Testimony of

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Introduction

Chairman Durbin, Ranking Member Graham, and distinguished Members of the Committee, thank you for the opportunity to appear before you today on behalf of the U.S. Department of Health and Human Services (HHS or Department) along with my esteemed colleagues. I am the Director of the Office of Refugee Resettlement (ORR) within the Administration for Children and Families (ACF), which includes the Unaccompanied Children (UC) Program that is responsible for the care and placement of unaccompanied children in HHS custody. Since assuming my position as ORR Director in September 2022, I have led a dedicated team of career federal staff, contractors, and grantees who are committed to ensuring the safety and well-being of every child in our care. I have met some of the children we serve and many of the dedicated professionals who serve them, and I have witnessed the commitment and devotion of our staff. Providing for the safety and well-being of children in our care is not only our mandate, it is also our guiding principle. This goal is reflected in our policies, our people, and our efforts to strengthen the program every day.

In my testimony today, I will describe the work we are doing to implement ORR’s UC Program, the policies that ORR has in place to promote the safety and well-being of unaccompanied children in our care, and the steps we are taking—consistent with our authorities and mission—to support and promote their well-being following their release from ORR.

Responsibility for Unaccompanied Children

they are transferred to ORR from the Department of Homeland Security (DHS) or other federal entity until they are released to a vetted sponsor, typically a parent or other family member. Further, the 1997 *Flores* Settlement Agreement establishes minimum standards for specific services for unaccompanied children under ORR-funded programs.¹

To fulfill ORR’s statutory and court-ordered obligations, ORR funds nearly 300 programs in 27 states for different levels of care such as shelter programs, transitional foster care, long-term foster care, group homes, staff secure facilities, and residential treatment centers as well as two operational and active Influx Care Facilities (ICF) in Pecos, Texas and Dimmit County, Texas. Additionally, ORR maintains a preparedness posture by ensuring the Office can quickly scale-up capacity if needed to provide safe facilities appropriate for the care for children. In fact, ORR now has the ability to award new Indefinite Delivery, Indefinite Quantity task orders for scalable ICF capacity and services in a timely manner. At all of its facilities, ORR provides child-focused services, including education, health care and counseling services, case management services, recreation, access to legal services, access to religious services, and access to child advocates where applicable. These services are delivered according to child welfare best practices in a manner that is appropriate to the age, culture, preferred language, and needs of each child.

In every aspect of our mission, we recognize the importance of our work in caring for children, many of whom come to our care during extremely difficult periods in their life. The work is not easy, and ORR staff performs this critical work with the utmost care and dedication.

Current State of the Unaccompanied Children Program

As of September 30, 2023, ORR had 11,064 children in ORR care and had received 118,798 referrals from federal entities in Fiscal Year (FY) 2023. ORR continues working with DHS to minimize the time an unaccompanied child spends in a border processing facility or port of entry, neither of which are equipped for extended stays for children. Through flexible capacity, improved case management processes, and coordination with inter-agency partners, ORR can efficiently and consistently accept DHS referrals. The average amount of time an unaccompanied child spends in DHS border facilities is now well under the 72-hour maximum time within which children must be transferred from DHS to HHS care under the TVPRA, absent exceptional circumstances.

In FY 2023, ORR placed more than 113,602 children with vetted sponsors. The average length of time a child spent in ORR care over this period was less than one month. Given ORR’s UC Program’s child welfare mission, we know that the best place for a child is with a family in a community, not in a congregate care setting. In FY 2022 and FY 2023, the vast majority of children—more than 85 percent—were placed with a parent, legal guardian, or other close family member.

Sponsor Vetting Process

In fulfilling its sponsor placement responsibilities, ORR employs thorough sponsor screening and vetting processes for each category of sponsor that are based on child-welfare principles. To that end, ORR has implemented and funded seven-day-a-week case management—specifically for family unification services, which ensures comprehensive staff support so that every child’s case is worked on even after normal business hours and on
weekends. Additionally, ORR has implemented significant updates to the UC Portal (the UC Program technology system) to increase usability and search functionality to build in safeguards, streamline processes, and make it easier to identify potential child welfare concerns during sponsor suitability assessments.

ORR identifies potential sponsors for unaccompanied children in different categories of cases: parents or legal guardians as Category 1; brothers, sisters, grandparents, or other immediate relatives as Category 2; distant relatives or unrelated individuals as Category 3; and unaccompanied children with a sponsor yet to be identified as Category 4. ORR’s sponsor suitability assessment process includes verifying the sponsor’s relationship to the child; speaking with the child’s parents when possible; conducting separate interviews with the child and sponsor; collecting supporting documentation to verify the sponsor’s information; and administering background and address verification checks—which include public records and sex offender registry checks, as well as FBI fingerprint checks in certain cases.

