



ACLU RESEARCH REPORT

Justice-Free Zones

U.S. Immigration Detention Under the Trump Administration

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Executive Summary and Recommendations

In the last three years, the Trump administration has grown the immigration detention system in the United States to an unprecedented size, at times holding more than 56,000 people per day. Since 2017, Immigration and Customs Enforcement (ICE) has anchored this growth in places where immigrants are most likely to be isolated from legal counsel, remain in detention without real opportunity for release, and are more likely to lose their cases. These new detention centers also exhibit patterns of mistreatment and abuse, including medical and mental health care neglect, that have been present since the inception of ICE's detention system and grown worse as the system has expanded.

When ICE was created in 2003, it inherited an immigration detention system that held about 20,000 people per day.¹ The immigration detention system has since grown to a sprawling network of more than 200 detention centers nationwide. These facilities range in size and are largely operated by private prison corporations and, in some cases, by local jails. ICE uses these facilities to lock up people who arrive at the border or airports and request asylum, as well as long-time community members who are facing removal because of allegations of criminal conduct or simply because they are undocumented.

This report provides a comprehensive examination of changes to the immigration detention system under the Trump administration, including an in-depth examination of the system's expansion in the last three years and conditions of confinement in new detention facilities opened after January

2017. When this report went to print in April 2020, the COVID-19 coronavirus pandemic had taken hold in the United States. While our findings do not account for conditions in the detention system during the pandemic, they do document the state of a system that was never prepared to safely handle the crisis situation the world now faces. The following findings were particularly concerning in light of the COVID-19 outbreak:

- We observed understaffing and cost-cutting measures in medical units which appeared dangerously unprepared for emergencies, posing danger to the health of people in detention even under ordinary circumstances;
- We heard stories of immigrants' lack of access to proper hygiene and witnessed unsanitary conditions in living units, many of which contained beds, dining, and restroom facilities for up to nearly 100 people all in one room.
- Asylum seekers described virtually impossible odds for receiving release from detention on parole, an important legal mechanism ICE should be more eager to deploy to draw down its detention population in the face of a health crisis.

This report is based on an assessment of publicly available data from ICE, the Executive Office for Immigration Review (EOIR), and the U.S. Securities and Exchange Commission; documents released under the Freedom of Information Act (FOIA) by ICE and EOIR to the ACLU; records provided by the Transactional Records Access Clearinghouse (TRAC) and the American Immigration Lawyers

Association (AILA); and site visits and interviews with 150 people held at five new detention centers in the states of Louisiana, Mississippi, and Arizona. This research provides a glimpse into the realities of life inside these new detention facilities and an assessment of who benefits from this expansion.

Our research also examines the human cost of the growth of the immigration detention system and documents patterns of mistreatment and instances of abuse in these new detention facilities. Between January 2017 and April 2020, 39 adults died in ICE custody or immediately after being released. As part of its recent growth, ICE has awarded contracts at facilities well known for abuse, including former prisons with conditions so terrible that the federal government terminated their contracts in prior administrations. Much of this expansion has been directed toward for-profit private prison companies.

Key findings on the growth of the immigration detention system include:

- Immigration detention has expanded at record levels under the Trump administration.
 - ICE detained, on average, over 50,000 people each day in fiscal year (FY) 2019. At times in FY 2019, the detained population per day exceeded 56,000 people, approximately 50 percent more than the previous highs during the Obama administration. When Customs and Border Protection (CBP) facilities are included, the federal government detained some 80,000 people at a time – far higher than the number detained in previous administrations.
 - Since 2017, ICE has opened over 40 new detention centers, yielding a total of 220 detention facilities across the United States. By the end of 2019, over 25 percent of people in ICE custody were held in these new detention facilities.
 - For FY 2021, the Trump administration requested that taxpayers fund ICE custody operations at \$4.1 billion, with the intent

to expand ICE’s daily detention capacity to 60,000 people on any given day. ICE has sought to justify this request for increased detention space based in part on plans to expand the jailing of families, embark on aggressive interior enforcement within the United States, and limit its grant of parole to asylum seekers eligible for release from detention.

- The Trump administration has expanded the use of private prison companies in the immigration detention system.
 - As of January 2020, 81 percent of people detained in ICE custody nationwide are held in facilities owned or managed by private prison corporations – a record high.
 - As of January 2020, 91 percent of people housed in immigration detention centers opened after 2017 are held in facilities owned or operated by private prison corporations.
 - As part of its expansive growth of the immigration detention system, the Trump administration has opened immigration detention centers at facilities where federal contracts had been terminated in prior administrations due in part to poor conditions of confinement.
 - A typical immigration detention center opened after 2017 is operated by a private prison company, is located hours away from the nearest metropolitan area, and, until recently, had been dedicated to incarcerating prisoners with criminal convictions from other jurisdictions. As sentencing reform has reduced the number of prisoners nationwide, private prison companies have sought to fill these beds with immigrant detainees.

Key findings on the heightened barriers to due process and release faced by immigrants held at new immigration detention centers include:

- People held in these new detention centers have far less access to attorneys than people detained in facilities that ICE opened under previous administrations. When comparing immigration detention facilities operating before 2017 to those opened after 2017, there are four times as many immigration attorneys available within a 100-mile radius of pre-existing facilities versus new ones.
 - Asylum seekers held in new detention centers face virtually impossible odds for receiving release from detention on parole. Under U.S. immigration law, asylum seekers who have been found to have a credible fear of persecution in their home countries by an asylum officer are eligible to be released from detention through a mechanism referred to as “parole” if they do not pose a flight risk or a danger to the community. Yet over 70 percent of people held in new immigration detention centers are located under the control of ICE’s New Orleans Field Office, which denied 99.1 percent of all applications for release on parole between March and December 2019, even after a federal court ordered the office to reverse this practice and grant parole to eligible asylum seekers.
 - People detained in some of these detention centers told researchers about ICE officers who blocked asylum seekers from parole with extreme measures: Officers denied the existence of the court order to detained asylum seekers, told asylum seekers that they could not apply for parole, or simply stated that parole was granted only to people who were dying.
 - Immigrants detained at new detention facilities face steeper odds of gaining release on bond. In FY 2019, immigration

judges denied bond in custody hearings at rates higher than the national average at most of the 20 largest new detention facilities.

- The overwhelming majority of people held in new detention centers lost their asylum cases, far outstripping the national average. In FY 2019, immigration judges denied every single asylum claim for people detained at four of the 20 largest detention facilities opened under the Trump administration. At almost half of these 20 largest new facilities, immigration judges denied asylum claims over 90 percent of the time. In contrast, immigration courts nationwide denied asylum in 70 percent of all cases and 76 percent of detained cases.

This report also presents the results of an in-depth investigation into conditions of confinement at five new immigration detention centers opened under the Trump administration. For this report, researchers toured facilities and interviewed 150 immigrants in ICE custody at Winn Correctional Center, Richwood Correctional Center, and Jackson Parish Correctional Center in Louisiana; La Palma Correctional Center in Arizona; and Tallahatchie County Correctional Facility in Mississippi.

- Some facilities suffered from understaffing and cost-cutting measures that could endanger the health of people in detention. Medical units appeared dangerously unprepared for emergencies. For example, medical staff at Richwood Correctional Center told us that a request to see an outside doctor to set a broken bone could be seen “within a week.”
 - People held at several detention centers reported waiting days to see a doctor or nurse, and failing to receive necessary medications. Jackson C., a Mexican immigrant with asthma, had placed several requests for inhalers with the medical unit at Winn Correctional Center, but none was provided. “I have a lot of difficulty breathing and it is hard to sleep. I have

- pain in my chest and headaches,” he reported.
- The organization and maintenance of clinical facilities at detention centers also raised concerns, with insufficient and inaccessible medical equipment. Medical staff at Winn showed us what was described as the clinic’s “emergency room.” The room held only a stretcher and had no basic medical equipment commonly located in an emergency room, including a crash cart or defibrillator, both of which staff searched for and only several minutes later found in the hallway. In our prior analysis of deaths in detention, *Code Red: The Fatal Consequences of Substandard Medical Care in Immigration Detention*, we found that botched emergency responses – including delays in locating a defibrillator or other necessary emergency equipment – have been a recurring theme in deaths linked to subpar care across several detention centers.²
 - Facilities appeared unequipped to provide adequate mental health services while a suicide crisis emerges in immigration detention centers.
 - Between January 2017 and March 2020, 12 people have died as a result of apparent suicide in immigration detention – accounting for a third of adult immigrant deaths in detention.
 - Two of the five detention centers we visited had no mental health professionals on site at all, and both detained people and medical staff we spoke with reported that mental health patients were not commonly referred for outside care. One of these facilities was the Richwood Correctional Center, where Roylan Hernandez Diaz, an asylum seeker from Cuba, had died by suicide in a solitary confinement cell in October 2019, only weeks before our visit.
 - We received numerous reports of people in significant distress, including survivors of torture and sexual assault abroad, who experienced substantial delays in obtaining mental health care, even after repeated requests.
 - People with disabilities are subject to cruel treatment and neglect in immigrant detention facilities. We received several reports of people with disabilities who failed to receive legally required reasonable accommodations for their disabilities or assistance, and instead faced abuse by detention officials.
 - One person told us about a man in his housing unit with a serious physical disability at Jackson Parish Correctional Center for over six months. “He falls and falls,” he reported. “The guards don’t help him. The guards yell at him.”
 - At Winn Correctional Center, Manuel Amaya Portillo, an asylum seeker with disabilities affecting his mobility, made repeated requests for a wheelchair, which staff did not address, in apparent violation of the legal requirement to provide him reasonable accommodation. Manuel told us that medical staff locked him in the medical unit and gave him sedatives, which he had not requested and did not want, during what he later learned was a facility inspection tour by government-contracted outside inspectors who took photos and interviewed detained people about conditions at the facility.
 - Officers have used physical force, tear gas, and pepper spray, and they have threatened immigrants in detention facilities.
 - One man at Richwood Correctional Center described watching an officer yell “mother f—er” at a Guatemalan immigrant and then grab him by his neck. In a separate incident, the man recalled witnessing an officer hit another immigrant so hard he thought he heard the sound of the man’s ribs break. Another man reported that “at Richwood there were guards that would hit us and would not give us food.”

- At La Palma Correctional Center, a Honduran asylum seeker told interviewers that “a Salvadoran was grabbed by the head and slammed against the wall for taking papers out of his belongings” on his first day of detention. One man reported that a correctional officer told him “the solution to your problem is deportation,” and that officers called immigrants locked up at the prison facility “rats.”
- People in detention are locked up in solitary confinement for lengthy periods, often for minor infractions or because of retaliation by officers.
 - We received multiple reports of officers placing people in solitary confinement for as long as 60 days for minor incidents. Delmer L. told us about a man who was beaten and put in solitary confinement at Richwood Correctional Center for approximately 90 days after asking an officer to “give him his commissary.”
 - We also received reports that facility officials at Winn Correctional Center punished immigrants with solitary confinement for attempting to speak to reporters during facility tours. Carlos C., an asylum seeker, reported that he had been placed in solitary confinement for eight days after attempting to speak to Fox News reporters during their tour of the facility.
- Immigrants are held in sordid conditions without access to proper hygiene products or facilities. People detained at all detention centers raised serious concerns about sanitation in detention and their ability to maintain personal hygiene.
 - At Jackson Parish Correctional Center, we received multiple reports that the facility failed to provide people with soap for bathing or cleaning supplies for their cells or bathrooms.
 - Several men at Richwood described a recent scabies outbreak, during which they were stripped and sprayed with chemicals by guards.³
- People at La Palma reported water leaking into cells, gray drinking water, clogged toilets that were only a foot from the beds, and poor ventilation.
- Several people detained at Winn reported black mold growing on the walls and leaks in the roof that would soak peoples’ beds.
- Private prison companies fail to pay immigrants in detention their wages – even at the rate of a dollar a day.
 - Immigrants at Richwood Correctional Center and Winn Correctional Center, both run by LaSalle Corrections, reported that they had not received payment or had not received full payment for their labor, even at the rate of \$1 per day. “I worked for a whole month in the kitchen but was paid only four dollars,” reported one man at Winn.
 - Caleb D., who was detained at Tallahatchie County Correctional Facility, which is run by CoreCivic, said, “I’ve been working every day, but they haven’t paid [me] yet. I’m afraid not to work because they might think I am rebelling.”
- Food quality raised concerns for the health and welfare of people in detention. People detained at all five facilities we visited raised concerns about the safety, quality, and amount of food served. People often did not receive meals that accommodated health needs, such as diabetes, or religious observations, as required.
- People in detention have little to no access to legal materials or law libraries.
 - The law library that we viewed at La Palma Correctional Center had no books or electronic legal materials available at all, and it consisted only of a small room with a computer with no electronic legal materials and a printer.

- At Richwood, the law library had three computers available for over 1,100 people. The only legal books available in the library were Louisiana state statutes – of little use to people seeking information regarding the federal immigration system – and no books regarding immigration law.

Recommendations

As communities across the United States came to terms in March 2020 with the severity of the public health threat posed by COVID-19, the authors of this report were among hundreds of organizations nationwide who called on ICE to mitigate the risk to people in its custody, as well as U.S. communities, by rapidly releasing as many people as possible from detention, including those at risk of serious illness or death due to their age or underlying medical conditions. The outbreak also highlighted the need for ICE to make immediate operational changes within its detention centers to save lives.⁴ The following recommendations are intended to end abusive and inhumane detention conditions that were present before the virus outbreak and which undoubtedly have placed immigrants in detention in more imminent danger as the United States has confronted a crisis that binds together all of our human rights.

To Congress:

1. Dramatically reduce funding for immigration detention and enforcement. In the FY 2021 appropriations bill, prohibit ICE from transferring and/or reprogramming funds into its enforcement and removal account.
2. Preferentially fund alternative-to-detention programming run by non-profit organizations and require it to be community-based, case management centered, and used as a true alternative to detention – that is, as a means of reducing detention – rather than as an alternative form of release.
3. Immediately conduct robust oversight of ICE detention, including through aggressive use of subpoena authority and investigations into the conditions documented in this report. Establish a special or select committee to investigate deaths in ICE and CBP custody, medical care, mental health services, and the use of solitary confinement in immigration detention. Act to enforce independent third party certification of Department of Homeland Security (DHS) compliance with measures to improve detention conditions.
4. Request the DHS Office of Inspector General (OIG) investigate and issue recommendations regarding the conditions documented in this report – specifically the agency’s failure to provide adequate medical care, mental health services, and legally mandated disability accommodations, and to hold detention facilities accountable for improper use of solitary confinement and use of force.
5. In the FY 2021 appropriations bills, expand funding for the Legal Orientation Program and ensure that the program is available in all immigration detention facilities where immigrants are held for longer than a 72-hour period. Provide funding for a pilot Legal Orientation Program to be operated by nonprofit legal service providers as individuals are being released from CBP custody. Provide funding for a direct representation pilot program to fund non-profit organizations providing direct legal representation to asylum seekers arriving at the southern border.
6. Pass the Dignity for Detained Immigrants Act (H.R. 2415 / S. 1243). This bill would significantly reduce the number of people held in immigration detention and adopt a presumption of liberty for those in immigration proceedings. It would end unfair mandatory detention laws that prevent immigration judges from making fair and individualized release determinations and

end detention in prisons and local jails, including facilities owned and operated by private companies. It would also set enforceable standards to ensure those who remain in custody are in a system that is safe, humane, transparent, subject to robust independent oversight, and accountable to the public.

7. Pass the New Way Forward Act (H.R. 5383). This bill would end mandatory immigration detention and create a process for everyone to have a prompt and fair bond hearing. The bill also precludes ICE from contracting with private, for-profit prisons or local and state jails to detain immigrants, and ends the harmful practice of local police acting as deportation agents.
8. Pass the Public Oversight of Detention Centers Act (H.R. 2842), amended to eliminate any notification requirement for entry of members of Congress into ICE or CBP facilities. This bill would enable robust congressional oversight by requiring agencies to provide any members of Congress access to DHS and Office of Refugee Resettlement (ORR) detention sites.
9. Pass the Stop Shackling and Detaining Pregnant Women Act (H.R. 3563). This bill would prohibit the use of restraints on pregnant individuals and prohibit the presence of DHS officers during treatment and care of women related to pregnancy.
10. Pass the Private Prison Information Act (H.R. 5087 / S. 2773). This bill would increase transparency regarding the immigration detention system, including eliminating exemptions under the Freedom of Information Act that have prevented the public from seeking records from private companies that operate detention sites.

In recognition that the current administration has used regulatory processes only to propagate policies that harm immigrants and asylum seekers,

the recommendations below are directed toward a future administration that seeks to meet its human rights, immigration, and due process obligations as immediate first steps toward ending the abuses rampant in the current immigration system.

To the Department of Homeland Security:

1. Immediately and dramatically end ICE's use of needless and arbitrary immigration detention.
 - a. Immediately take steps to ensure that all ICE field offices are following the 2009 Directive on Parole of Arriving Aliens Found to Have a Credible Fear of Persecution or Torture, and codify its regulations.
 - b. Ensure prompt, thorough, and professional screening of people entering detention centers to identify medical conditions, disabilities, and mental health conditions, and any characteristics that would place the person at particular risk in a detention setting.
 - c. Release and refrain from detaining children, and individuals who otherwise face particular risk in detention settings, notably people with disabilities, including those with mental health conditions, individuals with serious medical conditions, those who are pregnant, and lesbian, gay, bisexual, transgender, and queer (LGBTQ) persons.
2. End the use of prisons, local jails, and other criminal incarceration facilities, including those privately owned and operated, for civil immigration detention.
3. Replace detention with community-based case management for those with pending immigration proceedings. Establish a nationwide program of community-based alternatives to detention, to be run by

nonprofit organizations providing case management services.

4. Utilize immigration court (Immigration and Nationality Act § 240) removal proceedings rather than expedited removal. Release asylum seekers to sponsors in the community.
5. Ensure greater transparency and accountability in the detention system.
 - a. Publicly release all information pertaining to detention contracts and ensure that any bidding process be publicly accessible and transparent.
 - b. Ensure robust implementation of the Office of the Independent Ombudsman for Immigration Detention under the direction of a civil society actor with experience and credibility in advancing the civil and human rights of immigrants in detention.
 - c. Institute meaningful consequences for failed inspections assessing compliance with detention standards.
 - d. Ensure that full facility inspections and full and complete investigations of deaths in custody or with links to in-custody treatment are available to the public within three months of being finalized. Provide public reporting on suicide attempts, hunger strikes, work program stoppages, use of solitary confinement, use of force, and other significant events at detention centers.
 - e. Require that all facilities grant nonprofit organizations and the media access to facilities to provide legal education, monitoring, and visitation.
 - f. Remove restrictions on the public release of information held by state and local governments that hold individuals in ICE custody, with appropriate confidentiality provisions to protect their individual identities.
6. Until further legislative or meaningful regulatory or policy reform is put in place, amend all contracts to require that inspections be conducted using the most up-to-date version of the 2011 Performance-Based National Detention Standards (PBNDS).
7. Ban the use of solitary confinement in immigration detention (whether for administrative, protective, or disciplinary reasons).
8. Ensure that all people in immigration detention have access to timely, quality medical care and mental health services.
9. Ensure adequate food, water, hygiene supplies, sanitary conditions, and environmental safety at all detention facilities.
10. Provide legally mandated reasonable accommodations and auxiliary aids and services to detained people with disabilities, including assistive devices and professional personal assistance for tasks of daily living for people who need such services.
11. Fully implement the Prison Rape Elimination Act (PREA) requirements in immigration detention facilities nationwide: DHS should end the use of any jail or contract facility that does not provide proof of compliance with either the DOJ PREA rule or the DHS PREA rule (including but not limited to proof that the facility has received a timely independent audit, as required by the DOJ and DHS PREA rules, and been found to meet the standards).
- g. Revise the ICE Stakeholder Access Directive to provide a meaningful guarantee of access to ICE detention facilities, including access to segregated housing units and all areas where detained individuals are held.

12. Ensure access to counsel and legal materials for all immigrants in detention. Ensure access to free telephone calls to counsel and immediate family and access to quality legal materials and information in a variety of languages.

To the Department of Justice / Executive Office for Immigration Review:

1. Issue regulations construing Immigration and Nationality Act (INA) § 236(a) to impose a presumption of release at a custody hearing before an immigration judge unless the government establishes by clear and convincing evidence, based on credible and individualized information, that no conditions of release (e.g., recognizance, bond, and/or other conditions of supervision) would protect public safety. The fact that an individual has a prior conviction or a pending criminal charge should not be the sole factor to justify continued detention.
2. Issue regulations requiring that immigration judges impose the least restrictive conditions of release that are necessary to reasonably ensure the person's appearance at removal proceedings or to protect public safety, with a strong presumption in favor of release on recognizance or release to community-based case management programs.
3. Issue regulations eliminating the use of cash bond in the immigration system. To the extent bond continues to be used, issue guidance prohibiting the immigration judge from setting bond in an amount greater than necessary to ensure the person's appearance for removal proceedings, in light of the person's ability to pay. Where the person cannot afford a bond amount, but other conditions of supervision would permit release, the immigration judge must order release on those conditions.
4. Issue regulations to provide arriving asylum seekers who are denied parole a prompt hearing before the immigration judge that comports with the requirements above.
5. Issue an Attorney General opinion abrogating *Matter of Joseph*, 22 I. & N. Dec. 799 (BIA 1999) and issue regulations exempting individuals from INA § 236(c) if they have a substantial defense to a removal order, including a substantial claim to cancellation of removal or adjustment of status.
6. Issue legal guidance and training clarifying that DHS and DOJ maintain the authority to place individuals subject to the provisions of INA § 236(c) in mandatory supervision in the community.
7. Issue an Attorney General decision withdrawing *Matter of M-S*, 27 I. & N. 509 (AG 2019), and ensure that asylum seekers are considered for release in a fair, prompt, and individualized manner.
8. ACLU and NIJC urge that counsel be provided at government expense for all indigent immigrants whose liberty is at stake.ⁱ Until the federal government provides counsel to every individual facing removal, the government should expand the National Qualified Representative Program (NQRP), ORR's counsel funding programs, and other existing programs to provide counsel for vulnerable populations, such as detained individuals, families, children, asylum seekers, individuals with mental disabilities (not limited to those who are detained and found to have serious mental disorders), and others with particular vulnerabilities. EOIR should issue a memorandum to all immigration judges to affirm their authority to appoint counsel for these populations and discretion to deem others as vulnerable individuals. EOIR should also issue policy

i. Human Rights Watch has not adopted a global policy on government-provided counsel in immigration cases.

guidance advising immigration judges to institute safeguards, including termination, administrative closure, or suspension of removal proceedings in such cases where the individual is not represented by legal counsel.

9. Expand the Legal Orientation Program to reach every person in immigration custody for longer than 72 hours. Require every facility to disseminate information about these programs and other opportunities to meet with pro bono service providers to all detained individuals, not just recent arrivals.

To the DHS Office of Inspector General:

1. Initiate and complete an investigation into conditions at detention facilities that have come online since January 2017, including the provision of medical care, mental health services, disability accommodations and auxiliary aids and services, and use of solitary confinement and use of force.
2. Initiate a review of ICE's grant of parole and bond in ICE's Detroit, El Paso, Los Angeles, Newark, New Orleans, and Philadelphia Field Offices.

To the DHS Office for Civil Rights and Civil Liberties:

1. Conduct prompt investigations of civil rights and civil liberties complaints related to immigration detention facilities.
2. Establish a complaint mechanism and disseminate information to facilitate submission of complaints by detained immigrants (particularly in light of limited access to the internet).
3. Publish reports on investigations pertaining to detention, including by resuming publication of Compliance Investigative Memos.

