



# **Referrals from Nongovernmental Organizations**

Fiscal Year 2021

*May 19, 2021*

Fiscal Year 2021 Report to Congress



**Homeland  
Security**

*U.S. Immigration and Customs Enforcement*

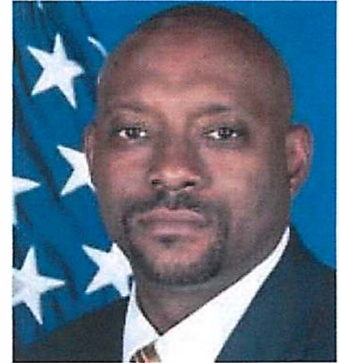
# Message from the Acting Director

May 19, 2022

I am pleased to present the following report, “Referrals from Nongovernmental Organizations,” for Fiscal Year (FY) 2021, which has been prepared by U.S. Immigration and Customs Enforcement (ICE).

This report was compiled pursuant to requirements in the Joint Explanatory Statement accompanying the FY 2021 Department of Homeland Security (DHS) Appropriations Act (P.L. 116-260).

Pursuant to congressional guidelines, 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

Inquiries related to this report may be directed to the ICE Office of Congressional Relations at (202) 732-4200.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Tae D. Johnson', with a long horizontal flourish extending to the right.

Tae D. Johnson  
Acting Director  
U.S. Immigration and Customs Enforcement

# Executive Summary

The Joint Explanatory Statement accompanying the FY 2021 DHS Appropriations Act (P.L. 116-260) directs ICE to consider referrals for enrollment in Alternatives to Detention and case management services from nongovernmental organizations and community partners, and to collaborate actively with these organizations to establish criteria for such referrals, guidelines for submission, and criteria for how ICE will consider such enrollment referrals.

Additionally, the Joint Explanatory Statement also directs ICE to report to the Committees on progress in establishing these guidelines within 60 days of the date of enactment of the Act and quarterly thereafter until the guidelines are finalized, and to submit an annual report on the number of referrals submitted by NGOs and the number of such referrals accepted into ATD programs that utilize case management programs.



# Referrals from Nongovernmental Organizations Fiscal Year 2021

## Table of Contents

I.	Legislative Requirement .....	1
II.	Background .....	2
	Wraparound Stabilization Services.....	3
III.	Results/Data Report/Expenditure Plan .....	7
	A. Current Providers .....	7
	B. Referral Increase .....	9
	C. Participation .....	10
	D. Expenditure Plan.....	15
IV.	Analysis/Discussion.....	16
V.	Conclusion .....	17
	Appendix: Abbreviations .....	18

# I. Legislative Requirement

This report responds to the direction set forth in the Joint Explanatory Statement accompanying the Fiscal Year (FY) 2021 Department of Homeland Security (DHS) Appropriations Act (P.L. 116-260).

The Joint Explanatory Statement states:

*ATD and Case Management Services.*—ICE shall consider enrollment referrals from non-governmental organizations (NGOs) and community partners, and actively collaborate with these organizations to establish criteria for such referrals, guidelines for submission, and criteria for how ICE will consider such enrollment referrals. ICE shall submit a report to the Committees on progress in establishing these guidelines within 60 days of the date of enactment of this Act and quarterly thereafter until the guidelines are finalized.

The Joint Explanatory Statement also states:

*ATD and Case Management Services* - ICE shall submit an annual report on the number of referrals submitted by NGOs and the number of such referrals accepted into ATD programs that utilize case management programs.

## II. Background

Alternatives to Detention (ATD) is a monitoring program that uses technology and case management to improve compliance with release conditions and to facilitate compliance with court hearings and final orders of removal. The ATD program allows noncitizens to remain in their community—contributing to their families and community organizations and, if necessary, concluding their affairs in the United States—as they move through immigration proceedings or prepare for departure.

The ATD Program may be appropriate for a noncitizen who is released pursuant to an Order of Release on Recognizance, an Order of Supervision, a grant of parole, or a bond (unless an immigration judge or the Board of Immigration Appeals has determined custody and did not include ATD as a provision). To be eligible for the ATD program, participants must be at least 18 years of age, be removable from the United States, and be pending or actively in formal immigration removal proceedings or subject to a final order of removal.

