Madame Chairwoman and Members of the Committee and Subcommittee:

I thank you very for the opportunity to submit for the record this testimony concerning immigration detainees and medical care.

I write today not in my own name, but in the name--and stead--of a loved one who died while in the custody of Department of Homeland Security and Immigration and Customs Enforcement officials, and the Krome Detention Center in Miami. His name was Joseph Nosius Dantica and he was 81 years old. He was the patriarch, the head, of our family. He was a father of two and grandfather of fifteen, an uncle to nearly two dozen of us, a brother, a friend, and even, after having survived throat cancer, which took away his voice, a minister to a small flock in Port-au-Prince, Haiti. He had been living in the same impoverished neighborhood in Haiti for more than fifty years when on October 24, 2004, United Nations troops and Haitian police forces launched a military operation there. Their goal was to oust armed neighborhood gangs. However, during the clash that
followed, they used the roof of his church to fire at and kill more than a dozen of his neighbors. After these forces left the neighborhood, because the shots had been fired from his roof, gang members came to my uncle's home and threatened to kill him. He was able to flee and eventually travel to the United States, where he has been a frequent visitor for more than 30 years. He had with him a passport and a valid multiple-entry visa, which would have expired in 2008. However because he requested what he termed “temporary” asylum, he was immediately arrested and taken to the Krome Detention Center in Miami, where the medications he was taking for his high blood pressure and inflamed prostate were taken away from him. He made this known as much as he could, to his son, to his lawyer, and to me on the phone, and to the medical staff at Krome where he was held in the short stay medical unit. However his pleas were ignored by those who had taken his medication away.

On the morning of his credible fear hearing, my uncle became ill as a result of this. To those who saw him, including his lawyer, he appeared to be having a seizure and he began to vomit. Vomit shot out of his mouth, his nose, as well as the tracheotomy hole he had in his neck as a result of the throat cancer operation. The vomit was spread all over his face, from his forehead to his chin, down to the front of his dark blue Krome issued overall.

According to a report prepared by the Office of the Inspector General of the
Department of Homeland Security, fifteen minutes passed before help arrived. When a medic and nurse arrived at the scene, the medic accused my uncle of faking his illness. To prove his point, the medic grabbed my uncle’s head and moved it up and down. It was rigid rather than limp, he said. Besides, my uncle would open his eyes now and then and seemed to be looking at him.

“You can’t fake vomit,” my uncle’s lawyer, John Pratt shot back. “This man is very sick and his medication shouldn’t have been taken away from him.”

The medications were indeed taken away, replied the medic, in accordance with the facility’s regulations, and substituted with others.

Later that morning, my uncle’s condition worsened and with manacles on his ankles, he was transported to Miami’s Jackson Memorial Hospital. My uncle’s medical records from Krome and from Jackson Memorial Hospital indicate that he arrived in the emergency room at Jackson Memorial Hospital around 1:00PM with an intravenous drip in progress from Krome. He was evaluated by a nurse practitioner at 1:10PM

At 4:00PM, during a more thorough evaluation by the nurse practitioner, he complained of acute abdominal pain, nausea and loss of appetite. At 5PM, he was transferred to the hospital’s prison area, Ward D. The records indicate that he was seen for the first time by a physician at 1:00PM the next day, exactly twenty-four hours after he’d been brought to the emergency room. At 7:00PM, after more than
twenty hours of no food and sugarless IV fluids, my uncle was sweating profusely and complained of weakness. He was found to be hypoglycemic, with a lower than normal sugar level of 42 mg/dl. At 7:55PM, his heart rate rose to 110 beats per minute. An electrocardiogram (EKG) was performed at 8:16PM. The next note on the chart shows that he was found pulse-less and unresponsive by an immigration guard at 8:30PM. He was pronounced dead at 8:46PM.

There are certainly many heartbreaking elements to my uncle’s death. However, there are certainly moments where the medical system in detention failed him. First of all, the fact that his medication, which he had been taking for many years in a careful balance that took into consideration his high blood pressure and his status as a cancer survivor, had been taken away was one. Secondly the fact that he had not been taken seriously when he fell ill during the credible fear hearing, had been accused of faking his illness, was another. The lack of instant and serious response to his becoming ill at the credible fear hearing implied that his symptoms might also not have been taken seriously elsewhere away from the view of others. Furthermore, the fact that he was not seen by a physician soon after he was brought to the emergency room by Krome officials was also part of his continually sub par medical attention. Also the fact that he was not permitted by Homeland Security and Krome officials to see loved ones, who also wanted to see him, during his final hours must have left him feeling less than human, at best.
After my uncle died, the Department of Homeland Security simply gave my family a corpse and a cause of death—acute and chronic pancreatitis—which he’d never shown any symptoms of before he became ill at Krome and for which he was never screened, tested, diagnosed, or treated while he was at the Krome medical unit or at Jackson Memorial Hospital. We were given no further explanations or clarification concerning his last days. In order to receive his medical records, with the help of the Florida Immigrant Advocacy Center, we had to file Freedom of Information Act requests as well as a lawsuit. From the perspective of a family member, this is a nightmare. Not only did we tragically lose our loved one, but we had to fight a huge bureaucracy to find out what happened to them.

Recently in an article entitled “New Scrutiny as Immigrants Die in Custody,” Nina Bernstein, a New York Times reporter, quoted Jamie Zuieback, a spokeswoman for The Department of Homeland Security, as saying that “Anybody who violates our national immigration law is going to get the same treatment by I.C.E. regardless of their medical condition.” First of all, my uncle and many of the others who have died, and are dying in the custody of the Department of Homeland Security and I.C.E. officials did not violate any immigration laws. All many of them have done, was request asylum, which is an internationally acknowledged human right. Furthermore, if this, as stated by Ms. Zuieback to the New York Times, is the general attitude of and implied policy of Department of Homeland
Security and I.C.E officials—to criminalize the right of a person to seek asylum and then see the lack of medical attention and care given to them as part of the punishment—then more people will continue to die in their care.

During our efforts to see my uncle in his last days, we were consistently told that Department of Homeland Security Officials, I.C.E and Krome officials had the right to make decisions in his medical care. In that type of situation, this can mean that they literally have our loved ones’ lives in their hands. Therefore, if our loved ones are sick, they should be treated. If they need emergency care, they should get it. They are called detainees, but really they are prisoners. As family members we quickly learn that. But even prisoners deserve to be treated fairly and decently and humanely. This is what we consistently tell jailers of other countries. How about we practice some of it here ourselves?

Immigration detention is one of the fastest growing forms of incarceration in the United States. Deaths in custody will only increase if we neglect to care for people who are withering away and dying unheard and neglected. People like my uncle who was not just Alien # 27041999, but a father, a grandfather, a brother, and uncle, a friend, a clergyman, who was extraordinarily loved and greatly treasured and is missed every single day by those who loved him very very much.