

Barriers to Immigrant Women in the Raleigh Metropolitan Area

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Introduction

Immigrant women often wait for years, decades, even whole familial generations for the opportunity to come to the United States and in doing so leave behind support systems, familiarity, and belonging for the hope of employment, physical safety, health, and opportunity. However, upon moving to the United States, immigrant women are systematically disadvantaged relative to American-born women and immigrant men. The Raleigh metropolitan area lags behind other cities in the United States in supporting immigrants, ranking last of 20 southeastern cities compared by the New American Economy Index, which evaluates immigrant integration and support ("*New American Economy Interactive Index*"). Raleigh's failure to support immigrants more severely impacts immigrant women who are already disadvantaged by a patriarchal landscape. Barriers of documentation, language, education, and culture interlock to restrict immigrant women from fully exercising their rights to employment, physical safety, and healthcare in the Raleigh metropolitan area. Municipal governments could better support immigrant women by adopting policies successfully implemented by other American cities to reduce the barriers to immigrant women accessing these rights.

National Trends of Disadvantage for Immigrant Women

Barrier 1: Limitations on the right to work

Immigrant women are disadvantaged when it comes to employment, leading to economic dependency and insecurity. Immigrant women enter the workforce at lower rates than immigrant men and native-born women. According to the Department of Homeland Security, in 2012, 57.9 percent of the female immigrant population reported no occupation outside the home or unemployed (Department of Homeland Security). Comparably, only 39.56% of male immigrants reported no occupation outside the home. (Department of Homeland Security). Immigrant women also had a lower rate of workforce participation rate, at 56 percent, than American-born women at 59 percent (Gammage, 80). Additionally, immigrant women in the United States have trouble finding employment, 46 percent of immigrant women are unable to find a job in the first 6 months after arrival in the United States and 25 percent of immigrant

women are unable to find a job in the first year (Women Immigrants: Stewards of the 21st Century Family, 18).

Inability to find employment leads immigrant women to accept positions of underemployment, meaning positions that do not fully utilize their skills or education. 32 percent of immigrant women reported having a professional position in their country of origin, and only 13 percent reported having a professional job in the United States, less than half of that before (Women Immigrants: Stewards of the 21st Century Family 18). Furthermore, immigrant women who do enter the labor force earn less than any other demographic; immigrant women in the labor force had an annual median income of \$32,015 in 2012, compared to \$38,514 for American-born women, \$36,802 for immigrant men, and \$50,283 for American-born men (Immigrants in North Carolina, 8). Immigrant women are unemployed at higher rates than immigrant men and American-born women, and when immigrant women do find employment they are likely to be underemployed and paid less for their work. This is concerning because disadvantages in employment lead to financial insecurity and dependency for immigrant women. Correspondingly, immigrant women experience higher rates of poverty, 16.8 percent, than both immigrant men, 11 percent, and American-born women, 11.2 percent (Gammage, 77). Statistically, immigrant women see worse employment, and thus financial, outcomes than immigrant men and American women.

The barriers immigrant women experience to achieving gainful full employment include childcare, language, and education valuation. Childcare responsibilities primarily fall on women; and while this also a burden placed on American-born women, immigrant women are more disadvantaged by these responsibilities as they may have left familial support systems in their countries of origin and face high private childcare costs while earning less than immigrant men and American-born women. Cultural norms that women should be responsible for childcare compound with the fact that immigrant women earn less than immigrant men and American-born women to restrict immigrant women from exercising their right to employment and contribute to financial insecurity and dependency. (“Immigrants in North Carolina”)

Language is also a commonly cited factor of immigrant women's unemployment and underemployment. 64 percent of immigrant women reported speaking little to no English, even after living in the United States for several years (Women Immigrants: Stewards of the 21st Century Family, 18). McHugh and Challior (2011) note "immigrants' employment prospects depend on their underlying levels of education and technical skills as well as their ability to communicate as needed in the host-country language" (6). Moving into higher-paying full employment almost always requires English proficiency in the United States (McHugh & Challior 3). English language proficiency disadvantages immigrant women relative to American born women.

