

SYMPOSIUM 002:

"WHAT MAKES A PLACE REFUGEE-READY?"

The second annual Agora symposium has again sought out a timely and controversial issue for planners to explore. Investigating a large-scale crisis, such as the current Syrian refugee crisis, disrupts a planner's day-to-day thinking to reflect on the planning profession's connection to a seemingly distant planning problem. It is unsurprising that when asked the thought-provoking question, "What makes a place refugee-ready?", planning student's' responses were multifaceted. Citing both domestic and international cases, the authors consider influential policy reforms, spatial analysis, comprehensive transportation plans, and innovative architecture and design to inform their answers. It is the variety of responses that expose the true complexity of this crisis. Yet all of the articles reveal that despite historical precedent, we were not prepared for this humanitarian crisis.



*Refugees Welcome | Detroit, Michigan
Aayat Ali, MUP + MSW 17*

A PLACE TO CALL HOME

AAYAT ALI

Master of Urban Planning + Master of Social Work, 2017

Refugee admissions have ebbed and flowed in the United States based on political leadership and world events. The Refugee Act of 1980 was a direct response to the increase of refugees since World War II, and was meant to centralize refugee resettlement programs and channel refugees to needed social services (Kerwin, 2015). A refugee is a person who is outside his or her country and unable to return for fear of persecution because of race, religion, nationality, or membership in a particular social or political group (Bruno, 2015). While the federal government determines refugee policies and procedures, the burden of addressing the unique needs of refugees is passed on to local communities, often without coordination or consent (Committee on Foreign Relations, 2010). A central objective of the refugee resettlement system is to help refugees achieve “self-sufficiency”; however, this term is not well defined within the act. Refugees are expected to work within three to eight months of arriving in the United States. Before the eight months, some refugees are eligible for public assistance programs like Refugee Cash Assistance (RCA) and Refugee Medical Assistance (RMA), which are determined by the state’s Medicaid and Temporary Assistance for Needy Families (TANF) eligibility criteria (Post

Arrival Assistance and Benefits, 2016). There are nearly 350 private resettlement agencies designed to assist refugees in establishing homes in the United States. Private resettlement agencies sign Cooperative Agreements with the State Department to provide food, housing, clothing, employment services, follow-up medical care, and other necessary services for refugees. However, state aid is not enough for the cultural, physical, and mental health challenges refugees face (Post Arrival Assistance and Benefits, 2016).

The resettlement policies enacted in the Refugee Act of 1980 fail to address the diverse needs of admitted refugees to the United States (Committee on Foreign Relations, 2010). Successful refugee integration in U.S. cities requires an extension of support services and evaluation metrics in local communities (Coughlan et al., 2016). However, the gradual defunding of the Refugee Act of 1980 has negatively influenced the private resettlement agencies’ ability to prepare refugees for life in the United States. Also, by placing a large emphasis on refugee self-sufficiency, the act undermines the importance of physical and mental health services when responding to a humanitarian crisis.

REFUGEE ACT OF 1980 AND ITS USE OF "SELF SUFFICIENCY"

Refugees' ability to reestablish a sense of normalcy in the U.S. depends on when they arrive, their age, gender, education, language skills, and social capital (Coughlan et al., 2016). Self-sufficiency is defined as earning an income that allows a person to support himself and his family without government assistance (Brown and Scribner, 2014). The act stipulates that refugees are exempt from work registration requirements for their first 60 days in the U.S., but in 1982, Congress eliminated the exemption, shortening the gap between refugees' arrival and expected employment start dates (Brown and Scribner, 2014). The employment requirement in U.S. refugee policy does not consider the language skills and guidance needed for refugees to secure well-paying jobs, nor does it consider the grief and trauma that stems from moving to a new country (Keles, 2008). Physical and mental health are challenges that can inhibit a refugee from earning an income that meets economic "self-sufficiency." Therefore, without adequate medical services, refugees often find themselves in a cycle of poverty (Coughlan et al., 2016).

Refugees have struggled with finding and keeping jobs, especially without cross-cultural training that includes lessons on writing a resume, filling out application forms, and adhering to an American work schedule. In many cases, refugee children with better English skills than their parents, are charged with translating employment and legal documents. This

limits their time spent on schoolwork, and increases refugee children's likelihood of falling into the cycle of poverty (Coughlan et al., 2016).

