ADMINISTRATION FOR CHILDREN & FAMILIES
Office of Refugee Resettlement

Amended Public Report on Children with Identified Disabilities in ORR Custody from November 2025 through April 2026

Prepared by the Office of Refugee Resettlement

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Introduction

Pursuant to Section VI.D.2 of the *Lucas R. Disabilities Settlement Agreement,* which became effective May 3, 2024, the Office of Refugee Resettlement (ORR) Unaccompanied Alien Children Bureau (UAC Bureau) is publishing the first public semi-annual report on children in ORR care and custody with identified disabilities. The Settlement Agreement required ORR to meet the commitments outlined in Sections II-V of the Settlement Agreement by the Implementation Date,[1] including the tracking of data across ORR's system concerning children in ORR care and custody identified as having one or more disabilities.

Consistent with the Transition Plan outlined within ORR's forthcoming Implementation Plan for the *Lucas R.* Disabilities Settlement Agreement, ORR is providing information relating to the number of children with one or more identified disabilities in its care and custody in the following States:

- Arizona
- California
- Colorado
- Connecticut
- Florida
- Georgia
- Illinois
- Indiana
- Kentucky
- Louisiana
- Massachusetts
- Michigan
- Nevada
- North Carolina
- Ohio
- Oregon
- South Carolina
- Tennessee
- Texas
- Washington

Methodology

Consistent with ORR's Implementation Plan, ORR rolled out its Disability Diagnosis Report tool to established cohorts of care providers in the above referenced states to expand its current ability to track the number of children in ORR custody with identified disabilities. Care providers located within the above-referenced states are required to submit a form within 24 hours of identifying a child has a disability[2]. As the first cohort of care providers was not onboarded until January 1, 2026, this list has been supplemented using the same proxy data sources used to produce ORR's Public Report of Children with Identified Disabilities as of October 2025.

This involved merging multiple data points currently available within ORR's case management system, including, but not limited to:

[1] Consistent with the Monitor's authority under the Settlement Agreement, an extension of six months to implement the terms of the Settlement Agreement was granted in April 2025, extending the original deadline from May 3, 2025 to November 3, 2025. *See Lucas R.* Disabilities Settlement Agreement at Section I(F). This extension was granted to allow ORR to consider the results of the Comprehensive Needs Assessment, developing its plan for achieving several key improvements related to the identification of children with disabilities in its care, and expanding access to services and accommodations for children with identified disabilities.

[2] Children in ORR custody are presumed to have a disability if they meet the broadly-construed criteria defined in the Americans with Disabilities Act (ADA) (42 U.S.C. § 12102). *See* UAC Bureau Policy Guide Section 3.8.1 *Defining Disability for Children in ORR Custody.*

- Home study referrals indicating the referral is mandated by the Trafficking Victims Protection Reauthorization Act (TVPRA), 8 U.S.C. § 1232(c)(3)(B) based on the child's disability status under the ADA;
- Post Release Services (PRS) referrals indicating the referral is mandated by the TVPRA based on the child's disability status under the ADA;
- Individualized Section 504 Plans developed by care providers and uploaded to the case management system;
- Notations regarding allergies that require an EpiPen;
- Children on three or more psychotropic medications;
- Select medical diagnoses (e.g., Cerebral Palsy, Autism, Traumatic Brain Injury, Schizophrenia, Down Syndrome, Intellectual Disability, Spina Bifida, or HIV);
- Admissions to in-patient psychiatric facilities or psychiatric hospitalizations; and
- Residential Treatment Center Admissions (both in-network or out-of-network.[3]

Number of Children in ORR Custody with Identified Disabilities

No. of Children Placed in Onboarded States as of April 30, 2026	No. of Children w/1+ Identified Disability in Onboarded States	% of Children w/1+ Identified Disability in Onboarded States	No. of Children w/ Identified Disabilities Prescribed Psychotropic Medications
1,236	236	19	64

Categories of Disabilities Identified Amongst Children in ORR Custody

The chart below details the number of children with disabilities in ORR's care and custody falling into one of fourteen categories:

- Cardiac
- Dermatologic (Skin)
- Developmental (Neurodevelopmental)
- Endocrine/Metabolic
- Gastrointestinal (GI)
- Hematologic (Blood)
- Immunologic / Allergic
- Musculoskeletal
- Neurological (Non-Developmental)
- Oncologic (Cancer)
- Psychiatric/ Behavioral
- Pulmonary
- Renal /Genitourinary
- Sensory

