

COVID-19 IN IMMIGRATION DETENTION

Monthly Analysis & Update

January 19, 2020

Freedom for Immigrants (FFI) hosts an interactive detention map that includes real time mapping of Immigration and Custom Enforcement's (ICE) response to COVID-19. The map is populated with information drawn from news reports, publicly available databases, survey responses, and reporting from our National Detention Hotline¹ and independent member and affiliate organizations in the Freedom for Immigrants (FFI) visitation network.² We recognize the effort and risk that goes into documenting this information and appreciate all who contribute, most importantly those who have shared their experience while detained in the U.S. immigration system.

Executive Summary

Information included in this update was collected between November 24 and January 14. During this period, ICE confirmed the death of Anthony Jones, a 51-year-old man of Bahamian origin. At the time of his death, Jones was detained at the Adams County Detention Facility in **Adams, Mississippi.** Freedom for Immigrants (FFI) continues to express concern that the fatality rate of COVID-19 due to transmission in detention is higher than publicly reported by ICE, due to lack of information regarding the fate of people released from ICE detention after being exposed to or having contracted COVID-19.

During this period, COVID-19 continued to aggressively spread throughout immigration detention. Just as communities throughout the United States are seeing increased rates of COVID-19 transmission, ICE detention facilities are also experiencing second waves of COVID-19, including new outbreaks in facilities which had previously reported containing the virus in **California**, **New Jersey**, and **Virginia**. FFI continued to document significant omissions and errors in ICE's public reporting. Notably, ICE ceased all public reporting on COVID-19 transmission among its direct-hire staff. ICE has never reported on COVID-19 transmission among its contract staff. However, local press reports cite a growing number of contract staff that has tested positive for COVID-19 in recent weeks. ICE continues to withhold information on how it determines if a person in its custody who has tested positive for COVID-19 may be removed from the agency's list of "active cases." FFI documented at least one instance in which a person in detention

¹ The Freedom for Immigrants National Detention Hotline is a dedicated phone line where immigrants in ICE detention, as well as their loved ones or advocates, can reach FFI trained volunteers; in response to COVID-19, our volunteers now conduct a specialized intake designed to assess the readiness and efficacy of COVID-19 response measures in each ICE facility.

² Freedom for Immigrants convenes a national network of local visitation programs around the country focused on human rights monitoring, advocacy, and abolition. The network includes approximately 4500 volunteers who support people detained and their families in over 50 immigrant prisons and jails in nearly 30 states.



was informed they were no longer considered as COVID-19 positive, despite continuing to exhibit COVID-19 symptoms and never receiving a negative test.

During this period, ICE dramatically expanded testing in immigration detention. However, the agency still does not provide information as to how testing is allocated or the total number of people currently in custody who have been tested, making it impossible to make any reliable conclusions about the transmission rate in ICE detention. FFI continued to document widespread barriers to testing access, including for those presenting severe COVID-19 symptoms, as well as instances in which people who received COVID-19 tests were never informed of the results, leading to additional fear and confusion in detention. People in detention also reported instances in which COVID-19 tests—and the threat of quarantine—were used to disrupt protests. Many questions remain regarding what access people in immigration detention will have to the COVID-19 vaccine, as well as discrepancies in plans for access distribution between state and federal authorities. People in detention report significant distrust of medical staff due to systemic medical neglect and abuse, and they call for vaccines to be administered by health care professionals with the trust of their communities.

FFI continued to document extensive use of "cohorting," in which groups of people who are suspected of having been exposed to COVID-19 are detained together for a period of observation. In many instances, people at high risk of complications due to COVID-19 remained detained alongside the general population, and people who had tested positive for COVID-19 were detained alongside people who had not been tested or who had tested negative. ICE continued to use, in numerous instances, prolonged solitary confinement—a practice that mental health and human rights experts condemn as a form of torture—for the purposes of medical quarantine.

During this period, ICE pursued an aggressive enforcement agenda, including targeting long-term U.S. residents for arrest and deportation. Transfers from state corrections departments to ICE custody as well as between ICE facilities continued, despite clear evidence that these transfers are fueling the spread of COVID-19. FFI documented at least nine new incidences in which transfers are linked to outbreaks of COVID-19, at facilities in **Louisiana**, **Texas**, **New Jersey**, and **California**. According to a recent report by advocacy group Detention Watch Network, ICE's actions have added over 245,000 cases of COVID-19 to the total U.S. COVID-19 caseload, greatly accelerating community transmission in the surrounding areas that host to detention facilities.

ICE continued to pursue rapid deportations, including mass deportations to Cuba, Honduras, Haiti, and countries in western and central Africa. People subjected to deportation reported abuse on the flight itself, including prolonged periods in five-point restraints and total immobilization. ICE continued to deport and attempt to deport witnesses to abuse and crimes in detention, including Black immigrants who suffered severe beatings at the hands of officials. Although judicial releases increased substantially during this period, FFI continued to document significant barriers to release on bond, including demands for identity documents that are difficult or impossible to obtain and requiring people to wait for the results of COVID-19 tests before release. FFI



also documented widespread instances in which ICE failed to facilitate safe releases, including releasing people without informing them of their COVID-19 status, releasing people without functional PPE, and releasing people without any means of connection to a viable transportation hub.

Conditions inside detention continued to deteriorate, and people in detention reported lack of access to soap, PPE, and personal hygiene supplies within filthy conditions. People in detention reported systemic failure to observe basic public health protocols, and many people reported that they feared facility staff is bringing COVID-19 into detention. Medical neglect remains widespread, including failure to provide treatment for people with serious COVID-19 symptoms and deferral of essential surgeries. FFI noted both an increase in internal organizing, including hunger strikes and other methods of protest, as well an uptick in retaliation, including solitary confinement, deployment of pepper spray, use of force, and threats to undermine efforts to obtain release on medical grounds.

In the final days of the Trump administration, conditions in detention are at their worst point since the onset of the COVID-19 pandemic. FFI calls on the incoming administration of President-elect Joe Biden and Vice President-elect Kamala Harris to prioritize releasing people from immigration detention as an urgent public health and human rights priority.

Deaths in Immigration Detention

On December 14, ICE confirmed the death of Anthony Jones, a 51-year-old man of Bahamian origin, at the Adams County Detention Center in **Natchez, Mississippi**. ICE attributed the cause of death to an apparent heart attack. At the time of his death, Jones was awaiting deportation to the Bahamas. Freedom for Immigrants continues to express concern that the true number of fatalities due to COVID-19 in ICE detention is higher than publicly reported, due to lack of information regarding the fate of people released from ICE detention after being exposed to or having contracted COVID-19, including release of people who are very ill.

Just as ICE does not publicly report the number of confirmed COVID-19 cases among its direct hire or contract staff, the agency also does not centrally track deaths of staff posted at its facilities. According to a November 24 press report, an ICE Health Services Corps employee who worked at the Elizabeth Detention Center in **Elizabeth**, **New Jersey** died of complications due to COVID-19 earlier in November. The employee is believed to have been exposed to the virus while working in the Elizabeth facility.

During this period, the family of Carlos Escobar Mejia, who was the first person to die in ICE custody due to complications from COVID-19, filed a wrongful death lawsuit.ⁱⁱⁱ Escobar Mejia died in May 2020 after contracting COVID-19 while detained at the Otay Mesa Detention Center in **San Diego, California**. In the lawsuit, Escobar Mejia's family alleges that negligence and deliberate indifference to serious health and safety needs led to his wrongful death.



Increase in Confirmed COVID-19 Cases Inside Immigration Detention

During this period, confirmed cases of COVID-19 inside ICE detention continued to rise. As the United States grapples with renewed spikes of COVID-19, second waves of COVID-19 outbreaks occurred in several facilities that had previously reported containing the virus. This includes facilities in **California** subject to judicial orders mandating population reductions and facilities in the northeast. FFI continues to document widespread inaccuracies and omissions in ICE's public reporting on COVID-19. Notably, ICE stopped reporting on the number of confirmed COVID-19 cases among its direct hire staff entirely during this period.