ATD is currently available in more than 250 locations nationwide for eligible participants residing within all 25 ICE areas of responsibility (AOR). The program allows U.S. Immigration and Customs Enforcement (ICE) to monitor a portion of nondetained cases more closely. The level of supervision and technology to which an ATD participant is assigned is based upon criteria that includes, but is not limited to, current immigration status, criminal history, compliance history, community or family ties, status as a caregiver or provider, and other humanitarian or medical conditions.

The ATD program is carried out with the support of a government contractor, currently BI Incorporated (BI), who supervises participants through a combination of home visits, office visits, alert response, court tracking, and technology. The contract under which BI operates is called the Intensive Supervision Appearance Program (ISAP), and it is currently in its fourth iteration (ATD – ISAP IV). Under ATD – ISAP IV, ICE Enforcement and Removal Operations (ERO) ATD officers have discretion to determine the frequency of home and office visits, the types of technology used (telephonic, global positioning system (GPS) or SmartLink), and court and alert management to use. Case management levels and technology assignment can be reviewed and adjusted by the ATD officer at any time depending upon changes in a participant's circumstances and compliance. BI case specialists (CS) provide case management for program participants and assess and determine appropriate referrals for program participants to facilitate community stabilization.

While ATD – ISAP IV provides a substantial amount of case management services, a significant number of services and participant needs cannot be fulfilled through the traditional contract.<sup>1</sup> To

---

<sup>1</sup> Under ATD – ISAP, the contractor refers participants to local resources based upon the participant's individual needs. Service referrals under ATD – ISAP include, but are not limited to, assistance with school enrollments, medical care as needed (vaccinations, referrals for emergent care centers, etc.), food assistance, clothing assistance, immigration attorney referrals using the approved Department of Justice list of low- to no-cost attorneys, etc. Any costs incurred using the referred services are not paid for by the U.S. Government. Services provided directly

ensure that participants have access to these services, BI subcontracts with NGOs to provide assistance in fulfilling these needs and to help with participant stabilization. These functions are known as WSS.

## Wraparound Stabilization Services

### 1. *Criteria*

WSS functions are designed for vulnerable populations<sup>2</sup> who have significant challenges and would benefit from additional stabilization services. WSS functions are available at contractor sites, to include 54 locations covering all AORs, and all services are voluntary. WSS screenings for possible need for additional services and education groups are offered to all C-site<sup>3</sup> participants.

### 2. *Services Provided*

WSS provide participants access to a number of services not available under the base ATD – ISAP IV contract. These services are provided by licensed professionals and subject matter experts.

WSS currently include:

- Trafficking Screening
  - Confirms the type, frequency, and complexity of trauma;
  - Completes trauma symptoms checklist or post-traumatic stress disorder index for adults or adolescents as appropriate;
  - Screens participants using a trafficking identification tool;
  - Determines a participant's eligibility for legal relief and services if the screening reveals that the participant currently is being trafficked or has a history of being trafficked; and
  - Provides a quarterly report of the type, frequency, and complexity of trauma reported by the participant.
- Trauma Informed Individual Therapy
  - Provides a course of treatment using a clinical trauma treatment model;
  - Develops and provides weekly individual therapy sessions; and
  - Provides a quarterly report of individual branch site progress and accumulated branch site progress with a focus on symptom reduction.
- Trafficking Group Education – The group sessions include no more than 10 participants per session. The education sessions include the following topics:
  - Introduction to human trafficking;
  - Forms of exploitation (labor trafficking, sex trafficking);

---

through wraparound stabilization services (WSS) include trauma-informed individual therapy, human trafficking screening, trafficking group education, family therapy, and individual rehabilitation.

<sup>2</sup> Examples of vulnerable populations include, but are not limited to, victims of human smuggling/trafficking, victims of significant or violent crimes, those suffering from post-traumatic stress disorder, etc.

<sup>3</sup> C-sites are BI contractor-leased locations that have their own office space, equipment, etc. They are not co-located with the government as they are in G-sites.

