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CC: U.S. Senate Committee on Health, Education, Labor and Pension (HELP); U.S. Senate Committee on the Judiciary; U.S. Senate Committee on Appropriations: U.S. Senate Committee on Homeland Security and Governmental Affairs; ICE Health Service Corps; DHS Office of Civil Rights and Civil Liberties; Office of Immigration Detention Oversight; DHS Office of Inspector General

VIA EMAIL

Re: ICE's Detention of Pregnant Individuals

Dear Officers:

We write to you to raise urgent concern regarding the detention of pregnant immigrants in Immigration and Customs Enforcement ("ICE") facilities. Over the past five months, our organizations have met with and documented the experiences of over a dozen women, including those who were pregnant, or who had recently experienced a miscarriage, while held at the South Louisiana ICE Processing Center in Basile, Louisiana ("Basile"), and the Stewart Detention Center in Lumpkin, Georgia ("Stewart").

These women reported gravely troubling experiences of shackling, use of restraints, and solitary confinement; delayed and substandard prenatal care; denial of prenatal vitamins; inadequate food and water; medical care provided without informed consent; lack of interpretation and translation in medical encounters; and medical neglect leading to dangerous infection after miscarriage. Many of their stories are shared in detail below.

We urge ICE to immediately conduct a review to identify and release all pregnant individuals in its custody, and to ensure that the agency continues to abide by federal regulations on parole and its directive not to "detain, arrest, or take into custody for an administrative violation of the immigration laws individuals known to be pregnant, postpartum, or nursing."[1] ICE should also provide a clear method for pregnant individuals to request and be granted timely release from custody. In the meantime, ICE must ensure the provision of timely medical care, in accordance with community standards of care, to pregnant, postpartum, and nursing individuals in its custody; and refrain from use of shackles, restraints, or solitary confinement. We request a meeting with you at your earliest convenience to discuss these urgent matters.

A. ICE Has Arrested and Detained Pregnant Individuals in Violation of Agency Regulations and Directives.

Since January 2025, ICE has rapidly increased the number of people held in immigration detention by taking into custody individuals whom the agency would not have detained in the past, and by declining to release qualifying individuals from custody on bond, parole, or supervised release.[2]

Although ICE has yet to respond to Congressional inquiries for statistical information,[3] informal observation by legal service providers suggests that ICE detention facilities currently hold a significant number of pregnant individuals. Indeed, ICE admitted that Basile alone held 14 pregnant women during a Congressional site visit on April 23 and 24, 2025.[4]

Our interviews indicate that ICE has issued detainers, arrested, and taken pregnant individuals into custody, even after they have informed officers of their pregnancy, in violation of agency guidance. ICE Directive 11032.4, *Identification and Monitoring of Pregnant, Postpartum, or Nursing Individuals* instructs that ICE should not detain pregnant, postpartum, or nursing individuals except under very limited circumstances.[5] This directive provides that "[g]enerally, ICE should not detain, arrest, or take into custody for an administrative violation of the

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[1] 8 C.F.R. § 212.5(b)(2); ICE, *Directive: Identification and Monitoring of Pregnant, Postpartum, or Nursing Individuals* (2021), https://www.ice.gov/directive-identification-and-monitoring-pregnant-postpartum-or-nursing-individuals [https://perma.cc/ADL4-KFLW].

[2] Albert Sun, *Deportations Reach New High After Summer Surge in Immigration Arrests*, N.T. Times, Aug. 21, 2025, https://www.nytimes.com/interactive/2025/08/21/us/trump-deportations-summer-data-immigration-arrests.html.

[3] Letter from Members of Congress to DHS Secretary Kristi Noem, Sept. 18, 2025, https://www.murray.senate.gov/wp-content/uploads/2025/09/09182025-Letter-to-Sec.-Noem-on-Pregnant-Postpartum-and-Nursing-Women-in-ICE-Custody-FINAL.pdf [https://perma.cc/TH7D-LALH].

