



The Need for a Sustainable Funding and Programming for Unaccompanied Alien Children

As of July 7, 2012, in fiscal year 2012, roughly 10,000 unaccompanied alien children (UACs) have entered into the United States and taken into the Office of Refugee Resettlement's (ORR) custody. This compares to 7,120 served in all of fiscal year 2011.

For FY 2012, \$168.68 million was allocated to ORR for services to unaccompanied minors. However, in order to respond to the influx of arrivals, the Department of Health and Human Services (HHS) reprogrammed roughly \$115.6 million from other ORR accounts¹ to fund services for unaccompanied alien children. This was done under the assumption that ORR would not reach the FY 2012 threshold for refugee admissions program arrivals. While this may be the case, it is largely due to newly implemented security checks that have created a refugee admissions backlog. USCCB anticipates that for future fiscal years, arrivals will reach the level designated by the Presidential Determination.

While the urgent need to provide the recent influx of unaccompanied alien children with care was unforeseen, it highlights the importance of sufficient funding to critical ORR programs and the establishment of a long term response plan in order to mitigate potential emergencies and avoid undue negative consequences on other populations that ORR serves.

Root Causes for Migration²

Reasons for children fleeing their home countries include rampant gang violence, sexual and gender based violence, and fear for their lives after witnessing murders committed by gang members and/or refusing to join local gangs. Similarly, some children have been orphaned due to their parents' murders and/or abandoned by family members after losing a parent. These are indications that until the security situation changes in their home countries, the current influx of UACs into the United States will not be a temporary situation. Children will continue to flee in seek of protection.

Due to poverty and the exploitation of vulnerable minors, some UACs have fled their home countries to escape forced labor and trafficking- often times by family members. For this reason it is important that thorough screenings be conducted upon the initial encounter of unaccompanied alien children and NGOs be utilized for such screenings, when deemed necessary, in order to identify those in need of protection.

¹ This amount includes \$49.1 million from Transitional and Medical Services, \$38.3 from Refugee Social Services, \$28.2 from Targeted Assistance.

² USCCB has identified reoccurring trends and root causes for the migration of unaccompanied children through an analysis of the cases that we serve. Case vignettes highlighting these reports have been included.

Recommendations

USCCB believes that sufficient funding³ is critical to respond to the apparent needs of incoming UACs. Additionally, any programmatic response should be child-centered and ensure access to social services, legal representation, and post-release services, particularly home studies, once minors are released from ORR custody.

1. A long term response plan should be developed that provides federal guidelines for facilities with the capacity to respond to the influx of unaccompanied alien children.

Thus far to respond to the influx of UACs, federal officials have set up temporary shelters for children because the established network of providers are over capacity. USCCB is concerned that hasty attempts to establish congregate care will become a permanent solution to respond to the influx of UACs and alternative responses that adhere to best practices are not being considered. Despite the fact that this is not the first influx of UACs that the United States has experienced⁴, a long term response plan and guidelines for facilities that have the capacity to respond still does not exist. Small, community-based residential care, such as short-term family and group foster home care is the preferred model, and can include basic to therapeutic programming. Expansion of the UAC system of care and custody should follow this already established standard and practice.

2. Children's medical and psychosocial needs should be assessed before their placements and ORR should ensure that facilities have the capacity to respond to those needs.

This population has been subject to extreme levels of abuse and trauma in their home countries and while en route. Many of the children in ORR's custody require specialized services while in shelters and specialized placement plans so that they are able to access services upon their release. It has not been uncommon for children to exhibit signs of sexual or physical abuse on themselves or those around them. For this reason, it is critical that they are placed in facilities that can respond to their specialized needs and that there be a continuum of services available to them throughout their custody and subsequent release.

3. Home studies should be conducted for children identified for post-release services prior to their release from custody.

Home studies are a necessary protection measure in particular, for vulnerable populations mandated by the TVPRA 2008. Home studies both allow an assessment of the suitability, appropriateness and safety of a sponsor and home as well as involve the care taker in safety and service planning for the child. This includes biological parents, wherein reunification practice should be rooted in a determination of what is in the "best interest of the child" and whether the biological family is able to engage in planning for the child in order to meet his/her safety, permanency, and well-being needs through a durable solution of reunification. USCCB has encountered cases where inappropriate or harmful situations existed within the home or neighborhood of a child's care taker, but were identified after the child's release into their sponsor's custody. A home study would have assessed the ability of the sponsor and the home environment to provide a suitable and protected environment for the child before any harm was done.

³ In FY 2011 and 2012 USCCB requested \$235m and \$207m, respectively for the Unaccompanied Alien Children line item. In FY 2011 and 2012 \$149m and \$168.7m were appropriated, respectively. For FY 2012 HHS has reprogrammed funds from other line items to make up the shortfall.

⁴ Between FY 2003 and FY 2005, the number of UACs in ORR custody increased from roughly 4,700 to 8,100, respectively.

Case Vignettes Highlighting Causes for Migration and Children's Needs⁵

1. George reported physical abuse from his mother and father. He decided to live on streets due to this abuse. George was also involved in a gang and when he decided to leave the gang, he was kidnapped, but managed to escape. He had friends who were killed by gang members. The gang members, subsequently shot other minors' home in George's home country because they were looking for him. Police moved him to another community for protection before he eventually fled.
2. Jessica's uncle sexually assaulted her and forced her to do agricultural work and prostitute. She was also forced into the production of pornography before she was able to flee.
3. Maria and her child were trafficked by her mother to the United States and she lived in sexual servitude to mother's boyfriend who was the trafficker. Her mother offered to sell her for sex to pay off loans.
4. Theresa was sexually abused at the ages of four and five by two different men in her community. Both were turned over to the police, but only one was jailed. Theresa reports that two additional incidents of trauma in home country led to her eventual migration to the United States. She was kidnapped and sexually assaulted for three days by a boyfriend and raped while intoxicated by her cousin. She also witnessed her cousin killed by his brother.
5. Sarah was abused by her parents and was not allowed to attend school. She was forced to work since she was 11 years old. She was also abused by boyfriends in her home country. Her brother in law also attempted to sexually abuse her and she was threatened to have a sexual relationship with a 38 year old man. During Sarah's second pregnancy, her boyfriend forced her to have an abortion.
6. Emmanuel and his parents lived in the home of his mother's employer. His family suffered years of abuse by the employer, including beatings and the withholding of food. Emmanuel was also assaulted by gang members and received a broken rib.
7. Lydia's mother was killed during the war in El Salvador 4 years ago. Her father became a paraplegic after an accident caused from intoxication. She had negative relationships with her aunts in El Salvador and would often leave home to avoid escalating abuse from her relatives.
8. Erica's stepfather sexually abused her from age 5-11. She lived with older brother in her home country after she returned from her first migration to the US. Her older brother was physically abusive and prostituted her to his friends.
9. Joseph's father left him when he was one and he doesn't have any current contact with him. He witnessed crime, death, and robbery in his home country. He also lost many friends to death and violence. Joseph was forced to join a gang. He was beaten many times because he did not want to join. When he finally joined, gang members expected him to kill someone from rival gang, so he was forced to flee his home country.

⁵ Names have been changed for confidentiality.