

COVID-19 IN IMMIGRATION DETENTION

Monthly Analysis & Update

July 16, 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 June 19 and July 16. During this period, ICE's number of confirmed cases of COVID-19 in detention increased dramatically, with the largest confirmed outbreaks currently reported in Eloy, Arizona, Anson, Texas, and Farmville, Virginia. However, ICE continued to separate its reporting on cumulative COVID-19 cases since the outbreak of the pandemic from its reporting on current COVID-19 cases "under isolation or monitoring," without providing information as to how people who have tested positive for COVID-19 are removed from ICE's tally of current cases. ICE's reporting on current cases of COVID-19 fluctuated widely, with large concentrations of confirmed COVID-19 cases reported at specific facilities and then dropping to low numbers of confirmed cases or no confirmed cases in a matter of days or weeks, raising significant concerns regarding the reliability of ICE's reporting. During a June 13 congressional oversight hearing, the CEO of private prison company—Management and Training Corporation (MTC)—which manages several ICE prisons, stated that MTC staff may decide to remove a person from medical isolation and observation based on the absence of symptoms, and not a negative COVID-19 test, raising concerns that ICE's tally of current cases of COVID-19 may be significantly under-reported. ICE continued to execute deportations and transfers without conducting COVID-19 testing, ensuring social distancing during transportation, or medical isolation upon arrival to a new destination, directly facilitating the spread of COVID-19 within the United States and overseas. Advocates, people in detention, and community members

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.



raised increased concern over continued transfers from people held in the custody of local county jails, state prisons, and the federal Bureau of Prisons to immigration detention, citing evidence that these transfers act as an additional driver of the increase of confirmed COVID-19 cases in detention. At the same time, family members of people in detention raised growing concerns over their inability to find loved ones inside immigration detention for prolonged periods, only to have them resurface in a hospital after testing positive for COVID-19 and becoming very ill. During this period, ICE announced two deaths in custody. On July 12, ICE announced that Onoval Perez-Montufa, a 51-year-old man of Mexican origin who had been detained at the Glades County Detention Center in Moore Haven, Florida, died in ICE custody of complications from COVID-19 at a hospital in southern Florida. On July 16, ICE announced the death of Luis Sanchez-Perez, a 52-year-old man of Guatemalan origin who had been detained at the Catahoula Correctional Center in Harrisonburg, Louisiana. Sanchez-Perez died in ICE custody at a hospital in Monroe, Louisiana. ICE attributed his cause of death to septic shock from pseudomonas—a bacterial infection that can be caused by lack of proper sanitation leading to cardiopulmonary arrest. Advocates continue to raise concerns that people inside detention are not receiving treatment for severe COVID-19 symptoms inside detention. Advocates also raised concerns over weakened oversight measures due to the decision of the Department of Homeland Security Office of the Inspector General to suspend all in-person investigations due to concerns over staff contracting COVID-19. Conditions in detention remained dire, and FFI continued to receive continued reports of exposure to toxic chemicals, use of force and retaliation, medical neglect, deliberate failure to observe public health protocols, and suppression of information and means of external communication.

ICE Reporting of Confirmed COVID-19 Cases inside Immigration Detention

As of July 16, ICE confirmed 3,496 positive cases across 70 facilities since the beginning of the COVID-19 pandemic. This represents an increase of 1,386 cases and the addition of nine new facilities since FFI's last update on June 18.

ICE continued to report on the total number of "confirmed cases currently under isolation or monitoring." As of July 16, ICE reported 1,169 "COVID-19 cases currently in custody." The highest concentration or reported confirmed cases "currently under isolation or monitoring" in facilities designed to detain people for 72 hours or more are: the Immigration Centers of America facility in Farmville, Virginia (268 currently reported cases, and 315 over time), Bluebonnet Detention Facility in Anson, Texas (152 currently reported cases, and 287 reported over time), and the Eloy Federal Contract Facility in Eloy, Arizona (118 currently reported cases, and 252 over time).

ICE also confirmed cases of COVID-19 within family detention facilities—immigrant prisons that house families with minor children, including infants—for the first time since the outbreak of the COVID-19 pandemic, with eleven people detained at the Karnes County Residential Center in **Karnes City**, **Texas** testing positive for the virus in June. As of July 16, ICE reported 26 confirmed cases of COVID-19 "currently under isolation"



or monitoring" and 37 over time at the Karnes facility. The data does not disclose the age of the individual confirmed to have tested positive for COVID-19.

In several instances in which ICE is co-located at jails or prisons with other government agencies, people held in ICE custody made up the majority of confirmed COVID-19 cases. For example, on July 11, a spokesperson for ICE confirmed that people held in ICE custody at the Nye County Detention Center in **Pahrump, Nevada** accounted for 23 of the 30 confirmed COVID-19 cases at the jail.ⁱⁱⁱ

As of July 16, ICE reported 45 confirmed cases of COVID-19 among staff assigned to its jails and prisons – a number which ICE has not updated since June 18. The highest number of confirmed cases among ICE staff remains 15, at the Alexandria Staging Facility in **Alexandria**, **Louisiana**.

Lack of Transparency in How ICE and Its Contractors Determine "Confirmed Cases Currently Under Isolation or Monitoring"

ICE has not provided additional information as to how the agency determines to remove a person from its tally of "COVID-19 positive cases currently in custody, under isolation or monitoring." However, during a July 13 Congressional oversight hearing on the response of ICE contractors to COVID-19, iv Representative Xochitl Torres Small asked Management and Training Corporation (MTC) CEO Scott Marquardt why the Otero County Processing Center (which is managed by MTC) in **Chaparral, New Mexico** had seen such a high number of COVID-19 positive cases. (Note: As of July 16, ICE reports 142 cases of COVID-19 at Otero since the start of the pandemic and one current case). In his testimony, Marquardt stated, "They did a mass test in the facility and the majority of those who tested positive were asymptomatic so many came on as a result of testing. In the normal course of the disease it takes 2-3 weeks until someone is symptom free. **Through testing and lack of symptoms, we are down to two** (active cases of COVID-19)."

