



A Report from the University of Vermont Transportation Research Center

# **Transportation, Equity, and Communities at Risk: Refugee Population and Transportation Accessibility in Vermont**

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# **TRANSPORTATION, EQUITY, AND COMMUNITIES AT RISK: REFUGEE POPULATIONS AND TRANSPORTATION ACCESSIBILITY IN VERMONT**

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## **EXECUTIVE SUMMARY**

This study suggests that transportation is one of the key issues and challenges facing newcomers to Vermont. For refugees and immigrants as for other members of the general population, being able to get to work, school, and medical appointments on time, being able to travel for groceries and other shopping, and being able to visit relatives and both new and old friends, are all important parts of a healthy and sustainable life. But while issues of transportation access are of importance to all members of any community, there are some specific implications with regard to mobility for refugees in their adjustment to a new life in Vermont. The issues are not only those of convenience and efficiencies; for newcomers to Vermont, transportation access and mobility are crucial elements of a successful resettlement process.

Our research suggests that for refugee families and individuals for whom transportation is less of a challenge – because they live closer to their travel destinations or to transit options, or due to their access to a car – their acclimation to a new environment is potentially smoother. Indeed, those for whom transportation is less of an obstacle have considerable advantages over those who do not live in close proximity to the work, stores, services and schools that they need to reach. Overall, our study indicates that access to viable transportation options, both public and private, is lacking for refugees in Vermont. This gap acts as a significant barrier in the adaptation of refugees to their new homes and their acculturation to their new host communities. Furthermore, limited transportation options can in substantial ways restrict the autonomy and independence of refugees, leaving them dependent on the services and schedules of others, which in turn can adversely affect their ability to seek and secure gainful employment, receive necessary medical care, and access other goods and services vital to survival, such as food and clothing. Our study also indicates that further research needs to be done on the specific impacts of limited transportation options for refugee women, children, and the elderly.

This study, drawing on interviews and participant observation with service providers, community leaders, and a number of refugees, a review of both academic literature and the popular press, an analysis of relevant demographic and economic data, and a pair of surveys of both refugees and service providers gives some insight into the nature and the number of challenges facing refugees in Vermont with respect to transportation.

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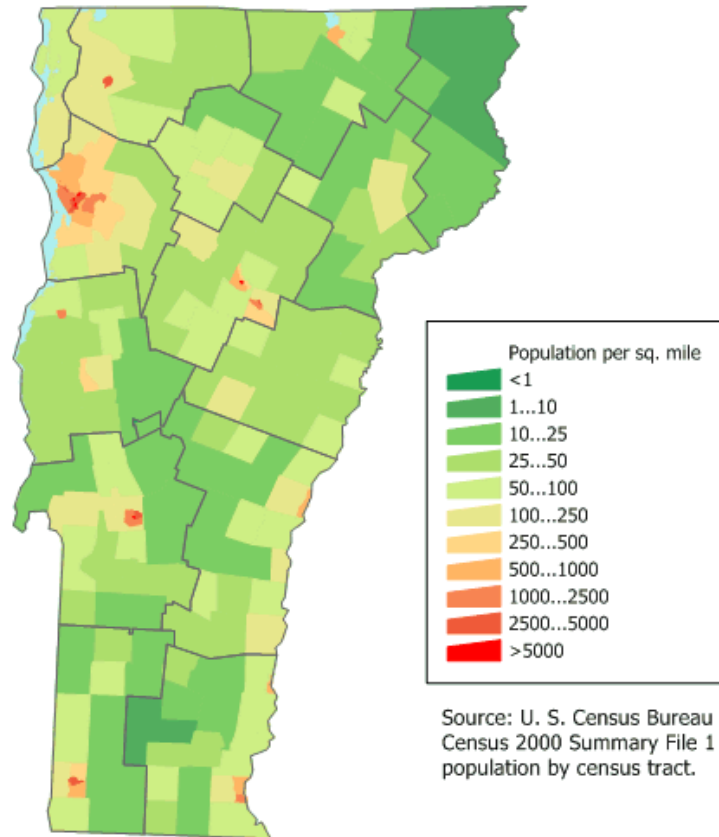
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## **PROJECT OVERVIEW**

The issues of equity and access in transportation have long been recognized as central to those concerned with environmental and social justice. From bus boycotts and freedom riders during the Civil Rights movement in the US through more recent social movements regarding transit planning and sustainable development, to ongoing policy debates on mobility, lifestyle, and civic engagement, transportation has emerged as a key site of struggle, engagement, and opportunity for diverse communities, planners, and policymakers alike.

The current study builds on this rich history of critical analysis by examining the context of transportation equity and access for newcomers to Vermont – in particular the refugees and immigrants who have emerged as a new source of population growth and demographic change within a primarily rural and traditionally racially homogenous state. According to the US Census Bureau, Vermont ranks 49<sup>th</sup> amongst US states in population and is also the second whitest state (after Maine), with over 96% of the population listed as white (US Census Bureau, 2010a). The US Census Bureau also estimates that of the 2.1% population growth (approximately 14,000 people) since the 2000 Census, just over half of that number consists of migration into the state, including over 4,300 immigrants from outside of the US, the majority of whom are part of the refugee resettlement program (US Census Bureau, 2010b). The majority of this influx has settled in the northwestern part of the state, in and around the city of Burlington.



*Figure 1: Population Density in Vermont*

Source: US Census Bureau 2000

Refugees have been arriving in Vermont since the 1980s, mirroring in many ways the national resettlement patterns seen across the US. This has meant successive waves of resettlement including Southeast Asians during the late 1980s and early 1990s, Central Europeans and refugees from the former Soviet Union during the 1990s, and various African groups from approximately 2000 onward (Portes and Rumbaut, 2008), with some overlap between the various groups and their arrival periods. The largest refugee populations currently residing in Vermont are Bosnians and Vietnamese, with significant numbers of Somali Bantu, Congolese, Sudanese, Meskhetian Turks, Burundians, Iraqis, Bhutanese, and Burmese also present (VRRP, 2010). The last three groups represent the most recent intake to arrive in large numbers since 2008. If we examine the resettlement patterns in Vermont more closely we get a sense of some of the specific challenges that newcomers and service providers in Vermont both face. In particular, accommodating such a diverse set of communities – with different cultural traditions, religious beliefs, histories, and languages – poses some difficulties, especially when in many cases

very small numbers of a given group may be present. If we look at the numbers below, for example, we get a sense of this diversity within the refugee population of Vermont.

*Table 1: Refugee Arrivals in Vermont by Country of Origin*

Country of Origin	Arrival Dates	Population
Bosnia	1994-2004	1705
Vietnam	1989-2002; 2005	1069
Mezkhetian Turk	2005-2008	163
Azerbaijan	2003-2006	34
Sudan	1998; 2001-2009	137
Kosovo	1999	58
Congo	2000-2009	192
Iraq	1994-1995; 2008-2010	153
Somalia	2003-2010	588
Rwanda	2005	12
Burundi	2004-2009	117
Togo	2001-2009	26
Burma	2008-2010	173
Bhutan	2008-2010	464
Other	1989-2010	586
<b>TOTALS</b>	<b>1989-2010</b>	<b>5477</b>

*Source: Vermont Refugee Resettlement Program*

While the absolute numbers of refugees in Vermont is small compared to states such as California, Texas, or New York, the program as a whole has had a significant and successful history, with over 5000 refugees settled since 1987, almost entirely in Chittenden County, in towns such as Burlington, Winooski, and Colchester (VRRP, 2010). Refugee resettlement in Vermont is operated jointly by the office of the State Refugee Coordinator (Agency of Human Services, State of Vermont) and the Vermont Refugee Resettlement Program, a field office of the Washington, DC-based US Committee on Refugees and Immigrants (one of the main domestic resettlement organizations in the country). These agencies provide direct support in the form of channelling federal financial assistance to refugees for up to 8 months<sup>1</sup> and language and job training as well as employment assistance for up to five years. As noted above, Vermont is a microcosm of broader national priorities, with a mix of almost all the refugee communities seen across the US (with notable exceptions such as the Cuban population in Florida) and as such represents challenges as well as opportunities for both refugees and service providers in the resettlement process.

<sup>1</sup> Refugees may also elect to take their financial assistance at higher levels over a shorter duration, usually four months.

One of the main challenges is the fact that Vermont, as a primarily rural state without major cities of the size seen in other regions and with a demographically homogenous population, is not a traditional immigrant destination. In-migration has historically come from French Canadian communities to the north, as well as from England, Ireland, and other parts of the US. Thus, refugee resettlement programs cannot rely on the same institutions and organizations that have provided social services – housing, healthcare, language and job training, transportation, childcare, etc – that immigrant networks and service providers have developed in ‘gateway’ cities such as New York, Los Angeles and Chicago (Singer and Wilson, 2007; Herman, 2005) or even many of the secondary destinations that have become prominent in the past decade such as Atlanta, Seattle, Nashville, and Detroit (Massey, 2008; Singer, Hardwick and Brettel, 2008).

Besides the major resettlement entities – VRRP and the State Refugee Coordinator’s office – several new groups of varying size and structure have emerged in recent years to help provide these necessary services for newcomers including the Association of Africans Living in Vermont (AALV), the Somali Bantu Community Association of Vermont, and the Vermont Bhutanese Association, though some of these are more nascent than others. Through the course of this project the researchers found that given the limited financial and human resources that service providers could draw upon, a great deal of both information and resource-sharing occurred between organizations in order to support refugees in their resettlement. AALV, for example, is committed to serving all refugees beyond their original African clientele and declares that it is “proud to be able to extend its experience in mutual assistance to newly arrived refugee groups” (AALV, 2010).

As well, many state and local agencies, while not dedicated solely to refugee issues, often have staff members whose primary responsibility is geared towards resettlement. Many of these service providers have been brought together in monthly meetings by the State Refugee Coordinator, Denise Lamoureux, to discuss issues, share information, and support the resettlement efforts throughout the state. In these meetings, as well as in our surveys, interviews, and reviews of news stories and the academic literature, transportation concerns emerged as a recurring theme for immigrants and refugees.

*Transportation is a huge challenge. Families often have to bring many children on the bus for one to attend a medical/dental appointment and often times they need to walk as well. SSTA offers some options for childcare for younger children although there are limited slots and not available with good timing for the routes"*

*– SP 1*

*It is important for employers, health care providers and transportation planners to consult about providing adequate public transit service, particularly during non-peak travel periods. If public transit cannot extend to existing destinations, then perhaps shuttles/van pooling can be promoted as an alternative solution. Additional incentives for increasing ridership among the general population might help fund route/schedule expansion.*

*– SP 3*

Similarly, State Refugee Coordinator Lamoureux has listed transportation, along with housing, employment, childcare, and healthcare as one of the primary issues for refugees in Vermont. As with other 'minority' or so-called 'at risk'<sup>2</sup> populations – including low-income groups, senior citizens, and the physically challenged, questions of transportation access and mobility are paramount in the daily lives of immigrants and refugees (Adie, 2010; Blumenberg and Smart, 2010; Roorda et al., 2009; Venter, 2009; Blumenberg, 2008; Weiss, 2000). In order to get to new jobs, schools, hospitals, community centers, shopping and a raft of other services necessary to help them transition to their new lives, refugees must be able to travel in a timely and cost-efficient manner. Therefore this study set out to examine the question of transportation equity for newcomers in Vermont, especially in light of the particularities of the state – the low levels of population density and urbanization, the lack of historical immigration, the cold weather climate, and the economic and cultural context of refugees.

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<sup>2</sup> The term 'at-risk' is often used to identify economically or politically marginalized populations due to various vulnerabilities but remains a contested one as some critics have argued that it reduces the sense of agency and initiative of given communities. This report therefore uses the term with some caution and bearing such caveats in mind.

This project examined such issues through a two-year (2008-2010) qualitative study that included key informant interviews with both service providers and members of various refugee communities to understand better the relationship between this population and transportation and mobility in Vermont. As well, researchers reviewed relevant literature at the local, national and international levels as well as analysed important economic and demographic data as part of our analysis. The central empirical element of the study was a set of two surveys – the first conducted with a group of 32 service providers, the second a community-based survey of 261 refugees – in order to more closely explore transportation access and mobility in the state of Vermont through the lens of environmental justice.

## **OBJECTIVES**

Drawing on qualitative research methods, the central goals of this study include the following:

- To understand how refugee communities, their advocates, and service providers evaluate the current state of transportation in Vermont in relation to their specific needs
- To identify specific modes of transportation that refugees have access to, which they favour, and what options they may prefer for the future
- To understand where refugees are located in relation to existing transportation infrastructure
- To examine the distance between refugee homes and key destinations
- To examine what role refugees and their advocates see themselves as having in terms of opportunities for input and decision-making in regional and local transportation planning

A broader goal of the project is to use this initial case study as a model and framework for analyzing the transportation needs and equity of other marginalized or 'at-risk' communities such as the elderly, the physically challenged and low-income groups. We also hope that the findings and recommendations within this study may aid refugee communities and service providers in articulating community needs and identifying gaps in transportation services and support, as a step to addressing these shortcomings through policy and political interventions. Finally, we hope that the data, analysis and recommendations provided by this project may also provide important information for refugee advocates both within community organizations and government agencies, as well as for transit authorities for their use in long-term regional and urban planning regarding transportation, housing, and social services

## **BACKGROUND**

Much of the existing literature on transportation equity has focused on the key themes of access, mobility, participation, decision-making, and utility. Who pays and who benefits from the transportation infrastructure in our societies? Who bears the cost of new highways and bridges, who pays the price for diminished public transit services, and who reaps the rewards of expensive metro-rail lines? Such questions have for many years concerned regional and urban planners as well as politicians, neighbourhood activists, and many others. For many European scholars, issues of equity and transportation have often revolved around the question of social exclusion – in which members of a given society are excluded from full and vibrant participation because of their lack of access to services such as public transit (Clifton and Lucas, 2004; Lucas, 2004a; Lucas, 2006; Lyons, 2004). Others have examined the examples of various world cities in terms of transit use (Cervero, 1998) or urban transportation planning (Vuchic, 1999; Lucas, 2004a) through the lens of liveability and social as well as environmental sustainability. Such contexts – especially those of smaller European cities and their transportation modelling vis-à-vis marginalized communities – are of considerable interest to this project. However, the majority of studies of non-US cities continue to be of the metropolis and even of the mega-polis in many cases (Loo and Chow, 2006).