- Human trafficking and human smuggling;
- Victim populations;
- Recognizing the signs of human trafficking; and
- Questions and answers (regarding human trafficking and human smuggling).
- Family Therapy
  - Development of treatment plan; and
  - Therapeutic interventions provided to the participants and their family members consistent with the participants' treatment plans.
- Individual Rehabilitation
  - Development of treatment plan; and
  - Assistance with maintaining or restoring the participant's daily living skills, medication compliance, and leisure and community activities in accordance with the participant's treatment plan.
- Mental Health Screening and Evaluation<sup>4</sup>/Supplemental Services Evaluations
  - Mental health screening;
  - Development of treatment plan; and
  - Assistance with accessing medical, educational, social, pre-vocational, vocational, rehabilitative, or other community services in accordance with the participant's treatment plan.
- Parenting Education Sessions
  - After the introduction orientation, parents will be provided with seven 60-minute educational sessions.
  - The parenting education programs aim to bridge this cultural gap, giving migrant parents practical skills to take care of their children effectively and positively.
  - These programs also will help parents process their own stress and trauma in ways that do not impact their children.
- 90-Minute Child Abuse Prevention Orientation
  - Provides migrant parents with detailed guidance to understand child-development, to respond appropriately to their child's needs, and to cope with the challenges of parenting.
  - This first orientation will provide caregivers with knowledge, resources, and support to develop parenting skills to enhance child and family well-being.
  - This introductory session also can help parents or caregivers learn the tools and strategies to provide a positive and nurturing home environment where their children will thrive physically, emotionally, and cognitively.
- Repatriation Support Services - The government will refer participants, at its discretion, with final orders of removal for these services:
  - Repatriation Support Specialists will meet (virtually or in person) with participants weekly, biweekly, and/or monthly depending on need and timing as approved by ERO.

---

<sup>4</sup> HQ-ATD is using a contract modification to change Mental Health Screening and Evaluation (MHSE) to Supplemental Services Evaluation (SSE). The former language carries a stigma and suggests that there is something 'wrong' with the participant. Further, HQ-ATD will be working with BI and subcontractors/NGOs to expand services intended to be provided beyond mental health.



- Provide psycho-social support to families as they complete tasks needed to implement departure plans to reduce anxieties about returning to their home country.
- Assist families with questions they may have throughout the departure process.
- Provide information including connections for services available to participants in their country of origin to assist with a successful return.
- Assist families with locating family/friends in their home country, where needed, who may assist the family with reintegration.
- Work with Consulates (if applicable) to provide information-sharing presentations to inform participants of the return process and to provide information regarding resources in their home country.

### 3. *Challenges*

Since ICE first implemented WSS as a contract modification to the ATD – ISAP III contract, several challenges have prevented both higher referrals for WSS and further engagement in service offerings for participants. The biggest single inhibitor to more referrals is the NGO community’s lack of resources necessary to handle all potential referrals. While the NGOs continue to expand through more locations and more hiring, they are only able to handle a fraction of new participants assigned to ATD – ISAP. Other challenges include:

- The Coronavirus Disease 2019 (COVID-19) pandemic: Because of state limitations on in-person gatherings in response to COVID-19, CSs and NGOs were unable to provide contractual services to participants. Many services were provided only in a face-to-face environment in office settings or groups. The WSS and case management services provided by ICE Headquarters (HQ)–ATD, BI, and the NGOs largely had to shift over time from in-person to virtual. The transition to the virtual environment was both time-consuming and challenging, specifically for services like residence verifications and ensuring that participant needs<sup>5</sup> were being met.
- Transparency: The NGOs providing WSS were concerned that their concerns were not being raised through the contractor or that they were not being given all pertinent information. Beginning in April 2021, to streamline communication between all stakeholders and to provide clarification on contract matters, HQ–ATD began participating in biweekly partner calls led by BI, which included NGO subcontractors. These calls promote information-sharing and better communication among the stakeholders and are intended to facilitate a smoother referral process and to explore a wider variety of services for participants. ICE HQ–ATD was able to address these concerns and to help build stronger working relationships.
- Messaging program capabilities: Initially, ICE was unable to message properly the full menu of available services under this program. In an effort to devote specific resources to program requirements of the specialized Extended Case Management Services (ECMS), ICE HQ–ATD began cross-training all ATD monitoring officers (AMO) to be able to message and apply the concepts of the ECMS nationwide.

---

<sup>5</sup> When conducting home visits, CSs can verify electricity, heat, air conditioning, running water, food, clothing, etc. This is much harder to do virtually.