Marqardt's testimony suggests that ICE and contractors may determine that people who have tested positive for COVID-19 no longer need to be subjected to medical isolation or monitoring on the basis of not displaying any COVID-19 symptoms, and not by testing negative for COVID-19, raising concerns that ICE is dramatically under-reporting its tally of current cases of COVID-19, in an effort to make it appear that the agency has contained the outbreak.

Continued Inconsistencies and Inaccuracies in ICE Reporting

In several instances, ICE reported very low numbers of COVID-19 cases "currently under isolation or monitoring" in facilities which the agency had previously reported very high concentrations of confirmed COVID-19 cases. In some instances, ICE's reporting on active, confirmed cases fluctuated dramatically overnight. This includes:

• Montgomery Processing Center in **Houston, Texas**: On June 21, ICE reported 64 active cases of COVID-19. By the following day, June 22, ICE reported only 37



active cases. On July 8, ICE reported 72 current cases. By the following day, on July 9, ICE reported a dramatic decrease to 23 active cases. As of July 16, ICE reports seven active cases at the Montgomery Facility.

- El Paso Service Processing Center in **El Paso**, **Texas**: On July 6, ICE reported 67 active cases of COVID-19 at the facility, and 119 total cases since the beginning of the pandemic. The next day, on July 7, the number of active cases dropped to 20, while the total number of cases reported at the facility since the start of the pandemic simultaneously rose to 132.
- Glades County Jail in **Moore Haven, Florida**: On June 25, ICE reported 62 active cases of COVID-19 at the facility; by the following day, that number had dropped to 14 active cases.
- Morrow County Jail in **Mt. Gilead, Ohio**: On June 22, ICE reported 22 active COVID-19 cases; by the following day, that number had dropped to zero (0) active cases.
- Pulaski County Jail in **Ullin, Illinois**: On June 21, ICE reported 32 active COVID-19 cases; by the following day, that number had dropped to zero (0) active cases.

There were also several incidents in which the "total confirmed cases," defined by ICE as "the cumulative total of detainees who have tested positive for COVID-19 while in ICE custody since testing began in February 2020" (with the note that "some detainees may no longer be in ICE custody or may have since tested negative for the virus"), inexplicably went down.

- On July 5, the overall total number of cases reported at Adelanto Detention Facility in **Adelanto**, **California**, went down from 14 to 8 overnight.
- On July 7, the overall total number of cases reported at Otero County Processing Center in **Chaparral**, **New Mexico**, San Luis Regional Detention Center in **San Luis**, **Arizona**, and Tacoma ICE Processing Center in **Tacoma**, **Washington**, all inexplicably went down, each by one.

In other instances, ICE reported on active cases of COVID-19 at facilities that do not appear in the agency's list of active jails and prisons. As of July 16, ICE reported 19 confirmed, active cases of COVID-19 at a facility called "Moore Detention Center," located in the **Dallas, Texas** ICE Field Office area of responsibility. ICE first reported 3 confirmed cases at Moore Detention Facility on June 22. However, "Moore Detention Center" does not appear in ICE's official monthly facility list released on July 6. Freedom for Immigrants has been unable to confirm the location of the facility.

FFI continued to document instances in which ICE's publicly reported data was not updated on a regular basis. For example, ICE did not post any updates on confirmed cases of COVID-19 within its facilities from July 1 – July 7, while data is normally updated on a daily or near-daily basis.



In other instances, ICE's public reporting on active, confirmed cases of COVID-19 at specific facilities did not match statements from its contractors. For example, in a sworn declaration, ICA Farmville Director Jeffrey Crawford stated that of the 366 people detained at ICE's facility in **Farmville**, **Virginia** who had tested for COVID-19, 267 had tested positive, 19 had tested negative, and 80 results were still pending. Press outlets reported on this affidavit on July 10. However, ICE reported only 106 confirmed cases of COVID-19 until July 15, when ICE reported 268 current cases of COVID-19 at the Farmville facility.

ICE continues to refuse to publicly disclose the number of its third-party contract staff who have tested positive for COVID-19. However, during the previously referenced July 13 oversight hearing, CEOs from private prison companies including the Geo Group, CoreCivic (formerly known as the Corrections Corporation of America – CCA), LaSalle Corrections, and MTC provided current total numbers of employees who have tested positive for COVID-19: CoreCivic reported that 554 of its employees had tested positive; the Geo Group reported that 167 of its employees had tested positive; LaSalle reported that 144 of its employees had tested positive; and MTC reported that 73 of its employees had tested positive — **meaning that nearly 1,000 of ICE's contract staff assigned to its facilities have tested positive for COVID-19**. Vi According to data provided by CoreCivic/CCA, at one facility alone – the Eloy Detention Center in **Eloy, Arizona** – 128 of its employees have tested positive for COVID-19, more than 40% of total employees assigned to the facility. Vii

During the July 13 oversight hearing CEOs from all four private prison companies stated that they would agree to publicly report numbers of positive COVID-19 among their staff assigned to ICE jails and prisons if ICE consented to this practice. viii

ICE also continues to omit reporting on the number of positive cases of COVID-19 among people held in the custody of other government agencies and co-located at its facilities. For example, on July 3, New Mexico officials confirmed that 149 people held in federal custody at the Otero County Processing Center in **Chaparral**, **New Mexico** on criminal charges or serving criminal sentences had tested positive for COVID-19. ^{ix} As of July 15, ICE reports only 1 confirmed case at the Otero facility, and 142 cases over time.