Degree conversion and valuing immigrant skills and experience particularly restricts immigrant women. As immigrant women are more likely to migrate on family visas than immigrant men, and less likely than immigrant men to receive work visas, immigrant women have a more difficult time legitimizing their education and experience once they have arrived in the U.S. (American Immigration Council). Evidence suggests that "a significant number of migrant women possess skills and qualifications often not recognized or unneeded in the types of work that they perform," and that "migration involves deskilling for some groups of women" (Kawar 74). Although, all immigrants face degree and experience conversion challenges upon arriving in the United States, the right of immigrant women to work is more severely restricted, as the United States visa system favors traditionally male dominated fields, and immigrant women are less likely to migrate on employment-based visas.

Barrier 2: Limitations on securing physical safety

Immigrant women experience intimate-partner violence at higher rates than American-born women. A study in New York City found that 51 percent of female-identifying intimate partner homicide victims were foreign-born, while 45 percent were born in the United States ("The Facts on Immigrant Women and Domestic Violence"). Immigrant women may suffer higher rates of violence than U.S. citizens because their cultures of origin may be more accepting of domestic violence and because barriers of documentation and language lead immigrant women to have less access to legal and social services than American born women ("The Facts on Immigrant Women and Domestic Violence").

Immigrant women experience both real and imagined barriers to accessing services, such as law enforcement, to ensure their physical safety. Undocumented immigrants fear a real threat of deportation from law enforcement. Additionally, immigrant women may not access services designed to ensure their physical safety because they believe that the penalties and protections of the U.S. legal system do not apply to them, or that doing so may risk their ability to stay in the United States (“The Facts on Immigrant Women and Domestic Violence”). Correspondingly, immigrant women are often restricted from leaving abusive situations, and thus ensuring their physical safety, due to immigration status. Abusers often use their partners’ immigration status as a tool of control, using access to documents “to exert control over his partner’s immigration status in order to force her to remain in the relationship” (“The Facts on Immigrant Women and Domestic Violence”).

Language is a barrier to immigrant women securing their physical safety as it is for their ability to find employment. Non-English-speaking immigrant women experiencing intimate partner violence may not have access to bilingual shelters or bilingual legal services, “it unlikely that immigrant women will have the assistance of a certified interpreter in court, when reporting complaints to the police or a 911 operator, or even in acquiring information about their rights and the legal system” (“The Facts on Immigrant Women and Domestic Violence”). Immigrant women may not have the language services to employ services to secure their physical and seek knowledge of their rights.

Barrier 3: Limitations to accessing Healthcare Services

Immigrant women have less access to healthcare than American-born women. In 2011, nearly one in three foreign-born women were uninsured, 29.4 percent, compared to 13.9 percent of American-born women (“Immigrant Women”). Among immigrant women, non-citizens were most likely to be uninsured, 41.1 percent, and have no usual source of care, 25.6 percent (“Immigrant Women”). Immigrant women were also nearly twice as likely as U.S.-born women to lack a consistent primary care physician they saw at least once a year, 19.9 of immigrant women did not have this minimal care, compared to 11.3 percent of American-born women (“Immigrant Women”). Immigrant women access healthcare services

at lower rates for several reasons including documentation, and the structure of the healthcare system itself.

National policy excluding undocumented immigrants from accessing healthcare programs, such as barring them from Medicaid, is a barrier to immigrant women exercising their right to health. Undocumented immigrants reported avoiding healthcare and waiting until health issues were critical to seek services because of their concerns of being reported to authorities (Hacker et al. 178). These barriers to care may translate into lower utilization of preventive services. In 2011, immigrant women were less likely than their American-born counterparts to have received recommended vaccinations for HPV 1 and pneumococcal disease, which protect against cervical cancer and an infection that may cause pneumonia and other life-threatening complications (Hacker et al 178). The legal barriers undocumented immigrants face in accessing legal services can lead to severe health consequences. Although all undocumented immigrants face these legal challenges to accessing healthcare, women immigrants feel these challenges more deeply as they face greater reproductive health burdens than men and often take more responsibility for the health of children.