- Cumbersome identification and referral process: Because of a substantial increase in program participants without a proportional increase in resources to manage the population, it became increasingly challenging to identify and refer participants for appropriate evaluations and services. To ensure that all new participants are given an appropriate evaluation for supplemental services, ICE HQ-ATD currently is developing guidance to refer all new participants automatically for an evaluation rather than wait for the CS to identify a need.

### III. Results/Data Report/Expenditure Plan

#### A. Current Providers

WSS functions are provided in the following locations, as of September 30, 2021:

WSS Provider	Location	Total Number of Locations
<b>Endeavors</b>	Atlanta, GA	27
	Bronx, NY	
	Charleston, SC	
	Charlotte, NC	
	Chicago, IL	
	Dallas, TX	
	El Paso, TX	
	Fort Myers, FL	
	Gadsden, AL	
	Houston, TX	
	Indianapolis, IN	
	Los Angeles, CA	
	Manhattan, NY	
	Miami, FL	
	Newark, NJ	
	Omaha, NE	
	Orlando, FL	
	Provo, UT	
	Queens, NY	
	Richmond, VA	
	Salt Lake City, UT	
San Antonio, TX		
San Bernardino, CA		
San Francisco, CA		
Santa Ana, CA		
South Houston, TX		
Ventura, CA		
<b>Bethany Christian Services</b>	Atlanta, GA	20
	Bakersfield, CA	
	Boston, MA	
	Bronx, NY	
	Chicago, IL	
	Delray, FL	
	Dover, DE	
	Grand Rapids, MI	
	Hartford, CT	

<b>WSS Provider</b>	<b>Location</b>	<b>Total Number of Locations</b>
	Los Angeles, CA	
	Manhattan, NY	
	Marlton, NJ	
	Miami, FL	
	Newark, NJ	
	Orlando, FL	
	Philadelphia, PA	
	Providence, RI	
	Queens, NY	
	San Bernardino, CA	
	San Diego, CA	
<b>Lutheran Social Services</b>	Atlanta, GA	10
	Baltimore, MD	
	Detroit, MI	
	Grand Rapids, MI	
	Manassas, VA	
	Omaha, NE	
	Richmond, VA	
	Salisbury, MD	
	Silver Spring, MD	
Washington, DC		
<b>U.S. Conference of Catholic Bishops</b>	Houston, TX	8
	Los Angeles, CA	
	Louisville, KY	
	Miami, FL	
	Newark, NJ	
	Salt Lake City, UT	
	San Antonio, TX	
	San Diego, CA	
<b>International Institute of Los Angeles</b>	Los Angeles, CA	3
	San Bernardino, CA	
	Santa Ana, CA	
<b>Stars Behavioral Health Group</b>	Los Angeles, CA	2
	Santa Ana, CA	
<b>Survivors' Pathway</b>	Miami, FL	1
<b>Project Help</b>	Fort Myers, FL	1
<b>North Star Family Center</b>	Fresno, CA	1
<b>Family Success</b>	Gadsden, AL	1
<b>Total Service Locations</b>		<b>74</b>

## B. Referral Increase

In FY 2021, ICE saw a 1,281-percent increase in the total number of referrals, as compared to FY 2020. FY 2021 also has seen the addition of 24 new offices referring participants to WSS that made no referrals in FY 2020. Of the 21 offices that made referrals in FY 2020, 10 have seen a percent change of more than 1000 percent from year to year - Delray, Los Angeles, Louisville, Manassas, Miami, Orlando, Salt Lake City, San Antonio, South Houston, and Washington, D.C. The year-over-year increase of almost ten thousand referrals between FY 2020 and FY 2021 can be attributed, in part, to new offices referring participants to NGOs, as well as these high-performing offices.