Testing

As of July 15, ICE reported that it had administered 13,562 COVID-19 cases for people in its custody – representing an increase in 6,198 tests since FFI's last update on June 18 and a 25.7% COVID-19 positive rate for all those tested over time.

As of July 10, ICE reported 22,835 people in its custody. 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 difficult to discern overall percentage of people currently in ICE custody who have received COVID-19 tests, or the percentage of people currently in custody who are COVID-19 positive.



During the previously referenced July 13 oversight hearing on ICE contractors' response to COVID-19, Congressional representatives asked private prison company CEOs to provide information on how they prioritized testing for both their staff and people in their custody:

- GEO Group CEO George Zoley stated that his company has conducted "saturation testing" at nine facilities meaning that all employees and people held in ICE custody had been tested for the virus and that GEO hopes to expand this practice to all its facilities by September.
- LaSalle CEO Rodney Cooper stated that the company has conducted "saturation testing" at one facility, but does not yet have the results of testing back.
- MTC CEO Scott Marquardt said that availability of testing "varies by facility,"
 and indicated that MTC employees may seek COVID-19 tests from health care
 providers in their communities. In his testimony, Marquardt acknowledged that
 identifying COVID-19 in asymptomatic individuals is "difficult" and said that the
 ability to re-test individuals who have tested positive for COVID-19 and then do
 not display symptoms varies by facility.
- CoreCivic/CCA CEO Damon T. Hininger stated that new arrivals to CoreCivic/CCA facilities are screened for COVID-19 symptoms upon arrival, without elaborating on how the company prioritizes administration of COVID-19 tests.

Representatives of Immigration Centers of America, which manages an ICE jail in Farmville, Virginia also reported "saturation testing" at that facility. In that instance, approximately 94% of people detained at the facility tested positive for COVID-19.

FFI continued to hear widespread reports from advocates and people in detention regarding instances in which people demonstrating severe COVID-19 symptom were denied access to COVID-19 tests or faced retaliation for seeking a tests, as well as instances in which officials did not utilize all available COVID-19 tests or prioritized testing to facilitate dangerous deportations. Examples include:

- On June 23, an attorney reported that, at the Sherburne County Jail in Elk River, Minnesota, medical staff have refused to test people in ICE detention, telling individuals their symptoms are "psychosomatic." The attorney also reported that Sherburne County Sheriff's Office has been given 20 test kits by the State of Minnesota but has tested only 5 individuals.
- On June 26, a person detained at the Joe Corley Detention Facility in **Conroe**, **Texas** reported that facility officials were prioritizing testing people who were either about to be deported or released, despite COVID-19 symptoms among the general population.^{xi}
- Advocacy group Equal Voices Network received a report from people detained at the Port Isabel Detention Center in **Los Fresnos**, **Texas** that ICE officials denied



- COVID-19 testing to a dorm of 32 people under quarantine and exhibiting COVID-19 symptoms, including fever, chills, and body aches.
- On June 30th, a person detained at the Etowah Detention Center in **Gadsden**, **Alabama** reported to advocates with the Etowah Visitation Project that the majority of their unit was exhibiting symptoms, but people were denied tests upon request. This same advocate stated they alerted Health Department Officials, who confirmed the matter would be investigated as ECDC had been provided sufficient tests by the county. On July 3 the same detained individual reported an immediate change, confirming people in their unit were now being provided the option of testing who hadn't been previously. However, testing was being conducted in an area widely feared in connection to abuse allegations. Advocates speculate this may have been done in an attempt to intimidate people in detention and dissuade them from seeking medical attention.

Cohorting and Isolation

FFI continued to document instances in which ICE's implementation of "cohorting" – in which people who are suspected of having been exposed to COVID-19 or are displaying symptoms are grouped together for a period of medical isolation. In some instances, people who have tested positive for COVID-19 are grouped with people who have not tested positive but have merely been exposed to the virus. Cohorting has been directly linked to an increase in COVID-19 cases in ICE detention. Public health experts and doctors have decried the practice as a "form of torture." Examples of cohorting include:

- On June 25, a person detained at the Joe Corley Detention Facility in **Conroe**, **Texas** reported that people who had tested positive for COVID-19 were "shuffled around in the cells" and that he had been quarantined four times since arriving at the jail. The same person stated that 36 people were held in 20 by 30 foot cells, with only access to one small window and that no one had been let out of this area for a period of one month. On July 1, another person detained at Joe Corley stated that 33 out of 40 people detained in an open living area had tested positive for COVID-19 and that he was forced to sleep in bunks adjacent to people who had recently tested positive for COVID-19.xiii
- On June 24, a person detained at the Glades County Detention Center in Moore
 Haven, Florida reported that people who had tested positive for COVID-19 were
 placed within the general population due to lack of space in the quarantine
 pods.xiv

FFI also received numerous reports in which people in detention expressed extreme reluctance to report COVID-19 symptoms, for fear of being sent to solitary confinement, where they will be cut off from external communication and left even more vulnerable to abuse and neglect. Use of solitary confinement to prevent the spread of COVID-19 has also been widely used in jails and prisons for people serving criminal sentences – a practice condemned by public health experts, who call instead for officials to prioritize releases as the most effective way to combat COVID-19.* An example of reports of fear



of reporting COVID-19 symptoms due to concerns over being sent to solitary confinement includes:

• On June 30, a person detained at the Etowah County Detention Center in Etowah, Alabama reported to advocates with the Etowah Visitation Program that approximately 75% of people in ICE custody at the facility were experiencing flu or COVID like symptoms, including headaches, muscle aches, pain in arms and legs, fatigue, shortness of breath, vomiting.xvi However, most of those detained have not reported symptoms to facility staff because they know based on experience they will be placed in isolation without opportunity to call family or friends, will not be tested, and will not receive medication or treatment.

