

Operation Allies Welcome Survey of Resettled Afghans Questionnaire #2

What language do you prefer to complete the survey?

- A. English
- B. پښتو
- C. دری

Consent Notice

The Office of Refugee Resettlement (ORR), which is part of the U.S. Department of Health and Human Services, invites you to participate in a survey to identify the needs of recently arrived Afghans and the gaps in resettlement services. ORR will use the data from this survey to change or improve its programs to better serve you and other recently arrived Afghans.

This survey is voluntary and should take around 15 minutes to complete. The answers you give will be kept private and anonymous. Once you begin the survey, please do not close the webpage before you answer all the questions in the survey. You will only have one chance to take the survey and will not be able to go back or change your answers.

By clicking "Agree and Next," you consent to participate in the survey.

Household Composition

Q1. What is your gender?

- A. Male
- B. Female

Q2. How many family members currently live in your household, including yourself?

- A. 1
- B. 2
- C. 3
- D. 4
- E. 5
- F. 6 or more

[If Q2 = "A. 1", skip to Q4. All other responses proceed to Q3.]

Q3. How many women family members (age 16 and over) live in your household? Include yourself in the count if you are a woman age 16 or over.

- A. 0
- B. 1
- C. 2
- D. 3 or more

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to inform ORR program decisions to better serve the recently arrived Afghan. Public reporting burden for this collection of information is estimated to average 15 minutes per respondent, including any time you needed to collect information to be able to answer our questions. 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-XXXX and the expiration date is XX/XX/XXXX. If you have any comments on this collection of information, please contact: asr@acf.hhs.gov.

Q4. What is your marital status?

- A. Now married, spouse living in household
- B. Now married, spouse not living in household
- C. Divorced or separated
- D. Never married
- E. Widowed

Q5. Which of the following does your household need the most help with? (Select up to 3 options to help us understand needs of Afghan families like yours.)

- A. Immigration status
- B. Employment
- C. Housing
- D. Transportation
- E. English language classes
- F. Food
- G. Childcare
- H. Medical
- I. Mental health
- J. School enrollment
- K. Cultural Orientation
- L. Community building and networking
- M. Family reunification

Location/Secondary Migration

Q6. After you left the military base, in what state did you initially resettle? [DROP DOWN LIST OF STATES]

Q7. What state do you live in now? [DROP DOWN LIST OF STATES]

[If Q6 and Q7 responses are the same state, skip to Q8; if 2 states are different, continue to Q7i.]

Q7i. Why did you move to the state you live in now? Please select all answers that apply. [OPTION TO SELECT MULTIPLE]

- A. For better housing options
- B. For employment reasons
- C. To be closer to family
- D. To be closer to an Afghan community
- E. Other

Q8. Do you intend to move to a different state within the United States within the next 12 months?

- A. Yes
- B. No
- C. I don't know

Housing

Q9. Was your household able to pay your living expenses (rent, food, medical bills, etc.) last month?

- A. Yes
- B. No

Q10. How does your household currently pay for rent? Please select all answers that apply. [OPTION TO SELECT MULTIPLE]

- A. Rental assistance
- B. Income from employment
- C. Family support
- D. Community support
- E. Savings
- F. Other

[If Q10 responses include "A. Rental Assistance" continue to Q10i. If Q10 responses do not include "A. Rental Assistance," skip to Q11.]

Q10i. Will your household be able to pay the rent next month without any outside assistance?

- A. Yes
- B. No
- C. I don't know

[If Q10i = "A. Yes" continue to Q10ii. If Q10i response = "B. No" or "C. I don't know" skip to Q11.]

Q10ii. How will your household pay rent without any assistance? Please select all answers that apply. [OPTION TO SELECT MULTIPLE]

- A. Income from employment
- B. Family support
- C. Community support
- D. Savings
- E. Finding cheaper housing
- F. Other
- G. I don't know

[CONTINUE TO Q11]

Employment

Q11. What is the highest education level you have completed?

- A. None
- B. Primary
- C. Secondary
- D. Vocational
- E. University or higher

Q12. What best describes your current employment status?

- A. Employed (full-time)

- B. Employed (part-time)
- C. Self-employed (work for yourself, business owner, independent contractor, Uber or Lyft driver, etc.)
- D. Unemployed and actively looking for a job
- E. Unemployed and not actively looking for a job

[If Q12 = "D. Unemployed and actively looking for a job", continue to Q12i.

If Q12 = "A. Employed (full time)", "B. Employed (part-time)", or "C. Self-employed", skip to Q12ii.

If Q12 = "E. Unemployed and not actively looking for a job", skip to Q13.]

Q12i. What challenges have you faced in finding a job? Please select all answers that apply. [OPTION TO SELECT MULTIPLE]

- A. Childcare or family responsibilities
- B. Transportation challenges
- C. Limited English language skills
- D. Lack of job openings
- E. I don't know how to find a job
- F. No employment authorization or other documents
- G. Lack of required technical skills, training, or credential/certificate
- H. Employers do not recognize qualifications or work experience from outside the US (professional degree)
- I. Poor health or disability
- J. Other

[CONTINUE TO Q13]

Q12ii. Are you interested in finding a different job?

