



Statement: protecting the health of migrants in ICE facilities across the U.S.

A call for increased monitoring of migrant health protections during the COVID-19 pandemic

The Center for Humanitarian Health is hosted by the Department of International Health at the Bloomberg School of Public Health at Johns Hopkins University. Lancet Migration is a global collaboration between The Lancet and researchers, implementers, and others in the field of migration and health that aims to address evidence gaps and drive policy change.

[The Center for Humanitarian Health](#) and [Lancet Migration](#) support an investigation into the recent [whistleblower report](#) from an Immigration and Customs Enforcement (ICE) detention facility nurse claiming poor adherence to national guidelines to prevent and contain COVID-19, unsafe environments for detainees and staff, and breaches in informed consent.¹ The allegations, together with the recently released House majority staff report on [ICE Detention Facilities – Failing to meet basic standards of care](#), highlight the need for expanded monitoring of the health and well-being of migrants who are under ICE custody in the U.S. Under its Performance-Based National Detention Standards ([standard 4.3](#)), ICE detention facilities are obligated to comply with federal, state, or local plans that address specific health concerns such as the Centers for Disease Control and Prevention’s (CDC) COVID-19 guidelines.² An immediate investigation into the allegations of poor adherence to CDC’s [Guidance on Management of Coronavirus Disease 2019 \(COVID-19\) in Correctional and Detention Facilities](#) at the Irwin County Detention Center should be conducted to determine if ICE is abiding by its standards for detention facilities and national public health guidelines for the protection of detainees and staff.

The recent whistleblower report is not the first to warn Congress and the American public of the failed containment of COVID-19 in ICE detention facilities and lack of appropriate medical care for migrant detainees and facility staff. In July 2020, [whistleblowers](#) in Louisiana noted that ICE detention facilities were “tinder boxes for the spread of COVID-19” and that COVID-19 poses an imminent risk to the health and safety of ICE detainees, staff and the public.³ As of October 6, 2020, six migrants have died in ICE custody from COVID-19, and more than 6,100 have tested positive, suggesting that ICE has not sufficiently safeguarded the health and well-being of detainees during the COVID-19 pandemic.⁴ Outbreaks at a number of ICE facilities, such as [Adelanto ICE Processing Center in Southern California](#) and [Farmville Detention Center in Virginia](#), have further challenged ICE’s ability to prevent future COVID-19 cases and deaths in its detention facilities.^{5,6,7}

1 <https://bit.ly/2SH60Q4>

2 <https://bit.ly/3dl5bWl>

3 <https://bit.ly/30PfCg4>

4 <https://bit.ly/3nyzGgt>

5 <https://wapo.st/3dexUME>

6 <https://bit.ly/3dfp3dS>

7 <https://bit.ly/34z4ncw>

According to ICE's Detainee Death Notifications, 21 people died in ICE custody in fiscal year 2020.⁸ This is the highest death total under ICE custody since 2005 and represents a doubling of the number of deaths that occurred in fiscal year 2019.⁹ Together with this concerning high death rate, the recent House majority report and the two whistleblower reports from Georgia and Louisiana necessitate a new independent examination of ICE's inadequate management of COVID-19 in detention facilities and its failure to provide appropriate medical care for migrant detainees. Prior to the COVID-19 pandemic, the House majority-led investigation reported widespread instances of migrants who did not receive critical medical treatment, faced delays following requests for treatment, experienced deficient management of mental health needs, and a lack of essential hygiene items such as soap. The report also highlighted the use of solitary confinement or isolation as a common punitive measure for behaviors that do not merit such treatment, such as participating in a hunger strike. The distressing nature of these recent reports also highlights the need for more consistent monitoring and accountability assessments of the health and well-being of all migrants who are currently under ICE's custody.

These findings call into question ICE's ability to uphold the rights and protect the lives of the thousands of migrants it detains across the U.S. The Center for Humanitarian Health and Lancet Migration urge the U.S. Congress and Department of Homeland Security to conduct a comprehensive and independent examination of the allegations of unacceptable medical neglect and breaches of human rights that have surfaced from ICE facilities across the country.

ICE's overall adherence to its health standards as outlined in its Performance-Based National Detention Standards in detention facilities must be examined through an independent investigation that, upon completion, is released to the public. As the pandemic continues to spread in detention centers across the U.S. and threaten the health of migrant detainees and those who work in the facilities, The Center for Humanitarian Health and Lancet Migration call for the Department of Homeland Security to strengthen its prevention, preparedness, and response activities to protect the health and human rights of all migrants detained in the U.S. The recommendations, as outlined in the [Lancet Migration Global Statement](#), will help ensure the lives of migrant are protected to the fullest degree. For the current health and safety of detainees, staff, and the surrounding community we call for immediate action to:

1. **Transfer migrants held in overcrowded reception, transit, and detention facilities to safer living conditions.** There should be prioritised evacuation of the most vulnerable, such as those with underlying health conditions and the elderly. Since such settings are generally overcrowded with poor sanitation and hygiene measures, the spread of COVID-19 has the potential to be rapid and devastating among affected populations and those working there¹⁰.
2. **Suspend deportations and continue asylum processes** in line with the 1951 Refugee Convention, with no forced return (refoulement)¹¹

⁸ <https://bit.ly/3jEAVu>

⁹ <https://bit.ly/3dkmOFZ>

¹⁰ <https://bit.ly/3jJEVYg>

¹¹ <https://bit.ly/3iK8fga>

Detained migrants across the U.S. should have equal access to all aspects of COVID-19 prevention, preparedness, and treatment. It is imperative that ICE is held responsible for upholding and protecting the health and human rights of all migrant detainees during the COVID-19 pandemic.

Organizations and acknowledgements

This statement was authored by Dana McLaughlin MPH candidate '21¹², Orit Abraham MPH, M.D. Candidate 2021¹³, David Tellez MSPH candidate '21¹⁴, Lauren Tejkl MSPH candidate '21¹⁵, and Paul Spiegel M.D., MPH¹⁶. Overall direction and review on behalf of the Lancet Migration global collaboration was provided by Miriam Orcutt. This statement includes public health and policy recommendations and perspectives, building on the [Lancet Migration Global Statement](#) recommendations to ensure migrants and refugees: have access to healthcare; are included in prevention, preparedness and response; and are part of responsible and transparent public information strategies, during the COVID-19 pandemic. Lancet Migration is a global collaboration between The *Lancet* and researchers, implementers, and others in the field of migration and health that aims to address evidence gaps and drive policy change building on the recommendations of the UCL-*Lancet* Commission on Migration and Health published in December 2018.

¹² Johns Hopkins Bloomberg School of Public Health, Humanitarian Health Department

¹³ Johns Hopkins Center for Humanitarian Health Fellow, Johns Hopkins University School of Medicine

¹⁴ Johns Hopkins Bloomberg School of Public Health, Department of International Health

¹⁵ Johns Hopkins Bloomberg School of Public Health, Department of International Health

¹⁶ Johns Hopkins Bloomberg School of Public Health, Director of the Johns Hopkins Center for Humanitarian Health