JOINT BASE SAN ANTONIO - LACKLAND UNACCOMPANIED ALIEN CHILDREN

May 21, 2014

Overview:
- You will be met by Ms. Jody Deknikker, Acting Deputy of Operations, 502nd Air Wing at the Valley Hi Gate and be escorted to the UAC facility.
- You are visiting the recently established housing facility for Unaccompanied Alien Children (UAC) on board Joint Base San Antonio – Lackland (JBSA-L) located near San Antonio, Texas.
- This facility is a 200,000 square foot unoccupied trainee dormitory located near a gated installation entrance and fence line within the training compound section of the installation. See Attachment B.
- The most current UAC data is provided in Attachment C.

Objectives:
- Meet with Ms. Jody Deknikker, Acting Deputy of Operations, 502nd Air Wing and Mr. Mario Guerrera, Baptist Children’s Home and Family Services (BCHFS) and discuss current state of affairs regarding UAC facility and JBSA-L logistics.
- Tour of Building 9410, UAC facility.

Discussion Points:
- Outstanding cooperation between HHS, DHS and DOD to identify a suitable facility in a logistically sound location.
- The initial intake of 308 UACs has gone very well. The infrastructure and personnel are in place to manage larger influxes of UACs and BCHFS reportedly can surge contracted staff to 500 within 48 hours.

Background:
The number of UACs apprehended at the southern border increased substantially since 2011. HHS received 34,000 UACs to date this year, and requested funding for a prediction of 60,000 UACs this fiscal year. Since the beginning of May, apprehensions have outpaced current predictions for fiscal year 2014. Given the substantial increase in May apprehensions of UAC, the 60,000 prediction for 2014 is likely low. Predictions will likely be driven by the total UAC apprehensions over the next few weeks. This recent uptick resulted in a substantial shortage of HHS bed space and caused significant backlogs in CBP facilities, particularly in the Rio Grande Valley of South Texas. This backlog has created a humanitarian crisis for those children in Border Patrol stations, which are not equipped with appropriate facilities (e.g. basic hygiene, hot meals, overcrowding). To address the ongoing situation, the Department of Defense is providing short-term housing for approximately 1,000 UAC to better accommodate the transfer of custody from DHS to HHS and provide a more suitable environment for the children. DOD provided similar support to HHS, on a smaller scale, in 2012 when the authorization was given to house up to 350 UACs at a time for a period of 60 days.

Participants:
Ms. Jody Deknikker, Acting Deputy of operations, 502nd Air Wing
Mr. Mario Guerrera, Baptist Children’s and Family Services

**Attachments:**
A. Talking Points
B. USAF Support to Health and Human Services
C. DHS Senior Leader UAC Brief

**Staff Responsible for Briefing Memo:** Rear Admiral June Ryan, Military Advisor
Unaccompanied Children at the Southwest Border

Internal Background

In the last two weeks, the number of unaccompanied alien children (UAC) apprehended while illegally crossing the border has increased substantially, straining facilities for DHS and HHS. Several reasons contribute to the dramatic increase in children migrating from Central America and crossing the border alone, including poor economic conditions, increased and sustained violence in their home countries, and the desire to be reunited with their families in the United States.

Unaccompanied alien children are persons in the United States younger than 18 years old with no lawful immigration status and who are unaccompanied by a parent or legal guardian.

HHS is responsible for the care and custody of these children while they are in federal custody. The Trafficking Victims Protection Reauthorization Act (TVPRA) requires all federal agencies to transfer these children to HHS within 72 hours of identification.

Customs and Border Protection (CBP) encounters the majority of unaccompanied children along the Southwest U.S. border. Unaccompanied children are generally males between 13 and 17 years of age and nationals of Mexico and Central America. Over the past few years, increasing numbers of unaccompanied children are from El Salvador, Guatemala, and Honduras. This recent increase includes more female children and more children of a tender age.

CBP screens all unaccompanied children encountered at land borders and ports of entry, regardless of nationality, to determine if the child is at risk of being trafficked, has a fear of persecution, and is able to make an independent decision.

Current Situation

The current influx is largely concentrated along the South Texas Border, and 75% of the children apprehended in the Rio Grande Valley are from countries other than Mexico – primarily Guatemala, Honduras and El Salvador. This rise in apprehensions is part of a broader increase in Central American migrants departing areas of heavy crime and violence and looking to reunite with their families. As of May 13, DHS had approximately 1,300 unaccompanied children in custody in the 8 Border Patrol stations in South Texas.