To State and Local Governments:

1. Pass legislation to prohibit intergovernmental services agreements between state or local agencies and the federal government for the purpose of detaining individuals for federal civil immigration authorities, and to limit modifications to expand detention. For example, see Washington S.B. 5497.
2. Pass legislation prohibiting 287(g) agreements and cooperation with ICE detainers.
3. ACLU and NIJC urge that legislation be passed to prohibit agreements between state and local agencies and private prison companies, including for immigration detention.ⁱⁱ For example, see Illinois H.B. 2020.
4. End contracts for the use of city and county jails to detain people for ICE.
5. Enact measures that promote local oversight and accountability of state and local facilities, for example by extending prison inspections to include state or local facilities that detain individuals for federal civil immigration authorities.
6. Pass legislation to increase transparency with regard to state and local contracts with the federal government where permits are required to construct or rehabilitate buildings for purposes of immigration detention.
7. Pass legislation and provide funding for the appointment of immigration counsel and bond costs for detained immigrants.
8. Provide funding for the establishment or strengthening of skilled defense units within all public defender offices to provide non-citizens consultation and representation against immigration consequences of criminal convictions.

ii. Human Rights Watch has not adopted a global policy on private prison facilities.

Expansion by the Numbers: The Growth of Immigration Detention

The Growth of Immigration Detention Under President Trump

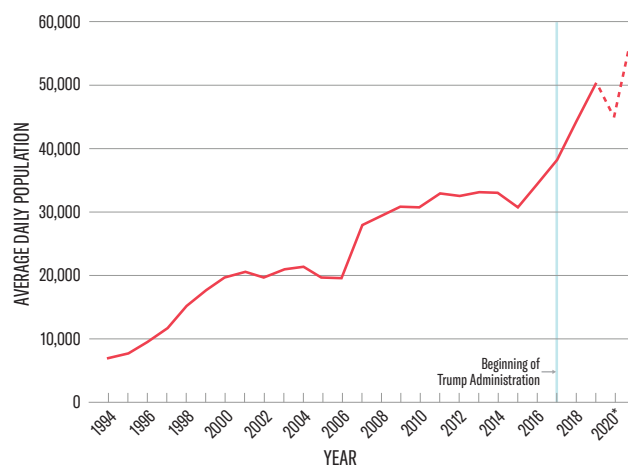
Immigration detention as we know it today is a relatively recent phenomenon. In the 1980s, fewer than 2,000 people were held in immigration detention nationwide.⁵ The immigration system – which now encompasses a sprawling network of hundreds of detention centers, prisons, and jails around the country – took shape only in the last 25 years. This growth took place after the enactment of new criminal justice and immigration laws in the 1990s, as part of the same policies now widely recognized as fueling mass over-incarceration of communities of color.⁶ Between FY 1995 and FY 2016, the immigration detention system quadrupled in size – jumping from a detained population of 7,475 to 32,985 on average per day (see Figure 1).⁷

We have now entered a new phase of unprecedented growth. In the past three years, the Trump administration has expanded the infrastructure of this already massive system by over 50 percent to detain an average of over 50,000 people in FY 2019, at one point detaining as many as 56,000 people.⁸ When CBP facilities are included, the federal government has detained some 80,000 people at a time – far higher than the number detained in previous administrations.⁹

Since the Trump administration has come into office, it has brought online over 40 new immigration detention centers (see Appendix Table A for listing of these centers), yielding a total of

FIGURE 1

Immigration Detention: Average Daily Population, 1994-2020



Sources: Congressional Research Service; Immigration and Customs Enforcement. FY 2020 and 2021 numbers are based on projections provided by the Office of Management and Budget, *Budget of the U.S. Government, FY 2021*.

220 detention facilities across the United States.¹⁰ The largest 20 of these new detention centers are listed in Table 1 and displayed geographically on the map in Figure 2.

By the end of 2019, ICE held an average of 12,206 people per day in these new detention centers – or more than 25 percent of all immigrants in detention. The number of new immigration detention centers alone underestimates the true growth of the immigration detention system in the last three years, as this figure does not include the expansion of existing facilities or current plans for additional expansion, which have since been announced. For example, in June 2019, the GEO Group, Inc. announced new contract modifications to expand its capacity at the Montgomery

Processing Center in Conroe, Texas, by an additional 314 beds, at the cost of \$10 million per year.¹¹ In December 2019, ICE announced its plan to open a new 1,000-bed detention center run by the Management and Training Corporation (MTC) in

Anson, Texas.¹² Later that month, ICE also signed contracts with the GEO Group, CoreCivic, and MTC to add more than 2,100 detention beds in California as part of contracts estimated to cost taxpayers over \$6.5 billion dollars.¹³

TABLE 1

List of 20 Largest New Immigration Detention Facilities¹⁴

Facility	Location	Operator	FY 20 ADP*	Facility Capacity ¹⁵	Male/Female
La Palma Correctional Center	Eloy, AZ	CoreCivic	1,798	3,060	Male
Winn Correctional Center	Winnfield, LA	LaSalle	1,406	1,575	Male
Adams County Correctional Center	Natchez, MS	CoreCivic	1,073	2,232	Female/Male
Richwood Correctional Center	Richwood, LA	LaSalle	931	1,101	Male
Jackson Parish Correctional Center	Jonesboro, LA	LaSalle	918	1,034	Female/Male
Montgomery Processing Center	Conroe, TX	GEO	899	1,000	Female/Male
El Valle Detention Facility	Raymondville, TX	MTC	784	1,000	Female/Male
South Louisiana Correctional Center	Basile, LA	GEO	753	1,000	Female/Male
D. Ray James Detention Facility	Folkston, GA	GEO	806	1,900	Male
Catahoula Correctional Center	Harrisonburg, LA	LaSalle	498	835	Male
River Correctional Center	Ferriday, LA	LaSalle	495	602	Male
Tallahatchie County Correctional Facility	Tutwiler, MS	CoreCivic	463	2,672	Male
Limestone County Detention Center	Groesbeck, TX	LaSalle	303	1,006	Male
Caroline Detention Facility	Bowling Green, VA	Local Sheriff	268	**	Female/Male
Bossier Parish Correctional Center***	Plain Dealing, LA	Local Sheriff	240	**	Male
Okmulgee County Jail	Okmulgee, OK	Local Sheriff	228	**	Male
Wyatt Detention Center	Central Falls, RI	Local Sheriff	118	**	Male
Kay County Justice Facility	Newkirk, OK	Local Sheriff	99	**	Female
Nye County Detention Center	Pahrump, NV	Local Sheriff	77	**	Female/Male
Robert A. Deyton Detention Facility	Lovejoy, GA	GEO	28	768	Female/Male

Sources: Immigration and Customs Enforcement; Securities Exchange Commission; GEO, CoreCivic, and MTC websites

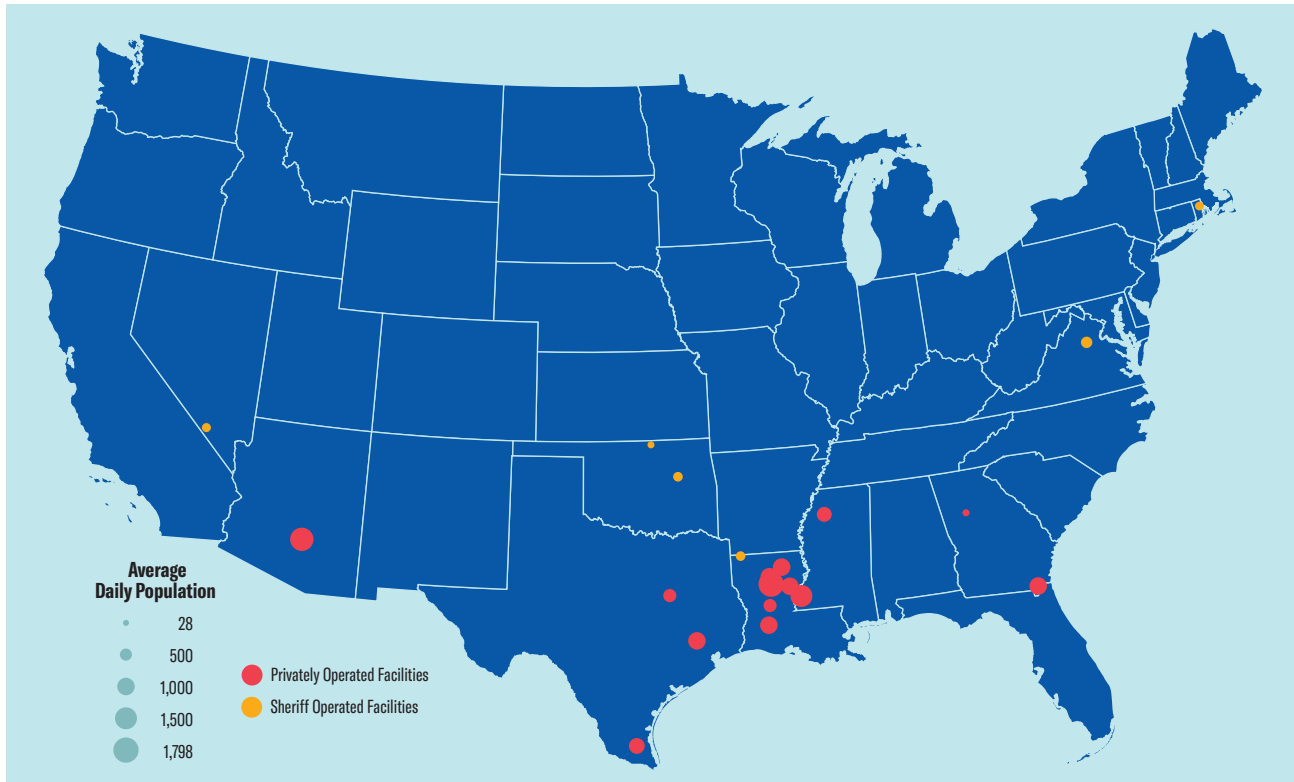
*FY 2020 Average Daily Population (ADP) current as of December 2019.

**No information publicly available.

***As of January 2020, ICE discontinued use of the Bossier Parish Correctional Center.¹⁶

FIGURE 2

Map of the 20 Largest New Immigration Detention Facilities



Source: Immigration and Customs Enforcement

Congress Has Failed to Curb the Growth of Immigration Detention

In both FY 2018 and FY 2019, congressional appropriators explicitly instructed ICE to reduce its daily detained population to under 41,000 and set funding levels that should have required ICE to reverse its detention system expansion and return the daily population to under 41,000.¹⁷ But by the end of 2019, ICE did the exact opposite: It *increased* its detention of immigrants and reported that it detained an average of over 50,000 people in detention each day.¹⁸ ICE has continued to expand its immigration detention system by employing a multi-year tactic of overspending appropriated funds and then demanding increased funding for the next year. This tactic has paid off: Since FY 2017, Congress has increased ICE's detention

operations budget by 23 percent to \$3.2 billion in 2019.¹⁹

Beyond these appropriated dollars, Congress has failed to restrict ICE's ability to shift money away from other DHS agencies, including the Federal Emergency Management Agency and the Coast Guard, to cover its overspending on detention.²⁰ As a result, ICE has expanded its detention system in blatant contradiction to congressional intent and undermined Congress's power of the purse and the separation of powers.

In February 2020, President Trump requested yet another massive increase in funding for ICE, asking Congress to spend \$10.4 billion on the agency in FY 2021. This request includes \$4.1 billion for custody operations,²¹ with the intent to expand ICE's detention system capacity to 60,000 people each day.²² ICE has sought to justify its request to

expand the immigration detention system based on plans to expand aggressive interior enforcement within the United States, double the use of family detention, apply more stringent application of parole criteria to people eligible for release from detention, and reenroll more non-citizen records in the National Crime Information Center (NCIC) database, which will result in more immigrants being referred to ICE through the criminal justice system.²³

The Trump Administration Has Expanded the Use of Private Prison Companies in the Immigration Detention System

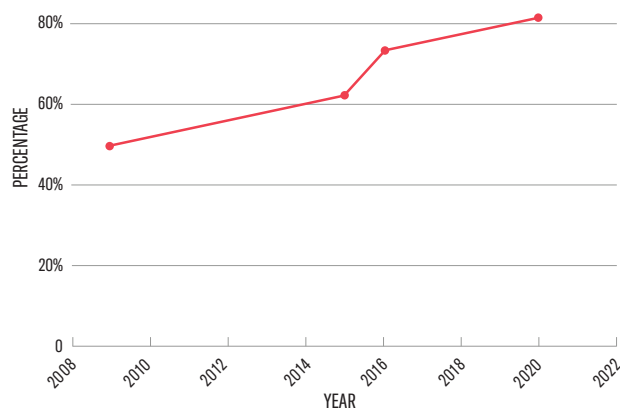
Over the last three decades, the federal government has largely built its immigration detention system by outsourcing to private prison companies, leading to a detention infrastructure run primarily by private corporations, with a minority of detention beds operated through inter-governmental contracts with local jails or directly by ICE. CoreCivic, Inc., can even trace its founding to the detention of immigrants: In 1983, the company originally known as the Corrections Corporation of America first opened for business by signing a deal with the Immigration and Naturalization Service – the precursor to ICE – to detain immigrants in Texas.²⁴

In the past 10 years, ICE has awarded a growing share of immigration detention beds to private prison companies (see Figure 3). In 2009, 49 percent of immigration detention beds were run by private prison companies. By 2015, private prison companies ran 62 percent of detention beds; private prison corporations ran 73 percent of detention beds by 2016.²⁵ At the same time, the overall revenues of private prison companies have risen as well (see Figure 4).

Today, CoreCivic and the GEO Group receive more than half of the private prison industry contracts for ICE detention.²⁶ In the past three years, contracts for ICE detention made up approximately

25 percent of revenue for both CoreCivic and the GEO Group.²⁷ In 2019, 29 percent of CoreCivic’s revenue came from ICE detention contracts, at a total of \$574 million.²⁸ Almost 29 percent of the GEO Group’s revenue came from ICE detention contracts in 2019, at a total of \$708 million in revenue.²⁹ The expansion of immigration detention under the Trump administration has largely benefited private prison companies. As of January 2020, 81 percent of people detained in ICE custody were held in facilities owned or managed by private prison corporations. As shown in Figure 5, private prison companies house 91 percent of all people held in detention centers that have opened under the Trump administration.

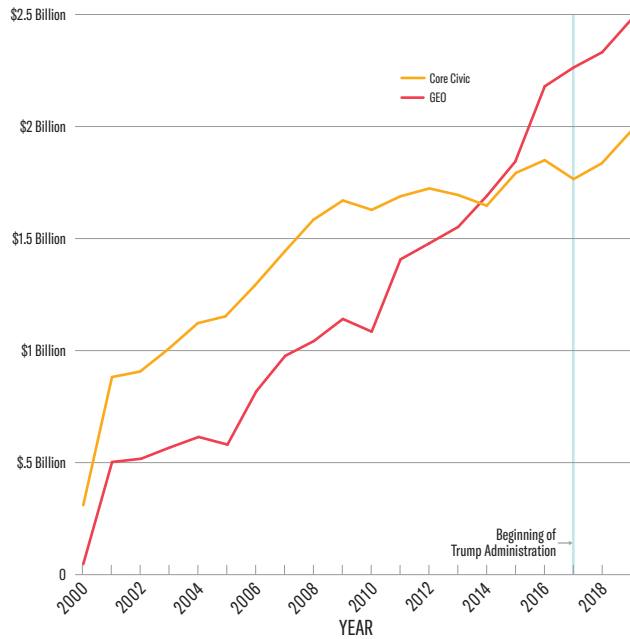
FIGURE 3
Percentage of Immigration Detention Beds Run by Private Prison Corporations



Source: ACLU and Grassroots Leadership, based on Immigration and Customs Enforcement data

FIGURE 4

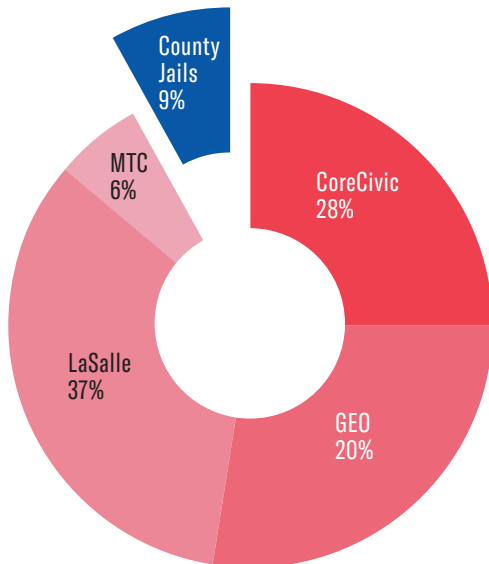
Growth of Annual Revenue for Prison Companies With Largest ICE Detention Contracts



Source: Securities and Exchange Commission; GEO and CoreCivic Annual Reports

FIGURE 5

New Immigration Detention Beds Operated by Private Prison Corporations



Source: Immigration and Customs Enforcement; CoreCivic, GEO, LaSalle, and MTC websites

Filling Empty Prison Beds: Immigration Detention as the Latest Chapter of Mass Incarceration

The most recent expansion of immigration detention is the latest chapter of mass incarceration in the United States. As reforms to the criminal legal system have reduced the number of prisoners held in that system nationwide, prison corporations have found a new source of income: immigrants.

Most of the largest immigration detention facilities that have come online under the Trump administration share similar characteristics. A typical facility was likely built sometime in the last 30 years, is operated by a private prison company, and until recently profited from locking up prisoners shipped in from other jurisdictions.

This is the story of the La Palma Correctional Center in Eloy, Arizona. Faced with overpopulation in its state prisons, in 2006 California began to send its prisoners out of state, including to Arizona. But as a result of criminal justice reforms adopted in the last decade, California eliminated its use of out-of-state prisons by 2019.³⁰ After California announced plans to discontinue use of La Palma to house its state prisoners, officials for CoreCivic, Inc., which was operating the prison, announced that it had secured a new contract with ICE to detain people in the facility.³¹ LaSalle Corrections, another private prison company, did the same after California pulled its prisoners from the Tallahatchie County Correctional Facility in Mississippi.³²

A similar story has taken place in Louisiana and Texas. For over 25 years, Louisiana has held the dubious distinction as the incarceration capital of the world, with the highest incarceration rate of any U.S. state. After a federal court ordered the state to reduce overcrowding in its prisons the 1990s, the state decided to encourage local sheriffs to build new prisons, instead of reducing incarceration. Many local sheriffs allowed private prison companies to build and manage prisons in their parishes in exchange for a small fraction of

the profit.³³ By 2014, the total number of people incarcerated in Louisiana state custody topped 40,500.³⁴ After Louisiana enacted sentencing reform in 2017, the incarcerated population dropped by almost 9,000 people to 31,756 in July 2019.³⁵ As of January 2020, private prison companies in Louisiana have secured new contracts to detain immigrants in over 6,000 of those beds since the Trump administration took office.³⁶

In Texas, prisons and detention centers that have been shut down for years now lock up immigrants. In December 2019, ICE announced that it would soon open yet another immigration detention center in the state: Bluebonnet Detention Center in Anson. The prison, built a decade ago, sat empty after the number of prisoners in Texas began to fall, making the facility obsolete before it could open. Now operated by the Management and Training Corporation (MTC), ICE and MTC have signed a five-year contract to detain 1,000 immigrants at any given time.³⁷ The Limestone County Detention Center, a 1,000-bed detention center, closed in 2013 after ICE stopped using the facility.³⁸ The facility, newly operated by LaSalle Corrections, later became one of the first facilities to sign a new contract for federal detainees under the Trump administration.³⁹

In its push to expand immigration detention, the Trump administration has also reopened facilities with troubling histories of mistreatment and abuse. The Adams County Detention Center in Natchez, Mississippi, operated by CoreCivic, was most recently a federal Bureau of Prisons (BOP) facility that held immigrant prisoners serving criminal sentences. In 2012, a riot at the facility linked to concerns with inadequate medical care led to the death of a prison officer and the injury of 20 prisoners. In 2013, at least five prisoners died at Adams as a result of substandard care.⁴⁰ An audit conducted by the Department of Justice's Office of Inspector General concluded that CoreCivic had failed to maintain adequate staffing levels and provide a safe and secure environment at the facility.⁴¹ In May 2019, the BOP announced that it would end its contract at Adams County.⁴² One

month later, ICE quietly began to send immigrants to the facility.⁴³

Similarly, the Trump administration has signed a contract with MTC to send immigrants to the El Valle Detention Facility in Raymondville, Texas, the site of the former Willacy County Correctional Center. The Willacy County Correctional Center had served as an ICE detention facility under MTC between 2006 and 2011, when ICE ended its contract after reports of substandard conditions and sexual abuse. These reports prompted DHS to initiate 13 criminal investigations into staff misconduct at the facility,⁴⁴ resulting in at least one guilty plea to sexual abuse of a female immigrant by a contract security officer.⁴⁵ After ICE terminated its contract, the BOP used the facility from 2011 to 2015 for immigrants in its custody. Conditions did not improve over those years, eventually resulting in a riot, which nearly destroyed the facility, prompted by mounting complaints about poor medical care, overuse of solitary confinement, and substandard conditions.⁴⁶ The BOP declined to renew the contract with MTC for the Willacy County Correctional Center shortly after the riot, and it was closed since early 2015 until it re-opened in the summer of 2018 as a new immigration detention center.

Impossible Odds: New Detention Centers in Justice-Free Zones

No Lawyers Available: The Growth of Immigration Detention in Remote Locations

Immigrants in removal proceedings are not guaranteed a lawyer at the government's expense; they must secure legal representation at their own expense, find pro bono representation, or navigate the immigration court system on their own. Immigrants in detention must often do this without financial resources, limited to lawyers who agree to visit them in detention and hampered by restricted access to telephones (and no access to the internet or email) to find and communicate with counsel. A recent scholarly study found that 86 percent of detained immigrants lack counsel, compared to 34 percent of non-detained immigrants.⁴⁷ Representation by counsel, however, is crucial to the chances of success in immigration court: Detained immigrants represented by counsel obtain successful outcomes in 21 percent of cases nationwide, more than 10 times the rate of their unrepresented counterparts (2 percent).⁴⁸

Immigration detention growth under the Trump administration has taken place in some of the most remote, isolated locations in the country. Local communities have few organizations able to support or provide legal services to immigrants in detention. Immigration lawyers are few and far between: The availability of immigration attorneys within 100 miles of new detention centers is among the lowest of all detention facilities nationwide.

