March 17, 2020

Honorable Phil Murphy  
Office of the Governor  
The State House  
P.O. Box 001  
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CC:  
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Re: COVID-19 and Immigration Detention

Dear Governor Murphy:

As you address the public health challenges presented by the COVID-19 pandemic,1 we write to urge that you direct steps to immediately and drastically reduce occupancy in facilities detaining immigrants and asylum seekers for Immigration and Customs Enforcement (ICE) in New Jersey, including federal immigration detention facilities and county and local jails and prisons. The release of these individuals from detention is both necessary and legally authorized. Detaining large numbers of men, women and children in immigration facilities or county and local jails and prisons during the COVID-19 pandemic not only places detained immigrants and staff at severe risk but also threatens the health and safety of the broader public.

One of the most critical steps you can take to immediately reduce the spread of COVID-19 is to use your public health and licensing authority to instruct federal immigration detention facilities and county and local jails and prisons to substantially reduce their detainee occupancy capacity. Indeed, the Trump Administration has now recommended that gatherings of ten or more be avoided.2

As the COVID-19 pandemic spreads, the federal government and states are directing measures to reduce the spread of the disease to prevent countless deaths and the collapse of healthcare systems. These jails run the risk of becoming “incubators” for COVID-19, according to a physician specializing in healthcare issues in prisons and jails.3 Already it has been reported that a staff person at the Elizabeth Detention Center in New Jersey may have exposed detainees and
other staff to COVID-19. In addition, given the documented inadequacies of medical care and basic hygiene in immigration detention facilities, it is of vital importance for state public health authorities to address the state-wide risk posed by crowded immigration detention facilities.

The release of detained immigrants by ICE is already legally authorized under existing federal laws and regulations as detailed in our attached letter to the Department of Homeland Security (DHS).

Working with ICE to immediately parole and release detained immigrants would be manageable and safe. Many immigrants currently detained are longtime residents of the United States who were taken from established lives in this country, and many others, including asylum seekers, have close family, faith and other community ties who would help house them. Many detained asylum seekers are survivors of horrific persecution, torture and trauma in their home countries with sponsors able to help meet their psycho-social needs. Among those held in immigration detention are many who would be particularly vulnerable to COVID-19 due to their age or serious medical conditions. For instance, in fiscal year 2018, ICE held more than 700 individuals over the age of 65 in its immigration detention facilities.

Detained individuals—as well as facility, immigration court and agency staff and outside lawyers and others—will face grave risks in immigration detention facilities if they are exposed to infection, such as through a staff member who is unaware that he or she has COVID-19. Rapid spread within crowded detention centers is of major concern. For example, the Essex County Correctional Facility holds on average over 600 immigration detainees. The release of immigrants is warranted in the public interest to reduce the number of individuals in detention to limit the spread of COVID-19 to both detainees and staff and ensure that medical staff—and area hospitals—have the capacity to manage any cases that may arise.

Public health experts have already recommended reducing prison and detention populations in response to the COVID-19 pandemic. For example, Dr. Marc Stern, a correctional health expert and former health services director for Washington State’s Department of Corrections told Human Rights Watch that “[w]ith a smaller population, prisons, jails, and detention centers can help diseases spread less quickly by allowing people to better maintain social distance,” and “[i]f staff cannot come to work because they are infected, a smaller population poses less of a security risk for remaining staff.” Dr. Homer Venters, 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. Anne Spaulding 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.” Already some states and localities are seeking to release individuals from jails.

We urge you to work proactively with ICE to swiftly and safely reduce the populations of immigration detention facilities and mitigate the otherwise inevitable spread of COVID-19 to the
men, women and children held in these facilities. Communication and coordination are needed to ensure that those with underlying health needs receive continuous medical care upon release. For all releases, ICE should also be expected to communicate with the detainee, their attorney and family, as well as with community and local health resources to ensure any necessary care and to coordinate safe travel arrangements for detainees who are released far from their homes or sponsors.

As the government official responsible for the health and safety of your state’s residents, we urge you to take all possible actions to ensure that immigrants and asylum seekers detained in ICE facilities in New Jersey are released without delay and that all appropriate steps are taken to protect these individuals, facility staff and the broader public from the threat posed by the COVID-19 pandemic in densely populated ICE detention facilities.

Sincerely,

Physicians for Human Rights

Human Rights First

Amnesty International USA

Enclosure: Letter to DHS regarding COVID-19 and Immigration Detention

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9 University of Washington, Dep’t of Health Services, “Marc Stern,” available at https://depts.washington.edu/hserv/faculty/Stern_Marc.


