points that:

The refugee woman has to play two roles that are new to her ... she has to be a wage earner, and at the same time, because the traditional head of the family has been so displaced, she has to be the family keeper, the person who holds everyone together ... (Masuda in Safrin, 1980, p. 169).

Unfortunately, the resources available to the Iowa Refugee Service Center to help these women have been limited. Hence, the center's main goal and philosophy has been to maximize self-sufficiency among the refugees and to place them in jobs (Iowa Refugee Service Center, 1983). Thus, the thrust of the Iowa Refugee Service Center has been employment of the refugee men and women through statewide employment projects such as Vista and Job Placement Project (Iowa Refugee Service Center, 1983).

Other major services offered by the Center have included health services, immigration status services, financial assistance, volunteer tutor programs and education services.

Because language has been the main barrier to adjustment, most of the programs and services have concentrated upon teaching English as a Second Language. Since its inception, the Iowa Refugee Service Center has been networking with various educational services (such as Hawthorn Hill Community Center and Woodland Willkie Community Center in Des Moines) to help the Southeast Asian refugees learn the language. In 1979, an ESL program--English as a Second Language--was started at the Iowa Refugee Service Center through Volunteer Tutor Programs with the aim of taking the Southeast Asian refugees up to fourth grade level. Since 1975, the Iowa Department of Public Instruction through its Adult Education Service has been trying to serve the English usage needs of the refugees (Iowa Department of Public Instruction, 1981). Throughout its Programmatic Assistance and Financial Assistance, the Iowa Department of Public Instruction has been coordinating efforts to enable adult refugees, especially women, to acquire the skills necessary to function in American society and to contribute to their employability (Iowa Department of Public Instruction, 1981).

In 1982, the Governor's Office of Volunteers in Iowa began and developed the Iowa Literacy Program as a result of U.S. Census findings. The 1980 U.S. Government census found that, excluding the refugees, there were 18,741 illiterates in Iowa (U.S. Government Census, 1980). The ESL refugee students were assigned into the state literacy program which uses

Laubach Literacy Action as one approach to reduce adult illiteracy in the state.

Over and above the language barriers, the problems confronting these women are tremendous. They face additional difficulties as consumers, in parent-teacher relationships at school (due to cultural differences), and in the demand of various social and community roles. A wall of isolation builds between parents with old ideas and traditions and the child with new cultural orientations (Heggens, Health Specialist, Iowa Refugee Service Center, Personal Communication, 1984).

... many refugee parents feel alienated in this country, especially as they watch their children gaining acculturation in the schools ... many parents grow despondent over the changes, and some may abuse their children out of frustration ... (MacKay, 1982, p. 98).

For some Southeast Asian refugee women, the strange encounter with technology (such as cooking with gas or electricity; washing and working with machines; daily travel in cars, buses, trolleys; communicating with telephone, radio, television; refrigerators; et al.) has been baffling since many of them were accustomed to simple, peaceful, rural living. For others, the technology has been less strange and shocking than the culture, values and everyday American habits. Interpersonally, "They are puzzled by the American dating game, by the divorce rate, by the ordinary sound of a wife's disagreeing with her husband" (Safrin, 1980, p. 162).

Moreover, the language barrier has worked both ways. The program and adjustment volunteers and the helpers do not speak or understand the languages of the Southeast Asian refugee women either. Despite the relentless efforts of the various agencies and organizations to help the

refugees in their adjustment process, there remains a big void in the life of these women. If there is to be significant help and programs provided, there is a need for facts and basic information. Hence, there has been an urgent need for a scientific inquiry regarding the needs of these women and the development of a program geared more adequately to their identified needs.

A review of the literature suggests that ever since the Southeast Asian refugees first arrived, most of the literature that has been published about them in the United States, has had as its basic purpose the education of the volunteers, teachers and sponsors. The available literature on Southeast Asian refugees can broadly be classified into four categories. The first category of available literature includes freelance articles concentrated on "tips" from teachers on how to help the non-English speaking children to adjust to school, as well as advice on how to handle these children (Arnold, 1982; MacKay, 1982). In the second category are journalistic articles with background information on Southeast Asia (specifically Indochina)--history, geography, politics, cultural traditions, ethnic background, etc. (Chang, Lie & Yee, 1980). The third large category of literature seems to concentrate on English as a Second Language--ESL (Vang & Smalley, 1979). Again, these articles also appear to be freelance, written by personnel in ESL centers, church organizations, and agencies for ESL volunteers. These articles seem to concentrate upon major differences and similarities of the various Indochinese languages and English language, as well as major features of the Indochinese languages. The fourth category of articles may be classified

as those based on scientific inquiry with the view of providing some insight on how to assist the refugees with a better and faster adjustment (Kelly, 1980; Hunter and Nguyen, 1977). The primary purpose of these studies seems to have been to provide some insight on how to assist the refugee children and adults with a better and faster adjustment.

So far, based on scientific inquiry, no study has been conducted in the state of Iowa that has investigated the various needs of these refugee women (Hunter and Nguyen, 1977; Mohd-Nor, 1982). However, six research studies on Southeast Asian refugees in Iowa have been located. In 1977, Hunter and Nguyen conducted a study which investigated the Vietnamese education system and made comparisons with the U. S. education system. The purpose of their study was to assist American educators in the placement of refugee children at comparable levels in American schools. The objective of the second study was to inquire about the social network relationships of Vietnamese male refugees resettled in Des Moines (Mohd-Nor, 1982). Lischwe (1983) assessed the employment status, skills and job preferences of Southeast Asian refugee women living in Northeast Iowa. The other three studies focused on the health care delivery system of Tai Dam refugee women. Bell (1984) investigated the attitude of Tai Dam refugee women towards disease causation; Stewart (1985) studied the attitude of Tai Dam refugee women towards food and dietary prescription for pregnant and lactating women; and Scott (1985) studied the attitude of Tai Dam refugee women towards social change and acclimatization.

The results of the Stewart (1985) and Lischwe (1983) studies are of particular significance. Stewart's study (1985) assessed the health needs of pregnant and lactating Tai Dam women. She found that those individuals with the most educational exposure were often more aware of nutrition and health consequences to both mother and child during pregnancy as well as during lactation than were those with less educational exposure. The results of Lischwe's study (1983) indicated that the need for employment among the refugee women was critical. Furthermore, the study found that those women who had received some schooling in their home country tended to be less attracted to skilled, manual and agriculture-related jobs. They preferred positions requiring more sophisticated skills and those offering opportunities to learn and advance.

Hence, succinctly stated, approximately 8,700 Southeast Asian refugees are resettled in Iowa. The primary function of the Iowa Refugee Service Center has been to provide employment for those families. Various organizations and agencies within Iowa have been trying to service the ESL needs of the refugees. The Southeast Asian refugee women, however, have specific basic needs--education, employment and health--which to date, have not been addressed scientifically. Thus, the purpose of this study was to conduct an education, employment and health needs assessment of Southeast Asian refugee women living in the Des Moines metropolitan area. The data collected were then analyzed for statistically significant differences from what is considered basic for education, employment and health needs among 5 ethnic groups of Southeast Asian refugee women.

Rationale for the study

There are five major reasons for studying the needs of Southeast Asian refugee women living in Central Iowa. They are: one, America as a society seeks to address the needs of its populations; two, such needs should be scientifically assessed; three, instructional strategies should be formulated based on the needs assessed; four, these needs should be correlated with those of all other cultures in Iowa; and five, the usefulness of the intercultural contribution should enhance greater understanding of Asia.

The first of these concerns is that America as a society seeks to address the needs of its population.

... for a long time after physical resettlement ... assistance of one form or another will be required by all refugees .... [Their] problems ... are not short-ranged nor superficial. Many ... problems such as health, social adjustment, economic stability, and personal realization have not been examined .... In this endeavor, education naturally plays an important role ... (Hunter & Nguyen, 1977, p. ii & x).

Educational adaptations are required. Since American society seeks to address the needs which are significant to its population, society's professional educators assume some very special responsibilities towards groups such as these women. To successfully carry out these responsibilities, educators seek to appreciate and understand not only the cultural diversity of people but also their needs and problems (Hunter & Nguyen, 1977). It is essential that the educators

... analyze the needs, incorporate the educative and cultural elements, learning styles, and values of diverse cultures in curriculum development, program scope, course content, and teaching procedures ... (Hunter & Nguyen, 1977, p. xiii).



Moreover, in order to demonstrate and acknowledge the multicultural elements of their education, it is essential to understand the needs and problems of the people. Smith (1984) reported on a state-of-the art study of school teachers and found them to be the least competent group in the field of multicultural education and intercultural relations. On a scale from 0 (least competent) to 5 (most competent), school teachers rated 1.8. Those who educate teachers (teacher trainers) at universities and colleges scored 2.7. In terms of ideal intercultural education programs, only 5 of 17 evaluation criteria (such as objectives, methods, theory, evaluation) scored a ranking higher than 2.5. Unfortunately, a review of the literature indicates that in the case of Southeast Asian refugee women in Iowa, a scientific assessment of their needs and problems has not been conducted so far (Grimrine, Education Coordinator, Iowa Refugee Service Center, Personal Communication, 1984; Heggens, Health Specialist, Iowa Refugee Service Center, Personal Communication, 1984; Hunter & Nguyen, 1977).

Second, since the "melting pot" concept has changed from its original position of melting away cultural differences, recognition has to be made of them (Michaels, 1985; Lee Yao, 1983). Ethnic cultures are endemic to the American society, exerting resistance to change or eradication. Today, 4.1 million people are Asian Americans. (See Appendix D for 1980 U.S. Census of Asian and Pacific Islanders.) The majority of them are Chinese, Japanese, Koreans, Filipinos and Asian Indians (Michaels, 1985). Their influence is having a growing grass-roots impact. Consequently, minority group problems are national problems of

the United States. They affect all Americans, the majority as well as the minority. Hence, the importance and value of understanding the needs and problems of America's latest minorities--the Southeast Asian refugee women (Lee Yao, 1983).

Third, the demands for new instructional materials and programs for ethnic minorities have not been widely met (Majumdar, 1985; Lee Yao, 1983).

Asian Americans, one of America's most diverse and interesting ethnic groups, are rarely systematically studied ... nationwide ... one of the major reasons is the lack of knowledge ... and applying this knowledge ... (Lee Yao, 1983, p. 88).

Unfortunately, a lack of interest by American people in general and even open hostility in the mid-1970s towards the incredible human drama and sufferings of the Southeast Asian refugees, is an example of such a state of affairs (Mohd-Nor, 1982). Even scholastically, their sufferings have caught little attention from scholars because

... research pertaining to the plight of the refugees, in most instances, does not fit naturally into a distinct category; it does not form a ready-made field of study. For example, it lacks a theoretical structure, a systematic body of data, and even a firm definition of the subject. There [has] been little success in learning from past experiences and little added to the cumulative body of knowledge on the subject (Mohd-Nor, 1982, p. 15).

Additionally, either because of unwillingness or inability, research in the past about the Southeast Asian refugees has simply addressed symptoms and offered palliatives to refugee needs and problems (Mohd-Nor, 1982). A scientific and systematic inquiry examining the needs of the Southeast Asian refugee women was thus warranted.

The fourth reason for this study was that Iowa has a deep and diverse ethnic heritage (Westphal, 1985). (See Appendix E for Birthplaces of some Foreign-born Iowans.) Since the European migration of the 1800s, Iowa's foreign-born population has been on the rise. Between 1970 and 1980, Iowa's foreign-born population increased by 15% (Westphal, 1985). In these ten years, the number of Asian-born Iowans has increased from 2,800 to 12,400, led by immigrants from Vietnam, Korea, and India, who have settled in the state. Thus, economic and cultural contact between Asia and America has never been greater.

The fifth reason for study in this area is the growing importance and influence of the Asian continent in world affairs. Both directly and indirectly Asia is having an impact on the American curriculum and life (Fersh, 1978; Dim, 1984; McBee, 1984). Asian student enrollment has increased 250% nationally, representing 745,000 students in elementary and secondary schools in 1980 (Smith, 1984). Hence, it is important to recognize their qualitative impact as well as seek solutions to their problems through greater sensitivity (Oxnam, 1984). David Sue very eloquently puts forth the argument

... many Americans feel that Asians are a "successful minority"--that we have no problems in this society. Indeed we are often used as an example for other minority groups to emulate. On certain indexes, such as education, I think we are doing well. On others, such as job opportunities and personality growth, there is much room for improvement. We could be more appropriately labelled the "silent minority", for ... [we] rarely utter sentences of dissatisfaction. The white society equates our silence with satisfaction (David Sue in Fersh, 1978, p. 149).

But this "model minority" myth creates a misleading myth and obscures the problems of the Southeast Asian refugees.

Hence, based on the aforementioned rationale for research in this area, this study was undertaken with the general purpose of conducting a needs assessment of education, employment and health of the Southeast Asian refugee women living in Central Iowa--specifically the Des Moines metropolitan area. The data collected were then analyzed for statistically significant differences for education, employment and health needs among the five ethnic groups of Southeast Asian refugee women.

### Objectives

Specifically, the objectives of the study were:

1. To identify and analyze the educational needs of the Southeast Asian refugee women living in the Des Moines metropolitan area.
2. To identify and analyze the employment needs of the Southeast Asian refugee women living in the Des Moines metropolitan area.
3. To identify and analyze the health needs of the Southeast Asian refugee women living in the Des Moines metropolitan area.

From these basic ideas and objectives, three research questions were formulated regarding education, employment and health needs of one hundred and fifty Southeast Asian refugee women representing five different ethnic backgrounds. These questions were:

1. Is there a significant difference among Tai Dam, Laotian, Cambodian, Hmong and Vietnamese women regarding their educational needs?
2. Is there a significant difference among Tai Dam, Laotian, Cambodian, Hmong and Vietnamese women regarding their employment needs?
3. Is there a significant difference among Tai Dam, Laotian, Cambodian, Hmong and Vietnamese women regarding their health needs?

From these 3 research questions, 12 hypotheses were formulated concerned with education, employment and health needs of the Southeast Asian refugee women.

#### Hypotheses concerned with education needs

Hypothesis 1: There will be no statistically significant differences regarding satisfaction with ESL classes among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 2: There will be no statistically significant differences regarding the difficulty in attending ESL classes among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 3: There will be no statistically significant differences regarding the perception of the quality of school life for children among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 4: There will be no statistically significant differences regarding parent-teacher conference assistance needs among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 5: There will be no statistically significant differences regarding school curriculum assistance needs among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypotheses concerned with employment needs

Hypothesis 6: There will be no statistically significant differences regarding job contentment among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 7: There will be no statistically significant differences regarding the perception of job skills for their present jobs among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 8: There will be no statistically significant differences regarding the perception of job training programs among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypotheses concerned with health needs

Hypothesis 9: There will be no statistically significant differences regarding the perception of health status among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 10: There will be no statistically significant differences regarding the availability of medical care among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 11: There will be no statistically significant differences regarding the availability of dental care among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 12: There will be no statistically significant differences regarding the comprehension of medical instructions among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

#### Definitions/Description of Terms

##### Refugees

Though many descriptions/explanations are available for the term refugee, according to the Statute of the Office of the United Nations High Commissioner for Refugees (UNHCR), a refugee is a person who

owing to a well founded fear of persecution for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, unwilling to avail himself of the protection of that country (United Nations, 1983, p. 73-74).

Regardless of the above definition refugees may share some common characteristics with immigrants. The major categorical differences are that refugees are involuntary migrants who flee their country unprepared

because they have been pushed away from their home country. They leave their homes with the realization (and possibility) of no return. Immigrants, on the other hand, are voluntary migrants. Their sojourn is well planned because they have been pulled away by a land of promise. Moreover, they have the option to return home at a time convenient to them.

For purposes of this study, "refugees" refers to Vietnamese, Laotian, Tai Dam, Hmong and Cambodian women who resettled from their home country in Iowa during the period 1975 to 1985.

#### Southeast Asian refugees

Also known as the "boat people" and/or "Indochinese", Southeast Asian refugees are people from Vietnam, Laos and Cambodia (see Appendix A) who sought shelter in foreign countries as a result of political upheaval and war in their home countries. The available literature frequently refers to them as "Indochinese" refugees. However, the Southeast Asian refugees resent the use of the term "Indochinese" because it was contrived by the French during their colonial reign of the region.

#### Ethnic group

A number of people associating together and sharing similar values and outlook on life due to distinguishable common background characteristics. The distinguishable characteristics could include geography, history, religion, culture, and so forth. For the present study, the five ethnic groups studied were the Vietnamese, the Laotians, the Hmong, the Tai Dam, and the Cambodians.



### The Vietnamese

The Vietnamese refugees (from the Vietnam war, March 1970 to April 1975), have come from Vietnam, which is a long strip of land extending from North to South in an "S" shape. It used to be called Cochinchina and has three distinct regions--North, Central, and South. About 85% of the Vietnamese people are either Buddhists, Confucianists or ancestor worshippers. Their lifestyle was primarily agrarian.

### The Laotians

Originally, Laotians were a group of people who lived along the Yangtze River in South China which bordered on Tibet. Before the infamous war, approximately 50% of the population in Laos were ethnic Lao and 50% of the population were comprised of tribal groups such as the Hmongs and the Tai Dam. The dominant culture and language of Laos was closely related to Northeast and North Thailand.

### The Hmong

The Hmong people are refugees who lived primarily in the mountainous villages of Laos and practiced a "slash-and-burn" agriculture. They migrated to the uplands of Laos from Southern China, most of them descendants of coolie laborers. In the mid-60s approximately 15% of the Laotian population were Hmong. In Laos, they were self-sufficient for their material needs. They achieved economic strength through the cultivation of opium poppy.

### The Tai Dam

The ethnic and geographic origin of the Tai Dam people remains unclear. Even so, their history indicates that originally they were from the Northwestern area of North Vietnam (Sip Song Chu Tai). With the division of Vietnam into North and South they were exiled to Laos. Their lifestyle was self-sufficient. Each family had its own vegetable garden where they grew crops and also raised animals for family consumption. The traditional home of the Tai Dam people was in a village of 20 to 50 houses.

### The Cambodians

The Cambodian refugees (also known as the Khmer people) resulted from Cambodia's association with the United States during the last phase of the Vietnam war. The North is bounded by Thailand, the East by Laos and the South by the Gulf of Siam. The country is rich in agricultural land and fertile soil.

### Needs Assessment

A review of the literature reflects various meanings for the term needs assessment. Simply stated, it is an attempt to identify or determine a reasonable number of judgemental inputs from different concerned groups within a community. These inputs are then analyzed so that they can be meaningfully interpreted. Various methods and techniques are available to conduct a needs assessment. For the purposes of this study, a questionnaire was used to conduct an assessment of the needs of the Southeast Asian refugee women in the areas of education, employment and health.

### Delimitations of the Study

1. Due to various limitations, this study was confined to a sample of 150 Southeast Asian refugee women living in Central Iowa--specifically in and around the Des Moines area.
2. Because of language difficulty as well as lack of time, the interviews conducted were very short and concise. The questionnaire covered the areas of education, employment and health only. It is assumed that the meanings were understood both by the interviewee and the interviewer.
3. Due to unfamiliarity with the various Southeast Asian languages, when interviewing the refugee women, services of the available interpreters were sought. It is possible that in the process of translation and back-translation some valuable information and insights regarding the needs of the refugee women were lost.

### Summary

Since the war in Southeast Asia formally ended on April 30, 1975, approximately 6.2 million Southeast Asian refugees have sought haven in the United States. Of these approximately 8,700 refugees have been resettled in Iowa. Despite the relentless efforts of various agencies and organizations to help the refugees in their adjustment process, there remains a big void in the life of these people. Hence, there has been an urgent need for a scientific inquiry regarding the needs, facts and basic

information of the Southeast Asian refugees. The purpose of this study was to conduct an education, employment and health needs assessment of the Southeast Asian refugee women living in Central Iowa. One hundred and fifty women were interviewed<sup>1</sup>. The data collected were then analyzed for statistically significant differences for education, employment and health needs among five ethnic groups of Southeast Asian refugee women.

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<sup>1</sup> The Iowa State University Committee on the Use of Human Subjects in Research reviewed this project and concluded that the rights and welfare of the human subjects were adequately protected, that risks were outweighed by the potential benefits and expected value of the knowledge sought, that confidentiality of data was assured and that informed consent was obtained by appropriate procedures.

## REVIEW OF LITERATURE

### Introduction

The majority of American households today require at least two employed persons for movement above the poverty levels; the second employable person is usually a woman. Women constitute an important part of the Southeast Asian refugee population and potential work force (42%); they are an important economic resource. To achieve the primary goal of refugee self-sufficiency, most refugee families must include two employed persons; the second employable person being the women (Caplan et al., 1985).

This study was designed to ascertain basic facts about some specific needs of the Southeast Asian refugee women in Central Iowa and their adaptation to life, particularly with respect to education, employment and health needs. By way of literature review, the study attempted to discuss how factors such as education, health, English proficiency and related factors such as age, gender, ethnic background, and time in U.S. influence the achievement of self-sufficiency of the Southeast Asian refugee women.

### Related Studies

#### Needs assessment

Needs assessment as reflected in the literature has a variety of meanings. Such things as food, shelter, clothing, and the like are very basic human needs required for existence and contentment. Needs can also

be classified according to the requirements for psychological and social conditions. For example, they might include love, affiliation, social status, prestige or power. Also, needs can be viewed in terms of very specific categories relating directly to different types of activity. Thus, the list might include such things as play, nurturance, achievement, recognition, and exhibition. Simply stated, needs assessment is an attempt to identify or determine a reasonable number of judgmental inputs from different concerned groups within a community. These inputs are then analyzed so that they can be meaningfully interpreted (Popham, 1975).

Maslow's (1970) hierarchy of needs provides a good framework for a discussion of human needs. (See Appendix F for Maslow's needs hierarchy.) He argues that there are five essential levels of needs and that one must fulfill most of the needs at one level before addressing the needs implied by the next level. A permanent and successful gratification of the basic needs (as delineated by Maslow's need hierarchy framework) can only be achieved through education.

In conjunction with Maslow's need hierarchy framework, Scott (1985) investigated factors contributing to social change and acculturation among Tai Dam refugee women in Central Iowa. The results of her study illustrated education to be the second dominant factor (after income) strongly associated with social urbanization and acculturation, i.e., access to community goods and goals. She found that education increased employment opportunities for the women, which in turn, increased both their income and further exposure to the American cultural system. On

the other hand, her study also found education to be the primary cause of a "generation gap" existing in some families, warranting further investigation as to whether cultural traditions are indeed being diluted.

The first step to a successful educational program is to systematically assess the educational needs and program potential for that particular community (Moore, 1984). After examining past needs assessment studies, Cross (1980) identified three purposes of needs assessment. The first purpose identified was to assess the access of various target groups to available educational programs. The second purpose was to gauge the size and interest of potential educational markets. Finally, the third purpose of needs assessment that Cross found was to gain basic insight into the learning processes and preferences of learners. Thus, needs assessment addresses the question of "why", "who", and "how many" of the target group. (For the present study, the target group were refugee women from Southeast Asia.)

### Education

The source material (both primary and secondary) available on the education of the nineteenth and twentieth century immigrants, refugees, and their children in the United States, can be divided into three overlapping but distinguishable categories (Seller, 1981). In the first category of literature, articles can be found written in immediate response to immigration, especially in the mid-nineteenth and early twentieth centuries. Articles written by politicians, journalists, clergymen and social workers as well as academicians, advocated education as the solu-

tion to the "immigration problem". For example, as Irish immigrants poured into antebellum American cities, their Catholicism was viewed by many as a threat to republican institutions, and, their poverty (presumed to be evidence of moral flaw), as a threat to decency and public order (Seller, 1981).

... [the] immigrant women were too backward to be effective homemakers and mothers of future citizens and that immigrant men were too ignorant and prone to violence and radicalism to be dependable workers and loyal Americans .... Education was the favored remedy--public schools for children and ... factory schools, settlement classes and other Americanization for adults ... (Seller, 1981, p. 2).

However, with the shift of the "melting pot" concept, by the mid twentieth century, the scholars started advocating and pushing the theme of education as a response to the needs of immigrants. For example, Elizabeth Beardsley Butler advocated industrial rather than homemaking training for girls and women in the public schools so that they would be able to enter higher paid occupations (Seller, 1981). Jane Adams felt that family life would be strengthened and inter-generational conflict avoided if the American-born children were educated to appreciate the skills and cultural heritage of their immigrant parents. Thus, criticism developed which ranged from inappropriate curriculum and texts to offensive attitudes; and, from propagandizing on the part of the educators, to patronizing attitudes of the educators.

