

# The Path to Better Care: Improving Care and Creating Supportive Environments for Unaccompanied Children

Since 2002, the federal **Office of Refugee Resettlement** (ORR) has provided for the everyday needs of unaccompanied children while they are in US government custody, while working to reunite them with family members in the United States. This policy brief aims to inform current policy and public discussions about the unaccompanied children's system and is a complement to the Women's Refugee Commission's new report ***From Congregate to Community-Based Care: Strengthening Reunification and Support of Unaccompanied Children***.

ORR has made some notable improvements to the **Unaccompanied Children's program** in recent years. Yet our research indicates that ORR still faces challenges in fully integrating child-welfare principles and best practices in the program. For example, ORR's shelters vary considerably in their size and in the freedoms afforded to children; most unaccompanied children end up in congregate care (a catch-all term for group homes and larger institutions that care for children away from families) which are now disfavored. How and where unaccompanied children are placed in ORR custody can directly impact the quality of care they receive and their ability to reunite expeditiously with family.

The path forward requires attention to three areas: quality of care; rapid, safe, and stable reunifications with family; and post-release support. First, ORR must **transition from large, congregate care facilities to smaller-scale settings**. Congregate care environments have been shown to present significant risks, including inducing distress in children and increasing their feelings of hopelessness. Second, **ORR must reunify children with their families more quickly**. Children's current and future functioning is harmed when they are separated from family. ORR should follow the example of the domestic child-welfare system, where the bipartisan **Family First Prevention Services Act** minimizes children's time away from family placements. Finally, **ORR must provide more post-release support**. While ORR offers post-release services, it is crucial to strengthen community resources and provide targeted assistance to unaccompanied children and their families. Given recent concerns about child labor and longstanding concerns about children's safety, post-release assistance is crucial for ensuring a smooth transition and fostering long-term well-being and development for children as they integrate into their new environments.

## Section 1. ORR should rely on small-scale care rather than congregate care

ORR's reliance on congregate care differs substantially from domestic child-welfare system best practices. Over the past decade, the domestic child-welfare system has drastically reduced its use of mass congregate care facilities for children. Instead, it has emphasized family-like placements, in part driven by the Family First Prevention Services Act. Research shows that small-scale placements increase children's physical and emotional well-being, leading to better outcomes. Despite this shift in the domestic landscape, over the past decade ORR has *increased* its reliance on large care settings. ORR heavily relies on large, congregate-care settings, often with 50 or more beds: ORR's congregate facilities tend to be much larger than those in the domestic child-welfare system (where congregate may be defined to include group homes of as few as 7–12 children), and ORR has a greater proportion of congregate-care facilities in its network than states would generally permit for domestic child-welfare placements.

Child welfare research has long shown that **congregate care is incompatible with the health and well-being of children**. Large settings often struggle to meet children's needs, increase children's stress and feelings of hopelessness, lead to inferior outcomes, and present monitoring challenges for organizations.

Researchers document that young people experience ORR facilities as spaces of restricted freedom of movement, limited physical activity, surveillance via video cameras and line-of-sight tactics, and spaces in which sleep patterns, conversations, and phone calls may be recorded in their institutional files. Large facilities often exacerbate children's distress and can worsen discriminatory treatment faced by LGBTQ+, Indigenous, and West African youth in care.

ORR's overreliance on congregate care is a story of path dependence. ORR was set up to contract, staff, recruit, monitor, and oversee the operations of large facilities, in part explaining why they are so heavily used today. A path to 100 percent small-scale facilities is needed. However, ORR is not currently equipped to make the transition; to create the path, a map is needed. ORR can improve its engagement with outside child welfare experts, subject matter experts, and impacted community members, to provide consultation and recommendations on how best to proceed.

### *Recommendations:*

- **Congress should direct ORR to create a public plan to transition to 100 percent small-scale programs.** A comprehensive plan that addresses known challenges and uncovers unknown challenges is necessary for moving forward. The plan should attend, at minimum, to contracting and grant-making, staffing limitations, restrictions on funding facility construction or renovation, outreach, recruitment of potential providers, program officer oversight, and organizational reporting.
- **The Administration for Children & Families (ACF) (ORR's parent agency) and the Department of Health and Human Services (HHS) should recruit small-scale providers and provide technical assistance in federal funding applications.** The lack of federal funding applications from small-scale providers is one known challenge to reducing ORR's overuse of congregate care. ACF must provide technical training assistance to community-based organizations that serve youth to navigate federal funding applications, operational requirements, and reporting.