REFUGEE CASH AND MEDICAL PUBLIC ASSISTANCE

Refugees are eligible for federally funded transitional assistance under the Refugee Act of 1980 with two primary streams of funding for resettlement. The first is the State Department funded Reception and Placement Program (R&P) that provides initial support for the immediate needs of refugees for the first 90 days after their arrival and offsets the cost of sponsor resettlement agencies like the United Nations High Commissioner for Refugees (UNHCR). In 2010, the State Department doubled the R&P grant from \$900 to \$1,800 per refugee. The second source of funding comes from the Office of Refugee Resettlement: Refugee Cash Assistance (RCA) and Refugee Medical Assistance (RMA). In addition to RCA and RMA, refugees receive aid if they qualify for Supplemental Security Income (SSI), Aid to Families with Dependent Children (AFDC), or Medicaid for 36 months. However, Congress quickly cut RCA and RMA support to 18 months in 1982 and further reduced support to eight months in 1991, where it remains today. The public narrative regarding decreased funding stemmed from the perception that refugees became over-dependent on financial and medical support. Furthermore, the political climate in the 1980's shifted to fiscal conservatism, leading to a reduction or elimination of

social programs like job training and education initiatives (Brown and Scribner, 2014).

ROLE OF PRIVATE RESETTLEMENT AGENCIES

Refugees undergo an arduous process for acceptance into the U.S. that begins with the UNHCR application, which is then referred to the Department of State and the Department of Homeland Security. Refugees are then sent to one of 350 private resettlement agencies. Many of these agencies are faith-based and work with limited budgets and thus are under-staffed (Post Arrival Assistance and Benefits, 2016). Additionally, the number of refugees that they receive is unpredictable as they are based on UNHCR referrals and federal government policy on refugee admissions. The Foreign Relations Committee found that resettlement efforts in U.S. cities are underfunded, overstretched, and fail to meet the basic needs of the refugees that they are asked to assist (Committee on Foreign Relations, 2010). Additionally, the federal government offers limited funding to private resettlement agencies when the initial resettlement assistance to refugees expires (Committee on Foreign Relations, 2010).

HIGH-SKILLED AND LOW-SKILLED REFUGEES

Using the word “self-sufficiency” in public policy is code for rapid employment for refugees. Refugees may have been professionals in their home countries

(Keles, 2008) but because the educational reaccreditation requirements for professional degrees can take years, there is a skills mismatch. Instead of focusing on rapid employment, high-skilled refugees should be encouraged to reaccredit their professional degrees in the U.S. to improve their integration (Keles, 2008). Congress's elimination of the work exemption and rapid employment leads to less emphasis on English language and job training programs to help refugees become “self-sufficient,” and promotes the view of refugees as low-skilled economic driving agents (Keles, 2008). In addition, workforce training programs for refugees are not consistent across U.S. cities. Geographic area, industry, and in-demand jobs all have an impact on job training and preparedness, but there are no qualitative or quantitative matrixes for evaluating refugee job training. Some agencies have more resources or staffing capacity to meet refugee needs based on their ability to win grants or their fundraising efforts (Committee on Foreign Relations, 2010). Since refugee policy is decided at the federal level, the federal government should implement evaluation standards for local municipalities to assess funding needs and appropriate resources for refugee agencies. Developing matrixes can redefine “self-sufficiency” on fairer terms for refugee families and identify which agencies lack adequate funding.

CONCLUSION

The Refugee Act of 1980 fails to offer comprehensive services for refugees

fleeing torture and persecution in their home countries and instead emphasizes “self-sufficiency” or rapid employment. Because private resettlement agencies are working under inadequate conditions to meet the basic needs of refugee communities, the federal government should develop evaluations to gauge which municipalities need more

resources. Job training programs for refugees at different skill levels should be designed to better assist with their integration into American culture. With the coordination of federal, state, and local policies, the United States can help refugees find a better place to call home. ■

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REFUGEE CAMP ANALYSIS, EUROPE 2015

JENNIFER BOHL

Master of Urban Planning + Master of Public Policy, 2016

STEPHANIE GERRETSEN

Master of Urban Planning + Master of Sports Management, 2016

After almost five years of violence between President Bashar al-Assad's regime, rebel groups, and the Islamic State of Iraq and Syria (ISIS), 250,000 Syrians have lost their lives, 7.6 million are internally displaced, and four million have fled to neighboring countries as of October 2015 (BBC, 2015b). Due to the unstable political climate in the Middle East, Syrian refugees are fleeing to Turkey and continuing across the Mediterranean Sea to Greece, hoping to find safety in Europe.

