

“Child imprisonment”: Healthcare workers demand end to ICE detention of children as medical toll mounts

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Nearly 4,000 healthcare professionals from 49 states have issued a joint open letter to Department of Homeland Security (DHS) Secretary Kristi Noem, demanding the immediate release of all children from Immigration and Customs Enforcement (ICE) detention centers. The letter, drafted by board-certified pediatricians and signed by a wide array of physicians, nurses, and public health experts, is a sweeping indictment of state repression—a meticulous, medically documented exposure of the squalid, life-threatening conditions to which the Trump administration is deliberately subjecting immigrant children.

This action takes place against the backdrop of a massive escalation of interior enforcement and mass deportations during the second term of the Trump administration. According to recent data, the number of children held in ICE custody on any given day has skyrocketed by more than sixfold since the start of the administration. ICE now holds an average of 170 children daily, with the population surging to 400 or more on certain days. In total, ICE has booked at least 3,800 children into detention facilities since the beginning of Trump’s second term, deliberately subjecting thousands of youths to extended periods of incarceration. These detentions brazenly violate the 20-day limit established under the long-standing Flores Settlement Agreement—a 1997 consent decree which, while it does not state a specific number of days explicitly, has been judicially interpreted since 2015 as prohibiting the detention of children with their families for more than 20 days.

The open letter, spearheaded by board-certified pediatricians Anita K. Patel, Ashley Marie Cozzo and Lara Jones, cuts through bureaucratic euphemism to the physiological reality of what detention does to developing bodies. “Children are not tiny adults,” Dr. Cozzo emphasized, noting that they possess unique physiological vulnerabilities that put them at fundamentally different levels of risk than adults. Dr. Patel stated flatly: “It’s not just child detention. This is child imprisonment in substandard living conditions.”

The central demand of these medical professionals is the immediate implementation of American Academy of Pediatrics (AAP) guidelines, “Detention of Immigrant Children,” which unequivocally state that children should never be held in immigration detention and that these facilities must be permanently shuttered. The AAP authors make clear that the practice of detaining children—including infants and those who are medically fragile—exposes them to “predictable, severe, and lasting harm.”

This intervention by healthcare workers is not merely a medical plea. It is a critical political act by professionals defending basic human rights and human life against the violence of the state. That this apparatus has been constructed and expanded across administrations of both political parties makes the call to action all the more urgent: the fight cannot be left to appeals to institutions that have sanctioned or enabled these conditions.

The medical and psychological destruction of children in these facilities

is not an accidental byproduct of the system. It is a scientifically documented reality, the contours of which have been established by decades of peer-reviewed research.

In the 2018 article titled “Childhood trauma and the enduring consequences of forcibly separating children from parents at the United States border,” published in the journal *BMC Medicine*, Dr. Martin H. Teicher explains that forcibly removing a child from their parents is one of the most profound traumas a child can experience. This rupture undermines the pivotal foundation youth require for self-regulation and resilience, plunging them into a state of “toxic stress.” The article details that this prolonged terror during sensitive developmental periods causes enduring epigenetic effects on the stress response system, modifying brain structure, function and connectivity, and significantly increasing the long-term risk for obesity, chronic inflammation and cardiovascular disease.

A 2025 systematic review published in the journal *European Child & Adolescent Psychiatry*, titled “Immigration detention of children: a systematic review and meta-analysis of physical and mental health impacts,” documents the devastating psychological toll of incarceration on youth. The researchers found that the prevalence of post-traumatic stress disorder (PTSD) ranges from 6.5 percent in briefly detained children to an appalling 100 percent in children detained for 12 months or longer. Major depressive disorder was reported in 44 to 95 percent of detained children, while suicidal ideation or self-harm occurred in 25 to 57 percent. The study’s meta-analysis revealed that detained children exhibit total psychological difficulty scores twice the normative population mean, with severe elevations in emotional symptoms, conduct problems and peer problems.

The 2020 article “Association of Family Member Detention or Deportation With Latino or Latina Adolescents’ Later Risks of Suicidal Ideation, Alcohol Use, and Externalizing Problems,” published in *JAMA Pediatrics*, demonstrated the broader societal consequences of the immigration crackdown. The study found that the detention or deportation of a family member more than doubles an adolescent’s odds of experiencing suicidal ideation and nearly triples the odds of clinical externalizing behaviors and alcohol use, underscoring how immigration policies are jeopardizing the health and well-being of entire generations.

The widespread physical health impacts among detained children have been equally well documented. Malnutrition rates range between 24 and 56 percent, severe dental disease is pervasive, and vitamin D deficiency affects over half of detained children. Severe developmental delays—including regression in language and social development—were observed in 75 percent of children detained for a year or more.