Transfers and Book-Ins

Transfers of people between immigrant jails and prisons continued, despite clear evidence that this practice has directly increased the number of COVID-19 cases in ICE detention and within broader communities.

FFI has documented widespread reports from people in detention, advocates, and community members regarding lack of testing and adequate screening during transfers, including over-reliance on screening for obvious symptoms of COVID-19, despite the risk of proliferating the virus through asymptomatic carriers. During the previously referenced July 13 oversight hearing, CoreCivic/CCA CEO Hininger stated that everyone arriving at a CoreCivic/CCA facility receives a medical screening consisting of a "symptom and temperature check." In his testimony, MTC CEO Marquardt stated that anyone entering MTC facilities is subjected to a temperature check upon arrival, and are not admitted if their temperature rises above 100.4 degrees, despite growing evidence that temperature checks alone are not a sufficient means of detecting COVID-19.*Vii

Between June 18 – July 16, FFI documented 33 instances in which ICE transferred people to or from facilities with publicly reported cases of COVID-19. xviii Transfers documented by FFI are only a small sample of total transfers conducted by ICE and do not capture the full scope of transfers ICE regularly conducts. According to data analyzed by advocacy group Witness at the Border, ICE Air flew 249 domestic flights in June 2020 alone. xix

FFI's documentation of transfers included 19 incidents of transfers between facilities with high concentrations of reported active COVID-19 cases and facilities with no active cases of COVID-19:

- On June 18, ICE transferred three individuals from the Krome ICE Processing Center in **Miami, Florida** to the Baker County Jail in **Macclenny, Florida**. At the time of the transfer, ICE reported 15 confirmed active cases of COVID-19 at Krome and no active cases at Baker.
- On June 18, ICE transferred an individual from the LaSalle Detention Facility in **Jena, LA** to the Etowah County Jail in **Gadsden, Alabama**. At the time of the



- transfer, ICE reported 3 active cases at Jena and zero active cases at Etowah facility. As of July 16, there are now 17 active cases of COVID-19 at the Etowah facility.
- On June 30, ICE transferred an individual from the Stewart Detention Facility in **Lumpkin, GA** to the Richwood Correctional Center in **Richwood, Louisiana**. At the time of the transfer, ICE reported 19 active cases of COVID-19 at Stewart and zero active cases at Richwood.
- On July 2, ICE transferred an individual from the Krome ICE Processing Center in Miami, Florida to the Caroline Detention Center in Bowling Green, Virginia. At the time of the transfer, ICE reported three confirmed active cases at Krome and zero confirmed active cases at Caroline.
- On July 6 and 7, ICE transferred one individual from the Baker County Jail in Macclenny, Florida to the Wakulla County Jail in Crawfordville, Florida, and a second person from Baker to the Krome ICE Processing Center in Miami, Florida. At the time of the transfers, ICE reported no cases at Baker, one active case at Wakulla, and 13 active cases at Krome. Just as it is dangerous to transfer individuals from detention facilities with confirmed active cases to those without; it is likewise dangerous and potentially life-threatening to transfer individuals from detention facilities that are purportedly "COVID-19 free" to facilities where they are then at risk.
- On July 9, an individual was transferred from Stewart Detention Facility in **Lumpkin, Georgia** to the Robert A. Deyton Facility in **Lovejoy, Georgia**. At the time of the transfer, ICE reported 33 active cases at Stewart and zero active cases at the Deyton facility.
- On July 9, an individual was transferred from Krome ICE Processing Center in **Miami, Florida** to the Baker County Jail in **Macclenny, Florida**. At the time of the transfer, ICE reported 13 active cases at Krome and zero cases at Baker.
- On July 9, ICE transferred an individual from the Otero County Processing Center in **Chaparral**, **New Mexico** to the Richwood Correctional Center in **Richwood**, **Louisiana**. At the time of the transfer, ICE reported one active case of COVID-19 at Otero County and zero active cases at Richwood.
- On July 13, ICE transferred nine individuals from the Stewart Detention Facility in Lumpkin, Georgia to the Richwood Correctional Center in Richwood, Louisiana. At the time of the transfers, ICE reported 33 active cases at Stewart and zero active cases at Richwood.
- On July 15, ICE transferred two individuals from Hudson County Correctional Facility in **Kearny**, **New Jersey** to Bergen County Jail in **Hackensack**, **New Jersey**. At the time of the transfers, ICE reported 5 active cases at Hudson and zero active cases at Bergen.

FFI also documented one example of a "circular transfer" – in which a person is shuffled between different facilities only to end up back where they started:

On July 6, an individual was transferred from San Luis Regional Detention Center in San Luis, Arizona to the Otay Mesa Detention Facility in San Diego,
 California. The following day, that same person was inexplicably sent back to the



San Luis facility. At the time of the transfers, ICE reported three active cases at San Luis and three active cases at Otay Mesa.

