FACT SHEET

Unaccompanied Children (UC) Program

The Unaccompanied Children (UC) Program is managed by the Office of Refugee Resettlement (ORR) within the Administration for Children and Families (ACF), an operational division of the U.S. Department of Health and Human Services (HHS).

Current Law

By law, HHS has custody and must provide care for each unaccompanied child, defined as a child who has no lawful immigration status in the United States; has not attained 18 years of age; and, with respect to whom, there is no parent or legal guardian in the United States, or no parent or legal guardian in the United States available to provide care and physical custody. See 6 U.S.C. §279(g)(2).

Program Foundation

Under the Homeland Security Act of 2002, Congress transferred the care and custody of these minors to ORR from the former Immigration and Naturalization Service (INS) to move away from the adult detention model. In the Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA of 2008), which expanded and redefined HHS’s statutory responsibilities, Congress directed that each child must “be promptly placed in the least restrictive setting that is in the best interest of the child,” subject to considerations of whether the child is a danger to self or others. See 8 U.S.C. § 1232(c)(2).

Program Development

Unaccompanied children are referred to ORR by another federal agency, usually the Department of Homeland Security (DHS). Most children are placed into ORR care because they were apprehended by immigration authorities while trying to cross the border; others are referred after coming to the attention of immigration authorities at some point after crossing the border. HHS plays no role in the apprehension or initial detention of unaccompanied children and HHS is not a party to the child’s immigration proceedings.

ORR’s UC Program has provided care and found suitable sponsors for over 700,000 unaccompanied children. In the first nine years of the UC Program, fewer than 8,000 children were served annually. Since fiscal year 2012 (October 1, 2011 – September 30, 2012), this number has increased significantly, with a total of 13,625 children referred to ORR by the end of FY 2012. The program received 24,668 unaccompanied children’s referrals from DHS in FY 2013, 57,496 referrals in FY 2014, 33,726 referrals in FY 2015, 59,170 in FY 2016, 40,810 in FY 2017, 49,100 in FY 2018, 69,488 in FY 2019, 15,381 in FY 2020, 122,731 in FY 2021, and 118,938 in FY 2023.

Because of the large fluctuations in arrival numbers throughout the year, ORR maintains a mix of “standard” beds that are available year-round, and “temporary” beds that can be added or reduced as needed. This bed management strategy provides the ability to accommodate changing flows in unaccompanied children referrals.
In FY 2023, approximately 76% of all children referred were over 14 years of age, and 61% were boys. In FY 2023, countries of origin of youth in this program were approximately as follows: Guatemala (42%); Honduras (28%); El Salvador (9%); Mexico (8%) and other (13%).

As soon as children enter ORR care, they are put in contact with their parents, guardians, or relatives, if known, and the process of finding a suitable sponsor begins. Most sponsors are a parent or a close family relative living in the United States. While ORR programs are looking for sponsors, children are provided age-appropriate care and wraparound services in one of the 289 facilities and programs in 29 states funded by ORR.

As of March 1, 2024, there are 8,724 unaccompanied children in HHS’ care and the average length of time an unaccompanied child remained in ORR’s care was 27 days. ORR is working to further reduce length of care in ways that do not jeopardize the safety or welfare of the children.

The important work happening in each of the facilities and programs in the ORR network around the country – work ORR has done successfully since 2003 – takes an experienced team of competent, hardworking men and women dedicated to the welfare of the children.

