

Healthcare Challenges Experienced by Transgender Detainees in US Immigrations and Customs

Enforcement Detention Centers

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Background

In the United States, there is an ongoing battle for the recognition, protection, and rights of transgender people, more directly as it concerns gender documentation law, and mitigating the human rights abuses experienced by transgender inmates in federal and state prisons.^{1,2,3,4} Within this population lies a more complex and often ignored sub-group: transgender detainees in Immigrations and Customs Enforcement (ICE) detention centers^{4,9}. As a function of the unique invisibility resultant of this population's place at the intersection of two severely marginalized groups, the realities and experiences of transgender detainees are severely underrepresented in both in popular media and peer-reviewed research^{1,2,3,4,9}.

Results



Transgender detainees are not protected by the same practices and procedures afforded to other incarcerated or immigrant groups.^{4,5,6}

The policies and regulations that are in place are not applied consistently as a result of differences between detention facilities.⁴



The medicalization of transgender identities complicates a detainee's ability to receive or qualify for care.^{4,9}

Transition-related healthcare services are excluded from or not explicitly protected by federal and state healthcare policy.^{4,5,6,9}



Detainees do not have access to adequate representation which further limits one's ability to access proper care.^{4,9}

Transgender detainees often suffer the consequences of stigma related to both their gender and immigration status.^{4,5,6,9}



Fig 1

Discussion

ICE jurisdiction is not subject to the same policies or court decisions that dictate prison operations or regulate inmate healthcare because they are not a part of the Federal Bureau of Prisons (BOP) or state prisons or jails, and those that do apply to are not necessarily applied universally or consistently⁴. This is because there are different types of detention centers and centers manage many types of immigration statuses, each with different legal circumstances. Detainees also do not have access to adequate legal representation which further complicates difficulties securing proper healthcare⁴.

At the national level, the BOP has clear policies for how transgender inmates should be cared for; their policy states that inmates who have been diagnosed with Gender Identity Disorder and have already started and/or undergone hormone therapy will continue to receive treatment, but only so far as to maintain the level of transition that existed at the time of incarceration^{3,4,5,6}. This leaves those without a Gender Identity Disorder diagnosis and those that wish to further their transition without appropriate care⁴. It is generally accepted that untreated gender dysphoria is a serious medical condition that, if left untreated, may result in undue physical or emotional suffering and even attempted self-castration or suicide.^{5,6}

Transgender detainees are impacted by stigma associated with gender identities and prejudice shaped by incorrect assumptions about how disruptive immigrants are to U.S. society.^{7,8} They display the effects of misconceptions and understandings of vulnerable populations, such as systemic disadvantage, discrepancies in treatment, and general healthcare disparities^{4,5,6,7,8,9}.

Recommendations

Scholars agree that there is a strong need for more substantive data on transgender and detained populations to help better understand their conditions and needs.⁹ This lack of research and resources contributes to inappropriate procedures and insufficient safeguards for vulnerable populations^{4,5,6,9}. It is necessary to recognize the complexity of LGBTI identities and the barriers to care that exist in order to increase detainee safety and mitigate systemic discrimination^{1,2,3,4,5,6,9}. Sensitivity training, and increased access to health care and welfare services are recommended; however, it is advised that detention in the immigration context should be used only as a last resort⁹. Though the UNHCR has published guidelines for the detention of refugees, they do not comprehensively address the troubles that exist for LGBTI+ detainees⁹. The UNHCR and advocate groups recommend providing alternative housing means and sentencing measures for sexual minorities⁹.

Acknowledgements

I am neither an immigrant or a member of the LGBT+ community. I would like to recognize that do not or will ever be able to entirely understand the lived experience of immigrants or sexual minorities. Still, I would like to recognize the strength and courage of those that identify as members of these communities, specifically those that have been imprisoned in immigration detention centers. I would also like to thank those that advocate for these communities. The violations experienced in immigration detention are *human* rights violations. I encourage those that can to learn more about these topics and advocate for these communities in the ways that they can.

More personally, I would like to thank my family, namely my mother, for teaching me to value diversity and encouraging my interest in learning. I would also like to thank my professors at UC San Diego and the Global Health program for nurturing my academic growth and giving me a platform from which to learn about others and myself.

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