Prior to release of a child and placement with a vetted sponsor, ORR also carries out home studies in certain circumstances, as required by the TVPRA and ORR policy. Home studies further investigate a potential sponsor’s ability to ensure the child’s safety and well-being, which include home visits, sponsor interviews, background checks of additional adult household members, and, if necessary, interviews with other household members.

Home studies are required under circumstances specified by the TVPRA, including when a child has previously been a victim of trafficking or has a disability; and, per ORR policy, in instances when a potential sponsor is a non-relative and the child is 12-years-old or younger or the sponsor has previously sponsored or sought to sponsor a child or is seeking to
sponsor multiple children.

Additionally, to provide additional safeguards, home studies may also be conducted at ORR’s discretion if the ORR Federal Field Specialist, Case Manager, or Case Coordinator determine that additional information is needed regarding the sponsor’s ability to care for the health, safety, and well-being of the child. All releases following home studies require post-release services.

**Services Following Unaccompanied Children’s Release to Sponsors**

ORR recognizes that many children released from our care may benefit from ongoing assistance by a social services agency. Further, even though sponsors are thoroughly vetted, we recognize that some children may still find themselves in unsafe situations or otherwise in need of support after they are released from our care. ORR has policies in place, beyond when our custodial responsibilities legally end, to promote children’s well-being after they have been released from our custody and transition into a new community.

These policies include Safety and Well-being calls to children and sponsors after ORR releases a child from its care. Per ORR policies, ORR care providers are required to make a minimum of three attempts for every case to reach and speak with the child and the sponsor. Children and sponsors are not required to participate in Safety and Well-being calls and may choose not to answer a call for a variety of reasons, including fear or distrust of government, hesitation to answer an unknown number, or simply missing the call. Nevertheless, ORR made contact with either the child, the sponsor, or both in more than 81 percent of households since FY 2022.
When a care provider identifies a child who may benefit from additional resources through a Safety and Well-being call, the child is referred to ORR’s National Call Center (ORRNCC), which is staffed 24 hours a day, seven-days-a-week. This helpline connects children and sponsors with resources within their local community to help address their individual needs. Children receive information about the ORRNCC while in ORR’s care, and upon release they and their sponsor are provided a card with the ORRNCC information, which also includes additional resources.

Children, family members, sponsors, legal service providers, child advocates, and other members of the community can request assistance or report concerns to the ORRNCC. The ORRNCC is required to document any safety concerns and report such concerns to ORR, as well as to appropriate local law enforcement agencies and state and local child protective services as appropriate, in accordance with mandatory reporting laws, state licensing requirements, federal laws and regulations, and ORR policies and procedures. Additionally, ORR requires the ORRNCC to provide children who call the helpline and express safety concerns with information regarding the authorities to which their safety concerns will be reported. The ORRNCC connects children directly with the appropriate authorities, when possible, and places a follow-up call to the child to confirm if any further actions are needed.

ORR also provides post-release services (PRS) to unaccompanied children who receive TVPRA-mandated home studies, which includes all children who are victims of trafficking and to children who, in the determination of a care provider, would benefit from ongoing assistance. PRS includes referrals and connection to community resources as well as intensive case management services in cases where additional support is necessary to address a child’s specific needs or challenges. These referral and case management services are offered by a
network of ORR-funded grant recipients across the United States. PRS can include help with school enrollment, support in finding and accessing health and mental health care, connections with local organizations, and other supports to ensure children’s well-being.

Further, if at any point during an interaction with an unaccompanied child, either while in ORR’s care or post-release such as through a Safety and Well-being call, ORR care provider staff identifies or suspects any safety concerns, they are required to issue a Notification of Concern to ORR and notify appropriate investigative agencies, including local law enforcement and child protective services. This includes any suspicion that the child has run away, is at risk of or posing a danger to themselves or others, or is at risk of human trafficking, exploitation, or other abuse. ORR then conducts further review and determines what actions should be taken, which may include additional reporting and engagement with local law enforcement, state child welfare authorities, and/or referral to PRS.

While ORR does not have authority to remove a child from a home—that authority resides with state child welfare and law enforcement agencies—ORR recognizes the critical importance of its notification and coordination processes to ensure that local authorities can respond appropriately to any allegations of abuse or neglect. For this reason, we have engaged multiple child welfare agencies on the needs of unaccompanied children. However, state child welfare agencies vary in capabilities and these local and state entities also need robust resources to help ensure their ability to review or investigate such allegations.

