May 31, 2024

The Honorable Joseph R. Biden President of the United States The White House 1600 Pennsylvania Ave. NW Washington, DC 20500

The Honorable Alejandro Mayorkas Secretary, U.S. Department of Homeland Security 2707 Martin Luther King Jr. Ave. SE Washington, DC 20528

Mr. Patrick J. Lechleitner Acting Director and Senior Official Performing the Duties of the Director U.S. Immigration and Customs Enforcement U.S. Department of Homeland Security 2707 Martin Luther King Jr. Ave. SE Washington, DC 20528

Delivered via email

RE: End solitary confinement in ICE detention

Dear President Biden, Secretary Mayorkas, and Acting Director Lechleitner:

The undersigned 475 healthcare professionals—including, but not limited to, physicians, nurses, psychologists, social workers—write today in unison. In alignment with our professional and ethical obligations as healthcare professionals, we urge the U.S. government to immediately cease the use of solitary confinement in immigration detention.

As members of the U.S. healthcare community, we are dedicated to the preservation and enhancement of human life and overall well-being. Our mandate extends to understanding the broader context of a person's life circumstances and its potential impact on health, including the conditions in Immigration Customs Enforcement (ICE) detention and solitary confinement, the <u>detrimental effects of which are already</u> <u>extensively documented.</u>1

The harm inflicted by solitary confinement includes significant, and sometimes permanent, negative health outcomes, such as paranoia, experiencing hallucinations, confusion, heart palpitations, interrupted and disrupted sleep patterns, and a decline in

¹ ICE and DHS refer to solitary confinement by more neutral and euphemistic terms such as "segregation," "segregated housing," or "restrictive housing." They differentiate between its use for discipline — "disciplinary segregation" — and for "safety," labelled "administrative segregation." Notably, "administrative segregation" is sometimes justified for medical isolation in the absence of a designated medical unit, contrasting with typical medical isolation practices. Standard isolation for medical reasons involves the use of regular rooms, equipped with standard amenities and controlled access, where the individual is treated as a patient rather than a prisoner.

cognitive abilities. Solitary confinement is <u>also known</u> to trigger Post Traumatic Stress Disorder, <u>self-harm</u>, <u>and</u>, <u>at worst</u>, <u>raise the risk of suicide</u>.

A new report <u>"Endless Nightmare": Torture and Inhuman Treatment in Solitary</u> <u>Confinement in U.S. Immigration Detention</u> (Endless Nightmare) details the horrors of solitary confinement in ICE detention centers. The report, a collaboration between Physicians for Human Rights, researchers at Harvard Medical School, and faculty and students at Harvard Law School, was the latest of numerous reports of ICE's harmful and arbitrary use of solitary confinement, as well as the agency's violations of international conventions and domestic and international legal standards.2

ICE has isolated people for months and even years; in the last five years alone, ICE has placed people in solitary confinement over 14,000 times. It has used solitary confinement as punishment for minor infractions, such as using profanity or not getting out of bunk during count. ICE has isolated people with serious vulnerabilities, including people with mental health and physical conditions. ICE placed nearly 700 people in solitary confinement for more than 90 days and more than 40 people for more than one year. ICE has done all of this despite <u>its own protocol</u> instructing that disciplinary solitary confinement should last no longer than one month except in "extraordinary circumstances," and <u>its 2013 "Segregation Directive,"</u> which stipulates that "placement in administrative segregation [solitary confinement] due to a special vulnerability should be used only as a last resort and when no other viable housing options exist."

Despite overwhelming evidence of the detrimental impacts solitary confinement has on physical and mental health, ICE has persistently neglected to address this issue

Project on Government Oversight, ISOLATED: ICE Confines Some Detainees with Mental Illness in Solitary for Months, August 2019, https://www.pogo.org/investigations/isolated-ice-confines-some-detainees-with-mental-illness-in-solitary-for-months

² American Immigration Council, Complaint Urges Investigation into misuse of Solitary Confinement in Colorado, July 2023 https://www.americanimmigrationcouncil.org/research/complaint-on-misuse-solitary-confinement-colorado-immigration-detention

United States Government Accountability Office, Report to the Chairman, Committee on Homeland Security, House of Representatives, Actions Needed to Collect Consistent Information for Segregated Housing Oversight, October 2022 https://www.gao.gov/assets/gao-23-105366.pdf

Unlock the Box, Banning Torture: Legislative Trends and Policy Solutions for Restricting and Ending Solitary Confinement throughout the United States, January 2023, https://unlocktheboxcampaign.org/wpcontent/uploads/2023/01/UTB-BanningTorture-TrendReport-January2023.pdf

National Immigrant Justice Center, Physicians for Human Rights, September 2012,

https://immigrantjustice.org/sites/immigrantjustice.org/files/Invisible%20in%20Isolation-

The%20Use%20of%20Segregation%20and%20Solitary%20Confinement%20in%20Immigration%20Detention.September%202012_7.pdf

Washington Post, Perspective by Ellen Gallagher, The other problem with ICE detention: Solitary confinement, August 2019, https://www.washingtonpost.com/outlook/2019/08/28/other-problem-with-ice-detention-solitary-confinement/

Office of Inspector General, ICE Needs to Improve Its Oversight of Segregation Use in Detention Facilities, October 2021, https://www.oig.dhs.gov/sites/default/files/assets/2021-10/OIG-22-01-Oct21.pdf

US Senate Committee on the Judiciary, Durbin, Colleagues Press ICE on "Excessive and Seemingly Indiscriminate" Use of Solitary Confinement, February 2022, https://www.judiciary.senate.gov/press/dem/releases/durbin-colleagues-press-ice-on-excessive-and-seemingly-indiscriminate-use-of-solitary-confinement

Oversight of ICE Detention Facilities: Is DHS Doing Enough? Hearing before the Subcommittee on Oversight, Management, and Accountability of the Committee on

Homeland Security House of Representatives, One Hundred Sixteenth Congress, First Session, September 2019, https://www.govinfo.gov/content/pkg/CHRG-116hhrg40455/html/CHRG-116hhrg40455.htm

adequately. This barbaric practice continues to expose thousands of people to the severe risk of enduring mental and physical health complications. In fact, since we released our report in February, a man who was still in solitary confinement at the time of our analysis, has died. <u>Mr. Charles Daniel was in detention for almost four years</u>, and spent virtually that entire time in solitary confinement, despite the fact that he was known to have serious mental health issues. ICE has repeatedly failed to respond effectively to the mountain of evidence that keeping people in solitary confinement is both unnecessary and dangerous, and at times life-threatening.

It has now been over three months since the release of Endless Nightmare, and despite repeated, loud calls to end solitary confinement over the last decade, nothing appears to have changed. Solitary confinement continues to be used in ICE detention, inflicting serious and sometimes irreparable harm, including death, on people within our borders and in your custody.

We echo the sentiments of the nearly 200 diverse organizations <u>that wrote to you</u> with an urgent call to action: the Department of Homeland Security (DHS) must end the practice of solitary confinement ("segregation") in all immigration detention centers.

Please note that signatories are endorsing in their personal capacity and their signatures may not reflect the official stance of the organizations or institutions with which they are affiliated.

Sincerely,

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