

Senator Ebke and Committee Members,

Thank you for the opportunity to speak in support of LB505.

Many refer to refugees as “immigrants”. Refugees and immigrants are two distinctively different populations. Refugees have the most generous access to welfare programs of any population in the country. Unlike other new legal immigrants, refugees are eligible for all welfare programs upon arrival.

In 2016 fiscal year, Nebraska led the nation in the number of refugees resettled per capita. The national average was 26 per 100,000, but in Nebraska it was 76 per 100,000.

On average, “in their first five years in the United States each refugee from the Middle East costs taxpayers \$64,370—12 times what the UN estimates it costs to care for one refugee in neighboring Middle Eastern countries.”¹ These figures do not include welfare and food stamps, many public school costs, Head Start, Earned Income Tax Credit and more.

“While Middle Eastern refugees in the first five years must pay some taxes to offset a fraction of the costs they create, published data from ORR indicates that more than 90 percent of households have incomes below 130 percent of poverty, which means they will pay virtually no income tax and will make very modest tax contributions of all types.”

In 2014 alone, 82% of the active Tb cases in Nebraska were diagnosed our foreign-born population which only makes up 6% of our total population. In late November 2016, at Benson High where 18.6% of the student body is foreign born, an active Tb case was diagnosed.² After more testing, 7 latent cases of Tb were diagnosed. “Direct costs of treatment average from \$18,000 to treat drug-susceptible TB to \$494,000 to treat the most drug-resistant form of the disease.”³

The VOLAGS (Lutheran Family Services, Catholic Social Services and the Southern Sudan Community Association) and the Feds repeatedly tout impressive percentages of refugees who reach “economic self sufficiency”. Federal regulations define “economic self-sufficiency” as “earning a total family income at a level that enables a family unit to support itself without receipt of a cash assistance grant. (CFR 45 400.2).”⁴ But, they still receive all other tax-payer funded handouts. The new definition of economic self sufficiency paints a false picture to obscure the true economic impact.

Recent media blitzes have reached a fever pitch telling of the crucial, heart-rending needs that exist, however a recent Center for Immigration Studies report reveals it is not necessarily the most vulnerable and urgent cases that are submitted for resettlement. In fact, UNHCR itself (the United Nation Refugee Agency) acknowledges that almost all refugees submitted for resettlement are in circumstances “where there are no immediate medical, social, or security concerns which would merit expedited processing.”⁵

¹ “The High Cost of Resettling Middle Eastern Refugees”, Karen Zeigler, Steven A. Camarota, Center for Immigration Studies, November, 2015

² Personal interview with student who reported the student with active TB was foreign born.

³ <https://www.cdc.gov/tb/topic/drtb>, Centers for Disease Control and Prevention, 1/17/2017, “Tuberculosis”.

⁴ “Refugee Economic Self-Sufficiency: An Exploratory Study Of Approaches Used In Office Of Refugee Resettlement Programs”, <https://aspe.hhs.gov/system/files/pdf/75561/report.pdf>, pg. 12 Note: Cost in 2015 U.S. dollars

⁵ “UN Report Shows Refugee System Needs Changes”, Center for Immigration Studies, Nayla Rush, January 2017

No matter which department you ask, you cannot get an answer as to how much is expended in SNAP, TANF, subsidized housing, Medicaid, counseling, interpreters for schools and law enforcement, etc.

To facilitate responsible spending of our resources and fiscal accountability, I ask that you advance LB505 to the full Legislature.

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