If ORR care provider staff, such as a case manager or clinician, suspect that a child is a victim of trafficking or is at risk of trafficking at any point during their interaction with an unaccompanied child, they must make a referral to HHS’s ACF Office on Trafficking in
Persons (OTIP) and to DHS’s Homeland Security Investigations Division and DHS’s Center for Countering Human Trafficking for further investigation. OTIP provides further assessment assistance to ensure that victims can access appropriate care and services. Such care is then coordinated with ORR to provide direct referrals for grant-funded comprehensive case management services, medical services, food assistance, cash assistance, and health insurance tailored to the child’s individual needs. HHS engages in constant efforts to improve care and information-sharing efforts for better human trafficking prevention. For example, in February 2023, ORR entered into a data sharing Memorandum of Agreement (MOA) with OTIP and the National Center for Missing and Exploited Children (NCMEC) to increase information sharing and visibility on unaccompanied children who are referred to NCMEC and who may be at risk of trafficking or exploitation. Additionally, ORR works regularly with OTIP to further coordinate their efforts to align care and services for victims.

**Continuing Progress and the Path Forward**

ORR is continually assessing, identifying, and implementing improvements to the UC Program to ensure the highest level of care and support for children.

While unlawful child labor is not limited to migrant children, ORR recognizes that unaccompanied children released from ORR custody are often particularly vulnerable. Thus, consistent with our statutory authorities, ORR is working closely in partnership with the Department of Labor (DOL) to advance federal efforts to protect children against labor exploitation. Our joint efforts to address child labor exploitation have been ongoing and, as of March 23, 2023, have also been formalized in an MOA between DOL’s Wage and Hour Division and HHS’s ACF, which oversees ORR. The MOA expands the agencies’
collaboration, including information-sharing to aid investigations and to help identify communities in which and employers for whom children may be at risk of child labor exploitation; coordination to ensure that child labor victims or potential victims have access to critical services; and cross-training of staff. Thus, we are actively engaged with DOL to ensure we are finding and addressing the needs of children who may face exploitation.

The MOA has also resulted in joint public education efforts. In April 2023, ACF and DOL developed and distributed new materials and trainings to provide information to children about child labor laws in the United States so that they understand the laws on labor rights and restrictions to working in the United States, which may differ from many labor laws in their country of origin. The cross-training efforts of DOL and ACF staff have been successful and robustly attended, with approximately 800 ACF staff, including more than 600 ORR staff, trained by DOL and 250 DOL managers trained by ACF. In an effort to further educate and engage impacted communities, ACF led two roundtable sessions with educators on the issue of unlawful child labor in collaboration with the U.S. Department of Education and DOL in August 2023.

Additionally, ORR launched an audit of individuals who have sponsored multiple unrelated unaccompanied children, to ensure all necessary safeguards were followed. On June 2, 2023, ORR released the results of its audit, which found that ORR adhered to its program policies and procedures designed to meet or exceed statutory requirements in the placement of unaccompanied children with a vetted sponsor. The audit also identified areas for continued improvement. ORR announced additional efforts to protect the safety and well-being of unaccompanied children, including a new Program Accountability team in ORR that is
responsible for assessing and addressing potential exploitation risks faced by unaccompanied children.

Further, ORR and the Administration is committed to expanding PRS tailored to the unique needs of each child. In FY 2022, ORR more than doubled the rate of children offered PRS, providing access to more than 40 percent of children compared to just over 20 percent in FY 2021. This past fiscal year, we continued to expand PRS access, offering more than 50 percent of discharged children access to these services. We are offering services to all children with known vulnerabilities and to children released to unrelated sponsors. With continued funding from Congress, we can continue to advance toward our goal of providing all children access to PRS.

In fact, earlier this month, ORR published the proposed UC Program Foundational Rule, which would establish a comprehensive framework for placement and care, and would formalize and expand services for unaccompanied children, including legal services, Child Advocate access, language access, and post-release services—all critical tools to help prevent and respond to child labor exploitation. As always, this is contingent on robust funding to fulfill the goal of expanding these services.

Conclusion

We appreciate Congress’ prior support of ORR programs, including the contingency funding in the FY 2023 omnibus. However, ORR still faces a significant overall budgetary shortfall in FY 2024 and has requested supplemental appropriations. Without this funding, there could be a significant impact on ORR’s ability to timely accept referrals and it could lead to a curtailing of timely or expanded post-release services and legal services, beyond what is
minimally required. These services play a critical role in ORR’s ability to promote the safety and well-being of children—including combating the risk of child labor exploitation—but are only possible with continued investment and support from Congress to build on ORR’s efforts to further strengthen and improve the UC Program. We would also welcome more resources from Congress in order for ORR to expand not just access to, but the nature of services to all children following release.

Thank you for the opportunity to provide an update on ORR’s UC Program. We are committed to caring for and protecting children in HHS custody and continue to do all we can to promote their well-being following their release. Children who come into ORR care face unique challenges that require a whole of government approach—including our partners in Congress, fellow federal agencies as well as state and local agencies, and national and community partners. At ORR, we are proud to do our part in this critical work.