The healthcare system itself is a barrier to immigrant women accessing healthcare services. External factors such as the healthcare system only operates during work hours in stationary locations causes immigrant women to have trouble physically attaining services, as work and transportation limit the flexibility of their time (“Immigrant Women”). Medicaid and other health benefit programs have extensive paperwork and often time requirements to register for and maintain benefits that make such benefits difficult for immigrant women to access (“Immigrant Women”). Additionally, bureaucratic regulations leading to extensive paperwork and an complicated private insurance landscape disadvantage non-native English speakers from successfully attaining coverage and accessing healthcare (“Immigrant Women”). Immigrant women face an uphill battle in securing health care for themselves and their families. She must navigate mountains of paperwork and insurance forms, secure and continually renew benefits, and be able to afford the time and cost of transportation to physically get to healthcare services, this is all assuming she has documentation.

While the limitations to immigrant women accessing their rights to employment, physical safety, and health are reflective of national trends, immigrant women in the Raleigh metropolitan area receive less support to surmount these barriers than their counterparts in other cities, as Raleigh falls behind most of the country in supporting and integrating immigrants (“*New American Economy Interactive Index*”). This means that national trends of systemic disadvantage will be even more pronounced in Raleigh where support is less.

Immigrants in the Raleigh Metropolitan Area

Immigrants make up a significant portion of the Raleigh metropolitan area population. Immigrants make up 12.8 percent of the population of Wake County in 2014, which comprises much of the Raleigh metropolitan area. This is up from 9.7 percent in 2000, indicating that the percentage of immigrants in the area is growing. As the immigrant population makes up 7.9 percent of the total state population of North Carolina. The Raleigh metropolitan area has a higher composition of immigrants than the State as a whole. This can be seen in Figure A., as Wake county, and its surrounding counties, have a larger percentage of immigrants, 9.7%, represented by darker shades, than much of the state. Latin American and Asian immigrants comprised most of the area’s immigrant population, as 42.3 percent of immigrants in Wake County are from Latin America, and 33.7 percent are from Asia. Additionally, 34.6