ICE's Reporting of Confirmed Cases

As of January 13, ICE confirmed 8,820 positive cases of COVID-19 across 118 facilities since the beginning of the COVID-19 pandemic. This represents an increase of 1,481 cases and the addition of 15 new facilities with active outbreaks since FFI's last update on November 23.

ICE continued to report on the total number of "confirmed cases currently under isolation or monitoring." **As of January 13, ICE reported 565 active cases of COVID-19 across 61 facilities.** Between November 23 and January 14, FFI noted particularly severe concentrations of COVID-19 in the follow facilities:

- From November 30 to January 11, the number of total confirmed COVID-19 cases at the York County Prison in York, Pennsylvania rose by 122.
- From November 23 to January 13, the number of total confirmed COVID-19 cases at the Broward Transitional Center in **Pompano Beach, Florida** rose by 71.
- From November 23 to January 13, the number of total confirmed COVID-19 cases at the La Palma Correctional Center in **Eloy, Arizona** rose by 69.
- From November 27 to January 11, the number of total confirmed COVID-19 cases at the Stewart Detention Center in **Lumpkin**, **Georgia** rose by 65.
- From November 23 to January 11, the number of total confirmed COVID-19 cases at the Port Isabel Detention Center in **Los Fresnos**, **Texas** rose by 64.
- From November 23 to January 13, the number of total confirmed COVID-19 cases at the Clinton County Correctional Facility in **Lock Haven**, **Pennsylvania** rose by 62.

In some cases, officials announced that ½ or more of everyone detained at specific facilities had active cases of COVID-19:

According to a press release, as of December 16, more than 30% of people detained at the Yuba County Jail in Marysville, California had active cases of COVID-19.

FFI also documented the re-emergence of COVID-19 at facilities that had previously reported successful containment of the virus:



- On December 3, advocates with the American Civil Liberties Union of Southern California reported that 14 people detained at the Adelanto ICE Processing Center in **Adelanto**, **California** and 16 staff had tested positive for COVID-19, verepresenting a second outbreak of COVID-19 at the facility.
- According to a December 21 press report, 21 people detained at the Caroline Detention Facility in **Bowling Green, Virginia** had active confirmed cases of COVID-19, representing a second outbreak of COVID-19 at the facility.^{vi}

Omissions and Errors in ICE's Reporting

As of November 23, ICE stopped reporting on the number of confirmed COVID-19 cases among its direct hire staff entirely. ICE had not updated its reporting on confirmed cases of COVID-19 among it's staff since June 2020. ICE continues to exclude reporting on confirmed cases of COVID-19 among its contract staff. As a result, advocates, community-members, and policy makers must rely on reporting about rate of COVID-19 transmission among ICE staff entirely through local media reports or statements from local authorities:

- According to a December 31 press report, six employees at the Berks Family Residential Center in Leesport, Pennsylvania have contracted COVID-19 since the onset of the pandemic. vii
- According to a November 24 press report, one ICE Health Services Corp and four CoreCivic (formerly known as the Corrections Corporations of America) employees assigned to the Elizabeth Detention Center in Elizabeth, New Jersey, have tested positive for COVID-19. VIII

ICE also continues to exclude from its reporting numbers of confirmed COVID-19 cases among people held in the custody of other agencies co-located at its facilities:

- As of January 14, ICE reported 14 total cases of COVID-19 at the Hudson County Jail in **Kearny**, **New Jersey** since the onset of the pandemic. However, according to immigrants detained at the jail, between 25 and 50 people in the entire facility, including people in the custody of New Jersey Department of Corrections, have contracted COVID-19. The New Jersey Department of Corrections (NJDOC) reported 605 cases of COVID-19 among people in its custody and 674 among staff since August 22. ix
- According to a December 24 press report, 40 individuals detained at the Jerome Combs Detention Center in **Kankakee**, **Illinois** had recently tested positive for COVID-19.^x It was not until January 11 that ICE reported any cases (two) among people at that facility. On January 13, local community members reported to FFI that in fact several people in ICE detention have tested positive: one person reported four of eight men in one dorm had tested positive, and another person held in a different dorm reported that his cellmate had tested positive and was "removed." A third dorm was quarantined and was not being entered by jail staff



- at all, causing great concern among people in detention. As of January 14, ICE reports six active cases of COVID-19 at the Kankakee facility.
- According to a December 22 press report, 460 people detained at the Otay Mesa Detention Center in **San Diego**, **California** have contracted COVID-19 since the onset of the pandemic. Xi However, ICE reports that only 201 people in its custody at the Otay Mesa facility have tested positive during the pandemic. The approximately 200-person difference could represent people detained in the Otay Mesa facility in the custody of the U.S. Marshals Service (USMS).

FFI also documented several instances in which ICE's reporting on cumulative cases of COVID-19 cases over time at specific facilities inexplicably decreased:

- On December 7, the number of cumulative cases of COVID-19 ICE reported at the San Luis Regional Detention Center in **San Luis**, **Arizona** decreased inexplicably from 21 to 20.
- On December 14, the number of cumulative cases of COVID-19 ICE reported at the Winn Correctional Center in **Winnfield**, **Louisiana** decreased inexplicably from 248 to 247.
- On December 17, the number of cumulative cases of COVID-19 ICE reported at the El Valle Detention Facility in **Raymondville**, **Texas** decreased inexplicably from 103 to 102.
- On December 23, the number of cumulative cases of COVID-19 ICE reported at the Golden State Annex in **McFarland**, **California** decreased inexplicably from four to three.

FFI documented at least one instance in which ICE reported confirmed cases of COVID-19 among people in its custody at facilities that do not appear on the agency's Facility Locator:

• On December 14, ICE reported an active case of COVID-19 at the Howard R. Young Correctional Center in **Wilmington**, **Delaware**. However, on December 22, the facility disappeared from ICE's COVID-19 dashboard, and the facility is not included in the agency's most recent list of current detention facilities.

Continued Lack of Transparency in How ICE Determines if a Person Can Be Removed from List of "Active Cases"

ICE still does not provide information on how the agency determines to remove a person from its tally of "COVID-19 cases currently in custody, under isolation, or monitoring."

Advocates, including Freedom for Immigrants, continue to raise concerns that ICE and its contractors chose to remove people from its tally of people subject to medical isolation and/or monitoring due to the person's release from custody, deportation, or due to an absence of COVID-19 symptoms instead of negative tests, despite the well-documented risk of proliferation of COVID-19 through asymptomatic carriers. In some instances, people in detention reported that officials told them they were no



longer considered to be COVID-19 positive, despite continuing to present symptoms and having never received a negative test:

• On November 30, a person detained at the Adelanto ICE Processing Center in **Adelanto, California** reported that they had tested positive for COVID-19 and continued to suffer from active COVID-19 symptoms, including chest pains, headaches, and lack of taste and smell. The person said that facility officials informed them they no longer have COVID-19, despite the fact that they had not received a COVID-19 test in more than a month.