These risks are further documented by a 2024 article in the *American Journal of Public Health* titled “Health Risks of Unaccompanied Immigrant Children in Federal Custody and in US Communities,” which

notes that children in the custody of Customs and Border Protection (CBP) face acute risks of severe dehydration, acute to chronic malnutrition and uncontrolled respiratory infections. In many instances, youth endure hours or days without access to formal medical evaluation, food or latrines, allowing easily treatable conditions to become life-threatening crises.

The AAP's policy statement establishes that DHS facilities, including those run by CBP and ICE, fundamentally fail to meet the basic standards for the residential care of children. There is no evidence that spending *any* time in detention is safe for young people. The guidelines warn that holding children in these institutional settings, even for short periods, exposes them to "toxic stress"—a state of prolonged fear that undermines self-regulation, directly harms developing brains, and results in severe, long-term psychological trauma, including post-traumatic stress disorder, anxiety, depression and physical degradation.

The human toll of this imprisonment is captured in the harrowing ordeal of Juan Nicolás, a two-month-old infant detained at the Dilley, Texas facility. The infant developed bronchitis and persistent vomiting. With no doctor available during the early morning hours when the baby most needed attention, facility staff were unable to provide physician-level care, and the family was left to wait while his condition deteriorated over several days. Only after an acute deterioration on February 16 was he rushed by ambulance to a hospital. Juan Nicolás was discharged around midnight and returned to the Dilley facility—and he, his mother, father and 16-month-old sister were deported to Mexico the following day.

The ordeal of Juan Nicolás and his family is not an anomaly, but the standard operating procedure of a system designed to break the physical and psychological health of immigrants.

In another case that unfolded in February 2025, a 10-year-old US citizen who had recently undergone surgery for a rare brain tumor was swept up with her family at an immigration checkpoint as they drove to Houston for a specialist follow-up appointment. Despite the mother pleading with authorities about her daughter's medical condition, the family was taken into custody, held in a detention facility, and deported to Mexico within 24 hours. Allegations documented in a subsequent civil rights complaint filed by the Texas Civil Rights Project state that the girl was denied medical attention in detention. Now 11 years old, her recovery has stalled in Mexico, where she cannot access the specialized care her Houston doctors provided.

The letter also highlights a child who suffered permanent vision loss after being violently struck in the eye with a mop by a staff member and denied access to a specialist for weeks.

This systematic abuse is now unfolding amid a deadly measles outbreak inside the Dilley facility. Dr. Cozzo warned that "with overcrowding, poor sanitation, poor infection control, inadequate nutrition, and inadequate sleep, the immediate health risk to infants and children is largely infectious." Infants under six months old, whose immune systems are immature and who cannot yet receive the MMR vaccine, rely entirely on herd immunity—a protection largely absent in the crowded, unventilated cells of ICE detention. By holding infants in these facilities during an outbreak, federal authorities are, as Dr. Patel observed, "knowingly exposing them to potentially deadly infectious diseases."

Beyond demanding the immediate release of all children in custody, the nearly 4,000 healthcare signatories called for real-time public transparency regarding infectious disease outbreaks, injuries and deaths, as well as independent pediatric oversight with unrestricted access to inspect all facilities. They demand continuous on-site coverage by licensed pediatric practitioners, trauma-informed mental health care and the mandatory independent investigation of all child deaths and serious injuries in custody. Taken together, the letter is a concrete and devastating exposure of a federal apparatus that routinely inflicts lethal harm upon the most vulnerable members of these immigrant families.

The full reality of these fascistic policies is laid bare at the Dilley Immigration Processing Center in South Texas. Operated by the for-profit prison contractor CoreCivic, this modern-day concentration camp is where the federal government's policy of deliberate degradation assumes its most concentrated form. Families report a complete lack of basic sanitation, being forced to mix infant formula with "putrid" water, and being served rotting food contaminated with mold, bugs and worms.

Medical care within these facilities is not merely substandard; it constitutes deliberate, life-threatening neglect. The documented abuses include a child suffering permanent hearing loss after an ear infection was ignored, a pregnant woman collapsing without prompt aid and a detainee with appendicitis who was left writhing in pain on the floor and told by guards to simply take Tylenol and return in three days. Compounding this physical torment is the psychological terror inflicted by the state's agents, who routinely hurl verbal abuse at detainees and use the explicit threat of family separation—telling parents their children will be taken and placed in foster care—to enforce compliance and discipline.

Attorney Eric Lee published on X this account of the conditions in Dilley which triggered a suicide attempt by a 13-year-old girl.

What these healthcare workers have made undeniable—through meticulous documentation and courageous public action—is that the imprisonment and systematic destruction of immigrant children is not policy gone wrong. It is policy working as intended, by a bipartisan state apparatus constructed over decades, and now carried out to its logical extreme under Trump.

The fight to defend the lives and rights of these children cannot be entrusted to the courts that have sanctioned this apparatus, nor to the political parties that built it. It demands the independent, international mobilization of the working class—the only social force with both the interest and the power to dismantle the system of state terror, exploitation and deliberate human suffering that makes these concentration camps possible.



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