<b>Office Totals by Fiscal Year<sup>6</sup></b>				
<b>Office</b>	<b>FY 2020</b>	<b>FY 2021</b>	<b>Total</b>	<b>Percent Increase</b>
Atlanta	84	636	720	657%
Bakersfield	-	852	852	-
Baltimore	33	189	222	473%
Boston	30	293	323	877%
Charleston	-	282	282	-
Charlotte	-	247	247	-
Chicago	-	386	386	-
Dallas	-	230	230	-
Delray	16	512	528	3,100%
Detroit	-	12	12	-
Dover	-	216	216	-
El Paso	-	100	100	-
Fort Myers	-	50	50	-
Fresno	-	363	363	-
Gadsden	-	296	296	-
Grand Rapids	114	130	244	14%
Hartford	23	225	248	878%
Houston	48	185	233	285%
Indianapolis	-	37	37	-
Los Angeles	68	752	820	1,006%
Louisville	2	90	92	4,400%
Manassas	39	470	509	1,105%
Marlton	36	111	147	208%
Miami	116	2,194	2,310	1,791%
Newark	46	149	195	224%
NY Bronx	-	192	192	-
NY Manhattan	-	137	137	-
NY Queens	-	186	186	-
Omaha	111	317	428	186%
Orlando	14	351	365	2,407%

<sup>6</sup> WSS began February 2020. The numbers were reported by BI on October 1, 2021.

<b>Office Totals by Fiscal Year<sup>6</sup></b>				
<b>Office</b>	<b>FY 2020</b>	<b>FY 2021</b>	<b>Total</b>	<b>Percent Increase</b>
Philadelphia	45	301	346	569%
Providence	-	40	40	-
Provo	-	47	47	-
Richmond	-	247	247	-
Salisbury	-	46	46	-
Salt Lake City	7	298	305	4,157%
San Antonio	16	242	258	1,413%
San Bernardino	-	133	133	-
San Diego	-	109	109	-
San Francisco	-	93	93	-
Santa Ana	-	139	139	-
Silver Spring	49	280	329	471%
South Houston	20	230	250	1,050%
Ventura	-	263	263	-
Washington, D.C.	31	433	464	1,297%
<b>Total</b>	<b>948</b>	<b>13,091</b>	<b>14,039</b>	<b>1,281%</b>

### C. Participation

Participation in WSS historically has been initiated by a participant’s BI CS, who identified any needs or concerns that could not be addressed through traditional ATD – ISAP IV capabilities. Upon the identification of need(s), the CS submitted a recommendation for an MHSE/SSE to the ECMS AMO with the oversight of the ECMS Section Chief for review and approval of the request. The receiving ECMS AMO reviewed for applicable recommendations as defined by the contract as well as for case accuracy and progress before endorsing the treatment plan. Upon approval, the CS coordinated the initial MHSE/SSE with the appropriate local NGO. After evaluating the participant, the NGO then provided the recommendation(s) for services under WSS to the CS, who subsequently requested approval for the services. The CS sent the recommendation to the ECMS AMO for review and approval/denial. Upon approval, the CS performed all coordination with the appropriate NGO(s) for the services to be provided.

ICE now is working to streamline the above process to respond to the significant increase of individuals and families crossing the southern land border, and to ensure that services are provided as quickly as possible. Specifically, ICE is undertaking a contract modification to ensure that all participants who are enrolled into a C-site<sup>7</sup> or a G-site<sup>8</sup> automatically are provided with the MHSE/SSE referral.

<sup>7</sup> C-Sites are standalone facilities operated by the contractor to monitor participants enrolled in the ATD program. C-Site participants are assigned to a contractor CS who performs case management, including home and office visits.

<sup>8</sup> G-Sites are locations where the contractor works within the local ERO office. G-Sites are limited to a capacity of 250 participants, with two CSs who perform the same functions of a C-Site CS.

For FY 2021, 10,185 individuals were referred to 13,091 services. Approximately 96 percent of participants referred for WSS have utilized the services. It is important to note that participants in WSS most likely will be referred to more than one service, and an individual may be counted twice or more in the count of total referrals, but still is only one unique individual. For example, an individual who initially attends an SSE may be referred later to Individual and Family Therapy. Thus, the total referral count likely will exceed the total number of individuals referred for services.