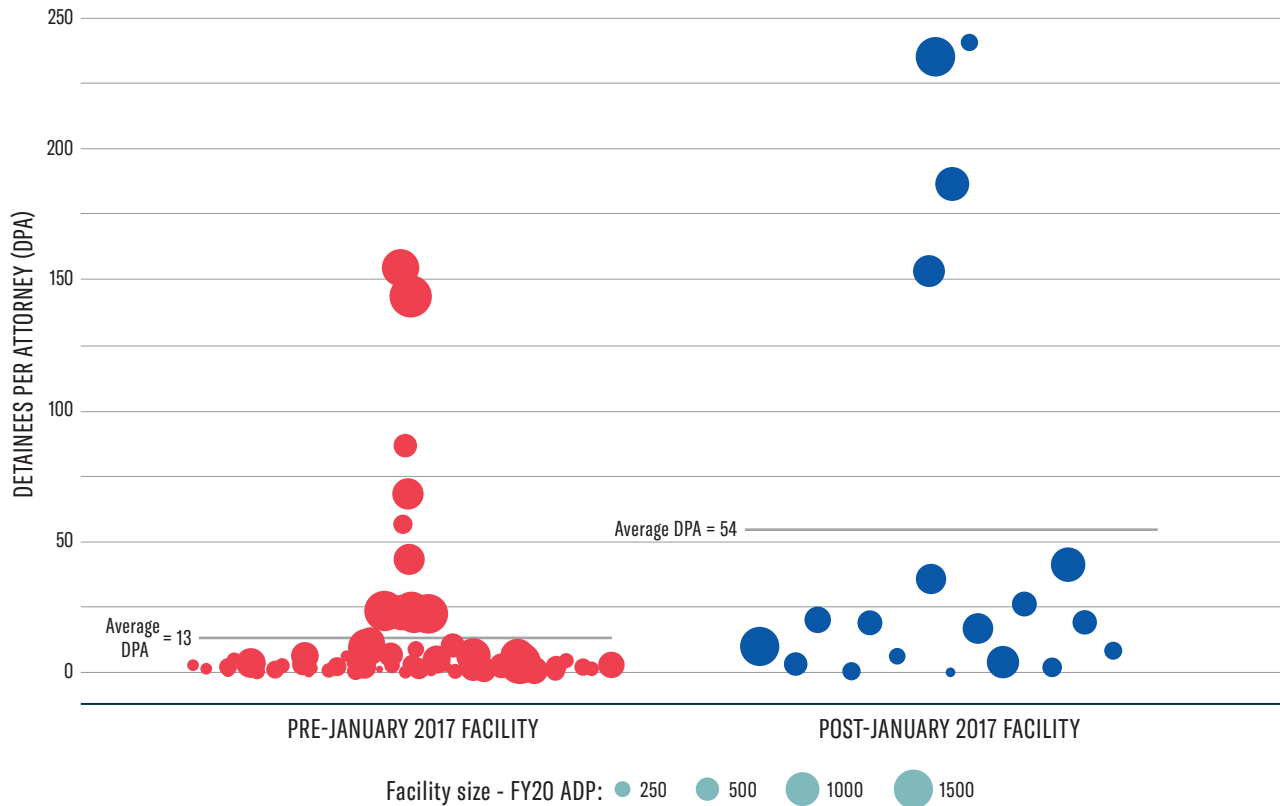
Access to legal representation from within ICE detention is a pre-existing problem made worse by the Trump administration's expansion in remote

areas where attorneys are sparse and with fewer and less resourced legal service organizations available to immigrants.⁴⁹ Detention centers located nearest to urban areas offer the greatest access because attorneys, like the general population, are densely concentrated near cities. People in detention centers opened under the Trump administration thus have much more limited access to counsel than people detained in facilities opened before 2017.

Based on an analysis of the geographic distribution of attorneys registered with the American Immigration Lawyers Association (AILA) as having expertise in deportation defense (see Figure 6), we found that on average, there are four times as many immigration attorneys within a 100-mile radius of people detained in pre-Trump facilities than in detention centers opened after January 2017. Four of the five ICE detention centers with the fewest local attorneys available opened under the Trump administration (See Table 2 for listing of the 10 immigrant detention centers with the lowest immigration attorney availability). The Winn Correctional Center in Winnfield, Louisiana, has one immigration attorney within 100 miles for every 234 people detained at the facility. The Richwood Correctional Center in Monroe, Louisiana, has one immigration attorney within 100 miles for every 186 people detained at the facility. The Jackson Parish Correctional Center has one immigration attorney for every 153 people detained at the facility. The number of attorneys registered with AILA as providing deportation defense is likely a significant overestimate of the number of attorneys who actually accept detained clients, given the time and expense of visiting and communicating with detained people.

FIGURE 6

Distribution of Attorney Access Among ICE Detention Centers: Immigration Attorneys Available Within 100 Miles of Facility



Source: Immigration and Customs Enforcement; American Immigration Lawyers Association

Trapped in Detention: The Denial of Parole at New ICE Facilities

Asylum seekers in these new facilities also face significant challenges in gaining release from detention during adjudication of their claims. Under U.S. immigration law, asylum seekers who have been found to have a credible fear of persecution in their home countries by an asylum officer are eligible to be released from detention under parole if they do not pose a flight risk or a danger to the community.⁵⁰ A 2009 agency directive instructed immigration agents to follow this law and release asylum seekers who were eligible for parole if they

“[The ICE officers] told me they would deport me if I didn’t sign a paper in English. It turned out to be that I gave up my right to parole. This happened to everyone in my group.”
 –Eduardo K., detained at Winn Correctional Center

could establish their individual identity. Between 2011 and 2013, the ICE Field Offices paroled 92 percent of arriving asylum seekers under this directive.⁵¹

Since the Trump administration came into office in 2017, ICE officers have effectively rescinded the

“I was told that no one gets parole. No one gets out unless you are pregnant or with cancer in the fourth stage.”

–Mason H., detained
at Winn Correctional Center

2009 policy in jurisdictions around the country. ICE’s New Orleans Field Office, which oversees detention in Alabama, Arkansas, Louisiana, Mississippi, and Tennessee, detains over 70 percent of people in facilities that have opened under the Trump administration.⁵² The New Orleans Field Office has the lowest release rate on parole in the

country: In FY 2018, the office granted parole in only 1.5 percent in all cases. See Table 3 for parole denial rates at the new detention facilities.

As a result of a lawsuit brought by the ACLU and its partners, in 2019 a federal court ordered ICE to restore parole and access to parole in several regions, including the New Orleans Field Office.⁵³ However, as of the end of 2019, winning parole in the New Orleans Field Office remained virtually impossible. According to ICE’s own statistics, the New Orleans Field Office granted parole to only 10 out of 1,213 applications for parole between March and December 2019, a denial rate of 99 percent (see also Table 3).

TABLE 2

**ICE Detention Centers With Lowest Immigration Attorney Availability:
The 10 Worst Facilities**

Name of Facility	Location	Nearest Metropolitan Area	Distance to Metro Area (in miles)	Facility Opened After January 2017?	Number of Detained People per Immigration Attorney Within 100-Mile Radius	Average Daily Population As of January 2020
Bossier Parish Correctional Center*	Plain Dealing, LA	Baton Rouge, LA	271	Yes	240	240
Winn Correctional Center	Winnfield, LA	Baton Rouge, LA	178	Yes	234	1,406
Richwood Correctional Center	Monroe, LA	Jackson, MS	120	Yes	186	931
LaSalle ICE Processing Center	Jena, LA	Baton Rouge, LA	178	No	154	1,230
Jackson Parish Correctional Center	Jonesboro, LA	Jackson, MS	166	Yes	153	918
Stewart Detention Center	Lumpkin, GA	Atlanta, GA	143	No	143	1,573
Rio Grande Detention Center	Laredo, TX	San Antonio, TX	157	No	86	431
Irwin County Detention Center	Ocilla, GA	Atlanta, GA	188	No	68	814
Laredo Processing Center	Laredo, TX	San Antonio, TX	143	No	56	281
Pine Prairie ICE Processing Center	Pine Prairie, LA	Baton Rouge, LA	100	No	43	814

Source: Immigration and Customs Enforcement; American Immigration Lawyers Association

*As of January 2020, ICE discontinued use of the Bossier Parish Correctional Center.⁵⁴

TABLE 3

Parole Denial Rates at New Detention Facilities, March-December 2019

Facility	ICE Field Office	Parole Denial Rate of the Assigned Field Office	Average Daily Population as of December 2019
Winn Correctional Center	New Orleans	99%	1,406
Adams County Detention Center	New Orleans	99%	1,073
Richwood Correctional Center	New Orleans	99%	931
Jackson Parish Correctional Center	New Orleans	99%	918
South Louisiana Detention Center	New Orleans	99%	753
Catahoula Correctional Center	New Orleans	99%	498
River Correctional Center	New Orleans	99%	495
Tallahatchie County Correctional Facility	New Orleans	99%	463
Bossier Parish Correctional Center**	New Orleans	99%	240
Nye County Detention Center	Salt Lake City	92%	77
Caroline Detention Facility	Washington	87%	268
La Palma Correctional Center	Phoenix	76%	1,798
D. Ray James Detention Center	Atlanta	20%	806
Robert A. Deyton Detention Facility	Atlanta	20%	28
El Valle Detention Facility	San Antonio ⁵⁵	6%	784
Montgomery ICE Processing Center	Houston	5%	899
Limestone County Detention Center	Dallas	3%	303
Okmulgee County Jail	Dallas	3%	228
Kay County Justice Facility	Dallas	3%	99
Wyatt Detention Center	Boston	0%	118

Source: Immigration and Customs Enforcement, as provided to ACLU

*The data reported here relates to applications filed and parole grant rates for the entire jurisdiction of each field office, which includes all detention facilities within the field office territory.

**As of January 2020, ICE discontinued use of the Bossier Parish Correctional Center.⁵⁶

The Denial of Bond at New Detention Centers

Immigration law authorizes both DHS and immigration judges to release people from detention while their cases are heard if their release would not pose a danger to the community and if they are likely to appear for future proceedings. ICE typically makes an initial custody determination for each detained person and decides whether or not to release the person on bond, recognizance, or other conditions. If release is not granted, a detained person can then ask an immigration judge to review ICE's decision in a bond hearing.⁵⁷

In April 2019, Attorney General William Barr issued a decision declaring that immigration judges do not have the authority to conduct bond hearings for asylum seekers who have demonstrated a credible fear of persecution or torture.⁵⁸ As a result of a lawsuit brought by the ACLU and its partners, a federal court blocked the policy, allowing asylum seekers to continue to seek release on bond.⁵⁹

On average, immigration judges nationwide denied bond in 50.2 percent of custody hearings in FY 2019. Immigrants detained at new facilities opened under the Trump administration, however, have faced relatively steeper odds of gaining release on

bond. In FY 2019, immigration judges denied bond at rates higher than the national average at most of the 20 largest new detention facilities (see Table 4). At the River Correctional Facility in Ferriday, Louisiana, immigration judges denied bond in 89 percent of its custody hearings in FY 2019. At the

Winn Correctional Center, immigration judges denied bond 85 percent of the time, and at the Richwood Correctional Center, immigration judges denied bond 79 percent of the time (see also Table 4).

TABLE 4

Bond Denial Rates at New ICE Detention Centers, FY 2019

Facility	Hearing Location	Court	FY 2019 Bond Denial Rate
Adams County Detention Center	Adams County Correctional Center	New York, NY and Jena, LA	100%*
Bossier Parish Correctional Center**	Bossier Medium Facility	Jena, LA	89%
River Correctional Center	River Correctional Facility	Jena, LA	89%
Winn Correctional Center	Winn Correctional Center	Chaparral, NM	85%
Richwood Correctional Center	Richwood Correctional Center	Batavia, NY	79%
D. Ray James Detention Center	Folkston IPC - Annex	Atlanta, GA	74%
Catahoula Correctional Center	LaSalle Immigration Court*	Jena, LA	72%
Kay County Justice Facility	El Paso Detained Docket*	El Paso, TX	67%
Jackson Parish Correctional Center	Jackson Parish Correctional Center	Bloomington, MN	64%
Robert A. Deyton Detention Facility	Atlanta Detained Docket	Atlanta, GA	63%
Okmulgee County Jail	Dallas Detained Docket*	Dallas, TX	62%
Montgomery ICE Processing Center	Conroe Immigration Court	Conroe, TX	59%
Wyatt Detention Center	Boston Detained Docket*	Boston, MA	56%
All Detained Cases Nationwide			52%
La Palma Correctional Center	La Palma Correctional Center	Eloy and Tucson, AZ	49%
Limestone County Detention Center	San Antonio Immigration Court*	San Antonio, TX	48%
Nye County Detention Center	Nye County	Las Vegas, NV	46%
Caroline Detention Facility	Arlington Immigration Court–Detained*	Arlington, VA	36%
El Valle Detention Facility	Los Fresnos Immigration Court*	Los Fresnos, TX	35%
South Louisiana Detention Center	South Louisiana Correctional Center	Guaynabo, PR	31%
Tallahatchie County Correctional Facility	N/A	N/A	N/A

Source: Transactional Records Access Clearinghouse (TRAC); Executive Office for Immigration Review (EOIR)

*Denial rate at Adams County was two of two bond cases.

**No facility-specific data available; based on data for applicable immigration court

***As of January 2020, ICE discontinued use of the Bossier Parish Correctional Center.⁵⁰

Elevated Asylum Denial Rates at New Detention Centers

Asylum seekers in new facilities face virtually insurmountable odds to defend against deportation and win protection in their cases (as shown in Table 5). In FY 2019, people detained at 13 of the 20 largest new detention facilities faced asylum denial rates in excess of the national average. In FY 2019, immigration judges denied every single asylum claim for asylum seekers at four of the 20 largest detention facilities opened under the Trump administration. At almost half of these 20 largest new facilities, immigration judges denied asylum claims over 90 percent of the time. In contrast, immigration courts nationwide denied asylum in 70 percent of all cases and 76 percent of detained cases.

Accounts From Those Trapped in Detention

At every detention center we visited, detained people expressed profound frustration and fear about their circumstances. Many people in detention had traveled to the United States to seek safety, and they were bewildered to find themselves isolated behind prison walls, facing a legal system that had been turned against them.

The people we spoke with voiced profound despair at their inability to access legal counsel or the most basic information about their cases, or to be considered for release. Asylum seekers told us how officers had denied the existence of a federal court order to grant parole, told them they could not apply for parole, or simply stated that parole is granted only to people who are dying. They voiced confusion and frustration about the lack of materials and access to attorneys and basic information about immigration law. Many expressed fear of what would happen if they lost their cases and were sent back to their home countries.

“On the plane [from Texas] we were handcuffed and told we were going to Louisiana. Everyone was crying because [we had heard] that Louisiana is a bad place for migrants.”

—Rosa F., detained at
Jackson Parish Correctional Center

Frustration Over the Lack of Access to Due Process or Counsel

Most of the people we met at the five detention centers were navigating the immigration detention and legal system alone, without legal counsel. Even at the prisons where legal service providers offered legal orientation programming, detained people described their difficulty actually connecting with lawyers. During a tour of Tallahatchie County Correctional Facility, ICE officers told us that a legal service organization in Memphis provided orientation sessions whenever a new group of people arrived at the prison. Few of the people who spoke to investigators, however, could recall participating in such programming.⁶¹ A Honduran asylum seeker who had been at La Palma Correctional Center for over a month told us that he had never been called to participate in a legal orientation presentation conducted by a local legal service provider.⁶² Immigrants at all the facilities we visited described trying in vain to contact legal service providers by phone: Either their calls didn't go through or the organization did not answer.⁶³ “What can I expect of fighting a case when I can't get a simple call?” asked an immigrant detained at La Palma.⁶⁴

Most people were left to figure out on their own how to apply for parole or request a bond, or what to expect in the asylum process, based on limited information they were able to glean during their credible fear interviews. Often, the primary source of information about what they had to do to win freedom and protection came from their jailers. The information detained people said they received from ICE officers was often confusing, misleading, and in some instances appeared to constitute intentional violations of immigration law.

TABLE 5

Asylum Denial Rates at the 20 Largest New ICE Detention Centers, FY 2019

Facility	Hearing Location	Court	FY 2019 Asylum Denial Rate
Adams County Detention Center	Adams County Correctional Center	New York, NY and Jena, LA	100%
D. Ray James Detention Facility	Folkston IPC - Annex	Atlanta, GA	100%
South Louisiana Detention Center	South Louisiana Correctional Center	Guaynabo, PR	100%
Kay County Justice Facility	El Paso Detained Docket*	El Paso, TX	100%
Catahoula Correctional Center	LaSalle Immigration Court*	Jena, LA	95%
River Correctional Center	River Correctional Facility	Jena, LA	94%
Robert A. Deyton Detention Facility	Atlanta Detained Docket	Atlanta, GA	92%
Bossier Parish Correctional Center**	Bossier Medium Facility	Jena, LA	91%
Montgomery ICE Processing Center	Conroe Immigration Court	Conroe, TX	90%
El Valle Detention Facility	Los Fresnos Immigration Court*	Los Fresnos, TX	89%
Richwood Correctional Center	Richwood Correctional Center	Batavia, NY	85%
La Palma Correctional Center	La Palma Correctional Center	Eloy and Tucson, AZ	83%
Wyatt Detention Center	Boston Detained Docket*	Boston, MA	81%
All Detained Cases (National)			76%
Okmulgee County Jail	Dallas Detained Docket*	Dallas, TX	74%
All Cases (National)			70%
Caroline Detention Facility	Arlington Immigration Court–Detained*	Arlington, VA	69%
Jackson Parish Correctional Center	Jackson Parish Correctional Center	Bloomington, MN	68%
Limestone County Detention Center	San Antonio Immigration Court*	San Antonio, TX	68%
Winn Correctional Center	Winn Correctional Center	Chaparral, NM	55%
Nye County Detention Center	Nye County	Las Vegas, NV	N/A
Tallahatchie County Correctional Facility	N/A	N/A	N/A

Source: Transactional Records Access Clearinghouse (TRAC); Executive Office for Immigration Review (EOIR)

*No facility-specific data available; based on data for applicable immigration court

**As of January 2020, ICE discontinued use of the Bossier Parish Correctional Center.⁶⁵

Nonetheless, everyone knew how high the stakes were as they faced a seemingly hopeless system alone. “Without having knowledge, we’ll go directly to the slaughterhouse,” a man detained at Richwood Correctional Center told us.⁶⁶

ICE Continues to Block Access to Parole Despite Federal Court Ruling

As described above, asylum seekers who have been found to have a credible fear of persecution in

“Without having knowledge, we’ll go directly to the slaughterhouse.”

–*Sherman T., detained at Richwood Correctional Center*

their home countries by an asylum officer face high parole denial rates. From March to December 2019, the New Orleans Field Office denied 99 percent of applications for release on parole, even after a federal court ordered ICE to reverse its practice. Detained asylum seekers told us that ICE officers have blocked them from parole with extreme measures: Officers have denied the existence of the court’s parole order to detained asylum seekers, have told asylum seekers that they cannot apply for parole, or have simply stated that parole is granted only to people who are dying.

Mateo R., a Cuban man who said he left behind a spouse, three children, and a job repairing bikes to seek asylum in the United States because he was persecuted by authorities, described how he had received written notice that he had been granted parole, but three days later, received another written notice that his parole had been revoked. ICE officers then transferred him to a detention center in Louisiana, telling him to ask an immigration judge for parole – a legally impossible request, as only ICE can grant parole. Once he arrived in Louisiana, he was told parole was not available. When ICE officers posted information about the federal court ruling regarding asylum seekers’ right to parole, he said, they told Mateo and others they could not apply.⁶⁷

Alejandro D. passed his credible fear interview in August 2019 and requested parole the first week of September – soon after the federal court ordered ICE to implement its parole guidance. He received a parole denial in mid-October stating he was considered a flight risk. Alejandro told us he learned about the court ruling while watching television news at the Jackson Parish Correctional

Rosa F.

Rosa F., a mother of two and nurse who cared for elderly hospital patients in Cuba, told us she had fled to the United States after being detained and beaten in police custody. She eventually traveled through Mexico and, after a three-month wait at a church, was allowed to present herself at a border station in August 2019 and request asylum. She first was detained in El Paso, Texas, and passed her credible fear interview. She said she tried to get advice about what came next, but was handcuffed and put on a plane and told she was going to Louisiana. “Everyone was crying because everyone said Louisiana is a bad place for migrants,” she said. “All the papers for credible fear were in English and I didn’t understand them,” she noted, and ICE denied her request for parole. “ICE said there is no parole in Louisiana.” She was frustrated that she could not get information about her case from ICE detention officers. “Every 45 days they change officers,” she said. “So they don’t know what they are doing. We write to them, we don’t see them.”⁶⁸

Center on October 11. After that, ICE posted notices on the wall about the ruling. Alejandro decided to try again. He submitted another parole request on October 15, including affidavits, tax returns, and proof of permanent resident status from an uncle and cousin who would host him as sponsors. He had not received a response by the time he spoke with us more than a month later. ICE officers, he said, told him he could keep asking about parole as many times as he wanted but “it wouldn’t do any good.”

Eduardo K. passed his credible fear interview while he was detained at Tallahatchie County Correctional Facility. He said he received paperwork for parole, including a paper in English that ICE officers told him and other asylum seekers that they needed to sign to avoid deportation. “It turned out to be that I gave up my right to parole,” he said during an interview at Winn Correctional Center. “This happened to everyone in my group.”⁶⁹

“When I was denied parole, it felt like I had been diagnosed with a terminal illness,” said a Cuban asylum seeker at Winn Correctional Center in Louisiana. “We are looking for liberty. We left our country seeking freedom, but we are mistreated here.”⁷⁰

No Parole “Unless I Am Dying”

We received multiple reports that ICE officers had informed asylum seekers that parole was simply not available, or that it was granted only to people who were dying or pregnant. Jonathan C., a Cuban asylum seeker at La Palma Correctional Center, told us that he was unsure whether he had even had his credible fear interview, but that “the ICE officer told me that I have no right for parole unless I am dying – his exact words.”⁷¹ A man at Winn Correctional Center told us: “I was told that there is no parole; that no one gets out unless you are pregnant or with cancer in the fourth stage.”⁷²

At Richwood Correctional Center in Louisiana, several men said the only information they received about parole was a denial letter; others had received information in a language they didn’t understand.⁷³ Some people were denied even after submitting information about sponsors ready to take them in. Many said their denials indicated that ICE considered the person a flight risk, even though the government had found they had valid claims to asylum.⁷⁴

One man, who had passed his credible fear interview more than seven months earlier, said he had two lawful permanent resident sponsors waiting to take him in if he were released. He told us that when he first arrived at Richwood, he was told there was “no process” to be released. Later, he said, he was told he could apply for parole, but that “parole is not granted in Louisiana.”⁷⁵ He told us he had submitted seven parole requests, and all had been denied.

Bond Out of Reach

Immigrants at several facilities we visited said bonds seemed to be as impossible to win as parole was, or were set so high people had no hope of paying them. People reported bonds being set from \$8,000 to as high as \$30,000.⁷⁶ Many had waited months to have a bond hearing scheduled.

“In December it will be my eighth month here,” Marta P. told us at Jackson Parish Correctional Center. “When they denied my bond, I thought I

was going to die. I am asking for asylum because I can’t return to my country. They didn’t give me bond because I have no family here. I have my family and they are all in a work camp in Cuba. They have no rights. That is why I have no family here.”⁷⁷ Juan L. had been detained for nine months – more than five months since he had passed his credible fear interviews – when he told us that his attorney had asked for a bond hearing twice, but ICE still had not scheduled his court date. He said an ICE officer had told him his case went to the “bottom of the stack.”⁷⁸

Ethan A., a 42-year-old man from Guatemala who had lived in the United States since 2006, was detained by ICE in August 2019 during a raid of the Peco Foods chicken factory in Mississippi, where he had worked for 11 years. When we spoke to him at Winn Correctional Center more than three months later, he was still waiting for a bond hearing. He had been placed in a high-security unit, even though he had no criminal record, and could not afford to call his wife or mother.⁷⁹

Lack of Case Information From ICE Officers

Many people described other ways that ICE officers failed to provide them with critical information necessary for a chance at release. “They treat us like animals,” one man said about ICE officers at Winn. “Or they ignore us; they do not answer our questions.”⁸⁰ “I still don’t know who my ICE officer is after six months,” said another.⁸¹ Immigrants also faced challenges receiving consistent communication from ICE officers regarding their cases, as ICE officers in several of the new detention facilities have been placed on detail for only 45 days at a time – hardly enough time to provide continuity for cases. Officials at Jackson Parish noted that ICE officers on detail had only recently finished their orientation, and their 45-day detail in Louisiana was their first assignment, raising concerns about the quality of information provided to people in detention.⁸²

No Books, No Immigration Files: Deficient Law Libraries

People in immigration detention face serious difficulties in finding legal representation: As one recent study showed, only 14 percent of people in detention nationwide are represented by counsel.⁸³ For immigrants without counsel, access to a detention facility’s law library may be the only source of information or opportunity to attempt to understand the legal standards relevant to their case. We found serious deficiencies with the law libraries at all five facilities we visited.

