



# Child Welfare Professionals

*February 3, 2022*

Fiscal Year 2021 Report to Congress



**Homeland  
Security**

*U.S. Customs and Border Protection*

# Message from the Deputy Commissioner of CBP

February 3, 2022

I am pleased to submit the following report, “Child Welfare Professionals,” which was prepared by U.S. Customs and Border Protection (CBP).

This report was compiled pursuant to direction in House Report 116-458, which accompanies the Fiscal Year 2021 Department of Homeland Security Appropriations Act (P.L. 116-260). This report details how CBP has addressed child welfare, including the significant progress that CBP has made to enhance its medical support efforts in both scope and scale. These efforts reflect CBP’s commitment to the safety and welfare of persons in custody, particularly at-risk populations such as children.



Pursuant to congressional requirements, this report is being provided to the following Members of Congress:

The Honorable Lucille Roybal-Allard  
Chairwoman, House Appropriations Subcommittee on Homeland Security

The Honorable Chuck Fleischmann  
Ranking Member, House Appropriations Subcommittee on Homeland Security

The Honorable Chris Murphy  
Chair, Senate Appropriations Subcommittee on Homeland Security

The Honorable Shelley Moore Capito  
Ranking Member, Senate Appropriations Subcommittee on Homeland Security

I would be pleased to respond to any questions that you may have. Please do not hesitate to contact my office at (202) 344-2001.

Sincerely,

A handwritten signature in black ink, appearing to read "Troy A. Miller". The signature is fluid and cursive, with a large, sweeping initial "T" and "M".

Troy A. Miller  
Deputy Commissioner  
U.S. Customs and Border Protection

# Executive Summary

CBP places the highest priority on the safety, security, and well-being of persons in custody, with a particular emphasis on child welfare. During the past several years, CBP made significant progress in enhancing its medical support efforts in both scope and scale, including the ongoing adoption of trauma-informed care practices for persons in custody.

CBP takes a multipronged, trauma-informed approach to child welfare for children in custody, including recently expanded availability of onsite child welfare medical professionals and sector-level pediatrician child welfare professionals, as well as the ongoing expansion of child caregivers in CBP facilities holding children.



## Child Welfare Professionals

### Table of Contents

I. Legislative Language.....	1
II. Background.....	2
III. Discussion.....	3
IV. Professional Consultations.....	6
V. Conclusion.....	7
VI. Appendix – Abbreviations.....	8

# I. Legislative Language

This document was compiled pursuant to direction in House Report 116-458, which accompanies the Fiscal Year 2021 Department of Homeland Security (DHS) Appropriations Act (P.L. 116-260).

House Report 116-458 states:

*Migrants—Child Welfare Professionals.*—Within the funds provided in this and prior Acts for new operational support positions, the Committee directs the Department to hire or otherwise obtain the services of state-licensed child welfare professionals with culturally competent, trauma-centered, and developmentally appropriate interviewing skills to provide child welfare expertise and screening services on a full-time basis at each land POE and Border Patrol station along the southern land border. Not later than 60 days after the date of enactment of this Act, CBP shall provide an execution plan for hiring child welfare professionals, to include how the personnel will be deployed in the field and how translation services will be provided.

## II. Background

U.S. Customs and Border Protection (CBP) places the highest priority on the health and welfare of persons in custody and strives to provide appropriate care for such persons, with an emphasis on children in custody. Recognizing the growing need for medical support along the Southwest Border (SWB), CBP proactively worked to expand its medical support efforts significantly during the past several years through extensive coordination and collaboration with internal and external stakeholders, including the CBP Chief Medical Officer and the DHS Chief Medical Officer. This approach is reflected in the CBP Enhanced Medical Support Directive, signed on December 30, 2019. CBP now employs more than 800 medical personnel who provide onsite medical support at more than 70 facilities along the SWB.