[4] U.S. Senate Committee on the Judiciary, *What Is It Really Like to Be in ICE Detention?* (2025), https://www.judiciary.senate.gov/imo/media/doc/SENATE%20JUDICIARY%20COMMITTEE%20RANKING%20MEMBER%20REVEALS%20DEVASTATING%20INSIGHTS%20INTO%20ICE%20DETENTION%20IN%20EXCLUSIVE%20SITE%20VISIT.pdf [https://perma.cc/58YG-95TX]. The New Orleans Field Office appears to hold the highest number of women in detention in the entire country on average, at over 1,600 women per day. Immigration and Customs Enforcement, ICE Facilities Data, FY 25, https://www.ice.gov/doclib/detention/FY25_detentionStats09252025.xlsx (last updated Sept. 25, 2025) (over 1,600 women held in ICE detention facilities on average each day in facilities under the New Orleans, Louisiana Field Office; over 240 women on average each day under the Atlanta, Georgia Field Office).

[5] ICE, *Directive: Identification and Monitoring of Pregnant, Postpartum, or Nursing Individuals*.

immigration laws known to be pregnant, postpartum, or nursing unless release is prohibited by law or exceptional circumstances exist," and that "ICE officers and agents should carefully weigh the decision to issue a detainer, arrest, or take into custody for an administrative violation of the immigration laws an individual who is known to be pregnant, postpartum, or nursing."[6]

Notably, ICE has issued detainers and then detained several cases of pregnant individuals arising from domestic disputes. This practice endangers survivors of domestic violence, particularly pregnant individuals, who are more vulnerable to abuse and violence.[7]

ICE has also failed to release from custody individuals known to be pregnant, even though federal regulations provide that "[w]omen who have been medically certified as pregnant" should be released on parole. 8 C.F.R. § 212.5(b)(2).

B. Once Detained, Pregnant Individuals Endure Shackling and Restraints, Solitary Confinement, Delayed and Substandard Prenatal Care, Care without Consent, Inadequate Food, and Medical Neglect.

ICE's detention of pregnant individuals has led to serious harm. Pregnant women in detention reported shackling and restraints during transport, detention in solitary confinement, delayed and substandard prenatal care, denial of prenatal vitamins, inadequate food, lack of interpretation and translation in medical encounters, medical care without informed consent, and medical neglect leading to dangerous infection after miscarriage.

In our interviews, three pregnant women reported that ICE used restraints on them during their detention. One of these women reported that officers placed her arms and legs in shackles while she was being transported to the emergency room and bleeding from an active miscarriage. ICE and its contractors are prohibited from use of restraints on individuals who are pregnant or in postdelivery recuperation. This prohibition on restraints "applies to all pregnant individuals in the custody of ICE, whether during transport, in a detention facility, or at an outside medical facility."[8]

One woman whom ICE knew to be pregnant was placed in solitary confinement for several days upon her arrival at Basile. ICE must avoid placing pregnant, postpartum, or nursing individuals in solitary confinement ("Special Management Unit" or "SMU"), and if it is ever used, it must "be used only as a last resort and when no other viable housing options exist. Any such

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[6] *Id.*

[7] For example, in 2018 to 2019, the homicide rate of women ages 15-44 was 16% higher among those who were pregnant or within one year of pregnancy compared to those who were not. Maeve Wallace, et al., *Homicide During Pregnancy and the Postpartum Period in the United States, 2018-2019*, 138 Obstetrics and Gynecology 762 (2021). Almost half (45.3%) of homicides to women who were pregnant or within one year of pregnancy have been found to involve intimate partner violence. Megan Steele-Baser, et al., *Intimate Partner Violence and Pregnancy and Infant Health Outcomes — Pregnancy Risk Assessment Monitoring System, Nine U.S. Jurisdictions, 2016–2022*. 73 Morbidity and Mortality Weekly Report 1093 (2024).

[8] ICE, *Directive: Identification and Monitoring of Pregnant, Postpartum, or Nursing Individuals.*

placement in an SMU shall be for the briefest terms and in direct consultation with health services."[9]

Almost all the women we interviewed reported inadequate prenatal care, denial of prenatal vitamins, and/or medical neglect while detained, which further underscores why ICE should not detain pregnant individuals. When the government detains or imprisons pregnant, postpartum, or nursing individuals, it must ensure access to pregnancy services including routine or specialized prenatal care, including, but not limited to "nutrition, exercise, complications of pregnancy, prenatal vitamins, labor and delivery, postpartum care, lactation, family planning, abortion services and parental skills education."[10] Those identified as high risk shall be referred, as appropriate, to a physician specializing in high-risk pregnancies.[11] Notably, vaginal bleeding, cramping, pain, and passing blood clots, as well as other symptoms such as amniotic leakage that may give rise to a miscarriage during pregnancy, constitute a "serious medical need" that requires prompt attention under Constitutional standards. *See Goebert v. Lee Cnty*., 510 F.3d 1312, 1327 (11th Cir. 2007); *Pool v. Sebastian Cnty., Ark*., 418 F.3d 934, 945 (8th Cir. 2005); *Cooper v. Rogers,* 968 F. Supp. 2d 1121, 1131 (M.D. Ala. 2013).