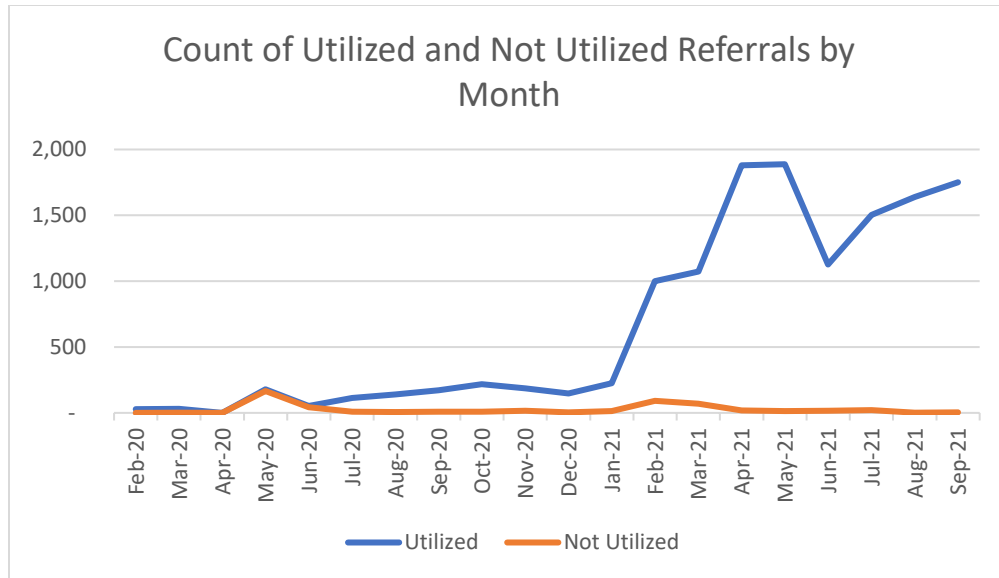
The following table and graph show the number of utilized and not-utilized referrals by year and month since February 2020:

<b>Referrals by Status Over Time<sup>9</sup></b>				
<b>Month/Year<sup>10</sup></b>	<b>Utilized</b>	<b>Not-Utilized</b>	<b>Total</b>	<b>Percent Utilized</b>
February 2020	28	-	28	100%
March 2020	30	2	32	94%
April 2020	-	-	-	0%
May 2020	180	166	346	52%
June 2020	53	43	96	55%
July 2020	114	9	123	93%
August 2020	140	7	147	95%
September 2020	171	8	179	96%
October 2020	217	9	226	96%
November 2020	187	16	203	92%
December 2020	147	4	151	97%
January 2021	226	13	239	95%
February 2021	1,000	91	1,091	92%
March 2021	1,072	70	1,142	94%
April 2021	1,879	19	1,898	99%
May 2021	1,888	14	1,902	99%
June 2021	1,127	15	1,142	99%
July 2021	1,503	21	1,524	99%
August 2021	1,640	2	1,642	100%
September 2021	1,752	5	1,757	100%
<b>Total</b>	<b>13,354</b>	<b>514</b>	<b>13,868</b>	<b>96%</b>

It is important to note that for the April-June 2020 timeframe, while WSS were paused because of the COVID-19 pandemic, NGOs were developing solutions to create a “telehealth”-style service capability to continue providing services.

<sup>9</sup> Includes Human Trafficking Education, which doesn't require ICE approval. Pending status excluded. Month/Year based on Assigned Date.

<sup>10</sup> WSS functions were suspended early in the beginning of the COVID-19 pandemic before resuming in late May 2020.



The following table is a breakdown of referrals by legal stage (prior to or following an order of removal) for FY 2021:

Unique Referrals by Legal Stage		
Legal Stage	Count	Percent
Pre-Order <sup>11</sup>	8,690	85.32%
Post-Order	1,120	11.00%
Appeal	373	3.66%
Unknown	2	0.02%
<b>Total<sup>12</sup></b>	<b>10,185</b>	<b>100.00%</b>

<sup>11</sup> Approximately 85 percent of WSS referrals are Pre-Order participants at the time of first assigned date.

<sup>12</sup> Unique count of participants based on oldest assigned date.



