

Changes to Office of Refugee Resettlement Website Foreshadowed Policy Announcements

Website Monitoring Brief

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This brief is accompanied by a blog post, "[Office of Refugee Resettlement Website Alterations Foreshadowed Changes in Policies toward Unaccompanied Children.](#)"

Changes made to the Office of Refugee Resettlement (ORR) website before May 23, 2019, foreshadowed policy changes related to unaccompanied migrant children that were not announced, even to ORR grantees, until May 30, 2019. As with other changes the Web Integrity Project has documented, such as [language alterations](#) on the website of the Office for Civil Rights at the Department of Health and Human Services, some of the changes made to ORR's website foretold later announcements of new policy. In this brief, we document those changes and identify additional website changes that may foreshadow future policy directions.

The Policy Announcement

ORR, an office within the Administration of Children and Families (ACF), which is a part of the Department of Health and Human Services (HHS), provides services to refugees, asylees, and other recently arrived populations. ORR [is responsible for](#) the care of unaccompanied migrant children.

In late May and early June, 2019, HHS announced a series of policy changes related to unaccompanied migrant children in the care of ORR. As reported in the [Washington Post](#), on May 30, 2019, HHS sent [an email](#) to grantees providing ORR-funded care for unaccompanied minors stating that "federal funds released on or after May 22, 2019" could not be used to pay for "recreational or educational activities" for children in their care. On June 5, 2019, a statement from [HHS set out more limitations](#), explaining that ORR had "instructed grantees to begin scaling back or discontinuing awards for U.A.C. (unaccompanied minor) activities that are not directly necessary for the protection of life and safety, including education services, legal

services, and recreation.” The administration explained these changes in terms of funding shortages caused by “[a dramatic spike](#)” in the number of unaccompanied children crossing the border.

Before these policy changes were announced, they were foreshadowed in changes made to the “Unaccompanied Alien Children Frequently Asked Questions” and “Services Provided” pages of the ORR website.

Earlier Website Changes that Foreshadowed the Policy Announcement

By May 18, 2019,¹ ORR had altered the “Unaccompanied Alien Children Frequently Asked Questions” page ([Webpage 1](#)) to remove a large swath of content and to reword the remaining content. Compare Internet Archive Wayback Machine (IAWM) captures from [April 13, 2019](#) and [May 30, 2019](#),²

The content removed from Webpage 1 included content directly related to the policy changes announced on May 30 and June 5, 2019. The questions and corresponding answers to “Do children in HHS care have access to lawyers?” and “What kind of conditions do children in HHS-funded facilities experience?” were removed. The answers referenced the [Flores settlement](#) (which set the standards of care for unaccompanied minor children), “Know Your Rights” presentations, educational services, and recreational activities “such as television and sports.” Also removed from the answers were images of children learning in a classroom, a recreation room with pool and foosball tables, and a bedroom with clean and colorful beds.

In addition to alterations of content that clearly foreshadowed the policy announcements, changes made to Webpage 1 removed references to detained children’s access to telephones and other communications, the provision of mental health care, the use of cheek swabs and DNA testing, media and congressional access to facilities, and sexual abuse. The language used in the content remaining on the page was hardened, with the terms “child” and “children” being replaced with the acronym UAC (standing for “unaccompanied alien child”) in eleven instances.

By [May 23, 2019](#), ORR had altered information related to legal services on another page on the ORR website. From the “Services Provided” page ([Webpage 2](#)), ORR removed introductory text that emphasized that “ORR places children in the least restrictive setting that is in the best interest of the child” and reorganized and re-wrote text under the “Legal Services” heading, removing references to “pro bono representation,” “ORR-funded legal representation” and “court appearance support.” See IAWM captures from [March 26, 2019](#) and [May 23, 2019](#).

In addition to alterations that foreshadowed policy changes, changes made to Webpage 2 echo changes made to Webpage 1. Text related to detained children’s access to telephones was

¹ According to WIP’s internal website monitoring software.