In several instances, people in detention directly linked transfers between ICE jails to their personal exposure to the virus:

- On July 6, a person detained at the Rolling Plains Detention Center in Haskell, Texas reported that 21 people arrived at the facility from the Bluebonnet Detention Facility in Anson, Texas. ** At the time of the transfer there was one active case reported at the Rolling Plains Detention Center and 145 active cases reported at the Bluebonnet facility. The person reported that immediately after the transfer, people detained at Rolling Plains began to exhibit COVID-19 symptoms and test positive for the virus. The person reported that people exposed to the virus were placed in isolation but were not given personal protective equipment, including masks. On July 7, ICE reported 14 confirmed active cases at Rolling Plains Detention Center.
- On June 22, a person detained at the Bluebonnet Detention Center in **Anson**, **Texas** reported that they were transferred to Bluebonnet from another facility that had no active cases of COVID-19. xxi The person reported that, upon arrival at Bluebonnet, which had a large number of confirmed COVID-19 cases, they were put into observation and quarantined with 17 other people, and that, within several days, people in isolation began to exhibit COVID-19 symptoms.

Advocates raised alarm at an apparent increase in the rate of transfers from facilities operated by state correctional departments or federal Bureau of Prisons to immigrant jails and prisons, including transfers from jails operated by state correctional authorities with high known concentrations of COVID-19. In some instances, these transfers are the primary source of new arrivals into immigration detention. These transfers impact immigrants who have either completed criminal sentences or have been granted parole and are then apprehended by ICE and re-detained, effectively resulting in double sentencing while simultaneously increasing their risk of dying from COVID-19.

According to a July 3 article by the *Desert Sun*, six of ten people at the Adelanto ICE Processing Center in **Adelanto**, **California** who had tested positive for COVID-19 were transferred to Adelanto from state or federal prisons. *xxiii* As of July 6, over 250 people have been transferred from facilities managed by the California Department of Corrections and Rehabilitation to ICE jails and prisons since Governor Newsom issued a stay-at-home order in March. *xxiv* According to the Marshall Project, California is the state with the most confirmed COVID-19 cases in its jails and prisons. *xxv*

In June 2020, Philip Alagia, Chief of Staff at Essex County in **New Jersey**, stated on a weekly call with advocates that the Essex County Correctional Facility would accept up to 22 people into ICE custody every two weeks upon transfer from the New Jersey Department of Corrections. According to the Marshall Project, New Jersey is the state with the eighth highest total of confirmed COVID-19 cases in jails and prisons. **xxvi*



Transfers without adequate screening, testing, or implementation of medical isolation upon arrival in new facilities also continued between Criminal Alien Requirement prisons overseen by the Bureau of Prisons. xxvii

Missing in Detention

Advocates, media outlets, family members, and community members raised growing concern with people going missing for long periods of time while in ICE custody. In some instances, family members reported being unable to locate loved ones in detention, only to have their loved ones resurface in local area hospitals after a period of days or weeks, at times when the person in detention is very ill. Before the COVID-19 outbreak, advocates have documented numerous past instances in which ICE released very ill people from their custody right before their death, xxviii in order to avoid reporting the death as "in custody."

A June 17 article by the *Miami Herald* cited the story of Donald Brown – a man of Jamaican origin held in ICE custody for six months in various facilities in Florida. xxix According to Brown's family, he was able to call his family several times a day until June 1, when communication abruptly stopped. Brown's family reported that they were unable to locate him on ICE's Online Detainee Locator (ICE locator) and did not receive a response from ICE officials when they attempted to call to locate him. Brown's family reported that, after the *Miami Herald* published an article xxx featuring Brown's story, they received a three-minute call from Brown, who was in a hospital in **Broward County**, **Florida**, where he was being treated for COVID-19. The *Miami Herald* identified three additional instances in which people detained in ICE jails in South Florida went missing from ICE's Locator after contracting COVID-19. Advocates with Friends of Miami Dade Detainees, a group which maintains regular contact with persons detained at ICE jails and prisons in southern Florida, reported additional instances in which people have gone missing from the ICE Locator after exhibiting symptoms of COVID-19 and ultimately testing positive.

According to all versions of ICE's National Detention Standards, including the 2019 National Detention Standards (NDS), ICE does not need to notify family or legal counsel when a person in detention is moved to a medical facility off-site. The only mention of "notification of family" in the 2019 NDS is under "Death Occurring in ICE/ERO custody," which merely states: "Written procedures will provide for the facility's direct coordination with ICE/ERO in communicating news of the serious illness or death of a detainee." xxxii

From May 6 - June 14, FFI identified seven instances in which people held in ICE detention could not be located via the ICE Locator for over 5 days. Instead, the person's whereabouts were listed as "Call Field Office" for periods of time as long as 17 days, before "reappearing" in an ICE jail or prison. In a stark and disturbing change, from June 25-July 7, FFI identified six instances in which individuals



information merely pulled up the message, "Zero records found," often for an entire week, before having their location in a detention facility show up again in the ICE Locator. This is even more devastating for families and advocates who may assume the lack of even having "Call Field Office" come up indicates that the individual has been released or deported, and then are confused to eventually find out that the individual is still in fact in ICE custody, albeit with an unknown location.

Although difficulty locating people in ICE detention using the agency's locator system is not a new phenomenon, inability to locate loved ones causes even greater stress and trauma within the context of a pandemic.