The following table is a breakdown of unique referrals by compliance<sup>13</sup> with release conditions, court hearings, and final orders of removal through FY 2021:

Total Unique Referrals by Compliance		
Compliance	Count	Percent
Success	1,494	88.88%
Failure	187	11.12%
Absconder <sup>14</sup>	[165]	[9.82%]
<b>Total<sup>15</sup></b>	<b>1,681</b>	<b>100.00%</b>

The following table shows referrals utilized by compliance for FY 2021:

Unique Utilized Referrals by Compliance		
Compliance	Count	Percent
Success	1,425	89.34%
Failure	170	10.66%
Absconder	[151]	[9.47%]
<b>Total</b>	<b>1,595</b>	<b>100.00%</b>

The following table shows not-utilized referrals by compliance for FY 2021:

Unique Not-Utilized Referrals by Compliance		
Compliance	Count	Percent
Success	64	79.01%
Failure	17	20.99%
Absconder	[14]	[17.28%]
<b>Total</b>	<b>81</b>	<b>100.00%</b>

<sup>13</sup> This compliance rate is based upon a final determination made by ICE when closing out the noncitizen participant's case that no longer requires participation. While there may be missteps by a participant along the way that suggest noncompliance (failing to charge a GPS unit, missing a scheduled visit, etc.), this is the overall determination. Factors considered include, but are not limited to, complying with release conditions, attending court hearings, and departing the United States if so required.

<sup>14</sup> Absconder is a subset of failure. An absconder is a noncitizen participant who is not complying with requirements and who cannot be located by ICE and/or the contractor. A noncitizen participant who is noncompliant may not be complying with release conditions (fails to charge their unit, fails to check in, refuses to attend scheduled appointments) but can be located by ICE and/or the contractor. At that time, ICE has the option to continue with ATD participation as is, to increase or decrease ATD participation to include program termination, or to detain.

<sup>15</sup> Unique count of participants based on oldest assigned date. Terminations only. Pending Status Excluded.

The following table shows referrals broken down by provider for FY 2021:<sup>16</sup>

Referrals by Provider (NGO)				
Provider	Not-Utilized Referrals	Utilized Referrals	Total Referrals	% Share of Total Utilized Referrals
Bethany Christian Services <sup>17</sup>	110	5,338	5,448	42%
Endeavors	105	4,047	4,152	32%
Family Success	1	105	106	1%
International Institute of Los Angeles	2	40	42	<1%
Lutheran Social Services	13	1,634	1,647	13%
North Star Family Center	-	363	363	3%
Project Help	-	20	20	<1%
Stars Behavioral Health Group	13	271	284	2%
Survivors' Pathway	-	153	153	1%
U.S. Conf. of Catholic Bishops	35	667	702	5%
<b>Total</b>	<b>279</b>	<b>12,638</b>	<b>12,917</b>	<b>100%</b>

The following table is a breakdown of referrals by type of service for FY 2021:<sup>18</sup>

Type of Service	Not-Utilized	Utilized	Total Referrals	% Share of Total Utilized Referrals
Child Abuse & Prevention	-	11	11	<1%
Family Therapy	5	177	182	1%
Human Trafficking Education	46	732	778	6%
Individual Rehabilitation	5	269	274	2%
Individual Therapy	19	1,759	1,778	14%
SSE <sup>19</sup>	192	9,094	9,286	72%
Trafficking Screening	12	596	608	5%
<b>Total</b>	<b>279</b>	<b>12,638</b>	<b>12,917</b>	<b>100%</b>

Upon further analysis, of the 9,094 SSEs that were utilized by participants, 1,929 led to later utilization of other services (21.3 percent). Generally, the contractor or NGO identifies a concern and refers the participant for an initial SSE, and then the participant may get more targeted referrals. Procedurally, however, not all WSS referrals start with an SSE and not all utilized SSEs lead to other referrals.

<sup>16</sup> Excludes Pending Status.

<sup>17</sup> The greatest number of referrals during FY 2021 has been to Bethany Christian Services, an NGO that currently services the second-most locations.

<sup>18</sup> Excludes Pending Status.

<sup>19</sup> The majority of referrals has been for SSEs.