According to ICE’s own detention standards, law libraries must be “large enough to provide reasonable access to all detainees who request its use,” have an “adequate number of computers and printers to support the detainee population,”⁸⁴ and contain a designated list of legal reference materials, including immigration statutes and regulations, country conditions information, and practice manuals on immigration law.⁸⁵ None of the law libraries we visited had materials from the designated list of legal reference materials available in print. The law library that we visited at La Palma consisted of a small room with one computer and printer located in a housing unit, with no books or legal materials available at all. We were unable to locate any legal resources, materials, or programs available on the computer.⁸⁶ At Richwood, the law library had three computers, with no internet access, available for over 1,100 people. The only legal books available were Louisiana state statutes – of little use to people seeking information regarding the federal immigration system – and no books regarding immigration law.⁸⁷ Jackson Parish’s law library had only two computers – neither with internet access – available for over 1,000 immigrants.

People at all detention facilities we visited reported nearly insurmountable challenges to using the law library. Although detention centers are required to provide “meaningful access” of no less than five hours a week to law libraries and legal materials,

Carlos C.

Carlos C., a 23-year-old man who told us he worked making ice cream in a factory in Cuba, decided to come to the United States to join his family after facing severe persecution and torture. In March 2019, after traveling through Mexico, he presented himself to Border Patrol officers and requested political asylum at the Veterans International Bridge between Matamoros, Mexico, and Brownsville, Texas. Immigration officers immediately took Carlos into custody. He was put in shackles and handcuffs, and he was taken to the Tallahatchie County Correctional Facility in Mississippi, where he passed his credible fear interview.

Carlos received information about how to apply for parole and began to try to collect the documents he needed – a task possible only by mail. But three days after his credible fear finding, he said, Carlos received an automatic parole denial. “I was told I could ask again in Louisiana,” he told us in November. “In Louisiana, I have not heard of a single parole since May. We are told you only get parole with terminal illness.” When he gave an ICE officer a sponsor letter to request parole several weeks after arriving at Winn Correctional Center, the officer told him that Louisiana is not giving anyone parole and handed back his documents.

Carlos worked as a server in the Winn prison kitchen. He said he was supposed to receive one dollar per day but that he had gone for weeks without getting paid. Frustrated with his situation, he called out to a reporter visiting from the local Fox News affiliate who was visiting the facility.⁸⁸ In response, ICE put him in solitary confinement for eight days. Carlos reported that officers try to maintain control of the facility by threatening to report people to ICE, who are afraid that any complaints will affect their immigration cases. “I feel lonely and hopeless,” he said.⁸⁹

detained people reported that this was virtually impossible at all facilities. One man detained at Winn reported having sent over 15 requests to use the law library in the last six months, but had never been given a visit.⁹⁰ Most people at Richwood said they had been denied requests to use the prison’s library to research their cases. Those who had been allowed to visit it found a lack of immigration materials, and books only in English.⁹¹ Two people detained at La Palma reported that they had requested specific legal materials, as provided for in the ICE detention standards, but had never received them.⁹²

Abuse and Due Process Violations at the Border

The trauma inflicted on immigrants in detention begins well before their arrival in ICE custody. At the U.S.-Mexico border, immigrants have endured separation from their children and family members, prolonged detention in overcrowded outdoor detention facilities in harsh weather conditions, and abuse by Border Patrol agents.⁹³ Those taken into custody at the border are first detained by Customs and Border Protection (CBP), where conditions are notoriously harsh,⁹⁴ including extreme overcrowding, lack of medical care, lack of adequate food and water, poor sanitation, and detention beyond limits set on time in CBP custody. Sleeping conditions are extremely poor: CBP detention centers lack beds, even though the agency's detention standards anticipate that people will be detained there for up to 72 hours and time in custody frequently exceeds that limit, and lights are kept on in the holding cells at all times. As a result of litigation brought by the ACLU of Arizona and partner organizations, a federal judge in Arizona found conditions of confinement in CBP holding cells in Border Patrol's Tucson, Arizona, sector unconstitutional in February 2020.⁹⁵ CBP detention centers also do not permit in-person attorney access or provide for regular access to telephones to call attorneys or others. The Trump administration has implemented new programs forcing some people to undergo the initial asylum screening in CBP detention, without meaningful attorney access.

Several people we interviewed arrived in ICE detention already reeling from violations experienced in CBP custody at the border, before they were shackled and put on buses and planes to be transferred to ICE custody. These people remained visibly shaken from their experiences at the border.

Ben G.

Ben G. is a 35-year-old husband and father of four. He said that in Nicaragua, he worked as a veterinarian, but was targeted by police after supporting demonstrators. After he helped his family escape, police beat him and tortured him.

In April 2019, Ben traveled through Central America to seek asylum in the United States. He decided to try to cross the border at McAllen, Texas, after seeing other migrants kidnapped in Reynosa, Mexico. After he was met by agents, he requested asylum. An immigration officer in McAllen took the documents that he had brought with him in support of his claim, and Ben believes the officer destroyed this evidence. Ben was taken in shackles and chains to an hielera — one of the frigid and crowded holding cells used by CBP. Although policy states that people should not be held in these cells for more than 72 hours, he was locked up in CBP custody for 31 days. “For 31 days, I had no shower, no toothbrush. I have diabetes and was constipated for 30 days, with blood,” Ben recalled.

After Ben was transferred to ICE custody, he continued to face unacceptable conditions. He said that at Winn, he quickly learned that violent officers face no consequences. He said one officer hit

him as he was shaving in the bathroom. Ben asked a supervisor for help, who reviewed the surveillance video and said only that it was true, doing nothing further.

Ben is still fighting his case for asylum, but he has no lawyer. He passed his credible fear interview, the initial asylum screening, but said he was told he could not get parole and that he had to “apply to an immigration judge” to be released. He was denied bond at an immigration court hearing. Although he thinks Winn has a law library, he has never seen it. He has sent about 15 requests to visit the law library in the last five months, but has never received a response. “I am in anguish because I don’t know if I will succeed. I am afraid of deportation.”⁹⁶

Marta P.

Before Marta P. left Cuba, she taught kindergarten at a local school. She said she decided to flee for her life after seeing her family forced into work camps. After Marta made her way through Mexico to the United States, Border Patrol agents placed her in one of the frigid hieleras, or holding cells, for two months, even though the Border Patrol should only hold immigrants for no longer than 72 hours. “There were more than 30 people in a very small room. They were stuffing us in. The bathroom was in the same cell as the food. We spent 15 days in the same cell, sleeping without blankets on the floor,” said Marta. “When they denied my bond, I thought I was going to die. They denied my bond because I have no family here. But my entire family is imprisoned in a work camp in Cuba, and they have no rights.”⁹⁷

Jacob D.

Jacob D., a Venezuelan student who said he came to the United States in search of asylum, was detained after entering without inspection and turning himself in to the Border Patrol. He was coming to reunite with his mother, who had arrived seeking asylum two years earlier, and an aunt, who had lived in the United States for 15 years and was waiting to take him in when he was released. Immigration authorities detained him for a month and a half, first at the Border Patrol station in Nogales, Arizona, then at an ICE detention center in Florence, Arizona, before he arrived at La Palma. The first 20 minutes of his credible fear interview were in English, a language he does not speak, before another officer arrived to interpret. He had not yet received the results of his interview when he met with researchers, but told us that an officer had told him parole was not being given. While he thought he might have received a charging document, he could not read other documents he had received from ICE that were printed only in English. He told us that the worst part of detention was the “uncertainty of not knowing what is happening because no one tells you anything.”

Unsafe Conditions: Health and Safety of People in Detention at Risk

Our investigation uncovered new evidence that ICE and detention center operators are endangering the health and safety of thousands of people locked up in the immigration detention system, particularly in new facilities. During the course of our investigation, we spoke to 150 people detained at five new detention centers, and we conducted in-depth tours and questioning of staff at each facility. What we learned from detained people was deeply disturbing: stories of death in solitary confinement units, people with disabilities locked away from view and given sedatives during a facility inspection, excessive use of force by officers, and the struggle to bathe without soap for over a month.

We also found significant causes for concern during our tours of detention centers and interviews with staff. We learned that two of the five detention centers we investigated had no mental health staff at all on site – including Richwood Correctional Center, where Roylan Hernandez Diaz, an asylum seeker from Cuba, had died by suicide only a few weeks before our visit. We discovered that the only doctor on staff at Winn Correctional Center had his license suspended twice before – once at an Indian health services facility and another time at the very same facility when it had housed Louisiana state prisoners.

In order to better understand the most extreme impacts of conditions of confinement in immigration detention, we also combed press reports and publicly available government documents to conduct an updated analysis of deaths in immigration detention since 2017. We found ICE has weakened its already insufficient investigations

and oversight of fatal failures while an intensifying pattern of deaths by suicide has emerged, along with indications that neglectful medical care is still contributing to deaths.

Deaths in Detention, 2017-Present

Under the Trump administration, at least 39 people have died while or immediately after being detained in immigration detention centers (see Appendix Table B for full listing of all individuals who have died). Of these, 12 people have died by suicide. Our organizations released *Code Red: The Fatal Consequences of Dangerously Substandard Medical Care in Immigration Detention* in June 2018 that analyzed deaths in immigration detention from December 2015 through April 2017 and found that more than half of the deaths were linked to the neglectful medical care of immigrants – including delays, substandard care, and botched emergency response. These deaths were also a result of the inappropriate use of solitary confinement and inadequate mental health care.⁹⁸ While the death toll has continued to mount, ICE has rolled back its already insufficient investigations and oversight and made less information available about its assessment of the causes of these deaths and its actions – if any – to address failures. Meanwhile, details that have emerged due to community organizers’ and families’ efforts to obtain information, as well as media scrutiny, indicate that the same patterns we last documented in 2018 persist or have worsened.

Oversight of Fatal Detention Failures Weakened

Our previous reporting on deaths in immigration detention has relied heavily on independent medical analysis of Detainee Death Reviews.⁹⁹ These documents summarize investigations conducted by the ICE Office of Detention Oversight (ODO) and were made publicly available by ICE on its website. An assessment of the detainee death reviews by our medical experts showed a number of repeated faults with investigations into deaths, including delays as long as two months in starting investigations that could mean key witnesses had less reliable recollections or were no longer available, an incomplete or cursory treatment of key failures that would make it impossible to determine the appropriate corrective action, and an overriding focus on checklists and standards that failed to evaluate the quality of care.¹⁰⁰

Since our last analysis of deaths in detention, ICE's oversight and transparency practices on fatalities appears to have gotten worse. After a congressional requirement in the Department of Homeland Security 2018 Appropriations Bill required ICE to make public all reports regarding an in-custody death within 90 days, the agency published a new web page with notifications of deaths it called "Detainee Death Reports," as opposed to the previous "Detainee Death Reviews." ICE represents its protocol after a death in custody as one in which the ICE Health Service Corps (IHSC) "reviews the case to determine whether the detainee received appropriate health services in relation to nationally recognized standards of detention health care and practices," and the ICE Office of Professional Responsibility (OPR) conducts an "objective examination" of whether the relevant detention standards were met.¹⁰¹ However, the reports of deaths made public by ICE since April 2018 are only two to three pages long and consist only of bulleted summaries of incidents leading up to events prior to each death. Most Detainee Death Reviews completed before April 2018 were between 20 and 40 pages in length. The newer "reports" do not include a complete accounting of relevant facts leading up to the death, any analysis or assessment

of the care provided, or a comparison of the care provided to the governing standards in place at the relevant facility. They do not in any case provide recommendations for addressing failures.

Even more worrying, it is not clear whether ICE continues to investigate failures that may have led to a death or might lead to another death in the future. The last publicly available "Detainee Death Review" involved an investigation that occurred in March 2018 and was released pursuant to a Freedom of Information Act (FOIA) suit filed by Project South.¹⁰² NBC News filed suit in January under FOIA to compel the disclosure of unreleased detainee death *reviews* for people who died in ICE custody since 2017.¹⁰³ The agency's responses to NBC's FOIA request for detainee death reviews pointed the news organization to the agency's cursory detainee death reports.

In further evidence of oversight failures, a whistleblower complaint from within IHSC, published by BuzzFeed News in December 2019, alleged that IHSC had "systematically provided inadequate medical and mental health care and oversight to immigration detainees across the U.S."¹⁰⁴ Along with a series of allegations of life-threatening lapses in medical care affecting a child and adults in ICE custody, the complaint includes claims that four deaths since 2017 were linked to dangerous, neglectful care that IHSC leadership knew or should have known about but failed to address.

Indications That Deaths Are Linked to Subpar Medical Care and Lack of Oversight

Despite the limited publicly available information relating to recent deaths in immigration detention, our research indicates that the neglectful and dangerous practices documented in our prior research remain in effect.¹⁰⁵

- On March 13, 2017, Roger Rayson, a 47-year-old Jamaican immigrant, died approximately two months after being taken into ICE custody and a month after being transferred to a hospital for nausea, vomiting, and pain, where

he was diagnosed with Burkitt’s lymphoma, an aggressive and fast-growing cancer requiring rapid diagnosis and treatment, according to ICE’s press release announcing his death.¹⁰⁶ Though we do not have access to more details as to why or in what way, the DHS whistleblower characterized Rayson’s health care as “deplorable” and said that “multiple requests for the Uniform Corrective Action Plan (UCAP) and Root Cause Analysis (RCA) were made to IHSC leadership, but IHSC did not respond.”¹⁰⁷

- The whistleblower complaint also includes an allegation appearing to refer to the death of Huy Chi Tran at the Eloy Detention Center on June 12, 2018. The whistleblower complaint released by BuzzFeed redacts the name of the detained person who died, but the time period and detention center match. According to the complaint, “IHSC leadership was informed of multiple concerns regarding the care provided at the facility, particularly the facility’s psychiatrist misdiagnosing, failing to treat detainees appropriately, and the lack of readily available emergency medications.” The Detainee Death Report for Tran records his cause of death as “myocardial infarction due to multiple blocked arteries.”¹⁰⁸ However, the whistleblower complaint alleges without further details that IHSC leadership provided a “very misleading” report on the cause of death to ICE Enforcement and Removal Operations leadership and “the more likely causes of death given the detainee’s medication and symptoms (neuroleptic malignant syndrome and/or serotonin syndrome) were not raised.”¹⁰⁹
- The cursory Detainee Death Report for Roberto Rodriguez Espinoza, who died on September 10, 2019, showed that it took more than six hours after a guard at the McHenry County Adult Correctional Facility reported to a nurse that Rodriguez Espinoza displayed symptoms of what turned out to be a fatal subdural hematoma, or bleeding in his brain, for the nurse to contact a physician. The

physician ordered an immediate transfer to a hospital. After transfer to two hospitals unable to care for Rodriguez Espinoza due to the severity of his condition, he arrived at a third hospital more than 16 hours after the onset of his symptoms, where he was found to have “irreversible loss of all brain function.”¹¹⁰ Two medical experts consulted by BuzzFeed News agreed he should have immediately been hospitalized and that the delay likely contributed to his death.¹¹¹

Lack of Transparency for Deaths of People “Released” From Detention After Hospitalization

We are aware of two cases in which people died while hospitalized after being formally released from ICE custody. These releases allowed ICE to avoid triggering mandatory reporting for in-custody deaths, shrouding the treatment they received in ICE detention leading up to their hospitalizations in secrecy.

- The family of Johana Medina Leon, a transgender woman from El Salvador, filed a civil rights claim against the U.S. government alleging that officials ignored her numerous requests for treatment as her health “rapidly deteriorated” in the Otero County Processing Center, where she was detained in May 2019.¹¹² According to her family’s attorney, as a trained nurse she recognized that she was ill and needed IV fluids, and she made repeated requests for care that were denied.¹¹³ After she was found unconscious in the detention center on May 23 or 24, ICE reportedly granted her release on her own recognizance right before she was placed at a local hospital.¹¹⁴ On June 1, 2019, Medina Leon’s family was notified that she had died as a result of pneumonia. Medina Leon was the second transgender woman since 2017 to die after being detained by ICE.
- We previously reported that Roxsana Hernandez, 33, died in May 2018 after being detained in Border Patrol custody and the Cibola County Correctional Center in New

Mexico.¹¹⁵ According to ICE’s May 2018 press release, she was admitted to the hospital with symptoms of “pneumonia, dehydration and complications associated with HIV.”¹¹⁶ In November 2018, lawyers for Hernandez’s family released an independent autopsy that found she had been physically abused before her death, raising questions about her treatment during the 16 days she was held by U.S. immigration authorities.¹¹⁷

- The family of José Ibarra Bucio, 27, has called for an investigation into the treatment he received at the Adelanto ICE Processing Center, where he collapsed and fell into a coma in February 2019. Released by ICE while hospitalized and unresponsive, Mr. Ibarra died on March 21.¹¹⁸ Ibarra, who formerly had legal status under the Deferred Action for Childhood Arrivals (DACA) program, had become a first-time father only days before his collapse. “My son will never be able to experience the love and happiness my husband brought to my life as I know he would have brought to his,” his wife, Melissa Castro, told the Los Angeles Times.¹¹⁹

A Series of In-Custody Deaths by Suicide

A third – 13 of 38 – of in-custody deaths between January 2017 and March 2020 were suicides, raising a troubling pattern of death by suicide in ICE detention. In the nearly eight years between January 2008 and December 2016, ICE reported seven deaths by suicide in its custody. The number of deaths by suicide is growing in the context of inadequate mental health services and the inappropriate use of isolation.¹²⁰

On October 15, 2019, Roylan Hernandez Diaz, an asylum seeker from Cuba, died by suicide in a solitary confinement cell at the Richwood Correctional Center. Although Hernandez Diaz had passed a credible fear screening, making him eligible for parole, the New Orleans Field Office denied his release, as it has done with 99 percent of all parole applications. After an immigration judge told him that he needed to provide more evidence

of persecution to establish his asylum claim – evidence overwhelmingly difficult to obtain while in detention – Hernandez Diaz began a hunger strike. “He told me he was going to participate in a hunger strike because of the abuse he endured in detention,” said Yarelis Gutierrez, Hernandez Diaz’s wife, told a reporter. Officers at the detention center then moved Hernandez Diaz to a solitary confinement cell. Two days later, after refusing to eat 10 consecutive meals, he was found dead, having hanged himself from his bed.¹²¹

During our site visit, officers at Richwood showed us Segregation Unit #3, the solitary confinement unit where a man – presumably Hernandez Diaz – had died in October 2019. The cell – a single unit with cinderblock walls and a steel door with a slot for food – was approximately 12 x 8 feet. An officer explained that there had been a bunkbed in the unit when the detainee had been locked up, which had since been removed from the cell. The officer also told us that there was no camera in the unit because the unit was “not a suicide cell.” According to the officer, people are placed on suicide watch – which requires constant, one-on-one visual supervision – after evaluation and creation of a treatment plan by a mental health professional.¹²² Dr. Nizam Peerwani, the medical examiner for Fort Worth, Texas, told the Associated Press that Hernandez Diaz’s death could have been prevented with adequate medical and mental health care.¹²³

Many people we interviewed saw Hernandez Diaz’s suicide as part of a larger problem. Several detained people told us they learned that the day after Hernandez Diaz died, another man who had been in solitary confinement for weeks also nearly died by suicide.¹²⁴

Other deaths by apparent suicide since 2017 for which we have access to some details include:

- In July 2018, Efrain De La Rosa, 40, became the second detainee to die by suicide in an isolation cell at the Stewart Detention Center in Georgia in a period of 14 months.¹²⁵ On the day that De La Rosa hanged himself from an upper bunk railing in his isolation cell, where

he had been held for nearly one month, he had reported to a licensed clinical social worker that he was going to die and did not need to take his prescribed psychiatric medicines. The DHS whistleblower report released by BuzzFeed News in December 2019 contains an allegation that IHSC leadership was notified of De La Rosa's deteriorating mental health while held in an isolation cell via the "Significant Event Notification" reporting system on several occasions between April 25, 2018, and May 6, 2018. The whistleblower complaint does not say whether IHSC took any action. The complainant noted that several months earlier, IHSC leadership directed IHSC Medical Quality Monitoring Unit to cease reviewing these reports and reports about detained people in segregation, "despite concerns raised to IHSC leadership that this restriction could negatively impact detainee safety."¹²⁶ It is not clear from the whistleblower complaint who raised these concerns.

- Mergensana Amar, a 40-year-old asylum seeker from Russia, was declared clinically dead on November 18, 2018. Between August 22 and October 16, Amar conducted a hunger strike and was given involuntary IV fluids and monitoring. Ten days after his hunger strike ended, he was admitted to the medical unit on a suicide watch after officers found a handmade rope hidden in his cell. Ten days after being released from suicide watch (where he was held for a little over a week) while in an isolation cell, Amar was found unresponsive hanging from a self-made rope.¹²⁷ Amar had previously participated in a hunger strike and told local immigrant rights organizers he would rather die in the United States than be deported.¹²⁸ Hunger strikers at the detention center had previously reported being placed in isolation, denied important privileges such as access to the law library, and threatened with force feeding, as well as poor medical care.¹²⁹
- Since May 2019, other deaths by apparent suicide include Simratpal Singh, 21, an asylum seeker from India being held in the La Paz

County Jail in Arizona;¹³⁰ Anthony Oluseye Akinyemi, 56, from Nigeria, held in Worcester County Jail in Maryland;¹³¹ Ben James Owen, 39, a British man held in the Baker County Detention Facility in Florida;¹³² and David Hernandez Colula, 34, from Mexico, held in the Northeast Ohio Correctional Facility.¹³³

Inadequate Medical Care Causes Needless Harm

Our visits to new detention facilities and interviews with detained people and detention center officials uncovered evidence of medical units that appeared dangerously understaffed and unprepared for medical crises. At Winn Correctional Center, we discovered that the only doctor on staff had faced disciplinary proceedings in at least two different states — once for failing to meet the standard of care at an Indian Health Service Facility, and at Winn when the facility held state prisoners.¹³⁴ Besides employing only one physician, only half of the positions for registered nurses were filled at Winn.¹³⁵ The organization and maintenance of clinical facilities at detention centers also raised concern. Medical staff at Winn showed us what was described as the clinic's "emergency room." The room, however, held only a stretcher and had no basic medical equipment commonly located in an emergency room, including a crash cart or defibrillator, both of which staff searched for and only several minutes later found in the hallway.¹³⁶

Over the course of our investigation, we received numerous reports of lengthy delays for care, as well as reports of neglect and language barriers.¹³⁷ Medical staff at Richwood Correctional Center told us that a request to see an outside doctor to set a broken bone could take "within a week."¹³⁸

Sherman T., who was being treated for chronic health issues, including hypertension and arteriosclerosis prior to being detained at Richwood, told us that he was afraid he would have a heart attack in detention. If he missed pill call, a moment when facility staff enter group cells to distribute medication, he said, he did not receive his prescribed

medication that day. When we asked him if he was aware of any deaths at the detention center, he responded, “They have not died because we yelled and banged on the doors so that they would hear us and respond to emergencies.” A month earlier, Sherman said, a man he believed to be suffering from appendicitis fainted, and he and other men in the unit had to bang on their doors to force officers to pay attention.¹³⁹ Jacob D. reported that he requested medical treatment for HIV for two months at Richwood before he received it.¹⁴⁰

One woman, a nurse who suffered a snake bite on her arm while journeying through Panama after escaping from Cuba, asked for medical treatment at Jackson Parish Correctional Center when she realized her wound was not healing. After just being given ibuprofen, she escalated her medical request and asked to see a doctor, who gave her a prescription for antibiotics and told her to wrap the wound. “But I know it’s not getting better,” she said. “I am afraid that it won’t get better, because I need my arm. If I don’t have an arm I cannot work. I worked so hard to get here. No one is thinking about us.”¹⁴¹

Sebastian F., a father of three who worked as a heavy machinery operator in Arkansas before he was arrested by local police and then turned over to ICE, said he had gout and that staff at Winn Correctional Center gave him ibuprofen and IcyHot lidocaine cream, but had yet to respond to his request, pending for two weeks at the time of the interview, to receive his prescription medications.¹⁴²

“They have no one in the clinic that speaks Spanish,” said Logan S., who went to the Winn medical clinic weekly for diabetes medications. “There are interpreters [in the Correctional Center], but they are not there [in the clinic]. I understand some English, but there are a lot of people who don’t understand the nurses.”¹⁴³ Manuel O., an asylum seeker who said he left Cuba to escape physical and emotional abuse he suffered because of his political views, hoped to reunite with his adult daughter living in the United States. He had been detained for eight months when he spoke with us. He said he had diabetes and hypertension, and that he had

waited five months for diabetes treatment. He also had trouble raising his arms above his head and said that when he asked to see a doctor at Winn, which employs only one physician, he had to wait four to five days. He said he asked for an X-ray for his arms but was given only lotion to put on his joints.¹⁴⁴

Access to asthma medication was also a problem for people at Winn. “I asked the nurses four to five times, but they told me they did not have the inhaler,” Jackson C. said. “I have a lot of difficulty breathing and it is hard to sleep. I have pain in my chest and headaches.”¹⁴⁵

Several men who spoke with us at Tallahatchie County Correctional Facility described the delays they faced after requesting medical care or being dismissed by the prison’s medical staff. “My knee is hurt; I fell 10 days ago,” a man reported. “Six days ago, I asked to see the doctor and they haven’t called me. I ended up cutting up a sock and plastic glove to make a bandage for it.”¹⁴⁶ Luis F. said immigration officials at the border had thrown away medicine he took for eye pain, and that he had asked to see a doctor for eye problems two weeks earlier but was still waiting and experiencing significant pain.

