

Case Management for Unaccompanied Children

John Dorrett

The U.S. Committee for Refugees and Immigrants (USCRI) presents the following backgrounder on case management for unaccompanied children (UCs).

Summary

This USCRI Backgrounder outlines the roles, responsibilities, and challenges of case management within the shelter network for unaccompanied children (UCs) coordinated by the federal Office of Refugee Resettlement (ORR). Reunification with a family is the primary goal. The primary tasks of case managers are (1) to establish contact with the child's parent(s) and to identify a potential sponsor; (2) to confirm that the potential sponsor offers a safe and stable home for the child, and that the home will remain safe and stable; and (3) to submit documentation, primarily the Family Reunification Packet, that corroborates that the placement is suitable, and is used by ORR to evaluate and approve the placement.

What is the Unaccompanied Children's Program?

The Office of Refugee Resettlement (ORR) operates the Unaccompanied Alien Children's Program to serve children from non-contiguous countries who arrive without a parent and do not have legal immigration status. Upon referral to ORR, arriving UCs are placed into a network of shelters that offer temporary homes and services, including educational, medical, and mental health services. Since 2002, the UC Program has served more than 550,000 children.¹ The care and legal custody for unaccompanied children is governed by the Trafficking Victims Protection Reauthorization Act (TVPRA) of 2008, the Homeland Security Act of 2002, the Prison Rape Elimination Act (PREA) of 2003, and the *Flores* Settlement Agreement. Nearly all UCs come from El Salvador, Guatemala, and Honduras.

The ORR network comprises around 200 housing facilities in 22 states funded through ORR grants.² These facilities are licensed through state child-welfare regulating bodies and care for children while the child moves through the sponsor reunification process. These facilities range from private non-profits, for-profit groups, and faith-based organizations to care for unaccompanied children. ORR currently has capacity for about 13,500 non-emergency beds in its network. In times of system stress, ORR may expand bed capacity by bringing non-licensed facilities online, including influx facilities and, more recently, Emergency Intake Sites.³

Case Management Overview

ORR-funded shelters provide services to ensure children's needs are met and to reunite children with family members or other sponsors. Around 85% of unaccompanied children have an immediate relative willing to sponsor the child.⁴ Because of this, and unlike case management in most child-welfare settings, ORR care de-emphasizes the long-term goals and individual service plans—while retaining a focus on providing trauma-responsive care in the immediate term—and emphasizes placements in familial homes that are usually new to the child. When providers and advocates refer to “case management” in ORR facilities, they are usually referring to reunification services.

Reunification in ORR case management can be conceptualized as three overlapping phases: identification, verification, and documentation. The identification phase involves communicating with the unaccompanied child, family members in the United States, home-country family members, and the child's home community to identify a suitable sponsor for the child in the United States. In the verification phase, the case manager works to confirm that the child and sponsor have an existing relationship, and works to establish whether the sponsor has a home and family life suitable for the unaccompanied child. Finally, in the documentation phase, the case manager collaborates with the sponsor to assemble documents necessary to placing the child, provides the sponsor with information on caring for the child, and compiles the case file for ORR to determine whether the placement is suitable for the child.

Why are Effective Case Managers Valuable?

Effective case managers in the ORR system have specialized skills that take time to develop and can be difficult to replace. Effective case management requires coordination, collaboration, and communication between the caseworker, child, parent(s), and the potential sponsor. These relationships are at the core of meeting the needs and best interests of UCs and to providing trauma-responsive care for children whose needs require it. While ORR requires that unaccompanied children receive weekly updates on their cases,⁵ case managers and clinical staff generally go beyond this. Frequent collaboration and communication help the child feel like they are actively participating in their care and ultimately aids in their integration into the United States.

As part of case management, case managers will identify the unique experiences and needs of each UC in ORR care. A parent and child reuniting may not have seen each other in many years, and integrating into the new home and community can be stressful. Financial pressures within the home, which for many have been exacerbated by the COVID-19 pandemic; the challenges of adjusting to U.S. schools; and uncertainty around U.S. immigration proceedings can add further stresses. The specific arrangement of case-management tasks varies from facility to facility. For most ORR grantees, a case manager “owns” each case and will provide care for the child in collaboration with clinical staff, who offer clinical and/or counseling services for unaccompanied children and additional support for the unaccompanied child's mental and emotional health.⁶ In other, mostly larger programs, case-management tasks may be divided between multiple employees.

Case Management for Unaccompanied Children: The Process

Intake and Transfer to ORR Custody

The vast majority of unaccompanied children are apprehended at the border by U.S. Border Patrol agents and placed in the legal custody of U.S. Customs and Border Protection (CBP). CBP makes a formal determination that a child is unaccompanied under the TVPRA. The TVPRA mandates that CBP transfer custody of any unaccompanied child to ORR within 72 hours of apprehension.⁷ While in CBP custody, unaccompanied children undergo a human-trafficking screening and a basic health screening.

