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## Public Health Experts, Medical Doctors, Prison Experts, and Former ICE Officials Urge Releases from Immigration Detention Facilities to Control the Spread of COVID-19

Leading public health experts, medical doctors, prison experts, and former government officials agree that urgent action is needed to avoid an unmitigated public health disaster in Immigration and Customs Enforcement (ICE) detention facilities and the county and local jails holding tens of thousands of immigrants and asylum seekers on behalf of ICE. For months, these experts have been sounding the alarm about the potential for the rapid spread of COVID-19 in these facilities and calling on ICE to release immigrants and asylum seekers from detention. As early as late February 2020 – a month before the first confirmed case of COVID-19 in a medical staffer at an ICE facility – doctors retained as experts by the Department of Homeland Security (DHS) warned the agency that ICE detention facilities were a “ticking timebomb.” These doctors and other medical and prison experts, noted below, are urging DHS and ICE to release ICE detainees to mitigate the spread of COVID-19 in these facilities and to safeguard asylum seekers, immigrants, facility staff, and public health. The continued failure of DHS and ICE to take action is a recipe for disaster – a human rights and public health disaster that will endanger even more lives.

### Public Health Experts Call for Drastic Reductions in ICE Detention

**Dr. Chris Beyrer, MD**, professor of epidemiology at Johns Hopkins Bloomberg School of Public Health: “Social distancing is enormously challenging in detention facilities because they are crowded with shared dorm-like living quarters....There is no way to protect people inside from the exposure and the surrounding communities.”

Speaking to Bloomberg News, Dr. Beyrer urges releases from administrative immigration detention, noting that people should not be in these “very high-risk environments” and warns that county health systems are not prepared to treat detainees in large numbers if they become infected.

On the need to release civil immigration detainees beyond just those with pre-existing conditions, Dr. Beyrer explained to the Intercept: “One of the things we’ve seen with this virus is that, yes, there are lots of people with preexisting conditions who do badly. There also are perfectly healthy people who are brought down by this. So it’s not enough to say a public health response is to get the people with underlying conditions out of there. That is absolutely essential, but it is insufficient.”

**Dr. Josiah Rich, MD, MPH**, professor of medicine and epidemiology at Brown University, and **Dr. Scott A. Allen, MD**, professor emeritus of medicine, University of California Riverside School of Medicine, who serve as medical experts for DHS’s Office of Civil Rights and Civil Liberties and are whistleblowers represented by the Government Accountability Project, warned DHS on February 25 of what Dr. Rich has described as a “ticking timebomb” spread of COVID-19 in immigration detention.

In a March 19 letter to Congress, Dr. Rich and Dr. Scott wrote that “releasing all immigration detainees who do not pose a security risk should be seriously considered in the national effort to stop the spread of the coronavirus,” warning that “social distancing is an oxymoron in congregate settings,” which are at a “very high risk for an outbreak of infectious disease.” They explained that “[t]his then creates an enormous public health risk, not only because disease can spread so quickly, but because those who contract COVID-19 with symptoms that require medical intervention will need to be treated at local hospitals, thus increasing the risk of infection to the public at large and overwhelming treatment facilities.”

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As Dr. Rich emphasized in an April 3 [briefing](#), “the first, most important thing” is to [reduce](#) numbers in facilities. ICE’s primary response of isolating, screening and quarantining “is not enough ... to control the spread of COVID-19.” Dr. Rich told the [Guardian](#), “If they don’t really need to be there, get them out of there.... Do we really need to expose them to additional health risks? And expose them to each other? and the staff?”

**Dr. Ranit Mishori, MD, MHS**, professor of family medicine at [Georgetown University School of Medicine](#) and senior medical advisor for Physicians for Human Rights [advises](#) that “release on parole will save the lives of immigrants, facility staff, their families and the broader public.” An amicus brief in [Dawson v. Asher](#) joined by Dr. Mishori states that “[t]he necessary treatment for those infected with COVID-19, especially those in high-risk populations, is labor-intensive. It would only allow nurses to tend to one or two patients at a time, and may require physicians with specialized backgrounds in respiratory care. Immigration detention facilities ... are unable to address these needs.”

**Dr. Allen S. Keller, MD**, associate professor of medicine at [NYU School of Medicine](#), has warned that the risk of infection and spread of COVID-19 at facilities detaining asylum seekers and immigrants in New Jersey “is enormous” and that conditions there in the midst of a pandemic “are unsafe, inhumane and pose a danger to detained immigrants and the surrounding communities.” In the [Lancet Public Health](#) journal, Dr. Keller wrote that “Moral and public health necessity requires immigrant detention to stop. Failure to do so endangers the tens of thousands of civil immigrant detainees and our society.”

**Dr. Michele Heisler, MD**, professor of internal medicine and public health at the [University of Michigan](#) and medical director of Physicians for Human Rights, told [Al Jazeera](#) that “when you talk to correctional health experts, they’ve recommended the release of the most vulnerable, and really most experts have argued for emptying of facilities.”

**Dr. Anne Spaulding, MD**, at the [Emory Center for the Health of Incarcerated Persons](#), has recommended that correctional facilities “consider measures other than detention” and ask themselves who “can [be] release[d] on their own recognizance.”

**Dr. Frederick L. Altice, MD**, professor of medicine, epidemiology and public health, [Yale Schools of Medicine & Public Health](#), states that “[r]elease from prison is a necessary strategy for increasing social distancing and reducing the risk of a fatal outbreak of COVID-19” in a [declaration](#) submitted in *Colvin v. Inslee*.

**Dr. Carlos Franco-Paredes, MD**, an infectious disease specialist at [University of Colorado’s School of Medicine](#), explains that “[i]mmigration detention centers in the U.S. are tinderboxes for the transmission of highly transmissible infectious pathogens including the SARS-CoV-2, which causes COVID-19” in a [declaration](#) submitted in *Fraihat v. ICE*.

## Former ICE Officials and Prison Experts

**John Sandweg**, former acting director of ICE, [explained](#) that “ICE detention facilities, like any jail or prison, are susceptible to outbreaks of infectious diseases ... ICE has the authority to release all individuals, it has absolute discretion. This can be done in a way that promotes public health and protects public safety. This is a very simple, common sense thing for ICE to do, not only to protect the detainees but also to protect ICE agents themselves.”

**Dr. Dora Schriro**, former ICE official, and former director of several state prison systems, attested in a submission in a [lawsuit](#) filed by Human Rights First that: “the government should release as many of these vulnerable individuals as possible, as quickly as possible, with only those conditions that are necessary to ensure participation in court proceedings.”

**Dr. Homer Venters, MD**, former chief medical officer of the New York City jail system, [said](#): “Coronavirus in these settings will dramatically increase the epidemic curve, not flatten it.”

**Dr. Craig W. Haney, PhD**, professor of psychology at the [University of California Santa Cruz](#), where he researches the psychological effects of incarceration, wrote that “adult immigration prisons must reduce their populations urgently in order to allow the necessary social distancing in response to the COVID-19 pandemic,” in a declaration submitted in *Eyere v. Wolf*.