FFI documented numerous instances in which reported rates of current COVID-19 cases decreased dramatically in short amounts of time, including at facilities which were previously the site of some of the largest concentrations of COVID-19 in the country. This raises serious concerns that these reported decreases in current cases of COVID-19 were based on a combination of the factors listed above:

- Between November 21 and 22, the number of active cases of COVID-19 cases reported at the Aurora Contract Detention Facility in **Aurora**, **Colorado** dropped from 39 to 12.
- On November 25, the number of active cases of COVID-19 cases reported at the Central Arizona Detention Center in **Florence**, **Arizona** dropped from 17 to three.
- Between November 28 and 29, the number of active cases of COVID-19 reported at the Chase County Detention Facility in **Cottonwood, Kansas** dropped from 15 to zero.
- Between November 28 and 29, the number of active cases of COVID-19 reported at the Pulaski County Detention Center in **Ullin, Illinois** dropped from 16 to one.
- On December 16, the number of active cases of COVID-19 reported at the El Paso Service Processing Center in **El Paso**, **Texas** dropped from 47 to two.
- On December 17, the number of active cases of COVID-19 reported at the Kandiyohi County Jail in **Willmar**, **Minnesota** dropped from 21 to two.
- On December 17, the number of active cases of COVID-19 reported at the Limestone County Detention Center in **Groesbeck**, **Texas** dropped from 29 to four.
- Between December 19 and 20, the number of active cases of COVID-19 reported at the Clinton County Correctional Facility in **Lock Haven, Pennsylvania** dropped from 52 to 38.
- Between December 26 and 27, the number of active cases of COVID-19 reported at the Adelanto ICE Processing Center in **Adelanto**, **California** dropped from 21 to four.



Testing

During this period, ICE dramatically expanded COVID-19 testing. ICE's data on COVID-19 testing remains incomplete at best and deliberately misleading at worst. Without information regarding how tests are allocated and prioritized by facility, and which percentage of people currently in custody have been tested, it is impossible to make any conclusions about the true rate of transmission in ICE detention. FFI continued to document restrictions to access to COVID-19 tests, even for people with severe symptoms. FFI also documented widespread instances in which people were not informed of their COVID-19 test results, creating additional confusion, panic, and contributing to the spread of misinformation in detention. People in detention also reported that facility officials have used COVID-19 tests – and the threat of solitary confinement disguised as medical quarantine – as a means of disrupting peaceful protests.

ICE's Reporting of Administered COVID-19 Tests

ICE reported a dramatic expansion in the number of COVID-19 tests administered to people in detention. **As of January 8, ICE reported that it had administered COVID-19 tests for 82,585 people over time** - representing a staggering increase of 20,505 administered tests since FFI's last update on November 23 and a test positive rate of approximately 10.6%.

Since ICE reports cumulative number of tests over time and does not provide information on how many people currently in its custody have received recent COVID-19 tests, or how tests are allocated by facility, it is impossible to discern overall percentage of people currently in ICE custody who have received COVID-19 tests.

FFI continues to express concern that the total percentage of people in ICE detention who have contracted COVID-19 is significantly higher than the rate that ICE publicly reports due to ICE's choice to prioritize allocating tests to people subject to deportations; restrictions on access to testing; inconsistencies in ICE's public reporting; and prevalence modeling conducted by peer organizations.

Throughout the pandemic, instances in which ICE confirmed significant spikes in active COVID-19 cases have been due to external pressure or judicial order to implement mass testing. During this period- outside of facilities with mandated mass testing - FFI noted that ICE's reporting on the number of active cases at specific facilities tended to increase by small increments of 1-3 cases. This could suggest that ICE and its contractors are reserving tests for people with highly severe symptoms, as opposed to proactively using testing to identify potentially asymptomatic carriers. **FFI continues to raise questions as to how ICE prioritizes and allocates its testing.**



Continued Limitations to Test Access

FFI continued to document widespread limitations to testing access for both people in detention and ICE direct hire or contract staff; even in the event that the person requesting a test had been directly exposed to COVID-19 or was displaying severe COVID-19 symptoms:

- On January 8, a man detained at the Glades County Detention Center in **Moore**Haven, Florida reported to advocacy group Americans for Immigrant Justice that no COVID-19 testing is taking place at the facility, despite the fact that many people at the facility are presenting COVID-19 symptoms. The person reported that even temperature checks are only being conducted sporadically, whereas they had previously been conducted once or twice daily.
- In a December 4 statement, Federal Judge Vince Chhabria accused the GEO Group of deliberately avoiding implementation of universal testing for their staff assigned to the Mesa Verde ICE Processing Center in McFarland, California, because they feared that implementing this widespread testing would have adverse financial implications for the company.xiv
- On December 3, a person detained at the LaSalle ICE Processing Center in **Jena**, **Louisiana** reported that they had high blood pressure and other medical issues leaving them vulnerable to complications from COVID-19. ** The person reported that there was no apparent testing at the Jena facility and that if a person presents COVID-19 symptoms they are simply put into quarantine, without additional health care screening or treatment measures.

Delays or Refusal to Inform People of COVID-19 Test Results

FFI documented widespread instances in which ICE either delayed or did not inform people in detention the results of COVID-19 testing:

- According to a January 2021 report by Innovation Law Lab and Advocate
 Visitors with Immigrants in Detention (AVID), a person detained at the Otero
 County Processing Center in Chaparral, New Mexico, reported that a guard told
 everyone in his barracks that they had all tested positive for COVID-19 but that
 they never received the test results or other medical documents they requested.xvi
- On January 12, advocates with Immigrant Action Alliance reported that people detained at the Glades County Detention Center in Moore Haven, Florida are frequently denied access to COVID-19 test results.
- On January 5, a person detained at the Dodge County Jail in **Juneau**, **Wisconsin** reported that they were put into quarantine after experiencing COVID-19 symptoms including dizziness and headaches. The person reported that it took a long time to receive a test, and they only received test results after asking numerous times. The person said they eventually received a positive test result, and were then sent back to the general population without receiving a subsequent, negative test.



- On December 31, 2020, a person detained at Dodge County Jail in Juneau,
 Wisconsin, reported that ICE is not providing proof of positive tests but there are at least 10+ individuals who are displaying the symptoms.
- According to a December 28 press report, a man detained at the Yuba County Jail in **Marysville**, **California** stated that he received a COVID-19 test and was not informed of his positive status for over 48 hours. xix
- On November 25, a person detained at the Georgia Department of Corrections facility in **Forsyth**, **Georgia** reported that a number of people in detention had tested positive for COVID-19 but that facility staff did not give clear information about who had tested positive or had been exposed to COVID-19.^{xx}

COVID-19 Tests Used as a Means to Disrupt Protests

FFI also documented several instances in which ICE appeared to use COVID-19 tests as a means of disrupting internal organizing:

• On January 7th, 2020, a person detained at the Hudson County Correctional Center in **Kearny**, **New Jersey** reported that facility officials had threatened them and 50 other people engaged in a hunger strike at the facility with COVID-19 tests. The person believed that facility staff intended to use COVID-19 tests—and medical quarantine in the event of positive tests—as a means of intimidating people engaged in protest and disrupting the strike. The person had previously observed officials move approximately three people engaging in hunger strikes at the facility to solitary confinement. Officials said these people had tested positive for COVID-19, although people engaging in the hunger strike never officially saw their test results.

Vaccine Access

During this period, state and federal authorities began distributing the COVID-19 vaccines. Significant confusion remains regarding how vaccines will be prioritized for people in various forms of incarceration, including immigration detention. According to guidance by the Centers for Disease Control (CDC), correctional officers and staff who work in jails and prisons are prioritized for the first phase of vaccine distribution. Karia However, the CDC does not currently state that incarcerated people should also be prioritized for early vaccine access. A December white paper authored by public health experts from seven universities urged the CDC to prioritize incarcerated populations for early vaccine access.

There are significant discrepancies between plans for vaccine prioritization at the state level across all forms of incarceration. According to the Prison Policy Institute, eight states list incarcerated people as a priority for the first phase of vaccine roll out, and 15 states list staff working in jails and prisons as prioritized for first phase access. **Xiiii However, it remains unclear if people held in the custody of federal authorities at facilities operated by state or county authorities will also receive the vaccine. According



to an overview of state plans for COVID-19 distribution, only one state, **Louisiana**, explicitly mentions immigration detention centers in its plan. *xxiv*

People in ICE detention emphasize distrust of medical staff at immigration detention due to systemic medical neglect and abuse, including distrust that staff will safely and faithfully administer the vaccine to people in detention. **xv** Advocates, including Freedom for Immigrants, continue to call for release from detention as the most effective way to protect people from COVID-19, for vaccines to be distributed by health care providers who have the trust of their communities, and for vaccine access for all, regardless of citizenship status.