In addition to the above, CBP has enhanced its trauma-informed child welfare efforts. In recent years, CBP has been incorporating trauma-informed care principles into its medical support efforts and care for persons in custody, especially children. CBP also continues to enhance its child welfare efforts by hiring more than 250 licensed child welfare medical professionals and 12 pediatrician child welfare professionals, as well as the ongoing contract expansion and hiring of child caregivers to provide onsite, hands-on support to CBP child welfare efforts. CBP continues to consult with internal and external subject matter expert stakeholders, including the DHS Chief Medical Officer and the Flores medical monitor, to inform medical support and child welfare efforts.

<b>Table 1</b>		
<b>Contracted Medical Personnel by Location</b>		
<b>Location</b>	<b>Child Welfare Medical Professionals</b>	<b>Pediatrician Child Welfare Professionals</b>
San Diego	29	2
El Centro/Yuma	24	1
Tucson	33	1
El Paso	48	3
Big Bend	10	0
Del Rio	22	1
Laredo	17	1
Rio Grande Valley	69	3
<b>Total Positions:</b>	<b>252</b>	<b>12</b>
<b>*NOTE* These personnel provide 24-hours-per-day, 7-days-per-week coverage at their assigned locations.</b>		
<b>*NOTE* El Centro/Yuma are combined and cover both sectors.</b>		

### III. Discussion

CBP takes a multipronged, trauma-informed approach to child welfare for children in custody. In recent years, CBP has been adopting trauma-informed child welfare approaches to medical support and care for persons in custody, especially related to children in custody. These efforts have been informed by extensive consultation with internal and external subject matter experts, including the DHS Chief Medical Officer and the Flores medical monitor.

CBP's approach and efforts have been aligned with CBP's frontline national security/law enforcement mission and with its responsibility for short-term processing and holding. CBP's approach is designed to integrate with and to complement child welfare efforts by partners and stakeholders in U.S. Immigration and Customs Enforcement, U.S. Department of Health and Human Services (HHS), and local health and social service systems.

The short-term and transitory nature of CBP processing and holding makes more intensive child welfare interventions or establishment of therapeutic relationships largely inadvisable. CBP's efforts are focused instead on initial assessment, identification of issues of concern, psychological triage, psychological first aid, referral to appropriate parties and stakeholders for further assessment and management as appropriate, and prioritization of transfer to HHS or appropriate parties for more definitive interventions.

CBP's multipronged approach to child welfare includes: awareness and training; field recognition of medical distress; onsite trauma-informed child welfare/medical support by child welfare medical professionals; pediatrician child welfare professional support; and in-person support by child caregivers.

CBP's attention to child welfare starts in the field, where officers and agents identify medical distress and engage CBP emergency medical technicians or activate 911/emergency medical services, as appropriate. CBP has been increasing awareness of trauma-informed child welfare considerations in frontline and medical personnel and is finalizing development of a trauma-informed recognition of medical distress training for frontline officers and agents. In addition, CBP worked with experts to develop trauma-informed care training that is required for all CBP child welfare medical professionals.

At CBP facilities, children receive health intake interviews and medical assessments, which include behavioral health considerations, by qualified child welfare medical professionals, who have received trauma-informed care training. These child welfare medical professionals are certified, licensed, and credentialed to assess and provide care to and referral for children. CBP employs more than 250 of these child welfare medical professionals providing onsite support at more than 70 facilities along the SWB, including any facility that is expected to hold children. These child welfare medical professionals are able to identify issues of concern among children, to perform triage, and to provide appropriate management onsite, including psychological first aid, as well as to coordinate referral for further assessment and management, as appropriate.

As an additional layer of child welfare support, CBP has hired 12 pediatrician child welfare professionals. These pediatrician child welfare professionals have culturally competent, trauma-informed, and developmentally appropriate expertise to advise on systems of care for child welfare support. They provide expert direction, supervision, oversight, and consultation for the more than 250 onsite child welfare professionals related to child welfare support.