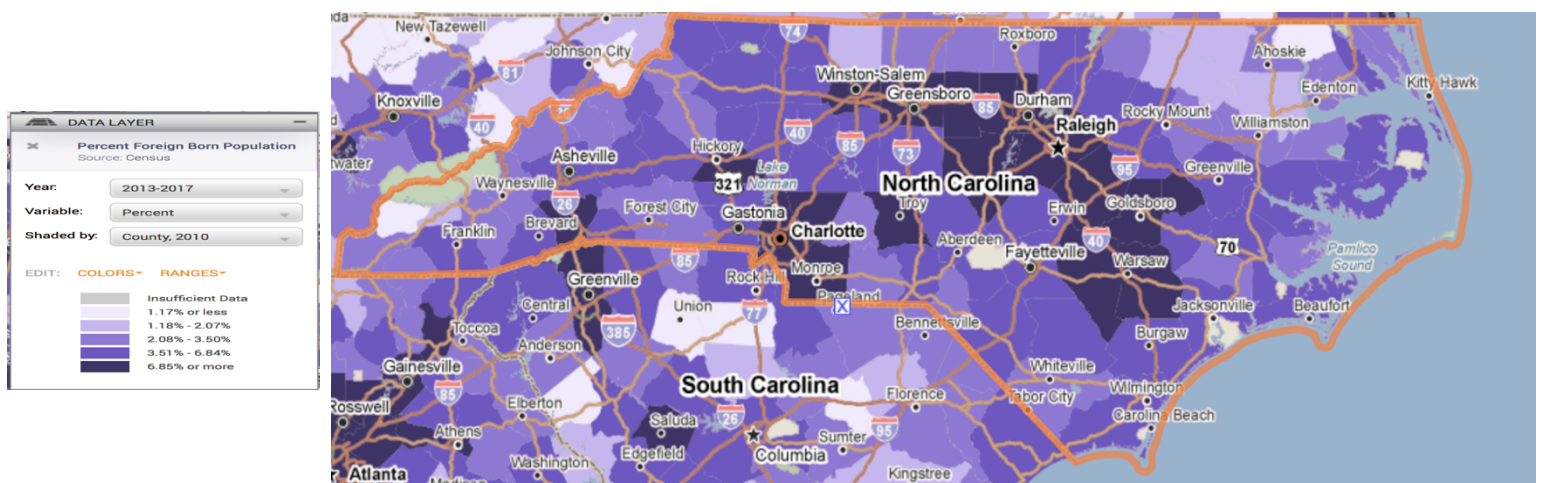


Figure A: Percentage of Immigrant Population by County in North Carolina 2014 (“Snapshot of Immigrants in North Carolina and Wake County”)

percent of immigrants in Wake County are naturalized citizens and able to vote and engage in the policymaking process (“Snapshot of Immigrants in North Carolina and Wake County”).

Despite a significant immigrant population, Raleigh falls behind other American cities in supporting and integrating immigrants. The New American Economy Index which “systematically evaluates immigrant integration by measuring local policies and socioeconomic outcomes for immigrants across the 100 largest cities in the United States” ranks Raleigh last among 22 Southeastern cities considered, with an index of only 1.8 out of 5 (“*New American Economy Interactive Index*”). Raleigh scored only 1 out of 5 in livability which considered health care, housing, educational opportunities and other quality of life factors, 1 out of 5 in job opportunities, and 1.6 out of 5 in immigrant supporting policy (“*New American Economy Interactive Index*”). Low scores in these categories indicate that the Raleigh metropolitan area lacks municipal policy to support immigrant women’s rights, happiness, and prosperity.

It may be unfair to compare Raleigh to San Francisco, or Seattle, or even the national average of this index, which exist in different political, economic, and historical environments So instead, consider Raleigh

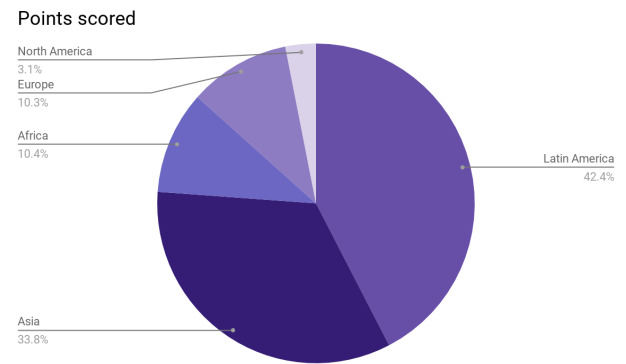


Figure B: Immigrant Population Country of Origin in Wake County (“Snapshot of Immigrants in North Carolina and Wake County”).

