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Complaint Demands Oversight of Customs and Border Protection (CBP) Facilities

WASHINGTON, DC – Today, the American Immigration Council (Council), the American Immigration Lawyers Association (AILA), and the Catholic Legal Immigration Network Inc. (CLINIC), through their involvement in the Dilley Pro Bono Project, filed an administrative complaint with government oversight agencies highlighting a systematic failure to provide adequate medical care to children in Customs and Border Protection (CBP) custody, in violation of CBP's own internal guidance and extensive medical guidelines. The complaint, filed with the Department of Homeland Security (DHS) Office for Civil Rights and Civil Liberties, DHS Office of the Inspector General, and the Federal Bureau of Investigation, calls for the immediate implementation of oversight mechanisms to improve access to medical services for individuals held in CBP custody.

According to Katie Shepherd, National Advocacy Counsel for the Immigration Justice Campaign, a joint Council-AILA initiative to fight for a fair day in immigration court,

"When vulnerable, asylum-seeking individuals are deprived of basic, essential health care, tragic consequences ensue. Over the past year, a spate of deaths of immigrant children in CBP custody has further highlighted the need for immediate and meaningful oversight of CBP facilities. Individuals held in CBP detention have routinely described overcrowded and filthy cells, frigid temperatures, inadequate medical treatment, lack of access to hygiene products such as soap and toothbrushes, and being forced to sleep on bare concrete floors with no protection. These conditions are inexcusable—our nation can and must do better."

The complaint is based on 200 survey responses and numerous statements from mothers who spent time in CBP custody with their children prior to being detained at the South Texas Family Residential Center in Dilley, Texas. One such mother – Yuri – spent eight days with her three-year-old daughter in custody, during which the facility was put under medical quarantine, restricting detainees' access to medical services. At one point, her daughter vomited about 10 times in an hour, but officials told Yuri she could not receive medical care because of the quarantine.

The <u>American Immigration Council</u> works to strengthen America by shaping how America thinks about and acts toward immigrants and immigration and by working toward a more fair and just immigration system that opens its doors to those in need of protection and unleashes the energy and skills that immigrants bring. The Council brings together problem solvers and employs four coordinated approaches to advance change—litigation, research, legislative and administrative advocacy, and communications. Follow the latest Council news and information on <u>ImmigrationImpact.com</u> and Twitter @immcouncil.

The American Immigration Lawyers Association is the national association of immigration lawyers established to promote justice, advocate for fair and reasonable immigration law and policy, advance the quality of immigration and nationality law and practice, and enhance the professional development of its members. Follow the latest AILA news and information on ThinkImmigration.org and Twitter @AILANational.

The Catholic Legal Immigration Network, Inc., is the largest nationwide network of nonprofit immigration programs, with 375 affiliates in 49 states and the District of Columbia. Programs include training and supporting immigration legal agencies, advocating for humane immigration policies, integration support and legal representation for immigrant religious workers. CLINIC also is a partner in providing pro bono representation to detained families, and offers public education materials on immigrants' rights and Catholic teaching on migration.

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Correction: The complaint previously misstated the number of women who requested medical care and did not receive any medical attention in response from U.S. Customs and Border Protection. The correct figure is 58 percent, and not 61 percent. The complaint also misstated the proportion of women who reported that the health of their children worsened while they were held in CBP custody. The correct figure is 35 percent, and not 60 percent.