In the United States, discussions of transportation equity have a lengthy and distinguished history alongside the rise of environmental justice, civil rights, and anti-racism movements, primarily in urban centers (Deka, 2004; Hanson and Guiliano, 2004; Bullard, Johnson and Torres, 2004b). There are two main trajectories that the relevant literature has followed. The first examines the question of displacement and the deleterious impact of certain transportation planning decisions upon specific communities. Such work has looked at, for example, the way that interstate highways, roads, bridges, and subways have often cut through and had disastrous consequences for low-income or racialised communities (Dluhy, Revell and Wong, 2002; Freilla, 2004; Forkenbrock and Schweitzer, 1999). A related set of studies has focused on urban decay as a corollary of so-called “White Flight” to the suburbs (Thabit, 2003; Herman, 2005). A second major focus for the work in the United States on transportation equity has been on access and utility for marginalized communities. This research has arisen in large part out of community activism and concerns, as expressed in such notable examples as the Los Angeles Bus Riders Union challenge to the Los Angeles County Metropolitan Transit Authority (Mann, 2004; Ramsey, 2000), or transit

activism in Pittsburgh (Nogrady and King, 2004) and Baltimore (Menzer and Harmon, 2004). In such cases, community activists have questioned the disinvestment in public transit serving poorer neighbourhoods or for more heavily racialised sections of the city, often while large-scale projects such as commuter rail service is simultaneously extended to mainly white and often affluent suburbs. Similar studies have noted the clear connections between transportation reliability and economic self-sufficiency (Garasky, Fletcher and Jensen, 2006; Jacobsen, 2005) and socialization (Miller and Rasco, 2004; Shen Ryan, 1992). Scholars who have followed in this line of analysis and critique have urged those who advocate 'smart growth' and less-automobile-centric modes of regional development therefore to avoid planning that reinforces transportation racism and entrenches existing inequities (Bullard, Johnson, and Torres, 2004a; Haines, Gifford and Pelletiere, 2005; Schweitzer and Valenzuela, 2004).

The scholarly and community-based concerns regarding transportation equity have been reflected to varying degrees within the policy-making realm in the United States. The U.S. Department of Transportation (DOT), for example, lists "mobility" as one of its key objectives in its strategic planning:

It is our obligation to ensure that transportation is not only safe and efficient, but that it is also accessible. Transportation must be within reach of all Americans, including those with low incomes, the elderly and persons with disabilities. Where barriers to accessibility exist, we will seek to eliminate them (DOT, 2010)

Similarly, the U.S. Federal Transit Administration (FTA) has an office of Civil Rights and Accessibility dedicated to the issue of "ensuring non-discriminatory, equitable, accessible and safe public transportation, enhancing the social and economic quality of life for all Americans" (FTA, 2010). Indeed, "affordable mobility" is one of the key priorities of the FTA, and "mobility is the right of every American" (FTA, 2010); yet the question remains: how equitable and accessible is transportation for marginalized (or potentially 'at-risk') communities within states such as Vermont?

The need to provide support and services to the growing refugee population in Vermont has been recognized at several levels. While the absolute numbers of refugees in the state are small compared to some other receiving regions, as a percentage of the overall population Vermont stands as one of the most active host communities in the nation. Between 250 and 350 refugees are received each year, with an overall



population estimated at somewhere in the region of 5000 individuals, based primarily in Chittenden County (VRRP, 2010). Vermont has formally participated in the Federal Refugee Resettlement Program for over 25 years, with State Refugee Coordinator Denise Lamoureux helping to organize service provision across national, local and state agencies and arenas. Notable programs to help refugees with their transition process have included various language and translation services, education and training, and health care services such as the Vermont Department of Health's Refugee Health Program (VDOH, 2010) and the Vermont Micro Business Development Program of the Vermont Community Action Agencies (VMBDP, 2010), an initiative that has supported new business-creation initiated by refugees. However, transportation services and access for refugees has not been formally studied, though a more basic needs assessment survey has recently been conducted on behalf of the Refugee and Immigrant Services Providers Network of Chittenden and Washington counties. Indeed, there are few systematic studies of transportation equity and access with regard to refugee populations in the United States or globally, although recent research on immigration and transit in California (Blumenberg and Smart, 2010) and New Jersey (Chatman and Klein, 2009) have made important contributions to the overall examination of transportation and equity issues.

For refugees arriving in Vermont and in the US more generally, the question of transportation is often broached in the broadest of terms. For example, the official guidebook provided by the Bureau of Population, Refugees and Migration of the US Department of State prior to arrival informs newcomers that "public transportation varies from community to community" and, outside of the major cities, "is not easily available" (Office of Refugee Resettlement, 2004). The majority of the guidebook's focus on transportation is indeed on car-ownership and licensing requirements, while refugees are advised to consult local resettlement agencies for assistance with accessing public transit and other modes of transportation. It is perhaps not to be unexpected therefore, that car ownership is a popular aspiration for many refugees, as our study results have shown us. Those initiatives that have focused on public transit and refugees in Vermont have been few and somewhat ad-hoc, such as a summer-long program instituted during one particular year during which a staff member at VRRP worked with incoming Somali Bantu refugees to help familiarize them with bus schedules and routes. Our research aims to examine the context and options in a more systematic fashion.

## DATA COLLECTION AND METHODOLOGY

The framing and organizing principle for this research is that it is action-oriented, participatory in nature, uses qualitative tools, and is community-based in both design and execution. This has meant engaging with several community partners through their leadership and maintaining a dialogue with them on the research approach, including adjusting research strategies in order to refine both research questions and the appropriate methods of investigation, reporting back to communities and making publicly available research findings. The specific research tools utilized for the study have included interviews with key informants, participant observation of service provider meetings, and two sets of surveys, one with service providers and another with refugee community members. As is often the case with participatory projects, the researchers responded to the priorities and ideas articulated by the partner organizations and shifted some of its original focus and design throughout the course of the study.<sup>3</sup>

The project began its preliminary stages in January 2008 with the application for ethical approval through the Institutional Review Board for research involving human subjects. Simultaneously, the PI began to build the research team by interviewing graduate students with the requisite skills. In the summer of 2008 two graduate students in conjunction with the PI conducted further background research in order to better understand the contexts of both refugee resettlement and sustainable transportation in Vermont. In particular, key informant interviews with the State Refugee Coordinator, the Director of the Vermont Refugee Resettlement Program, and numerous staff with refugee agencies, transportation planning bodies, community groups and non-governmental organizations began to lay the foundations for the survey to be conducted with the refugee communities and service providers.

Turnovers in staff and leadership within some of the refugee agencies led to some delays in starting the survey, but the changed timeframe allowed the PI to conduct further background research. In particular, through the summer and fall of 2008, the PI conducted anonymous, semi-structured interviews with 5 Vietnamese and 10 Bosnian

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<sup>3</sup> For example, the project initially planned to conduct focus groups with both service providers and especially refugee communities themselves. However, attendance at RISPNet meetings and key informant interviews with service providers diminished the need for focus groups with this population, while several community leaders and individuals within the various refugee populations specifically stated that members of their communities would likely prefer surveys and interviews over a focus group method, a suggestion which was adopted after careful consideration by the research team.

former refugees in order to understand their respective experiences with transportation issues during their own resettlement in Vermont. Potential interviewees were identified using snowball-sampling or respondent-driven methods common in ethnographic research, especially with 'hidden' or potentially marginalized communities (Browne, 2005). During this period the PI also began to build closer relationships with the three primary refugee service organizations in Vermont – the State Refugee Coordinator's office, the Association of Africans Living in Vermont (AALV) and the Vermont Refugee Resettlement Program (VRRP). In particular these organizations and the translators who work for VRRP and AALV were able to provide substantive feedback on the design of a community-based survey on transportation and refugees so as to achieve greater community participation.

In 2009, data collection began on the two surveys. The survey for service providers was made available online through SurveyMonkey's online site and was collected between January and June of 2009, with a total of 32 responses. The survey for community members was also made available online but was primarily filled out, due to language restrictions, in hard copy form with the assistance of staff translators at AALV and VRRP, with collection occurring between January and December of 2009. The PI or a member of the research team was present during the filling out of the survey, which occurred either within the organization offices, a community center, or on multiple occasions, within the home of a refugee. Research assistants then entered the hard copy data of the refugee surveys into the SurveyMonkey site and both surveys were made available for analysis electronically. While the overall population of refugees in Vermont numbers close to 5000, for the purposes of this survey the target population is closer to 2000 individuals, the refugees who have been resettled between 2001 and 2009.<sup>4</sup> The total number of refugee surveys collected is 261.

Results of the surveys and overall project are being made available to the public and to the refugee communities and service providers through the creation of a project website, currently under development, while copies of this report are being made available to the research partners as well as other interested stakeholders.

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<sup>4</sup> The two largest groups of refugees to be directly resettled in Vermont are the Vietnamese numbering over 1000 who arrived primarily between 1987 and 1992, and Bosnians who number over 1800 who arrived primarily between 1994 and 1999. While both of their experiences are informative (hence the interviews with members of each community), they are not directly relevant to current refugee needs and experiences vis-à-vis transportation.

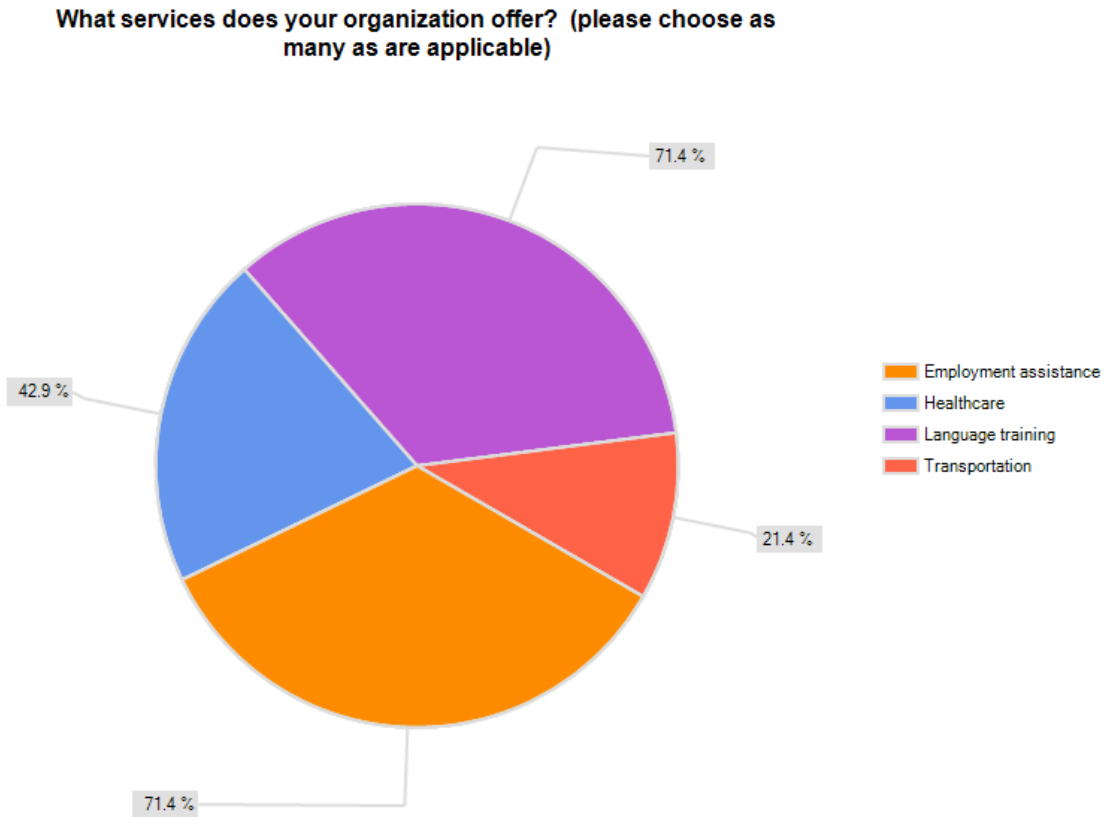
## **SURVEY RESULTS – SERVICE PROVIDERS**

### ***Demographic Profile of Respondents***

A total of 32 service-providers responded to an online survey between January and June 2009 asking a series of questions regarding refugees and transportation issues in Vermont. As is the case for Vermont in all areas of service provision for refugees, only a handful of organizations are solely dedicated to refugees, while the majority address the needs of multiple populations. Service providers included members of school boards, resettlement agencies, housing authorities, health services and clinics, social services, early childhood education programs, and municipal community development programs.

The respondents reported the number of clients they serve ranging from as few as 5 to as many as 5,000. Service providers in the survey reported supporting refugees in a number of ways including assistance with needs ranging from healthcare, language training, employment assistance, tax preparation, family services, interpretation and translation, education and outreach, advocacy, mental health, civic engagement, and for over 20% of respondents, transportation assistance.

*Figure 2: Service Provider Functions*



**Travel Needs**

For almost all respondents, some form of transportation assistance was an important part of their work with refugees, including:

- Providing rides for clients to and from appointments, work, and shopping
- Helping to learn bus schedules and the public transit system
- Assistance with obtaining taxi vouchers for medical appointments
- Teaching clients how to drive

Indeed, for many of the service providers, transportation to and from various destinations appeared to be a pivotal role that they perform in the everyday life of refugees, as shown by the following comment by one respondent:

*I transport New Farms for New Americans participants to weekly winter meetings, as well as to the farm site and back home, and sometimes to farmers markets and home. I also sometimes need to transport clients for important appointments at other social services, to apply for jobs, etc.*

– SP 4

Another respondent said of the Vermont Refugee Resettlement Program (VRRP)'s work:

*VRRP volunteers often teach clients how to use public transportation and case managers help clients to get [a] bus pass. If a client gets a job, VRRP's employment services can provide up to \$50 for transportation services (for some clients).*

– Service Provider

With regard to the travel needs of refugees, service providers estimated that travel times to various destinations were in general on the longer side.

