



Best Practices for the Care of ICE Transgender Detainees

U.S. Immigration and Customs Enforcement (ICE), Office of Enforcement and Removal Operations (ERO) is committed to providing a respectful and safe environment for all detainees, including those individuals who identify as transgender. To that end, ICE ERO has identified a few best practices to aid ICE ERO facility partners in their care of transgender detainees.

HOUSING

Transgender Dedicated Housing Unit: The facility shall operate a dedicated protective custody unit (PCU) for self-identified transgender detainees. A unit of 30 or more beds is suggested.

Privacy: All transgender detainees in the housing unit should be provided with a reasonably private environment for bathing and toilet facilities, consistent with privacy and security considerations afforded to other female ICE detainees. This is particularly important for this population, as some transgender detainees may have undergone surgical procedures, including breast augmentation, as part of their transition and desire to achieve a more feminine looking appearance.

Staffing: The facility should assign dedicated staff/personnel to work in the transgender housing unit. For consistency and continuity of care, ICE strongly recommends the facility designate certain officers to staff the transgender housing unit.

CUSTODY CLASSIFICATION AND COMMUNICATION

Waiver: ICE will provide our facility partners a waiver for the transgender housing unit as it relates to the Classification Levels and Housing Assignments in Classification System, Sections (V) and (F-G), of the ICE 2011 *Performance-Based National Detention Standards (PBNDS)*. This waiver will relax classification requirements and allow mixed classification housing and assignment of Level 1, Level 2, and/or, Level 3 detainees to the PCU at the same time.

Intake: Upon arrival to the facility, intake personnel should accurately record the detainee as transgender. The facility should consider updating local data systems used to capture detainee information to reflect the detainee's self-identification as transgender. If at any time during the intake process facility staff determine additional privacy is needed, to the extent practicable, staff should make appropriate accommodations to converse with the detainee in private. Facility staff should ensure sensitive information, such as a detainee's gender identity, is not used to the detainee's detriment by facility staff or other detainees, and is not shared with others who do not have a need to know the information.

Staff Communication: Detention facility staff should make every effort to refer to transgender detainees by their preferred pronouns and chosen name, where applicable, so as to promote a respectful and stable environment.

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SECURITY

Searches: Consistent with 2011 PBNDS and U.S. Department of Homeland Security (DHS) policies and standards, including the DHS Prison Rape Elimination Act (PREA), searches of transgender detainees shall be performed by a female officer. Further, per PBNDS 2011, special care should be taken to ensure detainees are strip searched in private. As always, searches should be conducted in a professional and respectful manner; in the least restrictive manner possible, consistent with security needs; and at no time shall any search be conducted solely for the purpose of determining a detainee's biological sex.

DETAINEE SERVICES AND CARE

Hygiene and Commissary: To the extent possible, the facility should ensure transgender detainees are able to maintain acceptable personal grooming practices consistent with their gender identity. Transgender detainees should be provided access to feminine hygiene and personal items that are consistent with their gender identity through the commissary, absent a valid safety, security, or medical concern that is justified and documented.

Clothing: Transgender detainees should be provided female undergarments consistent with their gender identity.

Legal Materials: Where a facility houses only male detainees, but also runs a transgender housing unit, ERO recommends looking into ways to mitigate comingling and unnecessary movement of the transgender detainees. For example, to promote safety and convenience, the facility should consider placing a cart of legal materials as well as an adequate number of computers and office supplies in the transgender housing unit.

Medical Care: Initial medical screening at the facility should inquire into a transgender detainee's gender self-identification and history of transition-related care. Transgender detainees who were already receiving hormone therapy when taken into ICE custody should be provided continued access, and all transgender detainees must have access to mental health care and other transgender-related health care and medication (such as hormone therapy) based on medical need (ICE 2011 PBNDS and DHS PREA). Treatment must follow accepted guidelines regarding medically necessary transition-related care. Consistent with medical care provided to all ICE detainees, medical care for transgender detainees should be provided by qualified and appropriate medical professionals and administered pursuant to the applicable ICE detention standards.

