**Afghan Arrivals Influx Assessment**

**Client Focus Group Guide[[1]](#footnote-2)**

|  |  |  |
| --- | --- | --- |
| **Facilitators:** | **Interpreter(s):** | **Language:** |
| **Date:** | **City, State:** | **Women-only**  **Choose an item.** |

**Introduction Script**

Thank you for agreeing to join this meeting. I’m [NAME] and this is my colleague [NAME], and we work in the Office of Refugee Resettlement (ORR), which is a part of the government that provides funding for some of the services you receive. We are here to meet with recently arrived families to learn from you about your experiences.

During this meeting, we encourage you to share openly about your experiences that are good as well as difficulties or issues you are experiencing. There are no right or wrong answers. Our goal is to gather information that can be used to make changes and improvements to ORR’s programs and services. The information your share with us today will help ORR identify training and technical assistance needs as well as service gaps and redundancies that can be addressed through program improvements.

Our meeting today will last about 60 minutes. Please know that your participation in this meeting is voluntary. You may choose to not answer any question and may stop participating in the meeting at any time.

I have one final point to make. Your name and other identifying information will not be included in any notes or reports. The reports are for internal planning and programmatic purposes and not for any kind of public dissemination, even if deidentified. However, we will need to report any suspicion of immediate harm to yourself, children, or others.

We value the time and information you will share with us today and want to make sure we accurately include all the details. With your permission, we will audio record the session and take notes (written and/or on a laptop computer). Those notes will not include your name. The recording will serve as a back-up tool to ensure we include all your comments in as close to your words as possible. Once the project is complete, all recordings will be destroyed. During the discussion, if you would like to stop the recording while you make a particular comment, please let us know and we will do so.

**Internal only: Facilitator Tips**:

* This focus group is semi-structured and therefore the sequence of the questions might vary as well as the level of probing for information by the facilitator.
* The goal is to collect data on each topic area. Keep in mind that participant responses may cover multiple categories/data points. You may skip a question if you feel the data collection on that topic is sufficient and asking the question would be repetitive.
* Optional questions should be asked only if there is enough time to do so.

**Length:** 1 hour

**Participants:** 4 groups per state, up to 5 participants per group

Focus groups will consist of Afghan OAW evacuees. The team will ensure gender/language equity and will host gender-specific groups.

* + Male-only - Dari
  + Male-only - Pashto
  + Women-only - Dari
  + Women-only - Pashto
* Interpreter(s) will be present at each focus group meeting, including female interpreters for the women-only groups and male interpreters for male-only groups.

## **Internal only: ORR Learning Questions:**

* What are the underlying and unmet needs among Afghan evacuees?
* What barriers to self-sufficiency do Afghan evacuees face?

**Focus Group Questions**

1. **Introductions:** Briefly introduce yourself (First Name only)
2. **Experiences and Social Adjustments:**
   1. Describe any challenges that you have experienced since arriving in your new home community. How has your resettlement agency helped you to solve these challenges? (*Note: if client states that they have received no support, clarify whether they may be a walk-in and therefore, on a waiting list for services.)*
3. **English Language Training:**
   1. What has been your experience with accessing English language training/classes? *(Probe how often they attend classes and whether in-person or virtual. If in-person, probe their mode of transportation to/from classes.)*
   2. If you feel you could benefit from English language training but have not started it, what is preventing you from taking classes?
4. **Schooling:**
   1. For those of you with school age children, what challenges did you experience enrolling your child/children in school?
      1. *If school age children not enrolled in school, ASK why.*
   2. Has your child received special support to help adapt to school in the U.S., and has it been helpful?
   3. Does your child require other kinds of support at school that he or she is not currently receiving*? (If needed, provide examples such as tutoring, ELT, class aide, etc.)*
5. **Housing:**
   1. What is your housing situation? For example, are you settled in a home or apartment where you expect to stay a while, or are you currently living in a temporary place?
      1. *If settled in “permanent” housing, ASK:* Who helped you find your home or apartment?
      2. *If resettled in “permanent” housing, ASK:* Do you get/receive help to pay your housing or rental cost?
   2. What is working well about your current housing situation? What is challenging?
      1. *If few responses, ASK:* How close is your place of employment to where you are living? How close is it to grocery stores/food shopping?
6. **Medical and Mental Healthcare:**

***Facilitator Script****: These questions are about the medical care you may have received or are currently receiving since arriving in your new home community. We are not asking you to share your private medical information or anything that will make you feel uncomfortable. We are interested in learning about your experiences accessing medical care and the quality of care you received.*

* 1. Since arriving in your new home community, have you had any problems or issues receiving medical care when you or someone in your family was sick? *(Probe what types of problems they experienced.)* 
     1. Did somebody help you with these problems? How did they help you?
  2. Do you now have Medicaid or other form of medical insurance? *(If other form, ask the form of insurance.)*
  3. Do you now have a doctor that you can go to when you or any member of your family is sick? *(Probe to see if they have access to a doctor of the same gender)*
     1. *If yes, ASK:* Is the office close to where you live? Do you like your doctor? Why and why not? Are you able to communicate with your doctor? Does the doctor make interpretation available?
     2. *If no, probe whether they have not tried to access a doctor or whether they have tried/are trying and have not been successful so far.*

1. **Economic Self-Sufficiency:**

*Quickly try to get a sense of whether participants are currently working or self-employed.*

* 1. Do you have a job right now? What did/is the agency done/doing to help you find a job? *(Note: If client states that they do not have a job, facilitator may ask if anyone in their household is working.)*
  2. What problems, if any, have you encountered when looking for work in the U.S.? In order to keep your job or find one, what kinds of training/assistance do you think you need?
  3. For those of you who are currently working, does your current job match your skills and training? If not, do you know what kind of training/assistance you may need and how to access it?
  4. Are you currently able to pay for your basic expenses, such as housing and food, with income from work?

1. **Community Inclusion:**
   1. Outside of your resettlement agency, have other organizations or individuals helped you integrate into your new home community?
   2. What types of activities would help you adjust/feel more connected to your new home community? (*Ask the following questions if not mentioned in their response:*
      1. Are you able to attend religious services with others in a common location, such as a mosque or Islamic center?
      2. Are you able to obtain halal food in your new home community?
      3. Do you have the opportunity to interact with community members who speak your same language?
   3. Since arriving in your new home community, have you had any problems or issues traveling to places you need to go? *(Probe what types of problems they experienced.)*
      1. What is the most common form of transportation you use to get around your community (for example, to/from work, medical appointments, shopping, etc.)?
      2. What would help you to meet your transportation needs?
   4. What kind of help have you received to obtain permanent residency/citizenship? *(Probe how they heard about services and where they receive them.)*
2. **Wrap Up:** 
   1. What are your plans or goals for you and your family?
   2. What would you need to reach these plans or goals?
   3. Are there any ways your resettlement agency can/could have helped you more?

1. PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: Through this information collection, the Office of Refugee Resettlement (ORR) is gathering information to inform the development and provision of targeted training and technical assistance aimed to enhance refugee resettlement program implementation and changes to ORR policies, programs, and services. Public reporting burden for this collection of information is estimated to average 1 hour per grantee, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0531 and the expiration date is XX/XX/XXXX. If you have any comments on this collection of information, please contact [asr@acf.hhs.gov](mailto:asr@acf.hhs.gov). [↑](#footnote-ref-2)