Cohorting and Isolation

ICE continues to implement "cohorting" across the country, in which groups of people who are suspected or confirmed of having been exposed to COVID-19 are grouped together for a period of isolation and observation. ICE uses "cohorting" despite clear evidence that ICE's implementation of cohorting continues to fuel the proliferation of COVID-19.

FFI continued to document instances in which people who had tested negative for COVID-19 remained cohorted with people who had tested positive for the virus as well as instances in which people at high risk for medical complications due to the virus were detained with people who had been exposed to COVID-19 or who had tested positive. In instances where ICE implements individual quarantines, people in detention report that this effectively functions as solitary confinement as they are often placed in filthy cells known to be used as punishment and denied medical care.

Detaining Medically Vulnerable Individuals in the General Population

FFI continued to receive reports that which people who are at high risk for complications to COVID-19 due to pre-existing medical conditions were groups with the general population or alongside people who may have been exposed to COVID-19:

• On December 18, a person detained at the Stewart Detention Center in Lumpkin, Georgia reported that he is considered to be high risk for complications to COVID-19 due to underlying medical conditions, including high blood pressure, anemia, and diabetes. **XXXVIII However*, the person reported that they were detained in the general population and unable to observe social distancing and did not have access to soap to wash their hands.



Grouping People with COVID-19 Symptoms or Who Have Tested Positive for COVID-19 with General Population

FFI continued to document instances in which people presenting symptoms of COVID-19 or who had tested positive for COVID-19 were detained alongside people who had not tested for COVID-19 or who had tested negative:

- On January 8, a person detained at the Glades County Detention Center in Moore
 Haven, Florida reported to advocacy group Americans for Immigrant Justice that
 approximately ten people who had been transferred into the facility from the
 Krome Service Processing Center in Miami, Florida, were grouped with the
 general population after spending only five days in quarantine.
- On January 4, a person detained at the Otay Mesa Detention Center in San Diego, California reported that the facility operates two pods of approximately 30 people each for the purposes of quarantine, including people transferred from other facilities and people exhibiting COVID-19 symptoms. The person reported that when the quarantine areas reach capacity, people are housed alongside people who have not been exposed to COVID-19.
- On December 28, a person detained at the Strafford County Corrections Facility in **Dover**, **New Hampshire** reported, "They have been mixing people with COVID-19 in units. I tested positive for COVID-19 two days ago. I am worried about my life since the facility does not care about the people there and are putting us at risk. I have a cold, my stomach feels bad, and my body is sore."
- On December 24, a person detained at the Wakulla County Jail in Crawfordville, Florida reported that a person who had tested positive for COVID-19 was placed in a pod with them. The person reported that social distancing is impossible due to crowding, barely any cleaning services, and not enough masks to go around.
- On November 27, a person detained at the River Correctional Facility in **Ferriday, Louisiana** reported that people who appeared to be infected with COVID-19 were being mixed with the general population.^{xxx} The person reported that transfers into the facility continue, and that facility is overcrowded and does not have adequate quantities of soap or shampoo.

Solitary Confinement as Means of Quarantine

People in detention continue to report widespread instances in which individual "quarantines" effectively amount to solitary confinement. People in detention continued to report fear of seeking medical assistance for COVID-19 symptoms due to concerns that they would be placed in solitary confinement, where they are even more vulnerable to medical neglect, abuse, and face added barriers to external communication. People in detention reported similar fears of seeking medical help from external hospitals and care providers for concern that they would be placed in solitary confinement for a period of two weeks or more upon their return. **Mental health and human rights experts**



condemn solitary confinement as a means of medical isolation in all forms of detention.

FFI documented the following additional instances in which solitary confinement was used as a means of medical quarantine:

- According to a January 2021 report by advocacy groups Innovation Law Lab and Advocate Visitors with Immigrants in Detention (AVID), an individual detained at the Otero County Processing Center in Chaparral, New Mexico, was placed in solitary confinement for 14 days after testing positive for COVID-19. The person reported that they were unable to bathe for long periods of time while in confinement.xxxi
- On December 28, a person detained at the Strafford County Corrections Center in Dover, New Hampshire reported that he was put in solitary confinement after testing positive for COVID-19. XXXIII The person reported that he was feeling sick and received little medical attention apart from blood pressure and temperature checks
- On December 3, a person detained at the River Correctional Center in **Ferriday**, **Louisiana** reported that they were put in solitary confinement for four days after testing positive for COVID-19. The person reported that, during their time in quarantine, they did not have access to a shower or medicine. The person said that after leaving solitary confinement, they were put in another isolation cell for six days. In total, they spent only 10 days quarantined away from the general population.

During this period, advocates and press outlets reported on several instances in which solitary confinement was used for extended periods of time. The United Nations Office of the High Commissioner for Human Rights defines solitary confinement for a period of time exceeding 15 days as a form of torture. **xxxiv**

- According to a December 14 press report, a man of Ecuadorian origin seeking asylum in the United States was held in solitary confinement for more than six months at the Irwin County ICE Detention Center in **Irwin**, **Georgia**, before he was deported. **xxv**
- In February 2020, the Department of Homeland Security Office of the Inspector General conducted an inspection of the Imperial Regional Detention Facility in Calexico, California. According to the report, nearly a dozen people detained at the facility were held in solitary confinement for more than two months, including two people who were held in solitary confinement for more than 300 days. **xxxvi**



Arrests, Transfers, and Book-Ins

During this period, ICE continued aggressive enforcement activity, including arrests of long-term U.S. residents in order to facilitate expedited deportation. Transfers from county, state, and federal jails and prisons also continued, further accelerating the proliferation of the virus in detention and within surrounding communities. ICE continued to use transfers between its facilities as a means of consolidating people of specific nationalities in order to facilitate mass deportations. FFI also documented additional instances in which transfers were used as a form of retaliation.

Aggressive Enforcement Activity

During this period, ICE continued aggressive enforcement activity, including deliberate targeting of long-time community members. A particularly egregious example includes:

According to a press report, in November, ICE detained Djibril Coulibaly, a 19-year Louisiana resident of Malian origin, while he was on his way to work as a French teacher at a local high school. XXXVII Coulibaly was detained at the Pine Prairie ICE Processing Center in Pine Prairie, Louisiana for several weeks. After significant community outcry and requests for political intervention, Coulibaly was released. While detained, he was exposed to and tested positive for COVID-19.

Transfers from State Departments of Corrections to ICE Detention

During this period, ICE continued to pursue transfers from state Departments of Corrections into immigration detention. In December 2020, the American Civil Liberties Union of Northern California and Asian Law Caucus filed a lawsuit on behalf of four men who were transferred into ICE custody upon release from California Department of Rehabilitation and Corrections (CDCR) custody. The four men, including a U.S. citizen who was erroneously detained by ICE and a man who became seriously ill after contracting COVID-19 in ICE detention, are seeking damages from CDCR and California Governor Gavin Newsom. The lawsuit alleges that California state officials should have known that conditions in ICE detention facilities posed a serious health and safety risk and prevented the transfers from taking place.

In a previous update, we reported that on November 4, ICE arrested 88 people in Newark upon their release from New Jersey prisons as part of an effort to reduce the population in state prisons. **xxix** Many of those individuals who were arrested were then transferred to several facilities across the South. A spouse of one of the people transferred stated that their partner and two other individuals contracted COVID upon arriving at the South Texas Detention Complex in **Pearsall, Texas**.



Transfers to Facilitate Mass Deportations

ICE continued to utilize transfers between its facilities as a means of facilitating mass deportations, including mass deportations to Cuba.

