



THE SECRETARY OF HEALTH AND HUMAN SERVICES  
WASHINGTON, D.C. 20201

SEP 22 2014

The Honorable John C. Fleming  
U.S. House of Representatives  
Washington, DC 20515

Dear Representative Fleming:

Thank you for your letter regarding children who come into the United States unaccompanied by an adult parent or guardian.

Section 462 of the Homeland Security Act of 2002 requires that HHS provide services to children placed into our custody by the Department of Homeland Security, as part of the Department of Homeland Security's enforcement of immigration laws. HHS, through the Office of Refugee Resettlement (ORR), has a national network of 58 grantees currently operating 112 shelters for the care of unaccompanied children in 14 states. None of these shelters are in Louisiana.

HHS is legally required to feed, shelter, and provide medical care for unaccompanied children until they are released to an appropriate sponsor. Sponsors are usually parents, relatives, or family friends who can safely care for children while their immigration cases proceed. When a child is released to a sponsor, the child moves to the community in which the sponsor lives.

In your letter you requested clarification on several questions.

1. *How many unaccompanied children have been transferred into the State of Louisiana since January 2014?*

Between January 1, 2014, and July 31, 2014, 1,275 children were released to sponsors in Louisiana. HHS provides regularly updated aggregate information of the number of children released to sponsors in each state on the HHS Administration for Children and Families (ACF) website. Information may be found at <http://www.acf.hhs.gov/programs/orr/programs/ucs/state-by-state-uc-placed-sponsors>.

In addition, HHS has released county level information for all counties where 50 or more children have been released to sponsors. That information is also available on the ACF website. Five parishes in Louisiana have received 50 or more released children. These are East Baton Rouge, Jefferson, Lafayette, Orleans, and St. Tammany.

2. *Has the governor of Louisiana or have any elected officials been notified about the transfer, either in advance or after the fact?*

As noted above, HHS adheres to federal law when releasing children to appropriate sponsors. We also provide data on the number of children released to sponsors by state and by counties where 50 or more children have been released.

HHS has strong policies in place to ensure the privacy and safety of unaccompanied children by maintaining the confidentiality of their personal information. To protect the privacy and confidentiality of this vulnerable population, the names and addresses of their sponsors are also kept confidential. These children are often the victims of traffickers or suffer from other forms of harm during the journey they have undertaken. We cannot release information about individual children that could compromise the child's location or identity within the state.

While we must protect the confidentiality of children and sponsors, HHS does provide notification to the Department of Homeland Security (DHS) of the names and addresses of sponsors both before and after children are released to them. HHS staff also coordinates with the staff at the Executive Office for Immigration Review (EOIR) in the Department of Justice and provides them with the current addresses of sponsors when children are placed.

The sponsor must agree to make the child available for all immigration proceedings. HHS believes that it is critical that unaccompanied children attend their immigration proceedings. As part of the release procedure, HHS notifies potential sponsors of their responsibility for ensuring the minor appears at all proceedings related to the child's immigration case, and the sponsor must agree to cooperate with all immigration proceedings. HHS also informs the sponsor of their responsibility to notify DHS and EOIR of address changes, within ten days of any such change.

- 3. What is the health status of any children transferred? Have there been any cases of infectious disease? Have local health authorities been notified and given time to respond?*

The Centers for Disease Control and Prevention (CDC) reports that children arriving at U.S. borders pose little risk of spreading infectious diseases to the general public. When children come into HHS custody, they are given a well-child exam and childhood vaccinations to protect against communicable diseases. They are also screened for tuberculosis and receive a mental health exam. If children are determined to have any communicable disease or have been exposed to a communicable disease, they are placed in a program or facility that has the capacity to medically isolate the child. The majority of health issues being reported are associated with the difficult journey or the crowded, unsanitary, and environmentally harmful conditions the children endured before they arrived in the U.S. The illnesses the children may be suffering from include scabies, lice, rash illness, respiratory infections, and diarrhea.

A child is never released from HHS care unless the child has been medically cleared by a physician or other medical professional. For a minor to be medically cleared, the minor must not be infectious or contagious to others. HHS coordinates with the CDC to create medical protocols, make recommendations for medical policies and procedures, coordinate tracking data, and provide technical expertise.

4. *Does HHS verify the immigration status of households before placing a child in that household?*

HHS is bound by the agreement reached in *Jenny Lisette Flores, et. al., v. Janet Reno, Attorney General of the United States, et. al., Case No. CV 85-4544-RJK (C.D. Cal. 1996) (Flores Settlement Agreement)*, which requires HHS to release unaccompanied children “without unnecessary delay” to sponsors following an order of preference. Section VI and Exhibit 2 of the *Flores Settlement Agreement* state that the government shall release a minor from its custody to a sponsor in this order of preference:

- A parent;
- A legal guardian;
- An adult relative (brother, sister, aunt, uncle, or grandparent);
- An adult individual or entity designated by the parent or legal guardian as capable and willing to care for the minor’s well-being;
- A licensed program willing to accept legal custody; or
- An adult individual or entity seeking custody, at the discretion of the federal government, when it appears that there is no other likely alternative to long-term detention and family reunification does not appear to be a reasonable possibility.

The Trafficking Victims Protection Act of 2008 (TVPRA 2008) requires that “the proposed custodian is capable of providing for the child’s physical and mental well-being . . . and has not engaged in any activity that would indicate a potential risk to the child.” HHS adheres to the standards in the *Flores* settlement as well as the TVPRA when releasing children to sponsors.

5. *How many transfers to Louisiana does HHS anticipate in the next 3 months? In the next year?*

The number of children arriving at the southwest border has significantly dropped during recent weeks, although it is too early to tell whether this trend will be sustained over time. The decision to release a child to an appropriate sponsor is done on a case-by-case basis. For that reason and because of the unpredictable flow of unaccompanied children, it is not possible to provide an accurate estimate of how many children may be released to sponsors in Louisiana over the next three months or next year.

I hope this information is helpful to you. This response will also be sent to the other members of Congress who signed your letter.

Sincerely,



Sylvia M. Burwell