The Survivors
Stories of People Released from ICE Detention During the COVID-19 Pandemic
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Acknowledgements

We are indebted to the courageous people who have shared their experiences of detention with us. This report would not have been possible without them.

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This report provides a window into the conditions of immigration detention from the perspective of people who survived and gained freedom from Immigration and Customs Enforcement (ICE) detention facilities during the COVID-19 pandemic. The report also highlights some of the most egregious ways in which ICE and its contractors failed to protect detained people and, in some cases, sought to obscure the truth.

As early as February 2020, medical experts for the U.S. Department of Homeland Security (DHS) began to sound the alarm. The danger: a new illness called COVID-19 and the threat it would pose to the more than 50,000 people locked inside immigration detention facilities each day. These experts warned of a tinderbox scenario; COVID-19 was certain to spread rapidly within detention facilities in the coming months and overwhelm local health resources with high-risk patients. They also warned that ICE’s extensive transfer of people between detention facilities could exacerbate the virus’ reach with devastating consequences, both across the U.S. and in other nations. The experts recommended that ICE implement alternatives to detention and release detained people to allow for as much social distancing as possible, limit the transfer of detainees, and enact rigorous processes for screening, testing, isolation, and quarantine.

ICE, however, failed to take the most basic precautions to protect detained people in its care, a disproportionate number of whom are Black and Brown people. Immigrants in detention slept, ate, and bathed in crowded, unventilated housing units, often within arm’s length of one another. In detention centers across the country, detained people begged for the basic means to protect themselves from the virus: soap, cleaning supplies, and masks. Yet, as the virus began to spread within detention facilities, ICE and its contractors—the
private prison companies and local jails that make up the immigration detention system—failed to protect them, leaving thousands defenseless against the virus. Officers moved in and out of facilities—and between units—without masks, introducing the virus into detention centers. In some instances, detention officials explicitly instructed their staff not to wear masks, for fear of inciting panic. In one detention facility, detained people were offered masks—but only if they signed a waiver releasing CoreCivic, the private prison company that operated the facility, from liability.

In facilities across the country, detained people resorted to hunger strikes in their pleas for soap, protective equipment, and information about the virus, only to be met with brutal force and solitary confinement. As the pandemic progressed, instead of expending resources on keeping detained people safe, detention facilities increased their use of pepper spray, pepper balls, spray grenades, and other weapons against detained people at record levels.

ICE officials also refused to test people in detention for COVID-19 at facilities nationwide, leading to dangerous undercounts of cases and allowing for the uncontrolled spread of the virus within and between detention facilities. In at least one case, ICE officials explicitly refused to test detained people for COVID-19 to avoid the logistical challenges associated with quarantine. ICE’s frequent transfers of people between detention facilities—including from detention facilities with known COVID-19 cases—sparked outbreaks of the virus at new facilities. In one particularly egregious example, ICE officials flew detained people from Arizona and Florida facilities with COVID-19 outbreaks to a Farmville, Virginia, facility, to facilitate the deployment of DHS officers to quell racial justice protests in Washington, D.C., sparked by the killing of George Floyd. These unnecessary transfers ultimately led to a COVID-19 outbreak at the Farmville facility, resulting in at least one detained man’s death. ICE’s mismanagement of COVID-19 also contributed to widespread outbreaks in the communities surrounding detention facilities—perhaps as high as 5.5 percent of all U.S. cases, according to one estimate. ICE’s role as an active vector for the spread of COVID-19 was not limited to the U.S.: ICE deported thousands of people from detention without first testing them for COVID-19.
The figures do not include the number of infected or deceased employees and staff at detention facilities—the majority of whom are low-paid workers employed by private prison companies. These figures also fail to include the number of people who have been hospitalized for COVID-19 and those who continue to suffer serious and long-lasting illness after contracting the virus in detention.

The ACLU’s litigation has provided a unique window into the conditions of confinement in detention facilities nationwide during the pandemic, and into ICE’s actual practices at detention facilities. This report documents many instances in which courts have noted ICE’s failure to provide safety to detained people in its custody—and, even more egregiously, cases in which courts found that ICE made false statements, covered up facts, or tried to mislead the court about the true conditions of confinement in detention.

This report also provides first-hand accounts from people who survived the COVID-19 pandemic in ICE detention and were released as a result of the ACLU’s nationwide litigation campaign. They include people who had just come to the United States seeking asylum, as well as people who have spent decades in the United States. They include people with children and grandchildren waiting for their return home from detention, ready for help with remote schooling; and new parents who could not be with their partners during childbirth, who waited months to meet babies born during their detention. They include restaurant workers, construction workers, medical assistants, students, and aspiring business owners.

As these stories show, ICE’s treatment of immigrants in detention during the COVID-19 crisis has had profound costs, both tangible and intangible. Many people recount the terror they felt as the virus swept through their crowded cells, with little protection. Some contracted COVID-19 and continue to suffer debilitating illness. Others reflect on the cost of detention on their families and loved ones: missed births, children left behind, strains on family finances, and immigration cases. Since their release, these individuals have successfully worked to rebuild their lives with their families and loved ones, raising the question why ICE insisted on their detention in the first place.

We honor the lives of Martin Vargas Arellano, Jesse Jerome Dean Jr., Choung Won Ahn, Oscar Lopez Acosta, and Carlos Escobar Mejía, all of whom died after contracting COVID-19 in detention or as a result of inadequate medical or mental health care at facilities where the ACLU and its partners brought suit during the COVID-19 pandemic. Their deaths were senseless and preventable, and they should be alive and free today. We mourn the tragedy of their deaths and those of other detained people who have lost their lives in ICE custody.

ICE has dramatically reduced the average daily population of its detention facilities to under 14,000 people—down from more than 50,000 at the start of the pandemic. COVID-19 continues to pose a unique threat to people who remain in detention, given the congregate nature of detention centers with highly transient populations and the emergence of new viral variants. There is no way to truly end the COVID-19 pandemic without addressing conditions in immigration detention. But as we move cautiously toward a time when COVID-19 does not pose the same imminent threat to our communities, we must not return to an immigration system run as before. The Biden administration has a new opportunity to realign its immigration enforcement priorities, reimagine how due process is provided to all immigrants, and end the mass immigration detention system as we know it.
To the U.S. Department of Homeland Security (DHS):

1. Close detention facilities nationwide, including facilities located in remote areas, opened without clear justification,15 and those with established records of abuse—including during the COVID-19 pandemic.

2. Replace detention with community-based case management. Establish a nationwide program of community-based alternatives to detention run by nonprofit organizations providing case management services.

3. Issue a directive on COVID-19 and ICE detention that requires critical measures to protect detained individuals, including:
   a. Immediate release of people who are medically vulnerable to COVID-19, based on age or pre-existing health condition, as defined by current CDC recommendations, until the end of the COVID-19 pandemic;
   b. Reduction of the population in ICE detention centers to allow for six-foot social distancing in every ICE detention facility until the end of the COVID-19 pandemic;
   c. A commitment not to redetain individuals released due to the COVID-19 pandemic absent a compelling, individualized reason to do so;
   d. Equitable and consistent vaccine access and education and COVID-19 testing and treatment for all detained people and staff; and
   e. Halt transfers between ICE detention facilities, and from criminal custody to ICE detention facilities.

4. Ensure greater transparency and accountability in the immigration detention system, including:
   a. Public release of all information related to detention contracts;
   b. 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 rights of detained immigrants;
   c. Comprehensive facility inspections and meaningful consequences for failed inspections assessing compliance with detention standards, including facility closure;
   d. Public release of data regarding COVID-19 hospitalization of ICE detainees;
   e. Public reporting of hospital deaths of individuals who have passed away after release from ICE custody;
   f. Comprehensive investigations of deaths in custody and deaths related to in-custody treatment, with results available to the public within three months of being finalized. Provide public reporting on suicide attempts, hunger strikes, work stoppages, use of solitary confinement, use of force, and other significant events at detention centers;
5. A ban on the use of solitary confinement in immigration detention;

6. Access for all people in immigration detention to timely, quality medical, mental health, and dental care; and

7. Adequate food, water, hygiene supplies, sanitary conditions, and environmental safety at all detention facilities.

To Congress:

1. Reduce funding for immigration detention and increase funding for community-based alternative-to-detention programs, including those that provide appointed counsel in immigration proceedings.

2. Conduct robust oversight of ICE detention through hearings with ICE officials; visits and interviews (remote and in-person) at detention facilities; and requests to the DHS Office of Inspector General for investigations and recommendations.

3. Enact legislation that will significantly reduce detention and promote accountability, including the Dignity for Detained Immigrants Act and the New Way Forward Act.

To State and Local Governments:

1. End contracts with ICE for detention and enact measures to promote accountability, including extending prison and jail inspections to facilities that detain immigrants.

2. Exercise authority over immigration detention facilities in their jurisdictions to ensure compliance with public health regulations and pandemic protocols.

3. Enact legislation and provide funding for the appointment of immigration counsel and bond for detained immigrants.
Obtaining an accurate picture of ICE’s detention operations has always posed a challenge; even prior to the COVID-19 pandemic, the public faced enormous barriers to information about conditions in detention. The COVID-19 pandemic has exacerbated this lack of transparency as facilities have closed their doors to outsiders, including oversight agencies, attorneys, service providers, and families.