TRAINING, PROGRAMMING, AND RESOURCES

ICE LGBTI Subject Matter Expert: ICE will designate a local ERO field office liaison to serve as a local resource for the facility. The name and contact information of the designated employee will be provided to the facility. The facility should coordinate questions and/or matters related to transgender detainees with the designated Field Liaison.



Training: To ensure competency in their assigned duties, facility staff (medical and other) who will interact with transgender detainees should receive ICE training. ICE ERO will provide in-person and webinar training opportunities related to transgender sensitivity and detainee care, specific instruction on the provisions of transgender care (to include applicable ICE standards and DHS PREA provisions), and on medical care of transgender patients. The facility should facilitate access for trainers to the facility grounds, as needed.



CIBOLA DEDICATED HOUSING UNIT for Transgender Detainees



Nuevo México
New Mexico

ICE está comprometido con la salud, seguridad y el bienestar para todo que se encuentra en nuestra custodia, incluyendo las personas Transgenero.

ICE mantiene una unidad de vivienda dedicada para Transexuales detenidos en el Centro Correccional de Cibola en Nuevo México (Aproximadamente 80 millas de Albuquerque, Nuevo México).

El centro hospeda a un promedio de 60 detenidos en una división separada con varios cuartos para una o dos personas. La división contiene una sala común con televisión, microondas, un área de computación dedicada para acceder información legal, un espacio dedicado para consultas médicas y salud mental y acceso a un área de recreación al air libre durante el día.

En adición, el centro tiene un área designado para visitas con el abogado, servicios religioso y la programación que incluye el grupo de orientación legal proporcionado por organizaciones legales.

El personal del centro de Cibola tiene la capacitación necesaria para fomentar un ambiente seguro, respetuoso y próspero para las personas Transgenero. La familia y amistades tendrán la oportunidad de estar en contacto a través de visitas con las personas en detención dentro de la instalación en acuerdo con las reglas del centro.

Por favor tenga en cuenta que su traslado al centro correccional de Cibola puede tener un impacto en su case migratorio y puede ser un proceso de varios días.

ICE is committed to the health, safety, and wellbeing of everyone in our custody, including transgender individuals.

ICE maintains a dedicated housing unit for transgender detainees in the Cibola County Correctional Center in Milan, New Mexico (about 80 miles from Albuquerque).

The facility houses up to 60 transgender detainees in a separate wing containing several single and double rooms. The wing has common areas with televisions and microwaves, a library with dedicated computers to access legal information, a medical/mental health consultation room, and access to outdoor recreation space.

In addition, the facility has designated areas for attorney visits, religious access, and programming, including a legal rights and responsibilities orientation program provided by local legal services stakeholders.

The Cibola County Correctional Center staff receive training on fostering a safe, respectful, and affirming environment for transgender individuals.

Family and friends will continue to be able to contact you at the facility and visit in accordance with facility rules.

Please note that a transfer to the Cibola County Correctional Center may impact your immigration case, and may be a multi-day process.



PETICIÓN DE TRASLADO / REQUEST FOR TRANSFER

Si usted lo desea, ICE le permitirá tiempo para contactar a su abogado antes del traslado. *Should you wish, ICE will allow you time to contact your attorney prior to the transfer*

“Yo solicito el traslado a la Unidad Dedicada de Alojamiento en Nuevo México.”

“I Request the Transfer to a Dedicated Housing Unit in New Mexico.”

“Yo no solicito el traslado a la Unidad Dedicada de Alojamiento en Nuevo México”

“I Do Not Request the Transfer to a Dedicated Housing Unit in New Mexico.”

Printed Name and Signature / Nombre en letra de molde y firma.

Printed Name and Signature / Nombre en letra de molde y firma.