Some children may be identified as having more than one disability. Therefore, the total number of children in the chart below is higher than total number of children identified as having one or more

[3] An out-of-network placement ("OON") is a facility that is licensed by an appropriate State agency and that provides physical care and services for individual unaccompanied alien children as requested by ORR on a case-by-case basis, that operates under a single case agreement for care of a specific child between ORR and the OON provider. OON may include hospitals, restrictive settings, or other settings outside of the ORR network of care. An OON placement is not defined as a standard program under 45 C.F.R. § 410.1001. As discussed in ORR policy at Section 1.4.6 *Residential Treatment Center and Out-of-Network Placements*, OON placements must generally adhere to, or arrange, the standards listed in the UAC Bureau Policy Guide Section 3.3 (Note: ORR considers children admitted to a hospital as continuing to be "placed" at their care provider facility; the hospital in this situation is not considered an OON placement).

disability because some are counted more than once. Other children were identified as having a disability, but there was insufficient information to determine how to properly categorize their disability at the time of this report.

Cardiac	2
Dermatologic (Skin)	0
Developmental (Neurodevelopmental)	49
Endocrine/Metabolic	4
Gastrointestinal (GI)	0
Hematologic (Blood)	3
Immunologic/Allergic	38
Musculoskeletal	11
Neurologic (Non-Developmental)	12
Oncologic (Cancer)	1
Psychiatric/Behavioral	140
Pulmonary	3
Renal/Genitourinary	4
Sensory	16
Unable to be Categorized	66

Types of Services, Supports and Accommodations Offered

In July of 2024, ORR published updates to the UACB Policy Guide at Section 3.8.3: Individualized Section 504 Service Plan (504 Plan), requiring all care providers to develop 504 Plans for any child identified as having a disability. 504 Plans assist care providers in identifying and documenting the child's disability-related needs as well as the services, supports, and reasonable accommodations that must be provided to enable the child to reside in the least restrictive setting in their best interest and the most integrated setting appropriate to their needs. The 504 Plan also incorporates disability-related requirements necessary for the completion of the reunification process (i.e., a home study), which allows the care provider to plan and commence crucial steps early in the process (i.e., identification of post-release services).

Within ten calendar days of identifying one or more disabilities for a child in ORR custody, the case manager convenes a 504 Development Meeting. The meeting includes the following individuals, known as the "Development Team":

- The child (if the child is able and willing to communicate about their disabilities and the 504 Plan);
- The child's parent or legal guardian (if reasonably available and with the child's consent);
- The professional evaluator (as applicable, and if they are able and willing);
- Care provider staff (at minimum the case manager and clinician assigned to the child);
- ORR staff (the Federal Field Specialist and/or staff from the Division of Health);
- The Child Advocate (if one has been appointed); and
- The child's attorney who has submitted a Notice of Representation (children aged 14 or older must consent to the attorney's participation).

The below represents broad categories of the types of services, supports, and accommodations currently being offered to children with one or more identified disabilities in ORR care and custody where an Individualized Section 504 Service Plan has been developed.

- Therapeutic Intervention (including psychoeducation, cognitive behavioral therapy, individual and group therapy, art, and animal therapy);
- Additional contact with family (phone calls and video calls);
- Quiet spaces, breaks, and time away (including walks and de-escalation spaces);
- Medication management;
- Task modification (including additional time, frequent breaks, altered schedules/activities, and education plans);
- Use of adaptive writing tools
- Access to tutoring;
- Large print materials;
- Substance abuse counseling;
- Fidget toys & accessible sensory tools;
- Increased or 1:1 supervision;
- Access to medical devices/medications (e.g. epi-pens);
- Visual aids and supports and use of non-verbal cues;
- Occupational therapy;
- Nature walks
- Physical therapy;
- Pain management
- Foster home placement;
- Modified Education Plans;
- Wheelchair/shower chairs;
- Preferential seating in class;
- Increased staff training on de-escalation techniques;
- Enhanced sanitation and hygiene protocols and use of Personal Protective Equipment (PPE) if needed;
- Dietary alternatives; and
- Hearing aids

Additional Information Relating to the Care of Children with Identified Disabilities

Shelter Care or Other Non-Restrictive Placements	TFC/LTFC Placements	Heightened Supervision Placements	Secure/ Residential Treatment Center Placements	Average Length of Care for Children w/ Identified Disabilities	Average Length of Care for Children w/o Identified Disabilities
130	89	9	8	379 days	196 days