The second body of literature written by historians, sociologists, and philosophers of education (during the period 1960-1980), examined immigrant education in the context of educational problems of contemporary minorities. For example, questions were asked about the relation-



ship between education, social mobility, and social control, past and present (Glazer & Ueda, 1984; Miller & Wadegaertner, 1982; Seller, 1981).

The third body of literature, also written by academicians in the 1960s and 1970s, has reflected on the theme of "new ethnicity". It investigated the survival as well as the disappearance of ethnicity and portrayed "immigrants not as objects of American education, but as subjects and creators of formal and informal educational institutions in their own communities" (Seller, 1981, p. 1).

Thus, due to changing philosophies and needs of the people (especially immigrants and refugees), scholars have been questioning how much the public schools have helped to launch immigrants and refugees into middle class America or whether the minorities are being ill-served by the educational system. The questions are raised, "Is there a basic flaw in the schools or in the American society itself?" and "Are the well-meaning but fallible educators at fault?".

Through decades, the American community has been undergoing a state of continuous change illustrated through changes in laws, demography, social structure, philosophy and the educational needs of the communities. Through their research findings Scott (1985), Caplan et al. (1985), Bell (1984), Reder et al. (1984), Stewart (1985), Mohd-Nor (1982), Lischwe (1983), and Nguyen (1979) amongst others, have amply demonstrated the role of education in meeting the various basic human needs, especially of the Southeast Asian refugees. However, the social determinants which influence education--both positive and negative--can only be expressed and measured through "the curriculum" by eventually translating them into a "curriculum plan".

What is meant by "the curriculum" and "a curriculum plan"?

Although historically many definitions of curriculum are available, Zais's (1976) eclectic model seems to offer the best explanation. His model is based on both "theoretical foundations" and "philosophical assumptions" in an attempt to guide both theoreticians and practitioners in education.

Zais's eclectic model is composed of multiple concepts, recognizing that the field has specific foundations. "Curriculum foundations are those basic forces that influence and shape the content and organization of the curriculum" (Zais, 1976, p. 15). These foundations are the bases/determinants of the curriculum content and organization. (See Appendix G for Zais's eclectic model.) The 4 foundations of the curriculum are epistemology, society/culture, the individual, and learning theories. Each of the foundation blocks is joined to the other by double-headed arrows, suggesting the interrelatedness of all the areas. Yet they do not form a unified whole. Undergirding the foundational areas is the broad area of philosophical assumptions indicating that, consciously or unconsciously, basic philosophical assumptions influence value judgements made about the foundational areas. The four foundation areas lead to ideas, assumptions, and values about what is important or unimportant, good or bad, and are eventually translated into a curriculum plan.

Thus, through a series of assumptions about the individual, the society, the culture as an institution, the nature of knowledge, and learning theories, a "curriculum" is generated. This "curriculum" is then translated into objectives, activities, and evaluation plans which

are expressed as a "curriculum plan". The goal of any curriculum plan then is to produce individuals who can understand, appreciate, and solve both individual and social problems.

English Language Training (ELT) In recent years, refugee resettlement policy has considered English proficiency to be a crucially important component of effective refugee resettlement. Resettlement agencies and refugees all seem to identify lack of English as a major barrier to successful resettlement (Reder et al., 1984; Haines, 1983).

Haines (1983) identified a variety of problems of the Southeast Asian refugees which merit particular attention. After health, the second most urgent problem identified involved lack of English language competency. A survey of 829 adult Southeast Asian refugees in California in 1977 found English language competency to be the top-rated need by the refugees. Another survey of 727 Southeast Asian refugees in California in 1979 had exactly the same findings. In both cases, those institutions serving the refugees were also asked about refugee needs. In both cases they also rated English language competency as the top problem area (Haines, 1983).

The need for refugees arriving in the U.S. to use English is pervasive and immediate, reaching into every aspect of resettlement from social adjustment to employment. Problems in learning English have become a metaphor for the myriad difficulties refugees face in the United States, so much so that refugees commonly say that the largest obstacle they face in the United States is "English." ... "other people, English speakers, see the whole world. I only see half of it. I am like a blind man learning to see" (Reder et al., 1984, p. 1).

Even though most studies concerning the Southeast Asian refugees seem to have incorporated "English proficiency" as a variable contribut-

ing towards self-sufficiency, unfortunately the results of the contribution of English language acquisition appear to be very unclear and sometimes even contradictory.

Reder et al. (1984) undertook a comprehensive project to investigate the language learning experiences of recently-arrived Southeast Asian refugees, particularly those with little previous education or exposure to Western culture; and, to determine the factors which contribute most to their successful English acquisition. The primary focus of the project was to study the effectiveness of the English language training programs funded by the Office of Refugee Resettlement. The study also considered the pre-entry and current resettlement experiences of the refugees.

At the time of the study, the investigators found that during the Fall of 1981 and 1982 over 300 English language training programs were available in 49 states. They also found that during those years, the existing English programs had to quickly and suddenly adapt due to the new challenges presented by the refugees. Previously, the ESL (English as a Second Language) programs had been geared towards training the more educated, urbanized refugees and immigrant students. But the refugees who arrived between 1979 and 1981 seemed to have little previous education, literacy skills, or exposure to Western society.

Reder et al.'s study (1984) was conducted in three phases over a period from October 1981 to June 1983. In Phase I (at the state and regional level), a mail survey gathered comprehensive data on the administration, extent, cost and outcomes of refugee language training. In

Phase II, the on-site program and classroom visits provided detailed information on the workings of a sample of programs, as well as perspectives on English language training from students, teachers and administrators. In addition, household surveys collected self-reported data on individual refugees' English language acquisition, program participation and demographic characteristics.

During Phase II, the programs visited were in Northern Virginia/Washington, D.C., New Orleans, Oklahoma City, Minneapolis/St. Paul, Denver, San Diego, Stockton and Seattle. These eight cities represented a wide range of resettlement contexts, refugee impact on the area, employment rates, public assistance policies and types of programs available. The household surveys were conducted in the following 4 cities: Minneapolis/St. Paul, Denver, Stockton and Seattle. One hundred households were surveyed in each of the above 4 cities for a total sample of 400 households. The 3 refugee groups selected were the Vietnamese (including ethnic Chinese), the Cambodians and the Hmong.

During Phase III of the study, a longitudinal survey was conducted. A standardized testing instrument, the Basic English Skills Test (B.E.S.T.), was used to measure English language proficiency gains of a selected cohort of recently-arrived refugees over a six-month period. A total of 400 refugees were given the Basic English Skills Test, a language proficiency test designed by the Center for Applied Linguistics especially for use with adult refugee language learners. Of the original 400 refugees tested, 308 individuals returned for the post-test. The sample for this phase of the study was selected from Portland, San Diego, Denver and Oklahoma City.

The project concluded with 13 major findings regarding program availability and participation. In all phases of the study, individual background characteristics (i.e., age, sex education in native country, literacy, and bilingualism) were found to exert a powerful influence on English language acquisition and also served as predictors of English language training. For example, both Phase II and Phase III data indicated that for all ages, men had considerably more education (6.4 years) than their female peers (3.7 years). Younger people had more education in their native countries than their older counterparts. By ethnic background, Hmong adults averaged 1.3 years of previous education compared with 7.9 years of Vietnamese adults. Yet the Hmong showed the highest rate of bilingualism in languages other than English.

English language proficiency at the time of entry into the United States appeared to be an important predictor of both level of proficiency attained in English later on, as well as eventual economic adjustment of the refugees. These findings were similar to Caplan et al.'s (1985) findings. They also found English language proficiency at the time of arrival into the United States to be an important predictor of eventual resettlement and self-sufficiency.

For both sexes, English language training utilization declined rapidly among those 50 years or older, particularly after 60. For all age groups, men utilized the services more (81%) than the women (67%). This gender difference was particularly striking among the older age groups. For example, in the age group 50-59 years, the number of per capita instructional hours for women was 195 hours (47%); for men it was 421

hours (74%). Also, those refugees with some previous education received an average of 38% more hours of instruction in the U.S., were more likely to participate in English training and also were likely to stay longer in the program.

After the effects of other variables were held constant, analyses showed that more men than women attended English language training classes. For women, situational factors such as availability of child care, the compatibility of class schedules with working hours, transportation, etc., seemed to be influential factors. In Phase III of the study, a moderately negative relationship was found between number of hours worked and the number of hours of English language training (ELT) taken. Of the total group, 16% both worked and attended ELT, 70% either only worked or only attended ELT, and 14% did neither. Those who worked while attending ELT, worked slightly fewer hours than those who worked but did not attend ELT classes. Men simultaneously worked and attended ELT classes more than women.

Women, the elderly, nonliterate and the employed adults were found to participate less in the ELT programs. Socio-economic barriers and affective factors were found to be the two major barriers to their participation. Lack of childcare was often identified as a substantial deterrent to participation, especially by the women. Location of classes and inadequate transportation were also identified as other deterrents to participation. Among affective factors, trauma, depression, mental and physical health factors were identified as reasons for lack of participation not only by refugees (especially women) but also by ELT teachers and administrators.

Eight findings emerged regarding factors influencing refugees' acquisition of English. Again, the refugees' previous educational experiences, gender and age were the most important factors in learning English in the United States. The data suggested that both literacy and previous knowledge of a second language (other than English) enhanced English language acquisition. In general, men developed more proficiency in English than women. Beginning-level classes contained a disproportionate number of nonliterates, women, and elderly students; higher-level classes contained relatively more men, younger persons and literates. The younger refugees reflected a tendency to acquire English more quickly and to reach higher proficiency levels than did older refugees. Employment in the United States appeared to facilitate English acquisition only for those refugees who had already attained higher levels of English proficiency.

In the longitudinal study cohort, i.e., Phase III of the study, a correlation ( $r=0.66$ ) was observed between the B.E.S.T. test scores and refugee self-rating, indicating that the refugees rated their language abilities accurately. Over 56% of the variance in scores on the initial test of English proficiency was accounted for by previous educational level alone. Both the self-ratings of Phase II and the post-test scores of Phase III showed that previous education continued to exert a strong influence on language learning after arrival into the U.S. Among those respondents with 12 or more years of education, 88% reported having reached "survival" levels of English and 77% reported that they had sufficient English skills to look for a job on their own. Those with no



previous education, 44% reported having reached "survival" levels of English and only 6% reported that they could look for a job on their own.

After the powerful effects of prior education, literacy, and age were held constant statistically, ELT, length of residence in the U.S., and employment emerged as additional predictors of English language acquisition. Phase III of the study was designed specifically to further test the relative impact of early employment and early English language training on gains in English proficiency during the initial resettlement period. Multivariate analyses of the changes in individuals' test scores over time indicated that pre- and post-test scores were related to age, gender, previous schooling and literacy.

Once the effects of all the above variables were held constant statistically, using multiple regression analysis, English language training emerged as a significant predictor of English acquisition while employment did not.

To summarize and conclude the major findings of Reder et al. (1984) which were found to be relevant in acquiring English proficiency and self-sufficiency, refugee background and demographic characteristics surfaced as important predictors of English acquisition and self-sufficiency. Although individuals varied in background experiences, nonliterate and women, both groups with historically less education in Southeast Asia, were experiencing less success. Second, previous education was by far the strongest predictor of success in learning English. Moreover, those individuals who had had the most previous education in their native countries were likely to obtain more English language training. Three,

younger adults were found to be learning English faster and reached higher proficiency levels than older adults. Among situational barriers, lack of child care, lack of time due to employment, and lack of transportation constituted as substantial barriers to participation in programs for many refugee women. Among affective factors, trauma, depression, mental and physical health factors were identified as reasons for lack of participation not only by refugee women but also by English language training teachers and administrators.

### Employment

Self-sufficiency through employment has been the major concern of most agencies, organizations, and sponsors dealing with the Southeast Asian refugees. Therefore, most of the scientifically and systematically conducted research studies also appear to be available in the field of employment. These studies can be divided into two distinct but overlapping categories: the "macro" and "micro" level studies of Southeast Asian refugees.

Under macro level studies, research has been conducted by various commercial organizations through large-scale national surveys for the Office of Refugee Resettlement (Aames et al., 1977; Caplan et al., 1985; Dunning, 1982; Jones, 1982; Kim & Nicassio, 1980; Whitmore, 1981; Litwin & Gim, 1980). Through government statistics these studies have been directed towards solving refugee problems by describing demographic characteristics and the participation of refugees in economic life. The information presented in these studies has been primarily collected to

promote the understandable desire, on the part of governments receiving refugees, that new arrivals promptly become self-supporting and economically productive.

At the micro level, studies have been attempted by social scientists in general, yet are scarce. Research has been conducted by social scientists, psychologists and anthropologists in an attempt to predict factors as indicators of employment, income and assistance (Lischwe, 1983; Johnson, 1981; Shearer, 1981; Meredith & Cramer, 1981; Haines, 1983; Latkiewicz & Anderson, 1983; Strand, 1984; Bach & Bach, 1980); the housing needs of the refugees (Meredith & Cramer, 1981; Haines, 1983; Cramer, 1981); the health problems of the refugees (Hurlich, 1981; Tong, 1981; Stewart, 1985; Bell, 1984; Kohn, 1981; Baldwin, 1981; Phipps, 1981); and the English language proficiency needs of the refugees (Reder et al., 1984; Haines, 1983). Most often these studies have been conducted in states having an enormous refugee population such as California, Washington and Texas. (See Appendix C for Southeast Asian refugee population distribution by state of residence.)

Some of the findings of the studies at macro and micro level are similar, especially those pertaining to demographic information. But studies attempting to assess the employment needs of the Southeast Asian refugee women are rare. To date, only two studies (Lischwe, 1983; and Meredith & Cramer, 1981) were located that tried to address and assess the needs of the Southeast Asian refugees. Only one study (Lischwe, 1983) attempted to assess the employment status, skills and preferences of the Southeast Asian refugee women in Northeast Iowa.

In 1979, Stein conducted research on the occupational adjustment of Vietnamese refugees in the United States. The purposes of his study were 1) to provide a descriptive pattern of the occupational adjustment of Vietnamese refugees in the United States; 2) to compare their experiences with other refugee and immigrant groups such as the Nazis, Hungarian and Cuban refugees; and 3) to develop a model of occupational adjustment process. Stein (1979) found that the Vietnamese refugees had experienced severe downward mobility in their first American jobs. The results of his study were substantiated by the results of studies conducted by the Opportunity System (1975; 1976; 1977). The Opportunity System found substantial numbers of refugees were dissatisfied with their work mainly because it was not in line with their training, it was too demanding, and it had no possibility for advancement. For instance, of the 31% of the Vietnamese refugees who were professionals in their home country, only 7% held similar jobs in the U.S. over a period ranging from 3 to 27 months. Similarly only 1% of the 15% who were managers in Vietnam held such positions in the host country. Mental health workers assisting the Vietnamese refugees identified several types of mental problems, some of which had their roots in occupational problems (LIRS, 1976). The study reported a heavy pressure on the refugees to accept any job.

Most refugees, because of their many handicaps get first jobs that are entry-level, dead-end, menial positions, far below their skill levels. The major handicaps are language problems, nonrecognition of their degrees and skills, governmental, trade union, and professional associations licensing restrictions, state and local regulations requiring citizenship or permanent resident alien status for certain jobs, lack of information about the job market, and the pressure to enter the labor market quickly (Stein, 1979, p. 32).

The findings of Stein's study (1979) were similar to those of Rogg (1974). Rogg's research on Nazi, Cuban, and Hungarian refugees indicated a direct relationship between occupational adjustment and acculturation. The women, housewives and the aged were the least acculturated refugees. They were also the ones who had had the least contact with the dominant culture either through employment or school. After the passage of four years in the U.S., the Vietnamese refugees were found to be doing much worse compared to the 1970 immigrants after two years, the 1956 Hungarian refugees after four years, the Nazi refugees after four to eight years, and the Cuban refugees after four to six years.

In 1981, Johnson conducted a study on the employment and consumer patterns of the Southeast Asian refugees in Canada. The sample included 1,100 Vietnamese refugees--both males and females. Two interviews were conducted 18 months apart. The mainland China immigrants constituted the control group. The majority of the respondents were in the age group 21-44, were married, and had lived in Canada for less than two years. Profiles of selected employment and consumer patterns of the refugee women were as follows.

Regarding their employment patterns, 76% of the Chinese women had not been employed in their home country. Of those who had worked, the main occupational classifications were operatives, clerical, service, sales, and teachers. Twenty-eight percent of the Vietnamese women had been employed, primarily as operatives. Only one Vietnamese woman and three Chinese women had received job training since being in Canada. Both the Chinese and Vietnamese women tended to be unemployed. Reasons

cited were housekeeping, poor health, pregnancy, attending school, and lack of English language skills. All of the Vietnamese and 86% of the Chinese women said they planned to obtain job training and to work indefinitely once they had a job.

The two groups differed significantly on employment in Canada ( $X(1)=6.17, p=.01$ ). Slightly over half of the Chinese and about 90% of the Vietnamese women had Asian employers ( $X(3)=14.6, p=.002$ ).

Regarding consumer patterns, the majority (90%) of both Chinese and Vietnamese women neither had life insurance nor planned to purchase any. The three reasons cited were that they did not feel the need, did not understand what it was nor how it worked, and they did not have the money to purchase it. Half of the Vietnamese women and 80% of the Chinese women were saving money. The purposes cited for having savings were for emergencies, to buy a car, to buy a home, for future education, to buy things they cannot afford now, to start a business, to help other family members, and for retirement.

Lischwe (1983) conducted a study on the employment status, skills and preferences of Southeast Asian refugee women in Northeast Iowa. The results of the study are of particular significance and bearing even though the sample size was small. The interviews were conducted on an individual basis for 45 Southeast Asian refugee women aged 18-65 years residing in Areas I and VII. (See Appendix H for division of Iowa by area.) The interviews were held in the women's homes.

The demographic profile for the women was as follows. The highest percentage of women (42%) were between 18-25 years, particularly the Tai

Dam (64%). With the exception of the Hmong, all ethnic groups had more than half of their women ages 35 years or younger. Sixty percent of the Hmong women were over the age of 35. In terms of education, a high percentage of women (29%) had received no formal schooling. There were, however, marked differences in educational levels by ethnic group. The Vietnamese women had attained the highest educational levels. The Hmong women had the fewest years of schooling with 80% of them having had no formal education.

English language proficiency was the second aspect of education surveyed. Close correlation between ELT levels and length of residence in the U.S., as well as formal education received was noted. As a whole, 42% of the women had relatively low levels of proficiency; 31% were intermediate; and 27% were completely fluent, both orally and in writing. Also, 38% of the refugee women surveyed claimed that their lack of English was a major limitation in terms of obtaining employment and was a primary determinant in their choice of job preference.

A strong correlation between length of U.S. residence, employment status and employment pattern was noted. Compared to earlier refugees, those arriving after 1978 reported much more difficulty finding employment due to their comparative lack of education, fewer marketable skills, poor language abilities and a weaker U.S. job market.

At the time of the survey, 15% of the women were employed full time, 22% were working part time, and the majority of the women (63%) were unemployed. Among ethnic groups, only the Vietnamese and Tai Dam women were employed full time. With the exception of one, all the women

employed full time had lived in the U.S. for at least seven years. Unemployment was highest among the Hmong women.

For the most part, jobs held by the refugee women were unskilled and included cleaning (restaurants, schools, nursing homes, private households), kitchen helpers, assembly line work, cashiering, and teacher's aide. Several women performed professional sewing (tailoring, alteration, making drapes).

The major limitations faced in seeking employment were cultural adjustments, language difficulties, lack of child care (45%), and lack of transportation (36%). A strong relationship between educational levels and employment status was found. All full time employed women had received at least 10 years of formal schooling; 70% of part time employees had attended at least 5 years of school.

From the total sample, 78% of the women wanted to be employed full time; an additional 17% wished part time employment. When asked why they wanted to work the responses were as follows: 1) financial reasons, 2) opportunity to learn, 3) social contacts, and 4) job satisfaction. Job preference varied by ethnic background.

In summary, the Lischwe study (1983) reported a critical need for employment among the Southeast Asian refugee women. Many women exhibited a strong desire to find employment but lacked exposure to employment possibilities. Furthermore, English language deficiency was indicated as a major barrier to feeling confident either to seek employment or to obtain a satisfying and adequate job to meet financial needs.



From amongst the macro level studies conducted for the Office of Refugee Resettlement on economic self-sufficiency, Caplan et al.'s study (1985) warrants special consideration. In Appendix I, a comparison of the results of Caplan et al.'s study has been made with six other studies conducted in the U.S. and one in the United Kingdom. A comparison of these studies was difficult because the various studies used different kinds of data as indicators of employment, income and assistance. Excluding the U.K. study, together these studies suggest that approximately two-thirds of refugee households receive some form of cash assistance, food stamps, or both. Further, the findings of all of these studies have pointed towards several predictors of self-sufficiency, with English language proficiency as the over-riding predictor.

Caplan et al. (1985) interviewed 6,775 Vietnamese, Sino-Vietnamese, and Lao refugees (1,384 households) who had arrived in the U.S. after October 1978. The sample was stratified by age and by ethnic-background. The five sites selected for the study were Boston, Chicago, Houston, Seattle, and Orange County. The interviews were conducted during summer and fall of 1982. The units of analyses were households. The focus of the survey was the economic self-sufficiency of the Southeast Asian refugee household. The definition of the dependent variable was whether the household received any cash assistance, earned income, and whether the total income of the household was above or below the Federal poverty level. In general, bivariate and multivariate analyses showed that age was not a key variable in economic achievement except at the extremes, i.e., the very young and the very old. An analyses of site-specific

effects indicated greater similarities among refugees and their resettlement experiences.

The results of Caplan et al. study (1985) can be divided into three major classifications: general descriptive characteristics, bivariate analyses, and multivariate analyses. General descriptive characteristics of the study indicated 61% of the refugees were males and 39% were females. By age, 41% of the refugees were in their 20s, 22% of the refugees were in their 30s, 11% in their 40s, 6% in their 50s and 4% in their 60s plus. The mean age for all the adults was 30.8. For the Vietnamese and the Lao, the mean ages were 29.5 and 31.5, respectively.

Men were more likely to have received higher education than women. Only a third of the women in the sample had gone beyond elementary school, while this was true of just over half (55%) of the men. Males were predominant at all levels of advanced education. The Vietnamese men and women appeared to have a relatively greater extent of education at all levels than the Chinese and the Laotians.

The Vietnamese refugees tended to have higher status occupations in their homeland more often than the other ethnic groups (e.g., doctors, architects, professors, judges). The greatest proportion of farmers and housewives were Lao (17% in each category), while the Chinese often held urban jobs--31% were proprietors, clerks, assistants, construction workers, auto mechanics, machine operators, and factory workers.

In general, the occupational status of the refugees confirmed the relatively rural nature of the Lao and indicated patterns of urban residency among the Chinese. The Vietnamese came from coastal as well as

urban areas. Women predominated as nurses, teachers, in business, secretaries, clerks, maids and barbers.

Health problems potentially precluded individuals from successfully entering and staying in the labor force. Twenty-two percent of the respondents reported medical problems. By ethnic groups 20% of the Vietnamese, 24% of the Lao, and 26% of the Chinese said they had medical problems. By gender, 21% of the males and 29% of the females reported such problems. Nearly a third of the refugees in the Caplan et al. study lacked health insurance coverage.

Overall, few members of the households knew English when they arrived in the United States. The relationship between English language proficiency and relevant background factors for the Caplan et al. (1985) study were as follows:

Ethnic background      The gap between Vietnamese "arrival" English and that of the Chinese or Lao appeared to have diminished somewhat, yet it remained statistically significant for "current" proficiency as well as "arrival" proficiency.

Gender      Men arrived with significantly better English skills than women ( $p < .01$ ). This gap had increased over time ( $p < .01$ ).

Urban/Rural      Refugees from cities arrived with significantly better English than those from the countryside ( $p < .01$ ) and this difference remained associated with "current" English skills ( $p < .01$ ).

Education      Educated refugees arrived with a much greater command of English than those with little or no education ( $p < .01$ ). This difference remained for "current" proficiency ( $p < .01$ ).

Occupation in Southeast Asia Former professionals, military personnel, clericals and students arrived with significantly better English ( $p < .01$ ). These differences were found to have increased for "current" proficiency ( $p < .01$ ).

Age Refugees over 50 arrived with significantly fewer skills in English ( $p < .01$ ). The effects of age differences increased dramatically for "current" proficiency, with the youngest learning the most ( $p < .01$ ).