² Webpage 1 was originally sourced from an HHS.gov page titled “[Frequently Asked Questions Regarding Unaccompanied Alien Children](#).” Interestingly, the HHS.gov page [has not been changed](#) to reflect recent policy announcements.

removed, as was a section about physical and mental health care. Language was hardened: 13 references to “UAC” were added to the page, while 14 references to “child” or “children” (not preceded by the term “unaccompanied alien”) were removed.

Other Website Changes: Collateral Damage or Signposts of Future Policy?

On both Webpage 1 and Webpage 2, content relating to access to communication and mental health care were removed.

On the topic of communications, on Webpage 1, images of children using telephones were removed (from the answer to “What kind of conditions do children in HHS-funded facilities experience?”). Also removed from Webpage 1 was the answer to the question “What are the procedures for children separated from their parents to communicate with each other?,” which explained that children communicate at least twice per week with family and as often as needed to their lawyer. From Webpage 2, the sentence “Children also have access to phones to contact family or legal services” was excised from the page.

References to mental healthcare were removed from Webpage 1, which used to list “physical and mental healthcare” as one of the services provided by HHS in the answer to the question “What kind of conditions do children in HHS-funded facilities experience?” On Webpage 2, ORR removed a section called “Physical and Mental Health Care,” which linked to a [still-live page](#) detailing the health screenings, mental health services, and provisions in place to ensure the safety of children.

We do not yet know what to make of the website changes about communications and mental health, which do not fit neatly into the recent policy announcements. Perhaps the removed content was merely collateral damage, taken down because of its close proximity to content directly related to new policy. Alternatively, the removals might be more meaningful, as signposts toward upcoming announcements. In the latter case, these website changes suggest that advocates, grantees, watchdogs, and anyone interested in the treatment of unaccompanied minor children should be watching closely policies relating to access to communication and the provision of mental health services for unaccompanied minor children.

Technical Documentation

Note: This brief links to captures of pages from the Internet Archive's Wayback Machine's (IAWM). IAWM displays time in GMT, but WIP reports dates and times in EST/EDT (GMT -5/GMT -4).

Agency details: According to [its website](#), the Administration of Children and Families (ACF), a part of the Department of Health and Human Services (HHS), “promotes the economic and social well-being of families, children, individuals and communities.” The [Office of Refugee Resettlement](#), within ACF, provides services to refugees, asylees, and other new populations, through its five divisions: Refugee Assistance, Refugee Health, Resettlement Services, Children’s Services (which includes the Unaccompanied Refugee Minors program), and the Office of the Director.

Communications about changes: On June 5, 2019, HHS emailed [a statement](#) that announced policy changes that explain some of the changes documented in this brief.

Known archives: Removed content can be found on the HHS archive at the URL <https://archive-it.org/organizations/745>. ACF archives at the URLs <https://archive.acf.hhs.gov/index.html> and <https://www.acf.hhs.gov/archive> do not contain the removed content detailed in this report.

Webpage 1: “Unaccompanied Alien Children Frequently Asked Questions”

- URL: <https://www.acf.hhs.gov/orr/resource/unaccompanied-alien-children-frequently-asked-questions>
- Changes occurred between [April 13, 2019](#) and May 18, 2019 (according to WIP’s web monitoring software. See IAWM capture from [May 30, 2019](#)).
- An archived version of the page from [November 9, 2018](#), collected at the request of the Department of Health and Human Services, is available on [Archive-It](#).

Webpage 1 Details:

1. Between [April 13, 2019](#) and May 18, 2019, the following changes were made to the “Unaccompanied Alien Children Frequently Asked Questions” page:
 - a. **Removed:** Introductory text and the first sixteen questions, including links and images:

“ACF’s Office of Refugee Resettlement (ORR) in the U.S. Department of Health and Human Services provides funding and oversight to state-licensed shelters throughout the United States for children referred to ORR, by the Department of Homeland Security (DHS). These children are known as unaccompanied alien children (UAC). They include both children who enter the country without their parent or legal guardian and

children who for other reasons have been separated from their parent or legal guardian.