Men at Tallahatchie repeatedly expressed concern to us about one man who lived in their unit, Charles N. He told us he had fled to the United States after surviving an acid attack in his home country, where he was targeted because he was gay. He showed us documentation from when he had undergone surgery in Mexico to save his eyesight before continuing on to seek asylum in the United States. He said he brought prescription medication with him but that staff at Tallahatchie had “stopped that medication.” He told us he could not see out of one eye and was worried he was going blind. The prison’s medical staff had given him eye drops to take every two hours, he said, but he had yet to receive the glasses they told him he needed to wear. When he put in an emergency medical request, he waited five days for a response. On top of this, he dealt with harassment by prison staff who knew his sexual orientation. One doctor asked him, “Why don’t you like ladies?”¹⁴⁷

Concerns Over Adequacy and Timeliness of Mental Health Services

Our observations during detention center tours raised grave concerns about the ability of facilities to provide timely mental health services, including to those experiencing a mental health crisis. For example, neither Richwood – where, as described above, Roylan Hernandez Diaz died by suicide in October 2019 – nor Winn had any licensed mental health professionals available on site. Instead, these facilities utilized a “telepsychiatry” system to provide mental health services to detained people via telephone or video conference. One man at Richwood described his experience being treated via “telepsych” with inadequate translation: “I was having a lot of emotional issues and stress here. So, I asked for a psychologist. I saw one in the video tablet at the clinic. There was a staff person who ‘translated,’ but she really cannot speak Spanish. Then they sent me sleeping pills, but I didn’t want them.”¹⁴⁸

Other people in detention reported significant delays in obtaining mental health services, even after repeated requests. Valeria R., an asylum seeker at Jackson Parish, reported that she came to the United States after she was raped twice and saw her father killed in Ecuador. She told us that she cried all the time, and only wanted to sleep. Her memories haunted her, and she had repeated nightmares. Although she asked to speak to a psychologist at Jackson Parish, officers gave her a medical appointment instead.¹⁴⁹ Similarly, Edgar F., a man detained at Winn, noted that “I put in a request for mental health treatment, but no one responded.”¹⁵⁰

Abuse and Neglect of People With Disabilities

Federal law and agency policy prohibit ICE and its contractors – including private prison companies – from discriminating against people with disabilities. The requirements for ICE detention facilities could

not be any clearer: People with disabilities must be provided with reasonable accommodations and be placed in the least restrictive housing possible. For example, immigration detention centers must provide reasonable accommodations, including accessible housing, assistance with toileting and hygiene, and auxiliary aids, such as materials for visually and hearing-impaired people, canes, and wheelchairs. Detention facilities are also required to provide accommodations for those with “mental impairments.”¹⁵¹

Our investigation revealed a high level of abuse and neglect of people with disabilities in immigration detention. We received several reports of people with disabilities who failed to receive reasonable accommodations or assistance, and instead faced abuse by detention officials. One person told us about a man in his housing unit with a serious physical disability at Jackson Parish for over six months. “He falls and falls,” he reported. “The guards don’t help him. The guards yell at him. ... He gets by with our help.”¹⁵² Another man at Winn described a senior citizen who had been detained for over eight months. “He can’t lift up his hands,” he noted. “He is not getting any help from the facility.”¹⁵³

People also reported that detention officials at the Winn Correctional Center hid people with disabilities from view during facility inspections or media tours. In one extreme example, medical staff locked Manuel Amaya Portillo in the medical unit and gave him sedatives during a facility inspection. Amaya, an asylum seeker from Honduras, has disabilities affecting his ability to walk. He is approximately four feet tall, and his left leg is half the length of his right leg, for which he uses a wheelchair. While detained at Winn, Amaya made repeated requests for a wheelchair, which were ignored. Because staff at Winn failed to provide Amaya with assistance, he could not access the shower, toilet, or sink, and depended on other detained immigrants for help. In early November 2019, staff called Amaya to the medical unit. He was separated from other immigrants and locked in a small room, where a nurse gave him

sedatives that he had not requested and did not want. He later found out that outside inspectors were taking photos and interviewing immigrants about conditions at the facility that day.¹⁵⁴ Another man detained at Winn, suggested that this was not an isolated incident: “When reporters came one time, the guards hid certain disabled people. There was one person who had a stroke and an eye in bad condition. He was hidden.”¹⁵⁵

The Cruel and Arbitrary Use of Solitary Confinement

Solitary confinement – also referred to as isolation or “segregation” in the immigration detention context – is the practice of placing a person alone in a small cell for 22 to 24 hours a day, with little human contact or interaction, restrictions on or denial of reading material, and severe constraints on visitations or contact with others. In general, an immigrant placed in solitary confinement will spend 23 hours a day alone in a small cell with a solid steel door, a bed, a toilet, and a sink.¹⁵⁶ The damaging effects of solitary confinement, even on persons with no prior history of mental health conditions, have long been well known. There is a broad consensus among mental health experts that prolonged or indefinite solitary confinement is psychologically harmful, and may amount to torture.¹⁵⁷

Heavy reliance on solitary confinement in immigration detention has raised widespread concern. Last year, DHS’s Office of Inspector General (OIG) raised concern with the placement of immigrants in isolation, noting that its inspection of detention facilities “identified serious issues with the administrative and disciplinary segregation of detainees.” The OIG noted that detainees “were not treated with the care required under ICE detention standards,” and that facilities engaged in segregation practices that “violate ICE detention standards and infringe on detainee rights.”¹⁵⁸ In April 2018, the DHS’s Office for Civil Rights and Civil Liberties (CRCL) also concluded that an ICE detention center kept an “alarming” number

of detainees with mental health conditions in segregation, and that many were isolated for “shockingly” long periods.¹⁵⁹

The recent expansion of immigration detention in jurisdictions widely known for disproportionate reliance on the practice raises even further concern. Indeed, Louisiana – the site of the greatest increase in immigration detention under the Trump administration – has been called the “solitary confinement capital of the world” for leading the world in both rates of incarceration and solitary confinement.¹⁶⁰

As of May 2018, ICE had locked immigrants in solitary confinement at least 11,000 times since September 2013, when its detention centers were required to start reporting such data.¹⁶¹ More than 2,900 solitary confinement placements were reported in 2017, up from about 2,500 in 2016 and 2,100 in 2014. In the first five months of 2018, the most recent data available, detention centers had already put people in solitary more than 1,000 times.¹⁶² No public data is yet available to show how many times immigrants have been locked up in solitary since the Trump administration began expanding the private detention system, including the five detention centers investigators visited for this report.

Locked Up: Solitary Confinement for Minor Infractions or Retaliation by Officers

Our interviews with people detained at new immigration detention centers revealed that prison officials lock up detained immigrants in solitary confinement for lengthy periods, often for minor infractions or because of retaliation by officers. We received multiple reports of officers placing people in solitary confinement for as long as 60 days for minor incidents. Delmer L. told us about a man who was beaten and put in solitary confinement at Richwood Correctional Center for 99 days after asking an officer to “give him his commissary.” We also received reports that facility officials at the Winn Correctional Center have punished immigrants with solitary confinement for attempting to speak to reporters during facility

Manuel Amaya Portillo

Manuel Amaya Portillo has faced stigma, death threats, and persecution in Honduras as a result of his disability.

Born seriously underweight, Manuel required several surgeries on his heart and brain as an infant. Manuel is short in stature; his left leg is half the length of his right leg, requiring the use of a wheelchair; and he has six short fingers on each hand, which has resulted in stigma.

Manuel decided to come to the United States to seek protection from persecution. He traveled from Honduras, through Guatemala and Mexico, to the U.S.-Mexico border by bus. He crossed the border into the United States, carried on someone's back, because he cannot walk long distances. When Border Patrol officers encountered him in the desert, he requested asylum. Agents handcuffed him and took him to an *hielera* — a crowded migrant holding cell along the border.

Agents then shipped Manuel to the Tallahatchie County Correctional Facility in Mississippi. Manuel knew that he would need to receive a positive finding from an asylum officer that he had credible fear of persecution in Honduras to qualify for an asylum hearing. But his credible fear interview, conducted on the phone and without a lawyer, went terribly wrong. He explained to the officer that he sought protection on the basis of his physical disability. But the asylum officer did not acknowledge that Manuel had a disability or any medical condition. Instead, the asylum officer dismissed his claim, concluding that being short was not a valid basis to fear persecution. "I thought that my life had no meaning anymore because I didn't have the money to pay for a lawyer," said Manuel. "When they told me that I wasn't eligible for asylum, I cried the whole day."

Manuel requested that an immigration judge review this finding, and he was then transferred to the Winn Correctional Center in Louisiana. This is where another nightmare began. The facility did not provide him with a wheelchair or a personal assistant to support him with basic tasks. Manuel could not move around the prison for meals, medical visits, or recreation. He couldn't reach the shower, toilet, or sink, and depended on other detained immigrants for assistance. Sometimes he went days without bathing because he could not find anyone to assist him,



Manuel Amaya Portillo with ACLU Louisiana staff and Silvia Gomez-Juarez, Spanish Instructor, University of New Orleans, Photo by BMM Communications

and he faced similar challenges using the toilet and sink. He made repeated requests for a wheelchair, but he never received one, although facility staff were required to provide one under federal disability protections.

In early November 2019, outside inspectors visited the Winn Correctional Center. However, Manuel never had a chance to talk with them about the challenges he faced in detention. Instead, during the visit, officers suddenly took Manuel to the medical unit. Once he arrived, Manuel saw people with cameras coming through the door, but medical staff quickly locked him in a room away from other detainees waiting for a medical visit. After the people with cameras left the medical unit, a nurse made him swallow a sedative, which he had not requested, and didn't want to take. Later that day, Manuel learned that the investigators with cameras had interviewed other immigrants in the medical unit and his residential unit about the conditions at the facility.

After the ACLU intervened on Manuel's behalf, ICE released Manuel to join his sponsors in New Jersey, where he is now preparing his asylum claim with the help of a pro bono lawyer. "When I heard the news, I cried tears of joy," said Manuel.

tours. Carlos C., an asylum seeker from Cuba, said that he had been placed in solitary confinement for eight days after attempting to speak to Fox News reporters during their tour of the facility.¹⁶³ Eduardo K., another man detained at Winn, noted that this was not an isolated incident: “There was a Cuban and Venezuelan who were punished for speaking to the press.”¹⁶⁴

Immigrants at Jackson Parish and Winn Correctional Centers described prison officers placing people in solitary, which immigrants often referred to as “el pozo,” or “the hole,” for as long as 60 days. Officers punished immigrants with solitary when fights broke out over use of a shared television or microwave, or in response to other issues that arose among the dozens of men forced to live together in prison dormitories under tense and inhumane conditions.¹⁶⁵

Several men at Winn described officers using solitary confinement as a threat against people for any behavior they considered insubordination. “We are threatened with segregation all the time,” one man said.¹⁶⁶ Another man told investigators that someone was sent to solitary confinement for showering at 11 p.m.¹⁶⁷ “Guards yell at you; if you yell back you get put in administrative segregation,” a third man said.¹⁶⁸ “Everyone comes back very skinny,” a man told interviewers about other men in his unit at Winn who had been sent to solitary confinement.

Santiago A., a Cuban asylum seeker, reported that he had spent more than two months in solitary confinement since first arriving at La Palma. He was first “put in the hole” for 30 days for telling a correctional officer he did not want to participate in lockdown. Santiago was then sentenced for another

30 days after telling a correctional officer he did not want to stay in La Palma. Santiago reported that after his transfer to the nearby Eloy Detention Center, he was put in solitary there for 15 days. He noted that there was no process to challenge his solitary sentences. “When I was in the hole, I began talking to myself, started to hallucinate. They took me to the psychiatrist and gave me some medicine,” he said.¹⁶⁹

Solitary Confinement of People With Mental Health Conditions or on Hunger Strike

Even with officers’ tendency to punish immigrants with solitary for minor infractions, the proportion of solitary sentences reported for disciplinary reasons or because of a perceived threat to the facility’s security accounted for only about 57 percent of solitary sentences from when ICE’s solitary reporting obligations began until the most recently available data was collected in May 2018. The remaining solitary sentences involved immigrants ICE considered to have mental health conditions or be likely to attempt suicide, who were on hunger strike, or who were sent to solitary for what ICE called “protective custody,” which is by regulation meant for people who are “vulnerable to sexual abuse or assault.”¹⁷⁰ Data from whistleblower complaints also shows that “the Trump administration in its first year was more likely to cite mental illness and hunger strikes as reasons for sending immigrants to solitary confinement than the Obama administration was in its final year in office.”¹⁷¹ Interviews with immigrants at La Palma, Jackson Parish, Winn, and Richwood confirmed that the use of solitary confinement to deal with mental health conditions or hunger strikes remained prevalent.

The La Palma Correctional Center’s medical unit contained two cells reserved for “suicide watch,” as well as segregation units used for immigrants during hunger strikes. Prison staff explained that when detained individuals were placed on suicide

watch, an officer was posted outside the cell on constant watch and nurses checked and took vitals every six hours. As we walked through the unit, we witnessed a distraught man in one of the suicide watch cells who pulled on his anti-suicide smock and asked us for help.¹⁷²

A supervisory detention and deportation officer at La Palma also told us that individuals who had missed nine meals or declared a hunger strike were placed in medical segregation, a practice confirmed by immigrants held there. One man said a friend participated in an eight-day hunger strike and was put in solitary for the duration.¹⁷³ Another said, “There have been strikes and suicide attempts, and the result is that they punish them with isolation.”¹⁷⁴ During a group interview, men detained at La Palma told one researcher that someone had been placed in solitary confinement for one week “on accident.” Officers erroneously thought he had participated in a hunger strike, the men said. They said that people were placed in solitary for arbitrary reasons.¹⁷⁵

Two people at La Palma had asked to be put in solitary for their own safety. One man who spent three days there told us that the prison counselor “made me feel stupid” and “tried to medicate me for depression but never talked to me.”

Even the threat of solitary confinement puts immigrants’ health at risk when it creates fear that asking for help may land someone in “the hole.” Rodrigo A. said that he had been hit in the head in Nicaragua, which caused tooth pain that resulted in a tooth extraction. He suffered from migraines and had put in five requests to see a medical provider before finally being given an appointment. He said he suffered symptoms of depression “because of the lack of justice, or the feeling of unimportance. I’m here without my family, locked up.” He told interviewers that people who expressed suicidal thoughts “get put in the hole.” He said it’s “best to keep quiet.”¹⁷⁶

Physical Force, Tear Gas and Pepper Spray, and Verbal Abuse

Immigrants reported the use of force and verbal abuse by officers at several detention centers. One man at the Richwood Correctional Center described watching an officer yell “mother f—er” at a Guatemalan immigrant and then grab him by his neck. In a separate incident, the man recalled witnessing an officer hit another immigrant so hard he could hear what he thought was the sound of the man’s ribs breaking.¹⁷⁷ Another man reported that “at Richwood there were guards that would hit us and would not give us food.”¹⁷⁸ At the La Palma Correctional Center, a Honduran asylum seeker told interviewers that “a Salvadoran was grabbed by the head and slammed against the wall for taking papers out of his belongings” on his first day of detention.¹⁷⁹ One man reported that a correctional officer told him “the solution to your problem is deportation,” and that officers called immigrants locked up at the prison “rats.”¹⁸⁰

“They push people if they don’t do what they say, but it’s often because they don’t understand English. Officers will get mad and punish you by putting you in a cold space for an indefinite amount of time,” said one man at Richwood, who described being punished by being forced to sit for three hours in the cold in only boxer shorts.¹⁸¹ Daniel D. told us about a Honduran man at Richwood who was put in solitary after getting beaten by officers. He said officers claimed the man had tried to hit them first and placed a sheet in the cell window so no one could see him.¹⁸² Several men also told us that about 20 Cuban asylum seekers launched a hunger strike in the days following the death of Roylan Hernandez Diaz at the Richwood Correctional Center on October 15, 2019. The men had not witnessed the incident themselves, but had been told that officers handcuffed and beat the protesters, and that some men were sent to the hospital.¹⁸³

On December 2, 2019, officers at Winn Correctional Center pepper-sprayed approximately 50 people who

protested their prolonged detention without a court date by refusing to come inside from the recreation yard. In a public statement, ICE officials stated that the men “subsequently became compliant.”¹⁸⁴ This incident was not the first time that immigrants at Winn had expressed their frustration with their lengthy detention and lack of information regarding court dates. Several men reported a similar incident at Winn in prior months. “They used gas on us about a month ago in [the Cypress Unit] because we had a strike,” recalled one man. Officers entered the unit with gas masks on. “Everyone was locked in the unit.”¹⁸⁵

Poor Food and Water Quality

In 2019, DHS’s Office of Inspector General (OIG) conducted an inspection of food safety issues at several immigration detention centers and confirmed what detained immigrants have long observed: Food safety issues endangered the health and welfare of people in detention. In the report, the OIG noted that all of the facilities inspected had significant food safety problems. For example, inspectors found open packages of raw chicken that leaked blood all over refrigeration units and foul-smelling meat at one facility. The OIG also noted that “food handling in general was so substandard that ICE and facility leadership had the kitchen manager replaced during our inspection.”¹⁸⁶

In a similar vein, people detained at all five facilities we visited raised concerns about the safety, quality, and amount of food served. As one man at Jackson Parish reported, “There are maggots in the food. The food is very bad. Sometimes it is spoiled.”¹⁸⁷ “I am continuously hungry,” reported another man at La Palma.¹⁸⁸ Immigrants at Richwood reported that meals were too small or inedible, and many spent as much as \$20 to \$40 per week from their commissary funds to purchase ramen noodles or other food to stave off hunger in the evenings.¹⁸⁹ Santino D., who was detained at Tallahatchie, noted that the food is “horrible, with worms in the beans.”

Our investigation also revealed that people in detention did not receive meals to accommodate health needs or religious observations, as required. Several men detained at Winn noted difficulties in receiving a diabetic diet. As one diabetic man noted, “The nurse said she would talk to the kitchen, but all the kitchen did was to give me a snack of white bread,” which is contraindicated for diabetic patients. Another diabetic man reported he could not receive meals specified for diabetics.¹⁹⁰ Although ICE requires Jackson Parish to accommodate people fasting for religious purposes, immigrants reported that no alternative meals were provided during Ramadan.¹⁹¹

Immigrants at all detention centers noted the difficulty of having to choose between sleep and food, given the meal schedules. Many housing units in the facilities we visited did not turn off lights until 11:00 p.m., making it difficult to sleep. All of the facilities we visited reported that breakfast service started at around 3:00 a.m.; lunch around 10:00 a.m.; and dinner in the late afternoon.¹⁹² “It’s difficult to eat at 3 a.m.,” noted one man at Tallahatchie. Another agreed. “Some go hungry,” he said.¹⁹³

Immigrants also raised concern with water safety. Several people at Winn reported that the drinking water is discolored and is not potable. As Jackson C. noted, “The water here is not potable. The water is yellow. People get sick drinking it.”¹⁹⁴ “The water is not clear – it is coffee colored,” remarked another man detained at Winn.¹⁹⁵ People detained at Richwood reported that the drinking water was yellow and full of grit.¹⁹⁶ “The water is black. It makes me sick,” noted one man detained at Jackson Parish.¹⁹⁷

Unsanitary Conditions and Lack of Hygiene

ICE standards require that “facility cleanliness and sanitation shall be maintained at the highest level.”¹⁹⁸ As the OIG has noted, environmental conditions such as mold and mildew growth “can

lead to serious health issues for detainees, including allergic reactions and persistent illnesses.”¹⁹⁹ ICE detention standards also require that facilities provide immigrants with basic hygiene items.²⁰⁰

People detained at all facilities raised serious concerns about sanitation and their ability to maintain personal hygiene. At Jackson Parish, we heard multiple complaints that the facility failed to provide people with soap for bathing or cleaning supplies.²⁰¹ At Richwood, immigrants reported that water sometimes rained from the ceiling, the drinking water was yellow and gritty,²⁰² and clothing and bed sheets came back from the laundromat dirty. Men there suspected that the laundry was rinsed only in water, so many washed their own clothes daily in the sinks in their units.²⁰³ People detained at Winn reported black mold growing on the walls and leaks in the roof that would soak peoples’ beds. “My bed gets wet when it rains, and the guards don’t give us new sheets. Last time it took two days for the whole place to dry. They have only washed the bedding once since I got here,” reported Sebastian F.²⁰⁴

person at Winn reported that he had not been paid for approximately five weeks of kitchen work.²⁰⁶ Several people at Richwood also reported that they had not received their promised payment. Oscar O., who worked in the kitchen at Richwood, explained that he was told he would be paid \$1 per day, but that at times this money had not gone into his account.²⁰⁷ Sherman reported that he worked for a whole month cleaning the grounds at Richwood, but had only received \$7 — payment for one week.²⁰⁸ Caleb D., who was detained at Tallahatchie County Correctional Facility, said “I’ve been working every day, but they haven’t paid [me] yet. I’m afraid not to work because they might think I am rebelling.”²⁰⁹

Unpaid Wages to Detained Workers — Even at \$1 a Day

In recent years, private prison companies have come under fire for forcing immigrants to clean, maintain, and operate their facilities. In some cases, these corporations pay detained workers as little as \$1 per day, and in other cases do not pay them at all for their work. Under this “dollar a day” work program authorized by ICE, detained immigrants clean the prison, wash laundry, prepare and serve meals, paint walls, and maintain landscaping.