The capacity of CBP temporary holding stations in the Rio Grande Valley are presently 150 – 200% above normal levels. These stations are built to accommodate less than 200 temporary detainees each and have no beds, recreation, food-preparation or shower facilities. More than 30 percent of uniformed CBP personnel in affected locations are being reassigned from border security-related duties to processing and detention centers to care for and supervise these children. ICE also faces significant operational and resource challenges in managing the volume of unaccompanied children requiring transport to HHS placement facilities. To meet the
immediate needs, ICE has temporarily detailed more than 40 officers to assist CBP in maintaining custody, as well as to transport unaccompanied children to HHS facilities.

**Agency response**

DHS Secretary Johnson has declared a Level IV condition of readiness because the current situation exceeds the capacity of both CBP and ICE. This condition of readiness includes: the designation of the Deputy Chief of the Border Patrol as a Federal Coordinator; sending other senior staff to south Texas to organize interagency efforts to identify additional facilities to house UACs; provide medical and other care; and develop an aggressive public messaging campaign to outline the dangers of and deter UAC migration.

Even though HHS has made significant gains in efficiently absorbing and caring for the increased number of immigrant children, it still requires substantial time to verify the child’s identity, locate parents or other sponsors, and arrange for them to retrieve their children. As a result, facilities of the HHS Office of Refugee Resettlement (ORR) have reached full capacity. This is leading to unaccompanied children remaining in DHS custody beyond the 72 hours mandate. Since the beginning of FY 2014, ORR has taken custody of approximately 36,000 unaccompanied children. On May 14, Secretary Sebelius formally requested that the Department of Defense (DoD) allow use of DoD facilities to house up to 1,000 UAC for up to 120 days. DoD and HHS have identified facilities at Lackland Air Force Base to temporarily house UAC. In a similar manner, in the Spring of 2012, DoD provided HHS with facilities to help with the last major influx of unaccompanied children.

**Topline Talking Points**

- Immigrant children who make the long and often dangerous journey to the US alone represent some of the most vulnerable individuals who interact with our immigration system.
- The law prohibits DHS from immediately deporting these children if they are not from either Canada or Mexico and requires DHS to turn them over to HHS supervision within 72 hours of taking them into custody.
- The number of children coming alone, particularly from Central America, to the U.S. has grown significantly in recent years, many are escaping abuse or persecution, others are fleeing criminal gangs and violence, others are victims of trafficking or abandonment and others seek to reunite with their families in the U.S. Among the latest influx are growing numbers of female children and children under the age of 12.
- These children deserve to be protected and should be in a safe environment while they wait to be reunited with their families. Building on several years of strengthened interagency coordination- DHS and HHS have been coordinating efforts to quickly respond to the large influx and identify federal facilities that HHS can use to house the additional immigrant children on a temporary basis.
• HHS is working closely with other interagency partners, including DHS and the Department of Defense and has identified facilities at Lackland Air Force Base to support these efforts. As you may recall, in the spring of 2012, the Department of Defense provided HHS with facilities to help with the last major influx of unaccompanied children.

• The Administration is also working to identify overflow facilities for the Office of Refugee Resettlement and has been working on ways to better coordinate communications to foreign governments to warn families of the dangers of taking this long journey from their countries of origin.

• While Congress instituted many safeguards and protections for these children through the bipartisan Trafficking Victims Protection Reauthorization Act, and while enforcement resources at the border are at an all-time high, more needs to be done to fix our broken immigration system.

• Federal agencies have been working closely together for some time to address the increased number of children, which has been an ongoing trend, but the tools at their disposal are limited.

• This situation is a prime example of how broken our immigration system is and clearly demonstrates the need to fix our legal immigration channels to allow for immigrant families, in particular children and other vulnerable populations, to reunite legally and safely.

• The smuggling routes are not safe for children. Children are often times exposed to dangerous circumstances, including exploitation, disease, human tragedy, and in some instances death while in the hands of human smugglers. We continue to rely on the support of our international partner to help locate, disrupt, and dismantle these transnational criminal smuggling networks.

• We have strong relationships with the governments of Mexico, Guatemala, El Salvador, and Honduras and we are coordinating with them on this issue. We have asked for additional assistance from them to counter this recent surge in unaccompanied migrant children embarking on these dangerous smuggling routes by educating people in their home countries about the dangers and risks involved for these children.