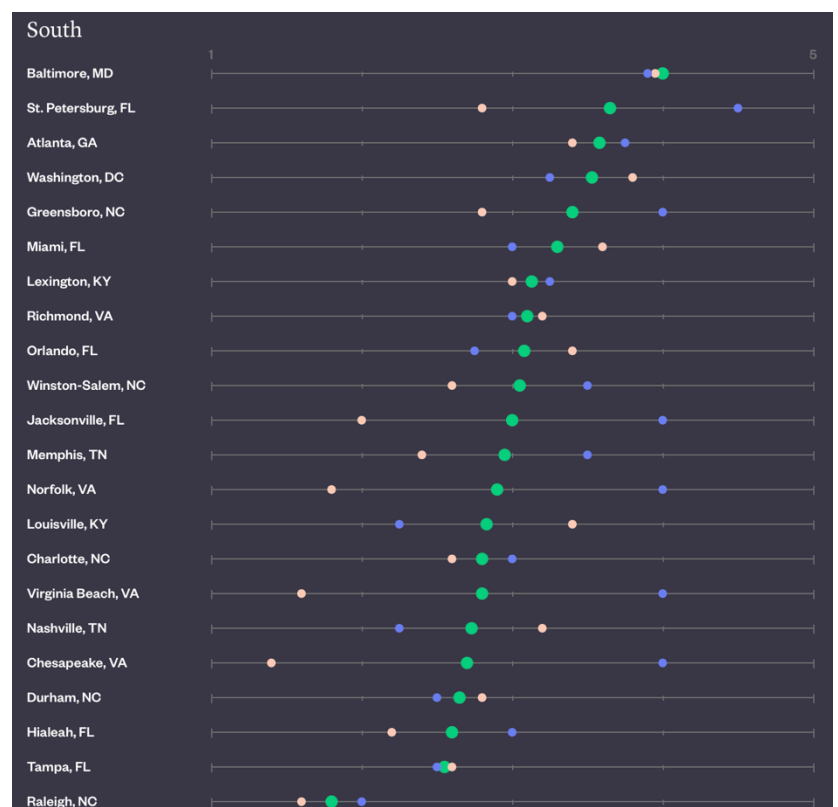


Figure C: Cities of the Southeast (New American Economy Index)

compared to its sibling cities, Charlotte, NC and Winston Salem, NC. Raleigh is the lowest scoring of the three on the Index, falling behind the other two by whole points in almost every category including policy, government leadership, economic empowerment, community, and job opportunities (“*New American Economy Interactive Index*”). With regard to the categories in which Raleigh is outpacing other North Carolina cities, integrating and offering legal support, it does so only marginally and still on the low end of the overall index (“*New American Economy Interactive Index*”). Cities similar to Raleigh, that exist in a similar politico-historical environment same environment, with economic similarities, and even that face the same state government restrictions on their power. The State of North Carolina has limited municipal power with regards to immigration; however, other cities under the same regulations have found ways to more strongly support their immigrant population than Raleigh does (“Mayors: Chapel Hill, Carrboro Not Affected by Executive Order on Sanctuary Cities”). The NAEI indicates that the Raleigh metropolitan area fails to support immigrant women in overcoming barriers to accessing their rights to employment, physical safety, and in surpassing displaying that improvement to support and integrate refugees is possible in Raleigh’s political and economic environment.

	Raleigh, NC	Charlotte, NC	Winston-Salem, NC
Overall Score	1.80	2.80	3.05
Policy Score	1.60	2.60	2.60
Government Leadership	1	4	4
Economic Empowerment	2	3	3
Inclusivity	2	1	1
Community	1	4	4
Legal Support	2	1	1
Socioeconomic Score	2.00	3.00	3.50
Job Opportunities	1	3	5
Economic Prosperity	3	5	5
Livability	1	2	2
Civic Participation	3	2	2

Figure D: Comparison of Raleigh, Charlotte, and Winston Salem-NC 2017 New American Economy Index scores (New American Economy Index)

How could Raleigh address barriers for immigrant women?

Addressing the barrier of Childcare: Early Head Start and Universal Preschool

Although the Raleigh municipal government has taken steps to support immigrant women in overcoming few of the identified barriers, it has mostly left an underfunded patchwork of nongovernmental organizations to provide support. The Raleigh metropolitan area does support immigrant women working by facilitating and organizing an Early Head Start program (“Wake County Start Smart”). Early Head Start is a federally-funded-and free child care program for low-income women and families with infants and toddlers age birth to 3 (“Wake County Start Smart”). Eligible children are those with documented disabilities who may be eligible regardless of income, or those from families receiving public assistance, either the temporary assistance for Needy Families (TANF) or Social Security disability payments, or who meet income eligibility as determined by Federal Poverty Guidelines (“Wake County Start Smart”). Documentation is not a consideration of eligibility (“Wake County Start Smart”). The main benefits to the early head start program are that it allows immigrant mothers to work regardless of their ability to afford childcare for their children, and that the program serves undocumented immigrants. However, while documentation is not required, immigrant mothers are “less likely than other families” to apply to Early Head Start benefits “because they think they are not eligible or are afraid of applying for benefits” (Altman and Backer 6). In addition to immigrant women not accessing this service because they are unaware they are eligible; the program is also problematic in that it has work requirements and is underfunded.