In 2015, the European Union (EU) faced challenges processing asylum seekers as they entered the EU, containing them until asylum status was granted, and resettling them in final destination countries (BBC, 2015a; Nordland, 2015). The asylum process generally does not take longer than six months (European Commission, 2016). This large influx of refugees has increased foreign policy uncertainty and tensions between civilians. Since the United Nations High Commissioner for Refugees (UNHCR) is not facilitating the refugee process in Europe, refugees are creating makeshift temporary camps along their journeys. Understanding refugee camps' proximity

to basic services is crucial for obtaining temporary financing and improving municipal planning for refugees.

METHODOLOGY

The purpose of this study is to analyze the areas where refugees are finding temporary shelter. We analyzed migration paths from Syria to Europe and the physical environment of refugee camp locations, such as access to medical treatment and potable drinking water, to determine additional risks that this vulnerable population may face. Based on spatial analysis and a vulnerability index, we found that refugee camps have clustered within the Balkan states, and that urban refugee camps are located in high-vulnerability areas. We define high-vulnerability areas as two or more kilometers from basic services. As temporary sites, these refugee camps lack adequate resources to support refugees. As the crisis continues we recommend that municipalities, nonprofit organizations, and volunteer groups formally designate refugee camps closer to healthcare services, based on UNHCR's common vulnerability criteria of proximity to basic services (UNHCR,

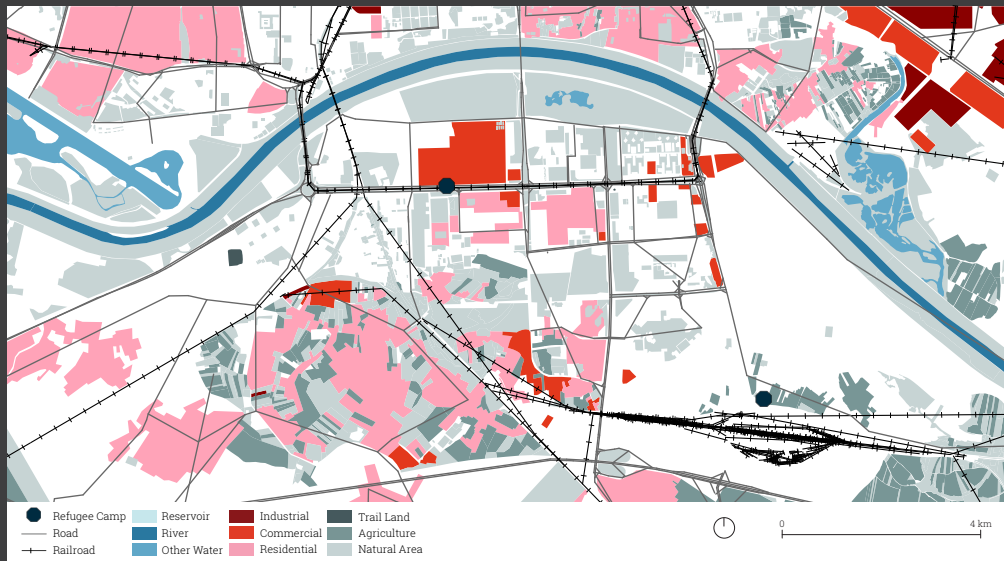


FIGURE 1
JENNIFER BOHL AND STEPHANIE GERRETSEN | ZAGREB LAND USE
DATA SOURCES: RED CROSS GIS CAPACITY, OPENSTREETMAP, MAPZEN, GOOGLEMAPS, CARTO DB.

2015a). With limited resources available, it is vital that designated refugee areas prioritize accessibility to healthcare due to the inadequate services found in the refugees' home countries, the health deterioration that naturally occurs due to their precarious travels, and nutritional concerns for mothers with small children.

REFUGEE CAMP LOCATIONS

To determine if refugee camps are located in urban or rural areas we created a five-kilometer buffer around the camps as an indicator of walkability to urban amenities. Twenty of the 98 current refugee camps are located in or near urban areas. As of October 2015, refugee camps were located in Greece, Macedonia, Serbia, Croatia, Slovenia, Hungary,

Austria, Italy, and France. Due to the large concentration of temporary refugee camps emerging in the Balkan states, we selected Zagreb and Budapest as similarly sized cities, in terms of geographic size, as case studies to analyze the physical environment around the camps.