Table 2: Travel Needs of Refugees as Estimated by Service Providers

	Medical	Shopping	Work/School	Social
<b>&lt;5 minutes</b>	0%	0%	0%	7.1%
<b>5-15 minutes</b>	25.9%	11.1%	25.0%	42.9%
<b>15-30 minutes</b>	51.9%	55.6%	35.7%	35.7%
<b>&gt;30 minutes</b>	22.2%	33.3%	39.3%	14.3%

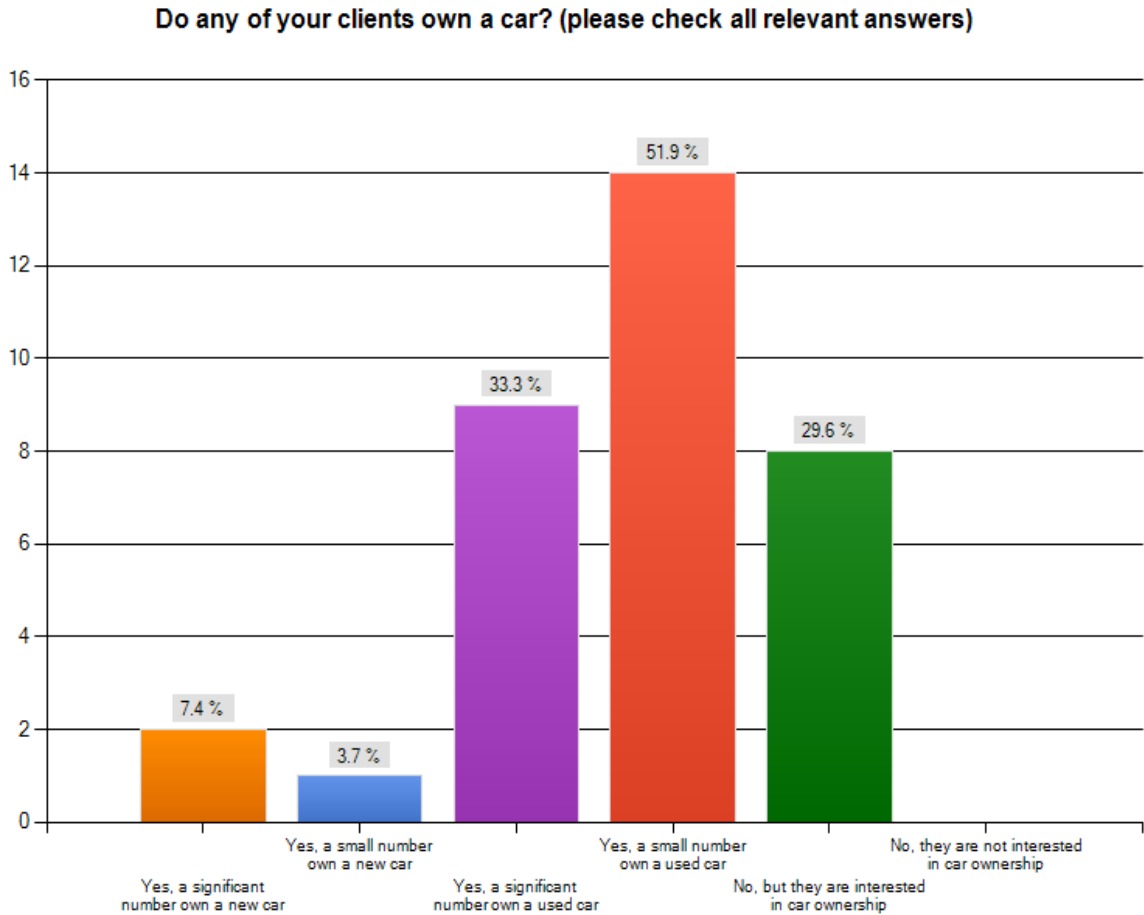
Service providers saw each of these four categories of travel destinations as being extremely important for their clients, although close to 90% of respondents viewed getting to school or work to be the most significant need.

**Modes of Travel**

In terms of travel options, a majority of service providers felt that their clients either took the bus (61.5%) or walked (30.8%) to their destinations, while a handful used a car (7.7%); none listed bicycling as a common mode of transportation for their clientele. When asked what would be the preferred mode of travel for their clients, service providers overwhelmingly (84.6%) answered “car”, while a smaller number listed “bus” (15.4%) and none felt that either walking or bicycling would be

desirable options. One service provider felt that “many refugees are willing to ride bicycles, but more accessible and safe bicycle lanes are necessary.” Overall, service providers felt that a majority of their clients owned either a new or used car or wanted to do so:

*Figure 3: Service Provider Estimation of Client Car Ownership*



Such preferences are perhaps not surprising given the greater degree of difficulties regarding transportation in the context of Vermont’s climate, population density, and level of urbanization, but this finding – borne out by the responses of the refugee community members themselves in the next section – should give some pause to regional and transportation planners for whom questions of ‘smart growth’, ‘energy efficiency’, and ‘sustainability’ have become paramount in recent years. It is important to note that car ownership is often seen as an important part of the immigration and acculturation process, of ‘becoming American’. Indeed, the Office of Refugee Resettlement’s own guidebook indicates as much in its introduction to transportation in the US for newcomers:

When you first arrive in the United States, you will spend a lot of time walking from place to place. Soon you will start taking public transportation, and someday you will probably own and drive a car. If you learn the meaning of traffic signs and signals and other rules of the road in the beginning, you will have an easier time using public transportation and learning to drive in the United States. (Office of Refugee Resettlement, 2004: 37).

Such language reinforces a linear trajectory of transportation options that move from walking to public transit to car ownership, tied seemingly to a refugee's increased levels of familiarity and establishment within their new home. The Cultural Orientation Resource Center of the Center for Applied Linguistics, author of the above guide and the organization responsible for producing both overseas and domestic toolkits to help refugees prepare for their resettlement experience in the US, does acknowledge on its website that the transportation question is a more complex one than simply moving towards car ownership. While much of its domestic training programs seem directed at immediate issues for refugees such as learning to navigate transit systems in relocation centers, there are overseas training sessions that caution refugees not simply to assume that car ownership is the ultimate goal:

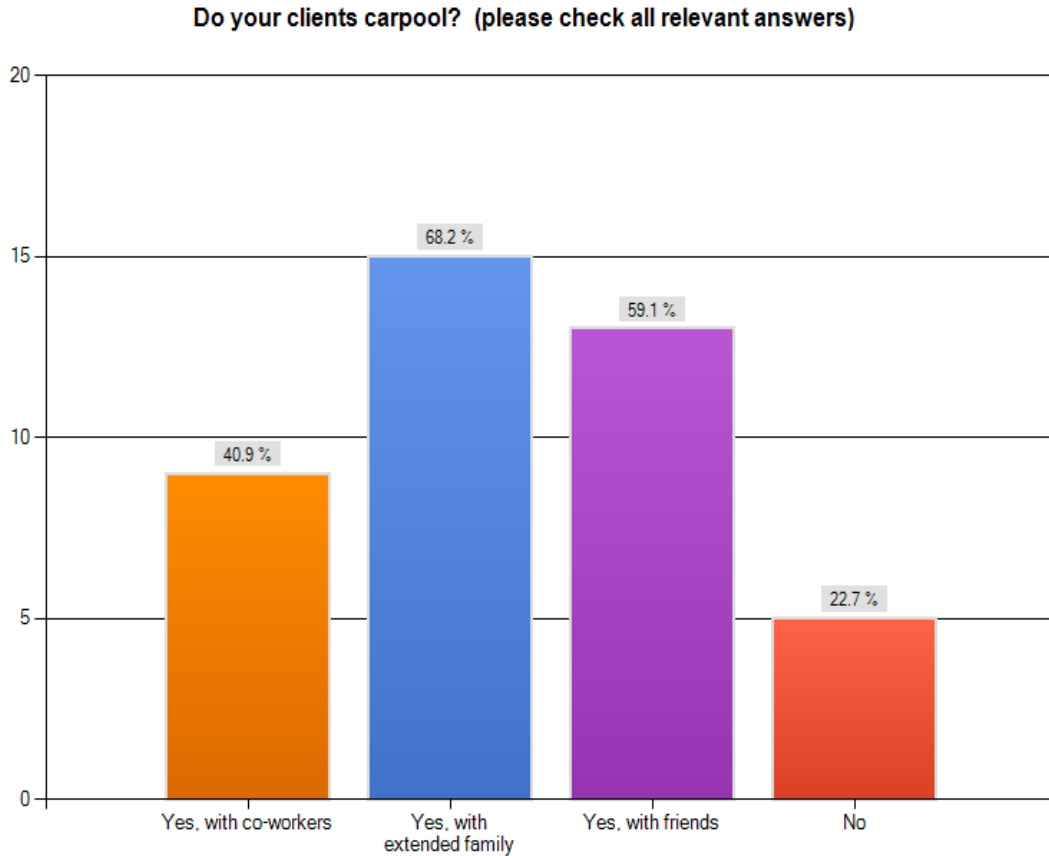
When students first arrive in the US, they will need to rely on public transportation to get to work, school and shops. The public transportation system requires that students understand schedules and that they are on time. Students may think that car ownership is necessary in the US. On the contrary, it can be expensive and has many responsibilities. Rules for all travellers and drivers will be very different in the US, so students should always pay attention to safety rules and signs. It is the goal of this module to provide students with the information that they will need to feel comfortable getting around their community in the US (Cultural Orientation Resource Center, 2010)

The key issue to recognize, therefore, is that the mode of transportation favoured by refugees is not simply about convenience and efficiency (though these are important) but is equally concerned with success in the resettlement and adjustment process. Indeed, several of the interviews conducted with refugees and service providers pointed towards the trend of an extended family, co-workers or group of friends purchasing a communal car as soon as financially possible in order to



improve access to various services and destinations. In the opinion of service providers, carpooling appears to be popular amongst their clients:

*Figure 4: Service Provider Estimation of Client Carpooling*



Whatever their aspirations towards car ownership and use, however, the majority of refugees in Vermont still ride the bus. In the view of the service provider respondents, a majority of their clients are either somewhat or very familiar with the public transit system and with bus routes, schedules and fares in particular. When asked why some of the refugees they work with might not (or might not want to) use the bus, service providers in our survey suggested that the three main reasons were:

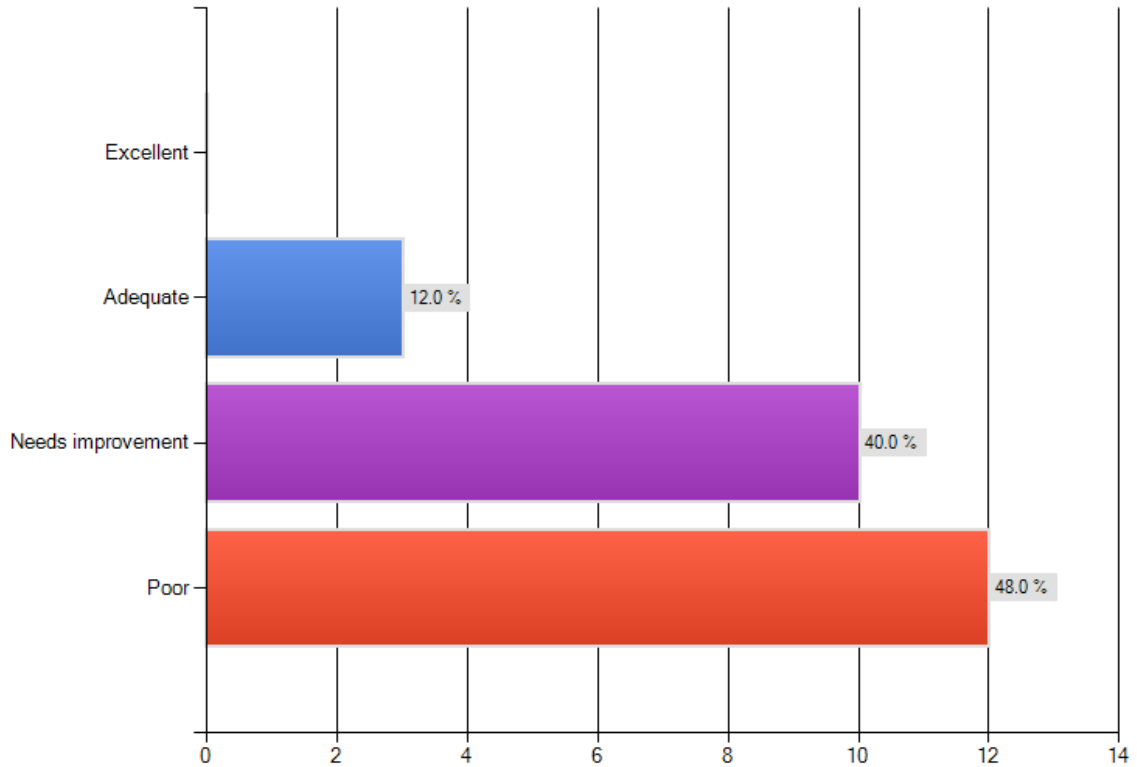
1. No direct service
2. Service not frequent enough, and
3. No bus stop near destination.

A lack of route and scheduling information and no bus stops near their homes were also cited as possible disincentives to use the bus, but were generally of less concern for the service providers. Perhaps the most

frequent complaint about the bus amongst both service providers and refugees had to do with weekend and night time service. Service providers were overwhelmingly critical of the availability of buses for these periods.

*Figure 5: Service Provider Evaluation of Bus Service*

**How would you evaluate the current night-time and weekend service on local bus routes for your clients' needs?**



**Impact on Work**

Many service providers pointed out the impacts that this lack of adequate transit had for refugees' economic opportunities:

*Transportation is a serious barrier to refugees looking for work. The bus schedule usually does not accommodate second shift and third shift workers. Even first shift workers cannot get their destination via bus on Sundays.*  
 – SP 3

*The current economic situation makes it difficult for refugees to find employment opportunities close to home (in the Burlington and Winooski areas) so they are forced to look elsewhere (including Essex Junction, Shelburne, Charlotte, Williston, etc.). Some are able to pass the Driver's License test and get a car in order to work late shifts and carpool. Most clients, however, spend hours per day commuting on 1 or more bus, walking or riding a bicycle (or a combination). If the bus routes reached further, operated more frequently and on the weekends, newly arrived refugees would have a greater likelihood of becoming economically self-sufficient.*

– SP 5

Beyond the significant impact on work, there were several other specific issues that service providers suggested were important with regards to refugees and transportation in Vermont.