Two women reported that they were subjected to medical tests or injections without informed consent or without adequate translation. ICE's Detention Standards provide that a facility health care practitioner must obtain consent from all detainees "before any medical examination or treatment, except in emergency circumstances."[12] Detention facilities are required to provide detainees with limited English proficiency with language interpretation and translation services for medical care.[13] Medical professionals in Louisiana must obtain a patient's consent to a medical procedure before performing it. *Coppage v. Gamble,* 324 So. 2d 21, 23 (La. App. 2d Cir. 1975); *see also* American College of Obstetricians & Gynecologists, *Informed Consent and Shared Decision Making in Obstetrics and Gynecology*, *Committee Opinion* (2021) (noting that "a professional medical interpreter should be made available in person, by phone, or through video remote technology to assist with the informed consent process.").

C. Experiences of Pregnant Women Detained by ICE.

Our organizations have met and documented the experiences of over a dozen women, including those who were pregnant, or who had recently experienced a miscarriage, while held at Basile and Stewart. Six of these women have bravely given their permission to share their stories. All of them proceed under pseudonym.

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[9] U.S. Immigration and Customs Enforcement, Enforcement and Removal Operations, Review of the Use of Special Management Units for ICE Detainees, Dec. 6, 2024, *available at* https://www.aclu.org/documents/foia-document-review-of-the-use-of-special-management-units-for-ice-detainees.

[10] *See, e.g.* ICE, Performance Based National Detention Standards 2011 (2016), Section 4-4, https://www.ice.gov/doclib/detention-standards/2011/4-4.pdf.

[11] *Id.*

[12] ICE, National Detention Standards 119 (2025), https://www.ice.gov/doclib/detention-standards/2025/nds2025.pdf

[13] *Id.* at 3.

1. *Alicia*: Inadequate Food; Medical Care without Consent; Miscarriage without Care, Leading to Dangerous Infection

In April 2025, ICE detained "Alicia" without notice or warning at a regularly scheduled check-in appointment. Alicia had lived in Louisiana for almost a decade with her daughter and U.S. citizen son, in full compliance with the conditions of her ICE supervision. After ICE detained her at Basile, she tested positive for pregnancy. Detention officials transported her to a local hospital for a blood test but failed to communicate with her in Spanish and did not explain her medical treatment plan.

In detention, Alicia received minimal portions of substandard food that left her feeling hungry and malnourished. In May 2025, she began experiencing severe abdominal pain, vaginal discharge, cramping, and bleeding. She alerted facility officials, who took her to a local emergency room. Facility officials and medical personnel failed to explain their medical treatment to Alicia and without consent performed an invasive test of her uterus that caused her excruciating pain and injected her with an unknown medication. Medical personnel then told Alicia that she had suffered a miscarriage. Facility officials then immediately transported her back to the detention center at approximately 1:00 a.m., and told her she would be deported to her country of origin.

However, ICE held Alicia at Basile for two more months, during which time she continued to experience bleeding, swelling, severe uterine pain that radiated through her lower extremities, and foul-smelling vaginal discharge. In June 2025, these symptoms persisted, and Alicia developed a fever. The pain became so severe it prevented her from sleeping. She placed multiple sick call requests with medical officials at the facility, but received no response and was not evaluated by any medical personnel. In July 2025, Alicia was deported to her country of origin and separated from her children in the United States. After deportation, Alicia had to seek medical treatment at a hospital for a severe infection.

2. *Marie:* Solitary Confinement; Denial of Prenatal Vitamins; Medical Neglect

"Marie" is a graduate student who was detained by ICE at Basile for over twenty weeks during her pregnancy. Marie entered the United States on a valid tourist visa in the summer of 2024. During her lawful visit, in December 2024, Marie discovered that she was pregnant, and began to see an OB/GYN, who informed her that her pregnancy was considered to be high-risk due to underlying medical conditions. Around the same time, Marie was the victim of a crime where she lost her original travel and identity documents. Although the embassy of her country of residence issued her an electronic version as a replacement, she soon learned that these electronic documents were insufficient to travel.