Time in the U.S. Those who arrived before 1978 had slightly but significantly better English skills when they arrived than those who arrived later ( $p < .01$ ). In terms of "current" English, those who had been in the U.S. longer were significantly more fluent ( $p < .01$ ).

In sum, refugees who were more advantaged in Southeast Asia (with regard to gender, education, occupation and urban residence) arrived with considerably better English proficiency. This gap had widened for "current" proficiency in the U.S. At the same time, the younger refugees were learning much more rapidly than the older refugees.

For the sample as a whole, the refugees tended to be both unemployed and underemployed. Also, those in the labor force tended to be employed in the periphery of the economy (53%) rather than in the core economic sector (47%). In addition, they tended to hold "dead-end" jobs.

On bivariate analyses, age was not a key variable in economic achievement. Education in Southeast Asia seemed consistently ( $p < .05$ ) to influence the chances of finding a job. On the average, those who had no education or had only attended elementary school took longer to find a job--a year between arrival and their first job.

The refugees' employment status was also found to be dependent on the general status of the economy. Most refugees had been thrust into low-paying, low-status jobs sensitive to changes in the general economy and were affected by "last hired, first fired" forces of the labor market.

The economic status of the refugees studied was best indicated by the degree to which household needs were met in relation to the poverty level over time. At the time of Caplan et al.'s survey, the official poverty rate for the total U.S. population in 1982 was 15.0%. The Census Bureau data on poverty rate for specific segments of the population were: white 12.0%; black 35.6%; and Hispanic 29.9%. By comparison, the refugee poverty rates varied from 80% for households in the U.S. for 4 months or less to around 30% for those in the country the longest, i.e., around 44 months.

Multivariate analyses were conducted independently on two indicators of self-sufficiency: (1) receipt of cash assistance and (2) poverty status. The list of variables examined in the multivariate analyses for their relationship to the three self-sufficiency measures (i.e., cash assistance, earned income and poverty status) were: age, sex, ethnic background, household composition, site, urban/rural in Southeast Asia, secondary migration, ELT, employment service use, vocational training, health problems, time in U.S., current English proficiency, arrival English proficiency, Southeast Asian occupation, Southeast Asian education, and household size.

Upon conducting several multivariate analyses, "arrival English" proved to be a very powerful predictor of self-sufficiency and an important source of variance reduction, whereas "current English" did not. Southeast Asian education and occupation contributed less than one percent of explained variance, and, therefore, were of no practical significance in determining poverty standing during the first four years of resettlement.

The bivariate relationships were stronger, particularly for Southeast Asian education which correlated .24 with poverty-level standing and .13 with receipt of cash assistance. The correlation for Southeast Asian occupation was significantly lower, .06 for poverty-level standing and .02 for receipt of cash assistance, respectively. The reason Southeast Asian education did not perform better in the multivariate results appeared to be due to its high inter-correlation with "arrival English". Because it was a means for acquiring English proficiency, this variable predominated in importance to self-sufficiency regardless of whether English was acquired through Southeast Asian education, camp classes, or other means.

To determine what variables had strong correlations with improvement in English proficiency in the U.S., a series of stepwise regressions were run for those with no English, a little English, and some English on arrival. For those with no English on arrival, the major variable affecting improvement in English proficiency was the level of education in Southeast Asia and age. These two variables correlated .59 with improved English proficiency. Thus, a well-educated, young person would

tend to show much greater improvement in English than an older, less-educated person. Time in the U.S. added .07 to the combined correlation. The degree of participation in an ELT program added another .03 resulting in a multiple correlation of .69. Thus, more time in the U.S. and greater attendance in ELT classes accounted for some additional improvement in English for this group compared with Southeast Asian education and age.

For the second group, those with a little English on arrival, the major variable for improving their English was primarily length of stay in the U.S. (.38). Age (meaning relative youth) was another contributing factor, as was level of education in Southeast Asia (.46). For this group, ELT attendance did not account for changes in proficiency level.

The third group, those with some English on arrival, also had time in the U.S. as the major contributing variable (.27), with ELT attendance (.28), age and Southeast Asian education adding slightly to the correlation with language improvement. The results of these analyses were that, while ELT attendance contributed some to English improvement, other variables--level of education in Southeast Asia, relative youth, and time in U.S. were far stronger predictors of improvement, regardless of ELT attendance.

Succinctly, the data indicated that ELT, daily life, and background characteristics contributed significantly to the refugees' major increase in English abilities. On the other hand, it also suggested that what ELT contributed was the refugees' own initiative and diligence in improving their proficiency by drawing upon their own collective resourcefulness.

In summary, economic self-sufficiency through employment of the Southeast Asian refugees has been the major concern of all those involved in refugee resettlement programs. Most of the research conducted either by social scientists, academicians or the Office of Refugee Resettlement has attempted to predict factors of economic self-sufficiency. Because the different studies have used different kinds of data as indicators of economic self-sufficiency, it is difficult to define the most powerful variable(s) of self-sufficiency. But in general, English language proficiency, age, gender and level of education in home country surfaced as powerful influential variables. Regardless of ethnic background, generally the refugees reported a high rate of unemployment and experienced severe downward mobility. Specifically, the women appeared to have a higher unemployment rate than men, were less proficient in English than men, were less educated than men and reported fewer marketable skills. Poverty rate amongst the refugees was reported to be very high.

### Health

The role of women in society is changing all over the world through all the important areas of human activity including education, health, employment, legal structures, politics, communication and the family. A woman's social and physical surroundings are important determinants of her physical health. Among the more general factors that affect the health of women, three of the most important factors are nutrition, childbearing and changing lifestyles (Newland, 1979). Ignorance may take a high toll of women's health with the problem being confined not just to



the women of poor or semi industrialized societies. For instance, Koh (1984) studied the demographic data and food resources for 1,400 low-income households in 7 counties in Southwest Mississippi. The study found that hunger was prevalent among low income and least educated households and that the government was their main food source. The study also demonstrated that income and education level were highly correlated with food consumption, indicating that individuals and families with higher incomes and better education had more adequate diets than those with lower incomes and less education. Similar findings were reported in another study by Koh and Caples (1979) which analyzed the nutrient intake for 1,000 low-income black households in Southwestern Mississippi. For most instances, diets of individuals were regarded as inadequate. The income level was found to be highly correlated with food consumption, indicating that the households with higher income had better diets than those with lower incomes.

Amongst the Southeast Asian refugee women, along with English and employment needs, health has been reported as a major problem and barrier to readjustment (Haines, 1983; Caplan et al., 1985). In fact, Strand (1984) and Caplan et al. (1985) found the Southeast Asian refugees' perceived health status to be a significant predictor of employment status.

Unfortunately, very little is known regarding the health needs of the Southeast Asian refugee women. The few studies that are available have been predominantly conducted by social and medical anthropologists who have tried to study the food habits and medical worldviews of the Southeast Asian refugee women. From the limited anthropological studies

available, Stewart (1985), Bell (1984), Hurlich (1981), and Tong (1981) claim special attention because of their implication for educators.

Stewart (1985) studied the medical worldview (during pregnancy and lactation) of 52 Tai Dam women living in Central Iowa. From among the three prevailing health care systems practiced by the Southeast Asian refugees, Stewart studied the system which is a combination of naturalistic observation and philosophical considerations built into a metaphysical construct. From this perspective, health becomes a facet of life in the universe which functions within a unified, comprehensive scheme. In tune with nature, the human body operates with a delicate balance between two basic opposite elements: Yin (male) and Yang (female). Translated into medical and dietary habits, the two poles become Hot and Cold, and good health is the perfect equilibrium of hot and cold elements which results from the harmonious functioning of the viscera (Tung, 1980). Any excess in either direction leading to disequilibrium means a deranged physiology, discomfort, and illness. For instance, diarrhea is attributed to an excess of the cold element in the stomach while pimples or pustules are ascribed to an excess of hot element which erupts through the skin.

The results of Stewart's study have special implications for educators. The results were divided into five sections: (1) contraceptives and pregnancy diets, (2) physician use and other pregnancy consultation, (3) delivery and post-partum diet, (4) breast feeding and weaning, and (5) food satisfaction and nutritional education. In all of the above areas, the educational backgrounds of the women seemed to play an impor-

tant role. For instance, in response to the question whether the food a pregnant woman consumes can affect the child in any way, either detrimentally or beneficially, the majority of the women (53%) with the greatest amount of formal schooling answered affirmatively. Moving down the scale of education, these statistics reversed themselves. The majority of the uneducated Tai Dam women (60%) did not seem to recognize the correlation between nutrition and health of the fetus. Regarding physician consultation, approximately 50% of the women reported language difficulties as the most serious barrier to communication. When cross-tabulated with the length of time each women had lived in the United States, no apparent increase in comprehension was associated with a greater length of residence.

Another very interesting and strong relationship was found between the education level and the use of bottled formulas for children as a supplement or substitute. Fifty-six percent of those women with the lowest level of schooling used a bottle at some time. Elementary school graduates jumped to 73%, and on up to 79% for those with a high school education. Reasons cited for this shift were doctor's advice, husband's disapproval, no milk available, busy work schedule, and the perception that bottle feeding is modern and the method of choice for the dominant culture.

Finally, regarding food satisfaction and nutritional education, the Tai Dam women in Stewart's study emphasized a preference for a traditional Asian diet whereas the children emphasized a preference for American style food. Only 20% of the women reported that they had been given

any information on how to cook American food, how to identify unfamiliar American foods, and the nutritional composition of American foods. The sponsor families were identified as their sole source of information, with such assistance involving learning how to bake cakes and cookies.

In summary, Stewart's study (1985) found evidence of the connection between traditional Asian philosophy of yin and yang, hot and cold, and the dietary habits and behaviors of Tai Dam women residing in Central Iowa. In the area of diet, the observation was made that the variety of foods offered in the Asian diet insures adequate nutritional content. Usually, these foods were available in various Oriental food stores in Des Moines (usually in canned form and not fresh). The real concern lay with the amount of food consumed, and a lack of recognition between nutrition and health. Four barriers to effective health care utilization were reported. They are: 1) language barriers, 2) extensive reliance on traditional communication networks for health care information, 3) lack of education, and 4) a relationship of power dominance between the doctor and patient which prevented many women, especially less educated women, from asking for more information or more detailed explanation.

Bell (1984) also tried to study the medical worldview of Tai Dam refugee women living in Central Iowa. She studied the concept of "natural" explanation as the cause of disease, that is, an immediately visible cause of symptoms, such as rotten food which would cause an upset stomach. The results of her study were divided into three sections: (1) health care utilization, (2) birth control practices, and (3) prenatal and birthing practices. In response to the open-ended question "What are

the causes of illness?" the major reasons cited were changes in the weather or temperature, bad food or water, fatigue, too many children, germs, supernatural causes and the mental state of the individual. Next, fourteen specific illnesses were listed (e.g., cancer, colds, flu, diarrhea, measles, broken bones, and so forth) and the women were asked to give the cause for these illnesses. A slightly different set of causes emerged. The major reasons cited were changes in the weather or temperature, bad food or water, too much of a certain type of food, accidents or bad falls, insufficient food or vitamins, irritation due to smoking, pollution or dust, germs and supernatural causes. An informal discussion later also revealed a belief in supernatural causes of illness --a third medical worldview of the Southeast Asian women, i.e., illnesses caused by gods, demons and spirits of deceased people.

Next the women were asked to elaborate on the illnesses that they had experienced during the preceding year and how many visits they had made to the physician for care. Most of the illnesses that the women reported were nonbacterial in etiology. The most commonly mentioned illnesses were colds, headaches, backaches, stomach problems, fever, chest pain, fatigue, cramps, anxiety attacks, body aches, toothaches, and flu. The mean for number of visits to the doctor per women per year was 1.6 compared to 5.2 average visits per year for all women in the United States. Understanding verbal communications from the doctor was a problem for 42.3% of the respondents. Similarly, understanding written instructions about medication usage was problematic for 49% of the respondents.

With respect to prenatal and birthing practices, it was found that the likelihood of a woman visiting a physician during her pregnancy was not significantly associated with her ability to communicate with the physician, her age, whether or not she had medical insurance, or the length of time she had been in the United States. A positive association was found between the probability of seeing a physician during pregnancy and whether or not the woman had a personal physician ( $p < .05$ ). The relationship between all the variables listed above did, however, significantly influence whether or not a woman went back to the physician after the initial visit. There was a statistically significant yet negative association between return visits and age ( $p < .05$ ). Younger women tended to return visit. The association between return visits and length of time in the United States was positive ( $p < .01$ ). There was also a positive association between return visits and ability to communicate with the physician ( $p < .05$ ). If a woman had difficulty communicating with the physician, she tended not to return for prenatal care. The association between having medical insurance and return visits to the physician was very significant ( $p < .001$ ). Most women who had medical insurance returned after the first visit. Those without insurance usually did not. Even more significant was the positive association between return visits and having a personal physician ( $p < .00001$ ).

To summarize the results of Bell's study (1984), communication with the doctor and understanding written medicinal instructions about medication usage were difficult for close to half of the Tai Dam women. Almost half (40.9%) of the women did not have a personal physician. This lack

of a personal physician seemed to be a very important factor as to whether or not women received preventive health care. Also, the Tai Dam women believe that the majority of illnesses are caused by temperature and weather changes, bad food and water, and supernatural powers.

Hurlich (1981) and Tong (1981) studied the food habits of Southeast Asian refugees in Seattle and Washington, D.C., respectively. Hurlich (1981) studied the dietary habits of 29 Hmong households in Seattle containing 200 individuals. A 24-hour dietary recall was conducted, questions were asked about "normal" daily eating habits, and women were asked questions about their reproductive histories. Nearly 100 individuals were measured anthropometrically for stature; weight; head and mid-upper arm circumference; triceps, subscapular, and chest skinfold thickness; and nose breadth and height. These measurements were compared with published growth charts from U.S. and Thailand. All measurements were made during the early afternoon in the family's home, and all household members were measured on the same day.

Fifty-one and a half percent (N=144) of the sample were 19 years old or younger; 51.8% were females. An average of 7.6 people lived in each household. The major source of income was from earned wages. The total household income from all sources ranged from about \$700.00 to just under \$1,900.00 per month.

The anthropometric measurements for the Hmong children compared well with well-nourished children from families with sufficient income from Bangkok, Thailand. The Hmong children were heavier for age than rural Thai children. On the other hand, growth charts generated by study of

the U.S. population could not be applied to predict normal growth patterns of Hmong children.

With respect to changes in food use and food frequency, foods most likely eaten for the first time in the U.S. included apples, fruit juices, strawberries, frozen fruits and vegetables, peanut butter, hamburger, grapes and bread. There were significant differences in the frequency of food consumption between males and females ( $p < .05$ ). Men, on the average, ate chicken and pork more frequently, while women ate eggs, peanut butter and nuts, fruit, all types of sweets, and drank milk and juices more frequently than men. For each age group, there was a consistent tendency for females to eat a wider variety of foods than males.

Observation of other dietary habits indicated that more and more Hmong women were bottle-feeding their babies and seemed to be encouraged to do so by their female sponsors. Many female sponsors taught the Hmong women how to cook pies, cakes, cookies, pancakes, and occasionally bread. Of these items, cakes and pancakes were most likely to remain in the Hmong women's diet. Most individuals 25 years or older reported health problems associated with drinking milk.

Tong (1981) studied the dietary habits of 50 Vietnamese refugee households who came to the greater Washington, D.C. area in 1975. Concerning the changes in dietary habits after coming to the U.S., 40% had changed their eating pattern and the remaining 60% had not changed at all. Factors involved in dietary changes were: (1) employment outside the home, (2) less time available for Vietnamese-type meals, (3) a need to simplify meals, (4) no kitchen help, (5) adaptation to American lifes-



types, (6) unavailability of foodstuffs, e.g., fresh fish and vegetables, and (7) different relative prices.

To summarize the section on health needs of the Southeast Asian refugee women, so far little or no attention appears to have been paid either by federal and voluntary agencies or by scholars. Yet these needs seem to be a significant predictor variable of employment status and self-sufficiency. The few studies that are available have been conducted by social and medical anthropologists who have tried to study the food habits and medical worldview of the Southeast Asian refugees. The results of these studies are not conclusive. The three prevalent medical worldviews among the Southeast Asian refugees are: 1) "natural" explanation for causes of disease and illness, 2) "supernatural powers" as the explanation for disease and illness, and 3) "naturalistic observations" and "philosophical considerations" as the explanation for disease and illness. Due to the dramatic changes in their lifestyles, traditional medical advice is not freely available to these women. Left with no option, these women have had to turn to the Western medical system. The studies reviewed thus far seem to indicate that the use of medical services by refugees in the U.S. has been underutilized. Some of the contributing barriers identified are language and communication difficulties encouraging extensive dependence on traditional communication networks for health care system; lack of education; a relationship of power dominance between doctor and patient; inability to afford medical insurance and personal physician; and ignorance and insensitivity by medical practitioners to the cultural outlook of their patients.

The results from studies on food habits are even more scanty and inconclusive. Due to the change in lifestyles, the diets of the Southeast Asian refugees have changed. The reasons are inadequate income; encounter with new types of fruits and vegetables not available in home country; unavailability of food-stuffs, e.g., fresh fish and vegetables all year round; adaptation to American lifestyles; no kitchen help; and employment of women outside the home. However, the few studies available seem to suggest that nutrition education has not been available or offered to the women. Nevertheless the results of these anthropological studies have contributed towards sensitization and better understanding of the Southeast Asian refugees by researchers involved in cross-cultural studies.

#### Method

##### Methodological problems in cross-cultural research studies

Through review of literature it was found that there are many problems in conducting cross-cultural or intrasocietal research studies. Elder (1973) has identified six methodological problems: (1) Problems of unit compatibility. (2) Problems of sampling. (3) Problems of instrument construction. (4) Problems of instrument translation. (5) Problems of interviewer selection and training. (6) Problems of field response. The major implication of these methodological problems are for the researchers to be sensitive and alert (along with other variables) to language and cultural subtleties of the culture/society under investigation. Otherwise, the researcher will never know whether the results are

spurious, and have been caused by cultural and/or linguistic variability (Elder, 1973). The six methodological problems outlined by Elder (1973) are crucial and warrant further discussion.

Problems of unit compatibility This problem has always bedeviled cross-cultural researchers. What are the minimal criteria for a society, tribe, region, culture? How do we know we are comparing the same things? There seems to be a void on the literature available suggesting how to reduce and narrow the problems of unit compatibility of the populations under study. Some of the possible sources suggested have been to examine the journalistic articles, scientific literature, census data and other statistically available data. All of the above sources can help to build a profile of the population under study.

Problems of sampling Much literature has been published regarding sampling errors, sampling techniques, sample size and other related issues of sampling. Yet it continues to plague researchers to ensure that the results are not spurious due to sampling errors (Borg & Gall, 1983; Seymour, 1976; Bulmer & Warwick, 1983; Mendenhall, Ott, & Scheaffer, 1971). The most comprehensive account of sampling errors, techniques, and size have probably been expounded by Borg and Gall (1983). Because the entire population of interest cannot be investigated, the selection of a representative sample is crucial. It is through the sample that the research findings may be generalized to the population. Moreover, it is desirable that the findings have as great an impact as possible on educators, volunteers, funding agencies and whoever may be involved.

Problems of instrument construction In conducting cross-cultural research it is difficult (if not impossible) to find tested instruments for the research purpose (Elder, 1973). Some of the reasons cited by Elder (1973) and Borg and Gall (1983) are a partial overlap of dimensions of interest; specificity of the topic under investigation; and instrument(s) which are under the process of being devised or standardized. Other reasons might include lack of interest in either the general topic or the specific population; lack of expertise available due to the newness of the topic; lack of sufficient research on different techniques for instrument construction; and financial considerations.

Problems of instrument translation According to Anderson (1967), "Translation is involved whenever research requires asking the 'same' question of people with different backgrounds" (p. 124). Elder (1973) and Brislin et al. (1973) have suggested that the immediate, and sometimes unresolvable problem in cross-cultural instrument translation is that of lexical equivalence. Sometimes even the cumbersome and essential procedures of "back-translation" may not overcome the problem of basic nonequivalence even when the translation is lexically "correct" (Elder, 1973). (Backtranslation is having one person translate a question from language A to language B, having a second person translate the question back from language B to language A, and comparing the two versions of language A).

Brislin et al. (1973) reported three research studies in which the investigators examined the qualities that translate both poorly and well. In the first research project, an English story was translated into

Navajo. The story was about a man who had lost his livestock. It was used to elicit value orientations. In the second research project, English passages were translated into Vietnamese. The passages were highly technical materials from a helicopter maintenance manual. In the third research project, English passages were translated into Micronesian languages. The passages used dealt with five issues: religion, cultivating trees, how people choose friends, interaction among members of Micronesian groups and the same story used with Navajo translation (i.e., about the man who lost his livestock).

All of these studies used "back-translation" techniques where bilinguals were asked to translate the English passages into a target language. Then, another group of bilinguals (working independently) were asked to translate the passages back into English. The two English versions were compared and differences in meaning noted. The phrases that regularly translated very well and very poorly were examined for inferences. Brislin et al. (1973) presented a set of ten rules in writing questions for cross-cultural studies, such as to employ active rather than passive voice, to use nouns instead of pronouns, and to avoid subjective modes and possessive forms.

Regardless of the guidelines, sometimes lexical and contextual equivalence cannot be achieved (Elder, 1973). A concept may be sufficiently untransferable due to religious factors, technicality, grammatical structure of the language(s) concerned, social class structure, and the gap between written and spoken form of the language (Elder, 1973).

Problems of interviewer selection and training The reliability and validity of social data depend not only upon the design of the questionnaire but also upon the interview schedule. According to Elder (1973) interview training and selection serve two purposes: they provide a pretest for the interview schedule, and help in narrowing choices for candidates either as translators or as interviewers. In Elder's study, as a result of the pretest, five questions were dropped from the interview schedule. The interviewers were selected respecting the society's sensitivity to caste and educational differences and avoiding possible interviewer effects on respondents' answers. On the other hand, the researcher might not have the option of being able to select a translator or interviewer according to the given criteria.

Problems of field response Elder (1973) outlined some of the major problems in this area as 1) logistics, i.e., commuting long distances, safety of translators and interviewers, provision of basic amenities to the translators and interviewers; 2) financial commitments; 3) locating the identified sample; 4) protecting the privacy of the interviewees; 5) effectively dealing with respondents' reticence; and 6) dishonest reporting.

Attitudes, perceptions, needs, expectations, and anticipated behaviors are available to a research scholar in the field of social science through direct communication. Elder (1973) identified six major problems inherent in cross-cultural research. Taking these issues into consideration, and the population under study (the Southeast Asian refugee women), an interview questionnaire appeared to be the most reliable technique available for a cross-cultural study.

### Interview technique

According to Borg and Gall (1983) "The interview as a research method ... is unique in that it involves the collection of data through direct verbal interaction between individuals" (p. 436). Thus, interview as a research technique offers many advantages (Borg & Gall, 1983).

First, it is adaptable. The interviewer can make full use of the immediate response or feedback of the subject to alter the interview situation. Two, the interview permits the investigator to follow up leads and thus obtain more data and greater clarity. Three, the interview situation permits much greater depth, i.e., the interviewer can obtain information that the subject would ordinarily not reveal under any other circumstances. For instance, the Southeast Asian culture does not permit individuals to express negative aspects of the self or negative feelings towards others. Four, it is easier to ask questions. Five, when collecting factual data, the respondents are fairly consistent and relatively accurate in their interview responses.

However, interviews also have certain disadvantages (Borg & Gall 1983). First, they are expensive. Second, flexibility, adaptability, and human interaction that are unique strengths of the interview also allow subjectivity and possible bias. For example, eagerness of the respondent to please the interviewer, or the tendency of the interviewer to seek out supporting or desirable answers are two possible sources of bias.

### Summary

The three major needs of the Southeast Asian refugee women discussed were education, employment and health needs. Lack of English proficiency was identified as a major barrier to successful resettlement both by the refugees and the resettlement agencies. However, the exact contribution of English language proficiency was found to be very unclear.

Background and demographic characteristics such as age, gender, education in native country, literacy and bilingualism surfaced as powerful predictors of English language acquisition. For women, three major situational barriers and four affective factors were identified which prohibited them from participation in English language acquisition programs. These barriers were lack of childcare, lack of time due to employment, and lack of transportation. Trauma, depression, and mental and physical health were identified as the affective factors by the refugee women and program administrators.