As of October, there are two refugee camps in Zagreb. One camp is located in a meadow adjacent to the city's main rail station and uses the Porin Hotel for temporary accommodation, while the other is located in a commercial area used for the annual Zagreb Fair (Figure 1). Since September 21, 2015, it has been used as a temporary accommodation site. One advantage to locating temporary refugee sites near transit stops is that they become more accessible to nonprofit

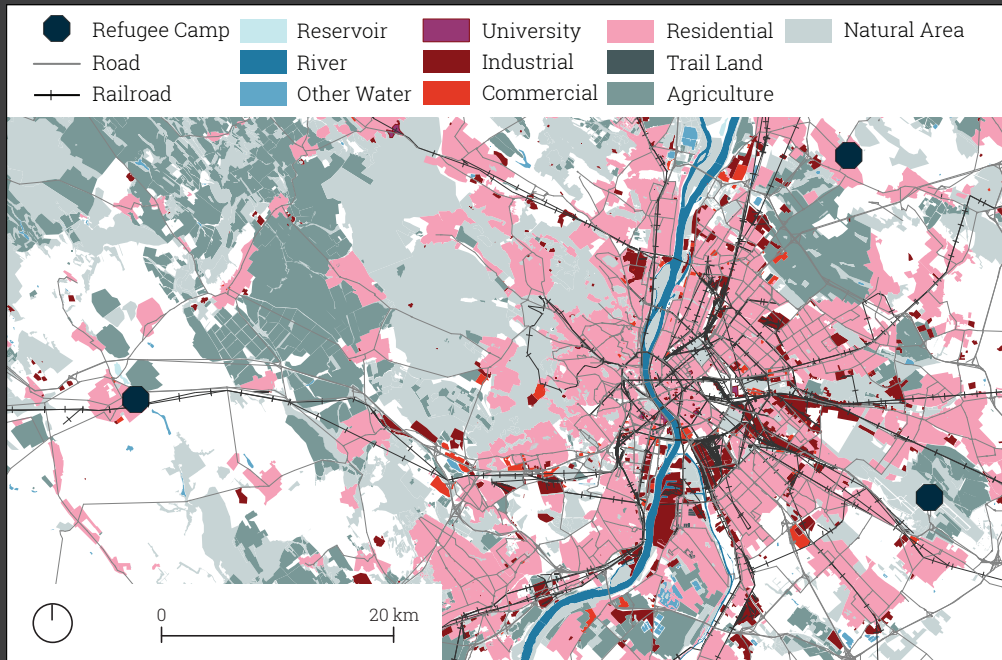


FIGURE 2
 JENNIFER BOHL AND STEPHANIE GERRETSEN | BUDAPEST LAND USE
 DATA SOURCES: RED CROSS GIS CAPACITY, OPENSTREETMAP, MAPZEN, GOOGLEMAPS, CARTO DB.

organizations and makeshift clinics that provide refugees with legal and transport information, as well as pharmaceuticals. However, the development of other temporary camps on vacant land near transportation and processing locations may also be a result of train stoppages and border closures.

In Budapest the three refugee camps are not in close proximity to one another, and they are located along the periphery of the city. Two of the camps are located in residential areas, one camp is located in a grass field, and all are located near public transit (Figure 2). Both residential sites are located near a major rail line; the former is an asylum facility for

unaccompanied minors, and the latter is a reception center for persons awaiting asylum. The grass site is positioned on an open field near the tarmac of the Budapest Airport. This site has been designated as a temporary reception center in the event that the refugees are deported back to their entry point location. In both Zagreb and Budapest, refugee camps likely develop near transit sites due to refugees continually entering and exiting the country.

VULNERABILITY INDEX

Measuring the level of vulnerability for transient populations in temporary transit camps is a complex and challenging



FIGURE 3
JENNIFER BOHL AND STEPHANIE GERRETSEN | ZAGREB VULNERABILITY
DATA SOURCES: RED CROSS GIS CAPACITY, OPENSTREETMAP, MAPZEN, GOOGLEMAPS, CARTO DB.

process. UNHCR proposes three aspects to consider when constructing a comprehensive vulnerability conceptual framework: geographical location and proximity to services; community and household level factors such as access to services, community cohesion, safety, and security; and individual and household vulnerability based on UNHCR Specific Needs Codes and resiliency factors (UNHCR, 2015b). To create our vulnerability index we modified the UNHCR criteria and used the International Rescue Committee's (IRC) informational portal to inform our vulnerability indicators.