### **Children/childcare**

Half of the service providers surveyed answered “no” when asked “if your clients have children are they comfortable having them ride the bus alone?” The impact of inadequate transportation on children, childcare, and education was a recurring theme for many of the service providers:

*A lot of my Head Start children ride the SSTA van to school (Trinity Children's Center). The hours aren't great. Many children get to school at 10:30 and get picked up at 2pm. They are missing out on opportunities at school for education and social interactions with other children. By the time they arrive at school, open playtime is over and children are going outside. Then the children have lunch, rest time and many children leave in the middle of rest time.*

– SP 7

*Some of my families have one car and then usually the mother takes the bus to get to ESL classes and uses the bus to get their children to school. For some families who don't have a bus pass, the expense of taking the bus can be expensive, so they walk a lot.*

*– SP 6*

*I feel that there is a large need for transportation of young children to their childcare settings for refugee populations who do not own a car or may only own one car. It is very challenging for parents to take a bus to drop their child off at preschool and then wait to take another bus to work or school. Many children are being denied access to an early education because of transportation challenges. More SSTA services would be very helpful to this population and would also increase later school success for refugee children.*

*– SP 8*

### **Driver's licenses**

Another key concern for many service providers is the question of driver's licenses, with many respondents advocating increased access to training and vehicles in which to take the driver's test. Many suggested that their clients either had had some experience with driving: a license in another country, a license in the US, learning to drive, or in the process of acquiring a license in the US. Some pointed to the dangers of unlicensed driving, while others noted the benefits that accrue to refugees who had the ability to drive to their destinations, despite the illegality and multiple risks involved:

*Public transportation is very sub-standard, particularly for the winter climate. People start driving before they are ready and often illegally. Local authorities through lack of enforcement encourage refugees to drive without licenses and insurance.*

*– SP 9*

*We need more inexpensive or free drivers Ed! A lot of refugees have driver's permits and are always asking where they can get driving instruction (it's the only volunteer program I've ever thought of starting, having white Americans teach refugees how to drive). Vermont Bus service is not adequate for refugees needs. Refugees would like more services to be in walking distance- it's better to have doctor's offices, social services, grocery stores, farmers markets, etc. close to where refugee families live. The service farthest away right now is grocery stores. Employment is another story. It's always going to be in disparate locations - so that is when I find public transport most crucial - to get people to work. Employment opportunities increase exponentially for those refugees with a car and driver's license.*

*– SP 10*

In recognition of the importance that driving a car might play in the resettlement process, service providers have provided both ad-hoc and more formalized efforts to address the issue with their clients. Ad-hoc arrangements include service providers simply driving the refugees they work with to various destinations in some instances, and providing driver's training to their clients. More formalized initiatives include a grant made available through the Vermont Student Assistance Corporation for a small group of refugees to receive driver's training with the assistance of a translator. However, this specialized program has only been able to accommodate a small number of participants (between 10 and 20 per offering), which, while noteworthy, is still inadequate in comparison to the demand.

*It can be difficult for refugees to get their driver's license. As far as I know there's a class offered once a year for refugees whose language skills are at the intermediate level. An ESL teacher assists the driver's Ed teacher and students can apply for a VSAC non-degree grant. The class costs \$800. This a great opportunity, but it would be great if it was offered more than once a year and if at some point they were able to have interpreters working with them as well. Even if refugees can understand, they can't always read the curriculum.*

*– SP 11*

## **Healthcare**

Perhaps the most contentious and highly visible issue regarding refugees and transportation through the period of this study had to do with the relocation of various medical services—including orthopaedic, pain management, physical therapy, cardiac rehabilitation, and gynaecological—from several different locations in Burlington to a hub in the town of South Burlington. While the centralization of these various offices along Tilley Drive is potentially more convenient for users, such benefits are undercut for those without access to a car by the fact that the nearest bus stop is half a mile away from the various clinics and offices—a relatively major undertaking for those with a range of medical needs and conditions. This situation was of considerable concern to a large number of stakeholder groups – including low-income, elderly, and physically challenged individuals – but had an especial impact on newly arrived refugees. In particular, the relocation to Tilley Drive of the Maitri Health Care for Women – a group of female health care providers offering alternative and holistic approaches whose offices are especially popular amongst many refugee women – was seen as especially problematic. Many service providers in our survey noted this case:

*There are increasing numbers of health-related appointments for resettled refugees at orthopedics, cardiologists, Maitri and other health care providers on Tilley Drive in South Burlington. Of utmost concern is lack of bus to Maitri, the often-preferred pre-natal care clinic for African-Americans, who already have high-risk of dropping out of care in VT.*

*– SP 12*

*Figure 6: Aerial View of Tilley Drive Medical Facilities*



Source: <http://sburlingtonreccpath.blogspot.com/>

The issue of medical facilities at Tilley Drive became an increasingly prominent one throughout the period of this study and by the fall of 2008 had been taken up by the Burlington-based non-profit group Vermont Interfaith Action (VIA), a coalition of various religious organizations committed to social justice. VIA embraced the cause of providing affordable and accessible service to Tilley Drive with a great deal of energy, researching various options, holding public meetings at which those who were adversely affected by the relocations aired their grievances (with refugees prominent amongst the speakers), and organizing several meetings with the various stakeholders to propose solutions. Bringing together medical staff and administrators with transit authorities, city officials and property managers, VIA was able to help secure an arrangement to provide a free on-demand public shuttle bus from the Special Services Transportation Agency (SSTA) to begin service to the entrances of the hospital on February 1, 2010. This agreement included a commitment from the hospital (Fletcher Allen) that has moved the bulk of services to Tilley Drive to provide \$48,000 annually (during an initial trial period based on demand) to fund the bus. Also providing some support is the Chittenden County Transportation Authority (CCTA),



Pizzagalli Properties LLC (the property manager of the new site), Community Health Center, and Maitri Health Care for Women.<sup>5</sup>

While a significant improvement over the prior situation, the remedy is not perfect. Users need to call the SSTA to book an appointment at least 24 hours in advance and provide their doctor's name and time of appointment—potentially an obstacle for refugees without sufficient English skills. Moreover, there are five pre-set pick-up and drop-off times and the shuttle runs between the University Mall – which users must get to on their own – and Tilley Drive. Users are also instructed to bring a child safety seat if accompanied by a child under the age of 8. Given the additional challenges faced by refugees (as well as others) in terms of childcare and general finances, this may constitute a considerable burden. Those who do not own a car may not, naturally, own a child safety seat for a bus ride. Despite this situation, the intervention of VIA into the Tilley Drive situation was instrumental in securing at least a temporary solution.

Beyond the Tilley Drive case, getting to and from medical appointments was listed as an important priority for refugees by many of the service providers. Several also pointed to the difficulties and confusions caused by uncertainty and unfamiliarity with the Medicaid bus pass system:

*There seems to be confusion and upset that many New Americans' bus passes were taken away. Apparently, through subsidized health care they were given bus passes, but either the health care or transportation agency decided it wasn't OK for them to use the bus passes for anything (like work or school transportation) except medical emergencies. This seems to be a small way we could eliminate barriers to people maintaining jobs and school work, and I think we should make bus passes available to more people who can't afford them.*

– SP 13

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<sup>5</sup> VIA's experience with the transportation and healthcare access issue in the Tilley Drive case has also spurred it to examine the issues more broadly beyond Burlington. The group plans to look at the situation in other parts of Vermont, especially rural regions.



### **Underserved Locations**

Finally, beyond the specific and notable cases of transportation inadequacies identified by service providers, our study examined the issue of specific locations that are being currently under-serviced in Vermont. Many of our service provider respondents listed similar answers to the question “are there any particular destinations that you think are currently being underserved by the transit system in Vermont?” The top three locations mentioned were Winooski/Colchester, Shelburne, and Williston. Other locations noted included:

- Medical facilities at Tilley Drive
- Franklin Square
- Shaw’s in Colchester
- Intervale Community Gardens
- Waterbury
- Hinesburg
- Towns outside of Burlington but within Chittenden County
- The Vermont Teddy Bear Company
- Inn at Shelburne Farms
- Wake Robin Retirement Community
- Montpelier/Barre
- Essex
- New North End of Burlington
- Essex Junction
- Fairfax
- Milton
- South Burlington

More than half of the respondents listed Colchester/Winooski as the most underserved location for their clients, while a further third pointed to the Tilley Drive medical facilities as being a key destination currently not receiving adequate service. In general, service providers advocated for more transit options to increase refugees’ access to various services and opportunities:

*More bus routes and more frequent bus runs would help. Add a shuttle from downtown Burlington and the Old North End to the Community Garden in the Intervale so refugees can more easily grow their own food.*

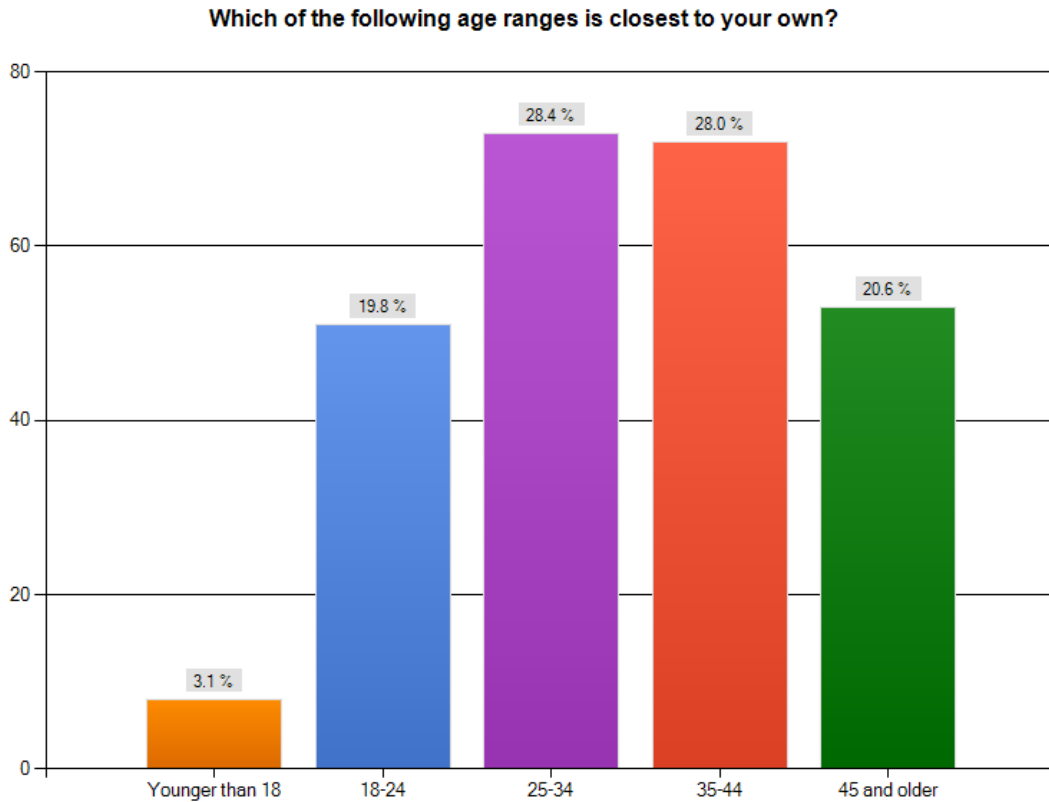
*– SP 14*

## SURVEY RESULTS - REFUGEES

### Demographic Profile of Respondents

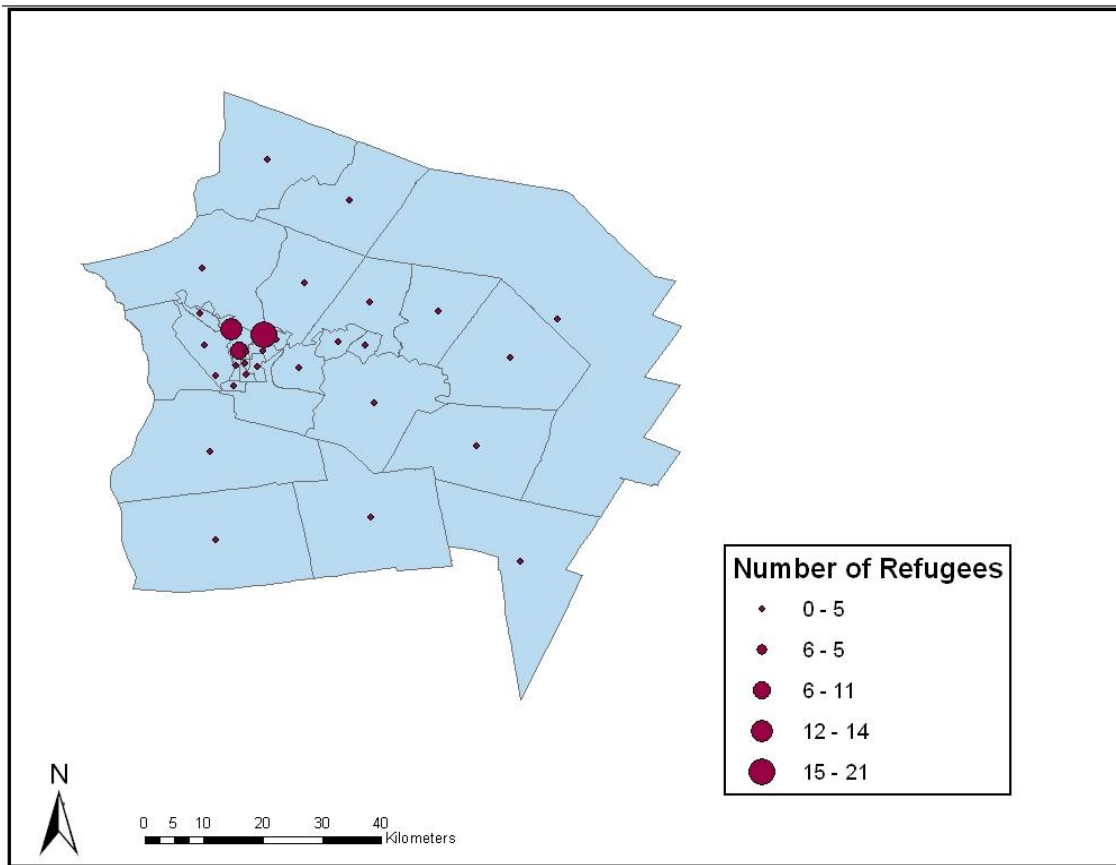
A total of 261 refugee community members responded to a survey conducted between January and June 2009 that asked a series of questions regarding refugees and transportation issues in Vermont. Participation, as noted above, was limited to refugees resettled since 2000, primarily from several African and Asian communities. Particularly well represented in the survey are refugees from Bhutan, Iraq, Somalia, Burundi, Congo, Burma, and Sudan. 22.1% of respondents reported living in a household of 1-2 persons, 29.1% reported living in a household of 2-4 persons, and a majority 48.8% reported living in a household of more than 4 persons. 71.7% of respondent households had children, 88% of respondent households had more than 1 adult, while 20.8% of respondent households included someone over the age of 65. A small number (7.7%) included persons with disabilities. The majority of survey respondents were age 25 and older:

*Figure 7: Age Range of Refugee Respondents*

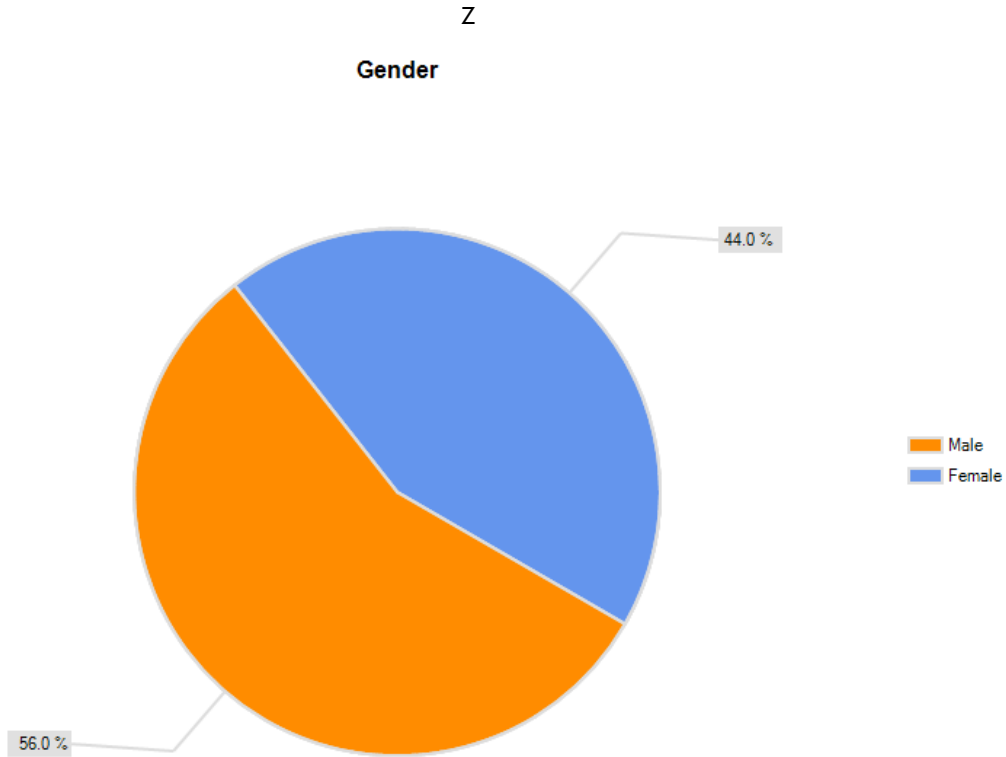


All of the survey respondents noted that they were currently receiving either direct federal financial assistance or were being supported by local agencies and organizations such as VRRP, AALV, or city, state, and federal entities. A significant number also indicated that they were active members of an ethnic association or community group. All survey respondents lived within Chittenden County, with a majority residing in Burlington, Winooski, Colchester, South Burlington, or Essex/Essex Junction:

*Figure 8: Spatial Distribution of Respondents within Chittenden County*



*Figure 9: Gender of Refugee Respondents*



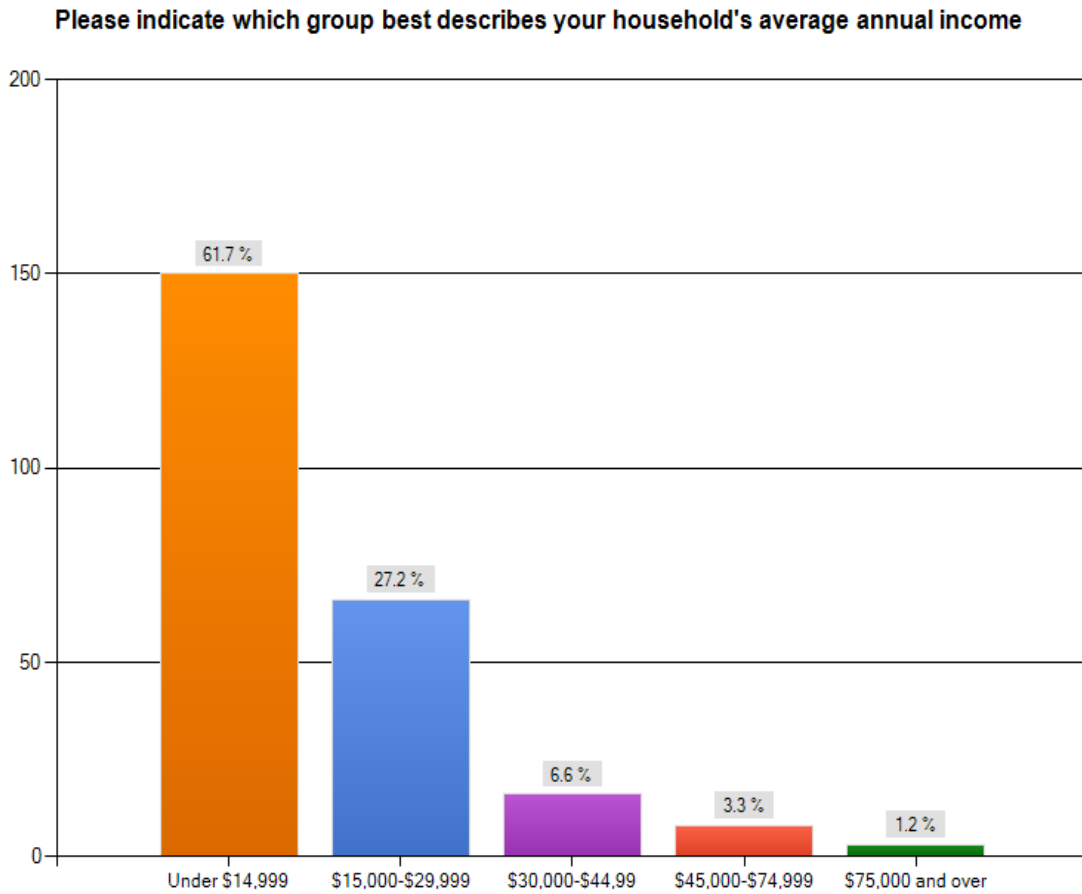
As seen above a larger proportion of survey respondents were male, which raises the question of whether there are differential experiences of transportation for refugees based on gender. Some service providers as well as some refugees within the survey have suggested that the gender difference needs to be examined in closer detail:

*There is a disparity between the men and women on my caseload... most of the men work and drive... few of the women do either... it might be useful to do this survey by gender*

*- SP 15*

In terms of income, the respondents of this survey were – perhaps not surprisingly – of modest means:

*Figure 10: Income of Refugee Respondents*



This context of relatively large families and relatively low-income coupled with the fact that federal financial assistance for newly resettled refugees lasts only 8 months, makes it clearly of paramount importance for refugees to gain a job as quickly as possible.<sup>6</sup> 33.2% of respondents reported being employed full-time, while a further 22.7% reported being employed part-time. A significant number (23.1%) reported being unemployed, much higher than both national and state averages. The employment figures are potentially skewed, however, by the participation of newly arrived refugees who have not yet gone onto the job market and the particular circumstances of the economic recession which adversely affected job markets across the globe and was felt as keenly by refugees in Vermont as elsewhere in the world. In terms of language proficiency, roughly 35% of respondents saw their English skills as basic or learning, while 25% considered their abilities to be satisfactory; these

<sup>6</sup> Indeed, the operating principle for refugee reception and resettlement in the US is self-sufficiency through employment, as outlined in the Refugee Act of March 17, 1980.

numbers necessitated the use of translators by the research team in order to carry out the survey.

### **Travel Needs**

Our survey results showed agreement between service providers and refugees in terms of travel needs, with both groups estimating relatively long travel times to various destinations. Refugee respondents indicated the following as their sense of the time needed to get to destinations:

*Table 3: Travel Needs of Refugee Respondents*

	Medical	Shopping	Work/School	Social
<b>&lt;5 minutes</b>	1.6%	2.3%	1.2%	12.6%
<b>5-15 minutes</b>	23.0%	29.7%	21.6%	25.2%
<b>15-30 minutes</b>	45.9%	39.8%	44.4%	29.1%
<b>&gt;30 minutes</b>	29.6%	28.1%	32.8%	33.1%

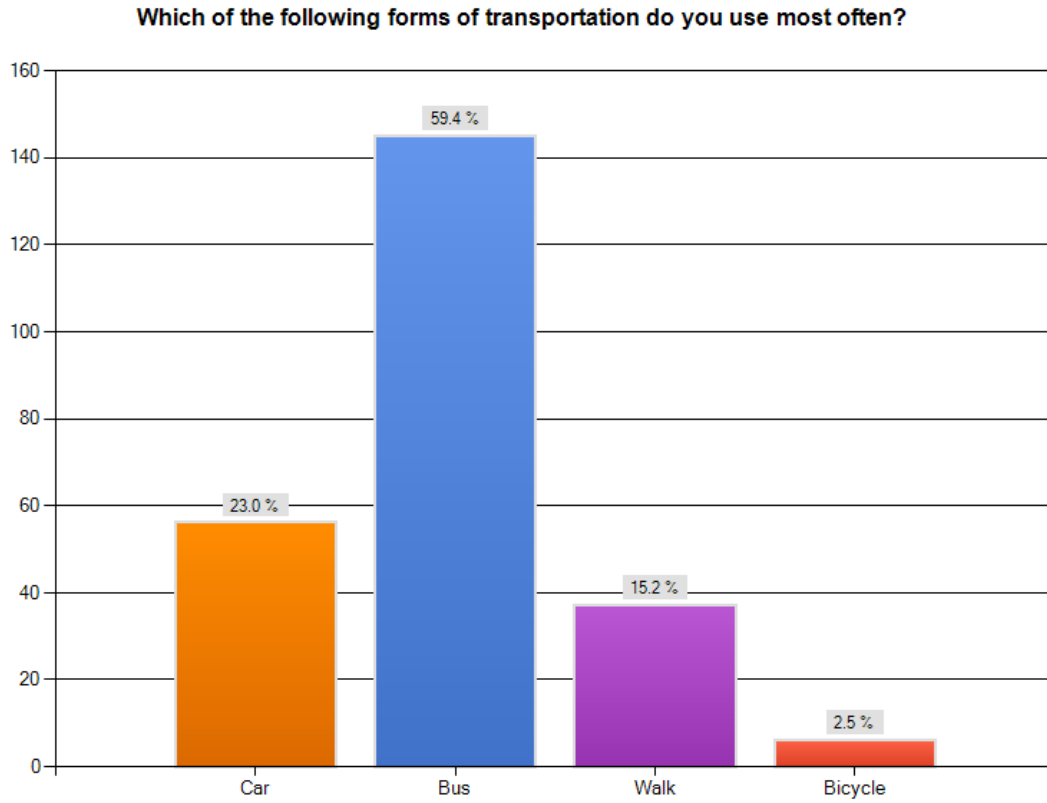
The most significant difference between the refugee and service provider perceptions of travel needs and times was with regard to social destinations, with over fifty percent of service providers estimating that refugees were within close proximity of friends and family while over sixty percent of refugees reported that they required a relatively long journey in order to socialize.

When asked how often they needed to travel away from their homes, 27.3% of respondents said once a day or less, 30.2% said twice a day, 24.1% said 5-10 times a week, and 18.4% said more than 10 times a week. Refugees were also asked what they considered their household's most important needs for transportation. The overwhelming majority (74%) replied commuting to school and work, while smaller numbers of respondents mentioned shopping and errands (13.8%), medical services (13%), and visiting friends and relatives (2.2%). The fact that refugees themselves rated the importance of social trips as being of less significance can perhaps be correlated to the perception of so many that of such destinations would take over 30 minutes to reach.