With respect to economic self-sufficiency, once again refugee background and demographic characteristics such as English language proficiency, age, gender and level of education in home country surfaced as powerful and influential variables. Regardless of ethnic background, generally the refugees reported a high rate of unemployment and severe downward mobility. The women appeared to have a higher unemployment rate than men and also reported fewer marketable skills. Poverty rate amongst the refugees was reported to be very high.



Health seemed to be a significant predictor variable of employment status, self-sufficiency and participation in English language training programs. Yet very little is known about these needs. The available data seemed to indicate an underutilization of the medical services by the refugees. Contributing barriers identified were language and communication difficulties, lack of education, a relationship of power dominance between doctor and patient, inability to afford medical insurance and personal physician, and ignorance and insensitivity by medical practitioners to the cultural outlook of their patients.

Due to change in lifestyles, the food habits of the Southeast Asian refugee women were reported to have changed. The female sponsors seemed to have taught the refugee women how to bake cakes, cookies and pies. Thus far, no one seems to have offered the women any nutrition education, or how to identify American foods, or the nutritive value of American foods, etc.

Finally, the last section discussed the six methodological problems of cross-cultural research studies. These problems are unit compatibility, sampling, instrument construction, instrument translation, interviewer selection and training, and the problems of field response.

## METHODOLOGY

In designing the study, attempts were made to develop a questionnaire from which findings could be generalized. Efforts were also made to provide as complete an assessment as possible of the problems and needs of Southeast Asian refugee women in Iowa. However, generalizability of the findings must be limited in the sense that the study focused on a small sub-population of the total population. (See Appendix C for distribution of Southeast Asian refugee population in the U.S. by state of residence.) Equally important are some of the methodological propositions discussed by Elder (1973), such as sample selection procedure used to select respondents, instrument construction and translation, and interviewer training. All efforts were made to reduce the negative influence of each of the suggestions discussed by Elder (1973). Thus, each one of them warrants further comment.

## Procedure

Instrument construction and translation

As no standardized and tested instrument pertinent to this study was available, an interview questionnaire was developed. Particular attention and emphasis was given to devising a set of questions which would possibly provide a complete and accurate assessment of the problems and needs of Southeast Asian refugee women. Resources and questionnaires from past studies on Southeast Asian refugee communities were reviewed. Questions were formulated under six categories: demographic characteris-

tics, educational information, family characteristics, employment information, housing information, and health information. Questionnaires from three past studies (Stewart, 1985; Mohd-Nor, 1982; and Meredith & Cramer, 1981) were reviewed. A few questions from these studies were borrowed and rephrased. New ones were added to form a schedule that met the objectives of the study. Initially, all the responses to the questions were on a five-point Likert scale (except for demographic characteristics).

The first draft of the questionnaire, the objectives of the study and the purpose of the study were shared with the ESL program director at Hawthorn Hill in Des Moines. Particular attention was paid to the following aspects covered under the six areas in the questionnaire: Is the questionnaire relevant to the needs of the respondents? Are the questions and responses easy for the respondents to understand? Has sufficient attention been paid to details in the six categories? Would response to any of the questions elicit unpleasant memories or cause emotional disturbances among respondents? Do any of the questions violate respondents' right of privacy? Is the length of questionnaire appropriate? Do the questions include all possible categories of responses?

As a result of this pre-test process, two categories (housing and family information) were removed. The remaining four categories were renamed: education needs, employment needs and health needs. Most of the questions in each of the four categories were retained. A few questions were broken down into simpler ones, and a few new ones were added. The Likert scale version of the questionnaire was rejected as it was felt it would be very tedious to explain the scale to the respondents.

Housing information and family characteristics were dropped from the original draft for four reasons. One, it was felt that the collected data would become extremely voluminous for appropriate handling. Two, it made the questionnaire very lengthy and bulky warranting the apprehension that respondents might not appreciate and cooperate fully. Three, it was felt that education, employment and health needs were the most basic and urgent needs of the refugee women. Lastly, the financial liability of the study imposed on the researcher might become overwhelming.

After rephrasing and revising, the second draft of the questionnaire was distributed to six ESL teachers working in Des Moines with Southeast Asian refugee women. Again, the focus of attention was: Are the questions relevant to the respondents' needs? Are the questions easy for respondents to follow? Are the explanations minimal? Is the length of questionnaire appropriate? The second draft of the questionnaire was approved with one recommendation, i.e., to rephrase question 60 since there are various oriental food stores in Des Moines. ("Do you know that the Thai market in Des Moines sells food from your home country?" was changed to "Do you know that different oriental food stores in Des Moines sell food from your home country?")

The third draft of the questionnaire was shared with two Southeast Asian refugee social workers at the Iowa Refugee Service Center (IRSC). After the purpose and objectives of the study were explained to them, a copy of the questionnaire was shared with each. They were requested to examine the questionnaire for content, clarity, language and for any other suggestions they might have. Except for rephrasing a few terms

such as "curriculum", "medical care", and "quality" for which no appropriate or equivalent lexical translations were available, the two social workers had no suggestions to offer. Due to lack of time and resources, back-translation of the questionnaire was not possible.

The fourth version of the questionnaire was pilot tested on five Southeast Asian refugee women. As a result of the pilot test one question was dropped. (How can Hawthorn Hill Community Center or [...name the ESL program] better help you with job skills training programs?) The women found it difficult to answer that question as the objectives of ESL programs are not to train for jobs. Another question that caused slight confusion was: "Have you had any need for medical care?" The term "medical care" was being confused for Medicare insurance by practically all respondents. An appropriate substitute could not be found.

The final version of the questionnaire consisted of 65 questions. (See Appendix J for the questionnaire.) The first section (demographic characteristics) included 7 questions relating to family size, marital status, age, and length of residence in the U.S. The second section (education needs) included 27 questions and concentrated on the following: previous educational background, ESL training background and need, education needs of self and children, and barriers in meeting those needs. In the third section, a set of 12 questions probed the respondents' employment needs. The major areas covered employment status, barriers to employment, and job skills possessed. The final section (health needs) had 18 questions pertaining to medical and dental care, barriers encountered in doctor-patient relationships, access to Southeast Asian

foods, and need for nutrition education with respect to American food items. The last question pertained to respondents' felt needs. The number of questions in any one section did not imply an urgency or special need of that particular area or section.

#### Unit compatibility

Much of the literature published on the history, geography, politics, cultural traditions, and ethnic background (for and by resettlement agencies and volunteer training programs) provided the needed background information on Southeast Asian refugees. The 5 groups of Southeast Asian refugee women represented in the study were Vietnamese (from Vietnam); Tai Dam, Hmong, and Laotians (from Laos); and Cambodians (from Cambodia). (See Appendix A for geographic location.) Although these women have come from historically, politically, geographically, culturally and ethnically different backgrounds, in terms of political antecedents of 1975 and its aftermath, as well as broader geographical areas, they seem to share much in common.

Through the Iowa Refugee Service Center (IRSC) in Des Moines, statistical information was gathered regarding the Southeast Asian refugee population in Iowa, especially in Des Moines. The five ethnic groups found to be predominant in Des Moines were Vietnamese, Tai Dam, Hmong, Laotian, and Cambodians.

#### Sample selection

The Iowa Refugee Service Center (IRSC) in Des Moines provided an estimate for population distribution of the 8,600 Southeast Asian refu-

gees in Iowa as follows: Laotian, 2,000; Tai Dam, 2,500; Hmong, 1,400; Vietnamese, 2,300; and Cambodians, 400. The Des Moines greater urban area contains approximately 3,000 Southeast Asian refugees from all ethnic groups, mainly Vietnamese, Laotians, Hmong, Tai Dam, and Cambodians. Hence, initially it was anticipated that selection of respondents would not present a major problem. IRSC was approached for assistance in identification of the sample. Due to their unwillingness to provide any sort of assistance, that strategy had to be abandoned and three new ones adopted.

In the first strategy, ESL program directors at Hawthorn Hill Community Center, Woodland Willkie Community Center and Des Moines Area Community College (DMACC) were approached. They readily granted permission to interview those Southeast Asian refugee women who were attending ESL classes at these various centers. However, due to a small number of women who were attending ESL classes, approaching summer vacation, and various other problems, most of the women were not available for interviews. Eventually, only 15 women from these centers could be interviewed.

As an alternative, directors of Broadlawns Medical Center and WIC Program (Women, Infant, Children) in Des Moines were contacted. They expressed eagerness to help. But there were certain inherent problems in this approach. The director of the WIC program informed the researcher that women seldom came to the center. Usually, their husbands came to collect the checks and whatever materials were needed. Moreover, these visits were very irregular.

Though most of the refugees visited Broadlawns Medical Center for their medical needs, there were two problems in that approach. One, visits made by the refugee women were irregular. Two, bilingual doctors were available only two times a week for consultation and examination. Thus, it would take at least six months to locate and interview the required sample. Hence this approach had to be abandoned.

Eventually, in the third strategy, each community's leader was contacted. The purpose, objectives and importance of the study were explained to them, and each was given a copy of the questionnaire to examine. They agreed to assist in identifying the required sample. Due to Federal laws protecting the refugee's privacy, a list of names and addresses could not be made available. But with assistance from translators and interpreters (provided by the community leaders), 30 women were randomly selected from each of the five ethnic groups. (The interpreters and translators had access to a complete list of Southeast Asian refugees in the Des Moines greater urban area.) Thus, a total of 150 Southeast Asian refugee women were interviewed. The questionnaire consisted of 65 questions and was administered individually in the homes of refugees as well as at the four ESL centers (Hawthorn Hill, Woodland Willkie, DMACC, North High).

The problem of locating the sample was not germane to this study. Stewart (1985), Scott (1985), Bell (1984) and Mohd-Nor (1982) also reported similar problems. Stewart (1985) interviewed 52 Tai Dam women from February 1983 through December 1983. The sample selection process for her study was based primarily on convenience--those women who were



available at home and willing to talk. Mohd-Nor (1982) reported using a snowball technique to locate the sample and collect data. He identified popular gathering centers among the Vietnamese where heads of households were first interviewed. Names and addresses of other families were then sought from those who were willing to cooperate. Using this technique, he was able to interview a total sample of 20 Vietnamese refugee heads of households.

#### Interpreter selection and training

The directors of ESL programs, Broadlawn Medical Center and WIC program, as well as ESL teachers unanimously recommended that assistance from translators and interpreters would be mandatory. Regardless of the number of years of ESL classes attended by respondents, their observation was that most Southeast Asian refugee women would need assistance in understanding the questionnaire and communicating in English. Hence, at the time that efforts were made to pretest the questionnaire and locate the desired sample, simultaneously, efforts were made to identify translators and interpreters. When IRSC was approached, they expressed unwillingness to cooperate or provide any assistance. Thus, when the community leaders were approached for assistance in identifying the sample, they were also requested for assistance in identifying translators and interpreters.

Seven interpreters were eventually made available: two Hmong, two Cambodians, one Vietnamese, one Laotian and one Tai Dam. Due to summer vacation, financial problems, and their job schedules, very little choice

was available during the interpreter selection process. Once again, the purpose and objectives of the study were explained to them, and each was provided with a copy of the questionnaire. During their training session, which lasted one morning, each question on the questionnaire was thoroughly discussed. Due to their busy schedule and summer vacations, the interview process and time had to be adjusted according to their schedules and convenience.

Four of the interpreters were females and three were males. Midway through the study three interpreters decided to discontinue. One of the Hmong interpreters was in the third trimester of her pregnancy. It became too stressful for her to continue. One Laotian and one Cambodian interpreter decided to discontinue. Both worked as interpreters at IRSC and mentioned that instructions from IRSC advised them not to cooperate. Since the Tai Dam interpreter was multilingual, he assisted in interviewing the remaining Laotian women.

The problems faced with the Vietnamese interpreter were of an entirely different nature. At the outset, she proclaimed that Vietnamese refugees were doing very well in the United States and had no needs. It took a complete session to convince her of the importance of the study. The problem was that in her home country she was the daughter of a governor and felt she had to maintain her social distance. On the other hand, her family owned a food store business in Des Moines. Once she overcame her initial inhibition, she saw this as an opportunity to attract more customers.

Few problems were encountered in training interpreters and maintaining time commitments. The basic problem of maneuvering time schedules of interpreters, respondents and the time required by the investigator to make arrangements to reach Des Moines remained throughout the duration of the study.

#### Field responses

With considerable assistance from community leaders and interpreters, 150 Southeast Asian refugee women were interviewed. Thirty women were interviewed from each of the five ethnic backgrounds: Vietnamese, Tai Dam, Hmong, Laotian and Cambodians. The interpreters made a random selection of 30 respondents from each group (as the list of names and addresses was only available to them). As part of their training and responsibility, they were required to contact respondents by telephone and obtain prior permission to conduct the interviews. No respondent was to be coerced into an agreement. Permission was also obtained from directors and teachers of various ESL programs in Des Moines to interview some of their students and utilize their classroom facility.

The actual data collection took place from May, 1985 through June, 1985. Interviews were primarily held at the respondents' homes or at ESL centers. ESL teachers and directors were very helpful and cooperative. Even though interpreters were available, 10 respondents at the most advanced level of ESL classes did not need any assistance with the questionnaire. One respondent appeared eager to demonstrate her newly-acquired English language skills. Whenever needed, she consulted her Viet-

namese-English-Vietnamese dictionary. On the average it took one hour per respondent to complete the interview.

At the ESL centers, along with interpreters, teachers were also available for further assistance whenever needed. During home interviews, usually the husband was available if further assistance was needed. Occasionally, husbands tried to answer for their wives. The investigator did not experience any problems of respondent reticence. Nor was any need felt to provide ego protection or a psychic ally of any sort. Only in one instance was a Hmong husband threateningly hostile to the situation. He did not want his wife to participate in the study, even though prior permission had been sought and given. Thus, she was dropped from the study.

#### Statistical Analysis

After the data had been collected for 150 Southeast Asian refugee women, it was coded and analyzed. Frequencies were run for all the variables for the 65 questions--by ethnic background as well as for the total sample. One way ANOVA was tabulated to test differences in means for the 5 populations. Therefore, to compare the population means for statistical significance, for three or more groups of subjects, Scheffe's and Duncan's procedures were used (Borg, 1981). The five population means were compared for statistical significance for education, employment and health needs. The total number of cases varied from question to question because not all women answered every question. In addition, some questions were not asked due to a negative response on a previous related question.

Three research questions were asked regarding education, employment and health needs of 150 Southeast Asian refugee women.

1. Is there a significant difference among Tai Dam, Laotian, Cambodian, Hmong and Vietnamese women regarding their education needs?
2. Is there a significant difference among Tai Dam, Laotian, Cambodian, Hmong and Vietnamese women regarding their employment needs?
3. Is there a significant difference among Tai Dam, Laotian, Cambodian, Hmong and Vietnamese women regarding their health needs?

From these 3 research questions, the following 12 hypotheses were generated addressing education, employment and health needs of the women representing five different ethnic backgrounds.

Hypotheses concerned with education needs

Hypothesis 1: There will be no statistically significant differences regarding satisfaction with ESL classes among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 2: There will be no statistically significant differences regarding the difficulty in attending ESL classes among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 3: There will be no statistically significant differences regarding the perception of the quality of school life for children among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 4: There will be no statistically significant differences regarding parent-teacher conference assistance needs among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 5: There will be no statistically significant differences regarding school curriculum assistance needs among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypotheses concerned with employment needs

Hypothesis 6: There will be no statistically significant differences regarding job contentment among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 7: There will be no statistically significant differences regarding the perception of job skills for their present job among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 8: There will be no statistically significant differences regarding the job training programs among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypotheses concerned with health needs

Hypothesis 9: There will be no statistically significant differences regarding the perception of health status among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 10: There will be no statistically significant differences regarding the availability of medical care among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 11: There will be no statistically significant differences regarding the availability of dental care among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

Hypothesis 12: There will be no statistically significant differences regarding the comprehension of medical instructions among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

## FINDINGS

One hundred and fifty Southeast Asian refugee women living in the Des Moines metropolitan area were interviewed between the spring and summer of 1985. The five ethnic groups represented in the study were Tai Dam, Laotian, Cambodian, Hmong and Vietnamese. Thirty women in each group were interviewed regarding their felt needs in areas of education, employment and health. However, responses for the total number of cases varied from question to question since not all women answered every question. In addition, some questions were not asked due to a negative response on a previous related question. For example, those women who stated they would not like to attend the Community College were not asked what courses they would like to study at the Community College. The results as measured by the needs assessment questionnaire were classified into three broad categories:

1. Demographic information on the Southeast Asian refugee women as measured by data obtained from the needs assessment questionnaire.
2. Education, employment and health needs of the Southeast Asian refugee women as measured by data obtained from the needs assessment questionnaire.
3. Tests of significance among education, employment and health needs of the Southeast Asian refugee women as measured by data obtained from the needs assessment questionnaire.



## Demographic Information

Table 1 indicates that 67.3% of the Southeast Asian refugee women living in the Des Moines metropolitan area are married and have husbands living with them as heads of household. A breakdown by ethnic background indicates 93.3% of Tai Dam women are married; 23.3% of Laotian women are widowed; and 20% of Vietnamese women are single. The Cambodian women reported highest percent (30%) of separation from their husbands. However, during the interview only Hmong women reported they were experiencing severe marital discord and stress which resulted in high rates of separation and divorce for them.

Table 2 indicates family size by ethnic background. From the total sample interviewed, 7.3% of the women reported they were living alone. An equal percent reported they had 7 or more people residing in the same residence with them. For the remaining sample, 26.7% women had 1 to 2 people; 32.6% women had 3 to 4 people; and 26% women had 5 to 6 people residing with them. Breakdown by ethnic background indicates 23.3% of Vietnamese women were living alone and 50% of Tai Dam women had 3 to 4 people living with them. The age of members living in the same residence with respondents varied from less than 1 year to 74 years or more.

Tables 3 and 4 indicate the number of children for the respondents as a group and by ethnic background. For the total sample (Table 3), the number of children within 4 of the 6 categories was evenly distributed. Breakdown by ethnic background (Table 4) indicates 56.7% Cambodian women had 6 or more children and 20% of Vietnamese women were childless.

TABLE 1. Marital Status by Ethnic Background N=150

	Married	Separated	Widowed	Single	Divorced
-----					
Total Sample					
• Number	101	17	20	8	4
• Percent	67.3	11.3	13.3	5.3	2.7
Tai Dam					
• Number	28	-	2	-	-
• Percent	93.3	-	6.7	-	-
Laotian					
• Number	19	1	7	2	1
• Percent	63.3	3.3	23.3	6.7	3.3
Cambodian					
• Number	18	9	2	-	1
• Percent	60.0	30.0	6.7	-	3.3
Hmong					
• Number	21	3	5	-	1
• Percent	70.0	10.0	16.7	-	3.3
Vietnamese					
• Number	15	4	4	6	1
• Percent	50.0	13.3	13.3	20.0	3.3
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Table 5 compares husbands' occupational backgrounds for the total sample in the home country and in the United States. Regarding husbands' occupations in the home country 22.7% women reported their husbands had served in the army; 14% reported their husbands had held agriculture related jobs (primarily farming); 9.3% reported their husband's occupation was in the field of human services and education (such as bankers), while 1.3% of the men had worked for the government.

With respect to occupation in the United States, 24% of the women reported their husbands were receiving welfare, and 19.3% reported their

TABLE 2. Family Size by Ethnic Background N=150

Family Size	Total	Tai Dam	Lao	Cambodian	Hmong	Vietnamese
Live Alone						
• Number	11	-	-	-	4	7
• Percent	7.3	-	-	-	13.3	23.3
1 to 2						
• Number	40	9	11	7	7	6
• Percent	26.7	30.0	36.7	23.3	23.3	20.0
3 to 4						
• Number	49	15	8	7	8	11
• Percent	32.6	50.0	26.7	23.3	26.7	36.7
5 to 6						
• Number	39	5	11	11	8	4
• Percent	26.0	16.7	36.7	36.7	26.7	13.3
7 or more						
• Number	11	1	-	5	3	2
• Percent	7.3	3.3	-	16.7	10.0	6.7

TABLE 3. Number of Children for Total Sample N=150

No. of Children	Percent	Number
0-1 child	18.0	27
2 children	18.7	28
3 children	18.7	28
4 children	12.7	19
5 children	13.3	20
6/more children	18.7	28

TABLE 4. Number of Children by Ethnic Background N=150

No. of Children	Tai Dam	Laotian	Cambodian	Hmong	Vietnamese
<b>Childless</b>					
• Number	2	1	-	3	6
• Percent	6.7	3.3	-	10.0	20.0
<b>1 Child</b>					
• Number	5	3	-	3	5
• Percent	16.7	10.0	-	10.0	16.7
<b>2 Children</b>					
• Number	8	5	1	6	7
• Percent	26.7	16.7	3.3	20.0	23.3
<b>3 Children</b>					
• Number	8	7	5	5	3
• Percent	26.7	23.3	16.7	16.7	10.0
<b>4 Children</b>					
• Number	3	5	2	3	6
• Percent	10.0	16.7	6.7	10.0	20.0
<b>5 Children</b>					
• Number	3	7	5	4	1
• Percent	10.0	23.3	16.7	13.3	3.3
<b>6 or More</b>					
• Number	1	2	17	6	2
• Percent	3.3	6.7	56.7	20.0	6.7

husbands were employed in trades, services and construction such as garbage collectors and custodians.

Table 6 indicates a breakdown of the husbands' occupations in the home country and in the United States by ethnic background. The highest percent of unemployment for their husbands in the U.S. was reported by 36.7% of Tai Dam and 30% of Hmong women. Vietnamese women reported the lowest unemployment rate (6.7%) for their husbands.

TABLE 5. Husband's Occupation in Home Country and U.S.A. N=101

Occupation	Home Country	U.S.A.
Welfare (unemployed)		
• Number	-	36
• Percent	-	24.0
Trades, Services, Construction		
• Number	12	29
• Percent	8.0	19.3
Industrial, Retail		
• Number	4	11
• Percent	2.7	7.3
Human Services, Education		
• Number	14	14
• Percent	9.3	9.3
Office, Clerical		
• Number	3	3
• Percent	2.0	2.0
Quantity Food Service		
• Number	1	4
• Percent	.7	2.7
Agriculture		
• Number	21	3
• Percent	14.0	2.0
Army		
• Number	34	-
• Percent	22.7	-
Skilled manual crafts		
• Number	-	1
• Percent	-	.7
Student		
• Number	10	-
• Percent	6.7	-
Government		
• Number	2	-
• Percent	1.3	-

TABLE 6. Husbands' Occupations in Home Country and U.S.A. by Ethnic Background N=101

Occupation	Tai Dam n=28	Laotian n=19	Cambodian n=18	Hmong n=21	Vietnamese n=15
<b>Welfare (Unemployed)</b>					
• Home Country					
• Number	-	-	-	-	-
• Percent	-	-	-	-	-
• U.S.A.					
• Number	11	7	7	9	2
• Percent	36.7	23.3	23.3	30.0	6.7
<b>Trades, Services, Construction</b>					
• Home Country					
• Number	5	4	1	1	1
• Percent	16.7	13.3	3.3	3.3	3.3
• U.S.A.					
• Number	6	6	5	6	6
• Percent	20.0	20.0	16.7	20.0	20.0
<b>Industrial. Retail</b>					
• Home Country					
• Number	2	1	-	-	1
• Percent	6.7	3.3	-	-	3.3
• U.S.A.					
• Number	5	2	1	1	2
• Percent	16.7	6.7	3.3	3.3	6.7
<b>Human Services, Education</b>					
• Home Country					
• Number	2	4	3	2	3
• Percent	6.7	13.3	10.0	6.7	10.0
• U.S.A.					
• Number	5	1	3	2	3
• Percent	16.7	3.3	10.0	6.7	10.0
<b>Office, Clerical</b>					
• Home Country					
• Number	1	-	1	-	1
• Percent	3.3	-	3.3	-	3.3
• U.S.A.					
• Number	1	1	-	1	-
• Percent	3.3	3.3	-	3.3	-

TABLE 6. (continued)

Occupation	Tai Dam n=28	Laotian n=19	Cambodian n=18	Hmong n=21	Vietnamese n=15
<b>Quantity Food Service</b>					
• Home Country					
• Number	1	-	-	-	-
• Percent	3.3	-	-	-	-
• U.S.A.					
• Number	-	1	-	2	1
• Percent	-	3.3	-	6.7	3.3
<b>Agriculture</b>					
• Home Country					
• Number	3	6	8	3	1
• Percent	10.0	20.0	26.7	10.0	3.3
• U.S.A.					
• Number	-	1	1	-	1
• Percent	-	3.3	3.3	-	3.3
<b>Army</b>					
• Home Country					
• Number	12	4	3	10	5
• Percent	40.0	13.3	10.0	33.3	16.7
• U.S.A.					
• Number	-	-	-	-	-
• Percent	-	-	-	-	-
<b>Skilled Manual Craft</b>					
• Home Country					
• Number	-	-	-	-	-
• Percent	-	-	-	-	-
• U.S.A.					
• Number	-	-	1	-	-
• Percent	-	-	3.3	-	-
<b>Student</b>					
• Home Country					
• Number	1	-	2	5	2
• Percent	3.3	-	6.7	16.7	6.7
• U.S.A.					
• Number	-	-	-	-	-
• Percent	-	-	-	-	-

TABLE 6. (continued)

Occupation	Tai Dam n=28	Laotian n=19	Cambodian n=18	Hmong n=21	Vietnamese n=15
Government					
• Home Country					
• Number	1	-	-	-	1
• Percent	3.3	-	-	-	3.3
• U.S.A.					
• Number	-	-	-	-	-
• Percent	-	-	-	-	-

Tables 7 and 8 compare the education level of the respondents and their husbands. Regarding the respondents' own education levels, 39.3% women reported having received no formal education in the home country. Table 7 indicates only 4.6% women had attended college or beyond. When compared to their husbands (Table 8), 9.3% of the husbands had attended college or university. By ethnic background, Tai Dam and Hmong women reported the highest percent of no formal education in the home country. They also reported having received no college education.