Immigrants at Richwood Correctional Center and Winn Correctional Center, both run by LaSalle Corrections, reported that they had not received payment or had not received full payment for their labor, at the rate of \$1 per day. “I worked for a whole month in the kitchen but was paid only four dollars,” reported one man at Winn.²⁰⁵ Another

Facility-Specific Findings

Winn Correctional Center, Winnfield, Louisiana²¹⁰



The Winn Correctional Center in Winnfield, Louisiana, is perhaps best known as the site of an exposé by *Mother Jones* writer Shane Bauer, who worked undercover as an officer at the prison for four months in 2014. At the time, the Corrections Corporation of America (CCA) – now known as CoreCivic – held the contract to manage Winn, the largest privately run medium-security prison in the country. During his time as a prison guard, Bauer documented a system marked by insecurity, violence, and mismanagement. Bauer’s reporting exposed widespread abuse of prisoners, deprivation of medical and mental health care, and understaffing at the facility. Bauer further reported on the regular use of falsified records, and on financial irregularities and significant violations of correctional standards by facility staff and management.²¹¹ Two weeks after CCA discovered Bauer’s identity as an investigative reporter, it announced it would walk away from its

contract to operate the Winn Correctional Center with the Louisiana Department of Public Safety & Corrections. Later that year, LaSalle Corrections, another private prison company, took over the contract.²¹² After years of state budget cuts, which reduced per diem earnings for private prison companies in Louisiana, and efforts to lower the state incarceration rates, LaSalle announced a new contract to house ICE detainees in May 2019.²¹³

TABLE 6

Winn Correctional Center, Winnfield, Louisiana

Location	Winnfield, Louisiana
ICE Field Office	New Orleans
Miles from nearest metropolitan area	176 miles (Baton Rouge, LA)
Type of contract	IGSA
Operated by	LaSalle Corrections Corporation
Facility capacity for ICE detainees	1,575 (1,511 day of tour; 1,406 Average Daily Population)
Detainee type	Male
Per diem	\$70
Governing detention standards	Performance-Based National Detention Standards (PBNDS) 2011
Began ICE detention	May 2019
Number of detained people interviewed	37



Winn Correctional Center

Although LaSalle Corrections now runs Winn as an immigration detention center, our investigation of the facility revealed that immigrants detained there continue to face similar abuses today. Detained immigrants are subject to the same security systems, locked up in the same cells, and depend on the same medical unit as when the facility functioned as a state prison under CCA.

The similarities do not stop there: Even some of the same personnel remain. One of the most notable examples is Dr. Mark Singleton. In 2014, the Louisiana State Board of Medical Examiners placed Dr. Singleton on probation while the facility was run by CCA.²¹⁴ The board placed Dr. Singleton on probation after receiving information that Dr. Singleton’s privileges at an Indian Healthcare facility in New Mexico had been suspended and eventually revoked due to concerns regarding his failure to meet the standard of care in his treatment of patients.²¹⁵ Today, Dr. Singleton is the only doctor at Winn.

Failure to Provide Adequate Medical Care and Mental Health Services

We received many reports of inadequate medical care and mental health services at Winn, mostly related to issues with staffing. Our facility tour

confirmed that besides employing only one physician, only half of the positions for registered nurses were filled. During the tour, Dr. Singleton explained that detained immigrants receive outside services only if he and ICE determine it is medically necessary, but he had “no idea” of the last time he had referred a patient to a specialist for care. There were no mental health providers at all at the facility.²¹⁶

The organization and maintenance of the medical clinic at Winn also raised concern. Although we were shown what facility staff described as the “emergency room” of the clinic, the room held only a stretcher and had no basic medical equipment commonly located in an emergency room, including a crash cart or defibrillator, both of which staff searched for and only several minutes later found in the hallway. In our prior analysis of deaths in detention, we found that botched emergency responses — including the inability of staff to locate a defibrillator or other necessary equipment — have been a recurring theme in deaths linked to subpar care across several detention centers.²¹⁷

Several immigrants raised complaints with the care provided for serious and chronic medical conditions. As Alex E. noted, “They have a clinic

but it is just for appearances. I tried to get help for my diabetes because I take insulin, and they ignored me. I also have an abscess on my arm from crossing the river in Honduras. The doctor has been unable to diagnose it.”²¹⁸

People reported significant delays in receiving prescribed medication, including for asthma, diabetes, and hypertension. One man who suffered from asthma reported that he requested an inhaler at least four times, but was told that the clinic did not have an inhaler for him. As a result, he has had difficulty breathing and sleeping, with pain in his chest and frequent headaches.²¹⁹ Another person reported that he had requested but not yet received his prescription medication, even after a two-week wait.²²⁰

People reported language barriers to receiving medical care at Winn. Because no medical staff at the facility speak languages other than English, it relies on a telephonic interpretation service. This service, however, is not always sufficient. “I understand some English, but there are a lot of people who don’t understand the nurses,” explained one detainee.²²¹

There are no mental health professionals on staff at Winn. The only mental health services available to detainees are through a remote telephone service. Several detainees reported making repeated requests to see mental health staff, with no answers. As one detainee noted, “I put in a request for mental health treatment, but no one responded. I put it in 10 days ago. We write a request, then we wait.”²²²

Staff Reportedly Hid and Sedated Immigrants With Disabilities During Facility Inspections and Tours

Our investigation revealed that authorities at the Winn Correctional Center take extreme measures to hide potential violations at the facility. We heard two accounts detailing how officials have hidden people with disabilities from view during media visits or facility inspections, including one case where medical staff isolated and gave sedatives to

a disabled detainee. Those hidden had not received reasonable accommodations for their disabilities as required by law. Manuel Amaya Portillo, an asylum seeker with disabilities from Honduras, reported that he was locked in a medical unit and given sedatives as outside inspectors took photos and interviewed detainees at the facility.²²³ One man suggested that this was not an isolated incident: “When reporters came one time, the guards hid certain disabled people. There was one person who had a stroke and an eye in bad condition. He was hidden.”²²⁴

We also received troubling reports that facility officials have punished detainees with solitary confinement for attempting to speak to reporters during facility tours. Carlos C., a detainee from Cuba, reported that he had been placed in solitary confinement for eight days after attempting to speak to Fox News reporters during their tour of the facility. Eduardo K., another Cuban asylum seeker, further noted that “there was a Cuban and Venezuelan who were punished for speaking to the press.”²²⁵

Verbal Abuse, Use of Force, and Solitary Confinement

In his investigation, Bauer described the Cypress Unit at Winn, where all of the solitary confinement units are located, as a “hellhole.” Today, LaSalle uses these same solitary units in Cypress to punish people in immigration detention, who have described an alarming level of verbal abuse, use of force by officers, and solitary confinement at the facility. Many people reported that officers have abused their authority by using solitary confinement to punish minor or nonexistent infractions. We received a report of a person in detention who was punished with solitary confinement for 30 days because he took a shower at 11 p.m.²²⁶ Several people reported that officers make examples of others and commonly threaten to put them into segregation for inappropriate reasons.²²⁷ “One time, I saw an officer use force on a detainee. [The detainee] got sent to the hole for 60 days,” reported Edgar F.²²⁸ Notably, the



Winn Correctional Center

Performance-Based Detention Standards that apply to Winn specify that people should not be kept in segregation for more than 30 days per violation.²²⁹ Detained people told us officers have also threatened that any disciplinary infractions could affect their immigration cases. “The most difficult thing here is that the guards threaten to take us to solitary or to talk to ICE,” noted Juan L.²³⁰

In late 2019, immigrants at Winn turned in desperation to collective protest to express frustration with their lengthy detention and lack of information as to future court dates. In response, officers used pepper spray and tear gas against detainees to gain compliance. On December 2, 2019, officers at Winn pepper-sprayed approximately 50 people who protested their prolonged detention without a court date by refusing to come inside from the recreation yard. Detainees “subsequently became compliant, according to an ICE spokesperson.”²³¹ People told interviewers that a similar incident had occurred in prior months. “They used gas on us about a month ago in [the Cypress Unit] because we had a strike,” recalled one man. Officers entered the unit with gas masks on. “Everyone was locked in the unit.”²³²

Unpaid Wages for the Detainee “Dollar a Day” Work Program

Representatives for LaSalle Corrections confirmed that Winn uses detainee labor at the facility. Immigrants reported that they cook and serve meals, and they clean and maintain the facility. In exchange, detainees are promised payment of \$1 per day. Several people who participated in the work program reported that they had not been paid even this minimal amount for their labor.²³³ “I worked for a whole month in the kitchen but was paid only four dollars,” reported one man.²³⁴

Prolonged Detention Without Parole

Immigrants at Winn reported multiple challenges to obtaining parole, despite federal court orders requiring ICE to reverse course. Eduardo K., a monolingual Spanish speaker, reported that ICE detention officers told him and a group of other people in detention to sign a document in English or face deportation. He said, “They told me that they would deport me if I didn’t sign a paper in English. It turned out that I gave up my right to parole.”²³⁵ Other immigrants reported that

ICE officers have simply refused to accept parole applications. One man noted that he has tried repeatedly to submit his parole application to his ICE officer, to no avail: “I got together my letters of support, recommendation letters, and taxes from family. My ICE officer didn’t take them. On Wednesday, the officers stopped by. I tried to give the forms to my officer again. I made a request to see officers, but got no response.”²³⁶

Immigrants at Winn have received little to no information about when they would appear before an immigration judge for their asylum hearings, even after several months of detention. Juan L. had waited for nine months in detention, and passed his credible fear interview five and a half months earlier. At the time of our interview, he had not yet received a date for his asylum hearing.²³⁷ Emilio D. reported that in July 2019, he and approximately 20 other people participated in a hunger strike, as no one had received court dates for their cases.

Lack of Access to Counsel and Legal Materials

Immigrants at Winn had also experienced difficulty navigating their cases due to lack of access to counsel and the library. “There are no legal group presentations. One lawyer came recently. No one answers the pro bono numbers. There is no access to the law library here,” one man said.²³⁸ Other people noted the difficulty in gaining access to the law library. One person said, “When you request a visit to the law library, it takes a long time, sometimes weeks.”²³⁹ Facility officials have also restricted access to legal materials essential to a successful case. One reported that “[t]hey prohibited us from downloading legal materials one or two months ago. You can only go there to type things up or print. No more Lexis access – it got cut off for one or two months.”²⁴⁰

Richwood Correctional Center, Richwood, Louisiana²⁴¹



TABLE 7

Richwood Correctional Center, Richwood, Louisiana

Location	Richwood, LA
ICE Field Office	New Orleans
Miles from nearest metropolitan area	120 miles (Jackson, MS)
Type of contract	IGSA
Operated by	LaSalle Corrections
Facility capacity for ICE detainees	1,101 (931 Average Daily Population)
Detainee type	Male
Per diem	\$65/day
Governing detention standards	ICE Performance-Based National Detention Standards (PBNDS) 2011
Began ICE detention	April 2019
Number of detained people interviewed	29

Many people arrived at Richwood after having spent time in the notoriously cold and crowded holding cells known as *hieleras* in CBP detention centers near the southern border and in ICE custody at federal prisons in Mississippi. Three

people we interviewed had lived in the United States for more than a decade and had been swept up in ICE raids while working at Mississippi poultry processing plants in August 2019.²⁴²

Concerns about medical care and mental health services, discrimination, poor sanitation, and inadequate meals were common throughout our interviews with men detained in ICE custody at Richwood. People told us that their units were too cold and had poor ventilation,²⁴³ water sometimes rained from the ceiling, the drinking water was yellow and gritty,²⁴⁴ and that clothing and bed sheets came back from the laundromat dirty.²⁴⁵

But many of the men told us that the most difficult aspect of their experience at Richwood was their feelings of desperation, not knowing when they would be free, and yearning to be with their families. Several men said they were sad, stressed, and could not sleep. They expressed a deep sense of despair over being locked up at least 23 hours a day in a prison dormitory with nearly 100 other people, with no understanding of when or how they might get out.²⁴⁶

“Everything here, nothing is good,” said one man. “My tears come out laughing at me. What happened to humanity? Sometimes one does not speak because they ignore us.”²⁴⁷ Another man lamented, “It’s the same as prison. Everything is difficult. It makes me mentally sick.”²⁴⁸

Several talked about the toll their detention had taken on their families, and their frustration at the situation they were in after fleeing to the United States in search of safety. “I can no longer support my family like I am used to,” one man said. “Nobody comes here because they want to but because they have to flee from their home.”²⁴⁹ Another described his predicament more bluntly: “This is a country of liberty and they’ve imprisoned me.”²⁵⁰

The Death of Roylan Hernandez Diaz

A month before our 2019 visit to visit Richwood, a Cuban asylum seeker named Roylan Hernandez Diaz had died after attempting suicide in solitary confinement,²⁵¹ reportedly after participating in a hunger strike.²⁵² Hernandez Diaz had been in ICE custody since he crossed the southern border and asked for asylum in May 2019. He passed his



Richwood Correctional Center, Visitor's Entrance

credible fear interview in June. In October, after an immigration judge told him he needed to provide more evidence of persecution he suffered in Cuba, news reports say he announced a hunger strike and, days later, was found dead in his cell.

The shock of Hernandez Diaz’s death was still apparent when immigrants spoke to us at the prison. Several shared concerns that Hernandez Diaz’s death occurred as a result of poor medical care or mental health services.²⁵³ Many seemed to recognize themselves in Hernandez Diaz’s story, and talked about others who had since attempted suicide. Several people told us that the day after Hernandez Diaz died, a man who had been in solitary confinement for weeks also nearly died by suicide.²⁵⁴ Others talked about a group of 20 Cuban asylum seekers who launched a hunger strike in the days following Hernandez Diaz’s death. The men had not witnessed the incident themselves, but had been told that officers handcuffed and beat the protesters, and some men were sent to the hospital.²⁵⁵

“Parole Is Not Granted in Louisiana”

The supervising detention and deportation officer at Richwood reported to us that most of the men in ICE custody at the prison were asylum seekers who had entered through the southern border. Many had passed their initial screening interviews for asylum, known as credible fear interviews, at Tallahatchie County Correctional Facility in Mississippi, before being transferred to Richwood. All bond and asylum hearings for people detained at Richwood were being heard at an immigration court in Batavia, New York, via video teleconference.²⁵⁶ “The judge is prejudged against us,” one man said. “All of it is very difficult. It is terrible, very painful. We suffer a lot.”²⁵⁷ Indeed, immigration judges denied 75 percent of bond hearings for immigrants at Richwood in FY 2019.²⁵⁸

Overwhelmingly, asylum seekers interviewed at Richwood understood that regardless of what evidence they provided²⁵⁹ to show they were not a flight risk, posed no threat to national security, and had family or friends in the United States ready to support them upon their release,²⁶⁰ ICE never granted parole.²⁶¹ Some said the only information they received about parole was a denial letter; others had received information in a language they didn’t understand.²⁶² Most denials indicated that ICE considered the person a flight risk.²⁶³

One man said that about five weeks after he was transferred to Richwood he was told he could request parole, but that “parole is not granted in Louisiana.” He had since submitted seven parole requests, all of which had been denied.²⁶⁴ Another immigrant said they did not bother to seek a redetermination after having parole denied “because everyone is saying that even with full sponsor information they aren’t granting parole.”²⁶⁵

Lack of Access to Counsel or Legal Information

Most of the people interviewed at Richwood faced their hearings and submitted parole requests without any legal assistance, and usually with very little information about the process at all.²⁶⁶ A number of immigrants described their attempts to call ICE’s pro bono hotline from phones in their



Entrance to Tallahatchie County Correctional Facility

units, hoping to reach a legal aid organization that could assist them, only to have no one answer or be told that the organization they reached did not provide representation for Richwood.²⁶⁷

One man who did have counsel said his attorney requested to participate in his hearing by phone but was denied, so the man had to represent himself before the judge.²⁶⁸ Most people interviewed at Richwood said they had been denied requests to use the prison’s library to research their cases. Those who had been allowed to visit it found a lack of immigration materials, and books only in English.²⁶⁹ During our visit, we were shown three computers in a small room, which were loaded with the 2019 version of a LexisNexis CD-ROM, and shelves that contained few books relevant to asylum seekers navigating U.S. immigration law.²⁷⁰

Many people knew how high the stakes were as they faced a seemingly hopeless system alone: “Without having knowledge, we’ll go directly to the slaughterhouse,” one man said.²⁷¹

Use of Force and Solitary Confinement

Stories of prison officers using force and threatening people with solitary were common during interviews with immigrants detained at Richwood. Daniel D. told interviewers about a Honduran man who was put in solitary after getting

beaten by officers. He said officers claimed the man had tried to hit them first, and placed a sheet in the cell window so no one could see him.²⁷²

Many men at Richwood described experiencing or witnessing verbal or physical abuse by some officers at Richwood, often founded in racism against immigrants of different ethnicities or nationalities, or who spoke other languages. Some described officers using slurs against men of African descent²⁷³ or discriminating against anyone who did not speak English when it came to requests for toiletries or control over the unit television.²⁷⁴ One man described watching an officer yell “mother f—er” at a Guatemalan immigrant and then grabbing the man by his neck, as well as witnessing an ICE officer hit another immigrant so hard he could hear what he thought was the sound of the man’s ribs breaking.²⁷⁵

“They push people if they don’t do what they say, but it’s often because they don’t understand English,” one man said. “Officers will get mad and punish you by putting you in a cold space for an indefinite amount of time.” He described being punished by being forced to sit for three hours in the cold in only boxer shorts.²⁷⁶

Inadequate Medical Care and Mental Health Services

People in custody at Richwood commonly complained of requesting medical care and, even when their need was urgent, waiting days to see a doctor or nurse, only to be told to purchase ibuprofen or aspirin from the prison commissary.²⁷⁷

Several men described a recent scabies outbreak, during which they were stripped and sprayed with chemicals. Simon R. said he waited in the cold for five hours to shower after the people in his unit were “fumigated.”²⁷⁸ Ralph W. said that after they were sprayed, people developed bumps on their hands and sore throats.²⁷⁹

Sherman T., who was being treated for chronic health issues, including hypertension and artery problems, prior to being detained by ICE, told interviewers he was afraid he could have a heart

attack in detention. If he missed pill call, he said, he would not receive his prescribed medication that day. When interviewers asked him if he was aware of any deaths at the prison, he responded, “They have not died because we yelled and banged on the doors so that they would hear us and respond to emergencies.” A month earlier, Sherman said, a man with appendicitis fainted, and he and other men in the unit banged on their doors to force ICE officers to pay attention.²⁸⁰

“One would have to be dying to be given attention,” said Mateo G., who said he had medical problems that were not being taken seriously by staff who told him to buy medication at the commissary instead of providing it to him directly, as required.²⁸¹

Others described the prison’s limited response to requests for mental health care. During a tour of the detention center, one recently arrived officer said the most common mental health concern he encountered was depression, and acknowledged that other detention centers were better equipped to care for people who experienced mental health conditions.²⁸² There are no mental health providers on site at any time at Richwood; the only mental health care available is through telepsych and a licensed practical nurse who is assigned to people with mental health conditions.²⁸³

“If you make a [request to see a psychologist], all you get is pills,” one man explained.²⁸⁴ Another described his experience receiving psychological treatment via video conference: “I was having a lot of emotional issues and stress here. So I asked for a psychologist. I saw one in the video tablet at the clinic. There was a staff person who ‘translated,’ but she really cannot speak Spanish. Then they sent me sleeping pills, but I didn’t want them.”²⁸⁵ A man with depression said he talked to a psychologist because he could not sleep: “I talked to a psychologist for 10 minutes over the phone.” About five minutes of the conversation was used for translation.²⁸⁶ Another man said that the provider he met with when he requested mental health services “asked me if I was crazy” – and nothing else.²⁸⁷

Jackson Parish Correctional Center, Jonesboro, Louisiana²⁸⁸



From the very start, the Jackson Parish Correctional Center was built to make money. In 2004, Jackson Parish Sheriff Andy Brown ran and won on a platform of building a new jail. The problem was coming up with the cash, so the parish turned to LaSalle Corrections and struck a deal. LaSalle, a private prison company, could not open a facility on its own, as access to contracts for state prisoners was limited to government entities. But a parish prison – even if run by a private prison company – could qualify for lucrative contracts for state prisoners. Under the deal, LaSalle agreed to build, own, and manage the \$15 million, 1,147 bed facility for Jackson Parish. In exchange, the Sheriff’s Department would have a new facility to lock up its local residents while they awaited trial, receive a payment of \$100,000 per year, and be able to make hiring decisions for the new facility. “There’s a lot of patronage here by hiring all these people,” Sheriff Brown commented then. “I get the patronage.”²⁸⁹

Jackson Parish, like many other parishes, imported prisoners from other parts of the state, receiving payment at the rate of \$24.39 per day. As state sentencing reforms emptied out parish jails, however, local sheriffs repeatedly approached the federal government for immigration detention contracts. Jackson Parish Sheriff Brown began moving state prisoners from his jail to make room for immigrants when the Trump administration approached LaSalle Corrections.²⁹⁰

TABLE 8

Jackson Parish Correctional Center, Jonesboro, Louisiana

Location	Jonesboro, Louisiana
ICE Field Office	New Orleans
Miles from nearest metropolitan area	176 miles (Baton Rouge, LA)
Type of contract	IGSA
Operated by	LaSalle Corrections Corporation
Facility capacity for ICE detainees	1,034 (962 during tour, 918 Average Daily Population)
Detainee type	Male
Per diem	\$74 ²⁹¹
Governing detention standards	ICE Performance-Based National Detention Standards (PBNDS) 2011
Began ICE detention	March 2019
Number of detained people interviewed	26

By the time of our visit, there were only 60 people in local criminal custody from Jackson Parish at the jail. The other thousand or so people locked up at Jackson Parish were immigrants in ICE custody,²⁹² all part of the latest incarceration boom in Louisiana.

Lack of Parole; Inability to Pay Bond

Like the Louisiana state prisoners who before faced insurmountable difficulties in obtaining release, immigrants detained at Jackson Parish faced virtually impossible odds in gaining release. On September 5, 2019, a federal court ordered ICE’s New Orleans Field Office to release asylum seekers eligible for parole from detention as a result of litigation brought by the ACLU of Louisiana and the Southern Poverty Law Center.²⁹³ Those detained at Jackson Parish, however, had seen little difference. They repeated a similar refrain: “ICE said there is no parole in Louisiana.”²⁹⁴

Immigrants reported that ICE officers failed to provide information about their eligibility for parole after the September 5, 2019, court order. Alejandro D. first learned about the lawsuit a month later while watching a television report about the lawsuit in his housing unit at Jackson Parish. He then asked ICE officers about the lawsuit and the availability of parole. “ICE officers said it was a lie,” he reported. After a few days, ICE officers placed the required notices about the federal order on the walls in the unit. Alejandro then submitted an application for parole, including affidavits of support from his family, their tax records, and evidence of their permanent legal residence. “The ICE officers told me that I could keep asking as many times as I wanted but it wouldn’t do any good,” he said.²⁹⁵

Several people reported that they were either granted parole or had applied for parole in a different state, but were then transferred to Louisiana, where they remained in custody. While Mateo R. was detained in Mississippi, he received a written order from ICE granting him parole. Three days later, ICE officers revoked the parole order and told him to request parole from an immigration judge in Louisiana – a legally impossible request, as only ICE can grant parole. He was soon after sent to Jackson Parish in Louisiana, where he saw the notice of the federal order posted on the wall in his unit. He asked ICE officers about the notice, who simply told him that he could not apply for parole.²⁹⁶

Similarly, ICE officers transferred Jen K. to Louisiana from another state on the date she was scheduled to receive a response to her parole application. She never received a response to her application, and her ICE officer told her that “we only give parole to people who are dying.”²⁹⁷

Even immigrants who had won their bond hearings remained locked up because they were unable to afford the bonds set by immigration judges. “Everyone is being denied. No one can pay the bonds – they are much higher here, as high as \$25,000 or \$35,000. Most people are not able to pay,” said Marco J.²⁹⁸



Entrance to Jackson Parish Correctional Center

Lack of Information, Lack of Access to Legal Materials

Immigrants detained at Jackson Parish said they experienced difficulty navigating their cases because of lack of information about the status of their cases and lack of access to legal materials. People reported that ICE officers failed to respond to their requests for information, or that when they did respond they did not have any knowledge about their cases. Although nine ICE officers were assigned to immigrants’ cases at Jackson Parish, they were stationed at the detention center for only 45 days at a time, and people in detention found it difficult to meet with or communicate with the officers. In many cases, Jackson Parish was the first assignment for new ICE officers.²⁹⁹ “They don’t know what they are doing. We write them, but we don’t see them,” noted Rosa F.³⁰⁰ Emma Z., a young woman in her teens who was separated from her mother and sister by Border Patrol, reported that she did not know what was happening in her case. She reported that she had never met the ICE officer assigned to her case, even though she had sent

two requests. Her prior ICE officer could not speak Spanish, so other immigrants had to translate.³⁰¹

The Jackson Parish law library was inadequate to comply with ICE's detention standards. It consisted of two computers on two small tables, with little room for anything else. No materials were available in Spanish. Perhaps for that reason, several immigrants reported no knowledge of the law library. "They told us there was no library," reported one person. "I put in a request. They make copies but nothing else. I don't know if there is a law library here. There is no sign or advice about the law library."³⁰²

Inadequate Medical Care and Lack of Accommodations for People with Disabilities

Our investigation raised serious concerns with the provision of medical care at Jackson Parish. The medical facilities are limited and include only two or three rooms.³⁰³ At the time of our visit to the facility, only two medical staff were onsite, including one registered nurse and one licensed practical nurse. No medical staff capable of prescribing medication was present. The facility has only one mental health professional on staff.³⁰⁴

Immigrants in detention reported significant challenges in obtaining visits with medical staff and receiving appropriate treatment at the facility. "[Even] if you are sick, vomit, or have a headache, they don't see you," reported one person. Multiple people reported that medical staff refused to prescribe or provide them with medication, and even then, recommended use of ibuprofen for most conditions. In some cases, medical staff refused to provide even this limited treatment, and instructed detainees to purchase medication from the commissary, in violation of the detention standards and Jackson Parish's contract with ICE.³⁰⁵ "If you are sick, the only medication they give are Tylenol or ibuprofen," reported Marco J. "They tell you to get it from the commissary."³⁰⁶

Immigrants we spoke with in detention with professional medical experience noted the inadequacies of care provided at Jackson Parish.

