

A hand holding a paper airplane against a globe background. The globe is seen through a circular opening, and the paper airplane is in the foreground, pointing towards the top right. The background is a soft, glowing light, suggesting a sunrise or sunset.

# BEST PRACTICES FOR SAFE REPATRIATION ADVOCACY

How Practitioners Can Contemplate and Support the Safe Repatriation of  
Unaccompanied or Separated Immigrant Children Who Return to their Home Countries

October 2020

*Prepared by:*

 **YOUNG** | FOR IMMIGRANT  
**CENTER** | CHILDREN'S  
RIGHTS

*with support from the Oak Foundation*

## BACKGROUND

The U.S. government does not reliably consider the best interests of unaccompanied and separated children when it decides whether to repatriate them to their home countries. Nevertheless, in passing the Trafficking Victims Protection Reauthorization Act (TVPRA), Congress urged U.S. agencies to promote safe repatriations of unaccompanied children. Specifically, it requires the Secretaries of State and Homeland Security “to develop and implement best practices to ensure the safe and sustainable repatriation and reintegration of unaccompanied alien children into their country of nationality or of last habitual residence...”<sup>1</sup> In other words, the government should take steps to assess whether a child facing return can, in fact, be safely repatriated. The TVPRA further provides that “[t]he Secretary of Homeland Security shall consult the Department of State’s Country Reports on Human Rights Practices” in determining whether to repatriate an unaccompanied child to their country of origin.<sup>2</sup> However, the Department of Homeland Security has not complied with Congress’s direction “to develop and implement best practices” for safe repatriation, and therefore, substantial opportunities for advocacy remain to ensure children safely repatriate.

Though federal law does not require that immigration judges consider whether a child facing deportation can be safely repatriated, immigration judges—and other decision makers in the immigration system—do have the discretion, and in many cases the desire, to do just that. Therefore, immigrant children need advocates who will push for safeguards that minimize the stress, fear, and uncertainty that overshadow a child’s return to home country. Practitioners can anticipate and plan for each child’s unique physical and emotional needs during repatriation and reception. Children may experience many emotions about their return, some of which may seem conflicting. It is important to speak with children and strategize ways to best meet and support their holistic needs during this transition.

Whether a child requests voluntary departure or receives a deportation order, establishing safeguards helps protect the child’s best interests—particularly their safety, health, and well-being—during the child’s return home. Practitioners working with unaccompanied or separated children can advocate for safeguards surrounding the children’s return journey (repatriation), reception (arrival to their country of origin), and reintegration into their community. This guidance outlines key considerations and areas of advocacy for safe repatriation that prioritize the safety and well-being of unaccompanied and separated children.

## SAFE REPATRIATION BEST PRACTICES

When engaging with child clients, it is particularly important to use child-friendly language and be mindful of children’s experiences with trauma. Practitioners should approach cases from a trauma-informed lens in all areas of work with and advocacy for their clients.

**Understand Child’s Wishes:** It is best practice to meet with the child consistently to develop trust, learn their story, and understand their wishes. In addition, it is critical to ensure the child understands the legal consequences of return to home country, the process of reception and

return, and the plan for their long-term care in home country. The practitioner should actively engage the child in conversations designated to elicit an informed decision from the child and seek opportunities to correct any misconceptions or misunderstandings.

**Consider Child’s Safety:** As practitioners engage in conversations with their clients about return, they may develop concerns about a child’s ability to repatriate safely. It is best practice to gather information through conversations with the child, their family, and community members to understand the living situation in the country of origin. Practitioners can use the information gathered to develop a safety plan and connect the family with the appropriate services to mitigate identified concerns. For example, if a child wishes to return, but is unable to repatriate to the community they fled, conversations with family may reveal that the child has a caregiver living in another part of the country to whom they can repatriate. Subsequent advocacy can then focus on developing a repatriation plan with this caregiver to ensure they can safely receive the child at reception. Should a practitioner develop concerns about a child’s ability to safely repatriate, even with safeguards, consider consulting with the Young Center about the possibility of a Child Advocate appointment.<sup>3</sup>

**Utilize Culturally Responsive Approaches:** When gathering information from stakeholders, consider whether they have engaged with the child and their family in a culturally responsive manner. For example, if a child and family speak an indigenous language, it is crucial for all entities working with the child to utilize an interpreter or cultural liaison to enhance communication with the child’s caregiver. Consider the ways that culture, access to education, and language may contribute to misunderstandings and potential biases when working with unaccompanied and separated children. In communication with family, explore the specific needs of the child and family. For example, if a caregiver does not understand the child’s diagnoses and prescribed medication(s) or treatment(s), consider the family’s perspective on medication use and their access to necessary treatment and supportive services.