## Section 2. Timely and supported reunification with family is child-welfare best practice

In the past 20 years, the domestic child-welfare system has developed a new **gold standard**: "Active efforts to preserve and reunify families." Following overwhelming research that **involuntary separation from a primary caregiver harms children**, the domestic child-welfare system has incorporated a widespread preference to maintain family integrity and to avoid the separation of a child from a caregiver. In situations where allegations against a child's caregiver are serious enough to warrant an interim urgent separation, the system acts quickly to determine the appropriate next steps. Judicial hearings typically occur within 48 to 72 hours of the removal by statute. This rapid response helps to minimize the time that children are separated from parents who are still able to care for them with additional support.

In other words, best practice in the domestic child-welfare system is to minimize time that children are apart from caregivers and outside family settings. "Active efforts" include targeted services to families at risk of breakdown, such as 24-hour referrals, intensive direct services, and behavioral health services. Intensive, short-term programs are then followed by longer-term, less intensive services that are both **child- and family-directed and strengths based**. Yet ORR's policies for unaccompanied children have never conformed to current family-unity best practice. ORR has justified its distinct approach by pointing to unaccompanied children's undocumented legal status and their separation from parents because of migration.

Unaccompanied children do not benefit from the same “active efforts to preserve families” that children receive in the domestic child-welfare system. Most reunited families receive almost none of the services or resources necessary for their well-being. ORR is not entirely to blame. The agency faces funding and other bureaucratic challenges to service delivery. As a longtime program director observed in our report, “ORR is charged with functioning like a national child welfare agency that statutorily doesn’t exist. They are building the bus as they drive it.” As a result, unaccompanied children pay the ultimate price: they suffer prolonged separation from families while being held in care facilities, and their families rarely receive needed services even after reunification.

### *Recommendations:*

- **ORR should expedite placements with families while enhancing support services to ensure children are placed in safe and stable homes.** ORR should move toward incorporating the best practices of the domestic child welfare system, including family unity and rapid response. A preference for family unity includes both immediate reunification to stable homes but also appropriate services in instances where additional support is needed to transform an unstable home into a stable environment. Strengthening supports for all families is preferable for children’s long-term needs; intensive direct-support reunification for higher-need cases is ORR’s largest gap.
- **ORR should conduct regular external audits of its procedures and practices to ensure alignment with established child-welfare best practices.** ORR’s current practices are significantly out of step with both domestic and international norms. To ensure that such misalignment does not happen in the future, ORR should regularly update both programming and policy for alignment to best practices.

## Section 3. Current post-release models are necessary, but do not fully meet children’s needs

After unaccompanied children leave ORR care, they arrive at the home of their family or nonrelative sponsors. For families that have lived apart for years, supportive services can be critical during this readjustment process—bolstering the caregiver’s ability to support a child and to secure needed services. These services may be especially difficult to obtain owing to legal status, limited English proficiency, and lack of health insurance. To assist in this transition, ORR contracts organizations to provide formal post-release services (PRS) to ensure the safety and well-being of children following reunification, to provide action planning with families regarding areas of concern, and to advocate on behalf of children with community-based providers and schools. However, these services are often insufficient. PRS providers face consistent challenges in meeting the full spectrum of children’s needs—in their transition to families with new caregivers and the need for psychosocial support, in navigating pervasive barriers to school enrollment, and in children’s limited access to health care and mental health services post release, which hinders their well-being.

The **Trafficking Victim’s Protection Reauthorization Act** (TVPRA) mandates PRS for approximately 10-15 percent of children arriving in any given year, but services also can be requested by ORR or facility staff. In fact, ORR has publicly declared its ambition to deliver post-release services to 100 percent of unaccompanied children by October 2024. PRS currently operate via referrals in which a PRS case worker connects the child and sponsor to critical mental health, medical, legal, and educational resources in their

local community. [Our research](#) highlights that the referral-based model often fails to provide the necessary comprehensive support, leaving many children without adequate assistance. The [child labor crisis](#) has made clear that PRS from ORR are crucial but should be seen as one component of a broader safety net. Just as no single individual or institution can guarantee 100 percent child-labor prevention, no single institution can do everything for every child. To fully address the needs of unaccompanied children and families, there must be a network of support.