In recent days, there has been a great deal of misinformation about the UAC program. This misinformation and the intentional perpetuation of it is a disservice to the hundreds of caseworkers and care providers who are deeply committed to the quality care and safe and speedy placement of the children with appropriate sponsors. Below are answers to frequently asked questions from community members and media regarding the UAC program.

Q: Why is HHS caring for children separated from their parents?

A: When a child who has entered the country illegally and is not accompanied by a parent or legal guardian, he or she is considered an unaccompanied alien child, and by law must be transferred to the Office of Refugee Resettlement for care and custody.

HHS is legally required to provide care for all children until they are released to a suitable sponsor, almost always a parent or close relative, while they await immigration proceedings. These children can also leave HHS care if they return to their home countries, achieve 18 years of age, or gain legal immigration status. The same procedure applies for children who have been separated from parents due to criminality or jeopardy, or when the parent is detained to await trial or convicted of a criminal offense and must serve time in federal custody.

Q: Is there a system for keeping parents and children connected if they are separated for immigration proceedings?

A: Yes. When adults and minors are apprehended by immigration authorities, their information is entered into government databases by which their cases can be tracked.

HHS has an electronic portal through which we track every child in our care - currently, more than 11,800 minors, including both children separated from their parents and those who arrived alone.

All minors in HHS care are assigned case managers. In the circumstance of children whose parents are in federal custody, the case managers are in contact with the parents' ICE case managers, ICE agents, and other federal law enforcement officials in order to verify their relationship and put the parents and children in communication. U.S. Public Health Service Commissioned Corps officers and other resource staff have been deployed to DHS facilities to assist parents in communicating with their children.

HHS has long provided resources for parents, including those in DHS custody, to communicate with their children in HHS care. Parents or guardians attempting to determine if their child is in HHS care should

contact the [ORR National Call Center](https://www.orrncc.com) at 1-800-203-7001, or via email at information@ORRNCC.com. Personal information will be collected and sent to the HHS-funded facility where the minor is located. [The ORR National Call Center has numerous resources available for children, parents, guardians, and sponsors.](#)

Q: Is HHS confident that this large number of children and parents, dispersed across the country, can be connected and reunited?

A: Yes. The UAC program has a wealth of experience in connecting the unaccompanied minors in its care to their parents and discharging them to parents, other family members, or other suitable sponsors since 2003, and has developed resources and systems for doing so. This has included communication and reunification with parents across the United States and around the world.

Q: What are the procedures for children separated from their parents to communicate with each other?

A: Within 24 hours of arrival, minors are given the opportunity to communicate with a verified parent, guardian or relative living in or outside the United States. Every effort is made to ensure minors can communicate (via telephone or video) at least twice per week. This communication is paid for by HHS.

Safety precautions are in place to ensure that an adult wishing to communicate with a minor is a family member or potential sponsor. Attorneys representing minors have unlimited telephone access and the minor may speak to other appropriate stakeholders, such as their consulate, case coordinator or child advocate.

Q: Do children in HHS care have access to lawyers?

A: Yes. HHS fulfills all requirements of the *Flores* settlement agreement and informs all minors of their rights by providing a Legal Resources Guide, Know Your Rights presentations, and HHS-funded legal services.

Q: How can very young children or children who are non-verbal be reunified with their parents?

A: This challenge is not new for ORR, which has worked since 2003 to discharge the unaccompanied alien children in its care to parents, other relatives or other suitable sponsors. ORR has procedures and systems for identifying the parents of very young children and children who are non-verbal.

Q: What kind of conditions do children in HHS-funded facilities experience?

A: UAC shelters provide housing, nutrition, physical and mental healthcare, educational services, and recreational activities such as

television and sports. They provide an environment on par with facilities in the child welfare system that house American children.

The facilities are operated by nonprofit grantees that are certified by state authorities responsible for regulating such facilities housing children.





Q: What kind of access have the media been given to the HHS-funded facilities?

A: More than 50 separate media outlets have toured HHS-funded UAC facilities. There are restrictions on what kind of media coverage is possible, due to the need for privacy regarding children in our care.

