

## One Hundred Tenth Congress U.S. House of Representatives Committee on Homeland Security Washington, DC 20515

October 24, 2007

The Honorable Julie Myers
Assistant Secretary
U.S. Immigration and Customs Enforcement
Department of Homeland Security
425 I St., N.W.
Washington, DC 20528

Dear Assistant Secretary Myers:

In the past 60 days, I have sent you two letters. To refresh your recollection, the first letter requested information about the protocols for medical treatment of deportees. The second letter requested information regarding well-publicized allegations of involuntary administration of sedatives to detainees held in ICE custody. To date, these letters have gone unanswered.

First, I am chagrined by the failure of your agency to either respond to these letters or proactively explain the inability to provide a timely response to this committee. I trust that in the future you will make every effort to respond in a timely fashion or take appropriate steps to notify the Committee if a timely response is unlikely. Hopefully, your track record will improve by providing a timely response to the issues raised in this letter.

The purpose of this letter is to once again seek clarification from you regarding disturbing and well-publicized incidents of the involuntary administration of psychotropic (also called anti-psychotic) medication to deportees who do not suffer from or have a history of mental illness. In your September 2007, Senate testimony, you indicated that 56 deportees had been given psychotropic drugs over a seven-month period between October 1, 2006, and April 30, 2007. Of those individuals, thirty-three of them had no history of psychological problems. It is my understanding that you have reportedly stated that this medication was involuntarily administered because of the "combative behavior" of the deportees.

The practice of administering a psychotropic drug as a means of control to an individual who does not suffer from a mental disorder is, to say the least, extremely troubling. Given the

<sup>&</sup>lt;sup>1</sup> Letter from Chairman Bennie G. Thompson, Chairman House Committee on Homeland Security to the Honorable Julie Myers, Assistant Secretary, U.S. Immigrations and Customs Enforcement (August 21, 2007) (on file with the Majority Staff of the Committee on Homeland Security).

<sup>&</sup>lt;sup>2</sup> Letter from Chairman Bennie G. Thompson, Chairman House Committee on Homeland Security to the Honorable Julie Myers, Assistant Secretary, U.S. Immigrations and Customs Enforcement (September 7, 2007) (on file with the Majority Staff of the Committee on Homeland Security).

serious potential side effects of these drugs, the administration of such drugs should be a last resort after other less potentially harmful alternatives have been examined. Specifically, the known side effects of the medication reportedly used include: blurred vision; drowsiness; increased sensitivity of skin to sun possibly resulting in skin rash, itching, redness, skin discoloration, or severe sunburn; and nausea or vomiting. In addition to this panoply of potential problems, this medication can also cause extremely serious side effects including Tardive dyskinesia, a disorder, which may result in uncontrolled body movements, often thought to resemble the effects of Parkinson's disease. Unfortunately, the uncontrolled movements associated with this disorder may not go away once usage of the drug has ceased.

It appears that ICE seeks to justify the administration of this anti-psychotic drug based solely on an *ad hoc* diagnosis of "combativeness".

To be clear, I support the need to effectively implement this country's laws on deportation. However, it would seem to me that these deportations must be conducted in a manner that does not undermine our values. The forced injection of anti-psychotic drugs into individuals who do not have a history of mental illness seems more akin to something that would occur in a totalitarian regime, not in this country.

Please submit answers to the questions below as well as the information requested in the in the previously-referenced letters by October 31, 2007. While this committee normally provides at least two weeks for a response, your agency's lack of timely response leaves few alternatives than to shorten the response period. In the meantime, my staff will be in contact with yours to schedule an in-office meeting.

- 1. According to your Senate testimony, 56 deportees had been given psychotropic drugs over a seven-month period between Oct. 1, 2006, and April 30, 2007.Of those individuals, thirty-three of them had no history of psychological problems. Please provide updated figures covering the period from April 30 2007 through September 30, 2007.
- 2. Please indicate whether the diagnosis of "combativeness" was rendered by a medical professional in each instance noted in your answer to question #1.
- 3. Please indicate whether a court order was obtained in each instance described in your answer to question #1.
- 4. If a court order was not obtained to mandate these injections, please provide the legal authority ICE relies upon that vitiates the need for such an order.
- 5. Please provide a narrative explaining how the involuntary administration of antipsychotic medications is consistent with the National Detention Standards utilized by ICE.

Pursuant to Rule X (3) (g) and Rule XI of the Rules of the House of Representatives, please respond to the above requests no later than October 31, 2007. If you have any questions, please contact Cherri Branson, Chief Oversight Counsel to House Committee on Homeland Security, at (202) 226-2616. Thank you for your cooperation.

Sincerely,

Bennie G. Thompson

Chairman