Litigation regarding conditions of confinement during the COVID-19 pandemic, however, has provided an important window into ICE detention facilities in this time. The rules of federal litigation require the government to produce documents and information relevant to claims raised in a lawsuit, and ethical rules forbid government attorneys from knowingly making false statements of fact or offering evidence known to be false.16

Unfortunately, throughout the ACLU’s litigation with ICE, the government’s accounts of detention conditions could not always be trusted. In several instances, federal courts have singled out ICE’s representations as lacking candor or failing to accurately represent true conditions in detention.

• Failure to report COVID-19 related deaths to the court or the public. Martin Vargas Arellano, a 55-year-old immigrant with several serious health conditions, including schizophrenia, diabetes, and hepatitis, first contracted COVID-19 at the Adelanto Detention Center in California in December 2020. He was hospitalized several times in the following months, but ICE refused to release him from custody. As his condition grew worse, ICE officials decided to release him three days before his death at a California hospital. As a result, ICE avoided mandatory reporting requirements for in-custody deaths.

• ICE, however, failed to notify his immigration attorney of his hospital “release” or death, instead leading his attorney to believe that he had been released to the community. Counsel learned that Martin had died in the hospital only after his immigration attorney filed a missing person report. ICE also failed to provide the court with notification of his death in Hernandez Roman v. Wolf, a class action case brought by the ACLU of Southern California regarding COVID-19 conditions at the Adelanto Detention Center. Upon learning about ICE’s failure to inform the court about Martin, the court noted that “it appears that the Government actively concealed the seriousness of Mr. Arellano’s condition, and his subsequent death, from his counsel and the Court by reporting that Mr. Arellano was released from detention on March 5, 2021. The Court has significant concerns regarding the Government’s actions and lack of candor based on the disturbing facts reported in the Notice of Death.”17

Counsel learned that Martin had died in the hospital only after his immigration attorney filed a missing person report.
ICE’s practice of releasing detained people from custody when they are hospitalized and near death is of particular concern, given that ICE has refused to publicly release information and statistics regarding the number of people who have been hospitalized for COVID-19 during the pandemic. This practice raises serious concerns as to the accuracy and validity of ICE’s statistics regarding the number of deaths that have occurred as a result of the COVID-19 pandemic in detention.

• Providing False Testimony and Obstructing Proceedings. In Zepeda Rivas v. Jennings, the court has repeatedly concluded that ICE and its lawyers misrepresented critical facts about its management of COVID-19 at the Yuba County Jail and Mesa Verde ICE Processing Facility in California. For example, the court noted that defendants submitted a declaration from ICE Assistant Field Office Director Alexander Pham “falsely stating that Mesa Verde was imposing a 14-day quarantine on all new arrivals from facilities with reported cases of COVID-19 when no such quarantine existed.” The court also noted that defendants “made additional false statements,” including testimony by ICE Deputy Field Officer Erik Bonnar regarding the dates and decision-making process to empty the women’s dorm as a precautionary measure. The court further took issue with ICE’s conduct during depositions, noting that “at least one ICE official with significant decision-making authority over Mesa Verde obstructed the proceedings by effectively refusing to answer, during his deposition, even the most basic questions about ICE’s response to the pandemic.”

• False Statements About COVID-19 Testing in Sworn Declarations. A federal judge in Coreas v. Bounds noted that ICE’s Deputy Assistant Director for Healthcare Compliance Jennifer Moon had sworn in a declaration under penalty of perjury that the government had tested all detainees in Maryland detention facilities with COVID-19 symptoms. After a review of ICE’s own records, which showed that the government had kept a list of detainees with suspected COVID-19 symptoms but had not tested them for the virus, the court concluded that “this statement, which the court relied upon in deciding [a prior] motion, proved to be demonstrably false.” Indeed, the court concluded that “Respondents’ withholding of this information and failure to correct the record on this point … raises significant doubt whether the [detention center] will reveal suspected cases when they arise as to facilitate proper testing and responsive measures to protect the detainee population, or whether it will conceal suspected cases in the future and take no action, at substantial risk to the detainee population.”

ICE’s failure to provide complete and accurate information regarding the COVID-19 pandemic in detention also extends to the agency’s public reporting. ICE maintains a public website about COVID-19 in detention, including a selection of statistics. The website provides information about the number of people currently detained, the number of confirmed COVID-19 positive cases under isolation or monitoring in custody, the reported number of detainees tested (in aggregate), the number of detained people who have died from COVID-19, and the total number of confirmed COVID-19 cases.

Close analysis of this data, however, is deeply troubling. ICE’s data appears to be incomplete, as the website has apparently removed data on facilities with previously confirmed cases and has not reported any information at all on some facilities. It also appears that there are significant irregularities in the data presented. For example, some analysts have concluded that ICE’s data is inconsistent with COVID-19 trends, with inexplicably sharp increases and decreases in the number of current cases per facility.

ICE has also refused to provide crucial information necessary to understand the true impact of COVID-19 on detainees and surrounding communities. For example, although the government publicly reports the number of ICE employees who have tested positive, this does not include what ICE calls “third-party contractors.” This approach likely excludes a large majority of detention officials in close contact with immigrants, because approximately 80 percent
of immigrant detainees are held at facilities owned or operated by private prison companies. Indeed, according to media reports, at least five employees of private prisons holding ICE detainees have died of COVID-19. ICE, however, has failed to publicly account for these deaths.

ICE’s lack of transparency and candor, particularly during a public health crisis, should raise deep concern. The importance of accurate data and public reporting is critical not only to keeping the agency accountable, but to protecting the lives of people in its custody. Unfortunately, ICE’s actions throughout the COVID-19 pandemic have failed us all.
Stories from Detention

Alejandra

Alejandra is a trans Mexican woman who was detained for over a year by ICE. A survivor of cartel violence, she escaped to the United States and presented herself at a port of entry at the border to seek asylum. Rather than receive the protection she sought, Alejandra was instead met with detention and the brutal conditions that accompanied it. Alejandra was sent to Eloy Detention Center in Arizona and placed in an all-male unit. Alejandra’s transphobic placement at Eloy put her in a dangerous position as a woman surrounded by and housed with men. She was later transferred to another ICE facility, La Palma Correctional Center, where she was again placed in an all-male unit and faced sexual abuse and harassment at the hands of other people in detention. In an interview with the ACLU, Alejandra noted the “discrimination and abuse” she and other trans women faced at La Palma. Instead of being placed somewhere that would ensure her safety, detention officials locked her up in solitary confinement. In her time there, Alejandra witnessed COVID-19 outbreaks among detainees.

“When the coronavirus situation first happened, people were all crammed together with no face coverings. They didn’t give us hand sanitizer or gloves, none of that. The [officers] would work and cough without any face coverings or protection. And they come from the outside while we are inside. I think that’s how people started getting infected.”

She and others at the facility were not given masks, sanitizer, or gloves, even as the center was staffed by unmasked, coughing correctional officers. The ACLU spoke to Alejandra after her release. “When they told me I was getting out, I was so happy,” she said. “I’m doing really well with my sponsors now; they’re beautiful people. They treat me very well. After so much struggling, here I am.”

“The [officers] would work and cough without any face coverings or protection.”

— Alejandra
Eloy Detention Center, Eloy, AZ

**Operator:** CoreCivic, Inc.

**Capacity:** 1,596 people

**Key facts:** Eloy was the site of one of the largest COVID-19 outbreaks in ICE detention facilities nationwide, with more than 400 detained people confirmed to have COVID-19.\(^{29}\)

After the death of a guard from COVID-19 at Eloy, officers began to speak out, confirming detainees’ reports that guards were told to ration masks and gloves, were given garbage bags with holes cut in them instead of protective gowns when entering isolation pods, and were given watered-down cleaners to sanitize surfaces. Officers confirmed that management pressured them to keep working even after showing signs of infection, and that ICE continued to transfer detained people during outbreaks to other detention facilities, spreading the virus across the country.\(^{30}\)

In one alarming incident at Eloy, officers reported that a sick detainee was instructed to hold a frozen water bottle against his forehead until his temperature dropped to normal in order to deport him.\(^{31}\)

La Palma Correctional Center, Eloy, AZ

**Operator:** CoreCivic, Inc.

**Capacity:** 3,060 people

**Key Facts:** La Palma is the site of the largest COVID-19 outbreak in ICE detention nationwide, with more than 810 detained people confirmed to have COVID-19.\(^{32}\)

The Department of Homeland Security’s Office of Inspector General (OIG) investigated La Palma’s response to COVID-19 and issued a report concluding that conditions at the facility “threatened the health, safety, and rights of detainees” and “created an environment of mistreatment and abuse.” The OIG’s report confirmed that the facility failed to provide basic protective equipment to detained people and did not require guards to wear masks, and that “this failure may have contributed to the widespread COVID-19 outbreak at the facility.”

The OIG’s report also confirmed officers’ use of force and abuse of detained people who engaged in peaceful protests to request protective equipment, such as masks and hand sanitizer, to protect themselves from COVID-19. As the OIG confirmed, “staff deployed chemical agents from the ceiling,” deployed “pepper spray from handheld devices,” and launched pepper balls against detainees. Facility officials later punished detained people with lengthy stays in solitary confinement.

