

# Unaccompanied Children in Emergency Intake Site (EIS) Facilities— A Progress Report

In May 2022, the [Women's Refugee Commission](#) and [First Focus on Children](#) led a delegation of 11 advocacy organizations to the Emergency Intake Site (EIS) facilities for unaccompanied children at Pecos, Texas, and Fort Bliss, near El Paso, Texas. Advocates also visited the Pecos EIS and Ft. Bliss EIS facilities in May 2021.

**EIS facilities** were created by the Biden administration in early 2021 to quickly move unaccompanied children out of US Border Patrol custody, which is not appropriate for their care. EIS facilities, operated by the Office of Refugee Resettlement (ORR), lack the state child-care licenses legally required of permanent facilities for unaccompanied children. As a result, they are generally large, institutionalized settings without mandated state or federal oversight and monitoring. As of June 6, 2022, the Biden administration reports that both the Pecos and Ft. Bliss facilities have been converted to Influx Care Facilities (ICF), a distinct legal category with stricter standards for child safety, education, and therapeutic services than EIS facilities, but still below that of licensed care providers.

**Our findings: While both sites were significantly improved from May 2021, we remain concerned about the sites' capacity to meet children's needs.** The Pecos and Ft. Bliss facilities were developed in a moment of extreme need and have provided limited therapeutic and educational services. Life for unaccompanied children at Pecos and Ft. Bliss is highly regimented, which — because teenagers have strong developmental needs for increased privacy and personal autonomy — makes the sites ill-suited for the children housed there. Currently, ORR directs children with more challenging cases to other facilities, and both Pecos and Ft. Bliss are able to reunify children with sponsors more quickly than licensed facilities and more quickly than all reunifications in 2019, which is the last time the system underwent similar strain. Despite improvements, we continue to have significant concerns about the appropriateness of these facilities for any child, and emphasize that care practices at the facilities would be particularly unacceptable if reunification times fall to [2019 rates](#).

## Notable improvements from our May 2021 visits

**Rapid reunifications with family.** The EIS facilities at Pecos and Ft. Bliss are reuniting unaccompanied children with family members more rapidly than a year ago, when long lengths of stay were [far too common](#). Case management is much improved, and metrics for reunification (e.g., discharge rates and average length of stay) were strong as of our visit. However, case management concerns remain, as licensed providers who receive transferred children report inconsistent quality in children's needs assessments at Pecos and Ft. Bliss, progress on sponsor verification, communications with home-country parents, and evaluations of individual children's specific vulnerability to abuse, exploitation, and trafficking.

**Compliance with Prevention of Sexual Abuse (PSA) standards.** On the 2021 visit, advocates noted that even basic procedures for PSA compliance were missing at both sites, such as hotline telephones for urgent situations, boxes for reporting misconduct confidentially, and posters informing children of their rights. During our 2022 visit, posters informing children of their rights were visible in key common areas and dorms, as were PSA phones and grievance boxes.

**Physical facilities and hygiene at Ft. Bliss.** On the 2021 visit, advocates noted overcrowded dormitory tents, shower facilities that were deficient for the size of the child population, insufficient changes of clothing for children to remain clean in an area with abundant dust and dust storms, and inadequate opportunities for clothes washing and personal hygiene. During the 2022 visit, we observed that children had regular access to shower facilities, several changes of clothes, and laundry was done at regular intervals. However, we attribute a large proportion of the visible improvements to lower numbers of children at Ft. Bliss.

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## Ongoing concerns – Pecos EIS

**Therapeutic protocols and quality.** Unaccompanied children are a highly vulnerable population whose experiences — whether in country of origin or en route to the US — lead to high rates of traumatic responses, clinical depression, anxiety disorders, and post-traumatic stress disorder. The earlier these conditions are diagnosed and addressed, the better the chances that a child will avoid functional impairments and build a full life in the United States. Based on our visit, we remain concerned that current therapeutic protocols are not sufficient to ensure true trauma-responsive care for these populations.

**Confidentiality for psychosocial needs.** In our 2021 and 2022 visits, we observed therapeutic activities occurring in large, open buildings, without spaces for private conversation. The facilities also lacked spaces where children could informally make private disclosures to trusted adults on site. Given unaccompanied children's past traumatic experiences, therapeutic services must be provided in an environment that allows children to feel comfortable sharing their experiences. This, in turn, ensures that children are referred to appropriate services after their release to family. We are concerned — and we expect — that this lack of confidentiality means that traumatized children do not feel safe sharing sensitive information and, therefore, do not receive the therapeutic care they require.

**Education ramp-up.** Pecos EIS appeared unready, in both its facilities and its hiring, to meet the Influx Care Facility (ICF) standard educational requirement of 6 hours' classroom instruction per day as of the date of their transition to an ICF. The contractor that operates Pecos says it will meet the standard over the next few months, which we believe is tenable.

## Ongoing concerns – Ft. Bliss EIS

**Appropriate spaces for addressing psychosocial needs and sensitive legal matters.** As noted above, children need safe and confidential settings for effective therapeutic care. Private settings are also important for legal services, as children need to feel comfortable sharing sensitive information or experiences that may give rise to a claim for legal protection. During our visit to Ft. Bliss, these challenging conversations were taking place in "private" spaces separated by cloth curtains on only three sides. Observers were able to see — and, in some cases, hear — children having legal screenings or therapeutic sessions. We believe these spaces are not conducive to children's interests and more appropriate areas should be created.

**Teenagers' developmental need for privacy.** As teenagers develop into adults, they exhibit increased need for privacy and personal space. Lack of privacy and personal space for teens [can inhibit both child development and healthy functioning, including stress management](#). In advocates' 2021 visit to Ft. Bliss, we observed extremely large dormitory spaces with more than 1,000 cots in each dorm. Such spaces place often traumatized teens virtually on top of one another. We recommended two steps: cutting the number of beds per dorm and dividing up the dormitory space into smaller pods where children could retreat. While the dorms we visited in 2022 contained a reduced number of cots — approximately 250 per dorm — we were disappointed to find that, even at this size, showers and toilets presented the only opportunities for privacy. As child-welfare experts agree that small cohorts are better for children in institutional settings, we continue to believe that subdividing the dormitory space into 25-child pods at Ft. Bliss is both viable and in children's best interests.

**Daily routines and physical facilities.** Children placed at Ft. Bliss remain in their dorms for both indoor recreation and educational services, spiritual services, and phone calls to family. This means that children are sleeping, playing, learning, and worshiping in one space, with few opportunities to leave that space. Further, during our visit, clocks were not readily accessible to children and the indirect lighting of the dorms — hard-sided tents — inhibits knowing the time of day from the amount of daylight. We are concerned that this environment will make children restless and increase children's anxiety after a difficult experience in their country of origin and journey to the United States.