The Honorable Matthew T. Albence  
Acting Director  
U.S. Immigration and Customs Enforcement  
500 12th St., SW  
Washington, D.C. 20536

Dear Acting Director Albence:

We write today to obtain more information about the Berks County Residential Center (Berks). On July 29, 2019, we toured the facility and had the opportunity to speak with both staff and detainees. We seek clarification on several inconsistencies as well as more information regarding accounts of deportations that have taken place in recent months.

Families seeking refuge in the United States should not be detained, particularly for prolonged periods. Many alternatives to detention exist. These alternatives are not only more humane, but have high efficacy rates and are more cost effective. Families seeking protection should not be detained as they work through the legal process. However, when families are detained, they should at a minimum be held in safe conditions with all of their needs met, including access to medical care, mental health services and sleep.

I. Medical Care

During our visit, we were informed that residents have access to medical services at all hours provided by the U.S. Immigration and Customs Enforcement (ICE) Health Service Corps. However, we have heard troubling accounts of medical care not being provided until children are very ill.\textsuperscript{1} We have also heard that when residents are sent to the hospital or outside medical services and provided a prescription, those prescriptions will not be filled automatically. Rather, ICE providers will review and determine whether to provide the treatment. In addition, there have been reported instances of families being separated when a parent or child is sent to outside medical services.\textsuperscript{2} Accordingly, we request the following information:

1. Are pediatricians available on site to care for children?
2. Do health practitioners receive specialized training for the care of children?
3. Are medical staff available on site bilingual? What efforts are made to hire bilingual staff?
4. Is there a procedure for residents to request medical attention?
5. When are residents referred for outside care?

6. Is there a procedure for residents to request medical care outside of the facility for either themselves or their children?

7. What is your policy regarding filling prescriptions from outside medical providers?
   • Have there been any incidents in which Berks medical providers have decided not to fill a prescription or provide a course of treatment recommended by an outside medical provider? If so, why?

8. If a parent requires medical care at an outside facility, are children kept at Berks or are they permitted to remain with the parent? Who makes that determination, the parent or Berks staff? If the determination is made by the staff, what are the guidelines they follow in making that determination?

9. What guidelines does Berks use when determining whether families or individuals who are part of a family unit need to be kept separate from the general population, including from their own family members due to illness?
   • What information is provided to families, and in particular children, during instances where they have been separated from one another for medical care?

II. Mental Health Care

Asylum seekers and refugees are more likely to experience poor mental health than the local population, including higher rates of depression, PTSD and other anxiety disorders. Asylum seekers may have endured significant trauma both in their country of origin and on their journey to the United States. Furthermore, detention itself can be a point of stress, particularly for children. Research has shown that children in detention experience high rates of clinical depression, anxiety disorders and PTSD. Accordingly, we request the following information about the mental health services available to residents at Berks:

1. Are children and/or adult family members provided initial, trauma-informed mental health screenings or must they proactively seek out services?

2. When are residents informed of the availability of mental health services?

3. Are mental health practitioners available on site with specialized training for the treatment of children and adolescents?

4. Cultural competence is central to providing mental health services to culturally diverse populations. Cultural differences may influence how individuals view mental health; how and when they will seek treatment; the nature of the client and practitioner relationship; and even the outcomes of interventions. Does Berks work to provide culturally appropriate and sensitive mental health care?
   a. Please describe how culturally competent care is provided, including specific training for serving populations within the facility.
   b. How are mental health services provided in the language of the client? Are any mental health staff bilingual? What efforts are made to hire bilingual staff?

---


4 Sarah A. MacLean et al., Mental health of children held at a United States immigration detention center, 230 Social Science & Medicine 303-308 (2019).

5. Play and spending time outdoors has important benefits for children. We were informed that children are able to go outside whenever they want to, but that they must have supervision. How often do children play outside? What is the process for requesting to go outside, and are requests denied?

III. Safety and Wellbeing

The importance of sleep, including uninterrupted sleep at night is well documented. Adequate sleep aligns with “improved attention, behavior, learning, memory, emotional regulation, quality of life and mental and physical health.” Inadequate sleep increases risk of injuries, hypertension, obesity and depression. Staff at Berks conduct security checks every 15 minutes during the night, opening the door and shining a flashlight in each room. These disruptions occur approximately 40 times/night, and are likely causing sleep deficiencies for many children. Indeed, just this month the harm of these checks was documented by the film “Las Madres de Berks” as well as the statement of a British family held in the facility. While keeping families secure and safe from harm is important, it seems that there must far less disruptive means of reaching that goal. Please provide an explanation for the purpose of these security checks and whether alternate security methods have been considered.