- A. Yes
- B. No
- C. I don't know

[If Q12ii = "A. Yes" or "C. I don't know", continue to Q12iii. If Q12ii = "B. No" skip to Q13.]

Q12iii. What kind of assistance do you need to find another job? Please select all answers that apply.

[OPTION TO SELECT MULTIPLE]

- A. English language training
- B. Technical certification
- C. Vocational education (job skills class)
- D. Professional degree
- E. Driver's license
- F. Transportation
- G. Other
- H. I don't need any assistance

[CONTINUE TO Q13]

Q13. How many family members (16 years and older) in your household, including yourself, are currently employed?

- A. 0
- B. 1
- C. 2
- D. 3 or more

[If Q13 = "A. 0" or Q3 = "A. 0", skip to Q14. All other responses, continue to Q13i.]

Q13i. How many women family members (16 years and older) in your household are currently employed? Include yourself in the count if you are a woman aged 16 or over.

- A. 0
- B. 1
- C. 2
- D. 3 and more

[CONTINUE TO Q14]

Q14. How many family members (16 years and older) within your household, including yourself, are looking for a job?

- A. 0
- B. 1
- C. 2
- D. 3 or more

[If Q14 = "A. 0" or Q3 = "A. 0", skip to Q15. All other responses, continue to Q14i.]

Q14i. How many women family members (16 years and older) in your household are currently unemployed and looking for a job? Include yourself in the count if you are a woman aged 16 or over.

- A. 0
- B. 1
- C. 2
- D. 3 and more

[If Q14i = "A. 0", skip to Q15.

If Q14i = "B. 1," "C. 2," or "D. 3 and more" continue to Q14ii.]

Q14ii. What challenges do women family members (16 years and older) in your household face in finding a job? Please select all answers that apply. [OPTION TO SELECT MULTIPLE]

- A. Childcare or family responsibilities
- B. Transportation challenges
- C. Limited English language skills
- D. Lack of job openings
- E. I don't know how to find a job
- F. No employment authorization or other documents
- G. Lack of required technical skills, training, or credential/certificate

- H. Employers do not recognize qualifications or work experience from outside the US (professional degree)
- I. Poor health or disability
- J. Other

[CONTINUE TO Q15]

Mental Health

Q15. Have you or any family members in your household had feelings of extreme sadness, have been worrying or thinking too much, have thoughts about the past that kept you from doing things or spending time with others, feeling helpless, or having difficulty sleeping?

- A. Yes
- B. No

[If Q15 = "A. Yes", continue to Q15i. If Q15 = "B. No", skip to Q16.]

Q15i. Have you and/or any family members in your household received help from a professional (psychologist, doctor, etc.) to address those feelings?

- A. Yes, have received help
- B. No, have not received help

[If Q15i = "A. Yes", skip to Q16. If Q15i = "B. No", continue to Q15ii.]

Q15ii. Why have you and/or and family members in your household not received help from a professional to address those feelings?

- A. Do not need professional help
- B. Do not know how to access professional help
- C. Cannot afford professional help

[CONTINUE TO Q16]

Legal Services

Q16. Have you applied to modify your immigration status in the United States (asylum, green card, etc.)?

- A. Yes
- B. No

Q17. Do you need immigration assistance?

- A. Yes
- B. No

[If Q17 = "A. Yes", proceed to Q17i. If Q17 = "B. No", skip to Q18.]

Q17i: What kind of immigration assistance do you need? Please select all answers that apply. [OPTION TO SELECT MULTIPLE]

- A. Legal orientation on immigration pathways
- B. Referral to lawyer/legal provider
- C. Legal representation
- D. Assistance with completing application
- E. Assistance with interviews or other immigration processes
- F. Cash assistance to pay for legal costs
- G. Other

[CONTINUE TO Q18]

Q18. Have you received any immigration assistance?

- A. Yes
- B. No

[If Q18 = "A. Yes", proceed to Q18i. If Q18 = "B. No", proceed to Q18ii.]

Q18i. What kind of immigration assistance have you received? Please select all answers that apply. [OPTION TO SELECT MULTIPLE]

- A. Legal orientation on immigration pathways
- B. Referral to lawyer/legal provider
- C. Legal representation
- D. Assistance with completing application
- E. Assistance with interviews or other immigration processes
- F. Cash assistance to pay for legal costs
- G. Other

[CONTINUE TO Q19]

Q18ii. What has prevented you from receiving immigration assistance? Please select all answers that apply. [OPTION TO SELECT MULTIPLE]

- A. No one has explained the process to me (I do not understand what is needed)
- B. I do not know how to find an immigration attorney.
- C. I am unable to afford an immigration attorney.
- D. Other

[CONTINUE TO Q19]

Q19. Do you wish to reunite with any immediate family members (such as your spouse, child under 21 years old, or parent) located outside of the United States?

- A. Yes
- B. No

[END SURVEY]