The Early Head Start program requires all legal guardians in a family to be either employed or in school, meaning that a mother must have employment or be in school before even entering the free childcare lottery (“Durham Early Head Start”). She must figure out a way to become employed and work without child care assistance before being eligible for childcare assistance. Furthermore, if an immigrant

mother does figure out a way to become employed without child care assistance then she is only eligible to enter the Early Head Start lottery, child care assistance is not guaranteed.

There is not enough funding granted to Early Head Start for every family in need to receive child care assistance, so the system runs on a lottery, wherein, after registration families are randomly allocated spots in the program. The National Institute of Early education finds that the program has never been funded adequately. Administrators must make trade-offs between enrollment and quality, and preventing the program from expanding to serve all children in need regardless of where they live (Barnett, W. Steven, and Allison H. Friedman-Krauss 21-3). A family's lottery odds depend dramatically on where they live (Barnett, W. Steven, and Allison H. Friedman-Krauss 21-3). In North Carolina only 17,185 children in the state participate in Head Start, while an estimated 6,345 children are on wait lists ("Early Head Start-Child Care (EHS-CC) Partnerships"). The Early Head Start program is flawed in that thousands of North Carolina families, including immigrant women, who need these services, are denied them based on funding, are deemed ineligible because they cannot gain employment before finding childcare, or miss out on services because they are unaware they are eligible. However, other cities have found ways to address these flaws which could become models for the Raleigh metro area.

Other states and cities have addressed these flaws of the Early Head Start Program by providing more funding, some have even extended the program to a Universal Preschool Model, in which all children are eligible for free public preschool, regardless of financial status. Eradicating waiting lists by supplementing federal funding with local funding would be a step towards ensuring that the program allows immigrant mothers to work, but it would not solve the problems of work requirements or immigrant women's belief that they are ineligible. A Universal Preschool program, like those implemented by the States of Florida, Georgia, Oklahoma, and the cities of Los Angeles and Boston would allow immigrant mothers to search for employment that fully utilizes their skill set and start work without struggling to ensure there is care for their children (Sawhill).

Addressing Language Barriers for Immigrant Women: ESL and Ready to Work

No-cost adult English classes in the Raleigh metropolitan area are held by a patchwork of nongovernmental organizations, causing access to vary. Organizations such as the United States Committee for Refugees and Immigrants (USCRI), Triangle Literacy Council, as well as many church-based groups offer English as a Second Language or ESL classes for free to adult immigrants. These English classes are beneficial to immigrant women to gain English skills to enhance employment opportunities, to allow for easier access to healthcare and safety services, while also satisfying the work or school requirements on TANF and Early Head Start (“Durham Literacy Center Impact”) While this informal patchwork is serving some Raleigh metropolitan areas, particularly Northern and Western Raleigh, but it leaves other areas underserved. Particularly Raleigh's southern and Eastern regions, and thus some immigrant women distanced from services. USCRI is located in North Raleigh, but serves all of Wake County. The Triangle Literacy Council is outside of Raleigh, to the Northwest, but serve the entire Raleigh metropolitan area. Immigrant women who live in Wake's more rural areas may rely on sparse transportation options or not have a way to attend classes at all. The patchwork system of NGOs providing ESL classes is not enough to support immigrant women in accessing employment, health and safety services.