In 2016, a guard plead guilty to sexually assaulting a 19-year old mother detained in Berks. The survivor had fled abuse in Honduras with her three-year-old son. Unfortunately, there have been other documented instances of sexual harassment and abuse throughout the U.S. immigration system. The National Prison Rape Elimination Commission has reported on the particular vulnerability of immigrants in detention to sexual harassment and abuse.

1. Since the 2016 incident, has Berks implemented new policies or procedures to safeguard residents from similar instances of abuse? If so, please describe them.

2. Is there a safe, confidential way for residents to report harassment, sexual abuse or mistreatment by personnel or other residents? Please include information regarding the process to report such claims and the procedure by which claims are handled and investigated.

3. Do staff and residents receive any sexual harassment and assault prevention training? If so, please describe the programs.

---

7 Id.
IV. Facility Procedures and Length of Detention

Some residents with whom we spoke did not have basic information about their immigration case and were unaware of their rights or how long they might be detained. The detainee stated that when she first came to Berks she was told that she was taken there because she was "illegal," and that she was aware of her status but not informed of anything else. While providing an exact timeline to residents may not be possible, it is extremely concerning that a family could be detained over a week without any information about their situation.

1. Please provide a description of the intake process at Berks, including a description of the information provided to residents and the timeline for when this information is provided.
   a. In your response, please provide official guidelines or training manuals for intake staff as well as any written documents provided to residents.
   b. Please also indicate whether and what information about the facility, outside resources, health and mental health services, legal proceedings and length of stay are provided.
   c. Please indicate the language(s) in which the information is communicated.

2. Do residents have access to telephone services? Are these services free for all residents; are there any restrictions on when or to whom calls can be made?
   - During the tour, we noticed calling card machines on the premises. Are residents required to purchase calling cards or do they have the option to use other payment methods for calls? Please provide the cost and rates for calling cards purchased from the machines on premises.

3. What procedures does the facility have in place pertaining to infant care and hygiene?
   a. Are there policies in place to ensure that infants are able to remain with parents at all times? If so, please provide a copy of any procedures related specifically to the care of infants under 12 months of age.
   b. On October 15, 2019, it was reported that an ICE officer told a detained mother she could allow her infant to be separated from the family and sent to another facility. Please provide the context for this comment, a description of the protocols under which a child would be separated from their parent while in family detention, and the number of instances since January 20, 2019 that a child has been voluntarily or involuntarily separated from their parent at Berks.12

Among the most concerning stories we heard from residents, were about attempted and successful deportations in the middle of the night. Residents reported being taken from bed without warning, denied access to telephones to call counsel and transported for removal. In many of the reported instances, legal proceedings had not yet concluded as some residents had pending appeals. All those seeking asylum should have a fair opportunity to present their claims in accordance with U.S. and international law. Deportations in the middle of the night not only make it more difficult for residents to reach counsel and therefore exercise their legal rights, but

also are potentially traumatizing to the families at Berks. For children being deported, the
disruption without explanation can be frightening and traumatizing. One resident described the
experience as worse than detention. For the children that remain, waking up to find other
residents have simply disappeared is also frightening and likely contributes to their considerable
anxiety. We strongly urge you to develop removal protocols that not only ensure individuals can
fully exercise their legal rights, but are more humane and consider the emotional impact of such
actions on children.

Finally, it is well established that detention, even brief detention, is harmful to children. While
the Flores settlement indicates that children should not be detained for more than twenty days,
there have been many reported instances of families at Berks held well beyond that period. In
2017, there were reports of families, including young children, detained for over 600 days.\footnote{Amnesty International, USA: Children Held at Berks Immigration Center Granted Release (2017),
https://www.amnesty.ie/usa-children-held-berks-immigration-center-granted-release} As
such, please provide:

1. The number of families, including a breakdown of adults and children, that have been at
   Berks since January 20, 2017:
   a. the average length of stay for these families; and
   b. the number of families that have been held for over 20 days and the total length
      of time for each of these instances.
2. The length of time each family currently in custody has been at the facility.
3. Since January 20, 2017, the number of attempted deportations for individuals or families
   with pending legal cases or appeals; and deportations for individuals or families with
   pending legal cases or appeals.
4. Since January 20, 2017, the number of families that were deported from the facility and
   the number of families released to a sponsor.

We are a Nation of immigrants and we are a Nation of laws. It is possible for the United States to
foster an immigration system that respects both of these values by treating all individuals with
compassion and dignity, while also securing our border and protecting our national security. The
Berks facility is not furthering either of these goals. We appreciate your prompt attention in this
matter and look forward to a prompt response.

Sincerely,

\[Signature\]
Robert P. Casey, Jr.
United States Senator

\[Signature\]
Chissy Houlahan
Member of Congress

\footnote{Amnesty International, USA: Children Held at Berks Immigration Center Granted Release (2017),
https://www.amnesty.ie/usa-children-held-berks-immigration-center-granted-release}