The OIG further confirmed that La Palma’s medical unit was “understaffed, operating below requirements,” creating delays in critical care, refills for essential medications, and medical visits.\(^{33}\)
Oscar Xirum Sanchez

Oscar Xirum Sanchez is a 42-year-old husband and father of two. He has lived in the United States for 18 years, and his wife and two daughters, age 6 and 3, are all U.S. citizens. Oscar was detained for four months in ICE custody at the Calhoun County Correctional Facility in Michigan until he was released as a result of litigation brought by the ACLU.

Oscar remembers how terrifying it was to be locked up in detention during the pandemic. He suffers from high blood pressure and liver issues, putting him at high risk of getting very ill from COVID-19. Social distancing guidelines were not enforced, there were not enough COVID-19 tests, and medical care was limited and inadequate at Calhoun. He also remembers how afraid everyone was. “One time, a guard said they would punish us and send us to a dirty cell if we kept saying there was COVID in the facility,” Oscar remembered.

In October 2020, Oscar’s worst nightmare came true: He tested positive for COVID-19 during an outbreak of the virus at Calhoun. For a whole month, Oscar suffered from a painful cough, difficulty breathing, severe muscle pain, and a fever that at one point reached 106 degrees.

Medical treatment at Calhoun for COVID-19 patients was almost nonexistent. At one point, seeking help, Oscar told a nurse at the facility that he had a fever. Instead of providing help, he recalls that the nurse responded, “You think you have a fever, but you do not. You are not sick.” Twenty days after he started experiencing symptoms, Oscar was finally quarantined away from his fellow detainees. During his 11-day quarantine, he did not receive clean sheets, was not allowed to shower, and was given only 500 milligrams of Tylenol every 12 hours for his severe symptoms. Oscar remembers that he was not allowed to communicate with anyone outside the facility for approximately three weeks during this time.

Oscar thinks he was the sickest person in the facility and that the guards did not want this information to be communicated to his family. His wife had to go to Calhoun to talk to him over video—something she could and should have been able to do at home.

The Sanchez family is still dealing with the consequences of Oscar’s time at Calhoun. Oscar still has difficulty breathing and suffers from muscle pain. “The facility doctor told me my lungs got smaller. He told me I needed medication and exercises. They never gave it to me [at Calhoun],” Oscar said. His 6-year-old daughter cries and questions him every time he leaves the house, scared he is not coming back.

Oscar is currently working with an immigration attorney in the hopes of obtaining a green card through his U.S. citizen wife. “I take my daughters to the park every day. I am very close to them. I am a family man. I volunteer at my church. I am barely getting used to it again. I am trying to make our life normal again,” Oscar said.

“One time, a guard said they would punish us and send us to a dirty cell if we kept saying there was COVID in the facility...”

— Oscar
Humberto

Humberto is a 28-year-old father from Cuba. Humberto fled to the United States after he was beaten, threatened with death, and mistreated—both physically and psychologically—by the Cuban National Police for expressing his disagreement with the government. After being beaten by the police to the point of hospitalization, Humberto was forced to flee Cuba and leave his two small children behind.

Humberto sought asylum at the Brownsville Port of Entry in November 2018 and was found to have a credible fear of torture following an interview with an asylum officer. He was detained for over a month before being released on parole. Humberto was later redetained by ICE after the resolution of a criminal case despite all criminal charges being dropped. He was detained by ICE at the Calhoun County Correctional Facility in Michigan for over 15 months until he was released on bail in September 2020 through an ACLU lawsuit.

“I was scared to contract COVID because they do not have good medical care. They do not have the resources to take care of you. Everyday a new detainee came in. I did not know how they would control the spread,” Humberto said recounting his experience at Calhoun. Humberto suffers from chronic asthma, depression, anxiety, and heart issues. While he was detained, he was not provided an inhaler and experienced several asthma attacks. In response to his requests for medical assistance, he was put in solidarity confinement.

While detained, Humberto expressed fear that he was being targeted by the guards at Calhoun for speaking to the ACLU. “I felt very unsafe. They treat you like a dog. They are racist for no reason,” Humberto said. He recounts an instance when the guards beat him and knocked out the crown of his tooth for jumping over a chair in the television room. He recalls that a guard put his foot on Humberto’s neck, falsely claiming that he was resisting. It wasn’t until Humberto told the guard he could not breathe that the guard took his foot off Humberto’s neck.

After being released, Humberto moved in with his mother and step-father in Nebraska. “I still feel depressed and anxious. I think being in detention so long makes me feel this way. Especially because of how they treated me,” Humberto said. Humberto currently has a pending asylum application and has also applied for a green card under the Cuban Adjustment Act. He is anxious to obtain a work permit so he can start working and provide for his children in Cuba.

“I still feel depressed and anxious. I think being in detention so long makes me feel this way. Especially because of how they treated me.”

— Humberto
Calhoun County Correctional Facility, Battle Creek, MI

**Operator:** Calhoun County Sheriff’s Office

**Capacity:** 200 beds dedicated to ICE in a 632-person facility.

**Key facts:** On February 5, 2021, Jesse Jerome Dean Jr., a 58-year-old immigrant from the Bahamas with risk factors for serious COVID-19, died at the Calhoun County Correctional Facility. His death, the result of an unspecified “medical emergency” as reported by ICE,\(^34\) raises serious concerns about the quality of medical care provided at the facility. A medical expert who reviewed records of the care provided to Mr. Dean noted numerous instances of substandard care and concluded that the failure to recognize and evaluate concerning symptoms, follow up on abnormal testing, and provide basic life support for critically ill patients can have serious implications for all individuals with COVID-19 or other medical issues in the facility.\(^35\)

There have been several outbreaks at Calhoun, and ICE has confirmed that at least 60 people detained there contracted COVID-19 at the facility.\(^36\) Detainees reported that people with symptoms of COVID-19 were neither tested nor promptly seen by medical staff. The staff’s failure to identify, treat, and isolate people with COVID-19 allowed the virus to spread.\(^37\)
Adebodun Idowu

Adebodun is a 57-year-old man from Nigeria who has lived in the United States since 2012. He is a diabetic, and had been detained in ICE custody at the Clinton County Correctional Facility in Pennsylvania for over 17 months when there was a COVID-19 outbreak at the facility. Unfortunately, he contracted the virus in detention before he was released as the result of an ACLU lawsuit, and has had serious, long-lasting effects from COVID-19.

Adebodun remembered ICE detention as “the worst place I’ve ever been in my life.” He was held at the Clinton County Correctional Facility just as a COVID-19 outbreak hit the facility. While detained at Clinton, Adebodun watched as the facility did not take “a single precaution.” Detained people were crowded together, with no ability to keep distance from each other. “At the table where we used to eat, there would be 10 or 11 people. There was no social distancing or masks. No sanitizing. Nothing is good there. Even the nurses weren’t wearing masks. Nobody was putting on masks.”

Since he has diabetes and high blood pressure, he feared for his safety, because he knew he was at high risk from the virus. He began to fear for his life as he started coughing frequently and realized that it was becoming more difficult to breathe. Adebodun went to the facility’s clinic when he started to have chest pain, but the clinic didn’t have enough equipment or medicine to deal with COVID-19 patients, so they just told him to drink water. Instead of isolating him, the medical staff sent Adebodun back to his unit, where he “was in contact with everyone.” Eventually, officers sent Adebodun to the solitary confinement unit, where he remained for five days before they released him.

A few days later, Adebodun was released on court order. But after his health deteriorated over the next week with a fever and cough that would not subside, his family had to call an ambulance. When he arrived at the hospital, the doctor confirmed that Adebodun had COVID-19, and might have died had he not come to the hospital. Adebodun stayed in the hospital for a month as his condition continued to deteriorate. At several points, the doctors did not think he was going to survive.

“Now that I’m home, I am with my family, so we are doing good together,” Adebodun reports. “I go on walks with my wife. Now, I can eat and get my medication. I still have the dizziness from COVID and I still have to go see the doctor. The doctor says it will probably take a year to get myself back to normal.”

Clinton County Correctional Facility, McElhattan, PA

**Operator:** Clinton County

**Capacity:** 175 beds dedicated to ICE in a 298-person facility

**Key facts:** Since the start of the pandemic, more than 66 people in ICE custody at Clinton have tested positive for COVID-19. Officials at Clinton failed to provide COVID-19 testing to medically vulnerable detainees, including those who reported symptoms of the virus and explicitly requested a test. Officials also failed to isolate or test new admissions to the facility for COVID-19 unless they presented symptoms of the virus, in spite of widespread knowledge of asymptomatic spread.
After several detainees decided to file a lawsuit and participated in a hunger strike over conditions of confinement at Clinton, ICE transferred them from Pennsylvania to Etowah County Jail in Gadsen, Alabama, without providing required notice to their attorneys.40

Adrián Rodriguez Alcantara

Adrián Rodriguez Alcantara and his partner, Yasmani Osorio Reyna, Cuban asylum seekers, first arrived in the United States in January 2020. The couple fled Cuba—where Adrián coordinated overseas medical mission trips and Yasmani worked at a radio and television agency—in search of the right to love each other freely. They first fled to Guyana before making their way to Brazil and up through the Americas until they reached Tijuana. After waiting several months for their numbers to be called, they voluntarily turned themselves in at the U.S.-Mexico border in San Ysidro, at which point they were detained and transferred to the Otay Mesa Detention Center in San Diego, California. There, they waited over three months for their asylum claims to be heard.