The statistics reversed for the husbands' education levels. Table 8 indicates the home country education level of the husbands. Only 11.3% women reported their husbands had received no formal schooling or training in the home country. On the other hand, 18.7% men had received elementary education and 27.3% men had received secondary education. Consistently, for the five ethnic groups, percentages for no education and elementary education for the women were much higher than for men. For secondary education and beyond, the percentages for men were higher.



TABLE 7. Respondents' Home Country Education Level  
N=150

	No Educ	El Educ	Sec Educ	College
-----				
Total Sample				
• Number	59	53	31	7
• Percent	39.3	35.4	20.7	4.6
Tai Dam				
• Number	19	5	6	-
• Percent	63.3	16.7	20.0	-
Laotian				
• Number	11	12	6	1
• Percent	36.7	40.0	20.0	3.3
Cambodian				
• Number	13	14	-	3
• Percent	43.3	46.7	-	10.0
Hmong				
• Number	15	10	5	-
• Percent	50.0	33.3	16.7	-
Vietnamese				
• Number	1	12	14	3
• Percent	3.3	40.0	46.7	10.0
-----				

The respondents' mean length of stay in the United States was 4.62 years (Table 9). A breakdown by numbers of years indicates that 50.7% of the respondents had lived in the United States between 3-5 years. Table 9 also indicates that 36.7% of Tai Dam women had lived in the United States for 9 years or more and 63.3% of Vietnamese women had lived in the United States between 3-5 years.

The mean age for the women was 39.12 years with 7.3% women listing their age as 30 years or more. By ethnic background, the mean ages were

TABLE 8. Husbands' Home Country Education Level N=101

Husband's Education	No Educ	El Educ	Sec Educ	College
-----				
Total Sample				
• Number	17	28	41	14
• Percent	11.3	18.7	27.3	9.3
Tai Dam				
• Number	7	7	13	1
• Percent	23.3	23.3	43.3	3.3
Laotian				
• Number	4	7	3	5
• Percent	13.3	23.3	10.0	16.6
Cambodian				
• Number	2	9	5	2
• Percent	6.7	30.0	16.7	6.7
Hmong				
• Number	4	4	10	2
• Percent	13.3	13.3	33.3	6.7
Vietnamese				
• Number	-	1	10	4
• Percent	-	3.3	33.3	13.4
-----				

47.03 years for Tai Dam, 38.40 years for Vietnamese, 38.17 years for Hmong, 37.70 years for Laotian and 34.30 years for Cambodian women (Table 10). Table 11 indicates that 30% of the women were between 21-30 years old.

Women from all five ethnic backgrounds indicated they spoke more than one language at home. Other than the native language, 22% of the women indicated they also spoke English at home.

TABLE 9. Respondent's Length of Stay in U.S.A. N=150

	2yrs/less	3-5 yrs	6-8 yrs	9yrs/over	Mean
Total Sample					4.62
• Number	31	76	23	20	
• Percent	20.7	50.7	15.3	13.4	
Tai Dam					6.23
• Number	3	10	6	11	
• Percent	10.0	33.3	20.0	36.7	
Laotian					3.90
• Number	9	15	6	-	
• Percent	29.9	50.1	20.0	-	
Cambodian					2.93
• Number	10	18	2	-	
• Percent	33.4	60.0	6.7	-	
Hmong					5.17
• Number	4	14	8	4	
• Percent	13.3	46.7	26.6	13.3	
Vietnamese					4.87
• Number	5	19	1	5	
• Percent	16.6	63.3	3.3	16.6	

TABLE 10. Respondents Mean Age N=150

Ethnic Background	Mean Age
Total Sample	39.12
Tai Dam	47.03
Vietnamese	38.40
Hmong	38.17
Laotian	37.70
Cambodian	34.30

TABLE 11. Respondent's Age N=150

Age Range/ Ethnic Background	Percent	Number
20 yrs/less	4.1	6
• Tai Dam	-	-
• Laotian	6.7	2
• Cambodian	6.6	2
• Hmong	6.7	2
• Vietnamese	-	-
21-30 years	30.0	45
• Tai Dam	16.5	5
• Laotian	26.6	8
• Cambodian	43.3	13
• Hmong	36.7	11
• Vietnamese	26.6	8
31-40 years	21.4	32
• Tai Dam	13.3	4
• Laotian	26.6	8
• Cambodian	23.3	7
• Hmong	13.2	4
• Vietnamese	29.9	9
41-50 years	21.3	32
• Tai Dam	26.6	8
• Laotian	23.3	7
• Cambodian	13.2	4
• Hmong	19.8	6
• Vietnamese	23.2	7
51 years and over	23.3	35
• Tai Dam	43.3	13
• Laotian	16.6	5
• Cambodian	13.3	10
• Hmong	23.3	7
• Vietnamese	19.9	6

## Education, Employment and Health Needs of Southeast Asian Refugee Women

Education needs

Regarding the respondents' ESL (English as a Second Language) needs, 56% reported not receiving any ESL training, whereas 44% reported receiving some ESL training. From the total sample interviewed, 58% of the women responded to the question whether there were sufficient ESL classes available in the community. Of those, 31.3% felt the number of ESL classes available were insufficient, and 26.7% felt the number of ESL classes available were sufficient.

Amongst those attending ESL classes, 11.3% reported attending ESL classes at Hawthorn Hill Community Center; 6.7% reported attending classes at Woodland Willkie Community Center; 4% reported attending classes at Des Moines Area Community College (DMACC); 5.3% reported attending ESL classes at North High School; and 3.3% reported attending ESL classes at the Cassady and Church.

The number of hours of ESL instruction per week ranged from less than 4 hours per week to over 25 hours per week. Table 12 indicates 23.4% of the women reported receiving between 4 to 6 hours per week of ESL training.

Table 13 indicates a breakdown by ethnic background for the number of hours per week of English instruction. A high percent of Hmong women (53.3%) reported receiving 4-6 hours per week of English instruction.

Of those attending ESL classes, 25.3% indicated feeling very satisfied with ESL classes, 17.3% indicated feeling somewhat satisfied with

TABLE 12. Number of Hours Per Week of English Instruction N=66

Hours Per Week	Percent	Number
1-3 hours	4.7	7
4-6 hours	23.4	35
7-9 hours	.7	1
10-12 hours	6.0	9
13-15 hours	5.4	8
16-20 hours	1.3	2
21-25 hours	1.3	2
26/more hours	1.3	2

ESL classes, and 1.3% indicated feeling dissatisfied with ESL classes. Further, 33.3% women reported attending classes for 1 year or less, and 10.6% women reported attending 2 or more years of ESL classes. In response to the question, "for how many more years do you feel that you would need to attend ESL classes", 10.7% of the respondents felt they would need to attend 2 years or less of ESL classes, 18% felt they would need to attend 3 or 4 more years of ESL classes, and 15.3% felt they would need to attend 5 or more years of ESL classes.

Further, 28% of the women did not find it difficult to attend ESL classes, 8.7% of the women found it somewhat difficult, and 7.3% of the women found it very difficult to attend ESL classes. Some of the reasons listed were (1) small children at home (9.3%), (2) working full time

TABLE 13. Number of Hours per Week of English Instruction  
by Ethnic Background N=66

Hours Per Week	Tai Dam n=12	Laotian n=13	Cambodian n=7	Hmong n=21	Vietnamese n=13
1-3 hours					
• Number	1	4	1	-	1
• Percent	3.3	13.3	3.3	-	3.3
4-6 hours					
• Number	8	3	2	16	6
• Percent	26.7	10.0	6.7	53.3	20.0
7-9 hours					
• Number	-	-	-	-	1
• Percent	-	-	-	-	3.3
10-12 hours					
• Number	1	1	2	3	2
• Percent	3.3	3.3	6.7	10.0	6.7
13-15 hours					
• Number	1	2	2	1	2
• Percent	3.3	6.7	6.7	3.3	6.7
16-20 hours					
• Number	-	1	-	-	1
• Percent	-	3.3	-	-	3.3
21-25 hours					
• Number	1	1	-	1	-
• Percent	3.3	3.3	-	3.3	-
26 or more hours					
• Number	-	1	-	-	-
• Percent	-	3.3	-	-	-

(5.3%), (3) difficulty of language (5.3%), (4) cost of classes (3.3%), and (5) lack of transportation (3.3%). Other reasons included (1) poor health of self and/or family member(s), (2) speed of teacher talk, (3) baby-sitter not available, and (4) job searching, hence no time available to attend classes.

TABLE 14. Reasons for Not Wanting to Attend Community College N=102

Reasons	Percent	Number
Small Children at Home	22.0	33
Too old	21.3	32
Working full time	16.0	24
Language is difficult	15.3	23
No transportation	8.7	13
Daycare is too expensive	6.0	9
Babysit grandchildren	3.3	5
Not aware of Community College	1.3	2
Other	24.0	36

From the total sample interviewed, 68% of the women responded they would not like to attend the Community College at either Ankeny or Des Moines, while 32% of the women stated they would like to attend the Community College. A closer examination by nationality and ethnic background indicated 86.7% of Tai Dam women, 70% of Vietnamese women, 63.3%



of Laotian women, and 60% each of Hmong and Cambodian women reported they would not like to attend the Community College. Table 14 lists the respondents' reasons for not wanting to attend the Community College. Most commonly cited reasons were (1) small children at home (22%), (2) age (21.3%), (3) working full time (16%), (4) difficulty of language (15.3%), and (5) lack of transportation (8.7%). Other reasons included (1) lack of interest, (2) poor health, (3) Community College costs, (4) dissatisfaction with classes, (5) searching for job, and (6) poor memory.

Table 15 lists by ethnic background, reasons for not wanting to attend the Community College. Small children at home was mentioned by 30% each of Tai Dam and Hmong women, working full time by 30% of Cambodian women, and, language is difficult by 26.7% of Tai Dam women.

Thirty-two percent of the respondents who expressed a desire to attend the Community College (Table 16) listed sewing or tailoring listed as the most popular course (11.3%). General Equivalency Diploma (GED) was cited by 8% and accounting by 6.7% of the women.

Table 17 indicates that 23.3% of Tai Dam and 13.3% each of Laotian and Hmong women are interested in sewing or tailoring, and 16.7% of Vietnamese women are interested in accounting.

From the total sample of 150 women, 66.7% reported that their children were attending school or college in the United States. Table 18 indicates that 10% of the women had children who graduated from college, and an equal percent of the women had children who were attending college. By grades, 41.4% women had children attending grades 1-6, and 29.3% women had children attending grades 7-9. Another 20.1% women had

TABLE 15. Reasons for not Wanting to Attend Community College  
by Ethnic Background N=102

Reasons	Tai Dam n=18	Laotian n=18	Cambodian n=26	Hmong n=19	Vietnamese n=21
<b>Small Children at home</b>					
• Number	9	6	2	9	6
• Percent	30.0	20.0	6.7	30.0	20.0
<b>Daycare is too Expensive</b>					
• Number	5	3	-	2	-
• Percent	16.7	10.0	-	6.7	-
<b>No Transportation</b>					
• Number	-	4	2	2	5
• Percent	-	13.3	6.7	6.7	16.7
<b>Not Aware of Community College</b>					
• Number	-	-	-	1	1
• Percent	-	-	-	3.3	3.3
<b>Working Full Time</b>					
• Number	4	3	9	1	7
• Percent	13.3	10.0	30.0	3.3	23.3
<b>Too Old</b>					
• Number	6	7	6	8	5
• Percent	20.0	23.3	20.0	26.7	16.7
<b>Language is Difficult</b>					
• Number	8	6	4	4	1
• Percent	26.7	20.0	13.3	13.3	3.3
<b>Babysit Grand- children</b>					
• Number	1	1	3	-	-
• Percent	3.3	3.3	10.0	-	-
<b>Other</b>					
• Number	8	9	7	2	9
• Percent	26.7	30.0	23.3	6.7	30.0

TABLE 16. Respondents' Study Areas of Interest N=48

Courses	Percent	Number
Tailoring/Sewing	11.3	17
GED	8.0	12
Accounting	6.7	10
Typing	3.3	5
Nursing	2.7	4
Computer Science	2.0	3
Business	1.3	2
Printing	.7	1
Cooking	.7	1
Other	1.3	2

children attending grades 10-12. The percent of women with children attending nursery school was 8% and kindergarten was 12%. Except for Cambodian women's children, a breakdown by ethnic background (Table 19) reveals school attendance for the respondents' children was mostly spread between grades 1 through 12.

With regard to quality of education in the United States for their children and potential improvement, 22.7% of the women felt the quality of school life was very good, and 38.7% of the women felt it was somewhat good. An inquiry by ethnic background (Table 20) reveals that 36.7% of the Vietnamese women felt the quality of education for their children in the United States was very good.

TABLE 17. Respondents, Study Areas of Interest by Ethnic Background N=48

Courses	Tai Dam n=12	Laotian n=12	Cambodian n=4	Hmong n=11	Vietnamese n=9
<b>GED</b>					
• Number	2	2	2	3	3
• Percent	6.7	6.7	6.7	10.0	10.0
<b>Nursing</b>					
• Number	-	2	1	1	-
• Percent	-	6.7	3.3	3.3	-
<b>Tailoring/Sewing</b>					
• Number	7	4	1	4	1
• Percent	23.3	13.3	3.3	13.3	3.3
<b>Typing</b>					
• Number	1	1	-	2	-
• Percent	3.3	3.3	-	6.7	-
<b>Accounting</b>					
• Number	1	1	-	3	5
• Percent	3.3	3.3	-	10.0	16.7
<b>Business</b>					
• Number	-	2	-	-	-
• Percent	-	6.7	-	-	-
<b>Computer Science</b>					
• Number	-	2	-	1	-
• Percent	-	6.7	-	3.3	-
<b>Printing</b>					
• Number	-	-	-	-	1
• Percent	-	-	-	-	3.3
<b>Cooking</b>					
• Number	1	-	-	-	-
• Percent	3.3	-	-	-	-
<b>Other</b>					
• Number	-	1	1	-	-
• Percent	-	3.3	3.3	-	-

TABLE 18. Respondents' Children's School Attendance by Grades N=100

Grades	Percent	Number
Nursery	8.0	12
Kindergarten	12.0	18
Grades 1-6	41.4	62
Grades 7-9	29.3	44
Grades 10-12	20.1	30
College	10.1	15
Graduated	10.0	15

However, 58.7% of the women felt the quality of school life could be improved. Table 21 lists suggestions by the respondents for improving the quality of school life. From the four suggestions listed, 46.7% of the women recommended improving the quality of teaching. Another 44% of the women felt the schools did not provide enough leverage socially and culturally.

Table 22 lists suggestions by ethnic background. Among the four suggestions listed, 63.3% of Cambodian women, 46.7% of Vietnamese women, 43.3% of Laotian women, and 36.7% of Hmong women felt the need for improvement socially and culturally. A need to improve the quality of teaching was expressed by 56.7% of Tai Dam women, 53.3% each of Laotian and Cambodian women, and 36.7% of Hmong women. A more or less similar pattern emerged in terms of the respondents wanting their children to put

TABLE 19. Respondents' Children's School Attendance by Ethnic Background N=100

Grades	Tai Dam n=17	Laotian n=17	Cambodian n=26	Hmong n=20	Vietnamese n=20
<b>Nursery</b>					
• Number	-	3	3	3	3
• Percent	-	10.0	10.0	10.0	10.0
<b>Kindergarten</b>					
• Number	5	3	-	4	6
• Percent	16.7	10.0	-	13.3	20.0
<b>Grades 1-6</b>					
• Number	11	10	15	14	12
• Percent	36.7	33.3	50.0	46.7	40.0
<b>Grades 7-9</b>					
• Number	7	7	16	7	7
• Percent	23.3	23.3	53.3	23.3	23.3
<b>Grades 10-12</b>					
• Number	4	5	12	3	6
• Percent	13.3	16.7	40.0	10.0	20.0
<b>College</b>					
• Number	-	1	7	3	4
• Percent	-	3.3	23.3	10.0	13.3
<b>Graduated</b>					
• Number	1	-	7	2	5
• Percent	3.3	-	23.3	6.7	16.7

in more efforts. A need for more interpreters was expressed by 33.3% of the Cambodian women.

The percent of women who reported that they attend parent-teacher conferences in school was 36.7%. Regarding difficulty in understanding the conferences and assistance needed during conferences, 40.7% of the

TABLE 20. Quality of School Life for Children by Ethnic Background N=93

	Very Good	Good	Not Good
-----			
Total Sample			
• Number	34	58	1
• Percent	22.7	38.7	.7
Tai Dam			
• Number	7	18	-
• Percent	23.3	60.0	-
Laotian			
• Number	6	12	-
• Percent	20.0	40.0	-
Cambodian			
• Number	5	12	-
• Percent	16.7	40.0	-
Hmong			
• Number	5	11	1
• Percent	16.7	36.7	3.3
Vietnamese			
• Number	11	5	-
• Percent	36.7	16.7	-
-----			

TABLE 21. Suggestions For Improving the Quality of School Life N=88

Description	Percent	Number
Teach more and better	46.7	70
Improve socially & culturally	44.0	66
Learn more and better	40.7	61
Provide more interpreters	14.0	21
-----		

TABLE 22. Suggestions by Ethnic Background for Improving the Quality of School Life N=88

Description	Tai Dam n=17	Laotian n=17	Cambodian n=21	Hmong n=17	Vietnamese n=16
-----					
Teach more and better					
• Number	17	16	16	11	5
• Percent	56.7	53.3	53.3	36.7	16.7
Improve socially and culturally					
• Number	5	13	19	11	14
• Percent	16.7	43.3	63.3	36.7	46.7
Learn more and better					
• Number	17	16	13	11	2
• Percent	56.7	53.3	43.3	36.7	6.7
Provide more interpreters					
• Number	-	5	10	2	3
• Percent	-	16.7	33.3	6.7	10.0
-----					

women found the conferences very difficult to understand, 26% of the women reported they need "a lot" of assistance with understanding parent-teacher conferences, and 12.7% women reported they need "some" assistance. Table 23 indicates 43.3% of Cambodian women and 33.3% of Laotian women reported they need a "great" deal of assistance, whereas 23.3% of Vietnamese women indicated they need no assistance.

With respect to understanding the school curriculum, 45.3% of the women reported having difficulty understanding the school curriculum; 32% of the women expressed they need a "lot" of assistance with understanding



TABLE 23. Needed Assistance to Understand  
Parent-Teacher Conferences N=80

	Percent	Number
Very much	26.0	39
• Tai Dam	26.7	8
• Laotian	33.3	10
• Cambodian	43.3	13
• Hmong	20.0	6
• Vietnamese	6.7	2
Somewhat	12.7	19
• Tai Dam	13.3	4
• Laotian	10.0	3
• Cambodian	3.3	1
• Hmong	23.3	7
• Vietnamese	13.3	4
Not At All	14.7	22
• Tai Dam	16.7	5
• Laotian	13.3	4
• Cambodian	10.0	3
• Hmong	10.0	3
• Vietnamese	23.3	7

the school curriculum; and 11.3% of the women expressed they need "some" assistance in understanding the school curriculum. Table 24 indicates that 50% of Cambodian women reported they need a "lot" of assistance in understanding the school curriculum. On the other hand, 36.7% of the Vietnamese women indicated that they do not need any assistance in understanding the school curriculum.

TABLE 24. Needed Assistance to Understand School Curriculum N=89

	Percent	Number
Very much	32.0	48
• Tai Dam	40.0	12
• Laotian	30.0	9
• Cambodian	50.0	15
• Hmong	33.3	10
• Vietnamese	6.7	2
Somewhat	11.3	17
• Tai Dam	16.7	5
• Laotian	16.7	5
• Cambodian	3.3	1
• Hmong	13.3	4
• Vietnamese	6.7	2
Not At All	16.0	24
• Tai Dam	20.0	6
• Laotian	10.0	3
• Cambodian	3.3	1
• Hmong	10.0	3
• Vietnamese	36.7	11

### Employment needs

Regarding employment status, 65.3% of the respondents indicated they were unemployed in the United States, whereas 34.7% reported being engaged in gainful employment. The statistics reversed for employment status in the home country. Unemployment in the home country was reported as 29.3%. Table 25 indicates the respondents' occupations in their home countries and in the United States. Table 26 compares their occupational status by ethnic background in the home countries and in the

United States. Only 1.3% women reported that their occupations in the United States and home country were similar. From among those employed in the United States, 26.7% reported working full time, and 8.1% reported they were employed between 8-35 hours per week.

A comparison (Table 26) by ethnic background reveals unemployment was lowest in the home country for Tai Dam and Cambodian women (16.7% each), and highest for Vietnamese and Hmong women (40% each). In the United States, however, unemployment was lowest for Vietnamese women (46.7%) and highest for Tai Dam women (76.7%).

With respect to job satisfaction, 14% of the women indicated feeling very happy with their present jobs, 7.3% indicated feeling discontented, and 13.3% of the women indicated feeling somewhat happy with their jobs.

For their present jobs, 10% of the respondents felt they had sufficient job skills; 20.7% felt their job skills were somewhat sufficient; and 4% of the respondents felt they had insufficient job skills for their present jobs. Further, 26% of the respondents felt the job training programs were somewhat beneficial, and 4.7% felt the job training programs were not at all beneficial. Only 4% of the respondents felt the job training programs were beneficial.

Table 27 indicates by ethnic background the desire to work. From among those unemployed, 46.7% of the Hmong and 40% of the Cambodian women desired to be engaged in gainful employment. On the other hand, 43.3% each of the Tai Dam and Laotian women expressed the desire to remain unemployed.