Adapted from the Assessment Capacities Project (ACAPS) and informed by refugees' needs and most-requested information, our vulnerability index is a five-point scale (1: low vulnerability to 5: high vulnerability) based on distance in kilometers to potable drinking water

sources, hospitals, and pharmacies. We did not discriminate between dispensing and non-dispensing pharmacies because both provide clinical services and over-the-counter medications (Rafique, 2015). Since these are temporary camps we did not consider long-term indicators for community and household vulnerability. For each of the services identified, we measured the distance from the refugee camps to services using five distance categories: 0.00-0.49 km, 0.50-0.99 km, 1.00-1.49 km, 1.50-1.99 km, and greater than 2.00 km. The hospital, pharmacy, and water source distances were combined in an equally weighed raster to create the vulnerability index (Figures 3 and 4).

Refugee camps in Zagreb and Budapest emerged in vulnerable areas located more than 1.5 kilometers away from potable water and healthcare sources, suggesting that refugee camps lack adequate access to needed services, which is likely due

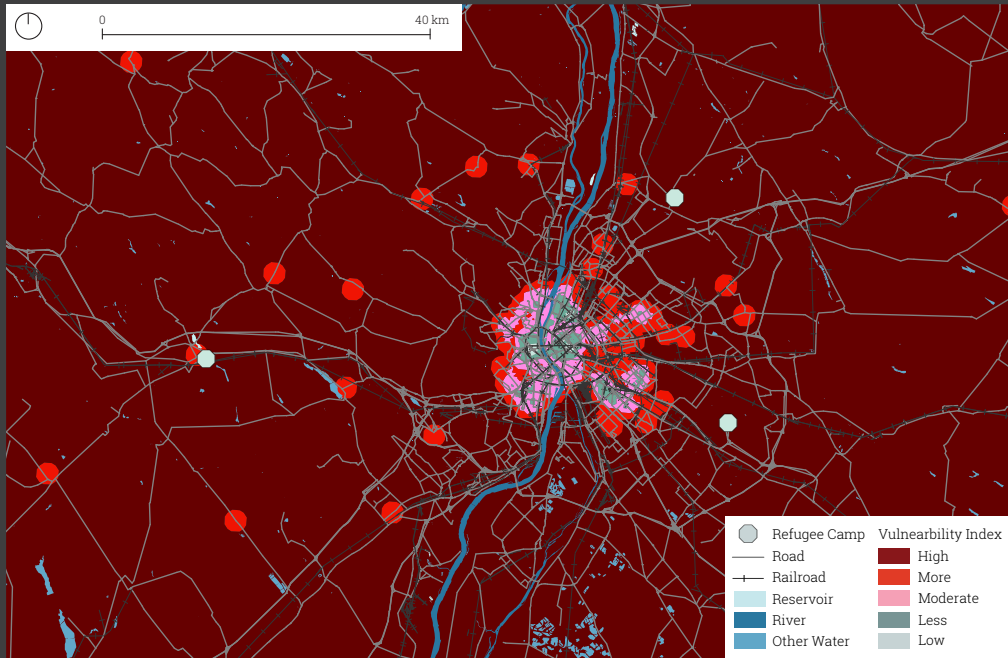


FIGURE 4
 JENNIFER BOHL AND STEPHANIE GERRETSEN | BUDAPEST VULNERABILITY
 DATA SOURCES: OPENSTREETMAP, RED CROSS GIS CAPACITY, MAPZEN, GOOGLEMAPS, CARTO DB.

to their temporary nature. Furthermore, the emergence of camps near rail lines and an airport far from the city center implies that refugees prioritize access to transportation, in order to leave the intermediate country, over proximity to health services and drinking water. It is important for governments and agencies responding to the refugee crisis to consider the needs of refugees and provide access to water sources and medical care in or near the refugee camps. Because the temporary nature of these camps precludes the development of formal infrastructure, basic services must be accessible by proximity, or institutions must directly provide resources to the asylum-seeking population.

CONCLUSION

Based on the case study analysis, we found that refugee camps are located near residential areas and in open fields near transportation access points. These camps are located in vulnerable areas based on their distance to hospitals, pharmacies, and potable drinking water. The intensity of the European refugee crisis illustrates that state and local governments were unprepared for the large influx of refugees. Municipalities throughout southern and eastern Europe failed to create contingency plans to handle the large concentration of refugees traveling by foot, bus, and train. Due to the failure to provide adequate housing

options and medical services, refugees built makeshift shelters in train stations, or by collecting debris in open fields near transport areas where many were held due to border closures. Despite medical and legal services provided by groups like the Red Cross and the International Rescue Committee, municipalities in the Balkans did not secure official space as temporary shelter for refugees. A place

can be considered refugee-ready when the local government formally designates spaces for shelter and is capable of working in conjunction with nonprofit organizations to provide basic services such as medical care, access to potable water, and appropriate shelter. Based on our analysis, Zagreb and Budapest are not refugee ready. ▀

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CONNECTING REFUGEES WITH THE RUST BELT

SCOTT FOX

Master of Urban Planning, 2016

Could Detroit, Michigan have successfully settled 50,000 Syrian refugees as Governor Rick Snyder suggested in 2014?