After the spread of COVID-19 in early 2020, Otay Mesa had the highest number of confirmed COVID-19 cases among immigration detention facilities in the United States. Guards refused to provide detainees with masks. Adrián went on a hunger strike to protest the conditions at Otay Mesa, only to be attacked by guards. Soap often ran out for days on end. More than 100 detainees occupied each housing unit, making social distancing and proper hygiene impossible. Yasmani and Adrián each received one mask, which became

While detained, Adrián lived in constant stress and fear that he would contract COVID-19.
dirty and tattered from constant use; neither was offered another.

As an individual with HIV, Adrián was doubtful his condition was being properly controlled. His medication often caused him to feel weak, nauseous, and tired to the point of being unable to eat. Medical staff at Otay Mesa refused to inform Adrián about his CD4 count (an indicator of the health of the immune system for HIV patients) or viral load. While detained, Adrián lived in constant stress and fear that he would contract COVID-19 and not make it out of Otay Mesa alive. He reported losing sleep, suffering from headaches, and crying while thinking about dying in detention.

Adrián and Yasmani were released from Otay Mesa on April 30, 2020, after filing a class action lawsuit seeking their release and the release of others in the facility. They remain under ICE surveillance and are required to wear ankle monitors while they live with family friends and await hearings on their asylum claims.
Souleymane Dembele

Souleymane came to the United States 11 years ago because his life was in danger in his home country of Mali. He is married to a lawful permanent resident, and he and his wife and have three U.S. citizen daughters. Souleymane applied for asylum several years ago, but his application was denied. DHS was unable to return Souleymane to Mali because it was unable to procure his travel documents, so instead they released him from custody for several years and asked him to report to ICE on a regular basis. On February 18, 2020, Souleymane went to his ICE check-in, as he always had, only to be abruptly told that he would be taken into custody because the government had obtained his travel documents. He was detained by ICE, initially at the Dodge County Detention Center in Wisconsin for one month, and then transferred to the McHenry County Correctional Facility in Illinois for two more months until he was released as the result of an ACLU lawsuit.

Souleymane vividly remembers the day he was detained by ICE: “I was in the middle of my workday as an Uber driver. I had left my car in the parking lot because I thought this was just going to be another check-in.”

Souleymane has high blood pressure and diabetes. He was terrified of becoming infected with COVID-19 in ICE custody at the McHenry County Correctional Facility. There were 100 people in his block of beds in the detention facility, and it was impossible to socially distance. Although he occasionally heard rumors that other detainees had contracted COVID-19, the guards did not provide any information.

Souleymane was not given a mask in detention, nor did he have access to hand sanitizer. Although he was permitted one bar of soap each week, he was required to buy it himself. Some of his fellow detainees couldn’t afford to pay for soap. He helped who he could, but didn’t have enough money to provide soap for everyone.

Souleymane was released in May 2020, after the ACLU filed suit. Souleymane realized the impact of his absence on his family. Upon his release, his youngest daughter said to her father, “Daddy, I cried all day long when you were gone.”

Since his release, Souleymane has been helping his daughters with their remote learning. He cannot continue his job as an Uber driver because ICE requires him to wear a GPS ankle monitor that limits his movement.

Even though he is out of detention for now, Souleymane does not feel safe. He said: “I’m so scared of what will happen when this is all over. Since I’ve been in this country, I’ve never done anything wrong. I don’t even have an unpaid ticket, but they still want to send me back. I’ve tried so hard to use the system, but I used all the money I had put to the side to pay lawyers. It’s been 11 years and I’m in the same situation. I don’t know what else to do. All I want is to get legal status so I can take care of my wife and daughters. I just want to be free and have a better life.”

“I’ve tried so hard to use the system, but I used all the money I had put to the side to pay lawyers. It’s been 11 years and I’m in the same situation.”

— Souleymane
McHenry County Correctional Facility, Woodstock, IL

**Capacity:** 380 beds dedicated to ICE in a 650-person facility

**Operator:** McHenry County Sheriff’s Office

**Key Facts:** Detainees held in ICE custody at the McHenry County Correctional Facility reported crowded conditions making social distancing impossible. Detained people were held in crowded pods, using the same tables and equipment as dozens of other detainees, and were required to stand in line close to others to get food and medicine. Detained people slept on bunk beds in cells so small they could touch their cellmate’s beds while lying on their own.45

Many correctional officers and even medical workers did not wear masks in the facility, and detainees received no masks at all.46
Andres Lara Corona

Andres Lara Corona is a 61-year-old father of eight and grandfather of 17. He has lived in the United States for the past 44 years. He moved to Houston, Texas, in 1979, where he worked as a construction worker until five years ago, when he developed a medical disability. He was detained at ICE’s Montgomery Processing Center in Conroe, Texas, for eight months until he was released as the result of an ACLU lawsuit.

“In December 2019, I was vacationing in Mexico when I received the news that one of my nieces had passed away. I immediately booked a flight to attend her funeral. On my way back for the funeral, Customs and Border Protection officers detained me at the airport in Chicago due to prior misdemeanor convictions dating back at least 14 years. I was released after being granted Deferred Inspection, which allowed me to attend the funeral in Florida, and told to appear at a CBP office in Houston on January 21, 2020. I went to the appointment in Houston and was promptly arrested and taken to the Montgomery Processing Center in Conroe, Texas. I was held there by ICE for over eight months, until I was released by a federal judge, on bail, due to the danger that COVID-19 poses to me—on October 13, 2020.

“I have been struggling with my health for quite some time. I was diagnosed with both diabetes and hypertension around 10 years ago. I also suffer from high cholesterol, gout, and arthritis.

“My experience in immigration detention at MPC was terrible. The hardest part was being away from my family. The guards treated everyone badly, speaking rudely to everyone, and life there every day was full of pressure and tension. And the food was awful.

“Being released felt so good. I am extremely happy to be back home with my family.”

Montgomery Processing Center, Conroe, TX

Operator: The GEO Group, Inc.
Capacity: 1,000 people

Key facts: ICE has reported that more than 274 people in custody at MPC have tested positive for COVID-19 since the start of the pandemic.47 A lawsuit brought by the ACLU, however, revealed that ICE’s statistics may not reflect the true scope of the COVID-19 crisis at the facility. As the court concluded, “[t]he reality is we cannot know the number of deaths or the severity of the illness among the over 200 detainees who were infected because Defendants released, transferred, or removed hundreds of them—including those with current infection and symptoms—amidst the outbreak.”48

Media outlets uncovered the spread of COVID-19 among officers at MPC, which ICE failed to report to the public. The reason? Because ICE refuses to provide information about facility staff employed by private prison companies, who have the most direct contact with detained people.49
William Kemcha has lived in the United States for over 30 years. He first came to the country as a student, seeking safety from the political turmoil in his home country of Cameroon. William says that returning to his home country after his visa expired would have been “a death sentence.” Afraid of being incarcerated, tortured, or worse, William stayed in the United States and ultimately started a family. Despite the fears he expressed about returning to Cameroon, an immigration judge denied his request for asylum. In 2009, he was detained by ICE but was ultimately released under conditions of supervision. For a decade, William had a perfect record. He diligently complied with his reporting requirements and never had any encounters with law enforcement. However, despite this record, in 2019, William was redetained by ICE and held at the Worcester County Jail in Maryland. He was ultimately released from detention as a result of litigation brought by the ACLU, ACLU of Maryland, the National Immigration Project of the National Lawyers’ Guild, and the CAIR Coalition.

William Kemcha

William was worried for his health in ICE detention from the very start. He has suffered from a weakened immune system since his surgery to remove a malignant melanoma, which, on top of hypertension, puts him at significant risk from COVID-19. Even before the pandemic, William experienced bouts of illness while in detention and was especially cautious to avoid getting sick.

As William recalls, it was months into the pandemic before mask-wearing became expected of detainees and officers. However, even once masks were mandated, enforcement was limited and many detainees, who may not have understood the real danger of the virus, did not wear their masks. Even officers, who came in and out of the facility, often walked around the facility without their masks. Social distancing was nonexistent. As William recalls, there was “never a situation when you can be truly isolated.” While William did his best to wash his hands and wear his mask, others did not do the same and shared spaces were not cleaned. No matter how hard he worked to keep himself safe, he was still at risk.

William’s time in ICE detention was hard for both him and his family. Without his salary, it was hard for his family to make ends meet. However, most difficult was his absence. William tried to help his children with their homework over the phone while in detention. They scheduled their calls to make sure he could help them before tests. His youngest daughter, now 10, had a hard time understanding where her father was. William describes struggling to explain to his young daughter why he was in jail.