TABLE 25. Respondents' Occupations in Home Country and the United States N=150

Occupation	Home Country	U.S.A.
Unemployed		
• Number	44	98
• Percent	29.3	65.3
Agriculture		
• Number	54	-
• Percent	36.0	-
Industrial, retail		
• Number	17	11
• Percent	11.3	7.3
Human services, Education		
• Number	13	6
• Percent	8.7	4.0
Skilled manual craft		
• Number	11	11
• Percent	7.3	7.3
Trades, Services, Construction		
• Number	8	13
• Percent	5.3	8.7
Office, clerical		
• Number	3	4
• Percent	2.0	2.7
Quantity Food Service		
• Number	-	7
• Percent	-	4.7

TABLE 26. Respondents' Occupations in Home Country and U.S.A. by Ethnic Background N=150

Occupation	Tai Dam	Laotian	Cambodian	Hmong	Vietnamese
<b>Unemployed</b>					
• Home Country					
• Number	5	10	5	12	12
• Percent	16.7	33.3	16.7	40.0	40.0
• U.S.A.					
• Number	23	21	18	22	14
• Percent	76.7	70.0	60.0	73.3	46.7
<b>Agriculture</b>					
• Home Country					
• Number	18	18	6	10	2
• Percent	60.0	60.0	20.0	33.3	6.7
• U.S.A.					
• Number	-	-	-	-	-
• Percent	-	-	-	-	-
<b>Skilled Manual Craft</b>					
• Home Country					
• Number	1	1	6	-	3
• Percent	3.3	3.3	20.0	-	10.0
• U.S.A.					
• Number	-	1	2	4	4
• Percent	-	3.3	6.7	13.3	13.3
<b>Industrial, Retail</b>					
• Home Country					
• Number	3	-	5	4	5
• Percent	10.0	-	16.7	13.3	16.7
• U.S.A.					
• Number	2	2	5	-	2
• Percent	6.7	6.7	16.7	-	6.7
<b>Office, Clerical</b>					
• Home Country					
• Number	-	-	-	1	2
• Percent	-	-	-	3.3	6.7
• U.S.A.					
• Number	1	2	1	-	-
• Percent	3.3	6.7	3.3	-	-

TABLE 26. (continued)

Occupation	Tai Dam	Laotian	Cambodian	Hmong	Vietnamese
Human Services, Education					
• Home Country					
• Number	3	1	1	2	6
• Percent	10.0	3.3	3.3	6.7	20.0
• U.S.A.					
• Number	-	3	-	1	2
• Percent	-	10.0	-	3.3	6.7
Quantity Food Service					
• Home Country					
• Number	-	-	-	-	-
• Percent	-	-	-	-	-
• U.S.A.					
• Number	3	-	-	-	4
• Percent	10.0	-	-	-	13.3
Trades, Services, Construction					
• Home Country					
• Number	-	-	7	1	-
• Percent	-	-	23.3	3.3	-
• U.S.A.					
• Number	1	1	4	3	4
• Percent	3.3	3.3	13.3	10.0	13.3

Table 28 lists reasons for remaining unemployed for the 34.7% women who reported they did not desire to work. Three major reasons listed were (1) language barriers (16.7%), (2) age (12.7%), and (3) small children at home (12%). Other reasons listed were (1) poor health, (2) lack of transportation, (3) desire to attend school, (4) take care of family, and (5) financially well-off.

TABLE 27. Desire to Work by Ethnic Background N=98

Desire to Work	Yes	No
-----		
Tai Dam		
• Number	5	13
• Percent	16.7	43.3
Laotian		
• Number	9	13
• Percent	30.0	43.3
Cambodian		
• Number	12	11
• Percent	40.0	36.7
Hmong		
• Number	14	7
• Percent	46.7	23.3
Vietnamese		
• Number	6	8
• Percent	20.0	26.7
-----		

TABLE 28. Reasons for Remaining Unemployed N=52

Reasons	Percent	No.
-----		
Language barriers	18.0	27
Too old	13.3	20
Small children at home	12.7	19
Lack employable skills	5.3	8
Babysit grandchildren	4.7	7
Daycare is expensive	1.3	2
Other	14.0	21
-----		

TABLE 29. Reasons for Remaining Unemployed by Ethnic Background N=52

Reasons	Tai Dam n=11	Laotian n=6	Cambodian n=13	Hmong n=14	Vietnamese n=8
<b>Small Children at home</b>					
• Number	5	2	2	8	3
• Percent	16.7	6.7	6.7	26.7	10.0
<b>Daycare is expensive</b>					
• Number	-	2	-	-	1
• Percent	-	6.7	-	-	3.3
<b>Baby-sit Grandchildren</b>					
• Number	1	1	6	-	-
• Percent	3.3	3.3	20.0	-	-
<b>Too Old</b>					
• Number	3	3	7	3	3
• Percent	10.0	10.0	23.3	10.0	10.0
<b>Lack of Employable Skills</b>					
• Number	-	2	2	-	3
• Percent	-	6.7	6.7	-	10.0
<b>Language Barriers</b>					
• Number	7	2	2	11	5
• Percent	23.3	6.7	6.7	36.7	16.7
<b>Other</b>					
• Number	5	-	5	8	3
• Percent	16.7	-	16.7	26.7	10.0

Table 29 lists reasons for remaining unemployed by ethnic background. Language barriers were expressed by 36.7% of Hmong women and 23.3% of Tai Dam women. Age was expressed by 23.3% of Cambodian women, and small children at home was expressed by 26.7% of Hmong women.



Of the 30.7% women who expressed the desire to work, 16.7% wished to work in skilled manual crafts such as sewing, embroidery and other handicrafts; 4% expressed a desire to work in the office at clerical jobs such as typists and secretaries, and 4% said they would like to work as teachers, nurses or social workers.

TABLE 30. Perception of Job Skills Possessed N=150

Job Area	Percent	Number
Skilled manual craft		
• yes	58.7	88
• no	41.3	62
Agriculture		
• yes	53.3	80
• no	46.7	70
Industrial, retail		
• yes	22.7	34
• no	77.3	116
Office, clerical		
• yes	6.0	9
• no	94.0	141
Human services, Education		
• yes	12.0	18
• no	88.0	132
Quantity food service		
• yes	6.0	9
• no	94.0	141
Trades, Services, Construction		
• yes	8.7	13
• no	91.3	137

Of the seven employment areas identified, Table 30 indicates the Southeast Asian refugee women's perception of the skills they possess in each area. Except for skilled manual crafts (41.3%) and agriculture (46.7%), a relatively high percent of the women indicated they did not possess any job skills in most other areas.

#### Health needs

A need for medical care was expressed by 78.7% of the women. Regarding their present health status, 20.7% reported it was not at all good, 46% expressed it was somewhat good, and 33.3% stated it was very good. Tables 31 and 32 indicate health status and need for medical care by ethnic background.

Table 33 indicates the respondents' ease or difficulty of accessibility to medical and dental care. Medical care was extremely difficult to obtain for 35.3% women, and dental care was extremely difficult to obtain for 36.7% of the women.

Tables 34 and 35 indicate the ease of accessibility of medical and dental care by ethnic background. Regarding medical care, 46.7% of Hmong and 43.3% of Laotian women found it extremely difficult to obtain, while 56.7% of Vietnamese women did not find it difficult to obtain medical care. Similarly, for dental care, 43.3% of the Hmong and 50% of the Laotian women found it extremely difficult to obtain, while 56.7% of the Vietnamese women did not find it difficult to obtain dental care.

Concerning health services, 48% of the women reported they did not know when to see a doctor or a dentist, and 65.3% of the women reported

TABLE 31. Present Health Status N=150

Ethnic Group	Percent	Number
-----		
Total Sample		
: not at all good	20.7	31
: somewhat good	46.0	69
: very good	33.3	50
Tai Dam		
: not at all good	26.7	8
: somewhat good	50.0	15
: very good	23.3	7
Laotian		
: not at all good	23.3	7
: somewhat good	40.0	12
: very good	36.7	11
Cambodian		
: not at all good	16.7	5
: somewhat good	66.7	20
: very good	16.7	5
Hmong		
: not at all good	20.0	6
: somewhat good	33.3	10
: very good	46.7	14
Vietnamese		
: not at all good	16.7	5
: somewhat good	40.0	12
: very good	43.3	13
-----		

they were not aware of the health services available to them through their county. Tables 36 and 37 indicate, by ethnic background, knowledge about available health services and the ability to recognize when to consult a doctor.

TABLE 32. Need for Medical Care N=150

Ethnic Group		Percent	No.
Total Sample	• yes	78.7	118
	• no	21.3	32
Tai Dam	• yes	83.3	25
	• no	16.7	5
Laotian	• yes	80.0	24
	• no	20.0	6
Cambodian	• yes	96.7	29
	• no	3.3	1
Hmong	• yes	66.7	20
	• no	33.3	10
Vietnamese	• yes	66.7	20
	• no	33.3	10

TABLE 33. Accessibility of Medical and Dental Care N=150

Medical and Dental Care	Percent	Number
Medical care		
• extremely difficult to obtain	35.3	53
• somewhat difficult to obtain	24.0	36
• not at all difficult to obtain	40.7	61
Dental care		
• extremely difficult to obtain	36.7	59
• somewhat difficult to obtain	24.0	36
• not at all difficult to obtain	39.9	59

TABLE 34. Accessibility of Medical Care by Ethnic Background  
N=150

Medical Care	Tai Dam	Laotian	Cambodian	Hmong	Vietnamese
<b>Extremely Difficult</b>					
• Number	12	13	10	14	4
• Percent	40.0	43.3	33.3	46.7	13.3
<b>Somewhat Difficult</b>					
• Number	8	4	6	9	9
• Percent	26.7	13.3	20.0	30.0	30.0
<b>Not at all Difficult</b>					
• Number	10	13	14	7	17
• Percent	33.3	43.3	46.7	23.3	56.7

TABLE 35. Accessibility of Dental Care by Ethnic Background  
N=150

Dental Care	Tai Dam	Laotian	Cambodian	Hmong	Vietnamese
<b>Extremely Difficult</b>					
• Number	11	15	10	13	6
• Percent	36.7	50.0	33.3	43.3	20.0
<b>Somewhat Difficult</b>					
• Number	6	8	10	5	7
• Percent	20.0	26.7	33.3	16.7	23.3
<b>Not at all Difficult</b>					
• Number	13	7	10	12	17
• Percent	43.3	23.3	33.3	40.0	56.7

TABLE 36. Ability to Recognize when to Consult a Doctor by Ethnic Background  
N=150

See Doctor	Yes	No
Total Sample		
• Number	78	72
• Percent	52.0	48.0
Tai Dam		
• Number	19	11
• Percent	63.3	36.7
Laotian		
• Number	12	18
• Percent	40.0	60.0
Cambodian		
• Number	7	23
• Percent	23.3	76.7
Hmong		
• Number	16	14
• Percent	53.3	46.7
Vietnamese		
• Number	24	6
• Percent	80.0	20.0

By ethnic background, 76.7% of the Cambodian and 60% of the Laotian women revealed they were unable to recognize when to consult a doctor. On the other hand, 80% of the Vietnamese and 63.3% of the Tai Dam women reported they were able to recognize a situation when the doctor should be consulted.

Similarly, regarding knowledge about available health services, 86.7% of the Cambodian, 83.3% of the Hmong, 63.3% of the Laotian and

TABLE 37. Knowledge About Available Health Services by Ethnic Background  
N=150

Aware	Yes	No
-----		
Total Sample		
• Number	52	98
• Percent	34.7	65.3
Tai Dam		
• Number	19	11
• Percent	63.3	36.7
Laotian		
• Number	11	19
• Percent	36.7	63.3
Cambodian		
• Number	4	26
• Percent	13.3	86.7
Hmong		
• Number	5	25
• Percent	16.7	83.3
Vietnamese		
• Number	13	17
• Percent	43.3	56.7
-----		

56.7% of the Vietnamese women reported they were not aware of the health services available to them through their county. Only Tai Dam women (63.3%) reported they were aware of the health services available to them through their county.

Regarding the ease or difficulty of reaching a doctor or dentist, 54.7% women reported they found it difficult to reach the doctor or dentist. Table 38 indicates 70% of the Cambodian women and 56.7% of the Laotian women expressed difficulty in obtaining medical help.

TABLE 38. Accessibility of Medical Consultation  
and Assistance by Ethnic Background  
N=150

	Yes	No
Total Sample		
• Number	68	82
• Percent	45.3	54.7
Tai Dam		
• Number	18	12
• Percent	60.0	40.0
Laotian		
• Number	13	17
• Percent	43.3	56.7
Cambodian		
• Number	9	21
• Percent	30.0	70.0
Hmong		
• Number	16	14
• Percent	53.3	46.7
Vietnamese		
• Number	20	10
• Percent	66.7	33.3

TABLE 39. Reasons for Failure to seek a  
Doctor's Advice N=82

Barriers	Percent	Number
Language barrier	42.0	63
No transportation	21.3	32
Doctor not available	16.0	24
Other	12.7	19



TABLE 40. Ability to Follow Doctor's Instructions by Ethnic Background N=150

Doctor's Inst.	Tai Dam	Laotian	Cambodian	Hmong	Vietnamese
<b>Very Difficult</b>					
• Number	14	15	10	13	6
• Percent	46.7	50.0	33.3	43.3	20.0
<b>Somewhat Difficult</b>					
• Number	10	10	11	11	10
• Percent	33.3	33.3	36.7	36.7	33.3
<b>Not Difficult</b>					
• Number	6	5	9	6	14
• Percent	20.0	16.7	30.0	20.0	46.7

Table 39 lists barriers in reaching the doctor and Table 40 indicates, by ethnic background, the ability to follow doctors' instructions. Language was considered a barrier by 42% and lack of transportation by 21.3% women. In terms of ability to follow doctors' instructions, 38.7% women reported that they found it very difficult; 34.7% found it somewhat difficult; and 26.6% women did not find it difficult to follow doctor's instructions.

Though 98.7% of the women reported they were aware of the various Oriental food stores in Des Moines that sold food items from their home country, 16.7% of the women reported they found it difficult to find food items from their home country. Another 12% indicated they do not purchase food items from these stores. Some of the reasons listed (Table 41) for not purchasing food from these stores were: (1) food items are very expensive (7.3%), (2) lack of transportation (6%), and (3) lack of fresh food (2.7%).

TABLE 41. Reasons for Not Shopping at Oriental Food Stores N=18

Reasons	Percent	Number
Food items are very expensive	7.3	11
No transportation	6.0	9
Do not carry fresh food	2.7	4
Grow my own vegetables	2.0	3
Children like American food	2.0	3
Other	5.3	8

With respect to assistance needed in identifying American food, 70% of the women feel they do not need any assistance. A slightly smaller percent (63.3%) also said they do not need any assistance on how to prepare American food.

Table 42 lists the most significant needs as expressed by the women from the 5 ethnic backgrounds. Language instruction was expressed by 70.7% of the women. Education and (better) jobs each was expressed by 53.3% of the women. (Better) transportation was expressed by 26% and (better) medical services was expressed by 18% of the women.

Table 43 lists the most significant needs as expressed by the Southeast Asian refugee women representing the five different ethnic backgrounds.

Language was expressed as the most significant need by 86.7% of the Cambodian and 80% of the Laotian women, (better) jobs by 80% of the Hmong

TABLE 42. Most Significant Needs N=150

Need	Percent	No.
Language instruction	70.7	106
(Better) jobs	53.3	80
Education	53.3	80
(Better) transportation	26.0	39
(Better) medical services	18.0	27
Other	6.7	10

women, education by 76.7% each of the Laotian and the Hmong women, (better) transportation by 40% of the Hmong women, and (better) medical services by 23.3% each of the Vietnamese and the Tai Dam women.

#### Tests of Significance

Three research questions were asked regarding education, employment and health needs of 150 Southeast Asian refugee women who represented five different ethnic backgrounds.

1. Is there a significant difference among Tai Dam, Laotian, Cambodian, Hmong and Vietnamese women regarding their educational needs?
2. Is there a significant difference among Tai Dam, Laotian, Cambodian, Hmong and Vietnamese women regarding their employment needs?

TABLE 43. Most Significant Needs by Ethnic Background N=150

Needs by Ethnic Background	Percent	Number
Language Instruction		
• Cambodian	86.7	26
• Laotian	80.0	24
• Hmong	76.7	23
• Tai Dam	63.3	19
• Vietnamese	46.7	14
(Better) Jobs		
• Hmong	80.0	24
• Cambodian	53.3	16
• Tai Dam	50.0	15
• Laotian	43.3	13
• Vietnamese	40.0	12
Education		
• Laotian	76.7	23
• Hmong	76.7	23
• Cambodian	56.7	17
• Vietnamese	40.0	12
• Tai Dam	16.7	5
(Better) Transportation		
• Hmong	40.0	12
• Tai Dam	33.3	10
• Laotian	33.3	10
• Vietnamese	13.3	4
• Cambodian	10.0	3
(Better) Medical Services		
• Tai Dam	23.3	7
• Vietnamese	23.3	7
• Hmong	20.0	6
• Laotian	16.7	5
• Cambodian	6.7	2
Other		
• Vietnamese	20.0	6
• Laotian	6.7	2
• Tai Dam	3.3	1
• Hmong	3.3	1
• Cambodian	-	-

3. Is there a significant difference among Tai Dam, Laotian, Cambodian, Hmong and Vietnamese women regarding their health needs?

From these 3 research questions 12 hypotheses were formulated addressing education, employment and health needs of the women representing 5 different ethnic backgrounds.

The total number of cases varied from question to question since not all women answered every question due to a negative response on a previous related question. Therefore, it is quite possible that due to a relatively small sample size, some of the analyses of variances concerned with education and employment needs might not have indicated any statistically significant differences.

#### Hypotheses concerned with education needs

Hypothesis 1: There will be no statistically significant differences regarding satisfaction with ESL classes among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. (M1 = M2 = M3 = M4 = M5)

From the total sample of 150 women, 44% reported they had been receiving some English as a Second Language (ESL) training. The analysis of variance (Table 44) indicated that there was at least one significant difference at .05 level among the five groups regarding satisfaction with ESL classes. The follow-up Duncan's test showed Cambodian women were significantly different from Vietnamese, Hmong and Laotian women regarding satisfaction with ESL classes.

TABLE 44. ANOVA Satisfaction With ESL Classes

3=very satisfied, 2=somewhat, 1=not at all

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	7	2.57	.53	3.11*	.02
• Laotian	21	2.71	.46		
• Cambodian	12	2.08	.51		
• Hmong	13	2.69	.48		
• Vietnamese	13	2.54	.66		

\* F(4,61) = 3.11, p < .05.

A possible explanation for these differences could be that the mean length of stay in the United States for Cambodian women was much smaller compared to the mean for Vietnamese, Hmong and Laotian women. Hence, the Cambodian women might still be in the process of adjusting to their environment. Moreover, in their home country, fewer Cambodian women appeared to have attended school or come in personal contact with English-speaking Americans compared to the other three groups. During the interview, the Cambodian women often mentioned that they found it difficult to learn English. Further, it is also quite possible that the Cambodian women's dissatisfaction with ESL classes could be due to situational factors rather than teaching styles or course content.

Hypothesis 2: There will be no statistically significant differences regarding the difficulty in attending ESL classes among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. (M1 = M2 = M3 = M4 = M5)

TABLE 45. ANOVA Difficulty in Attending ESL Classes

3=very difficult, 2=somewhat, 1=little difficult

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	7	1.29	.76	1.72	.15
• Laotian	21	1.29	.64		
• Cambodian	12	1.67	.89		
• Hmong	13	1.92	.86		
• Vietnamese	13	1.54	.66		

From the total sample of 150 women, 44% reported they had been receiving some English as a Second Language training. The analysis of variance (Table 45) indicated there was no significant difference at .05 level among the five groups regarding difficulty in attending ESL classes.

Apart from the small sample size, many situational factors which were being addressed by ESL centers probably contributed to a result of no significant differences for the respondents from the five ethnic backgrounds. For instance, the most commonly listed situational barriers--childcare, transportation and tuition cost for ESL classes--were being addressed by the administrators of the different ESL centers. DMACC provides financial assistance towards tuition costs in the form of grants, and Hawthorn Hill provides free childcare and transport.

Hypothesis 3: There will be no statistically significant differences regarding the perception of the quality of school life for children

among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. (M1 = M2 = M3 = M4 = M5)

From the total sample of 150 women, 66.7% reported their children were attending school or college in the United States. The analysis of variance (Table 46) indicated there was no significant difference at .05 level among the five groups regarding their perception of the quality of school life for their children. However, the follow-up Duncan's test showed the Vietnamese women's perception of the quality of school life for their children in the United States was significantly different from Hmong, Tai Dam, Cambodian and Laotian women's perception of the quality of school life for their children in the United States.

TABLE 46. ANOVA Quality of School Life for Children

3=very good, 2=somewhat, 1=not good					
Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	25	2.28	.46	2.32	0.06
• Laotian	18	2.33	.49		
• Cambodian	17	2.29	.47		
• Hmong	17	2.24	.56		
• Vietnamese	16	2.69	.48		

Most of the Vietnamese women perceived school life for their children to be very good. One possible explanation could be that more of the Vietnamese children appeared to have either graduated from college or



were attending college compared to children from the other four groups. Hence, the response to the question was applicable to relatively fewer Vietnamese women with school-going children.

Hypothesis 4: There will be no statistically significant differences regarding parent-teacher conference assistance needs among the 5 groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. ( $M1 = M2 = M3 = M4 = M5$ )

From the total sample of 150 women, 66.7% reported their children were attending school or college in the United States and 40.7% reported they found it very difficult to understand parent-teacher conferences. The analysis of variance (Table 47) indicated there was at least one significant difference at .05 level among the five groups regarding parent-teacher conference assistance needs. The follow-up Duncan's test showed that Laotian and Cambodian women's parent-teacher conference assistance needs were significantly different from Vietnamese women's parent-teacher conference assistance needs.

One possible reason could be that the results indicate that most of the Vietnamese women were educated in their home country as compared to Cambodian and Laotian women. Hence, Vietnamese women might not be experiencing much difficulty in understanding parent-teacher conferences. Another reason could be that most of the Vietnamese women indicated that their husbands either attend the conferences or accompany them. Since most of the Vietnamese husbands had attended secondary school or beyond, understanding the conference for them was probably not very difficult.

TABLE 47. ANOVA Parent-Teacher Conference Assistance Needs

3=very much, 2=somewhat, 1=little

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	17	2.18	.88	2.78*	.03
• Laotian	17	2.35	.86		
• Cambodian	17	2.59	.80		
• Hmong	16	2.19	.75		
• Vietnamese	13	1.62	.77		

\*  $F(4,75) = 2.78, p < .05.$

Hypothesis 5: There will be no statistically significant differences regarding school curriculum assistance needs among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. ( $M1 = M2 = M3 = M4 = M5$ )

TABLE 48. ANOVA School Curriculum Assistance Needs

3=very much, 2=somewhat, 1=little

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	23	2.26	.86	7.37**	.000
• Laotian	17	2.35	.79		
• Cambodian	17	2.82	.53		
• Hmong	17	2.41	.80		
• Vietnamese	15	1.40	.74		

\*\*  $F(4,84) = 7.37, p < .001.$

From the total sample of 150 women, 66.7% reported their children were attending school or college in the United States, and 45.3% reported having difficulty understanding the school curriculum. The analysis of variance (Table 48) indicated there was at least one highly significant difference at .05 level among the five groups regarding school curriculum assistance needs. The follow-up Duncan's test showed Tai Dam, Laotian, Hmong and Cambodian women's school curriculum assistance needs were significantly different from Vietnamese women's school curriculum assistance needs. Further, Cambodian women's school curriculum assistance needs were significantly different from Tai Dam women's school curriculum assistance needs. There could be three possible explanations for these differences. First, the results indicate that most of the Vietnamese women in the study were educated in their home country. Two, most of the Vietnamese husbands also had received higher education in their home country. Third, the results of the study also indicate that more Vietnamese women had children who graduated from college or were attending college. Thus, due to the combined effect of the 3 factors, these women might have had fewer needs with respect to understanding the school curriculum. Probably, the required assistance was available to them within their home environment.

The differences between Cambodian and Tai Dam women's needs could be a function of their education level in their respective home countries. Comparatively, more Cambodian women in the study had attended school including college; whereas, most Tai Dam women had not received any education in their home country.

Hypotheses concerned with employment needs

Hypothesis 6: There will be no statistically significant differences regarding job contentment among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire.

(M1 = M2 = M3 = M4 = M5)

From the total sample of 150 women, only 43.7% reported being engaged in gainful employment. The analysis of variance (Table 49) indicated there was no significant difference at .05 level among the 5 ethnic groups regarding job contentment.

TABLE 49. ANOVA Job Contentment

3=very happy, 2=somewhat, 1=discontented

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	12	1.67	.49	2.30	.07
• Laotian	8	2.25	.71		
• Cambodian	7	2.29	.95		
• Hmong	9	2.22	.83		
• Vietnamese	16	2.50	.73		

There could be two possible explanations. One, with unemployment high, the number of women from each ethnic background who answered the question was small for any observable differences. Two, due to high unemployment, underemployment and poor economy in general, the respondents might not have felt comfortable expressing their feelings for fear of some kind of retribution.

Hypothesis 7: There will be no statistically significant differences regarding the perception of job skills for their present job among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. (M1 = M2 = M3 = M4 = M5)

From the total sample of 150 women, only 34.7% reported being engaged in gainful employment. The analysis of variance (Table 50) indicated there was no significant difference at .05 level among the five groups regarding perception of job skills.

TABLE 50. ANOVA Perception of Job Skills

3=very much, 2=somewhat, 1=not at all

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	12	2.08	.29	.37	.83
• Laotian	8	2.25	.71		
• Cambodian	7	2.29	.49		
• Hmong	9	2.00	.87		
• Vietnamese	16	2.25	.68		

Since unemployment and underemployment among the respondents was high, the number of women who answered the question was small. Most of the women interviewed indicated their jobs were easy and did not require much skill.