In addition, CBP has been expanding the presence of child caregivers as a critical element of child welfare efforts. Child caregivers provide onsite care for children in custody, similar to day care providers. These contractors provide oversight and assistance to unaccompanied children and family unit children by providing basic services to the children in CBP custody. The general duties of these contractors include feeding, bathing, changing diapers/clothes, recreation, and reading. The child caregivers also refer any concerns to CBP officers, agents, or medical personnel for further assessment, management, and referral, as appropriate.

CBP continues to expand these contracts and to hire child caregivers at facilities holding children along the SWB. As of September 30, 2021, CBP has expanded the current contract for state-licensed child caregivers from two sectors (Rio Grande Valley and El Paso, Texas) to include all nine SWB Border Patrol sectors. This contract requires the contractor to provide 24-hours-per-day, 7-days-per-week coverage for 117 child caregiver positions. To cover these positions 24 hours per day, 7 days per week, the contractor is anticipated to hire up to 468 state-licensed child caregivers. The timetable for filling these positions will be dependent upon the hiring capability of the contractor, operational needs of the individual sectors, the hiring process requirements, and other factors. Additional positions in the El Paso and Rio Grande Valley sectors are anticipated to be filled as early as possible. Please see Table 2 for the position breakdown for each sector.

<b>Location</b>	<b>Current Child Caregiver Positions (current contract)</b>	<b>Future Child Caregiver Positions (new contract)</b>	<b>Future Supervisor Positions (new contract)</b>
San Diego	0	5	1
El Centro	0	5	1
Yuma	0	5	1
Tucson	0	5	1
El Paso	14	29	2
Big Bend	0	5	1
Del Rio	0	29	2
Laredo	0	5	1
Rio Grande Valley	29	29	2
<b>Total Positions:</b>	<b>43</b>	<b>117</b>	<b>12</b>



The final area of the CBP approach to child welfare is oversight from CBP's Office of the Chief Medical Officer and the CBP juvenile coordinator. This ongoing oversight, conducted in coordination with the Flores medical monitor, ensures that CBP trauma-informed child welfare efforts are being conducted properly.

Additionally, translation services are made available to the contractors (child caregivers and medical support) through one of the following resources: 1) contractors who speak the child's native language; 2) officers/agents that are certified in the native language of the child; 3) telephonic translations service provided through a separate contract; and 4) online translation services (e.g., Google Translate). All languages are available through one of the resources.

## IV. Professional Consultations

CBP's medical support construct and its trauma-informed approach to child welfare have been developed through regular and ongoing consultation with internal and external subject matter experts, including senior pediatric experts, the CBP Chief Medical Officer, the DHS Chief Medical Officer, the U.S. Coast Guard, HHS, the Centers for Disease Control and Prevention, and court-appointed pediatric experts, such as the Flores medical monitor.

## V. Conclusion

Care for children in CBP's custody is an integral component of the ongoing expansion of medical support efforts along the SWB. CBP proactively has hired more than 250 licensed child welfare medical professionals at CBP facilities holding children to provide trauma-informed assessment, triage, management, referral, and follow-up care as appropriate. In addition, CBP has hired 12 (average of two per sector) pediatrician child welfare professionals to provide additional expertise, supervision, direction, and oversight of child welfare efforts. Furthermore, CBP has taken steps to provide the appropriate care for children in the agency's custody by adding additional contract child caregiver personnel at SWB locations. CBP has expanded the child caregiver contract from 43 to 117 positions, across all nine SWB sectors, to ensure that CBP is meeting the needs of the children in its custody. This further enhances the child welfare considerations of the medical professionals providing support for children in CBP custody. At every point of interaction, and through the ongoing monitoring of children in custody, these efforts are at the forefront and promote their health and welfare.

## Appendix – Abbreviations

<b>Abbreviation</b>	<b>Definition</b>
<b>CBP</b>	U.S. Customs and Border Protection
<b>DHS</b>	Department of Homeland Security
<b>HHS</b>	U.S. Department of Health and Human Services
<b>POE</b>	Port of Entry
<b>SWB</b>	Southwest Border