## D. Expenditure Plan

<b>WSS Funds Spent by Fiscal Year (rounded to nearest dollar)</b>			
<b>Service Type</b>	<b>FY 2020 Gov't</b>	<b>FY 2021 Gov't</b>	<b>Total</b>
Trafficking Screening	\$2,043	\$29,646	\$31,689
Trauma-Informed Individual Therapy	\$111,442	\$2,320,982	\$2,432,424
Trafficking Group Education	\$750	\$23,629	\$24,379
Family Therapy	\$6,132	\$80,044	\$86,176
Individual Rehabilitation	\$40,170	\$299,886	\$340,056
Collateral Service	\$71	-	\$71
Targeted Case Coordination	\$355	-	\$355
Supplemental Services Evaluation	\$58,538	\$686,902	\$745,440
<b>Total</b>	<b>\$219,501</b>	<b>\$3,441,089</b>	<b>\$3,660,590</b>

### **ISAP III Services No Longer Used**

Collateral Service (no longer used)	\$71.00	\$0.00	<b>\$71.00</b>
Targeted Case Coordination (no longer used)	\$355.34	\$0.00	<b>\$355.34</b>
<b>Total ISAP III (not used anymore)</b>	<b>\$426.34</b>	<b>\$0.00</b>	<b>\$426.34</b>

The following table is the amount of WSS spending by contract for FY 2021:

<b>Contract</b>	<b>WSS spending</b>
ISAP IV	\$3,584,981.69
ISAP III	\$75,607.71
<b>Total</b>	<b>\$3,660,589.40</b>

## IV. Analysis/Discussion

While ICE is intent on ensuring that all participants have the opportunity to address their immigration claims and concerns while moving through the immigration court process, ICE also is interested in ensuring that those individuals and families who have particular needs, whether social, emotional, or familial, are matched with the appropriate resources. While WSS has great potential to meet participant and family needs, ICE does not have enough data yet to determine whether or not WSS assists participants in improving compliance rates with court hearings, immigration obligations, or compliance with final orders of removal. ICE currently is developing metrics and methodologies to conduct comparative analyses that cover the lifespan of an immigration case, which can take several years.

**WSS vs. Non-WSS  
Absconder Counts (2/1/2020 – 9/30/2021)**

Absconder Count	WSS Referred		Non-WSS	Overall
	Not-Utilized	Utilized		
Absconder	15	191	6,386	6,592
Non-Absconder	74	1,470	32,485	34,029
<b>Total</b>	<b>89</b>	<b>1,661</b>	<b>38,871</b>	<b>40,621<sup>20</sup></b>

Data from ISAP IV Participants Report from BI, data as of 9/30/2021 filtered for only data through FY 2021.

Data from WSS Referrals from BI, data as of 10/3/2021 filtered for only data through FY 2021.

**WSS vs Non-WSS  
Absconder Rates (2/1/2020 – 9/30/2021)**

Absconder Rate	WSS Rates		Non-WSS	Overall Rate
	Not-Utilized	Utilized		
Absconder	16.85%	11.50%	16.43%	16.23%
Non-Absconder	83.15%	88.50%	83.57%	83.77%

Data from ISAP IV Participants Report from BI, data as of 9/30/2021 filtered for only data through FY 2021.

Data from WSS Referrals from BI, data as of 10/3/2021 filtered for only data through FY 2021.

---

<sup>20</sup> This is the total number of absconders in 2/1/2020 – 9/30/2021 in the ISAP program. This includes participants receiving WSS services.

## V. Conclusion

As stated previously, ICE looks forward to working with its partners to expand and improve referrals for enrollment in ATD and case management services. Several steps were taken to streamline the referral process, to broaden service offerings, and to increase not just an individual's ability to comply with his/her release conditions, but also his/her access to needed services. Due to the current rate at which cases are processed through immigration court, it may be several years before ICE is able to draw a truly comparative conclusion and to determine whether WSS are appropriate for long-term success.

## Appendix: Abbreviations

<b>Abbreviation</b>	<b>Definition</b>
AMO	ATD Monitoring Officer
AOR	Area of Responsibility
ATD	Alternative to Detention
BI	BI Incorporated
COVID-19	Coronavirus Disease 2019
CS	Case Specialist
DHS	Department of Homeland Security
ECMS	Extended Case Management Services
ERO	Enforcement and Removal Operations
FY	Fiscal Year
GPS	Global Positioning System
HQ	Headquarters
ICE	U.S. Immigration and Customs Enforcement
ISAP	Intensive Supervision Appearance Program
MHA	Mental Health Assessment
MHSE/SSE	Mental Health Screening and Evaluation/Supplemental Services Evaluation
NGO	Nongovernmental Organization
WSS	Wraparound Stabilization Service(s)