In April 2025, Marie decided to travel to Canada from the United States. However, at the U.S.-Canadian border, Canadian officials requested additional documentation that she did not have at the time. The Canadian border officials then contacted U.S. Customs and Border Protection (CBP) officers, who detained her. Marie explained that she was pregnant and that she was waiting for paper copies of her embassy documents. CBP officers told her that she would not be held for

long because she was pregnant. However, two days later, officials transferred her thousands of miles south to ICE's detention center in Basile, Louisiana.

During the twenty weeks that she was detained at Basile, Marie endured multiple instances of medical neglect and psychological harm. When she first arrived at the facility, officials did not believe her when she informed them of her pregnancy. Facility officials held her in solitary confinement for at least three days before she was placed into a general population unit with other women. However, she was not scheduled for an off-site hospital visit for pregnancy screening and prenatal care review until other pregnant women in the dorms repeatedly complained to facility staff on her behalf.

While detained, Marie was often unable to eat at all because the food provided was of such poor quality. On at least one occasion, she requested a visit with the medical providers at Basile because she had not been given her prenatal vitamins. During the sick call a nurse told her, "You won't die if you don't take them and they will not be available for a week."

Because she was denied interpretation during her medical visits at the facility, Marie was unsure whether she was provided prenatal screenings, including HIV testing, or flu and Tdap vaccinations. On several occasions while detained at Basile, Marie reported severe cramps and requested medical help but was ignored. On at least one occasion in the medical unit, a nurse refused to listen to her symptoms and concerns. On another occasion, staff in the medical unit gave Marie a shot without her consent; because she was deprived of interpretation services, she did not know what medication it contained. Throughout her time at Basile, the only treatment or medication she was provided to address the severe cramping she repeatedly complained of was Tylenol. She was also repeatedly told by medical staff that it was common for pregnant women to experience severe cramping, dismissing her concerns.

Throughout the twenty weeks that she was detained at Basile, Marie consistently used the communication tablets in the detention units to attempt to contact ICE about updates regarding her requests for release and return to her country of legal residence, but received no response. It was only after legal advocates intervened that Marie was finally released.

While detained at Basile, Marie also witnessed medical neglect of other pregnant women. For example, she witnessed a fellow detainee miscarry in the bathroom of their housing unit. The Guatemalan woman gave birth to a stillborn baby despite complaining to facility staff that she had been spotting for three days. Medical staff at Basile reportedly told her it was "normal," dismissing the woman's concerns as they had done to Marie. After she was released from detention, Marie cried every day and night for a week, and suffered from night terrors. In the final weeks of her pregnancy, she developed eclampsia and experienced a very difficult and painful delivery of her baby in August 2025. She continues to struggle with postpartum depression, in large part due to the trauma she experienced while detained.

3. *Lucia*: Delayed Medical Care; Shackling During Miscarriage

In January 2025, "Lucia" came to the United States seeking a better life for herself. At the border, immigration officials released her into the United States, requiring her to wear an ankle monitor and to comply with supervision orders. To Lucia's surprise, immigration officers came to her home a few weeks later and took her to be detained at the Stewart ICE Processing Center in Lumpkin, Georgia, only a few days after she had attended her scheduled ICE check-in appointment.

Although Lucia did not realize it at the time, she was pregnant and began to experience symptoms typical for the first trimester of pregnancy, including vomiting and pain in her abdomen. Luicia made multiple medical requests to see a doctor at the detention facility, but was not given an appointment for several weeks, at which time medical personnel confirmed that she was approximately two months pregnant. Less than two weeks later, Lucia began to experience heavy vaginal bleeding and cramping in the middle of the night. Although Lucia requested immediate medical attention, she was not taken to see medical staff until the middle of the next day. However, medical personnel merely took her to a small room, and left her bleeding alone without informing her of what was happening. Medical staff did not give her any food, water, or pain medication for several hours. Much later that evening, after a significant loss of blood, Lucia was transported to an emergency room approximately an hour away, with her arms and legs shackled.

At the hospital, Lucia required a blood transfusion because she had lost so much blood. Medical staff at the hospital informed Lucia that she had suffered a miscarriage. She was given pills for pain at the hospital and was then returned to the detention center. Lucia has experienced abdominal pain and heavy bleeding even a month after her miscarriage.