A woman who worked as a nurse for eight years in Cuba worried that infection would lead to the eventual loss of her arm. Rosa repeatedly requested treatment for a snake bite that she received in her journey to the United States. The wound had left deep punctures in her arm and became infected. The nurses, however, gave her only ibuprofen. Only after several inquiries did she receive antibiotics, which did not stem the infection. Instead of providing another prescription, medical staff then told her to wrap her arm. "I need my arm. If I don't have an arm, I cannot work," she said. "No one is thinking about us."³⁰⁷

We received one particularly troubling report of a man with a serious physical disability at Jackson Parish for over six months. "He falls and falls," reported another person from his housing unit. "The guards don't help him. The guards yell at him. ... He gets by with our help."³⁰⁸ All detention facilities are required to comply with federal protections for people with disabilities and must provide assistance with toileting and hygiene, accessible housing facilities, and other accommodations in an expeditious manner to disabled detainees.³⁰⁹

Lack of Soap, Basic Cleaning Supplies

ICE detention standards governing Jackson Parish require that the facility provide immigrants with basic hygiene items.³¹⁰ However, we received multiple reports from immigrants that the facility failed to provide them with soap.³¹¹ Several people also reported that officers ordered them to clean their housing units, a task made impossible because no cleaning supplies were provided. "The guards order us to clean. We don't disobey because we are afraid. We are afraid of the repercussions. But they don't give us cleaning supplies," noted one woman.³¹²

Abusive Treatment by Officers

Immigrants reported that officers at Jackson Parish frequently used the threat of solitary confinement and threats to use force, even for very minor incidents. Miguel S. reported that an officer



Entrance to Jackson Parish Correctional Center

threatened to send him to solitary confinement for washing a towel in his unit. Other people echoed that officers used solitary “if someone disrespects the officer,” and “hold [batons] in their hands to incite fear.”³¹³

People also reported that officers’ inability and failure to communicate added to an environment of fear and intimidation. “The worst part of detention is the language difference. When the guards don’t understand the detainees they mistreat us,” said Alejandro D.³¹⁴ “I can’t understand English but they treat us badly. They treat us and look at us as if they do not want to see us,” noted Miguel S.³¹⁵ Jackson Parish is required to provide interpretation and translation services for immigrants who are limited in English proficiency with professional interpretation and translation or qualified bilingual personnel.³¹⁶ During our visit, however, officials

declined to answer how many staff speak Spanish at the facility.

Meager Servings, Spoiled Food

Immigrants raised multiple concerns about the safety, quality, and quantity of food. Several people reported that the amount of food provided was not sufficient. “We don’t have enough calories for our health,” remarked one person. “We are hungry.”³¹⁷ People also reported concerns with the safety and cleanliness of the food. “There are maggots in the food. The food is very bad. Sometimes it is spoiled,” noted one person. Jackson Parish also failed to provide any fresh fruit at all. “They don’t give us fruit,” remarked another detainee. “Never in nine months.”³¹⁸

Although ICE requires Jackson Parish to accommodate individuals fasting for religious

purposes, people reported that no alternative meals were provided during Ramadan.³¹⁹ The facility is also required to provide special therapeutic diets for people with medical conditions;³²⁰ however, these meals do not appear to be available at the facility. One man with hypertension requested a special diet. Medical staff claimed that they had asked the central office for a special diet but were told it was not available.³²¹

La Palma Correctional Center, Eloy, Arizona³²²



La Palma Correctional Center, operated by CoreCivic, began detaining immigrants for ICE in August 2018. CoreCivic initiated its contract with ICE after criminal justice reforms in California left beds empty at La Palma. During our visit, ICE’s supervising detention and deportation officer reported that people there were detained in both ICE and CBP custody.

The men in ICE custody at La Palma Correctional Center had arrived at the facility via many routes. We interviewed asylum seekers from Africa, Southeast Asia, Central America, Mexico, and Venezuela, as well as men who had lived in the United States for several years who had previously been deported or were facing deportation because of past criminal convictions.

Many of the men we met at La Palma had lost hope by the time of our interviews, a consequence of the abusive treatment they said they experienced from officers and the dearth of information available to them about the legal system they were up against.

No one had received substantive information about requesting parole or bond for release from detention. Some were simply told that parole was not available, or available only to people who were dying. Many understood that the immigration judges set bonds so high they would not be able to afford them.

TABLE 9

La Palma Correctional Center, Eloy, Arizona

Location	Eloy, AZ
ICE Field Office	Phoenix, AZ
Miles from nearest metropolitan area	63 miles (Phoenix, AZ)
Type of contract	IGSA
Operated by	CoreCivic, Inc.
Facility capacity for ICE detainees	3,060 (1,798 Average Daily Population)
Detainee type	Male
Per diem	\$83/day
Governing detention standards	ICE Performance-Based National Detention Standards (PBNDS) 2011
Began ICE detention	August 2018
Number of detained people interviewed	27 individual interviews; over 32 people in large group interview

Abusive Prison Staff

Many of the men at La Palma reported that verbal abuse and racist remarks from officers were prevalent. “I’ve heard them say to detainees, ‘Want to go where there are no cameras?’” said one man.³²³ Officers threatened to use pepper spray and “*armas de gas*,” (tear gas) others said.³²⁴ One man reported that a correctional officer told him that “the solution to your problem is deportation” and that officers called immigrants “rats.”³²⁵ Another said: “We get treated like wild animals, yelling, treated as prisoners.”³²⁶ “We are treated like maggots,”³²⁷ someone else said.

Daniel S.

Daniel, a father of two U.S. citizens, came to the United States as a student from Kenya more than 30 years ago. A lawful permanent resident who had been in ICE custody for about a month, he described the living conditions at La Palma: “There are two detainees in a cell about the size of an elevator, with a toilet bowl a step away from the bed.” He told interviewers that meals at the facility left him “continuously hungry.” He had no money to purchase additional items or food through his commissary account, so he participated in ICE’s “voluntary work program,” cleaning floors at the prison for \$1 per day.

Daniel had built a career in real estate financing in Arizona before his life started to crumble. After his marriage of 17 years ended, he experienced depression, which led to unemployment and homelessness. He was caught twice for shoplifting food from Walmart and arrested. After being released from Phoenix County Jail, he was detained by ICE,

first at the Florence Detention Center and then La Palma. He said it was devastating to be disconnected from his children.

After being hit in the head by another person detained at La Palma, he requested medical care but was given only aspirin. He had yet to receive the prescription medication he had taken before he was detained. When he asked for dental care, he was told he had to be at La Palma for six months. He described the abusive behavior by officers at the facility: “We are yelled at, here to be seen and not to be heard!” He also described an incident in which an officer had threatened to beat up his cellmate, an asylum seeker from Burma. Daniel had no attorney and had not been able to reach one, and he expressed frustration that officers at the facility were not able to give him “straight answers” about what his future holds. “They act like immigration officers, but they always say, ‘I don’t know.’”³²⁸

Several men described how prison officers canceled recreation as punishment “whenever there is a problem,” including demonstrations outside the prison. Juan N. had spent 15 years in state prison. “I was in Level 4 prison in Tucson but had more privileges there,” he said. “Every day I could go outside.”³²⁹

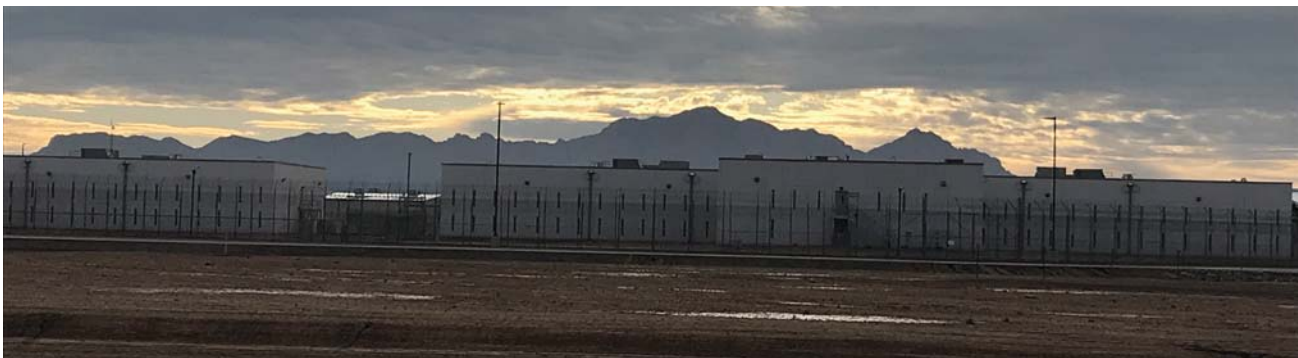
Santiago A., a Cuban asylum seeker, told interviewers he had spent more than two months in solitary confinement since first arriving at La Palma. He said he was first “put in the hole” for 30 days for telling a correctional officer he did not want to participate in lockdown. He said he was sentenced for another 30 days after telling a correctional officer he did not want to stay at La Palma. He said he was then transferred to Eloy Detention Center and put in solitary for 15 days. He said there was no process to challenge his solitary

sentences. “When I was in the hole, I began talking to myself, started to hallucinate,” he said.³³⁰

Inadequate Medical and Dental Care; Unsanitary Conditions

Numerous men described being told that there was a six-month wait for dental care. After suffering from tooth pain as a result of being hit in the head in Nicaragua, one asylum seeker had a tooth extracted at La Palma. He was told his next check-up would be six months later.³³¹ A man who was HIV-positive requested a dental cleaning and fillings but was told he would have to wait six months.³³²

Receiving medical care was also a challenge, many people reported. A man told interviewers he put in a medical request stating he had a sore throat



La Palma Correctional Center

Ruben G.

Ruben G., a Honduran asylum seeker who said he witnessed violent behavior by La Palma officers soon after arriving at the prison, had given up hope by the time he spoke with us at La Palma. He had failed his credible fear interview, he said, because the ICE officer told him that he found him credible but he “didn’t fit into a protected group” — a level of analysis that should be considered by a judge as part of asylum proceedings, not by an ICE officer during the credible fear interview. The notice for his court hearing where he could appeal the decision did not arrive in the mail until after he saw the judge. The judge never introduced himself, Ruben said, but the court interpreter told him that he could not appeal without a lawyer, which is not true. The day before he spoke with interviewers, Ruben said, he had lost hope and signed a document agreeing to his own deportation.³³³

and was given three packets of salt.³³⁴ Juan N., the man who came to La Palma after 15 years in state prison, reported that “prison is better because they had more responsive medical care.” When he requested medical care for elbow and leg injuries he had sustained before coming to La Palma, he was told to drink water and take ibuprofen. He was also given an antidepressant, which he said he did not want.³³⁵ Another man who had fallen out of his bunk bed, which had no ladder, smacking his elbow and hurting his knee, told us that he had put in a request for medical care and asked a correctional officer for help, but he never received a response.³³⁶

In addition to complaints about lack of basic care, several men complained about the prison’s unsanitary conditions. Santiago A. said that he contracted a foot fungus during his solitary confinement sentence because he did not have enough time to wash.³³⁷ Many people reported that cells at La Palma got very cold and everyone was given only one blanket, so many people slept in their jackets.³³⁸ Others complained about cells being overheated, water leaks in cells, gray drinking water, clogged toilets that were only a foot from the beds, and poor ventilation.³³⁹

Lack of Access to Legal Information

While some of the men we spoke with at La Palma had legal representation, most did not, and many

said they had not had any communication with any immigration lawyer. A local nonprofit legal service provider visited La Palma on a regular basis to conduct legal orientation presentations, which were intended to help immigrants understand the immigration legal system and their rights. Facility staff told us that immigrants could sign up to attend the presentations and could meet individually with presenters afterward.³⁴⁰ But many immigrants said they had not participated in a presentation³⁴¹ and described trying in vain to contact legal service providers by phone.³⁴² One man’s wife had called attorneys, only to have them decline to help him. The only legal information he had received at La Palma was a pamphlet with a hotline number that did not work.³⁴³

Facility staff showed us a small “law library” in a housing unit, which was described as available for use by detained people. This library, however, contained only a computer without internet access and a printer; it had no books or legal materials at all. The prison’s assistant warden said that contents from a LexisNexis CD-ROM were available on the computer, and that ICE was responsible for updating the program. We attempted to access Lexis on the computer, but were unable to do so. The assistant warden also said that immigrants could use the computers to obtain information about the local nonprofit legal services organization that conducts legal orientation at the prison, but we could not locate this information on the computer. We also saw another room that appeared to be a general use library, which staff informed us was available only to California state prisoners, who are no longer housed at the facility. This room had no computers, and facility staff were quick to state that it was not a law library. The library included books about the Arizona criminal code and rules of court, of limited use to immigration cases. A staff member later showed us manila folders that contained blank asylum applications, an application for cancellation of removal, and power of attorney forms.³⁴⁴

Two men detained at La Palma told us they had requested specific legal materials but had never

received them.³⁴⁵ Another man complained that the library he had seen contained only two computers, intended to serve all 120 people in his housing unit, and that the computers were unable to print documents.³⁴⁶

Due Process Violations in Immigration Court

Those at La Palma who managed to find attorneys, or who persevered to put a case together alone, despite challenges, described significant due process violations once they got to court. Men detained at La Palma have their cases heard at one of two Arizona immigration courts: Some are transported to a court in Florence, while others have their cases heard at a court in Tucson, often via video teleconference.³⁴⁷

People whose cases are heard in Tucson via video teleconference face heightened hurdles in presenting their cases, which ICE's own representative admitted was "not ideal."³⁴⁸ Under this arrangement, the immigration judge, ICE trial attorney, and court interpreter all appear in a Tucson courtroom, while immigrant respondents detained at La Palma and their attorneys must present their cases from a room at the detention center via video, almost 60 miles away. Any witnesses for immigrants, however, must appear in the Tucson courtroom, adding further challenges for any cross-examination of witnesses or presentation of evidence.³⁴⁹

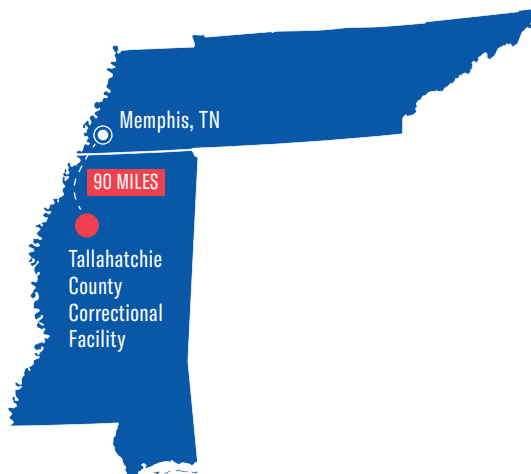
We also heard repeated complaints about the behavior of one immigration judge presiding over the Tucson court. One man appeared at the Tucson court via teleconference, without a lawyer to represent him. The judge, government lawyer, and interpreter were in the Tucson courtroom. He said the interpreter was hard to understand, and that the judge "humiliated me and degraded me."³⁵⁰

Juan P.

Juan P. is a Mexican asylum seeker who had worked as a mechanic before coming to the United States to escape violence. His wife and four children remain in Mexico, and he hoped that once he won his case they could join him and also receive asylum protection. Juan had been deported from the United States once before, nearly 20 years ago. This time, he presented himself at the border in Nogales, Arizona, and asked for asylum. He had been detained for six months when he met with us and had already attended his final merits hearing in person in Tucson. He described the judge who presided over his case as a "despot" and "unjust." The judge "skims 40 papers in one minute and doesn't allow release of transcripts," Juan said. "He doesn't let you speak." He said the court interpreters did not translate the conversation between the trial attorney and judge during the hearing. The merits hearing lasted only 20 minutes, during which the judge told Juan that his papers were "fake" and ordered him deported because he did not submit an application.

Juan went on to describe the hurdles he faced as he prepared for the hearing: When he needed a dental examination in order to provide evidence for his case, his ICE detention officer at La Palma told him that his family would have to pay for him to be transferred to another detention center. Two packets of forms he needed to complete for his case were lost. He asked to file a motion to request witnesses for his hearing but never received the proper paperwork. After facing repeated barriers to preparing his own case, Juan's family was forced to hire an expensive attorney. Juan said he dealt with depression and that sometimes the tension felt by so many of the people detained at La Palma resulted in fights. "Everyone has different problems and feels desperate," he said.³⁵¹

Tallahatchie County Correctional Facility, Tutwiler, Mississippi³⁵²



CoreCivic, the private prison company that runs the Tallahatchie County Correctional Facility, has traditionally contracted out the 2,672-person prison to hold people with criminal convictions sent by state governments across the country facing space shortages in their own facilities. In January 2018, California announced plans to remove approximately 1,300 inmates from the Tallahatchie facility as part of the state’s efforts to end its use of out-of-state prisons. A new contract with the U.S. Marshal Services for 850 beds helped make up this drop-off in business, coming online in June 2018 via an intergovernmental agreement with the Tallahatchie County Prison Board. ICE began detaining people in the facility in July 2018.³⁵³

At the time of our December 2019 visit to Tallahatchie, the prison’s population included state and federal prisoners from South Carolina, Puerto Rico, Arkansas, Texas, and Mississippi. Of the 1,033 people in the total population, 194 were detained by ICE. Facility officials told us that this number was considerably lower than as recently as September 2019, when ICE was detaining around 1,100 people in Tutwiler.

An ICE spokesperson described the Tallahatchie County facility as a “staging center” in which the agency would hold people awaiting credible or reasonable fear interviews, after which “all persons

temporarily held at this location are transferred to an ICE detention center in furtherance of their immigration proceedings.”³⁵⁴ At the time of our visit, officials told us that credible or reasonable fear interviews at the facility were occurring via phone. After the interview, ICE would transfer people to River Correctional Facility, Richwood Correctional Center, or other detention centers in Louisiana.

TABLE 10

Tallahatchie County Correctional Facility, Tutwiler, Mississippi

Location	Tutwiler, Mississippi
ICE Field Office	New Orleans
Miles from nearest metropolitan area	90 miles (Memphis, TN)
Type of contract	USMS IGA
Operated by	CoreCivic, Inc.
Facility capacity for ICE detainees	850 (194 during tour; Average Daily Population: 463)
Detainee type	Men
Per diem	unknown
Governing detention standards	National Detention Standards
Began ICE detention	July 2018
Number of detained people interviewed	31

Lack of Access to Legal Advice and Information

People detained at the Tallahatchie County facility reported being unable to access legal advice or information in advance of their credible fear interviews and feeling stymied by being asked to disclose upsetting, sensitive information in interviews conducted entirely over the telephone. Alan S. told us the lack of a lawyer was his biggest concern. He had been given a list of free or low-cost attorneys by ICE, but it had not proved helpful. “They tell me that in this facility there is nothing we can do,” he said.³⁵⁵ An organization he reached on the list told him he had to wait until his transfer

to Louisiana, after passing through the crucial step of a fear interview, to speak to an attorney. Several people detained at Tallahatchie reported that the cost of a phone call was a major barrier to accessing legal advice. Alan reported that he was unable to access meaningful legal advice during the one-minute free connection time provided by the facility. “In one minute, you can barely state your name ...What I want is to talk to somebody, to ask for help.”³⁵⁶

During our tour of the facility, we visited a law library designated for use by people detained by ICE. Officials told our team that ICE detainees have one hour per day in the library and can request additional time if scheduled for court. However, the library calendar stated that the units where detainees are housed have access only on Thursday and Friday, for a total of one hour per week. Detained people we spoke with told us they had not found the library useful or sufficient to understand their legal cases. Jorge K. said, “There is a library but I don’t know if I’m allowed [to use it] because I’m ‘high-level’ and they say we’re criminals.”³⁵⁷ Another person we interviewed who speaks an eastern European language, Dante J., told us there were no materials in the languages he could understand in the library.³⁵⁸

A Failed System: Telephonic Asylum Interviews

Several people we spoke with told us they felt unable to explain the reasons they feared being deported during telephone interviews with asylum officers and interpreters. As a DHS advisory committee found in 2016, “Without face to-face contact it is ... difficult for the detainee to develop a sense of trust or assess the reliability and trustworthiness of an interpreter.”³⁵⁹ A West African man who had received a negative credible fear finding told us that he felt unable to explain his experience of persecution to the asylum officer via the telephone because he didn’t understand the questions the asylum officer had asked via the interpreter.³⁶⁰ Another man, an indigenous language speaker who described his ability to



Entrance to Tallahatchie County Correctional Facility

communicate in Spanish as “only a little,” said he was not offered a credible fear interview in his language and received a negative determination.³⁶¹

Barriers to Parole

Several detained people told us that they had been granted positive credible or reasonable fear findings, which made them eligible for parole or bond. Some who had received positive determinations expressed confusion as to their eligibility for release. Jay V. said he was told he wouldn’t be able to request parole until he was transferred to Louisiana. Others said they were unable to use the phone system – either because of expense or technical difficulties – to communicate with the outside world in order to request required documents such as a letter from a sponsor with whom they could live.³⁶² Jorge K. said that in the two weeks he had been detained in Tallahatchie, “I haven’t been able to communicate with anyone since my pin number on the phone isn’t working.”³⁶³ It’s “hard to get credit on the phones,” said Joel B.³⁶⁴

Unhealthy Conditions of Confinement

At Tallahatchie, we visited two large units holding people classified as low security risks: one smaller unit holding people who were classified as high security, and a segregation area that at the time of our visit was empty. The large units consisted of warehouse-type spaces with double bunk beds, and a row of sinks and toilets. Bright fluorescent lighting illuminated the windowless space. People detained in these units consistently told us that the bright lighting was kept on all but four to five hours a day, causing them difficulty sleeping and persistent fatigue. Several cited this as the most difficult thing about being detained. Santino D., said the lights and noise of his sleeping area was affecting his health. “I can’t sleep,” he said.³⁶⁵

Aggressive and Abusive Treatment by Officers

Detained people also expressed concern about undignified, aggressive treatment by officers who were nearly uniformly unable to communicate in a language understood by the detained population. This translated, according to our interviews, into an environment of fear and intimidation. The officers “don’t respect you. They take away your dignity,” said Caleb D.³⁶⁶ Many people detained in Tallahatchie reported officers yelling at them in English. Franco G. remarked, “Even if you don’t understand what they are saying, you know they are yelling.”³⁶⁷ Officials told us that of the approximately 500 people employed at the Tallahatchie County facility, about 13 speak Spanish. The detained individuals at the time of our visit were primarily English- and French-speaking Cameroonians, as well as people from China, Central America, Cuba, and Jamaica.