HHS is committed to transparency around our work with children, and has also made available photos and video of facilities housing boys and girls taken recently and dating back to 2016, demonstrating continuity of care across administrations

Q: What kind of access have members of Congress and local officials been given to the HHS-funded facilities?

A: More than 70 members of Congress and more than 60 congressional staff members toured HHS-funded UAC facilities in June 2018. HHS is working with the relevant authorities in Congress to regularly schedule more tours, based on the availability of the facilities and prioritizing the safety and well-being of the children in our care.

Q: Where are HHS-funded UAC facilities located? Are there any near me?

A: HHS currently operates a network of more than 100 shelters in 17 states and has a proven track record of accountability and transparency for program operations, as well as being a good neighbor in the communities where shelters are located. HHS policy is to not publish or

publicize the addresses of shelters to protect the privacy and security of the children and minimize disruption of the facilities.

Q: Does HHS have the capacity to care for an increasing number of children?

A: The UAC program has expanded and contracted over the years, driven by a variety of factors. It is designed to work in this way, and HHS has developed processes for bringing both permanent and semi-permanent UAC housing capacity online as needed.

[HHS has a bed capacity framework with grant and contract mechanisms that allow for a sufficient base number of standard beds.](#) with the ability to quickly add temporary beds, which provides the capability to accommodate changing flows.

HHS continues to update its bed capacity planning to account for the most recently available data, including information from interagency partners, to leverage available funds to be prepared for changing needs.

Given the numbers of unaccompanied alien children referred to its care since Oct. 1, 2017, HHS has increased the number of shelter beds from about 6,500 to about 13,000 beds. To build this capacity HHS re-opened a temporary emergency influx shelter for UAC in Homestead, Florida and established a new temporary emergency influx shelter in Tornillo, Texas.

Q: How are cheek swabs being performed?

A: ORR grantees are swabbing the cheeks of the children in ORR custody, while DHS personnel or field teams deployed by HHS are swabbing the cheeks of the purported parents in ICE custody. The cheek swabs are then sent to a third-party laboratory services provider to complete the DNA testing. The results are then transmitted electronically to the Incident Management Team at the Secretary's Operations Center (SOC), which shares them with the grantees. HHS will use the results only for verifying parentage.

Q: What happens to results after reunification?

A: HHS is using DNA testing – a practice normally used by ORR when regular documentation is not available – to expedite verification of parentage and comply with the court's artificial deadlines. A DNA test is done only when there is a specific purported parent-child relationship that needs to be validated. The DNA sample is only compared to the parent that is believed to be linked to the child. HHS has instructed the testing contractor to destroy both the DNA swabs and the results after verification is complete.

Q: Has ORR used DNA tests before?

A: Yes, it is done routinely in cases where verified documents are unavailable.

Q: Why doesn't HHS just quickly find family members, including parents, and immediately unify or re-unify?

A: We are determined to do everything we can to ensure we release children to safe and suitable sponsors with parents being the clear preference. To do so, we are working with other federal agencies to perform background checks on purported parents. HHS staff (federal field specialists on the ground) together with dedicated staff at grantees' shelters work hard to determine suitability and identity to help to improve the chances that the minors will be well-taken care of when they leave HHS care.

Q: How does HHS go about confirming the identity of parents, and were there adults in the past year who fraudulently claimed to be parents?

A: Reunification with most parents is in the best interest of the child, but proper and careful vetting for child safety is essential. Historically, HHS provided the care of a child in our custody and then performed criminal background checks on a sponsor and other adults in their household, ensured appropriate living arrangements, and confirmed the sponsor's ability to care for a child.

In light of the recent district court ruling, new efforts have had to be made to specifically determine whether a child was separated from a parent at the border and gather additional information about the purported parent.

Some parents have been found unsuitable for reunification because of issues discovered during a criminal background check, including child cruelty, child smuggling, narcotics crimes, robbery convictions, and a warrant for murder."

