



November 17, 2025

Todd Lyons
Acting Director
Immigration and Customs Enforcement
500 12th St SW
Washington, DC 20536

Dear Acting Director Lyons:

As members of the Democratic Women's Caucus and House Democratic Caucus, we write with extreme concerns about the treatment of pregnant women in U.S. Immigration and Customs Enforcement (ICE) facilities. Under ICE Directive 11032.4, ICE is instructed to not detain pregnant, postpartum, or nursing individuals for an administrative violation of immigration unless "release is prohibited by law or exceptional circumstances exist."¹ Federal regulations also require the release of pregnant women from custody via parole.² Despite our urgent appeal to the administration in July regarding the safety of pregnant women in ICE custody,³ we have continued to receive numerous reports of pregnant women who have been detained under unacceptable treatment without clear exceptional circumstances, such as the deeply concerning reports out of the Basile, Louisiana ("Basile"), the Lumpkin, Georgia ("Stewart") ICE and credible report that multiple pregnant women have been detained at Broadview, IL detention centers. At the detention centers, it was reported that pregnant women were being shackled, locked in restraints, or placed in solitary confinement.⁴ They were deprived of prenatal, pregnancy, postpartum, lactation, and miscarriage care, as well as interpretative services, and informed consent for medical services and procedures.⁴ **The health and safety of pregnant women should not be threatened as a result of the administration choosing not to adhere to**

¹ Directive: Identification and Monitoring of Pregnant, Postpartum, or Nursing Individuals | ICE. Accessed October 27, 2025. <https://perma.cc/ADL4-KFLW>

² 8 CFR 212.5 -- Parole of aliens into the United States. The National Archives, Code of Federal Regulations. Accessed October 30, 2025. <https://www.ecfr.gov/current/title-8/part-212/section-212.5>

³ Democratic Women's Caucus. (2025, July 16). *Letter to ICE & CBP regarding treatment of women in detention*. U.S. House of Representatives.

<https://democraticwomenscaucus.house.gov/sites/evo-subsites/democraticwomenscaucus.house.gov/files/evo-media-document/dwc-letter-ice-cbp-treatment-of-women-final.pdf>

⁴ ACLU, Partners Demand ICE Release Pregnant and Postpartum People from ICE Detention. American Civil Liberties Union. <https://www.aclu.org/news/immigrants-rights/pregnant-and-postpartum-women-face-neglect-and-abuse-in-ice-detention>

Federal regulations. That is why we urge the administration to fully comply with the existing regulations and immediately correct the violations.

It is well documented that lack of access to appropriate prenatal and post-partum care leads to significantly worse maternal and infant health outcomes.⁵ In several pregnancy outcome studies, women who were pregnant and gave birth while in custody had increased miscarriage rates, increased premature birth rates, and increased rates of medically unnecessary C-sections compared to the national non-incarcerated average, leading to short- and long-term health problems for both mothers and babies.⁶ Minimum standards for prenatal care in correctional settings are all similar from the American College of Obstetrics and Gynecology (ACOG),⁷ the Federal Bureau of Prisons,⁸ and the National Commission on Correctional Health Care,⁹ which include initial pregnancy testing, testing and treatment for substance use, HIV care, depression screening and treatment, access to appropriate diet and vitamins, delivery in a licensed hospital, and postpartum contraception. From the recent reports, not only are pregnant women being detained against Federal regulations in ICE facilities, but they are also being shackled while experiencing miscarriage, recovering from birth, and while in transit to the hospital. The treatment of pregnant women in ICE facilities is cruel and inhumane.

By detaining vulnerable women in appalling conditions while pregnant, you are subjecting both the pregnant individual and the pregnancy to significant risks and possible death. We urge the Department of Homeland Security (DHS) and ICE to follow its own rules and regulations on detention of pregnant women and demand their humane treatment. Furthermore, we request a response to the following questions and asks within 45 days of receipt of this letter:

1. Immediately conduct a review to identify and release all pregnant detainees who are not a security risk in ICE custody to ensure the agency abides by federal regulations and directives to not “detain, arrest, or take into custody” women who are pregnant, postpartum, or nursing.
2. What processes and trainings do you have in place to ensure the release and/or provision of timely medical care, in accordance with community standards of care, to pregnant, postpartum, and nursing women in ICE custody?