Hypothesis 8: There will be no statistically significant differences regarding the perception of job training program among the 5 ethnic

groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. (M1 = M2 = M3 = M4 = M5)

From the total sample of 150 women, only 34.7% reported being engaged in gainful employment. The analysis of variance (Table 51) indicated there was no significant difference at .05 level among the 5 groups regarding perception of job training programs.

TABLE 51. ANOVA Perception of Job Training Programs

3=very good, 2=somewhat, 1=not at all good

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	12	2.00	.00	1.64	.18
• Laotian	8	2.25	.46		
• Cambodian	7	2.00	.00		
• Hmong	9	2.11	.60		
• Vietnamese	16	1.75	.68		

A possible explanation could be that the few respondents who answered the question revealed that they had not attended any vocational job training programs. They had only received on-the-job training during their initial days at work.

#### Hypotheses concerned with health needs

Hypothesis 9: There will be no statistically significant differences regarding the perception of health status among the 5 ethnic groups

of Southeast Asian refugee women as measured by the needs assessment questionnaire. (M1 = M2 = M3 = M4 = M5)

The analysis of variance (Table 52) indicated there was no significant difference at .05 level among the 5 groups regarding perception of health status. However, Duncan's follow-up test showed Vietnamese women's perceptions to be significantly different.

TABLE 52. ANOVA Perception of Health Status

3=very good, 2=somewhat, 1=not at all good

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	30	1.97	.72	1.15	.33
• Laotian	30	2.13	.78		
• Cambodian	30	2.00	.59		
• Hmong	30	2.27	.78		
• Vietnamese	30	2.27	.74		

Since unemployment for Vietnamese women in the United States was comparatively lower, and they had also received comparatively more education in their home country, it is possible they encountered fewer affective barriers and in general perceived themselves as healthy.

Hypothesis 10: There will be no statistically significant differences regarding the availability of medical care among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. (M1 = M2 = M3 = M4 = M5)

The analysis of variance (Table 53) indicated there was at least one group significantly different at .05 level among the five groups regarding availability of medical care. The follow-up Duncan's test showed the Cambodian and Laotian women's access to medical care was significantly different from the Vietnamese women's access to medical care.

TABLE 53. ANOVA Availability of Medical Care

3=very difficult, 2=somewhat, 1=little

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	30	1.87	.90	2.57*	.04
• Laotian	30	2.23	.82		
• Cambodian	30	2.07	.87		
• Hmong	30	2.00	.95		
• Vietnamese	30	1.57	.73		

\* F(4,145) = 2.57, p < .05

Since the Vietnamese women had received more education in their home country and were also the least unemployed in the United States, the combined effect of situational and socio-economic barriers might have been minimized for them as compared to women from other nationalities and backgrounds.

Hypothesis 11: There will be no statistically significant differences regarding the availability of dental care among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. (M1 = M2 = M3 = M4 = M5)



TABLE 54. ANOVA Availability of Dental Care

3=very difficult, 2=somewhat, 1=little

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	30	1.93	.91	2.10	.08
• Laotian	30	2.27	.83		
• Cambodian	30	2.00	.83		
• Hmong	30	2.03	.93		
• Vietnamese	30	1.63	.81		

The analysis of variance (Table 54) indicated there was no significant difference at .05 level among the five groups regarding availability of dental care. However, the follow-up Duncan's test showed Vietnamese women's accessibility to dental care was different. Due to their better educational status in their home country, it is possible that the impact of socio-economic barriers such as language and no transportation were reduced.

Hypothesis 12: There will be no statistically significant differences regarding the comprehension of medical instructions among the 5 ethnic groups of Southeast Asian refugee women as measured by the needs assessment questionnaire. ( $M1 = M2 = M3 = M4 = M5$ )

The analysis of variance (Table 55) indicated there was at least one group significantly different at .05 level among the five ethnic groups regarding comprehension of medical instructions. The follow-up Duncan's test showed the Hmong, Tai Dam and Laotian women's comprehension of medi-

cal instructions was significantly different from Vietnamese women's comprehension of medical instructions.

TABLE 55. ANOVA Comprehension of Medical Instructions

3=very difficult, 2=somewhat, 1=little

Ethnic Group	N	Mean	SD	F Ratio	2-tailed
• Tai Dam	30	2.27	.78	2.90*	.02
• Laotian	30	2.33	.76		
• Cambodian	30	2.03	.81		
• Hmong	30	2.23	.77		
• Vietnamese	30	1.73	.78		

\*  $F(4,145) = 2.90, p < .05.$

These differences can probably be explained due to Vietnamese women's better education level in their home country. Hence they might be encountering fewer socio-economic barriers. The results also indicate that, compared to other four groups, less than half of the Vietnamese women expressed a need for language instruction or education.

#### Summary

The results of the study indicated that two-thirds of the women were married with almost half of them reporting four or more children. Almost a third of the women had not received any formal education in the home country. An equal amount had not received any elementary education.

Their mean length of stay in the United States was 4.62 years. Their mean age was 39.12 years. The youngest group of women were the Cambodian, and the oldest were the Tai Dam. Almost two-thirds of the women were between 21-40 years old. The Cambodian women tended to have larger families with more children than the Tai Dam and Vietnamese women.

### Education needs

The educational needs of the respondents fell into three categories: (1) ESL needs, (2) general education needs, and (3) needs related to their school-attending children. Regarding the respondents' ESL needs, only one-third of the sample reported attending ESL classes. Most of them expressed satisfaction with their ESL classes. For those not attending ESL classes, the barriers listed were: (1) small children at home, (2) working full time, (3) language is difficult, (4) job searching, (5) financial reasons, and (6) health problems.

Regarding their own education needs, two-third of the respondents stated they would not like to attend the Community College. Along with reasons for not attending ESL classes, three additional reasons listed were: (1) age, (2) lack of transportation, and (3) lack of interest. For those wanting to attend the Community College, the three most commonly expressed areas of interest were: (1) tailoring and sewing, (2) GED, and (3) accounting.

The third component of their education needs addressed issues related to the quality of school life for their children, difficulty in understanding parent-teacher conferences, and difficulty in understanding

the school curriculum. Two-third of the women had school-going children with the highest percent of the children enrolled in elementary school. In general, the women were satisfied with the quality of school life but felt there was room for improvement socially and culturally in the quality of teaching.

The respondents generally expressed difficulty in understanding parent-teacher conferences and their children's school curriculum. They expressed a need for assistance in understanding the parent-teacher conferences and the school curriculum.

Among the six most significant needs listed by the respondents, language instruction ranked first, education ranked second, and employment ranked third amongst women from the 5 ethnic backgrounds. By nationality, Vietnamese women appeared to reflect a better adjustment with fewer needs as compared to women from the other 4 groups.

#### Employment needs

Two-thirds of the respondents were unemployed in the United States as compared to only one-third who were unemployed in their home countries. The results also indicated that for the sample as a whole, many women appeared to be underemployed in the United States. Almost half of those unemployed expressed the desire to remain so. Reasons listed were: (1) language barriers, (2) age, (3) small children at home, (4) lack of employable skills, (5) lack of transportation, (6) desire to attend school, and (7) poor health.

Among the six most significant needs listed by the respondents, employment ranked second along with education, with no significant differences by nationality or ethnic background.

#### Health needs

A need for medical care was expressed by over three-fourths of the respondents. However, amongst the six most significant needs, medical services ranked fifth. The major barriers manifested in trying to obtain medical help were: (1) language barriers, (2) lack of transportation, and (3) unavailability of doctor.

By nationality and ethnic background, Vietnamese women appeared to have fewer needs compared to women from the other four ethnic backgrounds.

The three most significant needs expressed by the respondents were: (1) language instruction, (2) (better) jobs, and (3) education.

## SUMMARY, RECOMMENDATIONS, AND CONCLUSIONS

The salient findings of the study fall into three major areas of conclusions and discussions. These areas are education, employment and health.

## Education Needs

The educational needs of the respondents fell into three categories: (1) ESL needs, (2) general education needs, and (3) needs related to their school-attending children.

Respondent's ESL needs

1. Language instruction ranked first, and education and employment both ranked second amongst the six most significant needs as expressed by the respondents.
2. The Southeast Asian refugee women's ESL needs appeared to be severe. Due to various socio-economic, situational and affective barriers, more than half the sample reported not receiving any ESL training.
3. Some of the socio-economic, situational and affective barriers listed were small children at home, working full time, difficulty of language, lack of transportation, expense, and poor health.
4. Over half of the respondents attending ESL classes did not find it difficult to attend the classes, since, for them, some situational barriers such as transportation, child care, tuition cost, etc. were being addressed by ESL program staff.

5. There were no significant differences by ethnic background regarding difficulty in attending ESL classes. But, regarding satisfaction with ESL classes, Vietnamese, Hmong and Laotian women were found to have significantly different needs at .05 level from those of the Cambodian women.

Since the late 1800s, the necessity for providing some remedial classes of basic academic skills to the adult population in America has been recognized. Amongst Southeast Asian refugee women this need was found to be acute. At the minimum, raising the refugee women's level of using ESL may represent only a limited growth and independence at a functional level. It may not necessarily prepare them for technological programs in the college, or for high paying and better jobs, or for success in college. Yet studies seem to indicate that a lack of English language proficiency is the most serious barrier to their economic self-sufficiency and progress. The findings of this study are substantiated by Reder et al. (1984) who found that socio-economic and situational barriers as well as affective factors precluded the women and nonliterate refugees from participating in the ESL programs.

#### Respondent's general education needs

1. Two-thirds of the respondents said that they were not interested in attending the Community College.
2. Some of the socio-economic, situational and affective barriers listed include small children at home, age, full time work, language problems, lack of transportation, lack of interest, poor health, and finances.

3. For those respondents interested in an education, the three most popular areas of interest included tailoring or sewing, GED and accounting.
4. By ethnic background, Tai Dam, Hmong and Laotian women expressed an interest in tailoring or sewing. The Vietnamese women expressed an interest in accounting.
5. Education ranked second along with employment amongst the six most significant needs as expressed by the Southeast Asian women.

Respondent's needs related to their school-attending children

1. Two-thirds of the respondents had children attending school or college in the United States.
2. More than half of the respondents felt that the quality of school life for their children could be improved by improving the quality of teaching and by providing more leverage socially and culturally.
3. Over half of the respondents found difficulty in attending parent-teacher conferences; three-fourths of these expressed a need for some assistance with the conferences. By ethnic background, Laotian and Cambodian women's needs were significantly different at .05 level from the Vietnamese women's needs with respect to a need for some assistance with the conferences.



4. Almost two-thirds of the respondents found difficulty in understanding the school curriculum. By ethnic background, Vietnamese women's needs were significantly different at .000 level from Laotian, Hmong and Tai Dam women's needs regarding need for some assistance with understanding the school curriculum.

Through the literature review, only one study was located that examined the relationship between perceived adaptation and academic standing in new school setting among Vietnamese refugee students in Iowa (Nguyen, 1979). The results of his study indicated that the process of adaptation was incomplete, and appropriate instructional materials need to be developed.

#### Employment Needs

Employment needs, status, and barriers to employment for the respondents were as follows:

1. Two-thirds of the respondents were unemployed in the United States as compared to only one-third who were unemployed in their home country.
2. By ethnic background, unemployment was lowest in the home country for Tai Dam and Cambodian women and highest for Vietnamese and Hmong women. In the United States, unemployment was lowest for Vietnamese women and highest for Tai Dam women.
3. Almost half of those unemployed desired to remain so. Reasons listed were language barriers, age, small children at home,

lack of employable skills, lack of transportation and preference for attending school.

4. Except for skilled manual crafts and agriculture, almost 95% of the respondents perceived themselves as lacking any employable skills in other employment such as human services, education, industrial.
5. By ethnic background, there were no significant differences regarding job contentment, perception of job skills for present job, and perception of job training programs.
6. Employment ranked second along with education among the six most significant needs as expressed by the respondents.

Some of these findings parallel those of Lischwe (1983) who tried to determine the present level of employable skills of the refugee women and training gained in native countries. She found that to a large extent, the skills acquired at home were not perceived as marketable in the U.S. But a large number of women are able to sew by hand and are known for their skills in applique and embroidery.

Some of the findings of this study are also similar to those of Reder et al. (1984), Strand (1984), Choung (1981) and Caplan et al. (1985). For instance, Caplan et al. (1985) in their study found that higher percent of Southeast Asian refugee women were more likely to be unemployed and underemployed than men. In addition, amongst barriers to employment, health problems potentially precluded 29% of the females as opposed to 21% of the males from successfully entering and staying in the labor force. Strand (1984) suggested transportation as a major barrier

to employment. The results of his study indicated that over 90% of the employed refugees drove an automobile to work, and over 50% of the unemployed refugees cited transportation as a major barrier for not seeking employment.

Although situational and affective factors seem to play an important role in economic adjustment, the findings of Caplan et al. (1985), Reder et al. (1984), Green (1978), and McCutcheon (1978) suggest other factors such as refugee/immigrant background, prior urban exposure, age, education, and differences found in the receiving environment to be significant. Green (1978) reported the employment and housing adjustment of migrants in Seoul, Korea and McCutcheon (1978) reported the employment and housing adjustment of migrants to Surabaya, Indonesia.

In both the studies, unemployment among migrants was found to be significantly higher. Migrants were found concentrated more in blue collar jobs than in the productive sector. McCutcheon (1978) reported that by occupational skills, approximately 35% had unskilled occupations, 27% had semi skilled occupations, and 37% had skilled occupations. In both studies most of the differences in activity seemed to be due solely to age and educational level. Green (1978) found the largest differential among those with college education or higher. The studies also concluded that rural and poorly educated migrants seemed unable to achieve the standard of living achieved by the lifetime urban residents.

These findings have been supported by the findings of Caplan et al. (1985) and Reder et al. (1984). They found contribution of background education, age and gender to be pronounced for the Southeast Asian refu-

gees. In terms of education, women were the less privileged group in Southeast Asia and hence experienced more difficulties in terms of employment in U.S.A.

#### Health Needs

It is important to ask questions about the effects of their culture on the immigrants' concepts of health and on adaptation to the health system in the new environment. Do language and cultural barriers justify their specialized treatment in the health system? How can health policies address these needs?

For the present study, health needs of the respondents can be summarized as follows:

1. Need for medical care was expressed by over three-fourths of the respondents. Only one-third of the respondents perceived their health status as very good. By ethnic background, there were no significant differences regarding perception of health status.
2. Slightly over a third sampled did not find it difficult to obtain either medical or dental care. For two-thirds of those sampled who expressed difficulty, major barriers were language, lack of transportation and unavailability of doctor. By ethnic background, Vietnamese women's accessibility to medical care was significantly different at .05 level. There were no significant differences for dental care.

3. Half of the respondents did not recognize a situation when the doctor should be consulted, and close to three-fourths of the respondents were not aware of the health services available to them.
4. About three-fourths of the respondents reported that they found it difficult to comprehend the doctor's instructions. By ethnic background, Vietnamese women's comprehension of doctor's instructions was significantly different at .05 level than for the women from the other four groups.
5. Almost all of the women were aware of the oriental food stores and bought food items from these stores. Only a small percent of the respondents did not purchase food from these stores or found certain food items difficult to find.
6. Three-fourths of the respondents expressed that they did not need any assistance with either identifying American foods or preparing them.
7. Amongst the most significant needs, (better) medical services ranked fifth.

Regarding health needs, the results of the present study were paralleled by those of Green (1984). Green studied the implications for New Health Policy and Planning for Caribbean immigrants and refugees--a group distinguished by their language and diversity of cultural values (a position similar to the Southeast Asian refugee women).

She found that Caribbean immigrants and refugees (especially, the poor ones) were likely to experience and manifest disproportionate stress

in adapting to the complex, bureaucratic American health system. Her study revealed four findings. One, the American health practitioners lack sufficient information regarding the needs and philosophical orientation of their patients. Two, the inability and reluctance of health personnel at various levels to listen and understand the language and problems of their patients often served to create a climate of distrust and skepticism between patients and practitioners as well as in the health facility as a whole. Three, the Caribbean immigrants and refugees shared holistic medical world views similar to those adhered to by the Southeast Asian refugee women. Hence, when compared to western "pharmacologic" medicine a problem arose due to the two conflicting belief systems and perceptions. And four, the poor and working class Caribbeans had not received adequate health education about the effects of diet on the nature of their illnesses they develop.

### Recommendations

#### General

1. Although the sample size (N=150) was representative of the Southeast Asian refugee population in Des Moines, it was not representative of the Southeast Asian refugee population in the United States. It is, therefore, suggested that, for future research larger groups of refugee women be studied.
2. The study group in this research was limited to the Southeast Asian refugee women. The questionnaire must be cross-validated by involving other ethnic groups besides the Southeast

Asian refugees. Such ethnic groups can be refugees such as the Polish and the Latin Americans. By comparing the different ethnic groups, needs can be determined separately for each ethnic group. If the relationships are positive and highly significant for all the ethnic groups involved, then the measuring instrument can be seen as valid cross-culturally. Using the analysis of variance of technique, if there are significant differences among the ethnic groups, further analysis can help determine the causing factors.

3. Future research projects need to be conducted which investigate factors which contribute to the refugees' English acquisition as well as to the fulfillment of basic needs and self-sufficiency.
4. As a follow-up of this study, the demographic information obtained should be included for further analysis of data with factors such as age, education background, and so forth to measure their contribution in attaining self-sufficiency.

#### Education

1. As a follow-up of this study, informal and formal curriculum plans need to be developed in order to help those refugee women who are unable to participate in ESL or in other education courses due to fear of language handicap.
2. The results of this study could be utilized in teacher-training programs to improve the quality of teaching and to create

an awareness among the teacher-trainees regarding the needs and diversity of pupils from different ethnic backgrounds.

3. The instructional materials and activities should incorporate the refugee's rich cultural heritage as well as the challenges offered by their new environment.

#### Employment

1. Training and income generating programs should be launched (in accordance with their stated employment preferences and previous experience) to improve their living conditions.

#### Health

1. Future research projects need to be conducted which investigate a relationship of power dominance between doctor and the refugee as a patient, contributing to barriers in the use of medical services.
2. Research needs to be conducted on populations from diverse ethnic backgrounds regarding belief and folk practices of medicine. The data can then be analyzed for impact of factors such as education and culture on holistic and western approach to medicine.

#### Conclusions

One of the most dramatic and tragic phenomena of our times is the large-scale displacement of persons due to wars and repression. The great majority of these displaced people are women and children who suf-



fer more radical changes in role and status. The refugee women have special requirements as emerging heads of families and households, as mothers and as persons readjusting to life in foreign and alien countries. There needs to be a consistent focus on research and management of programs that will benefit these women. If success is to be achieved in improving the status of women in general, educators need to take a critical and objective stance, and allow the societies to see reality for themselves. Through instructional technology, educators need to redress and eliminate the myriad problems faced by women as students, mothers, employees, and so forth.

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## ACKNOWLEDGEMENTS

I wish to express sincere gratitude to my major professors, Drs. William Andy Hunter and Elaine McNally Jarchow, for their guidance and inspiration during my doctoral program and writing of the dissertation. I would also like to thank Dr. Jarchow for assisting my dissertation to completion after Dr. Hunter retired.

I am also grateful to my committee members Dr. Sally Williams, Dr. William Wolansky, Professor Charlotte Bruner and Dr. Theresa McCormick for their keen interest in the study, help, support and timely suggestions.

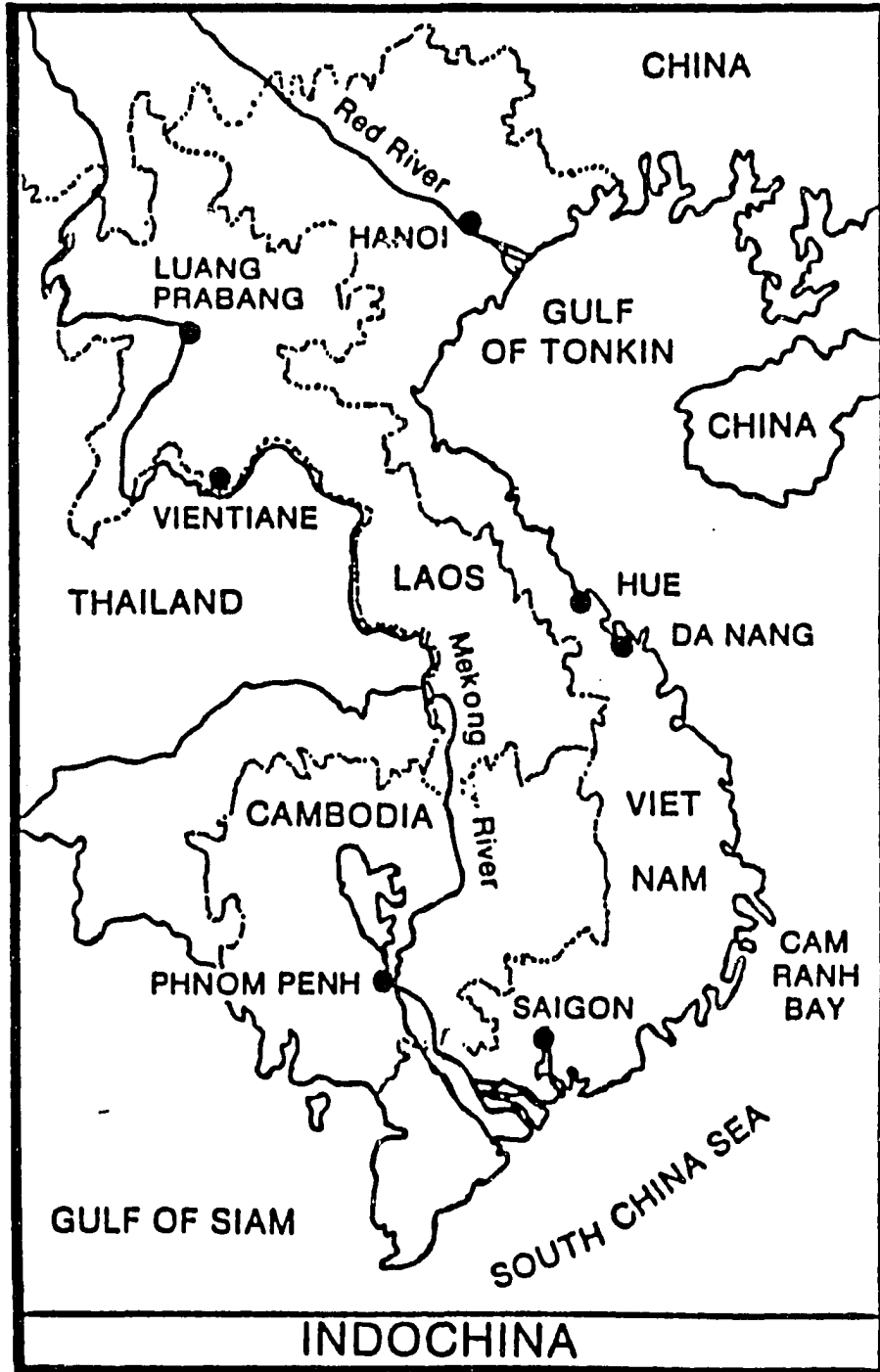
A special word of thanks goes to the directors and staff of the various ESL centers in Des Moines for their support, cooperation and valuable suggestions. The assistance from the various community leaders was greatly appreciated.

The support, cooperation and time of the Southeast Asian refugee women and their families, the interpreters and the translators were greatly appreciated.

Lastly, for continuous moral support, encouragement and understanding throughout the entire experience of my graduate career, deepest appreciation and affection are expressed to my family and friends. I wish to express a special note of thanks to Janet Olson for patiently proofreading the manuscript and Mark Mehl for his assistance with the ISUTHESES formatting program.

