



# COMMITTEE ON HOMELAND SECURITY

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## Hearing Statement of Chairman Bennie G. Thompson (D-MS)

### *Children in CBP Custody: Examining Deaths, Medical Care Procedures, and Improper Spending*

July 15, 2020

The Committee is convening today to examine three critical, related, and deeply troubling issues: the terrible deaths of young children in the custody of Customs and Border Protection (CBP); CBP's failure to consistently implement the revised medical screening procedures it adopted after children died in its custody; and CBP's improper expenditure of emergency funding appropriated by Congress for the care of migrants.

In December 2018, two children died in CBP custody—a 7-year-old girl named Jakelin and an 8-year-old boy named Felipe. Last year, another three children died in CBP custody or shortly after being released.

On January 4, 2019, I sent a letter to the Department of Homeland Security requesting documents related to the deaths in 2018. After the Department failed to produce all documents responsive to the Committee's request, in November 2019, the Committee issued a narrowly tailored subpoena by voice vote for many of the documents originally requested in my letter ten months prior.

In December 2019, the DHS Inspector General's office publicly issued two one-page summaries of its investigations into the deaths that had occurred a year earlier. Unfortunately, the Inspector General's investigations left us with more questions than answers.

Earlier this year, I sent a letter to Inspector General Cuffari detailing the concerns we identified with the reports. My entire letter is available on the Committee's website. Among the concerns I raised were the following: The Inspector General's reports and public summaries proclaim that there was no malfeasance or misconduct by DHS personnel.

It is unclear why that standard was used, because there do not appear to have been any allegations of malfeasance or misconduct on the part of agents. In fact, all available evidence indicates that Border Patrol agents showed great compassion for both children. However, the Inspector General's reports appear to presume that since its investigations found no malfeasance or misconduct, that's the end of the story.

The reports fail to examine the many troubling questions that these deaths raise regarding CBP's ability to care for children in custody, including questions about the adequacy of the agency's policies, procedures, and training. Further, while the Inspector General's office certainly conducted many interviews, it appears that key documents and evidence were not collected and reviewed.

My letter also identified omissions in the public summary of one of the Inspector General's reports that were so severe as to render the summary inaccurate and potentially misleading. The Inspector General revised the public summary after receiving my letter. Over the past 6 months, DHS has produced some documents in response to the Committee's subpoena—but these productions are clearly incomplete. For example, the Inspector General's reports reference documents that have never been provided to the Committee. DHS has also made extensive and improper redactions in the documents it has produced. Through its refusal to comply fully with the Committee's subpoena—and through its many redactions—the Department is intentionally impeding the Committee's investigation. Despite these hurdles, the Committee has worked to advance our investigation.

To help with that effort, we asked a pediatrician and a medical examiner to conduct independent examinations of the two deaths that occurred in December 2018. We will receive their testimony today.

Today, the Government Accountability Office is also releasing a report we requested. It examines both CBP's use of emergency funding appropriated to care for migrants as well as its implementation of the new medical screening procedures it announced after the deaths in 2018. GAO's report finds that after CBP claimed it urgently needed emergency funding to provide care for migrants taken into custody, the agency mis-spent money it received.

The Border Patrol agents who cared for Felipe while he was in custody had to pay for medicine for him out of their own pockets. But CBP used some of the emergency funding that Congress appropriated for the specific purpose of paying for medical care to instead buy jet skis and dirt bikes, and even dog food. There is something seriously wrong with this picture—just as there is something seriously wrong with this Administration's approach to caring for migrants, including children.

I note that GAO's report also finds that although CBP adopted new policies governing medical assessments for children following the tragic deaths of the two children in late 2018, CBP did not consistently implement these policies. We welcome Dr. Fiona Danaher and Dr. Roger Mitchell before the Committee, as well as Rebecca Gambler from GAO. And I am glad that after initially refusing to do so, the Inspector General has agreed to testify before the Committee, so that we can explore the many questions we have regarding the work of the Inspector General's office.

We also invited CBP's Acting Director, Mark Morgan, to testify. In a letter to the Committee, he stated that because of the White House's baseless rules prohibiting Administration witnesses from attending virtual hearings, he could not appear.

As I close, let me say I fully recognize the sensitivities of the issues we are discussing. I encourage all Members to be very careful and thoughtful in how we approach this subject. That said, it is clear that this Administration will do everything it can to avoid oversight. Therefore, we must continue to do everything we can to hold this Administration accountable.

Given the 18 months of obstruction we have endured as we have sought documents and information about the deaths of children in custody—as well as issues like the Administration's child separation policy—I see no other way to advance our investigation and to identify changes needed in CBP's policies and procedures than to convene today's hearing.

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