The Raleigh metropolitan area municipal governments could better support immigrant women by adopting the Ready to Work program that has been successfully implemented in other cities, such as Seattle. In 2016, the U.S. Department of Labor and the National Skills Coalition highlighted Ready to Work as a national best practice model on how to leverage workforce and adult education funding to support immigrant integration in the labor force (Bergson-Shilcock). First implemented in Seattle in 2015, the Ready to Work program combines English as a Second Language (ESL) classes with computer literacy instruction and case management to help immigrants gain job readiness skills and take steps toward economic self-sufficiency while learning English (Bergson-Shilcock). By funding ESL classes for immigrants through a city-wide program, like Ready to Work, Wake County could increase immigrant women's access to the language classes they need to exercise their rights to employment, health and physical safety in the Raleigh metropolitan Area.

Addressing the barrier of documentation: Municipal Documentation and Supportive Policy

While the Raleigh metropolitan area has law enforcement services that ideally ensure all of the public's physical safety, immigrants often feel unable to access these services due to lack of documentation. Further, providing the services that enable immigrants to access such services, like legal interpreters, similar to ESL classes, relies on a patchwork of NGOs. None of the municipalities in the Raleigh area have adopted an alternative documentation, such as the IDNYC municipal documentation option—a government-issued identification card that is available to all City residents age 10 and older—regardless of immigration status (Mark). This allows undocumented residents may have identification that would allow them to access basic services and securely utilize law enforcement for their protection (Mark). Without such a program, undocumented immigrant women in the Raleigh metropolitan area have few, if any, alternatives to staying in abusive relationships, and feeling secure filing police reports. Additionally, because the city of Raleigh has not prohibited local law enforcement from collaborating with Immigration and Customs Enforcement, undocumented immigrant women have reason to fear local law enforcement and avoid seeking their assistance to secure their physical safety (“Mayors: Chapel Hill, Carrboro Not Affected by Executive Order on Sanctuary Cities.”) They could face deportation. Although, local NGOs do exist that support immigrant women experiencing intimate partner violence in the Raleigh metropolitan area they not have all of the resources or support of the law necessary support immigrant women facing intimate partner violence totally, to do so they need supportive municipal policy and law enforcement

Cities such as Baltimore, New York San Jose, Chicago, and countless other cities have implemented policy to make immigrant women feel safer going to law enforcement and to facilitate their doing so. Baltimore has policy prohibiting police and other city officials from asking residents about their immigration status, which if adopted in Raleigh would allow undocumented immigrant women in dangerous situations to feel safe turning to law enforcement (Mark). San Jose officials launched a communications campaign to educate immigrants about their rights, which if adopted in Raleigh would ensure that immigrant women know the law enforcement system protects them as well (Mark). New York

boasts the nation's largest municipal ID program, offers language access policies across their services, and limits its law enforcement agencies' cooperation with ICE (Mark). Chicago launched a public-service campaign welcoming newcomers to the city and directing immigrants to resources such as legal assistance, mental health care, and citizenship information that ensures immigrant women are aware of the resources available to them to support their safety (Mark). These policy adoptions would allow immigrant women in Raleigh to safely access law enforcement and legal services to ensure their physical safety as they have in other cities.

Conclusion

The Raleigh metropolitan area does not implement sufficient policy or fund services sufficiently that support immigrant women in overcoming the barriers of childcare, language, and documentation to exercise their rights to employment, physical safety, and health. The municipal governments of the Raleigh metropolitan area could follow the lead of other cities who have successfully implemented policy supporting immigrant women by exploring universal preschool, municipal IDs, and the Ready to Work program. One of the categories of the New American Economy Index in which Raleigh outpaces its sister cities of Charlotte and Winston Salem is inclusivity. The people of Raleigh are willing to support their immigrant women neighbors and municipal policy should reflect that.