- On December 24, ICE transferred 16 individuals of Cuban origin from the Stewart Detention Facility in **Lumpkin**, **Georgia** to the Krome ICE Processing Center in **Miami**, **Florida**. xl Shortly after their arrival at the Krome facility, the men were deported. At the time of the transfers, there were 18 reported active cases of COVID-19 reported at the Stewart facility and three at Krome.
- On December 10, ICE transferred ten individuals of Cuban origin from the Torrance Detention Facility in **Estancia**, **New Mexico** to the El Paso Service Processing Center in **El Paso**, **Texas**.xli Shortly after their arrival at the El Paso facility the men were deported. At the time of the transfers, there were no active cases of COVID-19 reported at the Torrance facility and five active cases of COVID-19 confirmed at El Paso.

Transfers as Form of Retaliation

FFI documented additional instances in which transfers were used as a form of retaliation for protesting or bringing forward allegations of abuse:

- In November of 2020, 10 men engaged in a hunger strike at the Bergen County Detention Center in **Hackensack**, **New Jersey**. Four of the men were transferred away from the facility after 35 days on strike to the Buffalo Federal Detention Facility in **Batavia**, **New York** and the Krome Detention Center in **Miami**, **Florida**.
- In December, advocates brought forward a lawsuit alleging that officials at the Butler County Jail in **Hamilton**, **Ohio** had repeatedly beaten two men of African origin detained at the facility. On December 8 the same day as the lawsuit was filed ICE transferred one of the parties to the lawsuit, Mory Keita, from Ohio to Louisiana. **Iii Keita was then deported (see below section on *Deportations*).
- In January of 2021, 85 men detained at the Essex County Facility in Newark, New Jersey started a hunger strike inspired by the earlier strike at the Bergen County facility. Six of these men were transferred to the Buffalo Service Processing Center in Batavia, New York after they had engaged in the strike for approximately one week.
- In December and in January of 2020, approximately 60 people detained at the Hudson County Jail in **Kearny**, **New Jersey** initiated a hunger strike. Three of the strike organizers were then transferred to the Orange County Jail in **Goshen**, **New York**.



Transfers Linked to Outbreaks of COVID-19

People in detention continued to report that transfers and book-ins is a main driver of the continued proliferation of COVID-19 inside detention:

- People detained at the Etowah County Detention Center in **Gadsden**, **Alabama** reported that people transferred into the facility are often quarantined for only a five or eight day period. **Iiii According to documents reviewed by *The Intercept* and *In These Times*, ICE transferred at least 24 people into the Etowah facility in June. By the second half of July, ICE reported that 21 detainees had tested positive for COVID-19.
- On January 8, there were no reported COVID-19 cases in the Orange County Jail in Goshen, New York. As of January 14, ICE now confirms one active case of COVID-19. People in detention report that that new case corresponds with the time of an incoming transfer from the Hudson County Jail in Kearny, New Jersey following a hunger strike at the Hudson facility.

FFI documented at least additional eight instances in which transfers are correlated with an increase in COVID-19 cases, such as these particularly egregious incidences^{xliv}:

- On November 23, ICE transferred four individuals from Prairieland Detention
 Facility in Alvarado, Texas to the Pine Prairie Detention Facility in Evangeline
 Parish, Louisiana. At the time of the transfer, ICE reported eight confirmed
 active cases of COVID-19 at Prairieland and zero confirmed active cases at Pine
 Prairie. By December 28, there was once again an active outbreak among people
 detained at Pine Prairie.
- In our last report, we noted that on November 3, ICE transferred an individual from the IAH Secure Adult Detention Center in **Livingston**, **Texas** to the Montgomery Processing Center in **Conroe**, **Texas**. At the time of the transfer, ICE reported 6 confirmed active cases of COVID-19 at IAH Detention Center and zero confirmed active cases at Montgomery. By December 7, there was once again an active outbreak at Montgomery.
- In our last report, we noted that on November 13, ICE transferred an individual from Prairieland Detention Facility in **Alvarado**, **Texas**, to the Adelanto Detention Facility in **Adelanto**, **California**. At the time of the transfer, ICE reported 6 confirmed active cases of COVID-19 at Prairieland and zero confirmed active cases at Adelanto. By December 3, there was once again an active outbreak among people detained at Adelanto.



Transfers To/From Facilities with Confirmed Cases of COVID-19 To/From Facilities with no confirmed cases of COVID-19

FFI documented 13 instances during this period in which ICE transferred people from facilities with active cases of COVID-19 to facilities with no active cases, such as these particularly egregious examples^{xlv}:

- On December 15, ICE transferred an individual from El Paso Service Processing Center in El Paso, Texas to the Otero County Processing Center in Chaparral, New Mexico. At the time of the transfer, ICE reported 47 confirmed active cases of COVID-19 at El Paso Processing Center and zero confirmed active cases at Otero
- On January 6, ICE transferred an individual from Essex County Jail in Newark, New Jersey to the Otero County Processing Center in Chaparral, New Mexico. At the time of the transfer, ICE reported 13 confirmed active cases of COVID-19 at Essex County Jail and zero confirmed active cases at Otero.

FFI also documented 17 instances during this period in which ICE transferred people from facilities with zero active cases to facilities with confirmed cases of COVID-19^{xlvi}, such as these particularly egregious examples:

- On November 25, ICE transferred an individual from Torrance Detention Facility in **Estancia**, **New Mexico** to the El Paso Service Processing Center in **El Paso**, **Texas**. At the time of the transfer, ICE reported zero active cases of COVID-19 at Torrance Detention Facility and 40 confirmed active cases at El Paso.
- On December 1, ICE transferred an individual from Strafford County Jail in Dover, New Hampshire to the Prairieland Detention Facility in Alvarado,
 Texas. At the time of the transfer, ICE reported zero active cases of COVID-19 at Strafford County Jail and 13 confirmed active cases at Prairieland.

Circular Transfers

During this period, FFI documented nine instances of "circular transfers" in which an individual is transferred between multiple facilities only to end up back where they started. xlvii Some of these instances include:

• In our last report, we noted that on October 28, ICE transferred an individual from Adams County Correctional Facility in **Natchez**, **Mississippi** to the Elizabeth Detention Facility (which saw a subsequent outbreak of COVID-19) in **Elizabeth**, **New Jersey**, and that on November 4, the same individual was transferred back to Adams County Correctional Facility. Since our last report, that individual has once again been transferred from Adams to Elizabeth on November 24, and then yet again back to Adams on December 1.



- On November 19, ICE transferred an individual from Stewart Detention Facility in Lumpkin, Georgia, to El Valle Detention Facility in Raymondville, Texas.
 On December 9, that same individual was transferred back to Stewart Detention Facility.
- On November 25, ICE transferred an individual from Torrance Detention Facility in Estancia, New Mexico, to El Paso Service Processing Center in El Paso, Texas. Almost immediately, that same individual was subsequently transferred to Otero County Processing Center in Chaparral, New Mexico. A week later, on December 4, the individual was then transferred back to Torrance. Finally, on December 9, the individual was transferred for the second time from Torrance to El Paso.
- On December 3, ICE transferred an individual from Bergen County Jail in Hackensack, New Jersey, to Buffalo Service Processing Center in Batavia, New York. The following day, that same individual was transferred back to Bergen County Jail.
- On December 12, ICE transferred an individual from Krome ICE Processing Center in **Miami, Florida**, to Glades County Jail in **Moore Haven, Florida**. Later that month on December 30, that same individual was transferred back to Krome ICE Processing Center.

Missing in Detention

FFI continued to document instances in which people went "missing" from ICE's Online Detainee Locator System (ICE Locator) for prolonged periods. Advocates, including FFI, continue to raise concerns that people are removed from the ICE Locator system upon testing positive for COVID-19, upon transfer from detention centers to local hospitals due to acute illness from COVID-19, and upon transfer to alternative facilities in response to internal organizing. Family members also express great difficulty in locating their loved ones during times in which they are missing from the ICE Locator, leaving the family to wonder whether the missing person is acutely ill or dead.