⁵ Prenatal care. Office of Women’s Health. Accessed October 27, 2025. <https://womenshealth.gov/a-z-topics/prenatal-care>

⁶ Wang L. Unsupportive environments and limited policies: Pregnancy, postpartum, and birth during incarceration. Prison Policy Initiative. August 19, 2021. Accessed October 27, 2025. https://www.prisonpolicy.org/blog/2021/08/19/pregnancy_studies/

⁷ ACOG Committee Opinion No. 511: Health care for pregnant and postpartum incarcerated women and adolescent females. *Obstet Gynecol.* 2011;118(5):1198-1202. doi:10.1097/AOG.0b013e31823b17e3

⁸ Hawk K. Program Statement: Birth Control, Pregnancy, Child Placement and Abortion. *U.S. Department of Justice, Federal Bureau of Prisons.* https://www.bop.gov/policy/progstat/6070_005.pdf

⁹ Women’s Health Care. February 15, 2022. Accessed October 27, 2025. <https://ncchc.org/womens-health-care/>

3. Provide a complete breakdown of the following metrics, by facility for the past year, including:
 - a. the number of pregnant women at intake and the women determined to be pregnant at first medical screening;
 - b. the number of births (live and stillbirths) that occurred while in custody;
 - c. the number of medical incidents of pregnant women (e.g., maternal or fetal distress, miscarriage, stillbirth, emergency obstetric care) reported by detainees;
 - d. the number of incidents where pregnant women were placed in restraints or shackles;
 - e. the number of pregnant women placed in any form of segregation; and
 - f. the number and outcome of internal investigations, disciplinary actions, or contractor “corrective action plans” related to the mistreatment or medical neglect of pregnant women in custody.
4. Explain what remedial or preventive benchmarks you use to monitor pregnant women’s health and safety in detention, and how compliance is verified independently.

The inhumane treatment of pregnant women by the administration is shameful. As members of the Democratic Women’s Caucus, we will continue to fight for the safety of all women. We urge your immediate attention to this matter and anticipate a swift and substantive reply.

CC: Kristi Noem, Secretary, Department of Homeland Security; Field Office Directors of the New Orleans and Atlanta ICE Field Offices

Sincerely,



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Member of Congress



Delia C. Ramirez
Member of Congress



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New Member Liaison

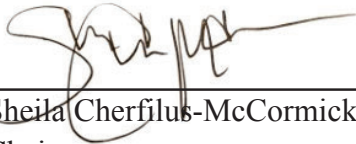
Democratic Women's Caucus



Emily Randall

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Democratic Women's Caucus



Sheila Cherfilus-McCormick

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Global Women's Issues Task
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Democratic Women's Caucus

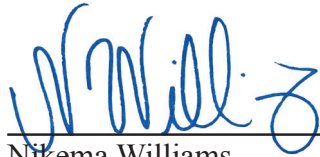


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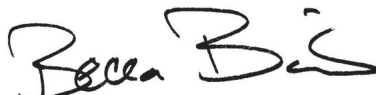
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Jahana Hayes
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Laura Friedman
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Rashida Tlaib
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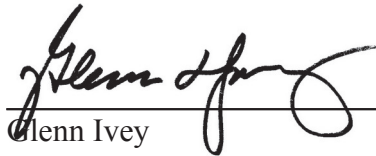
Mike Quigley
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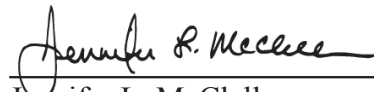
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Glenn Ivey
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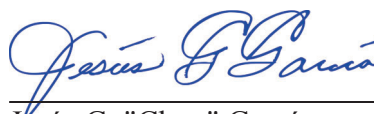
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Julia Brownley
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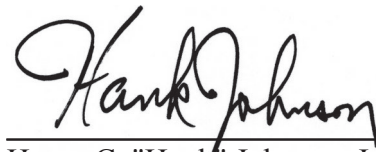
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