William was released in April 2020 after a court ordered him released as a result of COVID-19 litigation. William is relieved to be safe and home with his family. Nowadays, his days look very similar to many other parents’ as he spends them helping his 10-year-old with Zoom schooling. William works nights and evenings in order to be home during the day to help and support his wife and two daughters. No matter how grueling the schedule, he is just happy to be together with his family.
Rogelio

Rogelio is a new husband and father from Guatemala who came to the United States in 2013. When he first came to the country, he worked in restaurants, and then began working in construction. One day, on his way to work, ICE officers stopped and detained him. ICE eventually transferred him to their detention unit in the Strafford County Department of Corrections facility in New Hampshire, where he was held for three and half months. During that time, he was unable to be with his pregnant wife, who gave birth to his first child while he was in detention. Rogelio was released a few weeks later as the result of the ACLU’s lawsuit.

When Rogelio arrived at the Strafford detention facility, he was confused by the manual that the officers gave him. The manual painted the facility in a very different light than what he experienced: for example, the manual mentioned a courtyard where detained people could spend time outside, but Rogelio never saw a courtyard at all. Rogelio remembered the fear that he and other detained people felt when officers threatened them, telling them that if they didn’t do whatever they were told, they would be put into solitary confinement.

COVID-19 only made things worse. One day, Rogelio noticed that many people at the facility were beginning to cough. He began to be afraid, as detained people were held together in one room with bunk beds, with no distance between them. Sometimes, when a detained person would get sick, they would be taken to the infirmary and would not come back.

Rogelio described his experience in detention as being trapped in “a contagion zone.” “I wouldn’t wish detention on my worst enemy, because it truly is horrible,” he recalls.

After the ACLU won relief for Rogelio, he was released from detention. It was the first time he was able to breathe freely. His biggest gift upon his release? Being reunited with his wife and meeting his 2-week-old baby for the first time.

“I wouldn’t wish detention on my worst enemy, because it truly is horrible...”

— Rogelio

Strafford County House of Corrections, Dover, NH

Operator: Strafford County Sheriff’s Department

Capacity: Approximately 100 beds filled by ICE detainees in a 495-person facility

Key facts: Until the ACLU brought suit, ICE had not identified detainees who were medically vulnerable to COVID-19 at the facility. The court noted that it was “deeply troubled by [ICE’s] failure to identify high-risk detainees until forced to do so by [the] lawsuit.”

The court further noted that “[i]t was only after the court ordered bail hearings for high-risk detainees, and petitioners reviewed detainee medical files and put 19 of them on a high-risk list, that [ICE] even became aware of the ‘ticking time bomb’ in their midst.”
Michel Fuentes Luis

Michel Fuentes Luis is a 33-year-old asylum seeker from Cuba. He came to the United States in June 2019. Instead of being released to join his family, including his grandmother, sister, and aunt, in Arizona, ICE sent him to the Otero County Processing Center (OCPC) in New Mexico. Michel described his months in detention as the worst days of his life.

In 2020, when the pandemic hit, OCPC was not prepared. Forty-eight other people lived in Michel’s dormitory with him. Their beds were crammed together only three feet apart. The whole dormitory shared four toilets, showers, and sinks. Two dormitories would eat together in the cafeteria, meaning nearly 100 people—without masks—were held in the same room at the same time. What worried Michel even more was the fact that the guards did not wear proper personal protective equipment (PPE), like masks or gloves. Over time, people began testing positive for the coronavirus, while others began showing symptoms but were not tested. Some entire dormitories were quarantined, but others were not, even when people began to exhibit symptoms of COVID-19.

Those conditions were particularly worrisome for Michel, who has suffered from asthma his whole life. Michel had used an inhaler since he was just 3 years old, and he worried constantly that he would die of COVID-19 if he contracted the virus at OCPC.

In addition to the inadequate health precautions in place at OCPC for mitigating the spread of COVID-19, there was also a leak in the roof above Michel’s dormitory. One day, Michel slipped on the wet floor caused by leak and broke his right hand. He spent 11 days with a swollen hand he could not move before officials offered any care. By that time, it was too late for a normal fix. Luckily, with help from his attorney, Michel was released from detention to receive surgery—an intrusive operation requiring the insertion of pins into his upper wrist bone so that it will hopefully move again. Although he reports that agents threatened him about communicating what was happening on the inside, he wants everyone to know what the conditions at OCPC are really like: the worst possible days of someone’s life.

Otero County Processing Center, Chaparral, NM

Operator: Management and Training Corporation (MTC)

Capacity: 1,420 people

Key facts: After a COVID-19 outbreak spread through Otero, ICE refused to test detainees with exposure to positive cases, and instead held them in “cohorted” pods together for 14 days. When the New Mexico Department of Health attempted to provide COVID-19 tests to detainees at the facility, ICE officials stonewalled their efforts, refusing to universally test detainees.53

The Management and Training Corporation, which operates Otero under contract with ICE, sought to increase the number of detainees at its facility, even after the state of New Mexico declared a public health emergency due to the COVID-19 pandemic. MTC attempted to partner with other state and federal agencies to bring detainees and prisoners to the facility to make the facility “financially viable.”56
Myke Cux Jonathan Jocop

Myke is a 32-year-old father from Guatemala whose newborn daughter was born five days after he was picked up and placed in ICE detention. He has chronic asthma, and is medically vulnerable to COVID-19. He was released from detention at the Mesa Verde ICE Processing Facility in California in June 2020 as a result of a lawsuit filed by the ACLU of Northern California and partners, a month before a huge outbreak of COVID-19 swept the facility.

Myke first arrived at Mesa Verde in March 2020, just as the country began to face the realities of the COVID-19 pandemic. But things at Mesa Verde did not seem safe. The bunks in his unit were mostly filled with people shuffling in and out daily. Tuesdays were especially high-traffic days, and they were known as “deportation days.” The staff did not provide Myke or other detained people information about the availability of COVID-19 testing. Myke recalls that the staff at the detention center did not start wearing masks—or providing them to detained people—until the end of May 2020.

Because of his chronic asthma, Myke was plagued with constant anxiety over the lack of social distancing protocols and inadequate cleanliness measures in place at Mesa Verde. He relied heavily on prayer to get through each day. He held on to the hope that he would someday be reunited with his partner, Nancy, and that he could soon meet his newborn daughter, Destiny, who was born five days after he was picked up by ICE.

“I felt very blessed,” Myke said, recounting his release and the first time he was able to hold his new baby. Since his release, his asylum case and his struggles to provide for his family both in the U.S. and Guatemala continue.

His release from detention amid the COVID-19 pandemic has given him new life: He has recognized the importance of living a meaningful life and has dreams of becoming a barber or owning his own restaurant. He has had a hard time finding a stable job, because of the uncertainty of his immigration status and because of the electronic ankle monitor that he must wear for ICE. Despite these hardships, Myke is thankful. “I get to be with my daughter every day. She gives me hope that a better future is coming.”

Mesa Verde ICE Processing Facility, Bakersfield, CA

Operator: The GEO Group, Inc.
Capacity: 400 people

Key facts: A lawsuit brought by the ACLU of Northern California and its partners revealed ICE’s failure to plan for COVID-19. As the court noted, officials “knew that they needed a clear and detailed plan to minimize the risk of an outbreak (and to contain an outbreak if one occurred), but nine months later they still have not created one.”

Even worse, litigation documents disclosed that ICE had deliberately limited COVID-19 testing at Mesa Verde and rejected a suggestion to test all detainees because of challenges it would face quarantining those who tested positive.

On numerous occasions, the court concluded that ICE and its lawyers had misrepresented critical facts about its management of COVID-19 at Mesa Verde. For example, the court noted that defendants submitted a declaration from ICE Assistant Field Office Director Alexander...
Pham “falsely stating that Mesa Verde was imposing a 14-day quarantine on all new arrivals from facilities with reported cases of COVID-19 when no such quarantine existed.” The court also noted that defendants “made additional false statements,” including testimony by ICE Deputy Field Officer Erik Bonnar regarding the dates and decision-making process to empty the women’s dorm as a precautionary measure.

Sithy Bin

Sithy Bin was born in a Cambodian refugee camp and arrived in the U.S. as a toddler. He grew up in the U.S. and knows it as his only home. Following the completion of 15 years on a 40-years-to-life sentence, he was transferred to ICE custody at the Mesa Verde ICE Processing Facility in California.

In late July and early August 2020, Mesa Verde experienced a huge COVID-19 outbreak. Fifty-seven of the 103 detainees tested positive, as well as 29 of the 126 staff members. As the result of a lawsuit brought by the ACLU of Northern California and its partners, Sithy was released from detention as the outbreak began to subside.

Sithy Bin thinks about his time in ICE detention: how scary it was not knowing if his fellow detainees had COVID, and wondering if staff ever made sure that places like the mess hall were adequately sanitized. He remembers how closely confined he was with other men in his unit, and how none of them ever received COVID-19 tests while they were in detention.

The day that Sithy was released felt “like a gift from God.”

Since his release from detention, Sithy has become a program administrator at Inglewood Wrapping Arms Around the Community, a nonprofit that offers community services and re-entry programs.
for marginalized people returning to the community. Sithy also keeps busy facilitating weekly Bible studies, working social media for a church ministry, and attending Pacific Oaks College, where he is pursuing a bachelor's degree in human development. Although he has to live with an ankle monitor for the foreseeable future and is still fighting to remain in the U.S., he feels that he is at an exciting point of his life as he remains spiritually strong and active in his community.