Ignoring the current American political climate's overwrought concerns about security, making Rust Belt cities like Detroit refugee-ready largely requires creating connections between refugees and their new communities. The Rust Belt is a region in the Midwestern U.S. and southern Canada that has lost most of its industrial employment over the last 40 years. Refugees often arrive in a new country with limited social and physical mobility. They arrive carless and often do not know anyone besides their sponsors. Refugees will have an easier transition to their new cities when they can connect to jobs and needed services. However, many North American cities, especially Detroit, suffer from a spatial mismatch between job centers and inner-city residents. Detroit is the largest metro area in the U.S. with the highest percentage of its jobs located ten miles or more away from the Central Business District (Brookings, 2013). U.S. Rust Belt cities need to consider refugees' needs for transportation, an often neglected topic, to connect them to jobs and services.

Hamilton, Ontario is an example of a refugee-ready city that is similarly

situated to Detroit, both physically and economically. Hamilton, a city of around 520,000 residents that is just 45 miles from the U.S. border, is sometimes considered part of the booming Toronto metro area. However, Hamilton is also part of the Rust Belt. No Canadian city suffered the effects of deindustrialization more than Hamilton, Canada's "Steel City" (Harris, 2015).

Like many Rust Belt cities, Hamilton's population has mostly stagnated since the 1970s. However, over the last decade Hamilton has seen modest population growth. Two-thirds of the Hamilton Census Metropolitan Area's growth between 2006 and 2011 came from new immigrants (Hamilton Spectator, 2012). Refugees made up 2.7 percent of Hamilton's population in 2011, a greater percentage than most of Canada's cities (Harris, 2015). One-third of all foreign-born Hamilton residents are refugees, and about 1,440 government-assisted refugees arrived in Hamilton annually prior to Canada's recent push to settle 25,000 new Syrian refugees (Chung, 2013). Refugees arrive in Canada either through the Canadian government's sponsorship, private sponsorship, or a partnership between the government, private agencies, and the United Nations Refugee Agency. The vast majority of refugees

coming to Hamilton are government-assisted (Government of Canada).

The Hamilton Immigration Partnership Council's (HIPC) Immigration Strategy and Action Plan explains the need to bring refugees to Rust Belt cities:

"...our population is not growing, our labour force is aging, newcomers are facing unnecessary barriers in accessing the labour market and too many of them are living in poverty. Yet many immigrants to Hamilton are highly educated with job-specific skills and entrepreneurial talents. These are the very ingredients that are essential for Hamilton to compete and prosper..." (Hamilton Immigration Partnership Council, 2014)

Hamilton welcomed 1,116 Syrian refugees of the 26,176 that arrived in Canada between November 2015 and February 2016. Only three Canadian cities took in more government-assisted Syrian refugees (Government of Canada, 2016).

Hamilton's government assists refugees in several ways. The HIPC partners with 85 community groups to provide services for refugees such as housing assistance and fee reductions for English-as-a-second-language students. The City also put together a newcomer's guide for housing printed in 14 languages (Saunders, 2015). Hamilton became a "sanctuary city" in 2014 and the city government created a special Refugee Committee to focus specifically on welcoming Syrian refugees to the community.

Hamilton government agencies also strive to include refugee communities in their planning process. The city's community visioning program, Our Future Hamilton, plans for the next 25 years, and actively includes refugees through a bus tour specifically designated for newcomers. John Ariyo, Manager of Community Initiatives at the City of Hamilton, stated that "to date, we've engaged with 40,000 residents, with the immigrant population representing a sizable (portion of that number)." (J. Ariyo, personal communication, January 7, 2016)

The difference between U.S. Rust Belt cities like Detroit and Canadian Rust Belt cities like Hamilton lies in the nature of state support. The province of Ontario established the Local Immigration Partnership (LIP) that encourages municipalities to collaborate to provide refugee services (McGrath, 2013). The LIP program's success has led to an expansion of LIP agencies across Canada. Recently, Michigan began taking similar actions to encourage refugees to move to the state (McGraw, 2015). However, Governor Snyder suspended efforts to settle Syrian refugees after the November 2015 terrorist attacks. In recent years, newly settled refugees have composed a much greater percentage of Canada's population than that of the U.S.'s population due to the U.S.'s more restrictive review process (UNHCR, 2015; Hamlin, 2012).