Bibliography

- Altman, Stephanie, and Stephani Becker. The Challenges of Serving Undocumented and Immigrant Families. Siemer Institute for Family Stability and the Sargent Shriver National Center on Poverty Law, 2015, p. 6, The Challenges of Serving Undocumented and Immigrant Families.
- Barnett, W. Steven, and Allison H. Friedman-Krauss. State(s) of Head Start. The National Institute for Early Education Research, 2016, pp. 21–23, State(s) of Head Start.
- Bergson-Shilcock, Amanda. “Ready to Work: Seattle Creates New on-Ramp for Immigrant English Learners.” National Skills Coalition, 1 Jan. 2016, www.nationalskillscoalition.org/news/blog/ready-to-work-seattle-creates-new-on-ramp-for-immigrant-english-learners.
- “Durham Early Head Start - Durham's Partnership for Children.” Durham Partnership for Children, 2018, dpfc.net/our-work/durham-early-head-start/.
- “Durham Literacy Center Impact.” Durham Literacy Center, www.durhamliteracy.org/impact.
- “Early Head Start-Child Care (EHS-CC) Partnerships.” Early Childhood Systems Building Resource Guide, 19 Dec. 2018, childcareta.acf.hhs.gov/topics/early-head-start-child-care-partnerships.
- Gammage M., Strum, P., & Tarantolo, D. (2003). Women immigrants in the United States: Proceedings of a conference sponsored by the Woodrow Wilson International Center for Scholars and the Migration Policy Institute, September 9, 2002. Washington, D.C.: Woodrow Wilson International Center for Scholars.
- Hacker, Karen et al. “Barriers to health care for undocumented immigrants: a literature review” Risk management and healthcare policy vol. 8 175-83. 30 Oct. 2015, doi:10.2147/RMHP.S70173
- Immigrants in North Carolina. American Immigration Council, 2017, Immigrants in North Carolina
- “Immigrant Women.” HRSA-MCHB, 2013, U.S. Department of Health and Human Services, mchb.hrsa.gov/whusa13/health-status/special-populations/p/immigrant-women.html.
- Kawar, Mary. “Gender and Migration: Why Are Women More Vulnerable?” Gender and Migration: Why Are Women More Vulnerable ?, pp. 71–87., doi:10.4000/books.iheid.6256
- Mark, Michelle. “The 10 Best Cities in the US for Immigrants.” Business Insider, Business Insider, 23 Dec. 2017, www.businessinsider.com/top-10-us-cities-for-immigrants-2017-12.

“Mayors: Chapel Hill, Carrboro Not Affected by Executive Order on Sanctuary Cities.” Chapelboro.com, 1 Feb.

2017, chapelboro.com/news/state-news/mayors-chapel-hill-carrboro-sanctuary-cities.

McHugh, Margie, and A. E. Challior. Improving Immigrants' Employment Prospects through Work-Focused Language Instruction. Migration Policy Institute, 2011, Improving Immigrants' Employment Prospects through Work-Focused Language Instruction.

New American Economy Interactive Index, Urban Institute, 2018, www.newamericaneconomy.org/cities-index/interactive-index/?legend=policy-subscore.

Sawhill, Isabel V. “Kids Need an Early Start: Universal Preschool Education May Be the Best Investment Americans Can Make in Our Children's Education – and Our Nation's Future.” Brookings.edu, The Brookings Institution, 28 July 2016, www.brookings.edu/articles/kids-need-an-early-start-universal-preschool-education-may-be-the-best-investment-americans-can-make-in-our-childrens-education-and-our-nations-future/.

“Snapshot of Immigrants in North Carolina and Wake County.” North Carolina Justice Center, 2013, www.ncjustice.org/wp-content/uploads/2018/12/BTC-FACT-SHEET-Immigrants-are-Vital-Assets-to-NCs-Economy_Wake-County_0.pdf.

“The Facts on Immigrant Women and Domestic Violence.” Futures Without Violence, www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Immigrant.pdf.

United States. Department of Homeland Security. Yearbook of Immigration Statistics: 2012. Washington, D.C.: U.S. Department of Homeland Security, Office of Immigration Statistics, 2013.

“*Wake County Smart Start*”, www.wakesmartstart.org/.

Women Immigrants: Stewards of the 21st Century Family. Brendixen and Associates, 2009, Women Immigrants: Stewards of the 21st Century Family.