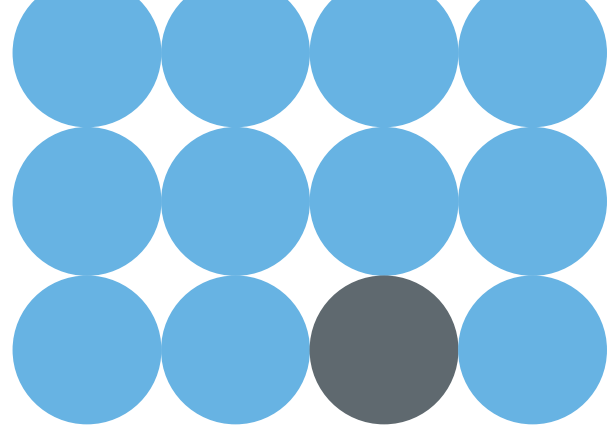


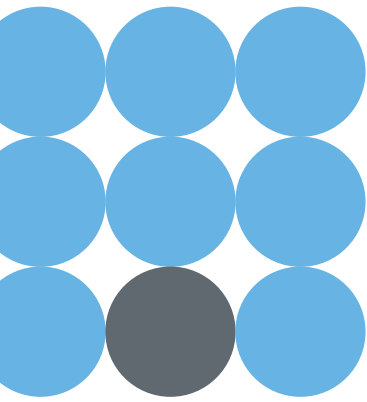
Social Justice Brief



Unaccompanied Migrant Children: Overview & Recommendations

The primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty.





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Unaccompanied Migrant Children: Overview & Recommendations

The nation has been riveted by news that as many as 60,000 children ranging in age from a few months to late teens have migrated to the United States from Central America, particularly El Salvador, Guatemala, and Honduras. The children’s long trek to the southwest borders of the United States has sparked a humanitarian crisis. Unfortunately, this situation is not short-term and is fraught with many dire bio-psychosocial issues that should galvanize social workers and others from the helping professions to collaborate with the U.S. government to alleviate the crisis.

Root Causes Triggering Recent Migration from Central American

Mass migration of minors unaccompanied by adults is not unique to Central America, nor is it a new phenomenon.

Children under the age of 18 traveling without their parents or an adult guardian have always been a part of global migration flows. However, the numbers have grown in recent years. Some of the migrants are asylum seekers fleeing war, gangs, or persecution in their home countries while others are victims of sex trafficking or slavery.

Other children may migrate in search of economic opportunities, to join parents or relatives already living in the destination country, or to flee abusive situations in their home countries (Levinson, 2011).

The scale and intensity of this particular migration may have been triggered by significant precipitating factors. According to interviews of the youths by government officials and non-governmental charitable organizations, it is clear that the core reasons for the recent migration wave involve escaping from the illicit drug trade, violence and poverty.

Unaccompanied Alien Children Encountered by Fiscal Year Fiscal Years 2009-2013; Fiscal Year 2014 through June 15

COUNTRY	FISCAL YEAR 2009	FISCAL YEAR 2010	FISCAL YEAR 2011	FISCAL YEAR 2012	FISCAL YEAR 2013	FISCAL YEAR 2014
EL SALVADOR	1,221	1,910	1,394	3,314	5,990	11,436
GUATEMALA	1,115	1,517	1,565	3,835	8,068	12,670
HONDURAS	968	1,017	974	2,997	6,747	15,027
MEXICO	16,114	13,724	11,768	13,974	17,240	12,146

Statistics Unaccompanied Alien Children (UAC) U.S. Border Patrol

Some observers suggest that the drug cartels seek to flood the United States/Mexico border with thousands of children so that Immigration Customs Enforcement (ICE) patrols will be preoccupied with the migrants and not with drug smugglers (KAST 12 ABC, 2014). Others have said that the cartels are being purely mercenary and manipulative. The price of an illegal one-way ticket to the United States costs between \$3,000 and \$6,000. In some states the cartels even allow families to pay by wire on a monthly plan (Mackenzie, 2014). It is widely known that the drug cartels control human trafficking in the region; they are also a major factor for high murder rates in Central America and the general rise of violence in the region.

Honduran and Salvadoran child migrants are from some of the most violent regions in those countries. For example, San Pedro Sula in Honduras is the world's murder capital, with a homicide rate of 187 homicides per 100,000 inhabitants in 2013 that was driven by a surge in gang and drug trafficking violence. Honduras' overall murder rate was 90 per 100,000 in 2012, the highest in the world. As mentioned earlier, El Salvador has an extraordinarily high homicide rate. Statistically, it has a rate of 70 per 100,000 population which is second in terms of homicides in Latin America (Gonzales, et. al., 2014).