According to Andrea Buttars, Manager of Resource Development at Wesley Urban Ministries (Hamilton's designated organization for supporting government-

assisted Syrian refugees), refugees need a place to live that provides affordable housing, health care, education, and language support. Buttars states that Hamilton neighborhoods like Beasley and Riverdale have a high population of refugees due to their affordable housing and range of community-organized services, such as childcare (A. Buttars, personal communication, December 18, 2015). A close network of key services helps to make the transition to a new country as painless as possible. However, service providers have not focused enough on an important refugee need in urban spaces: transportation.

Access to services is imperative for refugees because they often arrive from countries where private automobile travel is less common. According to the 2009 U.S. National Household Travel Survey, foreign-born individuals are more than twice as likely to use public transit to commute and are about twice as likely to carpool (McKenzie, 2011; Blumenberg, 2014). Many refugees also rely on a network of friends and family more than the current population for transportation needs.

Hamilton has taken some steps to assist refugees who cannot afford automobiles. The Hamilton City Council recently proposed a bill to give one year of free transit passes to newly arrived Syrian refugees, and the city already provides half-priced transit service for low-income workers. Hamilton also created a bike map with information on bike lanes and road conditions for every city street. The

bike map is a critical service for refugees who can more easily afford a bike than an automobile for personal transportation. Additionally, in 2014 the city implemented a bike share program with 100 stations throughout Hamilton. Yet another improvement is West Harbour, a new rail station near the refugee community in Beasley with rail service to Toronto.

While Detroit has a great deal of work to do to improve its basic public services, it has affordable housing and language diversity. However, to become more refugee-ready, Rust Belt cities like Detroit should improve public transit access within neighborhoods with high percentages of foreign-born residents to combat the existing spatial mismatch. Detailed bike maps listing the various levels of service on each city street would demonstrate that refugees and other residents could commute safely without an automobile. Detroit and Rust Belt cities could also establish programs partnering with local nonprofit organizations that provide automobiles for workers carpooling, assist refugees with driver training, and coordinate potential vanpool groups for government-run vanpool services like MichiVan—Michigan's vanpool-to-work program. While adding a new pool of drivers to roads is not environmentally friendly, refugees' ability to access jobs and other services is critically important.

As evidenced, an ideal place for refugees is difficult to achieve. Detroit currently cannot fund the infrastructure improvements needed to have

Hamilton's level of bike and public transit infrastructure without the population increase that refugees would provide. An issue that Hamilton faces is that the new commuter rail station near Beasley has increased housing prices, which will likely price refugees out of the neighborhood (Harris, 2015). Moreover,

there are conflicting opinions on whether the influx of refugees reduces wages for low-income workers. Despite these ongoing issues, improving connections between refugees and jobs will benefit Rust Belt cities, and more importantly offer a home to those desperately in need of a new start. ■

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PUBLIC DOMESTICITY

DIEGO GARCIA BLANCO

BACHELOR OF SCIENCE IN ARCHITECTURE, 2016

When designing domestic architectural constructs that are refugee ready, we must consider culture and identity. Culture and identity are the most valued belongings that refugees bring with them as they transition into their new homes and lives. Historically, these cultural identities have created friction between new residents and locals, leading to a conflict that architecture and residential community design should address and work to ameliorate. This project

addresses the topic of identity and culture by drawing from Chicago, Illinois' Hull House community housing, as well as architectural concepts of private and public space. With this proposed design, refugees can establish a sense of community in a housing complex. It also allows refugees to share their food and cultural customs in market halls that are accessible to both neighborhood residents and visitors.



FIGURE 1
DIEGO GARCIA BLANCO | GROUND FLOOR PLAN

Chicago's Hull House, co-founded in 1889 by Jane Adams and Ellen Gates Star, provided community housing for Eastern European immigrants and refugees escaping from the turmoil of World War II. This innovative residential community promoted an interesting mix between recreational and educational activities that allowed incoming immigrants and refugees to learn about local customs, while simultaneously sharing their culture with those who visited the Hull House. It is therefore crucial to think about ways in which architecture can provide privacy in a community setting for incoming refugees without secluding them from the existing physical and cultural context of their new home. Many contemporary housing projects in the

United States still celebrate the idea of the American Dream - owning a plot of land with a single-family home and a private yard. This attitude towards residential living can be detrimental for refugees, specifically because it alienates them from society and assumes that refugees' dreams are equivalent to American expectations or ideals. This assumption is counter-productive to refugees seeking to transition into their new home.