- On November 23, an individual of Cuban origin disappeared from the ICE Locator after **147 days** of being listed as "Call Field Office," since June 30.
- On November 24, an individual of Jamaican origin disappeared from the ICE Locator after 102 days of being listed as "Call Field Office," since August 15. Prior to August 15, the individual had been held at Winn Detention Facility in Winnfield, Louisiana.
- On December 4, an individual of Guatemalan origin disappeared from the ICE Locator after 110 days of being listed as "Call Field Office," since August 17. Prior to August 17, the individual had been detained at the Howard County Detention Facility in Jessup, Maryland.

In five other instances during this period, attempts to locate individuals in the ICE Locator returned no information at all for at least six days and up to seven months.



Instead, the ICE Locator returned "zero matching records." Some of the more egregious examples include:

- On April 23, an individual detained at the Imperial Regional Detention Facility in Calexico, California completely disappeared from the ICE Locator ("zero matching records found"), and did not reappear in the Locator until November 20, approximately seven months later, as at the Clinton County Jail in Plattsburgh, New York.
- On July 17, an individual completely disappeared from the ICE Locator ("zero matching records found"), and did not reappear in the Locator until November 19, approximately **four months** or 126 days later, as at the Caroline Detention Facility in **Bowling Green**, **Virginia**.

Community Transmission

Since the onset of the COVID-19 pandemic, advocacy groups, including Freedom for Immigrants; public health experts; epidemiologists; and policy makers have expressed concern that failure to release people from detention would lead to increased community transmission. According to a December report by advocacy group Detention Watch Network, ICE's actions led to higher numbers of COVID-19 cases in counties where detention facilities are located. The report found that ICE's failure to release people from detention added over 245,000 cases of COVID-19 to the total U.S. COVID-19 caseload. The COVID-19 transmission rate remains approximately 5.5 times higher for people in all forms of incarceration than in the general public.

Deportations

During this period, ICE continued to accelerate deportations, including mass deportations. Between November 23 and January 4, advocacy group Witness at the Border documented 126 deportation flights to countries in Latin America, the Caribbean, and western and central Africa. During this period, deportation flights to Cuba and Honduras resumed. FFI continued to document reports of use of force to coerce people into signing their deportation papers, as well as deportations of witnesses to abuse and crimes in detention. People subjected to long-haul deportation flights to western and central Africa also reported abuse during deportation flights, including prolonged periods of time in restraints.

Acceleration in Deportations

ICE continued to pursue all available measures to accelerate deportations during this period, including mass deportations of Black and Brown migrants during this period:

 After months of refusing to accept deportation flights from the United States, on December 29, Cuba accepted a flight containing 48 people of Cuban origin. Less than two weeks later, on January 11, the U.S. State Department designated Cuba as a state sponsor of terrorism. Liii



- In many instances, people facing deportation endeavored to halt their proceedings until after President-elect Biden's inauguration on January 20. Instead, ICE aggressively pursued people for arrest, detention, and expedited removal, including long-time U.S. residents. liv
- ICE's accelerated deportation agenda also includes targeting people with valid claims to U.S. citizenship. This includes attempts to deport Pascal Shakure Charpentier, despite the fact that ICE twice found Charpentier to be a U.S. citizen, before re-evaluating his citizenship claim in 2018. Iv

Use of Force to Coerce People to Signing Deportation Papers

People in detention continued to report widespread instances in which ICE officials used use of force and intimidation to coerce people into signing their deportation orders:

On December 23, a person detained at the Otay Mesa Detention Center in San Diego, California reported that he witnessed ICE officers handcuffing and forcing a person onto a table face down in order to compel them to sign their deportation papers. lvi

Deportation and Attempted Deportations of Witnesses

During this period, ICE continued to deport witnesses to abuses and potential crimes within detention:

- In December, ICE deported Mory Keita to Guinea. Viii Keita has lived in the United States since he was three years old, is now in his early 30s, and has a U.S. citizen child. At the time of his deportation, Keita was a plaintiff in two lawsuits alleging abuse in ICE detention, including violent assaults and repeated beatings by officials at the Butler County Jail in **Hamilton**, **Ohio**. Prior to his deportation, Keita's lawyers filed an emergency petition asking for a stay of deportation so he could testify regarding the crimes he witnessed in detention. However, Keita was placed on a deportation flight before a judge could rule on the case. Although U.S. District Judge Timothy S. Black ordered that Keita should be removed from a deportation flight if he was still within the United States, the flight had already departed.
- ICE also continued to pursue deportation of witnesses to medical abuse at the Irwin County Detention Center in **Ocilla, Georgia**, including non-consensual medical procedures against women. This includes attempts to deport Alma Bowman, a 54-year-old woman, with a valid claim to U.S. citizenship. Iviii



People forced to choose between deportation and COVID-19

People in detention continue to report feeling that they are trapped between deportation to unfamiliar and/or dangerous environments and potential death by COVID-19 in detention:

A December 26 *Washington Post* article documented the circumstances leading the deportation of Kevin Euceda. Lix Euceda entered the United States as a minor seeking asylum from persecution by gangs in Honduras. He then spent nearly three years detained at the Farmville Detention Center in **Farmville**, **Virginia**, only to request deportation due to prolonged periods in solitary confinement and fears of dying from COVID-19 after the virus swept through the facility, resulting in at least one death. Euceda was found dead on a roadside shortly after his deportation.

Deportations Linked to Spread of COVID-19

FFI continued to document instances in which people who had recently tested positive for COVID-19, or were currently exhibiting active COVID-19 symptoms, were deported, contributing to the spread of COVID-19 worldwide:

- On December 31, a person detained at the Wakulla County Jail in Crawfordville, Florida reported that a person in their dorm who had tested positive for COVID-19 was deported to Hungary while still positive for COVID-19.
- A person detained at the Stewart Detention Center in **Lumpkin**, **Georgia** reported that he contracted COVID-19 while in detention and tested positive for COVID-19 upon arrival in his country of origin. It is person also reported that, after seeking medical attention in their country of origin, doctors informed him that he might lose vision in one eye as a result of beatings he received in detention.

Conditions During Deportation Flights

People subjected to deportation flights report abuse during the flight itself, including being kept in five point restraints for prolonged periods of time. An December 31 article in the *Boston Globe* cited the account of a man on a Boeing 767 November deportation flight to **Cameroon**, who said that he was fully immobilized for the initial stage of the flight because he tripped while boarding. According to this man and two key witnesses, he was placed in a full body restraint, with his already hobbled legs immobilized and his chained upper body enveloped in an armless restraint that was cinched at a 30-degree angle to his legs and held fast by a strap hooked to a ring at his feet. He was left forcefully bent and gasping for air for what might have been hours, according to onlookers. Others on the long flight were also shackled and restrained. The article noted reports from advocates that men and women were similarly restrained for the entirety of their flight to western and central Africa in a previous December flight. As on the



previous flights, some passengers still had asylum cases pending, which could make their deportations a violation of United States and international law.

Releases

At the same time as ICE reported a dramatic increase in testing, ICE also reported a significant decrease in its population. As of January 8, ICE reports 15,415 people in its custody (a significant decrease of 1,278 since FFI's last update on November 23). As of January 11, ICE reports 2,595 releases from immigration detention as a result of court orders. This is a significant increase of 1,573 reported judicial releases since FFI's last update on November 23.

Advocates also report incidents of individuals inside detention organizing for their rights via hunger strikes and public reporting intentionally being denied release, despite the existence of documented pre-existing medical conditions that could qualify them for court-ordered release as well as continued obstructions to release on bond. People in detention also reported various instances in which ICE did not facilitate safe releases, including lack of information regarding COVID-19 status at the time of release, failure to provide people being released with PPE, and failure to facilitate connection to a viable transportation hub.

Barriers to Release

FFI documented several instances in which people in detention who qualified for court-mandated release based on medical vulnerabilities to COVID-19 were denied access to this relief.