“As far as the pandemic goes, your voice doesn’t matter. Every morning, we watched the news and saw what was going on. The big things everyone kept saying were ‘hand sanitizer and social distancing.’ They had 60 people in 60 bunks at York, there was no way to social distance. Every bunk is three feet apart. I have asthma and high blood pressure, so this was a big deal to me. I asked the officer for sanitizer to sanitize the bathroom, because there were six stalls for 60 people, and he said no. So we had to find a way to say, ‘Even though you don’t care about this [pandemic], we do.’”

Aaron decided to participate in a hunger strike. The prisoners and detainees requested hand sanitizer, soap, and basic sanitation items during the strike. Aaron described the punishment and retaliation he experienced from participating in the strike: “They considered me to be a leader of that strike and they put me in the SHU [solitary confinement] for that. I was in the SHU for two weeks. Any time your voice tries to be heard, they shut it down. When they took me to the SHU, an officer said, ‘I remember you, you were giving us a hard time about COVID. I knew you would be in here soon.’ And I thought: I was giving you a hard time? Because I care about my rights and my life?”

Correctional staff repeatedly ignored the detainees’ requests for basic items to minimize the risk of contracting COVID. Aaron described the staff’s complacency and disregard for the detainees’ health: “It was crazy to me—you’d see it on the news every day that people are dying, and we were saying, ‘Can you just give us things to minimize the risk?’ but they just shut us down and put us in the SHU. We weren’t even saying ‘Release all of us now.’ We were just asking, ‘Can you just give us some basic things to protect us while we’re here?’”

“I was giving you a hard time? Because I care about my rights and my life?”

Aaron describes his detention at York County Prison as “the hardest time I’ve had in my life.” The conditions were horrible, and the pandemic exacerbated everything: “When the pandemic hit, it felt like the world was going to end with COVID and I was going to be alone.”

“During the pandemic, I was giving you a hard time?”

Aaron Hope

Aaron Hope has been in the United States since he was 9 years old. He is originally from Trinidad and Tobago, but has lived in Brooklyn, New York, with his family for what “feels like [his] entire life.” Aaron graduated with a B.A. in psychology from Queens College in New York. Prior to being detained, Aaron worked for a production company, where he would come up with ideas for the website and strategies to promote the agency. Since his release, Aaron has returned to his family and is now working at a restaurant.

“During the pandemic, I was giving you a hard time?”

Aaron describes his detention at York County Prison as “the hardest time I’ve had in my life.” The conditions were horrible, and the pandemic exacerbated everything: “When the pandemic hit, it felt like the world was going to end with COVID and I was going to be alone.”
York County Prison, York, PA

Operator: York County

Capacity: 950 beds dedicated to ICE in a 2,245-person facility

Key facts: Since the start of the pandemic, more than 279 people in ICE custody at York have tested positive for COVID-19. At one point, York County reported that 834 prisoners, who share the facility with ICE detainees, had also tested positive.

Detained people at York reported that they had no choice but to share dorms and bunks with people with symptoms of COVID-19.

During a facility inspection by the government, an expert noted that only half of the corrections officers wore masks at the facility, raising the risk of COVID-19 spread in the facility.
Raheem Dawes

At age 26, Raheem Dawes should have been focused on the upcoming birth of his son and celebrating with his wife and stepdaughter—instead, he was held in ICE detention with no information and no protection. Raheem has lived in the United States since April 2018. He was working as a nursing assistant and living with his pregnant wife and her daughter when he was detained by ICE at the Wyatt Detention Facility in Rhode Island as the COVID-19 pandemic began. Raheem missed the birth of his son and was not able to meet his child until he was four months old, after Raheem was released through a lawsuit filed by the ACLU and its partners.

Raheem describes every day of ICE detention as stressful. In addition to the normal difficulties of detention, Raheem and other detained people were constantly scared of contracting COVID-19. It was difficult even to get accurate information about the virus—while people in detention watched the news on television and heard about pandemic outbreaks, facility officials seemed to be hiding information. Raheem even tried to participate in a hunger strike in order to get appropriate guidance on the pandemic from facility officials. However, after a day, Raheem decided it was pointless. “At the end of the day, [the facility officials] don’t care,” Raheem says, “they tell you what you want to hear and then they go home happy.”

Raheem describes staff coming in and out of the building from other facilities, mixing people in federal and immigration custody with each other, and transferring new immigrants from other facilities—all potential vectors for COVID-19 to be introduced to the facility. Despite all the possible ways for COVID to enter the facility, measures were not taken to stop its spread. Officials only distributed soap to detained people every three days, and social distancing was impossible. Raheem shared a bunk bed with a man who was ultimately deported—there was no way for them to maintain six feet between them.

Raheem is looking forward to putting this all behind him. After Raheem was released, he quarantined for two weeks, then went back to work to provide for his family. Now, he’s working on starting his own moving company. In addition to spending time with his kids, Raheem is looking forward to being able to give back to his community. A former volunteer with Doctors Without Borders and youth soccer coach, Raheem wants to help people who need it most.
Wyatt Detention Facility, Central Falls, RI

Operator: Central Falls Detention Facility Corporation

Capacity: Prior to litigation, 96 ICE beds in a 770-person facility; currently 48 ICE beds

Key facts: Two lawsuits brought by the ACLU revealed Wyatt’s inability to protect detained people from COVID-19. The courts in both suits found that Wyatt failed to provide detained people with necessary protections to prevent infection with COVID-19. In the first case, the court concluded that Wyatt was inadequately protecting medically vulnerable individuals due to its failure to provide basic hygiene supplies, ensure social distancing, and take measures to prevent infected people from entering the facility.64 In the second suit, a class action, the court found that ICE failed to identify medically vulnerable Wyatt detainees, even after being under a directive to do so for two months, such that ICE did “not actually know which detainees have underlying medical conditions that put them at extreme risk should they contract COVID-19.”65 At an October 2020 hearing, Wyatt’s warden acknowledged the facility was still not enforcing social distancing or mask-wearing, seven months into the pandemic.66
Mario Rodas

In early March 2020, Mario Rodas was pulled over and arrested by ICE agents while driving to the supermarket with his wife, a legal resident and the mother of his three U.S. citizen children. ICE detained him at the Plymouth County Correctional Facility in Massachusetts just as the COVID-19 pandemic began to spread in the United States. Mario, a 59-year-old man with several health conditions that put him at risk for serious illness from COVID-19, was released from custody two days after the ACLU filed a lawsuit on his behalf.

Mario became more fearful the more he heard about COVID-19. “I was scared for my health,” he explained. “I was worried because I have diabetes, high cholesterol, and high blood pressure. It was stressful, you know?”

Conditions at the facility made it impossible to practice social distancing. Immigrant detainees were held in units with approximately 50 and 100 people in communal cells with a toilet and up to five bunks each. A few days after he arrived at Plymouth, word spread through the prison that a staff member had tested positive for COVID-19. Mario and his family were terrified. Guards started to bring Mario and others in his cell block to meals in shifts, but these groups were still as large as 80 people at a time. None were given masks or gloves to wear.

After the ACLU filed a lawsuit on Mario’s behalf, ICE voluntarily released him from custody. Mario returned home, where he quarantined for 14 days from his family. Mario’s son, Mario Rodas Jr., reflected on his father’s release. “The whole thing highlights how easy it is for immigration [authorities] to release detainees that have cases that are low priority and allow them to go back home during these very uncertain times,” he said.

Plymouth County Correctional Facility, Plymouth, MA

Operator: Plymouth County Sheriff’s Department

Capacity: 340 beds dedicated to ICE in a 1140-person facility

Key Facts: In late November 2020, Plymouth sent guards exposed to COVID-19 back to work during what would otherwise have been their quarantine period. A series of COVID-19 outbreaks began by early December, leading to more than 120 prisoners testing positive in the next two months.

Within hours after a federal court certified a class of immigration detainees to challenge Plymouth’s COVID-19 safety practices, ICE attempted to transfer multiple class members to Alabama, which was only halted after plaintiffs filed an emergency motion.

“I was worried because I have diabetes, high cholesterol, and high blood pressure. It was stressful, you know?”

— Mario
Alfredo Espinoza Esparza

Alfredo Espinoza Esparza is a 41-year-old husband and father of four. He came to the United States from Mexico 23 years ago. Before being detained, Alfredo lived a “pretty normal” life in Spokane, Washington, working in the restaurant industry to support his family. Although he had spent more than half of his life in the United States, he was abruptly detained by ICE officers and transferred to the Northwest Detention Center in Tacoma, Washington. After the ACLU, ACLU of Washington, and the Northwest Immigrant Rights Project filed suit, ICE began to voluntarily release people from the detention facility, including Alfredo.

A few months into his detention at the Northwest Detention Center (NWDC), Alfredo collapsed onto the concrete floor. The culprit: a preinfarction angina, or obstruction of the heart’s blood supply. As the facility officers picked him up, they handcuffed him before placing him into an ambulance for transport to the hospital and patrolled him while carrying their guns. Alfredo recalled with wonder: “They had my feet and hands cuffed. I asked why—‘I am sick [...] I am not a risk.’”

