



A Culture Of Cruelty

Medical Neglect & Migrant Health in Border Patrol Short-term Custody

In the Arizona desert, high temperatures and sun exposure create extremely high risk for medical complications, especially for pregnant women, diabetics, and the elderly. Many people detained in the desert by Border Patrol have not had adequate food or water for days and their system is severely compromised.

In No More Death's report: "Culture of Cruelty: Abuse & Impunity in Short-Term Border Patrol Custody" which includes interviews with 12,895 deportees in Nogales, Agua Prieta, and Naco, 433 self-reported that emergency medical treatment was needed and/or requested while held in Border Patrol custody.

The concerns seen repeatedly include:

- *Medications for pre-existing conditions like high blood pressure and diabetes confiscated, thrown out, or not returned;*
- *Open wounds, broken bones, and heat illness untreated before repatriation;*
- *Untreated blisters that cover entire soles of feet and have become infected;*
- *Repatriation without sufficient documentation of medical care received or adequately filled prescriptions.*

Additionally, health of detainees is further compromised by Border Patrol's failure to provide sufficient water for detainees who are already often suffering from moderate to severe dehydration at the time of apprehension. "Culture of Cruelty" documents 863 cases of denial of water and 1,402 cases of insufficient access to water (18% of all interviewees). Children were more likely than adults to be denied water or given insufficient water.

Example cases: Failure to Provided Needed Medical Care Before Repatriation

Dec. 15, 2009: Interview with 30 year old female, who had **sprained her ankle badly while walking in the desert, and at no point in custody did she receive medical treatment.** At the time of the interview, she was in severe pain and could hardly put weight on the injured ankle. Another woman in her cell who was seven months pregnant had a fever and asked to go to the hospital. **The guards insisted that she wasn't pregnant, and the woman later suffered a miscarriage.**

Of those indicating that they needed care only 14% (59) reported receiving access to care – the other 86% (374) state they were deported without receiving needed medical care.¹

The report also documents **51 cases of medication confiscation** by Border Patrol (with diabetes medication as the top one reported) and **22 cases of people who were repatriated from the hospital without follow-up care or medication being provided.**

Nov. 10, 2010: Interview with 33 year old male, lost in the desert for five days, most of them without food or water. He drank his own urine until it turned bloody. Border Patrol took him to University Medical Center in Tucson, AZ where he was given an IV and a prescription for antibiotics. **He spent six hours in the hospital before he was deported at 7 p.m. to Nogales, Sonora, without getting his prescription filled. He was brought to the general hospital in Nogales where he was monitored overnight and received another IV.**

Example Cases: Prescription Access during Detention & Repatriation

March 9, 2010: Interview with an adult female who reported that **she has lung cancer and needed to take medicine every four hours, but the guards did not permit her to do so.** When she was repatriated to Nogales she had to be taken to the hospital.

January 29, 2011: Interview with an adult female who reported that her 18-year-old son **is asthmatic and had his inhaler with him but it was confiscated by Border Patrol. She says his asthma is serious enough that if he had an attack without access to his inhaler he could be in a lot of danger.**

What Should be Done?

There are already written regulations that address these issues, but they are routinely violated.

Customs & Border Protection's *Hold Rooms & Short-Term Custody Memorandum* from 6/2/2008 states:

- detainees with medical concerns will be evaluated by an EMT, paramedic, physician, or nurse practitioner¹
- detainees have access to appropriate medical services, prescriptions, medications, and emergency medical treatment and will be able to self-administer adequate prescription information²

The Department of Homeland Security & local Border Patrol sectors must **review and evaluate existing practices** to:

1. Ensure that appropriate medical care provision for Border Patrol detainees before repatriation
2. Ensure access to necessary prescription medications for Border Patrol detainees during detention & repatriation

For More Information

To read the full report and accompanying materials,
and to find out what you can do to get involved:
check out the No More Deaths website at www.nomoredeaths.org
or www.cultureofcruelty.org

¹ Hold Room Memo, Section 6.7.2

² Hold Room Memo, Section 6.7.5