• Advocates with the Immigrant Action Alliance report receiving multiple accounts from people detained at the Glades County Detention Center in **Moore Haven**, **Florida** that the facility doctor is intentionally refusing to give new diagnosis to block their ability for release under the Fraihat v. ICE class action litigation. In early January individuals who had been on hunger strike at the Glades facility reported to attorneys at Americans for Immigrant Justice that ICE had denied their requests for release as Fraihat class members, despite the fact that these individuals had conditions which were with conditions previously diagnosed within the facility, such as untreated hypertension and asthma. People in detention reported that ICE omitted these diagnoses in their denial justification.

FFI continued to document barriers to release on bond, including demands for identity documents that are difficult or impossible to obtain as a condition of release, and denial of bond on the grounds that COVID-19 test results have not come back:

• FFI documented three bond denials in December and January because the ICE Deportation Officers assigned to the cases demanded that the clients turn in identity documents such as passports, which can often be extremely difficult or even impossible to obtain, especially for asylum seekers who cannot seek



- assistance from the governments of their countries of origin. In one of these cases, the passport of a person detained at Otay Mesa Detention Center in **San Diego**, **California** was confiscated at the US/Mexico border by the Mexican government, which has failed to respond to multiple attempts to recover the document.
- FFI documented four additional instances in which bond payments were rejected by ICE on the grounds that they had not yet administered a COVID-19 test or were still awaiting results from such a test. Most of these bond denials were for individuals detained at the Imperial Detention Center in Calexico, California. ICE has so far been unwilling to consider alternatives, such as allowing bonds to be posted while test results are pending and providing for safe quarantine in non-detained conditions. These bond denials have occurred at the same time as ICE is releasing people with active COVID-19 cases without PPE from other facilities.
- FFI documented two additional instances in which ICE denied attempts to pay bond for two individuals, citing the fact that they had final immigration court hearings in the coming days or week. This is a troubling precedent given that people in detention have little access to due process in immigration proceedings and are far more likely to lose their cases even if they have a viable form of relief available to them.

Failure to Facilitate Safe Releases

People reported widespread instances in which ICE failed to to facilitate safe releases from detention:

- In January, advocates with Louisiana AID reported that people released from detention at the Pine Prairie ICE Processing Center in Pine Prairie, Louisiana and the South Louisiana ICE Processing Center in Basile, Louisiana reported that people are released from both facilities with gloves and a mask but are never connected to a transportation hub. Many people are forced to make their way to the closest airport, which is an hour's drive away. Advocates reported that, because the majority of releases occur in the afternoon, people arrive at the airport after the last flights have departed and must arrange an overnight stay before they can continue their journey. In one particularly egregious example, according to a community volunteer with Louisiana AID, a man released from the Pine Prairie facility missed his flight after being forced to take a taxi to the airport over one hour away. Advocates reported that people are at times released from both facilities without ID, further complicating onward travel. Advocates reported that, after a man released from detention in Louisiana tested positive for COVID-19 upon his arrival at his home state of Florida, advocates successfully campaigned for pre-release testing at the Pine Prairie facility. However, advocates report continued difficulties coordinating post-release services due to lack of advance notice for release dates.
- In January, advocates with Immigrant Action Alliance reported that several people released from the Krome Service Processing Center in **Miami, Florida**



- and the Broward Transitional Center in **Pompano Beach**, **Florida** have been released without PPE, despite active outbreaks of COVID-19 at both facilities.
- On January 6, a person formerly detained at the Dodge County Jail in **Juneau**, **Wisconsin** reported that they tested positive while in detention and were released while symptomatic and without having a second test, leaving them unsure as to their COVID-19 status. lxiii
- Community members facilitating releases from the Yuba County Jail in
 Marysville, California reported that they were forced to purchase N95 masks and
 PPE in order to provide safe transportation for people leaving detention. The
 community members reported that Yuba County officials provided only thin,
 single-use surgical masks for people released from the facility, including people
 who had recently tested positive for COVID-19.
- A December 3 article by *The Intercept* cited an example in which a man was released from custody from the Etowah County Detention Center in **Gadsden**, **Alabama** in July after he had recently tested positive for COVID-19. The man said that he was released without functional PPE or connection to a viable transportation hub. Instead, an ICE officer gave the man directions to a Greyhound bus station one mile away, where he needed to find his way home to New York with only \$100 at his disposal. Upon arrival at the Greyhound station, he was informed that the next bus to New York would not be departing for two days.

Conditions Inside ICE Detention

During this period, FFI documented continued degradation in conditions, widespread failure to follow even basic public health protocols on the part of facilities, and widespread and serious medical neglect. FFI documented an increase in peaceful protests organized by people in detention to call for their release. At the same time, FFI noted an increase in retaliation for protests, as well as simple requests for information or access to COVID-19 tests. In the final days of the Trump administration, conditions in ICE detention are at their worst point since the onset of the COVID-19 crisis.

Continued degradation in conditions

People in detention reported a continued, general degradation in conditions, including facility cleanliness, lack of access to essential supplies, and insufficient or low quality food:

- On January 8, a person detained at the Glades County Detention Center in Moore
 Haven, Florida reported to advocacy group Americans for Immigrant Justice that
 they do not believe facility staff are using detergent to clean clothes. The person
 reported that clothes routinely come back wet from the laundry, are mustysmelling, and cause rashes.
- On January 4, a person detained at the Dodge County Jail in **Juneau**, **Wisconsin** reported that people at the facility are only being served bread, pasta, undercooked potatoes, and dairy. Ixv The person reported that people in detention



were being provided with dirty clothing and are forced to wash the clothes in their own sinks before wearing them.

- On January 4, a person detained at Dodge County Jail in **Juneau**, **Wisconsin**, reported that the guards do not clean his room and that he has to clean it himself. The guards gave him a bottle with a green chemical and another bottle with a blue chemical with no information of the name or a list of what is inside of these chemicals. lxvi
- On December 15, a person detained at the River Correctional Center in **Ferriday**, **Louisiana** reported that the facility is always cold and blankets are never changed. The person reported that they have been forced to go up to two weeks without bathing and there are insufficient quantities of soap.
- On December 11, a person detained at the La Palma Correctional Center in **Eloy**, **Arizona** reported that two people were not given dinner. The person reported that facility staff said that no one was working in the kitchen so no food could be served.

Failure to Observe public health protocols and backsliding on COVID-19 prevention measures

FFI documented continued, widespread failures of ICE and its contract staff to observe public health protocols as well as a backsliding in some facilities that had implemented limited reforms to increase access to PPE and soap within detention. According to a January report by Physicians for Human Rights, 80% of 50 detained people surveyed across 22 ICE facilities reported never being able to observe a six-foot distance from others in their eating area and 42% of people surveyed reported not having access to soap at some point while detained. lxix

- On December 31, a person detained at the Dodge County Jail in Juneau,
 Wisconsin reported that staff failed to provide adequate PPE or sanitize surfaces,
 despite an active outbreak of COVID-19 in the facility. The person reported that people in detention are forced to share the same trays at meal times without proper sanitization.
- On December 17, a person detained at the South Texas Detention Complex in **Pearsall, Texas** reported that not all guards at the facility wear masks and that people are often not removed from the general population unless they are so sick they need immediate medical attention. Ixxi
- On November 30, FFI filed a complaint with DHS Office of Civil Rights and Civil Liberties regarding negligence in implementing public health protocols at the Wakulla County Jail in Crawfordville, Florida, including lack of sanitation and disinfection; no efforts to social distance; and inadequate supplies of PPE. A person detained at the facility, along with 25 people that attested to these details being true who wished to remain anonymous, stated that people are detained only two feet apart from each other, that they had not been given new masks since September, and that bathrooms were often left un-cleaned unless detained people volunteered to do so. Even then, they were often only given water to clean.