Identification

In the first 24 hours after an unaccompanied child arrives, a case manager reviews notes that CBP staff leave for ORR (if any) and determines whether the UC was separated from a non-parent caregiver at the time of apprehension. If the child has the phone number or other contact information, the case manager will initiate contact with a potential sponsor. Concurrently, the case manager conducts a series of **interviews** with the unaccompanied child, which include questions about whom s/he expects to live with in the United States, and whether the child knows other adults present in the United States. This information allows the case manager to identify multiple potential sponsors and order them by preference of release.⁸ The vast majority of children have an immediate family member in the United States willing to sponsor them, and children often have a viable sponsor in mind to connect with when they are in the country.

The case manager then **identifies any safety concerns** for the unaccompanied child, largely based on the child's history but also based on individual needs. Contact with the home-country family and potential sponsor is beneficial to the child where possible. Organized crime, violence, gangs, and abuse are all key drivers of migration of adults and children.⁹ These drivers weaken the youth's interpersonal connections and are commonly experienced through forms of trauma. Case management presents opportunities to form strong therapeutic alliances based on trust and stability: A core principle of both trauma-informed care and trauma-responsive care is that youth benefit from positive interactions with adults who they can trust and who show that they care for the child's well-being.¹⁰ Case managers will also identify any special needs the unaccompanied child has, such as a disability or pregnancy, and relay that information to the care provider to ensure that the child receives the best quality of care.

The case manager **contacts the unaccompanied child's parents or legal guardians** to notify them of the unaccompanied child's location and to assure them of their child's safety and care. The case manager advises the parent or legal guardian that ORR may release the UC to a qualified sponsor in the United States. This contact between the case manager and family can assist in identifying additional family members or close friends who reside in the United States who may have been expecting the child. As a first step towards placement, the case manager requests the parent send the UC's birth certificate. Proper documentation and verification of the child's identity allows the case manager to confirm any relationship with the sponsor, as described below, and will later help the child fully integrate into schools, healthcare systems, and their new community. Throughout the reunification process, case managers work with home-country authorities to

identify family members, next of kin, and get consent from the parents (if necessary) before placing the child with a sponsor.

Once a viable sponsor has been identified, the case manager proceeds with sponsor reunification along the legal order of preference for release defined by the following categories:

- Category 1: Parent or legal guardian (including qualifying stepparents)
- Category 2A: An immediate relative (brother, sister, grandparent), or other close relatives (aunt, uncle, first cousin) who previously served as the child's primary caregiver
- Category 2B: An immediate relative who was not previously the child's primary caregiver
- Category 3: Distant relatives and unrelated adult individuals

If the case manager cannot identify a viable sponsor, that child is considered a "Category 4." Such cases occur each year but are infrequent. In the absence of a viable sponsor, the case manager will transfer the child to Transitional Foster Care (TFC) or Long-Term Foster Care (LTFC). The child will stay in foster care until they turn 18 years old, until a suitable and willing sponsor is found, or until a decision has been made on their case and they are forced to return to their home country. Some "Category 4" children are eventually placed with Category 3 sponsors who are found long after the child enters ORR care.

Verification

Once the case manager identifies a viable sponsor and establishes a positive rapport, the case manager will begin the identity verification process. In order for the sponsor to accept the UC, they will need to complete an application process and provide documentation to show proof of their identity and their relationship to the UC.¹¹ Within 24 hours, the case manager sends the sponsor a package with the application and related documents (called the Family Reunification Packet or FRP).¹² The FRP provides an overview of ORR, describes the sponsor's role and responsibilities in the ORR family reunification process, and explains the required steps to complete the sponsorship process. Together with the sponsor, the case manager establishes a timeframe for returning the deliverables in the FRP. During this process, biometric and biographical information, including fingerprints, may be shared with federal, state, or local law enforcement or state child-welfare agencies to conduct criminal history searches or to search for adverse child-welfare findings. The case manager will have to assuage any concerns that the potential sponsor may have and assure them that the information collected will not be used by the U.S. government for law enforcement or immigration status checks.

The level of verification information needed largely depends on the level of sponsorship. For Category 1 sponsors (parents / legal guardians), ORR's reunification paradigm and longstanding U.S. law establish parental rights as paramount. In Category 1 placements, the case manager quickly establishes proof of parental relationship and then expedites the reunification. For Category 2As (close relatives), members of the household are interviewed and screened, but negative findings about non-caregivers cannot force a placement denial. Household members become a determining factor for Category 2B (close relative who has not previously been the child's caregiver) and Category 3 (distant relative or unrelated) sponsors. In these cases, negative

determinations—in which a household member may present a risk to the safety or stability of the placement—can delay or force a denial for a child’s placement in the home.