Deportations

ICE continued to carry out deportations without adequate screening for COVID-19 or ability to observe social distancing on deportation flights, contributing to the global spread of the virus. According to a July 10 investigation by the *New York Times* and the *Marshall Project*, ICE has deported more than 40,000 immigrants from the United States since March, operating more than 200 deportation flights from March-June. **xxxii** The investigation cited at least four instances in which people deported to India, Haiti, Guatemala, and El Salvador tested positive for COVID-19 upon arrival in their country of origin and cited reports from eleven countries stating that people subject to ICE deportations arrived in their countries of origin with positive cases of COVID-19. **xxxiii**On June 19, more than 300 human rights and racial justice leaders called for a halt of deportations to Haiti, and directly linked deportations from immigration detention to the spread of COVID-19 in the country and strains on an already under-resourced health care system. **xxxiiv**

As of the week of June 29, ICE officials stated that they are unable to conduct universal testing for everyone subject to deportations. XXXXV ICE states the agency conducts screenings for COVID-19 symptoms for everyone subjected to deportation flights. However, a former correctional officer assigned to the Eloy Detention Center in Eloy, Arizona stated that he witnessed a person detained at the facility forced to hold a cold water bottle against his head until his temperature registered as normal, in order to facilitate his deportation. XXXXVI On June 19, advocates with Equal Voice Network reported that twelve men of Ecuadorian origin had initiated a hunger strike at the Port Isabel Detention Center in Los Fresnos, Texas after waiting eight months for a deportation flight, only to have the flight turned around mid journey due to the fact that ICE had not tested all passengers for COVID-19.

FFI documented numerous instances in which people in detention were forced to choose between deportation and indefinite detention. In some instances, people in detention requested deportation due to life-threatening conditions in immigration detention and/or abuse from facility officials. A July 6 article by *Reuters* documented numerous instances in which asylum seekers held in immigration detention sought deportation or "voluntary



departure" in response to the rapid spread of COVID-19 in ICE detention and the agency's failure to ensure even basic public health protections. **xxvii* Specific examples of people in detention forced to seek deportation in response to life-threatening detention conditions include:

• On June 29, a person detained at the Joe Corley Detention Facility in **Conroe**, **Texas** reported that his deportation officer and facility guards had threatened him with solitary confinement and that he feared retaliation and viewed deportation as his only means of escaping the abuse. On July 6, another person detained at Joe Corley stated while he was originally scheduled for deportation on April 17, his deportation date was pushed back to August 17. xxxviii The person reported that they had contracted COVID-19 while in detention and wanted to leave detention as soon as possible.

<u>Deaths</u>

During this period, ICE announced two deaths in custody. The agency attributed one death to complications from COVID-19 and the second to medical complications unrelated to COVID-19. Also during this period, New Mexico health officials confirmed that death due to COVID-19 of a man held in custody by an unnamed federal agency in a jail co-located with ICE. Advocates express concern that the actual death toll from COVID-19 in immigration detention may be higher than what is publicly reported, due to documented denial of care for people with COVID-19 in detention and lack of transparency and reporting regarding the experiences of people released from custody but who were exposed to COVID-19 and suffered medical neglect in detention.

On July 13, ICE confirmed the death of Onoval Perez-Montufa, a 51-year-old man of Mexican origin. XXXIX Perez-Montufa died in ICE custody at a Palm Beach County hospital. He had previously been detained at the Glades County Detention Center in **Moore Haven, Florida**, where he tested positive for COVID-19. Perez-Montufa entered ICE custody upon completion of a prison sentence and release from federal prison in Massachusetts. At the time of his death he was awaiting deportation from Mexico. Massachusetts state correctional officials and ICE facilitated this transfer despite Perez-Montufa's age, clear risk of medical complications and death due to COVID-19, and calls from advocates and public health officials to suspend all transfers and deportations. FFI has documented numerous examples of medical neglect at Glades, including denial of care for people experiencing severe COVID-19 symptoms. XI

On July 16, ICE announced the death of Luis Sanchez-Perez, a 52-year-old man of Guatemalan origin. Sanchez-Perez died in ICE custody at a hospital in Monroe, Louisiana. He had previously been detained at the Catahoula Correctional Center in **Harrisonburg, Louisiana**. ICE attributed his cause of death to septic shock from pseudomonas leading to cardiopulmonary arrest and stated that he had been receiving inpatient care at the Ochsner LSU Monroe Medical Center since February 2020. At the time of this report, advocates are gathering additional information.



On July 3, New Mexico health officials confirmed that a man held in criminal custody at the Otero County Prison Facility in **Chaparral, New Mexico** had died of complications from COVID-19. xlii According to health officials, the man was in his 50s, held in the custody of an unnamed federal agency, and was hospitalized at the time of his death. xliii The Otero County Prison detains people in the custody of the New Mexico Department of Corrections in one wing, and in the custody of U.S. Marshals Service and the Department of Homeland Security in the other. xliv

Oversight

Advocates expressed concern with weakened oversight mechanisms for conditions in ICE detention during the COVID-19 pandemic. In an email reviewed by *Buzzfeed* News on July 2, the Department of Homeland Security Office of the Inspector General (OIG) stated that inspectors would not visit immigration detention facilities in person until it was safe to do, and would only conduct inspections virtually for the time being. Advocates, including FFI, are concerned that the absence of in-person inspections will lead to less transparency and accountability, and raise the risk of unchecked abuses against vulnerable populations trapped in immigration detention during the COVID-19 pandemic.

On June 18, DHS OIG released a report on "Early experiences with COVID-19 at ICE Detention Facilities." The report, which was based on surveys to personnel at ICE detention facilities conducted from April 8-20, emphasized the inability to ensure social distancing in congregate settings and raised concerns with decreases in staffing due to the pandemic but directly contradicted many of the findings of FFI and other advocates, journalists, and people impacted by immigration detention regarding availability of personal protective equipment (PPE) inside detention. The increase of the contradiction of the findings of the findings of the personal protective equipment (PPE) inside detention.