In several instances, people in detention reported that they believed they were exposed to or contracted COVID-19 due to facility staff failure to observe public health protocols:

- According to a December press report, a COVID-19 outbreak (of 33 cases) at the Hudson County Jail in **Kearny**, **New Jersey** may have resulted from interactions with asymptomatic employees.
- According to a December press report, officials at the York County Prison in York, Pennsylvania are pressured to report for work, even when sick or presenting COVID-19 symptoms because the county's sick leave policy does not provide for extra time off for people who have been exposed to or tested positive for COVID-19. lxxiv
- In open letters published in November, women detained at the El Paso Service Processing Center in **El Paso**, **Texas** reported that guards were reporting to work with obvious COVID-19 symptoms and were not wearing PPE. lxxv The women expressed concern that the guards are bringing COVID-19 into the facility.

Medical Neglect

Medical neglect remained rampant throughout ICE detention, including failure to provide treatment for serious COVID-19 symptoms and deferral of essential surgeries not related to COVID-19. People in detention also reported a decline in quality of medical services at specific facilities due to changes in service providers. In a previous COVID-19 update, we cited the growing number of reports from women detained or formerly detained at the Irwin County Detention Center in **Ocilla, Georgia** regarding non-consensual medical procedures. In December, 40 women detained at the Irwin facility filed a class action lawsuit alleging that they were subjected to medical abuse through non-consensual or unnecessary procedures. ^{lxxvi} Additional examples of medical neglect include:

- In our last COVID-19 update, we cited reports from people detained at the Otay Mesa Detention Center in **San Diego**, **California** that quality of medical care had dramatically decreased after the facility switched health service providers from ICE's Health Services Corp to medical providers contracted by private prison CoreCivic/CCA. According to a November internal audit, ICE officials confirmed that changes in health care providers had resulted in a lower quality of care. lxxviii
- On January 8, a person detained at the Glades County Detention Center in Moore Haven, Florida reported to advocacy group Americans for Immigrant Justice that they received no medical care after testing positive for COVID-19 at the facility. The person reported that medical staff told them to take a shower as a means of treatment. The person also reported that another person detained at the facility had suffered from a seizure while receiving treatment at an outside hospital. The person reported that, when the person returned to Glades, facility staff denied that a seizure had ever taken place.
- On December 16, 2020, a person detained at Otay Mesa Detention Center in San Diego, California reported that they fell and hit his head, hurting his left arm and shoulder and was left unconscious for various hours. The person reported that they were denied medical attention for three days before a nurse finally arrived



and took his blood pressure. The nurse said she would tell the person their blood pressure reading later that day and never returned. The person then went to the infirmary but did not receive any medical attention and the medical staff did not attempt to check the injury on their head, bruising on their left arm and shoulder. The person reported that they lost consciousness and are experiencing nausea, ear and throat aches, has a bruise on the side of their head, and fears possible internal bleeding.

- On November 30, 2020 a person detained at Lasalle Correctional Center in Olla, Louisiana, reported that they suffers from chronic esophageal achalasia, a rare disorder preventing the esophagus from squeezing food into the stomach, and sinusitis, an inflammation or swelling of the tissue lining the sinuses. The person reported that they had an operation scheduled when they were detained in a different ICE facility but were transferred before the operation could take place. Now at Lasalle Correctional Center, the person reported that their requests for the same operation have been denied. They report having constant chest pain, poor vision, nausea, difficulty swallowing, nasal congestion, difficulty breathing, and constipation. The person said they often can't eat anything because it's too painful to swallow.
- On December 31, 2020, a person detained at LaSalle ICE Processing Center in **Jena, Louisiana** reported experiencing paralysis and numbness on the left side of their body. The person reported that, in December 2019, they experienced paralysis and could not feel anything on the left side of their body including legs, arms, and face and that their left arm, leg, and face were numb for a few days. The person reported that they did not receive medical attention and their face is still partially paralyzed. The person reported experiencing a second paralysis while detained on June 10, 2020, and that this time the numbness lasted a week. The person reported that they have been hospitalized twice for numbness but the ICE doctor told them that their experiences of paralysis "is nothing to worry about and that it is not urgent." However, the person reported that a former cardiologist detained alongside them said that this is a severe situation as it can cause hypertension and higher risk of stroke.

Internal organizing and retaliation

FFI documented continued, widespread internal organizing in protest of prolonged detention; inhumane conditions; failure to implement basic public health measures, and bias in the immigration court system. In many cases, these acts of internal organizing were met with retaliation and abuse:

• Between November 2 and January 9, approximately 100 people detained in detention centers across New Jersey—including the Hudson County Jail, Bergen County Jail, and the Essex County Jail—engaged in hunger strikes in protest of prolonged detention in deadly conditions. Many of the hunger strikers faced retaliation as a result of their protest, including blacking out external-facing windows, blocking external means of communication, and threatening to withhold medical reviews of participants unless they agree to end the strike. https://example.com/linearing-the-withhold-medical-reviews-of-participants-unless-they-agree to-end-the-strike.



- detained in the Hudson and Essex facilities also reported that they were denied water and access to legal counsel until they agreed to end their strike. lxxxii
- On January 8, a person detained at the Glades County Detention Center in **Moore Haven, Florida** reported that they had filed a complaint with DHS CRCL after witnessing another person in detention forcefully dragged to the floor by four guards during a peaceful sit in.
- On January 4, advocates with Immigrant Action Alliance reported that, on December 28, over 100 people detained at the Glades County Detention Center in Moore Haven, Florida had initiated a hunger strike as a means of calling for ICE officers to visit the facility and address their demands regarding conditions relief and release. Advocates reported that one ICE representative visited the facility on New Years Eve, without addressing any of the major concerns of people in detention. Advocates also reported that, by January 3, the strike had largely disbanded, due to fears of additional retaliation. Advocates with Americans for Immigrant Justice reported that facility officials threatened people engaged in the hunger strike with pepper spray.
- On January 4, a group of men of Cameroonian origin detained at the Pine Prairie ICE Processing Center in **Pine Prairie**, **Louisiana** reported that they had experienced use of force in August after engaging in a hunger strike.
- On December 21, a person detained at the Otay Mesa Detention Center in San Diego, California reported that they had been placed in solitary confinement after informing officers that they would not eat until they were granted access to a doctor. The person reported that they were handcuffed while being transferred to solitary confinement and that their cell is extremely small and filthy. The person said that their computer access had also been revoked.
- On December 17, a person detained at the South Texas Detention Complex in **Pearsall, Texas** reported that they and 16 other detained individuals of Cuban origin initiated a protest to condemn their prolonged detention. Ixxxiv The person reported that officials retaliated by deploying pepper spray, including toward people who suffer from asthma. The person also reported that officials threatened individuals engaged in the hunger strike with use of rubber bullets.

In some instances, people in detention faced retaliation simply for asking for COVID-19 tests or for complaining about negligent public health protocols:

- According to a December 3 article by *The Intercept*, 80 people detained at the Etowah County Detention Center in **Gadsden**, **Alabama** formally requested COVID-19 tests. hxxxv According to the article, ten individuals who had vocally campaigned for widespread access to testing within the facility were subsequently placed in solitary confinement and that officials then asked those remaining outside of solitary confinement if they would like to withdraw their request for a COVID-19 test.
- On December 31, a person detained at the Winn Correctional Center in Winnfield, Louisiana reported that they were sent to solitary confinement and physically assaulted by two officials after complaining about negligent public



health protocols. The person reported that they needed to use a wheelchair for a period of time after the attack.

Conclusion

Nearly one year into the COVID-19 pandemic, ICE has failed to take even the most basic steps to protect people in its custody, and in our broader communities, from the threat of COVID-19. Instead, the agency has added hundreds of thousands of additional COVID-19 cases to the nation's total caseload. We will never know the total fatality rate due to ICE's negligence, abuse, and deceit. In the final days of the Trump administration, conditions in detention are at their worst point since the onset of the COVID-19 pandemic. FFI calls on the incoming administration of President-elect Joe Biden to prioritize releasing people from immigration detention as a matter of urgent public health and human rights importance.

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