The varying levels of sponsorship categories require gradually increasing levels of verification and vetting before the child is released to their sponsor. Category 2A sponsors other than grandparents or adult siblings must prove they are or were the child’s primary caregiver, defined as any person who is primarily responsible for the child’s care and who lives with the child.¹³ Most commonly, the potential sponsor can provide proof with guardianship documents or other documentation from a state or foreign government. ORR also accepts sworn affidavits from potential sponsors in addition to corroborating interviews the case manager has with the child, potential sponsor, and other family members.

In Category 3 sponsorships, care providers and case managers must attain sufficient corroboration to be confident that they have received needed verification of the relationship between the potential sponsor and the child or child’s family. In some cases, a Category 3 sponsor would qualify as a Category 2B sponsor but lacks either documentation of a familial relationship or documentation that s/he was the child’s primary caregiver. In some further cases, Category 3 potential sponsors who are unable to provide verifiable documentation of familial relationship with the unaccompanied child must submit evidence to demonstrate a “bona fide” social relationship with the child or the child’s family that existed before the child migrated to the United States.¹⁴ An example of evidence that documents a bona fide relationship are verified pictures of the sponsor and child together or a letter from the parent testifying that the potential sponsor is known by the family.

Finally, in a minority of instances but independent of a sponsor’s category, further verification is needed to confirm that the home is a safe environment and will remain safe for the child. In these cases, a home study is required, typically undertaken by a home study specialist at a separate organization. The TVPRA requires a home study if the child is, or is suspected of being, a victim of trafficking or abuse, the child has special needs, or if the child’s sponsor presents a risk of abuse or mistreatment. During a home study, the home study specialist will interview the sponsor and all members of the household. Based on the information obtained, case managers will make an assessment and a recommendation to ORR whether the home is suitable or not for the unaccompanied child.

Documentation and Approval of Release

As a final part of the family reunification process, the case manager assists the potential sponsor in completing the necessary parts of the Family Reunification Packet (FRP). Some sponsors may need assistance in finding an accredited location to get their fingerprints taken, accessing language translation assistance, or contacting biological parents in the country of origin. In addition to documents submitted to ORR, the FRP outlines the standard of care necessary to support a child, information on organizations offering legal assistance, and instructions on how to finalize the reunification process. A full list of all documents and links can be found in Appendix 1 at the end of this paper.

Once all requisite documents are completed, the case manager compiles a dossier with a release recommendation. The case file comprises the release recommendation, fingerprints, authorization for release of information, documentation of the weekly meetings with the unaccompanied child, any Significant Incident

Reports¹⁵ the child may have accrued over their time at an ORR facility, and the signed FRP materials. A case coordinator (CC) unaffiliated with the shelter's case manager reviews the documentation and files an independent release recommendation. Case coordinators are non-governmental contractors who work with care providers and stakeholders and who are responsible for making transfer and release recommendations. CCs are assigned to care providers based on their size and bed capacity; individual CCs may be assigned to one or several care providers, and a care provider with hundreds of beds may have more than one case coordinator.

The ultimate decision to release an unaccompanied child lies with a Federal Field Specialist (FFS), who serves as the regional approval authority for unaccompanied children's transfer and release decisions. The FFS is empowered to approve or deny a placement regardless of the case-manager and case-coordinator recommendations. Typically, the FFS reviews the release recommendations, and supporting documentation, to make a decision. In most cases, the FFS agrees with the joint recommendation of the case manager and the case coordinator and the child is released into sponsor custody. In some cases, the FFS agrees with the recommendation but requires further conditions on the placement and remands the case until further steps or further clarifications are provided. If the FFS disagrees with the recommendations and denies the placement with the sponsor, the child remains in ORR care until another type of placement, such as LTFC, or another sponsor is identified.

Upon approval for release, case managers contact sponsors to arrange for reunification. For unaccompanied children flying by airplane or who need travel arrangements, most shelters will coordinate travel. Under ORR policy, sponsors are responsible for the cost of the child's travel, and many sponsors choose land transportation because of cost. If sponsors are unable to pay airfare costs and if the cost results in a delay of release of 72 hours or more, ORR allows UC providers to pay for airfare using program funds.¹⁶ ORR may amend the travel policy when needed, as it has during the COVID-19 emergency.¹⁷ In circumstances of serious mental-health or physical-health issues, ORR may delay release to a sponsor until the child has been cleared by a medical professional. The case manager files a Discharge Notification form within 24 hours of transfer to the sponsor. The care provider closes the unaccompanied child's case file after completion of a wellness check by phone, mandated to take place 30 days post-discharge.¹⁸

Post-Release Services¹⁹

For approximately 20% of the most vulnerable unaccompanied children in ORR care,²⁰ post-release services (PRS) specialists provide additional assistance in locating, accessing, or connecting to community resources. These resources may include education, health care, mental health services, and legal representation. Post-release services are one part of a safety net for youth that includes home studies, sponsor verification, and background checks, assessments, in-custody therapeutic services, 30-day follow-up calls, and ORR wellness checks. Post-release services also follow the child if the child moves or changes addresses. ORR leadership has told providers and advocates that they intend to expand access to PRS in the near future.