In February 2020, as COVID-19 was spreading through Washington and while he was still recovering from his medical emergency, Alfredo found himself sick and went to the infirmary. There, the medics told him he just had a cold and gave him a Tylenol. However, Alfredo is not convinced. “It was not a cold,” Alfredo clarified as he recounted the introduction of 11 new people in his pod around the time he became sick, including two who had COVID-19 symptoms. After potentially exposing the whole pod to COVID-19, ICE officers eventually moved those two individuals out of the pod, but the pattern continued. New people would be brought into NWDC with symptoms; they would be given either Tylenol or ibuprofen and subsequently introduced into Alfredo’s pod.

Today, Alfredo is free again, but he still feels the effects of detention and cannot forget how he felt during his detention, no matter how hard he tries. He anxiously awaits official permission from the immigration court to remain in the place he has called his home since he was 18 and resume his life with his wife and kids.

Northwest Detention Center, Tacoma, WA

Operator: The GEO Group, Inc.
Capacity: 1,575 people

Key facts: Since the start of the pandemic, more than 34 detained people and 19 employees at the Northwest Detention Center have been confirmed to have contracted the virus.67 The guards routinely fail to use PPE, with one detainee having reported observing only one guard using gloves and none wearing masks.68 Officials similarly failed to provide detainees with either masks or gloves. Despite not have the proper protective gear, detainees still do the cleaning in the facility.69
Alejandro Jeronimo Osorio

Alejandro is 46 years old. He is originally from Mexico and has lived in the United States for nearly 30 years. He is the father of three U.S. citizen children: 12- and 14-year-old daughters and a 15-year-old son. He has diabetes, hypertension, and asthma, conditions that put him at heightened risk of serious illness or death from COVID-19.

Before he was detained by ICE at the Adelanto Detention Center in California, Alejandro was working to regain custody of his children, who had been placed in foster care. While detained, Alejandro called them every day. In September 2020, the federal judge in a lawsuit brought by the ACLU of Southern California ordered the government to release Alejandro. The court found that Alejandro, who had completed extensive rehabilitation programs following earlier misdemeanor convictions, posed neither a danger or a flight risk, and that his continued detention during the pandemic was likely unconstitutional.

Two weeks after his release, Alejandro was granted custody of his children. Alejandro’s son has a serious heart condition and had to have surgery recently. Alejandro was relieved he was able to be there to care for him. Alejandro considers his children his happiness and his life. His most joyful times since being freed from detention are the occasions when they wake him up at night to tell him that they love him. He works hard to provide for them and make sure they have everything they need to study, work hard, and thrive.

Sokuntheary Heng

Sokuntheary came to the United States from Cambodia in 2005, when she was 23 years old. She married her husband, a Kern County deputy sheriff, in 2019. Before being detained, she took ESL classes at a local college and worked in a pizza shop. She has a large community of friends in Kern and is close with her young niece and nephew.

ICE arrested Sokuntheary in March 2019, after she allegedly failed to update her address with the immigration court. ICE kept her in detention for nearly a year and a half, transferring her among several different facilities, including Adelanto, until she was finally ordered released on bail through litigation brought by the ACLU of Southern California in October 2020.

While in detention, Sokuntheary struggled with depression. It was especially difficult to be unable to help her husband through a surgery he had while she was detained, and to miss her young niece’s birthdays. After the pandemic began, she worried about contracting COVID-19. She and others detained at Adelanto never got enough masks, and the hand sanitizer dispensers were always empty. Her dorm was frequently placed on quarantine, during which she couldn’t go out to exercise or even attend church, and she had very limited phone access to call her family.

Being able to spend the holidays with her family after her release made Sokuntheary feel like her “life changed from the dark to the light.” Her dream is to get a green card so she can stay with her husband here in the United States.
Miguel Aguilar Estrada

Miguel is a 52-year-old father and plumber. He has lived in the United States for over 30 years, including the last 12 years at the same address. In December 2019, ICE arrested him at home in front of his two young children.

Miguel was detained at Adelanto for nearly five months before the court ordered his release in a lawsuit brought by the ACLU of Southern California. He shared a cell with three other people and took communal meals in a cafeteria with approximately 80 others. When the pandemic began, he did everything he could to protect himself, knowing that his diabetes and hypertension made him especially vulnerable. When his cellmate became sick with a fever, Miguel made him a makeshift mask using the rags they were given to clean. But it was impossible to social distance, the facilities were filthy, and there was insufficient soap or hand sanitizer. Miguel was also unable to get basic medical care. His feet were constantly swollen from his diabetes but, despite repeated requests, he was never able to obtain shoes that fit. Instead, he was left to repair the soles of his broken shoes with cardboard.

When Miguel was released to his partner and their children, he was so happy he cried. His children were jumping up and down, unable to contain their excitement. At home, Miguel finally felt safe. He and his family had enough masks to change them often, and his children enthusiastically helped clean and disinfect the house. But he continues to worry about those who remain detained at Adelanto.

Adelanto Detention Center

Operator: The GEO Group, Inc.

Capacity: 2,084 people

Key facts: A lawsuit brought by the ACLU of Southern California shone light on the inadequate and negligent management of COVID-19 at the facility. Ten days after filing suit, the court found “the conditions of confinement at Adelanto [to be] inconsistent with contemporary standards of human decency.” People slept within inches of each other, 118 people shared just three showers, and staff did not consistently wear masks. In the first few months of the pandemic, ICE transferred more than 100 people from facilities with active COVID-19 outbreaks to the facility. ICE officials quashed a plan to conduct saturation testing of detainees, and failed to test symptomatic detainees for COVID-19. Of 305 people who reported COVID-19 symptoms in four months, only one was tested.

Since the start of the pandemic, more than 270 detained people at the Adelanto Detention Center have contracted COVID-19, at least 16 of whom had to be hospitalized. Martin Vargas Arellano, a 55-year-old immigrant with several serious health conditions, contracted COVID-19 at the Adelanto Detention Center in December 2020 and was hospitalized several times. During that time, ICE refused to release him from custody—until three days before his death on March 8, 2021. ICE never notified his attorney of his death, but led her to believe he had been released to the street, rather than the hospital. His attorney only learned that he had died after she filed a missing person’s report. ICE’s decision to release Mr. Arellano from custody immediately before his death falls into a larger pattern of cases where ICE has avoided public reporting of a detainee’s death. As the court noted, “it appears that the Government actively concealed the seriousness of Mr. Arellano’s condition, and his subsequent death, from his counsel and the Court by reporting that Mr. Arellano was released from detention on March 5, 2021. The Court has significant concerns regarding the Government’s actions and lack of candor based on the disturbing facts reported in the Notice of Death.”

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With deep thanks to the many advocates who have worked to free detained people from ICE detention during the COVID-19 pandemic nationwide in cases brought by the ACLU, its affiliates, and partners:

**Arizona:** Espinoza v. Howard and Urdaneta v. Keeton (D. Ariz.) (La Palma Correctional Center and Eloy Detention Center): Anand Balakrishnan, Eunice Cho, David Fathi, Omar Jadwat, Michael Tan (ACLU); Yvette Borja, Victoria Lopez (ACLU-AZ); Laura Belous, Laura St. John, Katharine Ruhl, Rocio Castaneda (FIRRP); Howard Cabot, Daniel Barr, Christopher Thomas, Katherine May, Kristine Beaudoin, Margo Casselman (Perkins Coie).

**California:** Bahena-Ortuno v. Jennings, Zepeda Rivas v. Jennings (N.D. Cal.) (Yuba County Jail, Mesa Verde ICE Processing Center): William Freeman, Emilou MacLean, Sean Riordan (ACLU of Northern California); Stephanie Padilla, Jordan Wells (ACLU of Southern California); Bree Bernwanger, Hayden Rodarte (Lawyers’ Committee for Civil Rights of the San Francisco Bay Area); Judah Lakin, Amalia Wille (Lakin & Wille, LLP); Genna Ellis Beier, Manohar Raju, Francisco Ugarte (Office of the Public Defender, San Francisco); Timothy Cook, Martin Schenker, Francisco Unger, Julie Veroff (Cooley LLP).

**Florida:** St. Louis v. Martin (S.D. Fla.) (Glades County Detention Center, Baker County Detention Center): Amien Kacou, Daniel Tilley (ACLU-FL); Darlene Boggs, Eunice Cho, Vera Eidelman, David Fathi, Omar Jadwat, Joseph Longley, Rebecca Ojserkis, Michael Tan, Layssa Zamora (ACLU).

**Illinois:** Dembele v. Prim (N.D. Ill.) (McHenry County Jail); Crainic v. Kolitwenzew; Herrera-Herrera v. Downey (C.D. Ill.) (Jerome Combs Detention Center): Juan Caballero, Nusrat Choudhury, Rebecca Glenberg, Aarón Siebert-Llera, Ana Torres (ACLU-IL); Eunice Cho, David Fathi, Dror Ladin, Malita Picasso, Michael Tan (ACLU); Colby Kingsbury, David Sudzys, Catherine Masters, Ehren Fournier (Faegre Drinker Biddle & Reath LLP).