4. *Julieta:* Shackling During Transport; Inedible Food

"Julieta," a woman in her mid-twenties, is pregnant for the first time and is due to give birth in November 2025. Julieta lawfully entered the United States via a CBP One appointment, after waiting in Mexico for over six months for an available appointment. She was granted entry and issued a visa, which is not set to expire until next year. Despite her lawful status and known pregnancy, ICE detained Julieta and only released her after two months of detention at Basile.

ICE is prohibited from placing restraints on anyone known to be pregnant. However, ICE officers shackled Julieta's ankles, hands, and waist as they transported her from the East Coast to Louisiana on a flight with five layovers. Julieta went without eating when she was first detained at Basile, as she found that the food was inedible. She fears that poor nutrition and the stress of detention could endanger her pregnancy or result in miscarriage.

5. *Ana*: Denial of Prenatal Vitamins; Lack of Medical Treatment; Continued Detention

"Ana" is a woman in her early twenties who is, as of the writing of this letter, still detained by ICE at Basile. She is approximately six months pregnant.

Prior to ICE's apprehension, Ana's sole criminal charge was for a domestic dispute for which she had successfully resolved. ICE detained Ana despite the fact that she informed them she was pregnant and had medical confirmation of the pregnancy.

For the first month of her detention at Basile, Ana was not provided prenatal vitamins. Instead, medical staff simply told her, "You have to wait." Ana is suffering from nausea, vomiting, and pain all over her body, but the detention facility has provided her only with Tylenol, and no other treatment or medication. Ana reports that she barely eats because she cannot hold down most of the food she receives at the detention center.

Although Ana is pregnant with a young U.S. citizen child waiting for her at home, has successfully resolved her domestic dispute charge, and has shown evidence that her removal proceedings will likely remain unresolved by the time she is in her third trimester of pregnancy, ICE continues to detain Ana.

6. *Jenny*: Restraints During Transport; Inadequate Nutrition

In February 2025, Jenny, a woman in her late twenties, was taken into custody by ICE. At that time, Jenny was visibly pregnant, and she informed the officers of her pregnancy, but ICE officers placed her into restraints and transferred her to a local immigration detention facility. A few days later, ICE transferred Jenny across the country to its detention facility in Basile, Louisiana.

At Basile, Jenny began to fear for the safety of her pregnancy. She was placed in a housing unit with several other pregnant women, and met two women who had recently suffered miscarriages. Jenny frequently got sick with diarrhea and vomiting due to the poor quality of the food. Detained people in her unit had to ask guards for drinking water, which some guards refused to provide. While detained at Basile, Jenny experienced vaginal bleeding, requiring two separate visits to the emergency room. ICE released Jenny from custody only after advocates intervened in her case. She has since given birth to a newborn. However, she feels deeply traumatized by her experience, and often thinks about the other women left behind in detention.

D. Recommendations

We provide the following recommendations to ICE with respect to the detention and treatment of pregnant, postpartum, and nursing individuals, and the provision of gynecological care.

- Immediately conduct a review to identify and release all pregnant detainees in ICE custody, and ensure that the agency continues to abide by federal regulations and its directive not to "detain, arrest, or take into custody for an administrative violation of the immigration laws known to be pregnant, postpartum, or nursing."
- Provide a clear and efficient method for pregnant individuals to request and be granted timely release from custody.
- Ensure the provision of timely medical care, in accordance with community standards of care, to pregnant, postpartum, and nursing individuals in its custody.

- Conduct an investigation into lack of prenatal care, informed consent, and language access to detainees requesting OB/GYN care at Basile.
- Close detention facilities, such as Basile, that have documented and sustained violations of detention standards and protocols that protect pregnant, postpartum, and nursing individuals.

We appreciate your prompt attention to this very serious matter. For more information, please contact Eunice Cho at echo@aclu.org; Sarah Decker at decker@rfkhumanrights.org, Bridget Pranzatelli at bridget@nipnlg.org; and Mich Gonzalez at sanctuarynowabolitionproject@proton.me.

Sincerely,

American Civil Liberties Union
American Civil Liberties Union of Louisiana
National Immigration Project
Robert F. Kennedy Human Rights
Sanctuary of the South
Sanctuary Now Abolition Project