

# Doctors call for expanded reporting of medical care given in Immigration and Customs Enforcement detention centers

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A new [study](#) led by Dr. Annette Dekker, an assistant professor in the Department of Emergency Medicine at UCLA, calls for the U.S.

Immigration and Customs Enforcement (ICE) detention centers to increase health outcome reporting for detained immigrants to monitor the quality of medical care. Pulling from three different data sources, the researchers found discrepancies in care reported by emergency medical services (EMS) compared to ICE reports.

Building upon work that reviews deaths that occur at ICE detention centers, Dekker and colleagues sought to address concerns that individuals detained by ICE receive subpar medical care. This study aimed to further understand how ICE manages medical emergencies.

To conduct the study, published in *JAMA Network Open*, the researchers collaborated with EMS agencies to obtain data from 911 calls at three of the five detention centers in California that exclusively house detained immigrants from 2018 to 2022. They also analyzed data from ICE and the California Department of Justice (CA DOJ).

Researchers report that obtaining [relevant data](#) to study medical emergencies was challenging due to limited reporting from ICE. "We were looking at a box and trying to interpret a few rays of light that are coming out of it rather than just opening the lid to see inside," Dekker said.

The study found that ICE itself reported more medical emergencies that required offsite care than was accounted for in EMS records. Dekker says the inconsistency in numbers raises questions about what medical care is provided in these centers.

Females in one detention center, according to EMS records, were disproportionately likely to require a call to 911, in many cases due to pregnancy complications. Several of these pregnancy-related [medical emergencies](#) occurred after ICE released a directive stating that pregnant people should not be detained at ICE centers. EMS records also showed

fewer psychiatric emergencies than expected based on the number of mental health encounters, including [suicide attempts](#), reported by ICE.

ICE is reporting less information about detainee health care now than during the four-year period this study was conducted, according to Dekker, and no longer releases monthly censuses or facility inspection reports.

"If you look at other publicly funded health care systems like Medicaid or Medicare, there are clear standards and rigorous metrics must be collected and reported," Dekker said.

"It is very hard to contextualize what is happening at ICE [detention centers](#) and there is a huge need to expand the required reporting metrics so that we can ensure these facilities are providing appropriate [medical care](#)."

**More information:** Dekker et al, Emergency Medical Responses at US Immigration and Customs Enforcement Detention Centers in California, *JAMA Network Open* (2023). [DOI: 10.1001/jamanetworkopen.2023.45540](#)

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