**Maryland:** Coreas v. Bounds (D. Md.) (Howard County Detention Center, Worcester County Detention Center): Sirine Shebaya, Amber Qureshi, Matthew Vogel (National Immigration Project of the National Lawyers Guild); Adina Appelbaum (CAIR); Eunice Cho, David Fathi, Ryan Murgaia, Omar Jadwat, Stephen Kang, Michael Tan (ACLU); Nicholas Steiner (ACLU-MD).
Massachusetts: McMenamin v. Souza, Rodas-Mazariegos v. Moniz, Quadrelli v. Moniz (D. Mass.) (Bristol County Detention Center; Plymouth County Correctional Facility): Adriana Lafaille, Laura McCready, Daniel McFadden, Matthew Segal (ACLU of Massachusetts); Anand Balakrishnan, Eunice Cho, David Fathi, Omar Jadwat, Rebecca Ojserkis (ACLU); Wm. Shaw McDermott, Andrew Glass, Christopher Warner, Molly Maidman (K&L Gates LLP); Sarah Sherman-Stokes (Boston University School of Law); Susan Church (Demissie & Church); Kerry Doyle (Graves & Doyle).

Michigan: Malam v. Adducci (E.D. Mich.) (Calhoun County Correctional Center); Albino-Martinez v. Adducci (Monroe County Correctional Facility, St. Clair County Jail): Monica Andrade, Miriam Aukenman, Syeda Davidson, Elvira Hernandez, Dan Korobkin, Elaine Lewis, Rohit Rajan (ACLU-MI); Anand Balakrishnan, Darleen Burgan, Eunice Cho, Bassem Maleki, Alondra Martinez, My Khanh Ngo, Noam Shemtov (ACLU); Mark Mendelsohn, Jeannie Rhee, Rachel Fiorill, Peter Boggs, Akila Bhargava, Jacob Braly, Emily Cox, Michael Donahue, Maria Eliot, Jessica Finberg, Kate Gadsden, Darren Gardiner, Joseph Granzotto, Aaron Haier, David Kimball-Stanley, Becky Lockert, Sarah Maneval, Kasturi Mitra, Bethlehem Mebratu, Parker Murray, Robert O’Loughlin, Samuel Prose, Edward Robinson, Oleg Shik, Ransome Springer, Mark Walkow, Alex Williams, Robyn Cincotta and Marie-Antoinette Perez-Brosset; paralegals Celine Calpo and Raine Kennedy; Nicholas La Forge, Ashley Martinez, Robert Borek, Jae Hee Han, Trevor Hill, Tamara Kogan and Amina Rana); Pro Bono Attorneys Tanaz Moghadam and Jeremy Benjamin and former associates Stanton Lawyer, Ocasha Musah, Breanne Palmer, and Jonathan Silberstein-Loeb (Paul, Weiss).

New Jersey: Cristian A.R. v. Decker; Mario S. v. Tsoukaris; Armando G., Geovanni M.-O., Yeury J.S., Tracey S., Ricardo H.R., William T., Santiago P., Kevin F., Landor V.A., Nicole B., Omar Y.G., and Robenson J. (D.N.J) (Bergen, Essex, Hudson County jails): Farrin Anello, Julia Bradley, Katherine Haas, Joe Johnson, Molly Linhorst, Jeanne LoCicero, Alicia Rogers (ACLU-NJ); Eunice Cho, Vera Eidelman, David Fathi, Omar Jadwat, Michael Tan (ACLU); Joelle Lingat, Lauren Major, Laura Rodriguez, Danielle Strandburg-Peshkin (American Friends Service Committee); Zoe Levine; Suchita Mathur; Thomas Scott-Railton (Bronx Defenders); Julie Dona, Katherine Kim, Aahithi Padmanabhan, Amy Pont; Elizabeth Rieser-Murphy; Johanna Zacarias (Legal Aid Society); Jessica Hunter, Lawrence S. Lustberg, Michael Noveck (Gibbons P.C.); Ameya Ananth, Farrah Berse, Emily Goldberg, Makiko Hiromi, Phoebe King, Nina Kovalenko, Richard Medina, Walter Ricciardi, Ethan Stern, Margaret Sun, Johan Tatoy (Paul, Weiss, Rifkind, Wharton & Garrison, LLP).

New Mexico: Betancourt Barco v. Price, Acosta Ortega v. Price (D.N.M.) (Otero County Processing Center): Maria Martinez Sanchez, Joachim Marjom, Zoila Y. Alvarez Hernandez (ACLU-NM); Eunice Cho, David Fathi, Curtis Harris, Omar Jadwat, Dror Ladin, Michael Tan, Noor Zafar (ACLU).


Ohio: Amaya-Cruz v. Adducci (N.D. Ohio); Prieto-Refunjol v. Adducci (S.D. Ohio) (Butler County, Seneca County, and Geauga County Jails, Morrow County Correctional Facility): Elizabeth Bonham, Claire Chevrier, Freda Levenson (ACLU-OH); Anand Balakrishnan, Eunice Cho, David Fathi, Omar Jadwat, My Khanh Ngo, Michael Tan (ACLU); Jeannie Rhee,

Pennsylvania: Hope v. Doll, Thakker v. Doll (M.D. Pa.) (Clinton County Correctional Center, Pike County Correctional Center, York County Prison): Erika Nyborg-Burch, Vanessa Stine, Muneeba Talukder, Witold Walczak (ACLU-PA); Eunice Cho, David Fathi, Stephen Kang, Omar Jadwat, Lauren Kuhlilk, Michael Tan, Cecillia Wang (ACLU); Carla G. Graff, Justin Kadoura, Kelly Krellner, Thomas Miller, Will Sachse (Dechert LLP).

Rhode Island: Medeiros v. Martin, Yanes v. Martin (D.R.I.) (Wyatt Detention Facility): Steven Brown (ACLU of RI); Eunice Cho, Lindsey Kaley, Hilary Ledwell, Sarah Mujahid, Ricra Prasad, Morgan Russell, Delaram Takyar, Michael Tan (ACLU); Jared Goldstein, Deborah Gonzalez (Roger Williams University School of Law); Natalie Bennett, Susan Baker Manning, Al Hasani, Amy Dudash, Michael Hacker, Stephanie Faraci, James Looby, Emma Hall, Jeffrey Gargano, Lindsey Shinn, Ric Macchiairolı, Ping Cao, Ethan Ackerman (Morgan Lewis & Brockius LLP); Mary Burton, Andrew Butler, Mariel Garcia, Karen Lara, Amanda LaRocca, Cory Lee, Mayra Meza, Ashely Papoila, Jhenyfer Perez, Brenda Reyes, Tito Saavedra, Heidi Silverio (Roger Williams University School of Law); Ryan McLeod, Melissa Rodney, Dalia Safadi, Laura Trevisiani, Colin Yeung (Justice Catalyst Fellows).

Texas: Vazquez Barrera v. Wolf (S.D. Tex.) (Montgomery Processing Center): Thomas Buser-Clancy, Bernardo Rafael Cruz, Rochelle Garza, Kathryn Huddleston, Andre Segura (ACLU of Texas); Eunice Cho, Vera Eidelman, David Fathi, Omar Jadwat, Lauren Kuhlik, Michael Tan, Noor Zafar (ACLU); Paul Genender, Erin Choi, Ron Miller (Weil, Gotshal & Manges LLP).

Washington: Dawson v. Asher, Favela-Avendaño v. Asher (W.D. Wash.) (Northwest Detention Center): Enoka Herat, John Midgley, Breanne Schuster (ACLU-WA); Eunice Cho, David Fathi, Omar Jadwat,
Endnotes


3 TRAC Immigration, “Profiling Who ICE Detains — Few Committed Any Crime” (Oct. 9, 2018), trac.syr.edu/immigration/reports/530/ (noting that 43% of detained people were from Guatemala, Honduras, and El Salvador; with another 25% from Mexico); Black Alliance for Just Immigration, The State of Black Immigrants Part II: Black Immigrants in the Mass Criminalization System 5 (2020), http://baji.org/wp-content/uploads/2020/03/sobi-fullreport-jan22.pdf (noting that more than one out of every five noncitizens facing deportation on criminal grounds before the EOIR is Black).


15 See U.S. Government Accountability Office, Immigration Detention: Actions Needed to Improve Planning, Documentation, and Oversight of Immigration Detention Contracts (Jan. 2021), https://www.gao.gov/assets/419-149.pdf (noting that ICE has not consistently followed its process for identifying and obtaining detention space and has limited documentation to support its recently acquired detention space).

16 Federal Rule of Civil Procedure 26; American Bar Association, Model Rules of Professional Conduct Rule 3.3 (Candor Toward the Tribunal).


70 Hernandez Roman v. Wolf, No. 5:20-cv-768 (C.D. Cal.) Findings of Fact and Conclusions of Law, April 23, 2020, ECF No. 53 at ¶ 81.


72 Hernandez Roman v. Wolf, No. 5:20-cv-768 (C.D. Cal.) Notice of Motion, Aug. 10, 2020, ECF No. 315-1 at 3.