Youth violence and gangs are at a crisis level in Central America. Young men between the ages of 15 and 34 make up the majority of homicide victims, and these young men represent the vast majority of membership of youth gangs. There are more than 900 gangs or *maras* operating in Central America today, with an estimated 70,000 members.

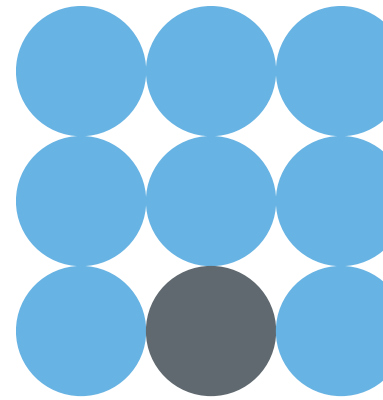
Beginning in the early 1980s, nearly a million Central Americans fled to the United States to escape the violence and hardship of civil conflict in the region (The World Bank, 2014). And as far as poverty is concerned, Honduras, Guatemala and El Salvador are among the poorest nations in Latin America with 30 percent, 26 percent, and 17 percent of their people living on less than \$2 a day, respectively (The World Bank, 2014).

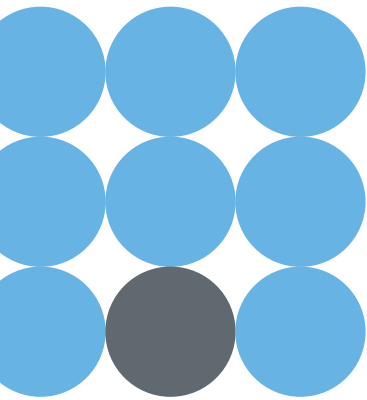
Complexity of the Crisis

What makes the problem of the migration of unaccompanied children so compelling is the suddenness of their arrival. For example, in 2013, 13,532 minors crossed into the Rio Grande sector of the Texas border with Mexico. So far in 2014, that number has risen to 37,621, a 178 percent increase (Department of Homeland Security, ND). State and federal government officials were unprepared to manage such an influx. This is especially true considering many of the children traveled as many as 1,000 miles and presented at the border with multiple bio-psychosocial problems.

While the focus has been on migrant children there has also been a significant number of adults among those crossing the border. These are often the female parents of young children. Dr. Mark Lusk at the University of Texas at El Paso School of Social Work noticed this trend of mothers with children crossing the border in the south central Texas region. Many of these mothers are trying to reunite with relatives already in the United States.

The most immediate needs for these children are food and shelter appropriate for their ages. The need for adequate shelter is acute.





There was no opportunity for pre-planning to receive the children in an orderly fashion. Instead, many of these children were initially placed in Immigration and Customs Enforcement (ICE) detention facilities. These are essentially makeshift facilities that are ill-equipped to meet the housing needs of infants and young children. After the initial detention period, nearly every child spends an average of a month in one of five immigration shelters scattered across Texas, Oklahoma, California and Arizona. In addition, the Department of Health and Human Services (HHS) has approximately 100 permanent Unaccompanied Alien Children (UAC) shelters around the country (Viebeck, 2014).

There is a public health concern. HHS and the Centers for Disease Control and Prevention (CDC) require all unaccompanied migrants receive a medical examination and provide proof of vaccination for measles, mumps, rubella, polio, tetanus, diphtheria, pertussis, haemophilus strains, hepatitis A and B, rotavirus, meningococcus, chicken pox, pneumonia, and seasonal flu (Slate Magazine, 2014). The circumstances around this crisis are not conducive to meeting pre-planned public health standards and protocols. For the most part, ICE has relied on self-reporting about immunization and medical histories during the 48-hour detention period. So far there is no evidence of outbreak of communicable disease among the unaccompanied migrant children or adults. Still applying public health preventive measures such as immunization would be prudent.

Wilberforce Trafficking Victims Act

Perhaps one of the most important factors adding to the complexity of the unaccompanied migrant children issue is the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008. Congress passed the law to combat sex trafficking. The legislation reinforced protections for unaccompanied children by delaying sending them back to their country of origin as long as they were not from Mexico or Canada. More specifically, the Wilberforce Act required children be given access to counsel and the opportunity to appear before an immigration judge who would decide if they should be deported.