Inspired by the Hull House's ambitions to mix foreign and local culture through education, food, and housing in a refugee-friendly setting, this project situates itself in the heart of the Ukrainian Village in the West End of Chicago. The Ukrainian



FIGURE 2
DIEGO GARCIA BLANCO | BI LEVEL FLOOR PLAN

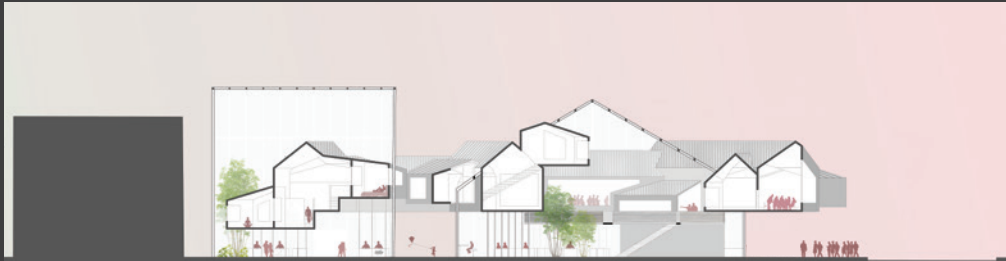


FIGURE 3
DIEGO GARCIA BLANCO | SECTION

Village was predominantly inhabited by European refugees during World War I. The project blends public and private forms of habitation by combining a series of winter gardens and market halls open to the public on the ground level. The market halls also provide access to private residences as well as a semi-public library, with education and gathering spaces above. The ground floor market spaces include food production, consumption, cultivation, and preparation spaces allowing neighbors in the community to taste local as well

as foreign foods that are primarily cultivated on site and sold in the public market space. The idea is that the market halls can catalyze cultural exchange for refugees and locals through conversations and sharing food production and preparation techniques.

The specific project site also marks the transition between residential and commercial zoning in the Ukrainian Village. The residential portion of the village is predominantly composed of pitched roof houses, which contrast



FIGURE 4
DIEGO GARCIA BLANCO | PERSPECTIVE

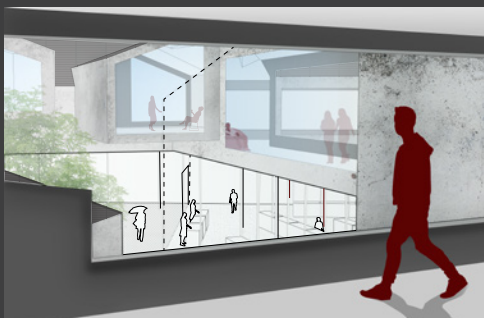


FIGURE 5
DIEGO GARCIA BLANCO | SECTION

with the flat roof house typology in the majority of Chicago's neighborhoods. More significantly, the site marks a change in scale from the domestic suburban home to commercial and corporate multistory buildings. This project responds to its surrounding urban context via the formal expression of the pitched-roof house typology of the residential zone, but at a scale closer to that of the urban and commercial. This typology therefore suggests that private domestic life is possible even in a dense urban city like Chicago, and argues that public forms of living can occur in a domestic and more intimate setting through careful consideration of circulation and organizational strategies

shown in the project. In this case, the organizational strategy promotes a specific form of circulation that concerns filtering from public spaces—market halls accessible to all visitors, to more private spaces—residences accessible only to refugees. This is achieved by carefully designing mixed-use spaces, educational and gathering spaces open to both refugees and locals, which act as transitional thresholds from public to private programs and spaces in the project.

The goal is to expose locals and refugees to their respective cultures through an exchange of food, education, and living while celebrating their different lifestyles.



FIGURES 6 - 7
DIEGO GARCIA BLANCO | PERSPECTIVES



FIGURE 8
DIEGO GARCIA BLANCO | AXONOMETRIC VIEW

By formally rendering these different forms of intimate versus public forms of living, this project relies on physically intersecting different pitched-roof housing units that begin to connect the local and foreign community, linked by the three market halls at the public ground level below. The project is similar to the Hull House programmatically,

but adopts a more complex formal expression that shares the public lifestyles of refugees with those of their neighbors. This is accomplished by proposing a new form of residential living for refugees by creating a community where there is a mix between the local and foreign, the public and private, and the domestic and urban. ■

REFERENCE

Glowacki, P., & Hendry, J. (2004). *Hull-House*. Charleston, SC: Arcadia.