To comply with Congress’ directive to ensure the safety and suitability of potential sponsors for unaccompanied children, sponsors are required to undergo background checks and complete a sponsor assessment process that identifies risk factors and other potential safety concerns. As part of the unification process, potential sponsors must undergo criminal public records check and, in most cases, a sex offender registry check. When there is a safety concern for release to a related sponsor or when considering release to an unrelated sponsor, ORR also conducts background checks on adult household members and individuals identified in a potential sponsor’s care plan. In addition, proposed unaccompanied children sponsors who are not related to the unaccompanied child, or proposed sponsors who are non-immediate family members (i.e. not parents, siblings (including half-siblings), or grandparents) and who have never previously served as the unaccompanied child’s primary caregiver, must be fingerprinted as a safety check. In addition, parents, stepparents, close relatives, and non-sponsor adult household members and adult caregivers identified in a sponsor care plan, could be subjected to fingerprinting under certain circumstances, such as when specific risks to the unaccompanied child have been identified, the unaccompanied child is particularly vulnerable, or a home study has been ordered. The fingerprints are cross-checked with the Federal Bureau of Investigation’s (FBI) National Criminal History Check, state repository records, and includes a search of DHS arrest records. ORR will continue to perform public records checks on potential sponsors, and non-sponsor adult household members and adult caregivers identified in sponsor care plans when there is an identified safety concern, to ensure child safety.

In some instances, ORR also requires a home study before unifying a child with a sponsor. Home studies are mandatory under the TVPRA of 2008 for certain cases identified in law, including for: a child who is a victim of a severe form of trafficking in persons; a special needs child with a disability; where the child has been a victim of physical or sexual abuse under circumstances that indicate that the child’s health or welfare has been significantly harmed or threatened; and where the child’s sponsor clearly presents a risk of abuse, maltreatment, exploitation or trafficking, to the child based on all available objective evidence (see 8 U.S.C. § 1232(c)(3)(B)). Additionally, per ORR policy, a home study is required for any child pending unification with a non-relative sponsor who is seeking to sponsor multiple children or has previously sponsored or sought to sponsor a child and is seeking to sponsor additional children. ORR requires a home study for children who are 12 years and under before unification with a non-relative sponsor.

Once unified with a sponsor, minors are expected to appear for any pending immigration proceedings, and since the beginning of the program, ORR has notified Immigration and Customs Enforcement (ICE) at least 24 hours before and 24 hours after the unification of all unaccompanied children with a sponsor. The notification includes the address of the unaccompanied children, as well as the name of the sponsors.

Program Services
Consistent with federal law, ORR places children while in our care in the least restrictive setting that is in the best interest of the child, considering potential flight risk and danger to self and others. Presently, all ORR-funded state-licensed and influx care facility services include:

- Classroom education
- Mental and medical health services
- Case management
- Recreation
- Unification services that facilitate safe and timely release to family members or other sponsors who can care for them. We conduct home studies prior to unification with a sponsor if safety is in question, and fund follow-up services for at-risk children after their release.

Emergency Intake Sites (EIS) must provide basic standards of care to ensure the child’s physical safety, access to legal services information, and access to emergency clinical services. Due to their emergency nature, EIS may not be able to provide a full range of services to unaccompanied children but are encouraged to offer case management services, educational services, and recreational time for unaccompanied children as practicable.

**Program Responsibilities**

- Making and implementing the best shelter placement decisions for the unaccompanied children.
- Ensuring that the interests of the child are considered in decisions related to the care and custody of unaccompanied children.
- Providing home assessments for certain categories of children.
- Conducting post-release services for certain categories of children.
- Overseeing the infrastructure and personnel of ORR-funded care provider facilities.
- Conducting on-site monitoring visits of ORR-funded care provider facilities and ensuring compliance with ORR national care standards.
- Collecting, analyzing, and reporting statistical information on unaccompanied children.
- Providing training to federal, state, and local officials who have substantive contact with unaccompanied children.
- Developing procedures for age determinations and conducting these determinations.
- Cooperating with the Department of Justice’s Executive Office for Immigration Review to ensure that sponsors receive Legal Orientation Presentations for Custodians (LOPC).
- Ensuring, to the greatest extent practicable, that all unaccompanied children in custody have access to pro bono legal representation or counsel for immigration proceedings.
- Unifying unaccompanied children with qualified sponsors and family members who are determined to be capable of providing for the child’s physical and mental well-being as quickly and safely as possible.

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