**Refer to Repatriation Resources:** Practitioners should engage with children and their caregivers in conversation to better understand their expressed needs and desires regarding additional reintegration services. Speak with the family to explore if they have a support network available within their community. Although the family may not have access to a social worker, consider whether a pastor, teacher, or local community leader may provide support. Before submitting a referral to a resource provider, it is important to obtain the consent of the child and the family to share their contact information. Below is a short list of reintegration resource providers in Central America:

- [Justice in Motion](#)
- [Kids in Need of Defense \(KIND\) Reintegration Programs](#)
- [International Social Service, USA, Reintegration Planning Services](#)

---

<sup>1</sup> 8 U.S.C.A. § 1232(a)(5)(A).

<sup>2</sup> 8 U.S.C.A. § 1232(a)(5)(B).

<sup>3</sup> Submit requests to consult with the Young Center Safe Repatriation Team at [yc.safe.repatriation@theyoungcenter.org](mailto:yc.safe.repatriation@theyoungcenter.org). Complete referrals to request a Child Advocate through the Young Center’s secure online portal at <https://www.clienttrack.net/TYC/portal>.



## RECOMMENDED STEPS TO FACILITATE REPATRIATION SAFEGUARDS:

---

How and with whom can you advocate for repatriation safeguards for unaccompanied children?

### ***Pre-repatriation support***

Advocacy with the Office of Refugee Resettlement (ORR) / Custodial Agency:

- Provide the child with clear information about the entire repatriation process, including what to expect for each phase of the process.
- Ensure that the child's caregiver in home country receives information about the repatriation and reception process in their preferred language.
- Confirm that the facility staff and/or custodial agent communicates with the child's caregiver and provides the details surrounding the child's return (including the flight number(s) and the child's estimated arrival time in home country), at least 48-72 hours prior to the child's departure.
- Inquire if the child has medical and/or mental health needs. Ensure the facility develops a written discharge plan that details the child's diagnoses and prescribed medications and explains the child's triggers. If a child wishes to continue their medication treatment, advocate with the facility to supply the child with a three-month supply of medication.
- Advocate with the organization or individuals responsible to plan travel arrangements. For example, verify the facility and/or custodial agent purchased the plane ticket and the child has the necessary travel documents.
- Connect the child and their caregiver to reintegration services, when available.

Advocacy with the Consulate:

- For children in ORR custody, follow-up on the status of travel documents.
- For children not in ORR custody, assist the child to obtain their passport or other required document needed for repatriation.
- Confirm the consulate shared with the child's caregiver the date and time the child is scheduled to arrive, along with the reception center's location, ideally 48-72 hours before the child's scheduled arrival.
- If the child has unique needs that may require additional services from the home country child welfare agency, request that the consulate also communicate the reception itinerary to this agency.
- If the child's flight is canceled, recommend the consulate notify the family as soon as the consulate learns about the cancellation and alert the family to the new travel plans.
- Advocate for repatriation to occur close to the family's location to minimize the family's travel time.
- If the family needs transportation assistance, advocate with the consulate to arrange services to transport the family to and from the reception center.

- If a child travels with medication, confirm that the consulate is aware of the child's diagnoses and prescribed medications. To minimize the risk of losing the medication during travel, the child's medication should be brought as a carry-on. Also, ask the consulate to ensure the child has proper documentation of their diagnoses and prescription(s) to avoid any issues with medication upon arrival.
- Request that the consulate notify the reception center about the child's medical or mental health needs, possible triggers, and prescribed medications. If needed, advocate with the consulate to connect the child and their family to medical or psychological support services in home country.

Advocacy with the Department of Homeland Security (DHS):

- Advocate with DHS to arrange the child's departure from the United States, as well as the child's arrival in home country, during appropriate daytime hours. Urge DHS to place the child on commercial flights (as opposed to ICE charter flights), when available.
- For children in ORR custody, ask DHS to notify the facility one week in advance and no less than 72 hours before the child's scheduled departure from the United States.
- If the child is young or particularly vulnerable, request that a care provider or another person familiar to the child accompany the child.
- If the voluntary departure order is nearing the deadline, in collaboration with the child's attorney, advocate for an extension with ICE, to ensure that the voluntary departure order does not convert into a final order of removal.
- For children whose family does not live near the U.S.-Mexico border, advocate for repatriation to the interior of Mexico.

**Reintegration support**

- Refer the child's caregiver(s) to organizations and agencies that provide reintegration services, if available. For example, a child or caregiver may inquire about additional resources for educational, mental health, medical, or vocational needs. If safety concerns are identified, develop a safety plan with the child and family. Justice in Motion, Kids in Need of Defense (KIND), and International Social Service (ISS-USA) are some of the organizations that provide reintegration resources in Central America.
- If a referral was made to a reintegration program, ensure the family has the contact information for the local service provider.
- Upon repatriation, confirm the child's arrival by calling the caregiver. If possible, speak with the child.
- If the child has unique needs, confirm that the child and service provider are connected for follow-up services.