The Wilberforce Act also requires HHS to place minors “in the least restrictive setting that is in the best interest of the child” and to explore reuniting children with relatives (Hulce, 2014). Due to the Wilberforce Act, the Obama Administration is limited in its ability to do mass deportations of the children. However, this crisis is occurring during a time of a great deal of partisan politics, especially concerning immigration policy and border security. The Obama Administration is under significant pressure to quickly deport most of these children. Indeed, a number of anti-immigration reform lawmakers are seeking to amend the Wilberforce Act. If these proposed amendments are adopted children from Central America would be treated the same children from Mexico and fast-tracked back to their country of origin (The Guardian, 2014). The Obama Administration has suggested it may be willing to make such amendments to the Wilberforce Act (The Guardian, 2014).

It is crucial to note the fundamental premise of the Wilberforce Act is that unaccompanied migrant children are fleeing conditions in their home countries that are socially untenable and potentially life threatening, such as human trafficking. Therefore, the children are granted temporary refugee status until a judge rules on the case. To weaken the Act would ignore well-known documentation on the dangers these children face in their home countries. In fact, granting the children the equivalency of refugee status does not appear to be a far-fetched solution.

Coordinated Response to the Crisis

While it is important to understand the context and background of a humanitarian crisis such as this, it is far more important to effectively respond to the problem and mitigate the extent of harm it may cause to vulnerable children. This is where social workers have a key role to play and in some circumstances are already playing a vital service delivery role.

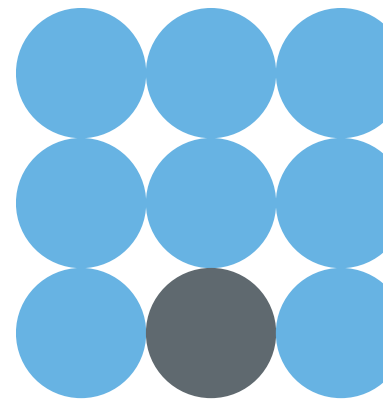
During the initial days of the influx, states such as Arizona and Texas were immediately overwhelmed and lacked resources to house, feed, and provide other essential services to the children. Once it became apparent that the situation was becoming unmanageable, there were several layers of response to the crisis both from government and non-governmental agencies. It became clear the federal government needed to step in.

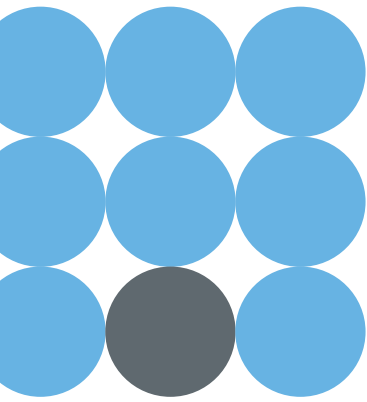
President Obama on June 2 issued *Presidential Memorandum — Response to the Influx of Unaccompanied Alien Children across the Southwest Border*, which directed the Secretary of Homeland Security to establish an

interagency Unified Coordination Group to ensure unity of effort across the executive branch in responding to the humanitarian aspects of the crisis (The White House, 2014).

At the direction of President Barack Obama and the U.S. Department of Homeland Security (DHS), the Federal Emergency Management Agency (FEMA) is coordinating a government-wide response to address the needs of the migrant unaccompanied children. FEMA is coordinating with U.S. Customs and Border Protection (CBP), ICE and HHS, which all have lead roles in addressing the immediate needs of unaccompanied children.

The Administration of Children and Families' (ACF) Office of Refugee Resettlement (ORR) is directly responsible for "providing unaccompanied alien children (UAC) with a safe and appropriate environment as well as client-focused highest quality of care to maximize the UAC's opportunities for success both while in care, and upon discharge from the program to sponsors in the U.S. or return to home country" (Department of Health and Human Services). ORR is partnering with United States Conference of Catholic Bishops/Migration and Refugee Services (USCCB/MRS) and Lutheran Immigration and Refugee Service (LIRS) to assist in the resettlement of the unaccompanied migrant children. President Obama has asked Congress to appropriate \$3.7 billion in emergency funds to cover the cost of services and border security in response to the influx of unaccompanied children. It is uncertain if Congress will approve the president's request.