- b. **Altered:** Text in seven questions (questions 17 - 23), including minor grammatical changes and:
- i. "57" replaced with "45" in the sentence "Children spend fewer than 57 days on average at the shelters and do not integrate into the local community."
 - ii. "UAC" replaced the words "child" or "children" (not in the context of the terms "unaccompanied alien children" or "unaccompanied alien child") in eleven instances.
 - iii. Text in the answer to the question "Are communities safe with these kids in it? There are rumors that some kids are gang members" changed:
From:
"ORR works in close coordination with local officials on security and safety of the children and the community. These children do

not attend local schools while in ORR care. The impact of these shelters on the local community is minimal. Children spend 57 days on average at the shelters and do not integrate into the local community while in HHS custody. They remain under staff supervision at all times.”

To:

“UAC in ORR custody do not integrate into the local community. They are not permitted to visit the local town or area attractions unless supervised by approved staff. Each staff member is required to maintain visibility on UAC at all times and know the exact location of each child.”

- iv. Text in the answer to the question “How can individuals or communities help?” changed and a link to <http://www.wrapsnet.org/Home/RPAgencyContacts> (which returns a page not found error) added:

From:

“Members of the public have expressed interest in donating or volunteering to help unaccompanied alien children. The federal agencies supporting these facilities are unable to accept donations or volunteers to assist the unaccompanied children program. However, there are several voluntary, community, faith-based, or international organizations assisting unaccompanied children. You can find resources and contacts in your state at the following online address:

www.acf.hhs.gov/orr/state-programs-annual-overview”

To:

“The Federal agencies supporting these facilities are unable to accept donations or volunteers to assist the UAC program.

However, there are several voluntary, community, faith-based, or international organizations assisting UAC.

Several refugee resettlement non-governmental organizations (NGOs) in the U.S. are accepting monetary donations and, in some cases, experienced volunteers to assist incoming refugee families, although not specifically unaccompanied alien children, in support of the effort of the U.S. Refugee Admissions Program at the State Department. Information, by state, for refugee resettlement NGOs can be found at the [State Department's Refugee Processing Center \(RPC\) webpage](#) or the [HHS Office of Refugee Resettlement \(ORR\)](#).”

- v. Information on the 2018 financial year appropriation for the unaccompanied children program replaced with information on the 2017 financial year appropriation in the question “How much does it cost to take care of the unaccompanied alien children?”

- vi. Text in the answer to the question “Are children who arrived as unaccompanied alien children ever enrolled in local schools?” changed:

From:

“ORR works in close coordination with local officials on security and safety of the children and the community. These children do not attend local schools while in ORR care. The impact of these shelters on the local community is minimal. Children spend 57 days on average at the shelters and do not integrate into the local community while in HHS custody. They remain under staff supervision at all times.”

To:

“While students are in HHS custody at HHS shelters, they will not be enrolled in the local school systems. UAC in all other care settings receive education at an HHS facility.”

- c. **Removed:** “Prevention of Sexual Abuse Q&As” section, which contained nine questions related to preventing, reporting, and prevalence of sexual abuse in the unaccompanied children program:

“Q: What are the reporting requirements for care providers when they learn of an allegation of sexual abuse in their facility?”

A: ORR has a zero-tolerance policy for all forms of sexual abuse and sexual harassment in all of its care provider facilities. Care providers must report sexual abuse, sexual harassment, or inappropriate sexual behavior that occur in ORR care immediately, but no later than four hours after learning of the allegation. Care providers report this information via a sexual abuse significant incident report (SIR). Care providers must follow state licensing requirements to report allegations of sexual harassment and inappropriate sexual behavior.

Care providers report allegations of sexual abuse to Child Protective Services (CPS), the state licensing agency, HHS/OIG, and the FBI. In the case of a sexual abuse allegation involving minors, CPS or state licensing may cross-report to local law enforcement. If an allegation involves an adult, the care provider must notify local law enforcement.

Q: How does ORR respond to an allegation of sexual abuse?

A: ORR reviews every report of sexual abuse submitted by care providers. When appropriate, ORR issues corrective actions or stops further placement of unaccompanied alien children (UAC) until the care provider addresses identified issues.