An ideal approach is to align PRS to a localized, wrap-around service model, which is in turn integrated into a broader social safety net. For fiscal year 2023, Congress allocated \$750 million to expand PRS, legal services, and child advocates for unaccompanied children. This is a critical step in ensuring children have access to legal representation and legal services following release from ORR care. However, PRS alone cannot bear the full weight of the needs of children and their families, even with such an outlay. Effective solutions require collaboration and a holistic approach, which would include improvements to federally provided PRS, community organizations, schools and school-based programming, and protection and intervention activities by entities including states' Departments of Labor.

### **Recommendations:**

- **Congress should continue to invest in post-release support for unaccompanied children and newcomer youth:** Congress should invest in expanded PRS for newly arriving migrant children and youth via appropriations to ORR and newcomer programs based in both communities and public schools. Following best practices in social work, PRS should be universally available and voluntary. Services should include an immediate, individualized needs assessment for the child, sponsor, and family (as relevant) following release. More robust newcomer programs in states and localities continue to fill a critical gap in services and provide a local safety net for newly arriving children.
- **ORR and PRS providers should diversify service-delivery models and strengthen community connections:** Fundamentally, PRS should operate as a prevention model and overlap with domestic child-welfare service provision. Delivery will differ by local context. In areas like Houston, where large numbers of unaccompanied children reside, for example, ORR can partner with local authorities to allow PRS providers room to innovate diverse service delivery models that address the specialized needs of unaccompanied children. With coordination support, low-cost efforts such as monthly post-release stakeholder meetings should be replicated in all regions of the United States. Integrating regional and especially subregional—metropolitan area—coordination into the job duties of ORR's new regional coordinators is a promising starting place.
- **Federal, state, and local actors should expand and integrate PRS within a broader safety net:** The recognition of the US child-labor crisis has underscored the systemic nature of the challenges faced by unaccompanied children and the need for holistic solutions. Integrating regional and especially subregional—metropolitan area—coordination into the job duties of ORR's new regional coordinators is a promising starting place. States and localities must take [every available measure](#) to provide the following support to unaccompanied children: guaranteeing and distributing essential goods; supporting children's mental and behavioral health through integration; ensuring robust educational support; and covering the cost of enrollment in healthcare programs not covered by Medicaid, such as mental healthcare, among others.

## Conclusion

Addressing the ongoing challenges in ORR care requires a focused, multi-pronged approach on expediting safe and stable reunifications, improving care quality, and enhancing support post-reunification. Transitioning from large, impersonal settings to smaller and more nurturing environments will alleviate many challenges that are, inherently, part of congregate care. Expediting family reunification efforts is both the right thing to do and validated by research—but it requires post-reunification support for challenging cases. Strengthening PRS and access to social services in communities will ensure smoother transitions and better outcomes for unaccompanied children.

These recommendations are designed to ensure that unaccompanied children are treated as children, with the care and consideration they deserve. WRC will continue our longstanding commitment to unaccompanied children by renewing our advocacy and by collaborating with our partners to drive meaningful change. Through these efforts, we believe ORR can significantly reduce its dependence on congregate care, streamline reunification processes, and provide robust post-release support, ensuring a more supportive and effective care system for unaccompanied children.

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For more information, contact Mario Bruzzone, senior policy advisor, Migrant Rights and Justice program ([MarioB@wrcommission.org](mailto:MarioB@wrcommission.org)).

### Women's Refugee Commission

The Women's Refugee Commission (WRC) improves the lives and protects the rights of women, children, youth, and other people who are often overlooked, undervalued, and underserved in humanitarian responses to crises and displacement. We work in partnership with displaced communities to research their needs, identify solutions, and advocate for gender-transformative and sustained improvement in humanitarian, development, and displacement policy and practice. Since our founding in 1989, we have been a leading expert on the needs of refugee women, children, and youth and the policies that can protect and empower them. [womensrefugeecommission.org](http://womensrefugeecommission.org).

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