

COVID-19 and immigration detention in the USA: time to act



Over 37 000 immigrants are currently detained by Immigration Customs Enforcement (ICE) in more than 130 facilities across the USA.¹ As understandable fear of the coronavirus disease 2019 (COVID-19) pandemic intensifies in the USA, so too does the imminent danger ICE prisons pose not only to the vulnerable populations detained within their walls but to the nation's public health. Given the urgent need to control the spread of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), ICE should release all detained immigrants posing no threat to public safety.¹

Overcrowding, poor sanitation, inadequate healthcare, and difficulty containing contagious diseases are well documented in ICE's immigration detention system.^{3,4,5} Most facilities are run by private prisons or county jails through lucrative ICE subcontracts. Distancing and other necessary measures to prevent SARS-CoV-2 from spreading are not possible in immigrant prisons. These congregate detention facilities pose a great contagion risk: already, several staff at different immigrant detention centres have tested positive for COVID-19 and detainee infections are being reported as well.⁶

Since 2014, the detained immigrant population has skyrocketed. Last year, ICE detained over 500 000 immigrants, more than the rest of the world combined.^{2,7} This reflects harsh policies implemented by the US President Administration, including mandatory detention of asylum seekers and a dramatic reduction in parole.

ICE detention facilities are often located in small, isolated towns that employ local residents who move each day between facility and community. As SARS-CoV-2 spreads, local health-care systems will be overwhelmed. For example, within 80 miles of the 1000 bed Pine Prairie, Louisiana, detention facility, there are only eight ICU beds.

Making matters worse, thousands of inmates are transferred between centres each year. This practice continues as does deporting potentially infected detainees to their home countries. Arguably, it would be difficult to devise a system better suited for spreading SARS-CoV-2.

Most immigrant detainees have no criminal record and immigration proceedings are civil, not criminal.⁸ Immigrant detainees include asylum seekers who fled their countries because of torture, persecution, and

violence. For such traumatised individuals, immigration detention can cause severe psychological distress including depression and post-traumatic stress disorder.⁸ Continued imprisonment during this pandemic could result in even more severe harm to the mental health of immigrant detainees.

Moreover, the Migration Protection Protocol (MPP) has created an enormous and potentially dangerous SARS-CoV-2 reservoir on the US–Mexican border. Last year under that policy, nearly 60 000 asylum seekers—including women and children—were forced to remain in Mexico during the asylum application process,⁹ and live in unsanitary, overcrowded, makeshift encampments with no healthcare system, and violence.

ICE has full authority to release detained immigrants. “Unlike the Federal Bureau of Prisons, ICE has complete control over the release of individuals. ICE is not carrying out the sentence imposed by a federal judge,” notes one former ICE Director.¹⁰

As the USA and the rest of the world attempt to stave off the worst pandemic in generations there can be no doubt that continuing to hold immigrant detainees in overcrowded facilities is not only cruel but dangerous. Moral and public health necessity requires immigrant detention to stop. Failure to do so endangers the tens of thousands of civil immigrant detainees and our society.

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