On July 6, federal judge Marcia Cooke appointed an independent fact-finder to investigate possible "inhumane conditions, deliberate indifference, and cruel and unusual punishment" at three facilities in **southern Florida** (the Krome Processing Center in Miami, Broward Transitional Center in Pompano Beach, and the Glades Detention Center in Moore Haven). xlviii However, Judge Cooke rescinded this order several hours later, potentially due to a conflict of interest on the part of the appointed investigator. A new fact-finder has not been appointed.

Releases

Releases from immigration detention appeared to slow during this period. As of July 16, ICE reported 502 releases as a result of court order, an increase of only 37 since FFI's last update on June 18. Releases as a result of court order included release of approximately half of the immigrants detained at the Wyatt Detention Facility in **Central Falls, Rhode Island** in response to a lawsuit filed by the American Civil Liberties Union of Rhode Island. Alix However, ICE largely halted its release of people from detention using the agency's discretionary authority, justifying continued detention of many people in its custody due to past criminal charges or convictions, at times invoking racist and



dehumanizing tropes¹ to justify their continued detention. Several people in immigration detention with past criminal charges or convictions expressed to advocates and community members that they felt "left behind" and suffered severe depression due to the feeling that society had condemned them to die while other people were released.

In several instances, ICE continued to undermine or attempt to work around judicial orders to reduce detention levels, choosing to transfer people out of facilities subject to court orders to reduce detention levels rather than release them. On June 26, federal Judge Dolly M. Gee ordered ICE to release all immigrant children from family detention by July 17 due to ICE's failure to protect those in its custody from COVID-19. In her ruling, Judge Gee stated, "The family residential centers are on fire and there is no more time for half measures." However, as of July 16, advocates report that ICE has not shared any information with immigrant parents detained with their children as to how the agency would implement this order, including if the agency would release parents with their children or only release the children and continue to detain their parents.

Conditions Inside ICE Detention

Conditions inside ICE detention remained dire. FFI continued to document widespread unsanitary conditions, failure of facility staff to observe public health protocols, medical neglect, suppression of information, lack of access to essential supplies, use of force, and retaliation for internal organizing.

Violations of Public Health Protocols

FFI continued to document widespread reports of negligence and failure to observe public health protocols on the part of ICE officials and third party contractors. Whistleblowers employed or formerly employed at both the Richwood Correctional Center in Monroe, Louisiana (operated by LaSalle corrections) and the Eloy Detention Center in Eloy, Arizona (operated by CoreCivic/CCA) reported that negligence and failure to observe public health protocols had contributed to the spread of COVID-19 at both facilities and contributed directly to private prison staff's deaths at Richwood. The whistleblowers alleged that the companies withheld information about the spread of COVID-19 from employees; pressured employees to work when sick or waiting for test results; failed to ensure sanitation of sleeping and common areas with the necessary frequency; mixed groups of people who had been exposed to COVID-19 with ones who had not; rationed PPE; and watered down cleaning fluids.

FFI received reports from people in detention or recently in detention corroborating these reports at Richwood, Eloy, and in other facilities. People in detention also continued to report lack of access to necessary supplies, including soap and PPE. In total, FFI received 14 calls regarding lack of access to adequate supplies of soap between June 19- July 16.



Additional examples of failure of facility staff to comply with public health protocols:

- On June 23, a person detained at the Bluebonnet Detention Center in **Ansom**, **Texas** reported they are only granted one bar of soap per week. liv
- On July 2, a person detained at the Hardin County Jail in **Eldora, Louisiana** reported that guards frequently did not wear masks or gloves and did not take prevention of the spread of COVID-19 seriously. lv
- On July 2, advocates with the Etowah Visitation Program reported that people detained at the Etowah County Detention Center in **Etowah**, **Alabama** reported that people held at the facility were only given small bars of soap several times a week insufficient for personal sanitation, that no cleaning supplies for living spaces are provided, and that guards are not wearing masks or gloves.
- On July 15, 2020 an individual detained at El Valle Detention Facility in **Raymondville, Texas** reported that detained people are only given one mask and have to wash it and reuse it. He also reported that one of the security guards at the facility had died of COVID-19.

Use of Chemical Disinfectant

FFI continued to document reports from people in detention regarding exposure to chemical disinfectants. This included reports that facility staff indiscriminately sprayed toxic chemical disinfectants inside living areas and bathrooms without ensuring proper ventilation or providing PPE for people in detention and forcing people in detention to clean with chemical disinfectants without providing proper PPE. This exposure to toxic chemical disinfectant continues to cause severe health complications, including coughing, fainting, sore throat and eyes, headaches, and body aches. **FFI has identified exposure to toxic chemical disinfectant at seven total facilities.** Ivi

Examples of reports of the impact of exposure to toxic chemical disinfectant include:

- On June 22, FFI and Friends of Miami Dade Detainees filed a complaint with the DHS Office of Civil Rights and Civil Liberties (CRCL) regarding continued use of toxic chemical disinfectant at the Glades County Detention Center in Moore Haven, Florida. The CRCL was filed on behalf of a man with COVID-19 and included anonymous testimony of more than a dozen others naming the toxic chemical usage was further impairing their ability to breath and leading to ailments such as nausea, coughing blood, and shortness of breath. According to reports from people in detention, officials at Glades are spraying chemicals up to three times a day.
- On June 25, a person detained at El Valle Detention Facility in Raymondville, Texas reported that staff is spraying chemicals throughout the facility, which worsens pre-existing respiratory issues.^{lvii}
- On July 3, a person detained at the Adelanto Processing Center in **Adelanto**, California reported that he recently lost consciousness in the shower as a result of



chemical disinfectants sprayed in the bathroom. The person said they were briefly hospitalized as a result and then placed in quarantine for 22 days upon returning to the Adelanto facility. On July 8, another person detained at Adelanto reported that staff continue to spray toxic chemical disinfectant in the facility.