Recommendations

What seems to be clear is that, unless there is an unanticipated resolution of the root causes of unaccompanied migration of children from Central America, the phenomenon of such mass movements is not likely to end. Therefore, it is critical that federal and state governments and non-governmental organizations (including the National Association of Social Workers) come together to develop strategies, policies and procedures to avert similar crises.

The First Focus Campaign for Children, which is a national bipartisan advocacy organization that works to ensure that children and families are prioritized in federal policy and budget decisions, has developed a set of recommendations for both Congress and the Obama Administration to alleviate crisis. Their recommendations, with which social workers are likely to be in agreement, are as follows:

Best Interest of the Child Standard

All federal agencies that deal with unaccompanied children, including the Department of Homeland Security (DHS), Department of Justice (DOJ), and the Department of Health and Human Services (HHS) should adopt a best interest of the child standard to consistently guide all decisions made regarding the care of unaccompanied children as well as their eligibility for humanitarian relief.

Point of Apprehension

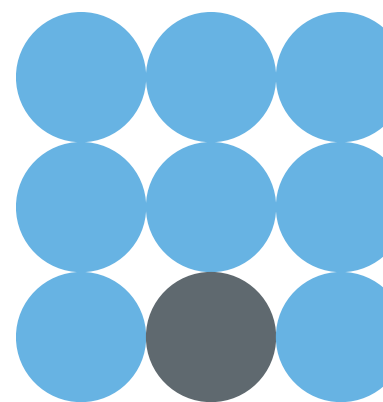
» Congress should increase funding levels to DHS so that adequate resources are available to ensure that children are

receiving proper treatment and services upon apprehension that reflect their unique needs and vulnerabilities.

- » Family detention centers, like the one currently scheduled to open in Artesia, NM, should not be used. Rather, effective and cost-efficient alternatives to detention should be used whenever possible for families. Congress should refuse the requested funds from the Administration to expand family detention centers.
- » Congress should strengthen screening and due process mechanisms for children apprehended by U.S. Customs and Border Protection (CBP). CBP should contract with child serving system experts to screen children along the border so that children are properly evaluated for trafficking and other humanitarian concerns and connected to services. Congress should reject recent proposals by the Administration to change the statutes regarding the process for unaccompanied children from non-contiguous countries in order to expedite removal proceedings as these changes undermine child safety and due process.
- » DHS should ensure that temporary CBP holding facilities and emergency shelters meet the required humanitarian standards for children set forth in the *Flores v. Reno* settlement and the Trafficking Victims Protection Reauthorization Act (TVPRA) and codify these standards in DHS regulations.

In Federal Custody and Post-Release

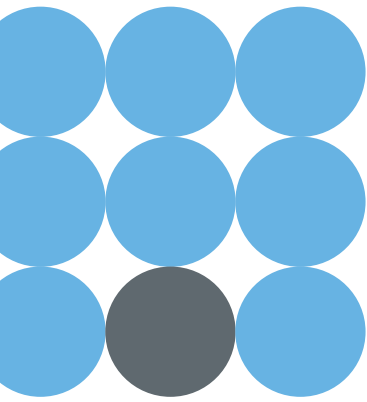
» More funds must be allocated to HHS to ensure that the Office of Refugee Resettlement (ORR) is able to meet the needs of children in its care. On June 10, 2014, Senator Tom



Harkin (D-Iowa) introduced a bill that provides \$1.94 billion to HHS to meet the needs of unaccompanied children. The Labor-HHS bill with this provision has been approved by the subcommittee but is pending passage by the full Senate Appropriations Committee. Congress should move quickly to approve this bill.

- » ORR should ensure that children are placed in community-based care whenever possible, including placement with parent or relative sponsors, and strengthen screening mechanisms for sponsors to ensure children are being placed in safe and appropriate settings. When community-based care is not an option, children should be placed in proper facilities and other settings that are adequately equipped to meet the medical, mental health and other special needs of children, as well as pregnant and parenting teens, rather than placing children in large institutional settings.
- » All unaccompanied children placed into removal proceedings should be provided legal representation and child advocates to increase their chances for obtaining immigration relief and to ensure consideration of their best interests.
- » Congress should pass The Vulnerable Immigrant Voice Act of 2014 (H.R. 4936) by Rep. Hakeem Jeffries (D-NY), which would address the dire need for unaccompanied children to have access to legal counsel.
- » ORR should strengthen and significantly expand the follow-up services provided to children and their sponsors once they are released from federal custody to ensure their safety and well-being. The following are recommended follow-up services:

- › **Legal Services:** In addition to providing legal counsel to all unaccompanied children, ensuring that sponsors and family members obtain custody of the child can help families enroll children in school and obtain any benefits available to them.
- › **Medical and Mental Health Services:** Many children who have made the long journey from Central America to the United States experience significant trauma and should be treated appropriately to promote healthy development. Service providers should follow up with children on a regular basis while removal proceedings are pending.
- › **Reunification Efforts:** Efforts should be made by caseworkers to reunify the child with his or her biological family whenever possible.
- › **Home Studies:** Currently home studies and follow-up home visits are conducted for children who have been trafficked. These efforts should be expanded for unaccompanied children who are placed in the care of sponsors.
- › **Educational Development:** Support should be provided to facilitate enrollment in schools and to provide school with guidance in addressing the unique needs of unaccompanied children. In *Plyer v. Doe*, the U.S. Supreme Court found that public education could not be denied to students based on their immigration status.



Summary

The humanitarian and political implications of the phenomenon of unaccompanied migrant children from Central America are significant. For social workers, the primary focus of a *Call to Action* should be on responding to the complexities of the humanitarian elements of the problem. The social work profession should be vocal and visible in calling on Congress to approve the \$3.75 billion in supplemental funding to provide bio-psychosocial services targeting the nearly 60,000 children and young adults. Social workers should be heartened to know that as of this writing every state in the union has participated in providing housing for the unaccompanied minors until they receive an immigration status hearing.

On the political and policy side of the discussion, there appears to be a solid case for treating Central American migrant children as refugees from gang violence, human trafficking exploitation, and extreme poverty. Therefore, the Wilberforce Act is the most appropriate legislative/policy vehicle for managing the legal aspects of the situation. The social work profession should urge the President and Congress not to amend the Wilberforce Act. It seems clear the Obama Administration would be making a serious error by giving in to political pressure to initiate mass deportation of these children. The dire, often life-threatening situation that the children will be returning to if they are deported far outweighs politics. They at least deserve the due process and refugee protections found in the Wilberforce Act.

As a profession, social workers are currently and should continue to be on the front line in fighting for the best interest of each child and ensuring that their legal rights are protected at every stage of the migration/refugee process. The plight of these children touches upon nearly all areas of interest of the profession including child welfare, health and behavioral health disparities, access to safe housing and the social justice and human rights. It is important that NASW headquarters and chapters join together to ensure that the profession's voice is heard in the move to manage and resolve this potentially tragic humanitarian crisis.

For more information please contact Mel Wilson, Department of Social Justice and Human Rights, at mwilson@naswdc.org. For those who wish to become more involved or more informed about this crisis, the following resources may also be of help:

**Administration for Children and Families
Office of Refugee Resettlement
U.S. Department of Health and Human Services**
370 L'Enfant Promenade SW
Washington, DC 20447
www.acf.hhs.gov/programs/orr

First Focus
110 Vermont Avenue NW, Suite 900
Washington, DC 20005
<http://firstfocus.net/>

National Immigration Law Center (NILC)
1121 14th Street NW, Suite 200
Washington, DC 20005
<http://nilc.org/>

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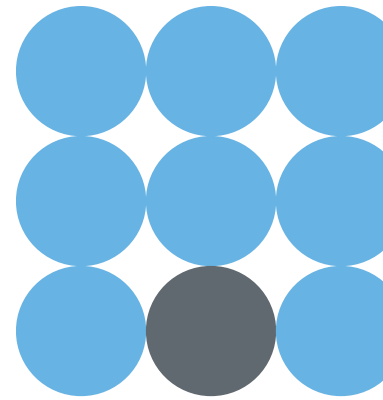
Read Latest Breaking News from Newsmax.com www.newsmax.com/US/border-immigration-cartels-drugs/2014/06/23/id/578693#ixzz374hVc400
Urgent: Should Obamacare Be Repealed? Vote Here Now!

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NASW Resources

NASW » SocialWorkers.org

NASW Foundation » NASWFoundation.org

NASW Press » NASWPress.org

NASW Assurance Services, Inc. » NASWAssurance.org

NASW Center for Workforce Studies » Workforce.SocialWorkers.org

Help Starts Here » HelpStartsHere.org

Social Work Reinvestment Initiative » SocialWorkReinvestment.org

Social Work Policy Institute » SocialWorkPolicy.org

Social Work Portal » SocialWorkers.org/swportal



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