As you may be aware, OIG is charged with overseeing programs and operations in the Department of Health and Human Services, or HHS. OIG works to combat fraud, waste, and abuse in those programs and to promote their economy, efficiency, and effectiveness. To accomplish this, OIG employs an array of oversight tools, including audits, evaluations, and investigations.

Since responsibility for unaccompanied children was transferred to HHS by the Homeland Security Act of 2002, OIG has provided oversight of the Unaccompanied Alien Children Program, or UAC, which is administered by the Office of Refugee Resettlement within the Department’s Administration for Children and Families.

Over the years, OIG has examined various aspects of the UAC program. For instance, we have audited grantee expenditures and assessed their internal controls for administering program funds, and have examined whether grantees have met safety standards for the care and release of children.

All these oversight efforts have as one unifying purpose - to promote the protection of children in the Department's custody.

Given the urgency and seriousness of the health and safety issues raised in 2018 at UAC facilities, OIG responded quickly, dedicating an unprecedented level of resources to conduct large, multi-faceted reviews. For instance, in just 3 weeks more than 200 OIG staff completed multi-day site visits to 45 ORR-funded facilities across the country.

The work we have underway focuses on the health and safety of unaccompanied children. You may be familiar with our Tornillo Early Alert Report. This work today is on the number of separated children. Also:

1. Efforts to reunify separated children with parents and/or suitable sponsors,
2. Facilities' screening of employees such as background checks,
3. Facilities' identification and response to incidents of harm,
4. Facilities' ability to meet children's medical and mental health needs, and
5. Facilities' physical security such as security features like cameras and emergency preparedness

We hope this work will inform policy makers who make decisions about this program, as well as provide the public with transparency.
The release of today’s issue brief, *Separated Children Placed in Office of Refugee Resettlement Care*, is the second in the series of reports we’ll be publishing in 2019 related to the care and well-being of unaccompanied children receiving care from ORR-funded facilities.

Ann Maxwell, our Assistant Inspector General for the Office of Evaluation and Inspections, will now provide an overview of today’s issue brief.

**ANN MAXWELL**

**ASSISTANT INSPECTOR GENERAL FOR THE OFFICE OF EVALUATION AND INSPECTIONS, DEPARTMENT OF HEALTH AND HUMAN SERVICES, OFFICE OF INSPECTOR GENERAL**

Thank you, Christi.

In the issue brief released today, the OIG found that more children over a longer period of time were separated by immigration authorities and referred to HHS for care than is commonly discussed in the public debate. How many more children were separated is unknown – by us and HHS – given the significant challenges HHS faced in identifying separated children.

What has typically been discussed as the number of separated children is the number HHS has reported in response to a June 2018 court order stemming from the *Ms. L v. ICE* class action lawsuit. These numbers are a matter of public record. In a December filing to the court, HHS identified 2,737 separated children.

However, this represents a specific subset of all children separated by DHS, based on criteria related to the court case. Namely, that children were separated from a parent and were in HHS care at the time of the court order.

HHS officials estimate that thousands of other children were separated, referred to HHS for care, and released from HHS care, prior to the June court order.

In fact, agency officials noted a steep increase in the number and proportion of separated children starting in the summer of 2017, a year prior to the court order.

In addition, children continued to be separated after the June court order. Between July and November 2018, at least 118 children were separated by immigration officials and referred to HHS care. DHS reported that the most common reason for these more recent separations is the criminal history of the parent. But, in some cases, DHS has provided HHS with limited information about the reasons for these separations.

In sum, the total number of children separated from a parent or guardian by U.S. immigration authorities and transferred to HHS for care is unknown. It is certainly more than 2,737, but precisely how much more is unknown.
Why is it unknown? Because HHS faced significant challenges identifying which children in its care had been separated by DHS. Until the court order, there was no requirement to flag separated children as different from any other unaccompanied child. As a result, there was no existing, integrated data system to track separated families across DHS and HHS. Further, HHS’s internal tracking systems for separated children were informal and designed for operational purposes, rather than retrospective reporting.

To address these challenges, HHS has taken several steps to improve the tracking of separated children, such as modifying its online case management system to capture the information and creating a consolidated spreadsheet for tracking.

At this point, it’s not yet clear whether these changes will be sufficient to ensure accurate data about separated children.

In addition, the June court order that required HHS to identify children separated from their parents also required that those children be reunited with their parents. HHS has reunited most of the separated children it identified as covered by the court case. However, HHS has revised the list of separated children covered by the court case several times, most recently in December, more than five months after the order’s effective date.

This, again, speaks to the difficulty HHS had in accurately identifying separated children in the absence of an integrated data system to track separated families.

In closing, I will note that the issue brief we’re releasing today does not contain any recommendations. The goal of this product is transparency. The mission of the I.G. is to ensure that policymakers and the public have objective facts on which to debate policy.

In the issue brief, we do encourage HHS to continue its efforts to improve the ability to track separated children, and HHS agreed that further efforts were warranted.

We also anticipate that future work, which examines the challenges that care facilities faced in reunifying separated children, will have recommendations to strengthen the program and better serve children.

This concludes my remarks. We are available to take questions.