• On July 6, a person detained at the Bluebonnet Detention Center in **Anson, Texas** reported that facility staff began spraying chemical disinfectant in the facility. The same person reported experiencing fatigue and difficulty breathing.

According to a July 3 press report by the *Arizona Monitor*, women detained at the Eloy Detention Center in **Eloy**, **Arizona** reported exposure to fumes that caused nausea, fainting, and headaches lasting for a period of weeks. Iviii According to the article, detention center staff told people detained at Eloy that the fumes were caused by a power generator.

Medical Neglect

FFI continued to document widespread medical neglect, including failure to adequately treat people who had tested positive for COVID-19 or who were demonstrating serious COVID-19 symptoms as well as deferral of essential medical services unrelated to COVID-19. Examples include:

- On June 29, a person detained at the IAH Secure Adult Detention Facility in **Livingston**, **Texas** reported that they were referred to external medical providers for necessary surgery but then sent back to detention after ICE refused to fund the procedure. lix
- On June 30, a person detained at the Bluebonnet Detention Center in **Anson**, **Texas** reported that they tested positive for COVID-19 and experienced body ache, headaches, and frequent breathing issues, without receiving medical attention for these symptoms.
- On July 2, the sibling of a person detained at Wakulla County Jail in Crawfordville, Florida reported that someone detained with their family member tested positive for COVID-19 and that their sibling was displaying symptoms. However, he was denied his medical records and was only given asthma medication as treatment. lx
- On July 2, a person detained at the Folkston ICE Processing Center in **Folkston**, **Georgia** reported multiple underlying medical conditions leaving them especially vulnerable to complications from COVID-19. lxi The person reported that facility staff have not provided him with medical records he needs to obtain authorization for a necessary surgery.

Use of Force and Retaliation

FFI continued to document widespread use of force, including deployment of pepper spray, rubber bullets, and tear gas. Use of force involving pepper spray is well documented at facilities operated by CoreCivic/CCA^{lxii} and LaSalle Corrections. ^{lxiii}



These reports contradict testimony from CEOs of both companies during the previously referenced July 13 oversight hearing denying awareness of incidents involving pepper spray within their facilities during the COVID-19 pandemic. lxiv

During the oversight hearing, Geo Group CEO George Zoley acknowledged a widely reported use of force incident lav at the Adelanto Processing Center in **Adelanto**, **California** on June 12, 2020, in which facility staff fired pepper balls and pepper bullets on a group of people peacefully protesting a period of prolonged lockdown. However, Zoley downplayed the incidents' severity. FFI received numerous phone calls from people detained at Adelanto detailing on-going medical complications from exposure to pepper spray and tear gas on July 12. This includes:

• On July 8, a person detained at Adelanto reported that he was sent to the hospital after he was hit with rubber bullets during the June 12 protest and was transported to a nearby hospital due to chest pains. He reported that he then suffered a heart attack, was hospitalized for a period of five days, and continues to experience difficulty breathing and residual chest pain. lxvi

Additional reports of use of force and retaliation include:

- On July 2, advocates with Otay Mesa Detention Resistance reported accounts from people detained at the Otay Mesa Detention Center in San Diego,
 California of being sent to solitary confinement in retaliation for speaking out against facility conditions.
- On July 6, a person detained at the Adelanto Processing Center in **Adelanto**, **California** reported that they were beaten for putting their hand on the door leading to the area where guards eat their meals. lxvii The same person reported experiencing continued pain and being unable to access their medical records.
- On July 9, a person detained at the Port Isabel Detention Center in Los Fresnos, Texas reported that a female guard sexually harassed him and that another guard pushed him for forgetting to wait in a line for weapons inspections before accessing recreation space. lxviii When the person in detention complained, the same guard pushed him so hard he fell and injured his knee. The person said he filed a complaint against the guard and has not seen him since



Freedom for Immigrants documented widespread reports detailing attempts to suppress information from external sources, or to limit the ability of people in detention to contact people outside detention. Examples include:

- On July 1, a person detained at the Baker County's Sheriff Office in **Macclenny**, **Florida** reported that when he attempts to contact his attorney over the phone, he receives a message informing him that the number is restricted. lxix
- On July 6, a person detained at the Adelanto ICE Processing Center in **Adelanto**, **California** reported that, on July 3 and 4, guards came into dormitory areas and removed newspapers containing news about conditions at the facility, including abuses and the spread of COVID-19.lxx The same person reported that staff made an announcement over facility loudspeakers instructing guards to remove all newspapers. On July 10, FFI received calls from two additional people detained at Adelanto corroborating these reports.
- On July 8, a person detained at Wakulla County Jail in **Crawfordville, Florida** reported that facility phones often do not work. lxxi The person was disconnected three times while trying to place a call to FFI's National Detention Hotline.

Conclusion

ICE's combination of abuse and willful negligence continue to fuel an increase of COVID-19 cases in immigration detention and in communities within the United States and abroad. As overall detention numbers continue to fall due to illegal and inhumane restrictions on access to asylum continue, ICE appears to be doing all it can to continue detaining those still in its custody. It is clear that ICE will not use its discretionary powers to facilitate releases, and more will die if detention levels are not immediately and dramatically reduced. Freedom for Immigrants calls on Congress to mandate that ICE release all those from its custody; to ensure immediate, free and adequate access to soap, sanitary supplies, and means of external communication for those in detention; and to immediately suspend transfers and deportations.

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