References

- ¹ USCRI calculation from ORR and DHS data.
- ² William A. Kandel (2021), *Unaccompanied Alien Children: An Overview*. Washington, DC: Congressional Research Service, p. 11. Available at <https://sgp.fas.org/crs/homesec/R43599.pdf>
- ³ https://www.aclu.org/files/pdfs/immigrants/flores_v_meese_agreement.pdf
- ⁴ For Fiscal Years 2018-2020 and the first eight months of FY21, 43.6% of UCs released to sponsors were released to Category 1 sponsors and 46.8% were released to Category 2 sponsors. Data available at: <https://www.hhs.gov/programs/social-services/unaccompanied-children/index.html>.
- ⁵ Administration for Children and Families (ACF) (2021), *ORR Guide: Children Entering the United States Unaccompanied*. Washington DC: Office of Refugee Resettlement, section 2.3.2. Available at: <https://www.acf.hhs.gov/orr/policy-guidance/children-entering-united-states-unaccompanied-section-2#2.3>
- ⁶ ACF (2021), "Care Provider." In the *ORR Guide*. Available at: <https://www.acf.hhs.gov/orr/policy-guidance/children-entering-united-states-unaccompanied-guide-terms#Care%20Provider>
- ⁷ 8 U.S.C. 1232 (b)(3)
- ⁸ Preference of sponsors for release is required by the terms of the *Flores* settlement agreement and is non-discretionary. See below in this section.
- ⁹ Allen Keller et al. (2017), "Pre-Migration Trauma Exposure and Mental Health Functioning among Central American Migrants Arriving at the U.S. Border." *PLoS ONE* 12(1): e0168692. <https://doi.org/10.1371/Journal.pone.0168692>; Elizabeth Kennedy (2014), *No Childhood Here: Why Central American Children are Fleeing Their Homes*. Washington: American Immigration Council. Available at: <https://www.americanimmigrationcouncil.org/research/no-childhood-here-why-central-american-children-are-fleeing-their-homes>
- ¹⁰ Sara McLean (2016), *Children's Attachment Needs in the Context of Out-of-Home Care*. Melbourne: Australian Institute of Family Studies. Available at: <https://aifs.gov.au/cfca/sites/default/files/publication-documents/cfca-practice-attachment.pdf>
- ¹¹ ACF (2021), *ORR Guide*, section 2.2.1. Available at: <https://www.acf.hhs.gov/orr/policy-guidance/children-entering-united-states-unaccompanied-section-2#2.2>
- ¹² ACF (2021), *ORR Guide*, section 2.2.3. Available at: <https://www.acf.hhs.gov/orr/policy-guidance/children-entering-united-states-unaccompanied-section-2#2.2>
- ¹³ ACF (2021), *ORR Guide*, section 2.2.4. Available at: <https://www.acf.hhs.gov/orr/policy-guidance/children-entering-united-states-unaccompanied-section-2#2.2>
- ¹⁴ Ibidem
- ¹⁵ A Significant Incident Report (SIR) is a report completed by care providers to report and document any significant incidents related to unaccompanied children.
- ¹⁶ ACF (2021), *ORR Guide*, section 2.8.2. Available at: <https://www.acf.hhs.gov/orr/policy-guidance/children-entering-united-states-unaccompanied-section-2#2.8.2>
- ¹⁷ Office of Refugee Resettlement (2021), *Field Guidance #15 – Release for Eligible Non-Sibling, Closely Related Children to a Category 1 or Category 2A Sponsor*. May 14, p. 2.
- ¹⁸ ORR's terminology is the "Safety and Well Being Follow Up Call"; providers tend to refer to it as the "30-day call." See ACF (2021), *ORR Guide*, section 2.8.4. Available at: <https://www.acf.hhs.gov/orr/policy-guidance/children-entering-united-states-unaccompanied-section-2#2.8.4>

¹⁹ For more information on post-release services, including recommendations for improvements, see U.S. Committee for Refugees and Immigrants et al. 2021, *Ensuring Unaccompanied Children's Well-Being After Release*. Washington: USCRI. Available at: [https://refugees.org/wp-content/uploads/2021/09/Letter-UC New.pdf](https://refugees.org/wp-content/uploads/2021/09/Letter-UC-New.pdf)

²⁰ Office of Refugee Resettlement (2021), "Facts and Data." Available at: <https://www.acf.hhs.gov/orr/about/ucs/facts-and-data>