Inadequate Medical Care and Mental Health Services

During our tour of the Tallahatchie facility, medical staff explained that detained people obtain care by submitting a sick call request in writing in their unit or by giving a request directly to a nurse during the several occasions when the nurse is

in the unit daily. They claimed that written sick call requests are picked up daily and that medical visits occurred within 24 hours of pick-up of the sick call slip. However, detained people we spoke with at Tallahatchie said they experienced much longer delays when requesting medical care, with several saying four to five days was the norm. Caleb D. said, “My knee is hurt. I fell 10 days ago. Six days ago, I asked to see the doctor and they haven’t called me. I ended up cutting up a sock and plastic glove to make a bandage for it.”³⁶⁸ “I asked to see the doctor for eye problems two weeks ago and have not been seen,” Luis F. said. “I had medicine for my eye pain, but they threw it away at the border.”³⁶⁹ Alan S. told us a friend detained in Tallahatchie was told “only if you are dying you’ll see a doctor.”³⁷⁰ “Only one doctor speaks Spanish,” Santino D. told us. “I told her I had a headache and they said shoo, shoo.”³⁷¹ Caleb D. told us that as a result of being detained, “I have had a panic attack. I am suffering. I cry like a child.”³⁷²

Luis F., an asylum seeker who said he was tortured before fleeing his country, said, “Every day it’s the same thing. I am traumatized. I have nightmares every night. I am tired and I am suffering inside.”³⁷³ Alan S. said a friend detained in his unit asked for a psychologist but got no response until he started cutting himself.³⁷⁴ Facility officials mentioned that they had recently screened someone who was cutting themselves for suicidal intent.³⁷⁵

Inappropriate Meal Timing; Unsanitary Food

Many detained people we spoke with raised concerns about the inappropriate timing of meals at Tallahatchie, with breakfast at 3 a.m., lunch at 11 a.m., and dinner at 3 p.m. “Some go hungry,” said Paco L.,³⁷⁶ because of the long time period between dinner and bedtime or because they do not wake up for breakfast. Others raised concerns about the safety, quality, and quantity of the food. Santino D. said the food is “horrible, with worms in the beans. It’s always the same, it doesn’t change.”³⁷⁷ Many told us they spend what money they have in the commissary to supplement the food provided by the facility.

Methodology

We utilized a mixed-method approach in order to document and better understand the expansion of detention facilities and the conditions these facilities provide. We provide a brief listing of the methods below; further details about each method are provided for each section of the report findings. Specifically, we used these methods:

1) Compilation and analysis of existing publicly available data released by Immigration and Customs Enforcement (ICE) and the Executive Office for Immigration Review (EOIR) on their websites.

2) Analysis of data obtained through:

- Publicly available data released by ICE
- ACLU Freedom of Information Act (FOIA) requests to ICE and EOIR
- Requests via state open records laws and FOIA for Intergovernmental Service Agreements and contracts for facilities
- Information published by the Transactional Records Access Clearinghouse (TRAC), obtained from the American Immigration Lawyers Association (AILA), and annual reports and U.S. Securities and Exchange Commission Forms 10-K and 10-Q for The GEO Group, Inc., and CoreCivic, Inc.

3) Site visits to five detention facilities, which included:

- Observations of facilities and interviews with ICE officials and detention facility staff and management
- Individual interviews with 150 individuals detained at all five facilities

Methods for Expansion by the Numbers

Facility identification: To identify new facilities brought online by ICE after January 20, 2017, we referenced ICE's publicly available spreadsheet, issued by ICE Enforcement and Removal's (ERO) Custody Management Division for both the Authorized Dedicated and Non-Dedicated Facility Lists, current as of January 6, 2020, and compared the list of facilities with ICE ERO's Average Daily Population (ADP) by Facility, May 2016-April 2017.

To confirm whether a facility is managed or owned by a private prison company and to determine facility capacity, we referenced ICE facility websites; websites for CoreCivic, Inc., The GEO Group, Inc., LaSalle Corrections, and MTC; facility contracts; news sources; and if not available from those sources, with direct calls to the facility.

Methods for Impossible Odds

Attorney availability: To calculate attorney availability, we relied on a database of immigration attorneys who practice removal defense obtained from the American Immigration Lawyers Association. Using addresses of these practitioners, we calculated the number of attorneys available within a 100-mile radius of each detention center and compared this number with the average daily population of each facility referenced in ICE's publicly available spreadsheet, issued by ICE ERO's Custody Management Division for both the

Authorized Dedicated and Non-Dedicated Facility Lists, current as of January 6, 2020.

Asylum and bond denial rates: To calculate asylum and bond denial rates, we analyzed asylum and bond data for FY 2019 provided by EOIR to TRAC, made available online in TRAC’s Asylum Decisions Database and TRAC’s Immigration Court Bond Hearings and Related Case Decisions Database. We compared the number of asylum cases denied with total asylum cases decided in FY 2019, and the number of bond hearings denied with total bond hearings decided in FY 2019. Where available, we used data provided for specific hearing locations located at the detention facility, matching the detention facility address with the hearing location address made available by TRAC. Where specific hearing location data was not available, usually in instances where detainees are transported in person to an offsite immigration court, we identified the correct immigration court for the detention facility with publicly available lists provided by EOIR or, if not available publicly from EOIR, by calling the facility’s ICE office. In those instances, we relied on TRAC’s data for the detained docket of the particular immigration court under hearing location, and where unavailable, on data provided for the appropriate immigration court.

Parole denial rates: Parole denial rates were calculated based on data provided to the ACLU by ICE in response to a Freedom of Information Act request. We compared the number of parole applications reportedly considered, and the number of applications granted and denied between March and December 2019, sorted by the appropriate ICE ERO field office.

Methods for Unsafe Conditions

Deaths in detention: We analyzed Detainee Death Reports provided by ICE on its website and media coverage of deaths in detention.

Sites and sample: Our investigation into conditions at new immigration detention centers

is based on visits to five immigrant detention sites in November and December 2019: Jackson Parish Correctional Center, Winn Correctional Center, and Richwood Correctional Center in Louisiana; La Palma Correctional Center in Arizona; and Tallahatchie County Correctional Facility in Mississippi. At each of the five facilities, researchers conducted site observations and inquiries with ICE officials, facility management and staff, and detained people, resulting in a total individual interview sample of 150.

Procedures and measures: Interviews and site visits were conducted through the stakeholder visitation protocol identified in ICE’s Performance-Based National Detention Standards Section 7.2, which provides for non-governmental organization stakeholder facility tours with visitation.

Interviews: The individual interviews consisted of 129 open-ended questions, including those about individuals’ circumstances, such as: detainee’s background, family, immigration history, case history, and issues related to prolonged detention and opportunity for release. Interviews also asked questions focused on general detention conditions, including medical and mental health care; abuse of force and safety issues; disciplinary practices and the use of solitary confinement; access to legal counsel and legal materials; communication with family and friends; and access to protection for detained people at particular risk.

Individual interviews were conducted in person at detention facilities by trained attorneys and legal assistants from the ACLU, Human Rights Watch, and NIJC. Individuals were identified by researchers from sign-up sheets posted in detention units by facility staff days before, or in some cases, the day of the site visit; researchers selected interviewees with an eye to distribution across housing units, languages spoken, and in some cases, gender. Interviews were conducted in English, Spanish, French, Portuguese, and Georgian. Where necessary, interviews were conducted simultaneously but out of earshot of others in separate portions of large private rooms.

Detainees were informed of the purpose of the interview and provided written consent. No compensation was offered for their participation. Due to concerns about potential retaliation, pseudonyms have been used for all detainees, except for one person who has been released from detention, has previously disclosed his name to the public, and provided consent to have his real name used in this report.

Site observations: Site observations occurred during ICE-led tours at each of the five facilities. During the facility tours, at least five researchers at each site visit documented their observations and responses to questions by ICE and facility staff. During each of the tours, we requested the opportunity to view facility housing units, segregation units, medical and mental health units, library, law library, kitchen, dining areas, recreation areas, and visitation rooms, and to speak with staff about facility policies and practices, although access to all of these areas was not always provided because facility staff did not permit viewing in some facilities. During the visits, we spoke to ICE and detention center staff about facility policies and practices, asking a standardized set of questions for each facility regarding intake and holding cells; residential areas; kitchen and meal service; medical care, including medical isolation, dental, emergency care, dental services, and mental health services; segregation; the law library; and access to counsel; immigration courts; visitation; and recreation. Researchers documented their observations and answers to questions provided by facility staff in a log for each facility. We did not review any written detainee records maintained by the facilities.

Limitations of Research

This study is limited in its reach, as certain information and statistical data has not been made available by ICE, EOIR, or other governmental agencies. We lack comprehensive data regarding

the total number of people detained since January 2017 and must rely instead on information regarding the average daily population of people in ICE custody. Our list of facilities brought online since January 2017 is likewise limited, as it is based on a comparison of lists released by ICE in January 2020 and January 2017, and may not account for facilities that have come online and/or closed during the intervening period. Current EOIR data regarding representation rates, sorted by hearing location, is unavailable. Data calculations were conducted in January and February 2020, analysis for average daily population was based on data released by ICE ERO in January 2020, and may not reflect the most current data; our calculations for asylum and bond grant rates are based on FY 2019 data. In addition, recent reports have suggested the existence of significant irregularities in data releases from EOIR under FOIA.³⁷⁸

Our investigation into conditions of confinement at detention facilities was limited to five sites. Moreover, our interviews were conducted in English, Spanish, French, Portuguese, and Georgian; we encountered several detainees who spoke other languages and could not participate in our interview process. We learned from people detained at some sites that facility staff identified researchers as ICE employees, and that immigrants had faced retaliation in prior tours and inspections by media and oversight bodies. Facility staff in some cases remained in the rooms where interviews took place. These factors may have deterred full and uninhibited responses to interview questions.

Appendices

APPENDIX TABLE A

New ICE Detention Facilities, 2017-2019

Name	City	State	Zip	ICE ERO Area of Responsibility	Type	Male/Female	FY20 ADP*	Over/Under 72 Status	Last Inspection Standard	Operator	Private Prison Company?	Dedicated/Non-Dedicated Facility
Winn Correctional Center	Winnfield	LA	71483	NOL	IGSA	Male	1,406	Over 72	PBNDS 2011	LaSalle	Private	Non-Dedicated
La Palma Correctional Center	Eloy	AZ	85131	PHO	IGSA	Male	1,828	Over 72	PBNDS 2011	CoreCivic	Private	Non-Dedicated
Adams County Det Center	Natchez	MS	39120	NOL	IGSA	Female/Male	1,073	Over 72	PBNDS 2011	CoreCivic	Private	Non-Dedicated
Richwood Correctional Center	Richwood	LA	71202	NOL	IGSA	Male	931	Over 72	PBNDS 2011	LaSalle	Private	Non-Dedicated
Jackson Parish Correctional Center	Jonesboro	LA	71251	NOL	IGSA	Female/Male	918	Over 72	PBNDS 2011	LaSalle	Private	Non-Dedicated
Montgomery Ice Processing Center	Conroe	TX	77301	HOU	CDF	Female/Male	899	Over 72	PBNDS 2011	GEO	Private	Dedicated
El Valle Detention Facility	Raymondville	TX	78580	SNA	IGSA	Female/Male	784	Over 72	PBNDS 2011	MTC	Private	Non-Dedicated
South Louisiana Detention Center	Basile	LA	70515	NOL	IGSA	Female/Male	753	Over 72	PBNDS 2011	GEO	Private	Non-Dedicated
Folkston Ipc (D Ray James)	Folkston	GA	31537	ATL	DIGSA	Male	806	Over 72	PBNDS 2011	GEO	Private	Dedicated
Catahoula Correctional Center	Harrisonburg	LA	71430	NOL	IGSA	Male	498	Over 72	PBNDS 2011	LaSalle	Private	Non-Dedicated
River Correctional Center	Ferriday	LA	71334	NOL	IGSA	Male	495	Over 72	NDS	LaSalle	Private	Non-Dedicated
Tallahatchie Co Corr Facility	Tutwiler	MS	38963	NOL	USMS IGA	Male	463	Over 72	NDS	CoreCivic	Private	Non-Dedicated
Limestone County Detention Center	Groesbeck	TX	76642	SNA	USMS IGA	Male	303	Over 72	NDS	LaSalle	Private	Non-Dedicated
Caroline Detention Facility	Bowling Green	VA	22427	WAS	DIGSA	Female/Male	268	Over 72	PBNDS 2011	Local	Public	Dedicated
Bossier Parish Cor. Center	Plain Dealing	LA	71064	NOL	USMS IGA	Male	240	Over 72	NDS	Local	Public	Non-Dedicated
Okmulgee County Jail	Okmulgee	OK	74447	DAL	IGSA	Male	228	Over 72	PBNDS 2011	Local	Public	Non-Dedicated
Wyatt Detention Center	Central Falls	RI	0863	BOS	USMS IGA	Male	118	Over 72	NDS	Local	Public	Non-Dedicated
Kay County Justice Facility	Newkirk	OK	74647	DAL	IGSA	Female	99	Over 72	PBNDS 2011	Local	Public	Non-Dedicated
Nye County Detention Center, Southern (Pahrump)	Pahrump	NV	89060	SLC	IGSA	Female/Male	77	Over 72	NDS	Local	Public	Non-Dedicated
Robert A. Deyton Detention Facility	Lovejoy	GA	30250	ATL	USMS CDF	Female/Male	28	Over 72	NDS	GEO	Private	Dedicated
Dallas County Jail - Lew Sterrett Justice Center	Dallas	TX	75202	DAL	USMS IGA	Female/Male	7	Under 72	NDS	Local	Public	Non-Dedicated

Name	City	State	Zip	ICE ERO Area of Responsibility	Type	Male/Female	FY20 ADP*	Over/Under 72 Status	Last Inspection Standard	Operator	Private Prison Company?	Dedicated/ Non-Dedicated Facility
Cowlitz County Juvenile	Longview	WA	98632	SEA	JUVENILE	Female/Male	4	Over 72	JFRMU Juvenile	Local	Public	Non-Dedicated
Oldham County Jail	La Grange	KY	40031	CHI	IGSA	Female/Male	3	Over 72	NDS	Local	Public	Non-Dedicated
Salt Lake County Metro Jail	Salt Lake City	UT	84119	SLC	USMS IGA	Female/Male	1	Under 72	NDS	Local	Public	Non-Dedicated
Yankton County Jail	Yankton	SD	57078	SPM	USMS IGA	Female/Male	1	Under 72	NDS	Local	Public	Non-Dedicated
Beaver County Jail	Aliquippa	PA	15001	PHI	USMS IGA	Female/Male	1	Over 72	NDS	Local	Public	Non-Dedicated
Northern Oregon Juvenile Detention	The Dalles	OR	97058	SEA	JUVENILE	Female/Male	1	Over 72	JFRMU Juvenile	Local	Public	Non-Dedicated
Platte County Jail	Wheatland	WY	82201	DEN	USMS IGA	Female/Male	1	Under 72	NDS	Local	Public	Non-Dedicated
Rockingham County Jail	Harrisonburg	VA	22801	WAS	USMS IGA	Female/Male	1	Under 72	NDS	Local	Public	Non-Dedicated
Bremer County Jail	Waverly	IA	50677	SPM	USMS IGA	Female/Male	0	Under 72	NDS	Local	Public	Non-Dedicated
Tooele County Jail	Tooele	UT	84074	SLC	USMS IGA	Female/Male	0	Under 72	NDS	Local	Public	Non-Dedicated
La Plata County Jail	Durango	CO	81303	DEN	USMS IGA	Female/Male	0	Under 72	NDS	Local	Public	Non-Dedicated
Ogle County Jail	Oregon	IL	61061	CHI	USMS IGA	Female/Male	0	Over 72	N/A	Local	Public	Non-Dedicated
Maine Youth Center - Long Creek	South Portland	ME	04106	BOS	JUVENILE	Female/Male	0	Under 72	N/A	Local	Public	Non-Dedicated
Grand Forks County	Grand Forks	ND	58206	SPM	JUVENILE	Female/Male	0	Under 72	N/A	Local	Public	Non-Dedicated
Abraxas Academy Detention Center	Morgantown	PA	19543	PHI	JUVENILE	Female/Male	0	Over 72	JFRMU Juvenile	GEO	Private	Non-Dedicated
Northern Virginia Juvenile Detention Center	Alexandria	VA	22304	WAS	JUVENILE	Female/Male	0	Under 72	N/A	Local	Public	Non-Dedicated
Roanoke City Jail	Roanoke	VA	24016	WAS	USMS IGA	Female/Male	0	Under 72	NDS	Local	Public	Non-Dedicated
Compass House Shelter	Buffalo	NY	14209	BUF	JUVENILE	Female/Male	0	Under 72	N/A	Local	Public	Non-Dedicated
Santa Cruz County Jail	Nogales	AZ	85621	PHO	USMS IGA	Female/Male	0	Under 72	NDS	Local	Public	Non-Dedicated

*Indicates FY 2020 Average Daily Population (ADP) through December 2019

Deaths in Immigration Detention, January 2017-February 2020

Number	Name	Gender	Age at Death	Country of Birth	Date of Death	Detention Center	Detainee Death Review Publicly Available	Apparent Suicide	Covered in Code Red
1	Roger Rayson	M	47	Jamaica	3/13/17	Jena/LaSalle Detention Facility, LA	No	No	Yes
2*	Osmar Epifanio Gonzalez-Gadba	M	32	Nicaragua	3/28/17	Adelanto Correctional Facility, CA	Yes	Yes	Yes
3	Sergio Alonso Lopez	M	55	Mexico	4/13/17	Adelanto Correctional Facility, CA	Yes	No	Yes
4	Jean Carlos Alfonso Jimenez Joseph	M	27	Panama	5/15/17	Stewart Detention Center, GA	No	Yes	Yes
5	Atulkumar Babubhai Patel	M	58	India	5/16/17	Atlanta City Detention Center, GA	No	No	Yes
6	Vicente Caceres-Maradiaga	M	46	Honduras	5/31/17	Adelanto Correctional Facility, CA	No	No	Yes
7	Rolando Mesa-Espinoza (identified by ICE as Carlos Mejia-Bonilla)	M	44	El Salvador	6/12/17	Hudson County Correctional Facility, NJ	No	No	Yes
8	Osvadis Montesino-Cabrera	M	37	Cuba	9/1/17	Krome North Service Processing Center, FL	Yes	Yes	Yes
9	Kamyar Samimi	M	64	Iran	9/17/17	Denver Contract Detention Facility, CO	No	No	Yes
10	Felipe Almazan-Ruiz	M	51	Mexico	9/17/17	IAH Secure Adult Detention Center, TX	No	No	Yes
11	Yulio Castro-Garrido	M	33	Cuba	1/18/18	Stewart Detention Center, GA	No	No	Yes
12	Luis Ramirez-Marcano	M	59	Cuba	2/19/18	Krome Detention Center, FL	No	No	Yes
13	Gourgen Mirimanian	M	54	Armenia	4/10/18	Prairieland Detention Center, TX	No	No	Yes
14	Ronal Francisco Romero (identified by ICE as Ronald Cruz)	M	39	Honduras	5/21/18	Port Isabel Detention Center, TX	No	No	Yes
15	Roxana Hernandez (identified by ICE as Jeffrey Hernandez)	F	33	Honduras	5/25/18	Cibola County Correctional Center, NM	No	No	Yes
16	Zeresenay Ermias Testfatsion	M	34	Eritrea	6/8/18	In custody during deportation to Eritrea	No	Yes	No
17	Huy Chi Tran	M	47	Vietnam	6/16/18	Eloy Detention Center, AZ	No	No	No
18	Efrain De La Rosa	M	40	Mexico	7/12/18	Stewart Detention Center, GA	No	Yes	No
19	Augustina Ramirez-Arreola	M	62	Mexico	7/27/18	Otay Mesa Detention Center, CA	No	No	No
20	Wilfredo Padron	M	58	Cuba	11/2/18	Monroe County Detention Facility, FL	No	No	No
21	Mergensana Amar	M	40	Russia	11/26/18	Northwest Detention Center, WA	No	Yes	No
22	Guerman Volkov	M	56	Russia	12/3/18	Baker County Detention Facility, FL	No	No	No
23	Abel Reyes-Clemente	M	54	Mexico	4/4/19	Florence Service Processing Center, AZ	No	No	No

Number	Name	Gender	Age at Death	Country of Birth	Date of Death	Detention Center	Detainee Death Review Publicly Available	Apparent Suicide	Covered in Code Red
24	Jose Ibarra Bucio	M	27	Mexico	3/21/19	"Released" while hospitalized two weeks prior to death; previously detained in the Adelanto Detention Center, CA	N/A	No	No
25	Simratpal Singh	M	21	India	5/6/19	La Paz County Jail, AZ	No	Yes	No
26	Johana Medina Leon	F	25	El Salvador	6/1/19	"Released" while hospitalized four days prior to death; previously detained in Otero County Detention Facility, NM four days prior to her death	N/A	No	No
27	Yimi Alexis Balderramos-Torres	M	30	Honduras	7/1/19	Houston Contract Detention Facility, TX	No	No	No
28	Pedro Arriago-Santoya	M	44	Mexico	7/25/19	Stewart Detention Center, GA	No	No	No
29**	Roberto Rodriguez-Espinoza	M	37	Mexico	9/12/19	McHenry County Adult Detention Facility, IL	No	No	No
30	Nebane Abienwi	M	37	Cameroon	10/2/19	Otay Mesa Detention Center, CA	No	No	No
31	Roylan Hernandez Diaz	M	43	Cuba	10/16/19	Richwood Correctional Center, LA	No	Yes	No
32	Anthony Oluseye Akinyemi	M	56	Nigeria	12/23/19	Worcester County Jail, MD	No	Yes	No
33	Samuelino Pitchout Mavinga	M	40	France	1/1/20	Torrance County Detention Facility, NM	No	No	No
34	Ben James Owen	M	39	United Kingdom	1/25/20	Baker County Detention Facility, FL	No	Yes	No
35	Name not released	M	63	Cuba	1/27/20	In custody in unnamed detention center (Florida)	No	No	No
36	David Hernandez Colula	M	34	Mexico	2/20/20	Northeast Ohio Correctional Center	No	Yes	No
37	Maria Celeste Ochoa Yoc de Ramirez	F	22	Guatemala	3/8/20	El Valle Detention Facility	No	No	No
38	Name Not Released	M	27	Honduras	3/18/20	Karnes County Residential Center	No	Yes	No
39	Ramiro Hernandez Ibarra	M	42	Mexico	3/21/20	Port Isabel Detention Center	No	No	No

Source: Immigration and Customs Enforcement

*Medical experts concluded, however, that inadequate mental health care and the use of isolation may have significantly exacerbated Mr. Gonzalez's mental health problems.

** A doctor who examined ICE's short "detainee death report" on Mr. Rodriguez's care noted that a seven-hour delay to take him to the hospital after he first began exhibiting symptoms of a brain hemorrhage did not "seem consistent with adequate care."³⁷⁹

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- 300 Interview with Rosa F., Jackson Parish Correctional Center, Nov. 12, 2019.
- 301 Interview with Emma Z., Jackson Parish Correctional Center, Nov. 12, 2019.
- 302 Interviews with Miguel L., David S., and Emma Z., Jackson Parish Correctional Center, Nov. 12, 2019.
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- 326 Interview with Rafael H. at La Palma Correctional Center, Dec. 3, 2019.
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- 329 Interview with Jonathan C. at La Palma Correctional Center, Dec. 3, 2019.

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- 332 Interview with Arturo J. at La Palma Correctional Center, Dec. 3, 2019.
- 333 Interview with Ruben G. at La Palma Correctional Center, Dec. 3, 2019.
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