Date / Fecha

2019-ICFO-2914 Fecha



DETENTION FACILITY TRANSGENDER CARE

ERO

PROCESSING TIPS

- Ask : *Do you fear you will be harmed in detention because of your gender identity?*
 - If possible, take action to provide additional privacy so the individual may answer outside of the hearing range of other detainees.
- If the individual says “Yes,” ask: *Do you wish to disclose your gender identity?*
 - The individual is not required to disclose this information and shall not be disciplined for responses to gender identity-related questions.
 - Searches shall not be conducted solely to determine the individual’s biological sex.
- If the individual says “Yes,” ask: *Do you identify as a man, a woman, or as transgender?*
- Note the individual’s answer in applicable data systems.
- Keep the individual’s information private and share only with others who have a need to know.

PLACEMENT

- As applicable, a Transgender Classification and Care Committee (TCCC) will make the final housing assignment.
- Place transgender detainees into segregation **only as a last resort and when no other viable housing options exist.**

LGBTI DO’S

- Respect the detainee’s expressed gender by using preferred pronouns and terminology.
 - Address the detainee by their chosen name, or if consistent with protocol, by their last name.
 - If you’re not sure what name or pronouns to use, ask the detainee.

LGBTI DON’TS

- Do not use unacceptable terms to describe LGBTI detainees.
- Do not make assumptions based on stereotypes or biological anatomy.
- Do not assume all transgender detainees are gay or “flaunting their sexuality.”
- Do not make “jokes” about a detainee’s sexual orientation or gender identity.

KEY DEFINITIONS



BIOLOGICAL SEX:

A person’s biological status as male or female, with associated physical attributes.



GENDER IDENTITY:

A person’s internal sense of being a man, a woman, or another gender. It is not necessarily based on biological sex or sexual orientation.



GENDER EXPRESSION:

The ways in which people display their gender identity to others, i.e., mannerisms and personal traits.



SEXUAL ORIENTATION:

A pattern of physical, emotional, and/or romantic attraction towards another person.

TRANSGENDER:

A person whose assigned sex at birth does not match their internal sense of gender.

TRANSGENDER MAN:

A person whose birth sex is female but understands himself to be, and desires to live his life as a man.

TRANSGENDER WOMAN:

A person whose birth sex is male but understands herself to be, and desires to live her life as a woman.



Health Screening Questionnaire

FOR TRANSGENDER INDIVIDUALS

Name (Last, First):			
Date of Birth:		Alien File Number:	

STEP 1: The question below should be asked by of all individuals seeking entry into the POE.

Do you identify as a: Man Woman Transgender

- If not transgender, skip step 2 below and follow already established CBP/OFO screening protocol.
- If transgender, proceed to step 2 below, to ask follow-up questions.

STEP 2: If the individual self-identifies as transgender, ask the follow-up questions below.

Prior to coming to the United States, were you taking hormones?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what type were they (pills, injections, both)?			
If yes, how often were you taking them?			
If yes, were they prescribed by a doctor?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Prior to coming to the United States, were you taking any other injections?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what were they?			
If yes, how often were you taking them?			
If yes, were they prescribed by a doctor?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Have you had any cosmetic or sex reassignment surgery (e.g. breast implants/reconstruction, body sculpting, facial and/or voice surgery, or genital surgery)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what type of surgery?			
If yes, when and where?			

Have you had any other surgery?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what type of surgery?			
If yes, when and where?			

Have you experienced medical complication(s) from any of the above?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, when?			
If yes, describe complication(s):			
If yes, what was the resolution?			

Have you been tested for sexually transmitted infections (e.g. HIV, syphilis, gonorrhea, chlamydia)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, when and where?			
If yes, what was the result?			
If positive, have you seen a physician for HIV or other sexually transmitted infection in the last 6 months?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If positive, are you currently on any prescribed medication?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
If yes, what medication?			

! Be sure to include the completed questionnaire in the A-File