Additionally, ORR conducts monitoring activities of all care providers. ORR conducts desk monitoring and site visits routinely. ORR attempts to conduct a formal monitoring visit at least once a year. Most of ORR’s care providers are state licensed and are therefore subject to monitoring by state licensing agencies.

Q: Does ORR have policies that specifically address sexual abuse?

A: Section 4 of the ORR Policy Guide implements ORR's Interim Final Rule (IFR). The Violence Against Women Reauthorization Act of 2013 contains a provision applying the Prison Rape Elimination Act (PREA) to custodial facilities operated by HHS. The IFR adopts the national standards set forth in PREA to prevent, detect and respond to sexual abuse and sexual harassment in ORR care provider facilities. The IFR was published on Dec. 24, 2014, with an implementation date of June 24, 2015.

Q: What if an allegation involves a staff member?

A: If a sexual abuse allegation involves a staff member, the care provider is required by the IFR to suspend the staff member from all duties that would provide the staff member with access to unaccompanied alien children pending investigation.

After investigation by an oversight entity, a care provider facility must take disciplinary action up to and including termination for violating ORR's or the care provider's sexual abuse-related policies and procedures. Termination must be the presumptive disciplinary sanction for staff who engaged in sexual abuse or sexual harassment.

Q: What does ORR do to avoid hiring staff who are at risk of committing sexual abuse?

A: ORR requires all care providers to hire staff who meet minimum requirements and qualifications. All care providers must complete a pre-employment background check on all potential staff, contractors and volunteers to ensure they are suitable to work with minors in a residential setting.

Care providers are prohibited from hiring or using the services of any applicant, contractor or volunteer who has engaged in, attempted to engage in, or has been civilly or administratively adjudicated to have engaged in sexual abuse, sexual harassment, or any type of inappropriate sexual behavior.

Q: What training do staff receive prior to working with youth in ORR care? Is it ongoing?

A: Staff must complete a number of trainings pre-employment. These trainings ensure that staff understand their obligations under ORR regulations and policies. Trainings include communicating with UAC, avoiding inappropriate relationships, reporting procedures, and sensitivity regarding trauma. Care providers must tailor trainings to the unique needs, attributes, and gender of the children at the individual care provider facility. Staff must complete refresher trainings every year or with any policy change. Additionally, ORR provides periodic trainings on topics

related to preventing sexual abuse. ORR also conducts monthly calls to update care providers on issues.

Q: How can children and youth in ORR care report allegations of sexual abuse?

A: Children and youth in ORR care must have access and instructions on how to report sexual abuse, sexual harassment and inappropriate sexual behavior verbally and in writing to care provider staff, child protective services, the UAC Sexual Abuse Hotline, consular officials, and a local community service provider or national rape crisis hotline if a local provider is unavailable.

Q: How can parents, sponsors or other stakeholders report an incident of sexual abuse in ORR care?

A: Any child or third party, including family members, sponsors, legal service providers, or child advocates can report knowledge or suspicion of sexual abuse or sexual harassment at a care provider to the UAC Sexual Abuse Hotline.

The UAC Sexual Abuse Hotline is a toll-free number connected to live representatives, who are bilingual in English and Spanish, 24 hours a day/seven days a week. ORR will immediately notify the care provider, CPS, the state licensing agency, and/or the FBI and the OIG, as appropriate, of any allegations received directly from any child or third party. The care provider must immediately follow up to ensure all children and youth are safe and provided with appropriate services and that all required reports to ORR and outside entities are completed.

Q: How often does sexual abuse occur in ORR care?

A: Care providers report to the FBI any allegations of sexual abuse that are subject to federal reporting laws or could constitute violations of federal law. Sexual abuse is defined at 34 U.S.C. 20341 and in ORR regulations at 45 C.F.R. 411.6. Sexual abuse can include allegations such as touching of the buttocks or allegations of sexual assault, whether it was a minor-on-minor or staff-on-minor allegation. In FY 2017, care providers reported 264 allegations of sexual abuse to the FBI. Of those 264 allegations, 53 allegations involved an adult.”

