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UNACCOMPANIED ALIEN CHILDREN

Actions Needed to Ensure Children Receive Required Care in DHS Custody

Why GAO Did This Study

From fiscal years 2009 through 2014, DHS apprehended more than 200,000 UAC, and the number of UAC apprehended in fiscal year 2014 (about 74,000) was more than four times larger than that for fiscal year 2011 (about 17,000). On the journey to the United States, many UAC have traveled thousands of miles under dangerous conditions.

The Violence Against Women Reauthorization Act of 2013 included a provision for GAO to, among other things, review how DHS cares for UAC. This report examines, among other things, the extent to which DHS has developed policies and procedures to (1) screen all UAC as required and (2) care for all UAC as required. GAO reviewed TVPRA and other legal requirements, DHS policies for screening and caring for UAC, fiscal year 2009 through 2014 apprehension data on UAC, and 2014 Border Patrol UAC care data. GAO also randomly sampled and analyzed case files of Mexican UAC whom Border Patrol apprehended in fiscal year 2014. GAO interviewed DHS and HHS officials in Washington, D.C., and at Border Patrol and OFO facilities in Arizona, California, and Texas selected on the basis of UAC apprehension data.

What GAO Recommends

GAO recommends that DHS, among other things, provide guidance on how agents and officers are to apply UAC screening criteria, ensure that screening decisions are documented, develop processes to record reliable data on UAC care, and document the interagency process to transfer UAC from DHS to HHS. DHS concurred with the recommendations.

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What GAO Found

Within the Department of Homeland Security (DHS), U.S. Customs and Border Protection (CBP) has issued policies and procedures to evaluate, or screen, unaccompanied alien children (UAC)—those under 18 years old with no lawful immigration status and no parent or legal guardian in the United States available to provide care and physical custody—as required by the Trafficking Victims Protection Reauthorization Act of 2008 (TVPRA). However, CBP's Border Patrol agents and Office of Field Operations (OFO) officers who screen UAC have not consistently applied the required screening criteria or documented the rationales for decisions resulting from screening. Specifically, under TVPRA, DHS is to transfer UAC to the Department of Health and Human Services (HHS), but may allow UAC from Canada and Mexico to return to their home countries, that is, to be repatriated, if DHS determines that UAC (1) are not victims of a severe form of trafficking in persons, (2) are not at risk of trafficking upon return, (3) do not have a fear of returning due to a credible fear of persecution, and (4) are able to make an independent decision about returning. GAO found that agents made inconsistent screening decisions, had varying levels of awareness about how they were to assess certain screening criteria, and did not consistently document the rationales for their decisions. For example, CBP policy states that UAC under age 14 are presumed generally unable to make an independent decision, but GAO's analysis of CBP data and a random sample of case files from fiscal year 2014 found that CBP repatriated about 93 percent of Mexican UAC under age 14 from fiscal years 2009 through 2014 without documenting the basis for decisions. Providing guidance on how CBP agents and officers are to assess against UAC screening criteria could better position CBP to meet legal screening requirements, and ensuring that agents document the rationales for decisions would better position CBP to review the appropriateness of these decisions.

DHS has policies in place to implement UAC care requirements, such as providing meals, and GAO's observations and interviews at 15 CBP facilities indicate that CBP generally provided care consistent with these policies at the time of GAO's visits. However, DHS does not collect complete and reliable data on care provided to UAC or the length of time UAC are in DHS custody. GAO analyzed available data on care provided to nearly 56,000 UAC apprehended by Border Patrol in fiscal year 2014 and found that agents documented 14 of 20 possible care actions for fewer than half of the UAC (the remaining 6 actions were documented for more than 50 percent of the UAC). Also, OFO has a database to record UAC care, but officers at most ports of entry do not do so. Developing and implementing processes to help ensure agents and officers record UAC care actions would provide greater assurance that DHS is meeting its care and custody requirements. Further, the interagency process to refer and transfer UAC from DHS to HHS is inefficient and vulnerable to errors because it relies on e-mails and manual data entry, and documented standard procedures, including defined roles and responsibilities, do not exist. DHS and HHS have experienced errors, such as assigning a child to two shelters at once, and holding an empty bed for 14 days at a shelter while HHS officials had placed the child elsewhere. Jointly developing a documented interagency process with defined roles and responsibilities could better position DHS and HHS to have a more efficient and effective process to refer, transfer, and place UAC in shelters.