APPENDIX A: GEOGRAPHICAL LOCATION OF SOUTHEAST ASIA (INDOCHINA)

Source: Chang et al., 1980



## APPENDIX B: SOUTHEAST ASIAN REFUGEE POPULATION IN SOUTHEAST AND EAST ASIA

BY COUNTRY AND BY ETHNIC GROUPS  
AS OF 8/31/1984

	KHMER	LAO (LOWLAND)	LAO (HIGHLAND)	VIETNAMESE	TOTAL
THAILAND	46,883	22,115	53,696	6,134	128,828
MALAYSIA	-	-	-	9,126	9,126
SINGAPORE	-	-	-	360	360
INDONESIA	100	-	-	9,650	9,750
PHILIPPINES	6,669	2,372	-	10,475	19,516
HONGKONG	-	-	-	12,772	12,772
MACAU	-	-	-	770	770
JAPAN	-	-	-	1,678	1,678
KOREA	-	-	-	18	18
TAIWAN	-	-	-	109	109
-----	-----	-----	-----	-----	-----
TOTAL	53,652	24,487	53,696	51,092	182,927

SOURCE: DATELINE, 1984

## APPENDIX C: SOUTHEAST ASIAN REFUGEE POPULATION IN THE UNITED STATES

BY STATE OF RESIDENCE - AS OF 7/31/1984

STATE OF RESIDENCE	ESTIMATED TOTAL
ALABAMA	2,600
ALASKA	200
ARIZONA	5,100
ARKANSAS	3,000
CALIFORNIA	257,400
COLORADO	10,500
CONNECTICUT	6,500
DELAWARE	300
DISTRICT OF COLUMBIA	1,300
FLORIDA	12,300
GEORGIA	8,800
HAWAII	7,000
IDAHO	1,400
ILLINOIS	25,000
INDIANA	4,400
IOWA	8,600
KANSAS	9,200
KENTUCKY	2,500
LOUISIANA	14,000
MAINE	1,500
MARYLAND	8,000
MASSACHUSETTS	17,200
MICHIGAN	10,300
MINNESOTA	22,200
MISSISSIPPI	1,600
MISSOURI	6,700
MONTANA	1,000
NEBRASKA	2,400
NEVADA	2,200
NEW HAMPSHIRE	600
NEW JERSEY	6,300
NEW MEXICO	2,600
NEW YORK	24,400
NORTH CAROLINA	5,200
NORTH DAKOTA	900
OHIO	10,400
OKLAHOMA	9,000
OREGON	16,900
PENNSYLVANIA	24,300
RHODE ISLAND	6,600
SOUTH CAROLINA	2,500

STATE OF RESIDENCE	ESTIMATED TOTAL
SOUTH DAKOTA	1,100
TENNESSEE	4,500
TEXAS	57,200
UTAH	8,600
VERMONT	600
VIRGINIA	21,500
WASHINGTON	32,400
WEST VIRGINIA	500
WISCONSIN	9,900
WYOMING	300
GUAM	200
OTHER TERRITORIES	<100
-----	-----
TOTAL POPULATION	699,700

SOURCE: DATELINE, 1984

## APPENDIX D: 1980 U.S. CENSUS OF 3.7 MILLION ASIAN &amp; PACIFIC ISLANDERS

ETHNIC BACKGROUND	POPULATION
Chinese	812,178
Filipino	781,894
Japanese	716,331
Asian Indians	387,223
Korean	357,393
Pacific Islanders	259,566
Vietnamese	245,025
Laotian	47,683
Thai	45,279
Cambodian	16,044
Pakistani	15,792
Indonesian	9,618
Hmong	5,204
Others	26,757

Not included: 380,500 refugees from Vietnam, Laos and Cambodia who came to the U.S. after the 1980 Census.

SOURCE: McBee, 1984

## APPENDIX E: BIRTHPLACES OF SOME FOREIGN-BORN IOWANS

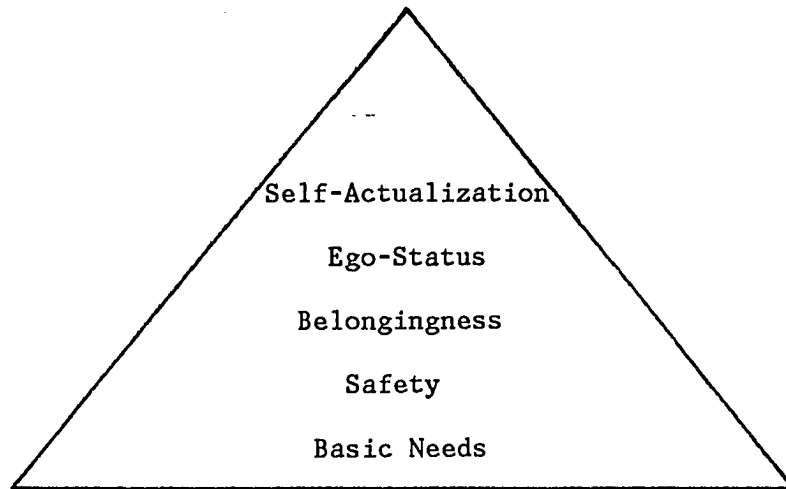
Germany	6,541
United Kingdom <sup>1</sup>	3,191
Canada	2,930
Mexico	2,725
Vietnam	2,173
Korea	1,801
USSR	1,662
Netherlands	1,654
Italy	1,143
India	1,044

SOURCE: Westphal, 1980

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<sup>1</sup> England, Scotland, Wales, Northern Ireland.

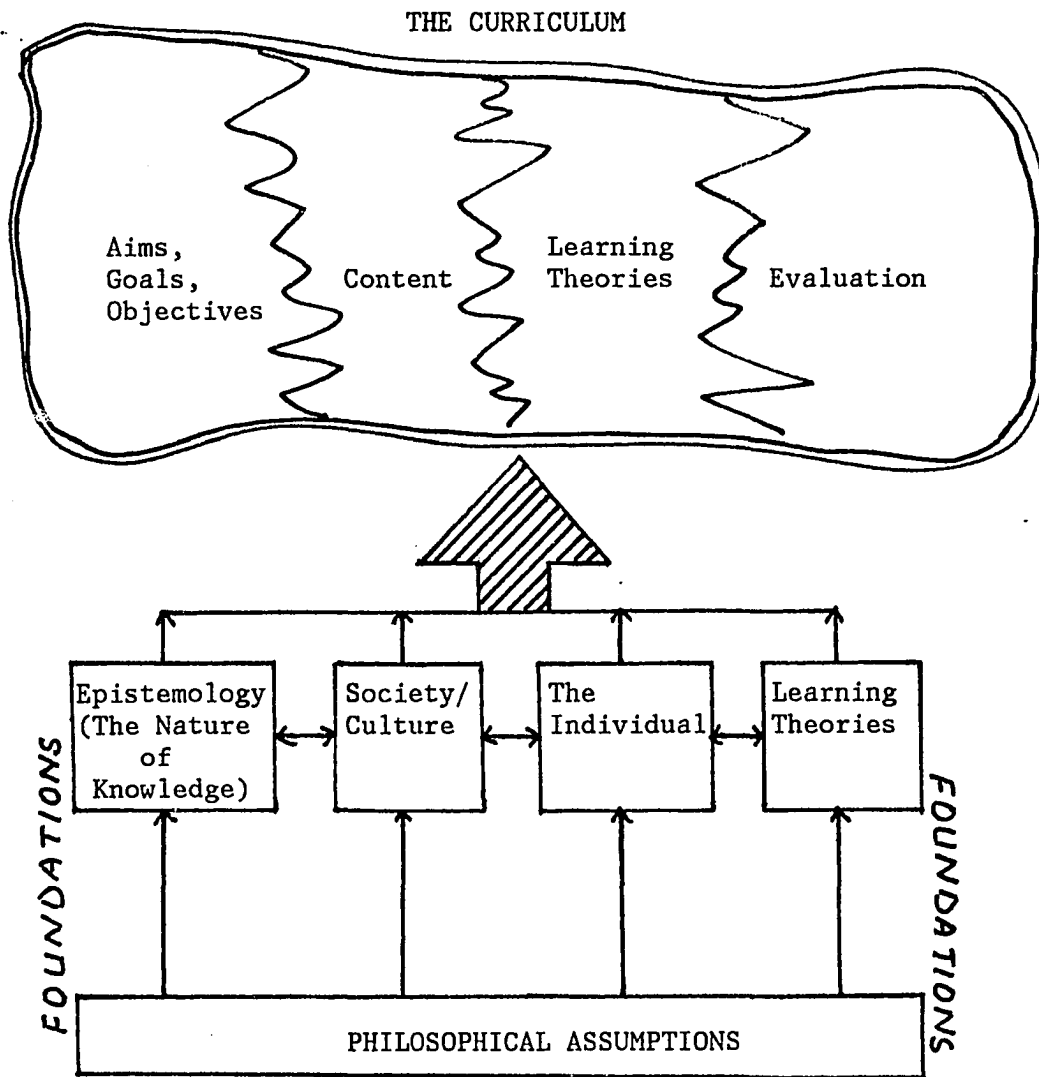
APPENDIX F: MASLOW'S NEEDS HIERARCHY



Source: A. H. Maslow, 1970: Motivation and Personality



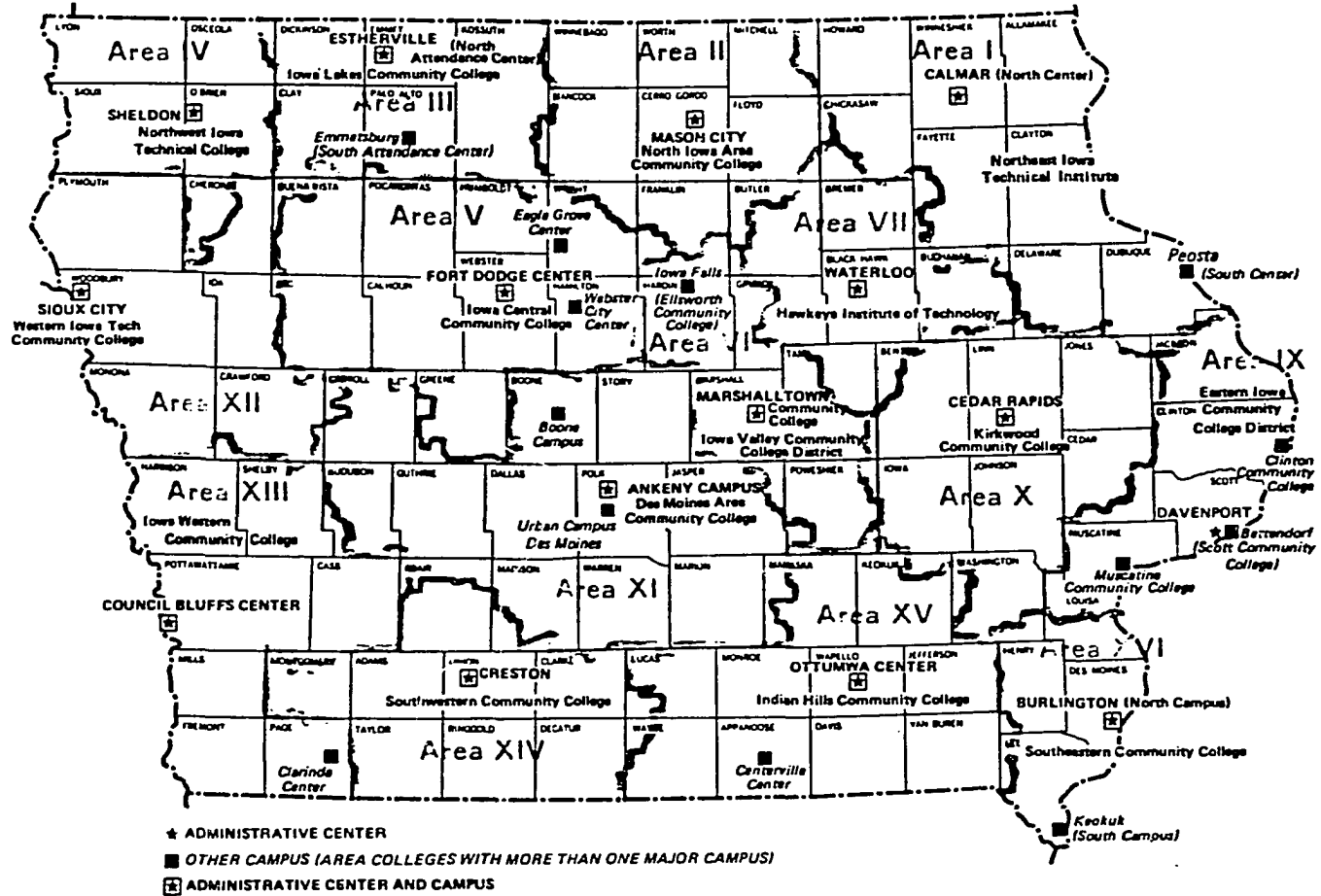
APPENDIX G: ZAIS'S ECLECTIC MODEL



Source: R.S. Zais, 1976: Curriculum Principles and Foundations

# Iowa Area Colleges

(Iowa Area Community Colleges and Area Vocational Schools)



## APPENDIX I: MAJOR FINDINGS OF EIGHT STUDIES

TITLE	Aames et al.(1977)	Kim et al.(1980)
N(HOUSEHOLDS)	829	1,627
N(TOTAL PERSONS)	4,188	-
SAMPLE SOURCE	N/A	INS/Agencies/MAA
DATE	1977	1979
LOCATION	California	Illinois
METHOD	Personal Interviews	Mail Questionnaires & Personal Interviews
WAVES	All	All
NATIONALITY	Vietnamese Lao Cambodian	Vietnamese Lao Cambodian
ECONOMIC STATUS MEASURE	Dichotomous: receipt of govt. transfer payments, accepting Food Stamps, qualifies household as non self- sufficient	Index of "socio- economic adjustment" composed of employ- ment, income level, transfer payments, housing, appliance ownership, etc.
MAJOR PREDICTORS OF SELF-SUFFICIENCY	English fluency, car ownership, family size	English fluency, motive to acculturate, no immediate family left behind--family size not imp.; this index correlated with indexes of "psycho- logical" and "cultural" adjustment

TITLE	OSI (1981) <sup>1</sup>	Meredith et al. (1981)
N(HOUSEHOLDS)	1,032	115
N(TOTAL PERSONS)	4,536	586
SAMPLE SOURCE	INS records	N/A
DATE	1980	1981
LOCATION	National	Nebraska
METHOD	Phone Interviews	Personal Interviews
WAVES	All	All
NATIONALITY	Vietnamese Lao Cambodian	Vietnamese Lao Cambodian
ECONOMIC STATUS MEASURE	Separate Variables: Labor force partici- pation, employment (of those "in labor force") transfer payments, income	N/A - was "needs as- sessment", asked opinions of income inadequacy
MAJOR PREDICTORS OF SELF-SUFFICIENCY	English fluency, education level, (for males), occu- pation in Vietnam not significant	N/A, but English fluency and transpor- tation rated as "problems" by refugees

-----  
<sup>1</sup> Source: Caplan et al., 1985.

TITLE	Dunning (1982)	Jones (1982)
N(HOUSEHOLDS)	N/A	1,530
N(TOTAL PERSONS)	500	6,592
SAMPLE SOURCE	INS Records	Joint Committee for Vietnamese Refugee Lists
DATE	1980	1982
LOCATION	Several Sites	United Kingdom
METHOD	Personal Interviews	Mail Questionnaire Personal Interviews
WAVES	1975-1979	All
NATIONALITY	Vietnamese Lao Cambodian	Vietnamese
ECONOMIC STATUS MEASURE	N/A	-
MAJOR PREDICTORS OF SELF-SUFFICIENCY	N/A	-

TITLE	Whitmore 1981	Caplan et al. (1985)
N(HOUSEHOLDS)	421	1,384
N(TOTAL PERSONS)	1,920	6,775
SAMPLE SOURCE	N/A	INS/Agencies/MAA/area probability sampling
DATE	1980	1982
LOCATION	Michigan	Massachusetts, Illinois, Texas, Washington, California
METHOD	Personal Interviews	Personal Interviews
WAVES	All	Oct 1978 - Oct 1982
NATIONALITY	Vietnamese Lao	Vietnamese Lao Chinese-Vietnamese
ECONOMIC STATUS MEASURE	Dichotomous: receipt of government transfer payments, qualified as non-self sufficient	Employment, transfer payments, assistance
MAJOR PREDICTORS OF SELF-SUFFICIENCY	Data not yet available	English language proficiency in home country

## APPENDIX J: QUESTIONNAIRE

Hello! My name is Gita Dhawan. I am a researcher from Iowa State University doing a study on the needs of Southeast Asian women living in Des Moines. I am interested in the different types of needs you have since you first came to the United States. Of particular interest to me are your observations and concerns about what some of your education, employment and health needs and problems might be.

Your answers will be part of a sample of Southeast Asian women in the area and the information you provide will be used to better understand your needs and improve the quality of service to you.

In order for the work to be of value, responses are needed from everybody in the sample. Your participation is voluntary and your responses will be kept confidential. For further information you may contact me at either of the following numbers:

Res.: (515)-294-2654

Off.: (515)-294-7699

Thanking you,

Sincerely,

Gita Dhawan

AN EDUCATION, EMPLOYMENT AND HEALTH NEEDS ASSESSMENT OF  
SOUTHEAST ASIAN REFUGEE WOMEN LIVING IN CENTRAL IOWA

I. DEMOGRAPHIC CHARACTERISTICS

I would like to begin by asking you some questions about everyone who lives in the same residence with you. With your help we will fill in the chart for each person who lives with you. We will begin with the head of the household, then the wife of the head, then all the children living at home, beginning with the eldest child. Then we will record all others.





2. Are you married? ----- yes  
----- no
3. If no, what is your status?  
----- divorced  
----- widowed  
----- separated
4. How old are you?  
----- less than 18 years  
----- 18-21 years  
----- 22-30 years  
----- 31-40 years  
----- 41-50 years  
----- 51-60 years  
----- over 60 years
5. How many children do you have?  
----- none  
----- 1-3  
----- 4-7  
----- 7-10  
----- more than 10
6. What is your nationality?  
----- Tai Dam  
----- Laotian  
----- Cambodian  
----- Hmong  
----- Vietnamese
7. What language(s) are spoken in your household?

## II. EDUCATION

Now I would like to ask you some questions about your educational background, English language needs, and, educational needs and problems of your children.

8. In your home country did you attend school?  
----- yes  
----- no
9. What was the last grade in school which you completed?  
----- kindergarten  
----- elementary  
----- secondary  
----- college  
----- college and vocational  
----- university  
----- other, what? -----

10. Are you receiving any English training now? (If no, proceed to question 20.)
- yes
  - no
11. If yes, where are you learning English now?
- Hawthorn Hill
  - Woodland Willkie
  - DMACC
  - North High
  - Cassady
  - Other, where? ----
12. For how many hours per week are you learning English?
- 1-5 hrs/wk
  - 6-10 hrs/wk
  - 11-15 hrs/wk
  - 16-20 hrs/wk
  - more than 20 hrs/wk
13. How satisfied are you with the English classes you are receiving?
- very much
  - somewhat
  - not at all
14. Are there enough English classes for you and your family in your community?
- yes
  - no
15. For how many years have you attended English classes at (please mention the name of the school from question 11 for questions 15 to 19.)
- less than a year
  - 1-2 years
  - 2-3 years
  - 3-4 years
  - 4-5 years
  - more than 5 years
16. For how many more years do you feel you need to attend English classes at (...)?
- less than a year
  - 1-2years
  - 2-3 years
  - 3-4 years
  - 4-5 years
  - more than 5 years

17. Is it difficult for you to attend English classes at (..)?  
 (If no, then proceed to question 20.)  
       ---- yes  
       ---- no
18. If yes, how difficult is it for you to attend English  
 classes at (...)?  
       ---- very difficult  
       ---- somewhat difficult  
       ---- little difficult
19. Why is it difficult for you to attend English classes at (...)?  
       ---- very expensive  
       ---- no transportation  
       ---- small children at home  
       ---- husband unemployed  
       ---- elderly relatives at home  
       ---- husband does not allow  
       ---- other, what? ----
20. Would you like to go to school at the Community College?  
       ---- yes  
       ---- no
21. If no, why not?  
       ---- small children at home  
       ---- daycare is expensive  
       ---- no transportation  
       ---- husband does not allow  
       ---- not aware of Community College  
       ---- other, what? ----
22. If yes, what kind of courses would you like to study?  
       -----  
       -----  
       -----  
       -----  
       -----
23. Do your children attend school in the United States? (If  
 no, proceed to question 35. If yes, then continue.)  
       ---- yes  
       ---- no

24. What grades do they attend?

Child No.	Nursery	KG	Grades 1-6	Grades 7-9	Grades 10-12	College	Graduated
1.							
2.							
3.							
4.							
5.							
6.							
7.							

25. What is the quality of school life for your children in the United States?

- very good
- somewhat good
- not at all good

26. Could the quality of school life for your children in the United States be better?

- yes
- no

27. How could the quality of school life for your children in the United States be improved?

-----

28. Do you attend parent/teacher conferences in school?

- yes
- no

29. Do you have difficulty understanding parent-teacher conferences?

- yes
- no

30. Would you like some assistance participating in parent-teacher conferences?

- yes
- no

31. How much assistance do you need for participating in parent-teacher conferences?

- somewhat
- very much
- little

32. Do you have difficulty understanding your children's school curriculum?

- yes
- no

33. Would you like some assistance in understanding your children's school curriculum?

- yes
- no

34. How much assistance do you need in understanding your children's school curriculum?

- very much
- somewhat
- little

### III. EMPLOYMENT

In this section I would like to talk with you a little bit about your employment needs. For example, do you work, or would you like to work, what type of job would you like to do?

35. Are you employed?

- yes
- no

(If no, proceed to question 39 and then to question 43. If yes, continue to question 42 and then proceed to question 46.)

36. How many hours are you employed?

- less than 10 hrs/wk
- 10-20 hrs/wk
- 21-30 hrs/wk
- 31-40 hrs/wk
- over 40 hrs/wk

37. At present what kind of job do you have?

-----

38. To what extent are you happy with your current job?

- very happy
- somewhat happy
- not at all happy

39. Were you employed in your home country?

- yes
- no

40. Was the type of job in your home country similar to your job here?
- yes
  - no
41. How sufficient are your present job skills for the work you are now doing?
- very much
  - somewhat
  - not at all
42. How beneficial are the available job training skills programs for the work you are now doing?
- very much
  - somewhat
  - not at all
43. If not employed, would you like to work?
- yes
  - no
44. If no, why not?
- small children at home
  - day care is expensive
  - husband does not allow
  - elderly relatives at home
  - do not possess any job skills
  - language barriers
  - other, what? ----
45. If yes, what kind of jobs are you looking for?
- cashier clerk
  - secretary/typist
  - baby sitter
  - own private business
  - seamstress/tailor
  - nurse
  - teacher's aide
  - other, what? ----
46. What kind of job skills do you possess?
- farming
  - stitching
  - knitting
  - handicrafts
  - own business
  - other, what? ----

## IV. HEALTH NEEDS

In this last section, there are a few questions that I would like to ask regarding your health needs such as, are the health services easily available to you, do you have difficulty understanding your doctor's instructions, etc.?

47. Have you had any need for medical care?

---- yes  
---- no

48. How would you describe your present status of health?

---- very good  
---- somewhat good  
---- not at all good

49. Is it difficult for you to get medical care?

---- yes  
---- no

50. If yes, how difficult is it for you get medical care?

---- very difficult  
---- somewhat difficult  
---- little difficult

51. Is it difficult for you to get dental care?

---- yes  
---- no

52. If yes, how difficult is it for you to get dental care?

---- very difficult  
---- somewhat difficult  
---- little difficult

53. Are you aware of the health services that are available to you in Des Moines?

---- yes  
---- no

54. Do you know when to see a doctor or a dentist?

---- yes  
---- no



55. Is it easy for you to reach them?  
 ---- yes  
 ---- no
56. If no, why is it difficult for you to reach a doctor or a dentist?  
 ---- no transportation  
 ---- doctor not available  
 ---- language barrier  
 ---- other, what? ----
57. Do you have problems understanding the instructions of the doctor?  
 ---- yes  
 ---- no
58. If yes, how difficult is it for you to understand the instructions of the doctor?  
 ---- very difficult  
 ---- somewhat difficult  
 ---- little difficult
59. Is it difficult for you to find foods from your home country in Des Moines?  
 ---- yes  
 ---- no
60. Do you know that the different oriental food stores in Des Moines sell food from your home country?  
 ---- yes  
 ---- no
61. If yes, do you often buy foods from them?  
 ---- yes  
 ---- no
62. If no, why do you not buy foods from these stores?  
 ---- food is too expensive  
 ---- no transportation  
 ---- grow my own vegetables  
 ---- children prefer American food  
 ---- other, what? ----
63. Do you need any assistance in identifying American foods?  
 ---- yes  
 ---- no

64. Do you need any assistance on how to prepare American food?

---- yes

---- no

65. What do you feel is your greatest need?

---- jobs

---- better medical services

---- English language instruction

---- better transportation

---- education

---- other, what? ----

That is all. Thank you very much for your cooperation in this project.