Webpage 2: “Services Provided”

- URL: <https://www.acf.hhs.gov/orr/about/ucs/services-provided>
- Changes occurred between [March 26, 2019](#) and [May 23, 2019](#).
- An archived version of the page from [November 9, 2018](#), collected at the request of the Department of Health and Human Services, is available on [Archive-It](#).

Webpage 2 Details:

1. Between [March 26, 2019](#) and [May 23, 2019](#), the following changes were made to the “Services Provided” page:
 - a. **Altered:** The language to identify unaccompanied alien children:
 - i. 13 references to “UAC” were added.
 - ii. 14 references to “child” or “children” (not in context of the terms “unaccompanied alien children” or “unaccompanied alien child”) were removed.
 - b. **Removed:** Text under the heading “Services Provided”:

“The Office of Refugee Resettlement is responsible for providing care to children referred by immigration authorities. Consistent with federal law, ORR places children in the least restrictive setting that is in the best interest of the child, taking into account potential flight risk and danger to self and others. The majority of the youth are cared for through a network of state-licensed ORR-funded care providers that provide:

 - Access to Legal services
 - Education
 - Culture, language and religious observation
 - Physical and mental health care
 - Recreation”
 - c. **Altered:** Text under the heading “Access to Legal Services”:

From:
“The Department of Health and Human Services is required to arrange for legal representation for unaccompanied alien children to the greatest extent practicable under the Trafficking Victims Protection Reauthorization Act of 2008, though the law specifically acknowledges that there is no obligation for the government to provide paid counsel.

All children receive the following legal information:

 - the mandated “Know Your Rights” workshop
 - pro bono legal service provider lists
 - notifying the children of Special Immigrant Juvenile Status eligibility guidelines

ORR provides Know Your Rights presentations and legal screenings of unaccompanied alien children to determine potential eligibility for immigration relief. Information about legal services are also maintained and provided upon release. In addition, ORR supports pro bono representation and provides ORR-funded legal representation for children in its long-term foster care program, children released locally to their care provider facility, those seeking voluntary departure, and those imminently facing an order of removal or otherwise without reunification options.

ORR also funds direct representation or court appearance support for unaccompanied children. The contracts focus on providing post-release direct representation in the nine priority cities, children who are released from a shelter locally, and other children according to the solicitation and ORR requirements.

Children also have access to phones to contact family or legal services.”

To:

“All UAC receive the following legal information:

1. Mandated “Know Your Rights” workshop
2. Pro bono legal service provider lists
3. Notification of Special Immigrant Juvenile Status eligibility guidelines

Information about legal services are also maintained and provided upon release.

Under the Trafficking Victims Protection Reauthorization Act of 2008, the Department of Health and Human Services is required to arrange for legal representation for unaccompanied alien children to the greatest extent practicable, but the law specifically acknowledges that HHS has no obligation to pay for counsel.

ORR provides funding for a legal services provider to give “Know Your Rights” presentation and a legal screening to all unaccompanied alien children (UAC) in ORR custody. A screening determines the UAC’s potential eligibility for immigration relief. The contractor provides direct representation for UAC in ORR short-term custody while they await reunification with a sponsor. Direct representation is also provided for UAC in ORR’s long-term care programs, UAC who are released locally in 9 designated cities, UAC seeking voluntary departure or a removal order and UAC who are without reunification options.”

- d. **Added:** Text under the heading “Cultural, Language and Religious Observation”:

Additionally, care providers must make every effort possible to provide comprehensive services and literature in the native language of each unaccompanied alien child; provide on-site staff or interpreters as needed; and allow unaccompanied alien children to communicate in their preferred language when they choose.

- e. **Removed:** The section with the heading “Physical and Mental Health Care”:
 - i. The section contained the text “See the [Health and Safety](#) page for more information.”
 - ii. The section linked to the still live “Health and Safety” page at the URL <https://www.acf.hhs.gov/orr/about/ucs/health-and-safety>.
 - 1. The page touches on topics including health screenings, mental health care, reportable infectious diseases, safety planning, mandatory reporting laws, privacy, post-release services, and the UAC Help Line.