### **Modes of Travel**

The form of travel most used by refugees, according to our survey, is the bus, with close to sixty percent of respondents indicating this as their most common mode of transportation:

*Figure 11: Most Utilized Mode of Travel for Refugees*

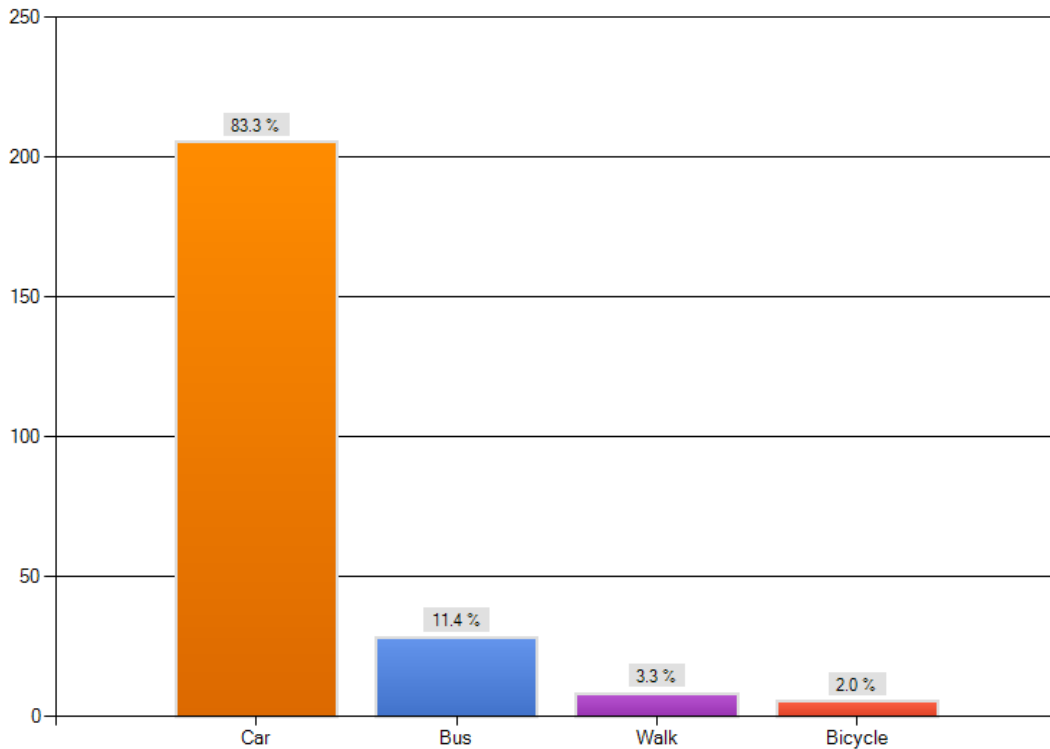


Significant numbers of respondents – well over sixty percent – also replied that they were either very familiar or somewhat familiar with bus routes, schedules, and fares. Refugee participants were somewhat more mixed on the question of whether or not they would be comfortable with having their children ride the bus alone – 41.6% replied “yes” while 36.8% replied “no”; an additional 21.6% replied that this was not applicable to them.

Our survey also asked refugee participants for their opinions on public transit in Vermont, given the heavy reliance of this population on the bus. The results we received were mixed and somewhat contradictory. On the one hand, a significant number reported being “somewhat satisfied” (42.4%) or “very satisfied” (13.6%) while smaller numbers responded “somewhat dissatisfied” (28.4%) and “very dissatisfied” (15.6%). However, when asked what their preferred mode of travel would be, an overwhelming majority of respondents answered “car”, confirming the impressions of service providers that car transport is indeed an aspiration for many of their clients.

*Figure 12: Preferred Mode of Travel for Refugees*

**If given the choice, what would be your most preferred mode of travel?**



Yet what lies behind this preference for cars over other modes of transportation for refugees? When asked what mode of transportation they use most often, a majority of refugees answered “bus” (59.4%), while a smaller percentage answered “car” (23%), “walking” (15.2%), and “bicycling” (2.5%). Public transit, then, is the primary mode of travel for the majority of respondents in our survey. And yet this is not the preferred option for many refugees, but rather the default – as one refugee interviewed put it, “many refugee families don’t have cars, so they have to depend on the buses for many different things.”

Refugees had many reasons for NOT choosing the bus, or for wanting to own and use a car instead. One of the key issues is that of a lack of bus service on evenings and weekends:

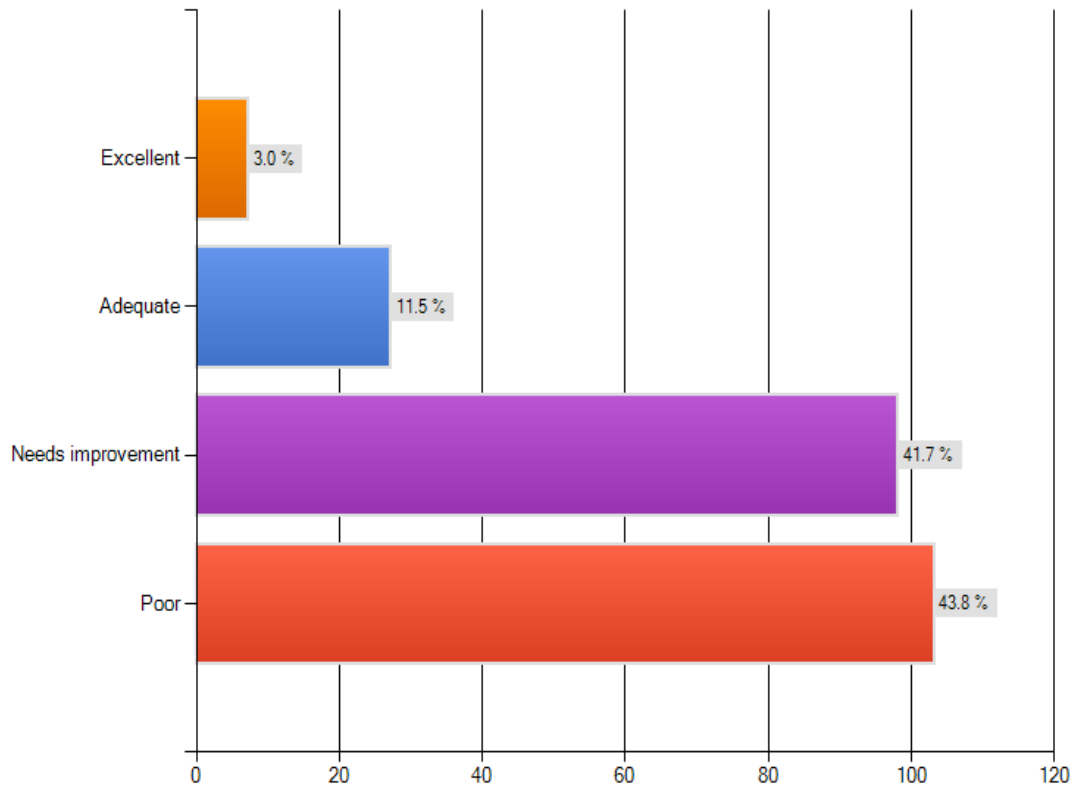


*Weekends are times I and others have time to go places. Unfortunately weekend bus lines are very limited and don't come often. This not only makes it difficult to plan things outside home but also when to do them. Specifically, the Sunday services are even more limited because there is only one bus that runs to other places outside Burlington and within Burlington. This bus takes hours to come to my stop near my home and to place of destination. Extending weekend services would be such a big help!*

- R1

Figure 13: Refugee Evaluation of Evening and Weekend Bus Service

**How would you evaluate the current night-time and weekend service on local bus routes?**



*Using bus as means of transportation in Vermont is not preferable because you do not get bus every time you want one. On weekends and nighttime, there is no bus. Thus, it is important to own your own car.*

- R2

*No bus during Sunday and weekends*

*– R3*

*It is necessary for Sunday and there is no stop at Shelburne Farms so it is to walk on foot it takes about 1 hour from the bus stop*

*– R4*

*On Saturday and Sunday the buses start late around 9:00 and close early. The time is not like other days. Do not reach certain areas.*

*– R5*

*Need more buses for far away towns. Would like regular bus service on Sundays. More bus routes.*

*– R6*

*More night time and weekend service. Refugees do not have access to cars, could use smaller buses to provide coverage for entire city.*

*– R7*

*Transportation needs to be improved in general, at night and during the weekend, because many refugees or people without do their shopping or laundry Saturday and Sunday*

*– R8*

*Buses at the North end are not enough. Weekend no buses, start late and finish early! More buses are needed in Vermont. Fares are too high. Waiting for a long long time*

*– R9*

*No stop near home in Winooski. Bus arrives unpredictably. No late night bus service and waiting between transfers takes a long time. Making bus connections is very time consuming*

*– R10*

Another common complaint amongst refugee respondents is that there are many places that buses do not reach:

*Buses do not serve places outside of Burlington.  
Example: No buses going to Colchester. In addition, if you go to Montpelier buses can only leave you on road. If you go far away from road there is no road.*

– R11

*Most of the buses that go out of Burlington area are irregular. None could rely on the public transportation if the destination is out Burlington area.*

– R12

*For me, the transportation in the city is very good except for the new area where the providers are located don't have a bus line. If the city can fix that, it would be nice*

– R13

*Increase evening hours for Winooski buses. The Winooski DMV was mean: after requesting I bring an interpreter, they refused to use him*

– R14

*I am forced to own a car because...Buses do not go everywhere in Vermont. Buses are irregular: Example the bus which goes to Winooski. At night and Sundays there is no bus. In wintertime it takes me too long to get to Champlain Mill where I can easily get a bus. There are so many destinations where there are no buses reaching the places*

– R15

*Reduce bus fare. Add more buses in lines. There are some places where buses do not reach. Lack of buses in Burlington (one bus goes like to WalMart and you have to wait for a same bus to some in order to get back home)*

– R16

*Better than nothing. Adjust end hours to Winooski until at least 2am. DMV is mean towards non-English speakers*

– R17

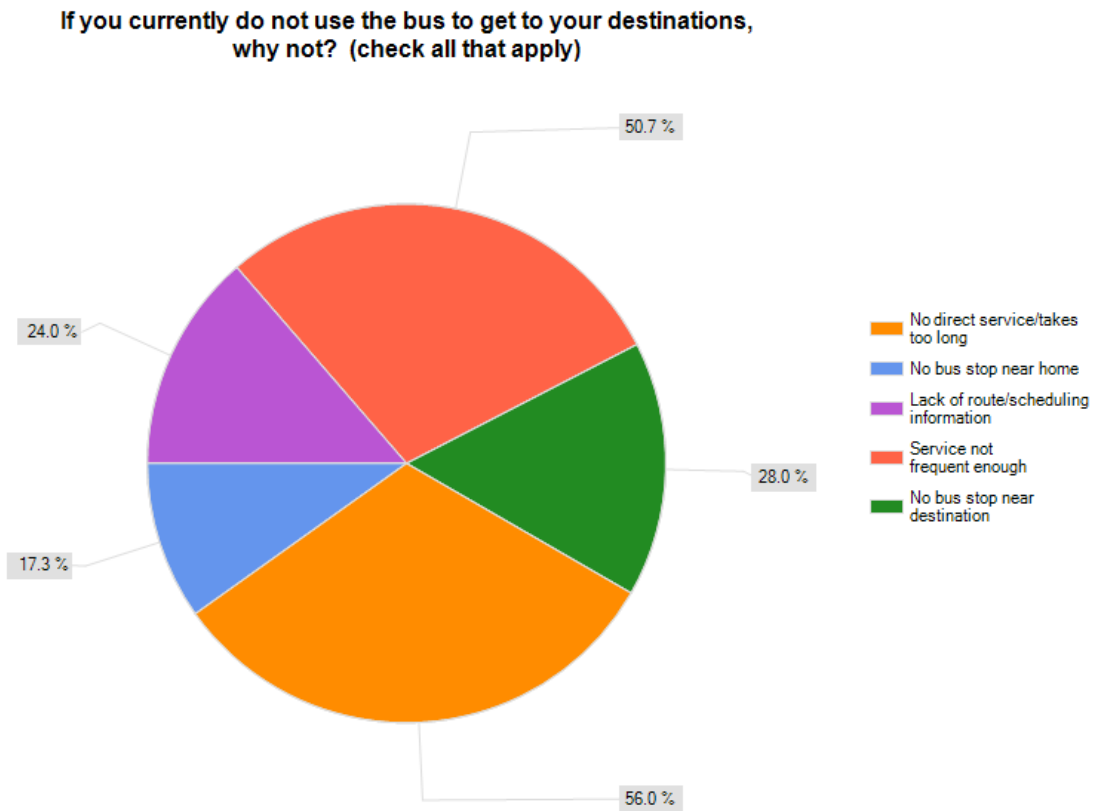
Lack of adequate service is a serious concern amongst many of the refugees, as is the absence of pedestrian-friendly routes to various destinations. For example, one of the respondents notes the lack of a bus stop near a supermarket (Shaw's) in Colchester; access for pedestrians means walking uphill along a busy street and crossing traffic at several points:

*More routes needed: Winooski/Colchester to Shaw's.  
Many refugees walk to the Shaw's in Colchester, which  
is dangerous*

– R18

The survey responses from refugees bear out such perceptions, as we can see below:

Figure 14: Refugee Reasons for Not Taking the Bus



Added to the problems of no direct service and infrequent service are issues such as a lack of route or scheduling information (despite the

*More buses, and more accessible for all refugees. For refugees-hard to ride on foreign bus systems. Schedules should be available in other languages more cultural sensitive.*

*– R19*

*Refugees' people need a lot of city bus. They do not know where to stop for getting ride to their destinations (schools, medical appointments, or simple shopping). Their English barrier, prevents them to know much more on city bus schedules where to get the city bus tickets and how much is the fare.*

*– R20*

*I think the transportation in Vermont has to improve, I mean they have to be on time and put more information on the books for example: put pictures on the book, or more indication so that the new refugees that just get in their new country to their direction that they are going easier.*

*– R21*

contention made earlier in our survey by many refugees that they have a reasonable knowledge of the transit system):

The unreliability of the bus for refugees is more than mere unfamiliarity and convenience, however. As the service providers surveyed indicated previously, there are significant impacts on refugees' resettlement experience due to a lack of transportation. In particular, economic opportunities may be adversely affected and even thwarted by such factors.

### **Impact on Work**

Concerns regarding transportation and work focused on two issues in particular: a lack of transit service to workplace destinations, and a lack of adequate service for certain times. In particular, many respondents mentioned the lack of weekend and evening (or overnight) service as a particular obstacle to their

employment opportunities. For many refugees (as with other low-income groups) those jobs that are available to them often include

*No bus near my work place*

– R22

*Difficult to go to work due to transportation – no bus stop I have job during weekend it is no bus during Sunday*

– R23

*There should be more buses for people with early hour jobs, and late hour jobs*

– R24

shift-work, especially nighttime (often second and third) shifts.

