



“Influx” Facilities for Unaccompanied Immigrant Children: Why They Can be Needed & How They Can be Improved

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What is an “influx” or “emergency” shelter?

The Department of Health and Human Services’ Office of Refugee Resettlement (ORR) is charged with the care of unaccompanied immigrant children (UC) in U.S. government custody until they can be reunified with an approved family member or friend (sponsor) pending their immigration court proceedings. Accordingly, ORR operates a network of facilities to house these children that are in its custody. When its standard network is at or near capacity, ORR has historically utilized “[influx](#)” or “[emergency](#)” shelters¹ on a temporary basis to accommodate the additional children being referred to its care.

Are influx shelters child detention facilities?

No. While ORR does have some limited bed space in its network for children requiring heightened supervision or those deemed flight or safety risks – “[secure](#)” or “[staff-secure](#)” placements,² which are more restrictive – influx facilities do not meet these criteria. Further, ORR actively works to release all children in influx facilities to identified sponsors.

How many influx facilities is ORR currently operating?

In Fiscal Year (FY) 2019, ORR operated influx facilities in Tornillo, Texas; Carrizo Springs, Texas; and Homestead, Florida.³ As of February 2021, ORR is opening its influx facilities in Carrizo Springs and plans to reopen its emergency influx center in Homestead.⁴

Do influx facilities have to meet the same requirements as other ORR shelters?

No, not entirely. Under the [Flores Settlement Agreement](#),⁵ most ORR facilities must meet a set of minimum requirements and be licensed by the relevant state for childcare. Flores includes an exception for influx facilities, recognizing the need for ORR to be able to rapidly onboard and operate these facilities in times of emergency. Recently, however, as a result of the June 2019 Emergency Supplemental Appropriations for Humanitarian Assistance and Security at the Southern Border Act, ORR modified its guidelines and now requires influx facilities to meet the Flores minimum requirements (albeit with waivers available for certain requirements for a period of up to 14 months). Further, while influx facilities still do not have to be state licensed, ORR now explicitly requires them to comply to the greatest extent possible with applicable state child welfare laws and regulations, as well as state and local building, fire, health, and safety codes.⁶

Why can influx facilities be needed?

Although not ideal, influx facilities are an important tool for ORR to have available to deal with UC bed space needs. It can take months to license and onboard a standard ORR facility, while influx facilities can be operationalized much more quickly. As a result, if UC referral numbers unexpectedly increase, influx facilities become ORR’s only option for rapid response. If ORR did not have the option to utilize influx facility bed space, we would likely see many more unaccompanied children being held for extended periods in CBP holding facilities, which are neither child-friendly nor designed for prolonged care.

Can any unaccompanied child be placed into an influx facility?

No. ORR has [criteria](#)⁷ detailing which children can be transferred to an influx facility, including requirements that ORR can only place UC in influx facilities who are: ages 13-17, have no known medical or behavioral issues, speak English or Spanish, and are expected to be released to a sponsor within 30 days. Also, children in ORR influx facilities generally will be either discharged or transferred within 90 days of placement.⁸

Does USCCB/MRS have any concerns with influx facilities?

Yes. USCCB/MRS has toured and shared with ORR its concerns and recommendations relating to Homestead, as well as other past influx facilities. While we believe that use of these facilities may be necessary at certain times, we do support improved child protection standards and oversight.

How can influx facilities be improved?

While we recognize recent improvements made to the standards, we continue to recommend that influx facilities be required to meet higher minimum child protection requirements when the facilities are in operation for prolonged periods of time and are no longer truly serving in a rapid-response capacity. We also recommend that influx facilities required to meet codified *in-person* staffing ratio minimums and be subject to a presumption of closure after ORR has had ample time to onboard alternative permanent and licensed facilities. We further urge increased oversight of the facilities.

What can Congress do?

We urge members of Congress to:

- **Introduce and Support Legislation to Improve Care at Influx Facilities.** Together with other care providers and advocates, we have developed suggested bill text that would codify improved standards for these facilities.
- **Address Issues Contributing to Instances of Delayed Release of Children.** In addition to high UC referral numbers, part of reason ORR recently had to rely on influx facilities was due to increased lengths of stay for children in care. While the average length of stay for children in care has decreased significantly in recent months, service providers continue to see certain cases of children whose release is unnecessarily delayed. We urge Congress to examine and address factors that are contributing to such cases of delayed release, including by requiring ORR to rescind the [Memorandum of Agreement](#)⁹ on information sharing.

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Endnotes

1 Children Entering the United States Unaccompanied, Office of Refugee Resettlement (Jan. 30, 2015), <https://www.acf.hhs.gov/orr/resource/children-entering-the-united-states-unaccompanied>

2 Children Entering the United States Unaccompanied: Section 1.2.4, Office of Refugee Resettlement (Oct. 10, 2018), <https://www.acf.hhs.gov/orr/resource/children-entering-the-united-states-unaccompanied-section-1#1.2.4>

3 In June, the Department of Health and Human Services announced the opening of a new influx facility in Fort Sill, Oklahoma; however, no unaccompanied children were ever placed in the facility due to declining referral rates. See Asher Stockler, Oklahoma Army Base Fort Sill Will Not House Migrant Children, For Now, Newsweek (July, 27, 2019), <https://www.newsweek.com/hhs-orr-immigration-fort-sill-migrant-children-1451438>

4 Biden's controversial decision to reopen temporary shelters for migrant children, explained (Feb. 24, 2021), <https://www.vox.com/policy-and-politics/22299135/biden-kids-cages-migrant-children-carrizo-homestead>

5 Settlement Agreement, Flores, et al. v. Reno, Case No. CV 85-4544 (C.D. CA, 1997), available at https://cliniclegal.org/sites/default/files/attachments/flores_v._reno_settlement_agreement_1.pdf

6 Children Entering the United States Unaccompanied, supra note 1

7 Id

8 Id

9 USCCB/MRS, et al., The ORR and DHS Information-Sharing Agreement and Its Consequences (Sept. 2019), available at <https://justiceforimmigrants.org/wp-content/uploads/2019/10/Updated-formated-MOA-backgrounder-10.2.19.pdf>.