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*Unaccompanied Children and the US Immigration System: Learning to Compensate*

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The summer of 2014 saw a record arrival of 51,705 [unaccompanied children \(UAC\) from Central America](#) attempting to enter the U.S. By comparison, 10,146 and 20,805 children attempted to cross the border in 2012 and 2013, respectively. Media coverage of the surge in UAC portrayed the children's entry as a border security failure - it was not. In fact, the vast majority of the children did not try to avoid U.S. border enforcement, but rather turned themselves over willingly to Border Patrol agents under the false pretense promoted by human smugglers that children are allowed to stay in the U.S. Rather than a failure in border security, "the actual policy failures were in processing and adjudication of claims for relief from migrants presenting in a mixed migration flow of humanitarian and irregular migrants," according to a [report by the Migration Policy Institute](#). Indeed, the children presented a complex set of challenges to a system overwhelmed by their numbers and unprepared to manage their care. There was undoubtedly a crisis at the border — but not the one reported in the news.

Since then, the U.S. has learned several key lessons. Border protection agencies, the Department of Health and Human Services' Office of Refugee Resettlement (ORR), and nonprofit organizations have all become more efficient in screening, housing, and processing the children. Additionally, the Obama administration took a number of steps aimed at stemming the UAC flow from Central America, including [in-country refugee/parole processing](#) for minors. These efforts seem to have improved the ability of U.S. agencies to handle large waves of unaccompanied children. It also helps that the numbers have decreased in 2015. But what are those lessons learned?

The 2014 influx undoubtedly stressed border protection agencies' capacity to perform initial processing. At DHS' Customs and Border Patrol (CBP) facilities, children [receive an initial screening](#) for obvious health issues including lice, coughing, diarrhea, or broken bones. CBP workers were simply unprepared for the number of children that came through their doors that needed to be screened and transferred to ORR (which is then responsible for immunizations, medical checks, and shelter assignment) within the 72-hour requirement.

Given the steep numbers, ORR resorted to housing the children in refugee centers, summer camps, and even military bases while workers searched for relatives or sponsors to care for the children pending the outcome of their immigration process. In order to comply with U.S. laws mandating that the children [be cared for and promptly placed in the least restrictive environment possible](#), ORR funds "a network of state-licensed care providers" to expedite placement and provide services that include mental and physical health care, and education, socialization, and recreation programs.

Initially, ORR, like CBP, was caught unprepared for the number of UAC arrivals last summer, and the number of beds available throughout its network of shelters largely fell short of demand. Since the summer of 2014, about [85% of Central American UAC have been reunified with family](#) in the U.S. while their cases wind through the court system. However, as the children were moved from ORR-approved shelters to relatives' homes, some have and may fail to comply with Notices to Appear from the courts since the system does not update their addresses. Even so, Catholic Charities, a non-profit organization that has a shelter and a legal assistance program, estimates that only around 25 to 30% of those who were able to appear in court received legal relief and remain in the United States—in other words, most will eventually be returned to their home country.

Despite the challenges they faced, ORR-funded care providers adjusted quickly to last summer's influx and have expedited the process. Houston, Texas, for example, houses eight ORR-funded care providers, including Catholic Charities, which must comply with ORR federal care standards *and* state and city regulations. Catholic Charities normally keeps children between 45 and 60 days before placing them with a relative or foster family, but since last year's surge, ORR instructed them to reunify the children within two weeks. Under Catholic Charities' care, the children receive educational, psychological, and physical health assessments. Once released to the care of their sponsors, other nonprofit organizations also step in to manage the children's cases, including monitoring the family, finding schools, as well as procuring mental health care and pro bono immigration representation. Despite the fact that need always exceeds supply, most organizations do surprisingly well in helping the children and their new families adapt to new conditions. A key remaining challenge, however, is that receiving families rarely possess the financial support needed to address the emotional and physical needs of the child.

As of FY 2015, the problem of the influx of unaccompanied minors has eased. Between [October 1, 2014 and June 1, 2015, only 15,039](#) UAC from Central America were detained. However, this does not necessarily mean that the conditions the children flee from have been alleviated. Analyses suggest that this drop in the numbers was partly due to political pressure from the U.S. on Guatemala, Honduras, and El Salvador to prevent children from leaving. In addition, Mexico has received enormous pressure from the U.S. to intercept and process an unprecedented number of Central American children. The number of UAC in Mexico, for example, rose from a few hundred in 2012 to nearly [4,000 in 2015, as of April 28](#) alone. Unfortunately for the children, Mexico's record on immigration is abysmal. Mexico is unlikely to offer the humanitarian protections mandated under international law, and [arbitrary detentions and inadequate screening prevent many of the children from receiving adequate relief from removal](#). In pressuring Central American governments to intercept the children, the U.S. may simply have contributed to their victimization, even as it depressurized the American immigration system by successfully reducing the flow of UAC into the United States at the point of origin.