Our interviews and surveys with both current and previously resettled refugees revealed multiple coping mechanisms for this lack of adequate transportation to work. For example, several of the former refugees who work at the University of Vermont and Fletcher Allen Hospital mentioned a “delicate dance” involving carpooling and the passing over of prime parking locations to coworkers coming for the next shift. Others mentioned an “early morning stroll” of workers one can see coming and going from Winooski and Colchester along one of the major streets during the early hours of the morning. In addition to the physical strain this puts on individual refugees and their families, there remains an additional stress that inadequate transportation options places on these new jobseekers. Missing work or showing up late may have severe consequences for those who may have little leeway from employers:

*My friends and I, we use carpooling when we go to work every day at 10:45pm because there is no public transportation running at this time. Sometimes we get to work late which may result in a job loss. I feel that transportation is the most important issue for most people especially for many refugees who cannot easily afford it.*

– R25

*There is no bus at late evening and nighttime. More newcomers (refugees) who work at nighttime (second and third shifts) have to pay for taxi or co-workers for their transportation. There are almost no buses going out of Burlington and Winooski. The whole of Essex and Essex Junction are served by one bus. Same thing for South Burlington and Williston and Colchester. No buses for Milton.*

*– R26*

*Looking for work difficult when bus stops not near places of employment. Most of our families when they come here, they find themselves going through some stages. When they come here they can use the bus for some time. After 3 months they start to withdraw from using it. They see this as cultural; see themselves as being different. They end up asking for someone to help them with their chores.*

*– R27*

*Bus doesn't go to Shelburne Farms where I work. Takes me 70 minutes. I take the bus to the museum and then walk or bike or hitchhike. It is good with the people because there is no discrimination of colour and race but it is a big problem of language for communication*

*– R28*

During the course of our research we also learned of a US Department of Labor program entitled Job Corps which provides education and job training in order to earn a high school diploma, GED, and/or vocational and life skills and for which refugees under a certain age would be eligible. However, the program is based in Vergennes, a town roughly half an hour from the Burlington and Winooski locations in which many of the refugees live. The directors of Job Corps have attempted to address the situation by provided a vanpool to take participants back and forth.

*If I do not get assistance from my school I would need transportation. No way for me to get to Vergennes without the vanpool that Job Corps provides. We have to wait at the corner of North Street for the van at 7AM every morning.*

*– R29*

*I go with 13 other Bhutanese people to Job Corps in Vergennes. Job Corps organizes a vanpool that picks us up at 7:00 AM at North Street, brings us back at 3:30. Takes 45 minutes, Monday to Friday. They give us lunch there. We found out about this program on our own and told VRRP about it. Once I get home I work from 5-10 PM at my other job in a restaurant*

*– R30*

Another example was that of the New Farms for New Americans program, a highly successful initiative led by AALV and supported by the USDA that provides refugees with agricultural experience with access to local farmland and farmer's markets to grow produce and then market and sell it. However, reaching the actual site of the farm plots – the Intervale Center – was at some distance from the nearest bus stop. The issue became even more pressing after the initial year of the New Farms for New Americans program. The location was moved to one that was even more inaccessible other than by car, necessitating AALV's and the coordinator of the program's organizing of vanpools and other ad-hoc transportation arrangements.

### **Children/Childcare**

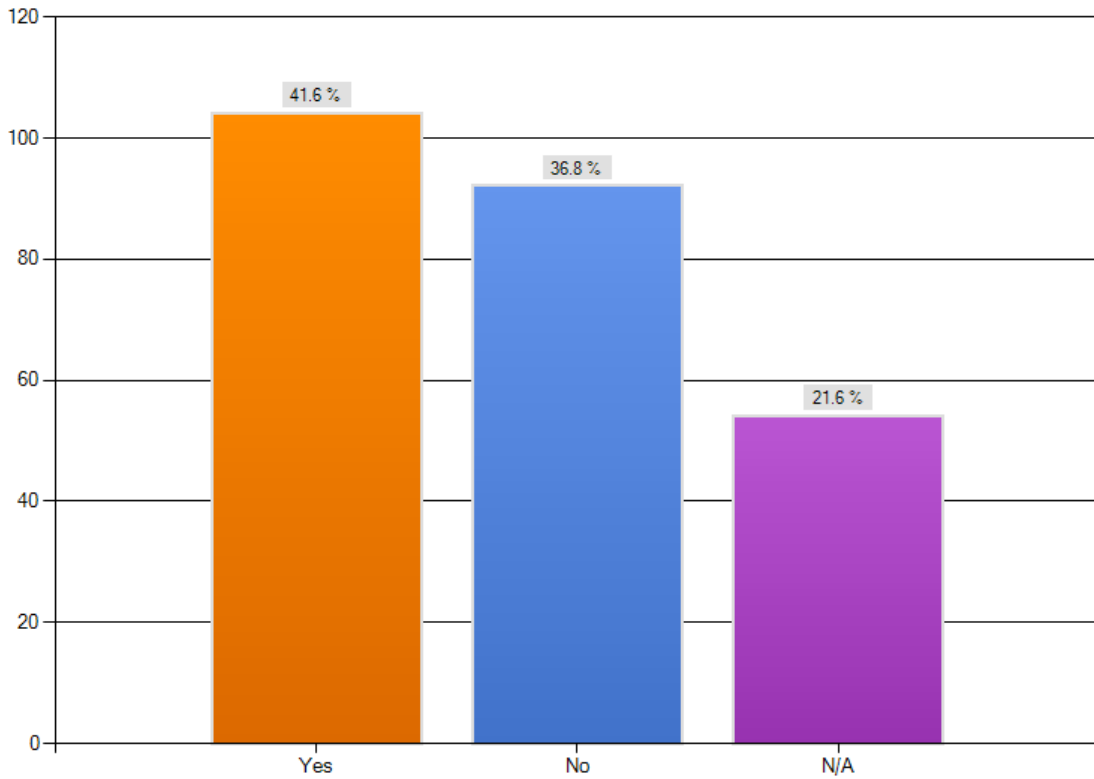
Another significant issue raised by many of the refugee respondents was that of children and childcare. Similar to the service providers, refugees in our survey were concerned about the negative impacts that diminished transportation options would have on their children's education and welfare. As noted earlier, a significant proportion of our survey respondents live in households with children and with four or more family members – this would seem to bear out UNHRC statistics indicating that forty percent of refugees and asylum seekers worldwide are under the age of 18 (UNHCR, 2009). Being unable to travel to and from school in



a timely fashion means particular impacts on young children attempting to acclimate to new educational systems, language, and social networks. While a slight majority of respondents were comfortable with having their children ride the bus without them, well over a third replied that they would not be happy doing so.

*Figure 15: Refugee Opinions – Unaccompanied Minors on the Bus*

**If you have children, would you be comfortable having them ride the bus without you?**



*Add more buses in the line. Need school buses to take our children to school. Increase times (schedules) for buses-Buses should work 24hrs/day 7 days a week. Weekend more problems because this is not buses that start early or end late.*

*– R31*

### **Driver's Licenses**

As service providers had also noted, obtaining driver's licenses was a central and pressing issue for refugees in Vermont. The vast majority of respondents in our survey reported that they did not have a driver's license (61.6%), with a much smaller number reporting that they did have one (26%) and fewer still replying that they had had a license not in the US

(4.1%). A very small number reported being in the process of obtaining a license (8.3%). Approximately the same number (26.5%) reported having either a new (3.3%) or used (23.2%) car as had licenses, though both the interviews and comments within the surveys gave a somewhat different impression (and bore out the perceptions of service providers):

*I have a car but I don't have license and I want driver training*

– R32

*I like to request some (any) organization to give training for driving so that refugees could get license easily and could drive their car. It is easy to buy a car but difficult to get license in Vermont. It is needed to improve in bus services and bus stop because there are no bus routes.*

– R33

*Not an expert in driving so not comfortable going a long distance, don't drive out of town. Need to learn the places before I can go anywhere. Gas and insurance costs are very high for cars. It should be easier with the bus but not providing bus tickets makes it harder when we first arrive. Unless you have a good volunteer who will help you learn the bus system when you first come, it is very difficult. It should be easier with the bus. I use my car for getting to work because of my shift. Before I had a car I had to walk there. Now I walk mostly if I don't have to get to work. The biggest problem with the bus is the delays, stopping on the way takes too long to get to where I have to go. My friends and family are in Winooski and I go there by car as well. It takes half an hour to get to the doctor by car. I work at Twincrafts.*

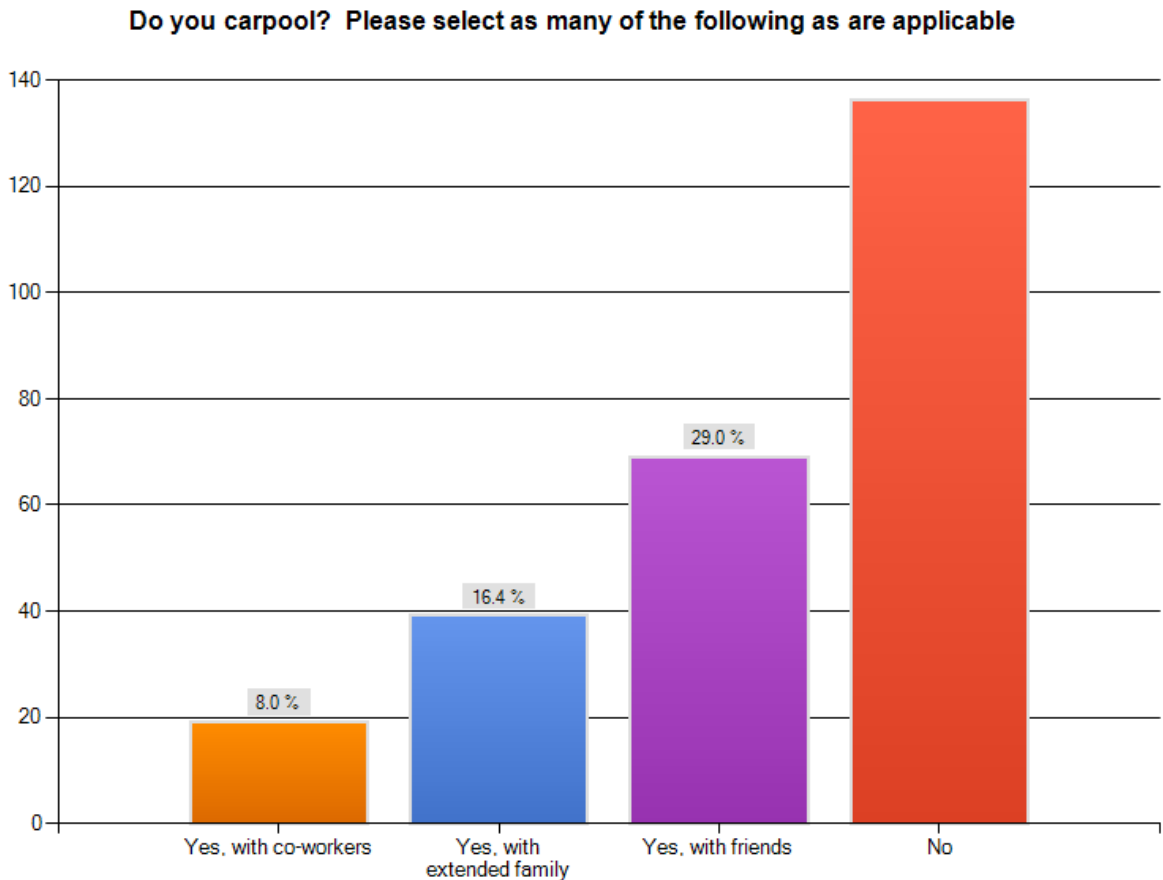
– R34

*If bus could be made better and would have less delays I would use it more but I am tired of waiting and that is why I have bought a car and am learning how to drive. There is only one other Bantu family now in my housing complex, most Bantu live in Riverside. My closest family is in Virginia. I want to be able to visit others. I use the bus a lot but if I miss a bus I have to wait a long time. I cannot get to Colchester without the bus.*

– R35

Several respondents reported that the Department of Motor Vehicles examiners and staff were unfriendly or “mean” to non-English speakers. In one case, one refugee reported that after being told to bring an interpreter to their test, the DMV refused to use him and the applicant was unable to take their driving test. Despite this apparent desire to receive driver’s training and use cars, a majority of respondents reported that they do not carpool.

*Figure 18: Refugee Carpooling*



**Healthcare**

As mentioned in the previous section on service providers, one of the recurring issues has been about transportation for medical services, with the Tilley Drive case the most notable example of impacts upon the broader population and concentrated within the refugee communities.