DHS Talking Points

• Since coming to office, Secretary Johnson has been closely following the emerging issue of migrants, including unaccompanied minors and families in the Rio Grande Valley. On Sunday, May 11th, Secretary Johnson traveled to McAllen, Texas to view the situation first hand. Following extensive consolation with CBP, Secretary Johnson has taken a number of steps across the Department and in coordination with federal partners to immediately address this issue. Secretary Johnson’s work builds off of years of efforts by DHS, HHS, DOJ, and others to increase interagency coordination on UAC matters.
• Secretary Johnson, in consultation with CBP Commissioner Kerlikowske, has authorized a “Level IV” condition of readiness—the highest level of contingency planning. DHS personnel have already been reassigned to assist in processing and caring for UACs, including 40 ICE personnel and 100 Border Patrol Agents from around the country. Additional personnel will be assigned to assist.

• Secretary Johnson has appointing CBP Deputy Chief Ron Vitiello as the Federal Coordinator, and he is assembling a unified coordination group on the ground at RGV. He is also working with HHS Secretary Sebelius to expand short term bed space and identify a short term transition center to process the additional individuals.

• DHS is expanding awareness campaigns targeting potential crossers, in their home countries, in an effort to warn them of the extreme dangers associated with attempts to illegally enter the United States while also underscoring the fact that illegal crossers – including children seeking to reunite with families – are not eligible for legal status, including under prospective legislation.

**IF ASKED**

Q. Why are such large numbers of children migrating to the United States?
• Several reasons contribute to the dramatic increase in children crossing alone, including poor economic conditions, increased and sustained violence in their home countries, in addition to the desire to be reunited with their families in the United States.
• These children are regularly exposed to extreme danger and criminal abuse along the long migration journey. However, because children are subject to the risk of violence at home as well – including the rise in gangs and domestic violence in sending countries – for many it is still worth the risk to try to migrate.

Q. Is it true that the current debate on immigration reform is encouraging children in ever larger numbers to migrate?
• The percentage of unaccompanied children apprehended by Border Patrol began to increase in 2009, years before the latest immigration reform debate began.
• The unaccompanied children migration pattern tended to be cyclical but in 2011 apprehensions generally steadily increased through December 2011. Apprehensions generally doubled from 2011 to 2012, this pattern remained the same for 2012 to 2013.
• The increase in unaccompanied children crossing the border mirrors the increase in apprehensions of Central Americans.
Q. If Congress passes an immigration reform bill with an earned path to citizenship, would these young people be eligible? Are they eligible for the Deferred Action for Childhood Arrivals process?

- No, under the Senate bill, individuals must have been in the United States as of December 31, 2011 to qualify. Since these young people are very recent arrivals, they would not be eligible.
- Under DACA, individuals must have resided in the U.S. since June 2007. Because these young people are new arrivals, they would not qualify for DACA.

Q. How is the Obama Administration working with the governments of Mexico and Central America to deter further migration of unaccompanied children?

- We continue to rely on the support of our partner nations to help locate, disrupt, and dismantle these transnational criminal smuggling networks. We enjoy excellent relations with the governments of Mexico, Guatemala, El Salvador, and Honduras. We are coordinating with them on this issue and asking for additional assistance to counter this recent dangerous surge in migrant children in these smuggling routes, and also enlisting international help in spreading the word of the dangers involved for children.
- In partnership with our foreign partners, DHS is operating public messaging campaigns in Mexico and Central America designed to educate and inform individuals about the dangers of crossing without the proper documents or plans. Recent migrants are also not eligible for Deferred Action for Childhood Arrivals or pending legislation.

Q. Isn’t the Administration simply aiding illegal immigration by bringing these children to their parents or caretakers in the US?

- The bipartisan Trafficking Victims Protection Reauthorization Act requires that DHS turn these children over to HHS within 72 hours of apprehension.
- Under the Flores settlement and the TVPRA, HHS is required to make efforts to reunite these vulnerable young children with their family or make other appropriate custody arrangements keeping in mind the best interests of the child.
TALKING POINTS FOR JOINT BASE SAN ANTONIO – LACKLAND
UNACCOMPANIED ALIEN CHILDREN

- JBSA-L has prepared a mission-ready facility for HHS use beginning Sunday, 18 May. This is an incredible achievement, completed in a matter of three days even though original estimates were upwards of two weeks.

- Baptist Children’s Home and Family Services (BCHFS) is the contracted healthcare provider to the UACs. BFCS has 20 fulltime personnel consisting of command and control, emergency medical services, nurses, and the like.

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