FACT SHEET

If You Really Care about Justice for Immigrant Women in Detention, You Should Care about Reproductive Justice!

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What is Reproductive Justice?

The Reproductive Justice (RJ) movement places reproductive health and rights within a social justice and human rights framework. The movement supports the right of individuals to have the children they want, raise the children they have, and plan their families through safe, legal access to abortion and contraception. In order to make these rights a reality, the movement recognizes that RJ will only be achieved when all people have the economic, social, and political power to make healthy decisions about their bodies, sexuality, and reproduction.

Why is Health Care in Detention Facilities a Reproductive Justice Issue?

Over the last few years, the federal government has increased the number of people in immigration detention. On any given day around 29,000 individuals nationwide are in detention. This is an almost 50% increase since 2005. Approximately 10% of detained immigrants are women. Women in detention include undocumented immigrants, legal permanent residents convicted of certain crimes, refugees resettled by the US who did not apply for permanent residency, and even US citizens whose citizenship the government disputes. Nevertheless, despite the number of women in detention facilities, reproductive health care services remain inadequate. Policies, such as allowing security personnel to determine whether a woman can see a provider, discourage women from seeking the care they need. Women who have been held in detention report inaccurate pregnancy tests and delayed access to prenatal care, threatening both their health and the health of their fetus. Nursing mothers report not being given information about or supplied with breast pumps that would allow them to maintain their milk supply while separated from their children. Women in detention facilities, like all women, deserve access to adequate reproductive health care.

Immigrant Women in Detention Facilities Receive Inadequate Reproductive Health Care

The Department of Homeland Security’s Immigration and Customs Enforcement (ICE) oversees health care for detained women and determines what services to provide. Healthcare in detention facilities is generally focused on emergency care. An individual’s stay in detention is supposed to be brief. In reality, though, people often spend months or even years in detention. While in detention women may be deterred from seeking reproductive health care because most detention facilities require that requests be placed with security personnel in the housing unit or by submitting a “sick call.” Not only does this violate standard medical practice, which requires that only trained medical staff make determinations about care, it discourages women from seeking care for fear of retaliation or even embarrassment about having to provide personal medical details to non-medical staff.
Pregnancy related care is inadequate. While in detention, pregnant women are supposed to “have access to pregnancy services including routine or specialized prenatal care, pregnancy testing, comprehensive counseling and assistance, postpartum follow up, lactation services and abortion services.” Abortions are only covered “if the life of the mother would be endangered by carrying a fetus to term, or in the case of rape or incest.” In all other instances, ICE will arrange for transportation to an appointment paid for by the woman herself or a third party. For many women in detention, without income or support networks, raising the funds for an abortion could be a nearly insurmountable task.

In its 2009 report, Human Rights Watch found that access to pregnancy care varied considerably and that medical tests were not always scheduled in a timely manner. This can delay needed prenatal care and cause unnecessary harm to the pregnant woman and/or her fetus. Pregnant women also reported being denied prenatal care after a urine test came back negative. In one instance, a woman in her fifth month of pregnancy was given a chest X-ray against her protests after a urine test failed to confirm her pregnancy.

Nursing mothers do not receive necessary support. Since 2007, ICE Field Offices have been directed to consider paroling all nursing mothers who do not meet the criteria for mandatory detention and who do not present a national security risk. Yet implementation and enforcement of this policy has been inconsistent. Perhaps the greatest challenge presented to nursing mothers in detention facilities is lack of breast pumps, which would allow them to maintain their milk supply while separated from their children and resume nursing once reunited. In a comprehensive study of detention facilities conducted by Human Rights Watch, none of the five nursing mothers interviewed by Human Rights Watch were offered the option of using a breast pump. Prematurely halting lactation has negative health implications for both the mother and child. Women who breastfeed are at a lower risk of developing breast and ovarian cancer. Children who are breastfed are less likely to suffer from pneumonia, viral infections, and, research suggests, possibly obesity and diabetes.

Women Deserve Better Treatment

Women held in detention facilities deserve access to adequate and culturally sensitive reproductive health care. Women should not be deterred from seeing a health care provider and they should get timely medical care, including accurate pregnancy tests and prenatal screenings. Whenever possible, nursing mothers should be paroled. If they remain in detention, breast pumps should be made available to them so that they can maintain their milk supply. No woman, regardless of her immigration status, should be denied necessary reproductive health care.
4  Safeguard and Expand the Rights of Immigrants to Reproductive Health Care, URB. INITIATIVE FOR REPROD. HEALTH (2009) [hereinafter Safeguard and Expand the Rights], http://www.urbaninitiative.org/SiteContent/Static/Docs/AgendaCh10Immigrants.pdf.
5  Id. at 11-12.
6  Safeguard and Expand the Rights, supra note iv.
7  Id. at 16 fn. 39.
8  Id. at 17.
9  Id. at 29.
10  Id.
12  Id. at 307.
13  Id.
14  Safeguard and Expand the Rights, supra note iv at 52.
15  Id. at 53.
17  Id. at 55.
18  Id. at 57.