During VIA's public hearings on the Tilley Drive situation, several refugees spoke to their own frustrations:

Members from the refugee community gave testimony about their difficulty getting to the clinic, including Ma Moh, a Burmese refugee who shared that last winter he began walking from the nearest bus stop in the middle of a snow storm and was nearly hit by on-coming traffic: "I came to fix my back, not get hit by a car." Frustrated, he turned around and walked back to the bus stop completely missing his appointment (VIA 2009)

Many of the respondents in our survey echoed such sentiments regarding transportation for medical needs in general:

*I have to walk in the cold with my disabled daughter  
– R36*

Others talked about the specific impacts that the limitations on Medicaid bus passes placed on them:

*It is to be improved the bus schedule during the night and weekend. Bus pass need to improve and permit more than 8 months because when Medicaid is expired bus pass also expires, but we to go hospital for follow up and consultations.*

*– R37*

*Medicaid does not cover bus passes past eight months. Bus is expensive- not accessible for an unemployed mother.*

*– R38*

### ***Underserved Locations***

The top three underserved locations in Vermont, according to refugee respondents, are Winooski, Williston, and Colchester. Other areas mentioned as needing better service include:

- Shelburne
- Jericho
- Newport
- Essex
- Montpelier
- St. Albans
- Richmond
- Hinesburg
- Milton

## ANALYSIS

Our study clearly suggests – throughout our surveys, qualitative comments, and interviews – that there are substantial gaps for refugees in Vermont when it comes to transportation. While transportation as a whole may be difficult for the population at large in Vermont – given the climate, relatively sparse population, and lack of infrastructure – these gaps represent particular challenges for refugees in their resettlement and acculturation experiences. In particular, our research suggests that there are particular impacts that refugees feel because of inadequate transportation. These include:

- Loss of employment opportunities because of an inability to reach a specific location (especially those outside of Burlington)
- Loss of employment opportunities because of an inability to reach locations at a specific time (especially weekends, evenings and overnight)
- Reduced access to after-school and enriched educational options for children
- Inability to reach medical care and appointments
- The unreliability of public transit leads to even greater feelings of precariousness and instability for individuals already struggling to adjust to new and unfamiliar circumstances
- Dependence on the goodwill and charity of others (including service providers) to provide transportation (and a lack of self-sufficiency as a result)
- Desire for driver's education and training is restricted due to language barriers

In the words of some of our study participants:

*Buses are not always available. If the work place is far away from Burlington you can't rely on public transportation. No buses on weekends and night times. Buses do not show up when needed. Buses are irregular in Essex, Colchester*

– R39

*My feeling on transportation, it is still good if you live in Burlington, once out the city it is a big problem to get transportation. That is I mean the state or the city must develop that system to give opportunity to poor people to travel on to go to their job.*

– R40

*We are so disappointed because they disconnected the bus cards for our family, so we have to pay each time entering the bus. It is so expensive for being a refugee.*

*– R41*

As our research has demonstrated, the substantial majority of new refugee families fall into a low-income category. In terms of transportation access, this financial situation has both drawbacks and at least some temporary benefits. Once the proper paperwork is completed, low-income refugee families can access many of the same resources as other low-income families; for instance, free and discount bus passes are available to Medicaid recipients for the purposes of travelling to and from medical appointments. Newcomer refugees are also eligible to receive a \$15 bicycle, complete with a lock and helmet, from Bike Recycle through the Good News Garage.<sup>7</sup>

However, use of a bicycle is not always a practical form of transportation for long distances or if an individual is ill or disabled. Additionally, use of a bicycle is impeded nearly half of the year in Vermont by inclement weather. Therefore, securing personal ownership of a car or having access to public transportation is often vital to ensuring autonomy – for both convenience sake as well as the aforementioned social and psychological advantages of participating in North American car culture.

For the purpose of understanding transportation equity in Vermont, our project examined all of the transportation options available to incoming refugee individuals and families. We analysed in particular the pros and cons of each source and possible limitations in access. These transportation options included the Chittenden County Transportation Authority (CCTA) public bus systems, bus pass programs, Reach Up, van and car share opportunities and loan programs that assist in the purchase of personal vehicles.

We spoke at length with representatives from a host of organizations that sponsored or were affiliated with the aforementioned programs.

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<sup>7</sup> A “community garage” program operated by Lutheran Social Services in several states in New England and beyond that provides affordable, safe, and reliable transportation options (primarily refurbished cars and bicycles) to low-income individuals so that they have better access to employment and other transportation needs.



Based on these interviews, we discovered that though there are various programs to cater to transportation access for low-income individuals (which could include incoming refugees), many of them are limited and/or contain substantial barriers in gaining access. Most bus pass programs usually cater only to use for medical appointments, Green Mountain Car Share requires car insurance history of the applicant, and auto loan programs most often require extensive credit history. Most refugee individuals will not have credit or insurance history. Since some families fled a hostile situation or are relocating directly from refugee camps abroad, they may no longer possess paperwork to verify their insurance or credit history. Some individuals may not have driver's licenses because they were lost or abandoned. Hence, it would seem the car and van share programs cater to more middle-class constituents and native-born United States citizens. This is further emphasized by the lack of outreach to the refugee community. For example, all of the programs only advertise in English and tend to advertise near downtown and in universities, clearly targeting a demographic that does not include refugee populations.

The CCTA offers the only comprehensive public transportation system in the greater Burlington area. The CCTA bus system has approximately a dozen bus routes that span the county, in addition to limited shuttles that travel to and from Montpelier and Middlebury an average of twice a day. The rest of the buses generally run Monday through Friday twice an hour from 6am to 6pm, and once an hour from 6pm to shortly after 9pm before ending for the night. Services end earlier on Saturday and are either very limited on Sundays or do not run at all that day.

If an individual's work or school schedule complements the bus schedule and that individual lives in proximity to a bus route (and assuming other goods and services are also accessible by walking distance), the bus system may sufficiently accommodate that person's transportation needs. However, this system, though better than some, is inadequate in providing resources on a consistent basis. For an individual who needs to work late into evenings, or has a medical emergency that occurs on a Sunday, this system would be of little help.

The only other existing resource for refugee populations is through the Reach Up programs, which relies on volunteer drivers and taxi vouchers to fill some of the gaps in the transportation needs of the community. However, these resources are also sparse and there is a shortage of volunteers willing to chauffeur refugee families in need. This

shortfall of volunteers can also be attributed by lack of advertisement to the public.

Finally, one of the most prominent issues in transportation access is proper education and awareness. On some levels, many of the programs that exist to increase transportation access, as well as the transportation options, are not properly relayed to refugee populations. In other words, many refugees are simply unaware that these programs exist or do not have the means to tap into them. This may be due to language barriers, conflicting cultural norms and limited funding on the part of the program. However, any progress in transportation equity must start with proper communication and use of existing resources before new resources can be developed.

## RECOMMENDATIONS

Given the significance that transportation plays within the resettlement process, our study suggests that considerable further work needs to be done on the question of refugees and transportation in Vermont. As some of the service providers and refugees have earlier noted, further study is required to understand the specific impact of transportation on the experiences of women; to this we would add that further research is required on the experiences of children (especially vis-à-vis early childhood education and enrichment opportunities), the elderly, and the physically challenged within refugee communities.

Our research team is fully cognizant of the particular constraints – economic, political and social – in which public officials and both urban and transportation planners find themselves with regard to addressing the inadequacies of the transportation system in Vermont more broadly (not just for refugees). But in terms of more short-term measures, our study suggests several modest initiatives that could be considered by various stakeholder groups:

**1. *Improve communication***

This includes providing translations when possible, not only of bus schedules and routes, but also of transportation alternatives and notices of public meetings and opportunities to provide input to regional transportation planning bodies such as the CCMPO. Transit agencies and planning groups such as the CCTA, CCMPO and others would benefit by partnering with service providers to improve both the information that refugees have about transportation and to provide refugee perspectives and input into planning processes.

**2. *Improve driver's education opportunities for refugees***

We would in particular suggest that the Vermont Department of Motor Vehicles consider providing translation services (or contracting through one of the service provider agencies to do so) to increase efficiencies in the licensing process for refugees. As well, we recommend expanding the existing VSAC-funded program to provide more spaces for refugees and for service providers to continue partnering closely with programs such as the Good News Garage to provide refugees with driving options.

- 3. *Provide an expanded bus pass system***  
One of the most common suggestions that refugees in our study made was for local transit agencies to provide a 1-2 year temporary free bus pass system, one that would operate beyond the scope of the Medicaid bus pass and would provide refugees with the ability to utilize the existing bus system more fully. While our research indicates the shortcomings in the current infrastructure, it also suggests that for Burlington-based residents at least, it is at least a decent start. Having more access to the bus and not having to pay at a time when refugees can least afford the extra expense (when they are attempting to create a solid financial foundation for themselves) may in turn help to create a loyal and committed ridership for the longer term.
- 4. *Arrange special stops with the CCTA***  
Several participants in our study suggested that the CCTA work with refugee groups to provide special service—perhaps twice a day—so that buses may reach a specific location (such as Shelburne Farms) to cater to the needs of a larger number of individuals for work
- 5. *Work with employers to provide shuttles***  
Informal transportation has already been heavily utilized as our study has shown—either by individuals or organizations such as JobCorps—but we recommend that resettlement agencies and employment outreach counselors work with employers to provide vanpools and shuttle buses in order to at least temporarily bridge the gaps in the current transportation infrastructure. Since there are several larger institutional employers of refugees in Vermont, such attempts might be more usefully regularized and formalized.

## **APPENDICES**

### **APPENDICES**

#### ***Partners***

The following organizations provided ongoing support to the project:

#### **Vermont Refugee Resettlement Program (VRRP)**

A field office of the US Committee on Refugees and Immigrants, VRRP has been the primary resettlement agency in Vermont since 1980, with the four largest groups it currently serves Bhutanese, Burmese, Iraqi and Somali refugees. In particular VRRP assists refugees with housing, employment, and language training, school enrolment, medical visits, and general social services, both in the short and long-term.

<http://uscreefugees.org/site/PageNavigator/Vermont/vermonthome>

#### **Association of Africans Living in Vermont (AALV)**

Originally founded to serve the growing African refugee and immigrant population in Vermont in 2003, AALV has since grown to become one of the main social service provider agencies for all refugees in the state. Based in Burlington, AALV is funded in part by the federal Office of Refugee Resettlement (Health and Human Services Department), the Vermont Agency of Human Services Refugee Office, and the United Way of Chittenden County. Currently AALV serves refugees and immigrants from 35 countries in Chittenden, Washington and Windham Counties and in recent years has expanded its services beyond its original African clientele to also support the Bhutanese, Burmese, Iraqi, Karen and Meskhetian Turk (among other) communities within Vermont.

<http://www.africansinvermont.org/>

#### **State Refugee Coordinator, Agency of Human Services, State of Vermont**

The State Refugee Coordinator implements the State Plan for Refugee Resettlement, oversees federal grants for refugee services, including refugee medical assistance, refugee social services and refugee children school impact grants. The Refugee Coordinator works across all State Departments and Agencies and with national, local and community partners to increase collaboration, foster the sharing of information, and maximize resources for the resettlement and successful integration of the refugees into Vermont. The Coordinator chairs the Refugee & Immigrant Service Providers Networks (RISPNet) of Chittenden and Washington counties and the Limited English Proficiency (LEP) AHS Committee.

<http://humanservices.vermont.gov/departments/office-of-the-secretary/state-refugee-coordinator>

## **Respondents**

Both interview and survey responses have been coded in order to protect respondent identities.

SP = Service Provider

R = Refugee

## **Interview Questions**

### Service Providers

1. What is the primary function of your agency (what service do they perform for the refugee community)?
2. What role do you play within your organization?
3. What do you see as some of the main challenges facing refugees in Vermont?
4. What do you see as some of the major issues with regards to transportation and mobility for refugees in Vermont?
5. Has your organization undertaken any initiatives with regard to transportation and refugees? If so, what are some examples?

### Refugee Community

1. Where were you born and where did you grow up?
2. When did you leave and what was the primary reason for your departure?
3. Did you come directly to Vermont? If not, where did you stop first and how long were you there?
4. Did you decide to come to Vermont or was the decision made by someone else?
5. What did you know about Vermont before you arrived?
6. What have been your experiences with housing in Vermont?
7. What have been your experiences with education in Vermont?
8. What have been your experiences with work in Vermont?
9. What have been your experiences with transportation in Vermont?
10. How far do you live from your doctor?
11. How far do you live from your work/school?
12. How far do you live from groceries/shopping?
13. How far do you live from friends/family/others in your community?
14. Do you own a car?
15. Do you use public transit?
16. What do you see as challenges for newcomers and refugees to Vermont in terms of transportation?

### **Survey Questions – Service Providers**

1. Name
2. Name of Organization (optional)
3. Number of clients (all populations)
4. Number of clients (refugees)
5. What services does your organization offer?
6. Do you provide any specific transportation services for your clients?  
If so please elaborate
7. How long would you estimate it takes a majority of your clients to reach medical services from their home (via any mode of transportation)?
8. How long would you estimate it takes a majority of your clients to reach grocery stores/shopping from their home (via any mode of transportation)?
9. How long would you estimate it takes a majority of your clients to reach work or school from their home (via any mode of transportation)?
10. How long would you estimate it takes a majority of your clients to reach their nearest friends and family from their home (via any mode of transportation)?
11. What do you see as your clients' most important needs for transportation?
12. Are there any particular destinations that you think are currently being underserved by the transit system in Vermont?
13. Which modes of transportation do you find your clients using most often?
14. If given the choice, what do you think would be your clients' most preferred mode of travel?
15. How familiar are your clients with the public transit system in Vermont?
16. If your clients have children, are they comfortable having them ride the bus alone?
17. If your clients currently do not use the bus to get to their destinations, what reason do they give?
18. How would you evaluate the current night-time and weekend service on local bus routes for your clients' needs?
19. Have any of your clients ever had a driver's license?
20. Do any of your clients own a car?
21. Do your clients carpool?

**Survey Questions – Refugees**

1. Name (optional)
2. Which of the following age ranges is closest to your own?
3. Gender
4. Where were you born? Please indicate city, region, and/or country, as relevant.
5. Where did you reside prior to arriving in Vermont? Please indicate as many countries/cities/regions as are applicable
6. When did you arrive in the US (month/year)?
7. What is your proficiency in English?
8. What languages other than English are you proficient in (speaking, reading, writing or oral comprehension)?
9. How many people (including yourself) are in your household? (this may include both immediate and/or extended family members)
10. Does your household have children/more than 1 adult/persons over the age of 65/persons with disabilities?
11. Please indicate which group best describes your household's average annual income
12. What city do you live in?
13. Which of the following best describes your current employment status?
14. Do you belong to any community organizations or associations?
15. Are you currently receiving assistance or support from any community organizations, associations or other service providers?
16. On average, how long does it take you to reach your doctor from your home?
17. On average, how long does it take you to reach grocery stores or shopping from your home?
18. On average, how long does it take you to reach work or school from your home?
19. What time do you generally arrive at work or school?
20. What time do you generally leave work or school?
21. How far are your nearest or most visited friends or family from your home?
22. What are your household's most important needs for transportation?
23. How satisfied are you with public transit in Vermont?
24. How often do you need to travel away from your home?
25. Are there any particular destinations that you think are currently being underserved by the transit system in Vermont?
26. Which of the following forms of transportation do you use most often?
27. If given the choice, what would be your most preferred mode of travel?



28. How familiar are you with the public transit system in Vermont?
29. If you have children, would you be comfortable having them ride the bus without you?
30. If you currently do not use the bus to get to your destinations, why not?
31. How would you evaluate the current night-time and weekend service on local bus routes?
32. Have you ever had a driver's license?
33. Do you own a car?
34. Do you carpool?
35. Do you need to regularly travel outside of the city you currently live in?

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