

December 18, 2018

The Honorable Kirstjen M. Nielsen  
U.S. Secretary of Homeland Security  
245 Murray Lane, SW  
Washington, DC 20528

The Honorable Commissioner Kevin K. McAleenan  
U.S. Customs and Border Protection  
1300 Pennsylvania Ave., NW  
Washington, DC 20229

Dear Secretary Nielsen and Commissioner McAleenan:

As medical and mental health providers for women, children, and adolescents, we are deeply troubled by news of the death of 7-year-old Jakelin Caal Maquin from Guatemala while in the custody of U.S. Customs and Border Protection (CBP). Our organizations believe that conditions in CBP custody are inconsistent with evidence-based recommendations for appropriate care and treatment of children and pregnant women. As such, they are not appropriate for children or pregnant women. We call for a full, transparent, and public investigation of Jakelin's death and the circumstances surrounding it, as well as any other deaths that may have occurred in CBP or Immigration and Customs Enforcement custody. We strongly urge the Department of Homeland Security (DHS) to implement specific meaningful steps to ensure that all children and pregnant women in CBP custody receive appropriate medical and mental health screening and necessary follow-up care by trained providers.

The death of this young child is tragic and never should have happened. Many of our organizations have sought to provide expert advice to the federal government, including your agency, about how to best care for and treat immigrant children and pregnant women in your custody. That offer still stands. If DHS facilities are not adequately staffed and equipped to properly care for and treat pregnant women and children, as Mr. McAleenan testified last week, then pregnant women and children should not be subjected to them. For instance, the signs and symptoms of dehydration and shock in a child, which can be fatal, are recognizable and treatable by a trained professional.

Studies of detained immigrants have shown that children and parents may suffer negative physical and emotional symptoms from detention, including anxiety, depression, and posttraumatic stress disorder<sup>i</sup>. Conditions in DHS facilities, which include open toilets, constant light exposure, insufficient food and water, no bathing facilities, extremely cold temperatures, and forcing pregnant women and children to sleep on cement floors, are traumatizing<sup>ii</sup>. Such facilities are simply not appropriate places for children or for pregnant women.

As experts in medical and mental health care for pregnant women and children, we urge your agencies to work with us to develop policies that ensure the health of children and families is protected throughout the immigration process. The death of this child is a tragic event. We ask that you investigate the circumstances that led to her death in a transparent and thorough manner, that you take actions to ease the suffering of her family, and that you implement specific meaningful

changes to ensure children and pregnant women in your custody receive necessary medical and mental health screening and follow-up care by trained professionals.

Sincerely,

Academic Pediatric Association  
American Academy of Pediatrics  
American Association of Child & Adolescent Psychiatry  
American College of Obstetricians and Gynecologists  
American College of Physicians  
American Medical Association  
American Pediatric Society  
American Psychiatric Association  
American Psychological Association  
Association of Medical School Pediatric Department Chairs  
National Association of Pediatric Nurse Practitioners  
Pediatric Policy Council  
Society for Adolescent Health and Medicine  
Society for Pediatric Research

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<sup>i</sup>Linton JM, Griffin M, Shapiro AJ, AAP COUNCIL ON COMMUNITY PEDIATRICS. Detention of Immigrant Children. *Pediatrics*. 2017;139(5):e20170483.

<sup>ii</sup> Ibid.