



July 16, 2019

The Honorable Kevin K. McAleenan
Acting Secretary of Homeland Security
Washington, DC 20528

Re: Sanitary and health conditions of migrant children, families and individuals at centers run by U.S. Customs and Border Protection

Dear Acting Secretary McAleenan,

On July 9th, the Board of the International Association of Latino Nurse Faculty (IALNF) voted to express its most extreme concern to the United States (U.S.) Department of Homeland Security (DHS) and U.S. Customs and Border Protection (CBP) regarding the conditions and treatment of migrant children, families and individuals at the U.S. Southern Border. The IALNF, and the esteemed 1,045 Latino Nurse Faculty that it represents, makes a heartfelt request to you and your agency to act with the utmost speed to ensure that immigrant detainees have access to basic hygiene needs, appropriate health care, including case management and mental health services, and critically, adequate sleeping arrangements. This is a humanitarian health crisis and human rights issue, not a partisan one. In this situation, like no other, the time-honored resolve of American people to treat others with generosity and compassion is needed.

The IALNF and its members, like other Americans, are appalled regarding the news reports that consistently report unacceptable and unhealthy conditions at centers run by the CBP. Ours is not the only voice to express this. Recently, the U.S. Department of Health and Human Services Secretary Alex Azar stated that the centers run by CBP “were not good conditions for kids to be in.”¹ He also acknowledged that the “CBP facilities were built for single adults coming across [the border] in the 80s, 90s, and 2000s.”² On July 2, 2019, the DHS Inspector General released a very condemnatory report of which the purpose was to “notify you of urgent issues that require immediate attention and action...and to take immediate steps to alleviate dangerous overcrowding and prolonged detention of children and adults in the Rio Grande Valley.”³ In addition, the report states that 31% of the 2,669 children at these facilities had been held longer than the 72 hours generally permitted under the Flores Agreement.³ Other details in the report stated that children had no access to showers; limited access to a change of clothes; no hot meals

(until the week the inspectors arrived) and limited space for medical isolation so many were held in closed cells.³

Many of these children and families have fled stressful and traumatic situations including extreme poverty, violence including from gangs, war and domestic situations. Many have come due to environmental degradation of their environments in which they can no longer farm and make a living for themselves. Studies have reported that children experiencing frequent and ongoing adverse events, particularly in the absence of protective, stable behaviors and relationships, will suffer from toxic stress with lifelong consequences for themselves, their families, communities and societies for years to come.⁴ The American Academy of Nursing recognizes that “as a result of the traumas and psychological abuses experienced in their home countries, as well as through their eventual journey and stay in temporary U.S. facilities, many of these immigrant children have a higher prevalence of mental health problems.”⁴ It is imperative that children, families and individuals entering the U.S. seeking safety, security, and asylum be treated with a respect for human rights and dignity.

We respectfully request that DHS act immediately to ensure the safety and well-being of all immigrants in their custody. In addition, the IALNF implores the federal government and the U.S. Congress to work collaboratively and without partisan to provide fundamental and basic health and human services to all immigrants in their custody and develop policies that allow families to stay together during these times of stress and uncertainty that they experience.

The IALNF endorses the American Nurses Association (ANA) request that DHS appoint an expert task force that includes nurses, especially those who focus in pediatrics and diverse communities, to review and adopt best practices and guidelines on how to ensure health and safety for detained immigrants of all ages.⁵ We are requesting that there be Latino nurse representation on this task force.

The IALNF advances the nursing profession by fostering high standards of educating our future nursing workforce and advocating on health care issues that affect nurses and the public. The Code of Ethics for Nurses compels the IALNF to give voice to and advocate for the human rights and health care needs of the most vulnerable among us.

The IALNF stands ready to work together as partners with DHS and CBP to add the voices of nurses and nursing expertise to this current humanitarian crisis. If you have any questions, please contact

Sincerely,



Norma Martínez Rogers
Founder & President of IALNF

1 Deshpande, Pia. (2019, June 24). Alex Azar both defends and pans conditions for migrant children at border. *Politico*, Retrieved from <https://www.politico.com/story/2019/06/24/detention-centers-children-alex-azar-1378366>

2 Deshpande, Retrieved from <https://www.politico.com/story/2019/06/24/detention-centers-children-alex-azar-1378366>

³Office of Inspector General, Homeland Security (2019, June 3). Concerns about ICE detainee treatment and care at four detention facilities. Retrieved from <https://www.oig.dhs.gov/sites/default/files/assets/2019-06/OIG-19-47-Jun19.pdf>

⁴ Mason, D.J. and Cox, K. (2014, Nov.-Dec.). *Toxic Stress in childhood: Why we should all be concerned*. *Nursing Outlook*, 62 (6), 382-383. <http://dx.doi.org/10.1016/j.outlook.2014.09.001>

⁵American Nurses Association. (2019, June 27). Letter to Acting Secretary of Homeland Security. Retrieved from <https://www.nursingworld.org/~49ed5e/globalassets/docs/ana/comment-letters/ana-president-letter-to-cbp-2019-06-27.pdf>