March 30, 2020

The Honorable Chad F. Wolf  
Acting Secretary  
Department of Homeland Security  
2801 Nebraska Avenue NW  
Washington, D.C. 20528

Matthew T. Albence  
Acting Director  
U.S. Immigration and Customs Enforcement  
500 12th Street, SW  
Washington, D.C. 20536

Dear Acting Secretary Wolf and Acting Director Albence:

As the COVID-19 pandemic continues to sweep across the country, putting millions at risk, I ask that you release non-violent detainees who pose no public safety threat and those at high risk of getting severely sick from the illness from Immigrations and Customs Enforcement (ICE) custody. Close quarters in detention facilities pose a danger to the health of detainees, detention center employees and the public at large. Reducing the number of those in detention is necessary to fight community spread of the virus and save lives.

As you know, on March 24, a 31-year-old detainee in custody at the Bergen County Jail in Hackensack, NJ tested positive for COVID-19. On March 26, 2020 a 52-year-old ICE detainee at a facility in Essex County, New Jersey tested positive for COVID-19. Most recently, on March 30, 2020, ICE reported that two additional detainees in ICE custody at facilities in New Jersey tested positive. ICE itself reported 33 cases of COVID-19 among its employees, 5 of whom work in detention facilities in New Jersey.

Of the approximately 38,000 detainees in ICE custody, more than “60 percent of those detainees—22,936 people—do not have criminal convictions.” Thousands of these individuals are asylum-seekers, who have already demonstrated a credible fear of being persecuted or tortured if they are returned to their home country. Given the unprecedented nature of this pandemic, public health and safety is best served by ICE reviewing detainee records and releasing all non-violent individuals who pose no significant threat.

1 Congressional Notification, 3/24/20  
3 Congressional Notification, 3/30/20  
4 https://www.ice.gov/coronavirus; Congressional Notification, 3/20/20  
to the public, prioritizing those at risk of significant health consequences should they become infected, including seniors; those with heart or lung disease, diabetes, or compromised immune systems; and pregnant detainees.

As outlined by Professor Carlos Franco-Paredes, an Associate Professor of Medicine and expert in infectious diseases, “the treatment of immigrants inside detention centers which could make the current COVID-19 epidemic worse in the U.S. by having a high case fatality rate among detainees and potentially spreading the outbreak into the larger community.” Professor Franco-Paredes notes that that conditions inside detention facilities including “incomplete adherence to infection prevention protocols including the appropriate use of personal protective equipment is insufficient to contain the spread of this disease.” Moreover, “the medical care available in DHS custody cannot properly accommodate the needs of patients should there be an outbreak of COVID-19 in an immigration detention facility.”

A number of community based alternatives to detention provide ICE with the ability to safely monitor immigrants as they await adjudication of their removal cases like the Family Case Management Program. These alternatives are not only effective in ensuring immigrants appear for their court appointments, but they cost less.

As we work together to manage this crisis and help reduce the potential outbreak in detention, I ask that you do what is best for the public health of the country and promptly release non-violent detainees who pose no public safety risk and the most vulnerable to this illness from ICE detention. Thank you for your consideration to this important matter.

Sincerely,

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Robert Menendez
United States Senator

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7 Id.
8 Id.
9 https://www.npr.org/2018/07/18/629496174/alternatives-to-detention-are-cheaper-than-jails-but-cases-take-far-longer