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VIA ELECTRONIC MAIL

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RE: COVID-19 AND VULNERABLE POPULATIONS INCARCERATED

Dear Directors of Arizona ICE ERO and Arizona DOC:

The spread of COVID-19 is a national emergency that threatens millions of people across the state of Arizona. We urge the Arizona Immigration & Customs Enforcement, Enforcement & Removal Operations (ICE ERO), the Arizona Department of Corrections (DOC), sheriff’s offices, and police departments across Arizona to protect the lives of our most vulnerable community members by immediately releasing all people from incarceration and ending the flow of new people into jail, prison, and immigration detention systems.

We write on behalf of Puente Human Rights Movement (Puente), a longtime leader in the fight for migrant justice in the state of Arizona, and Advancement Project National Office, a national racial justice organization based in Washington, D.C. Since its founding in 2007, Puente has been on the forefront of the fight for the rights of immigrant communities, and has continued to increase its ties to the community by also supporting and helping those entangled in the mass incarceration system throughout the state of Arizona. Advancement Project National Office, through both its Immigrant Justice Project and Justice Project, supports grassroots organizations in building power to end the racist criminalization of migration as well as the mass incarceration system writ large. Previously, Advancement Project conducted a stakeholder visit of Eloy Detention Center in August 2018. We documented our findings on conditions inside Eloy and inside Arizona DOC

The COVID-19 pandemic has put all of our communities in danger and filled us all with unfathomable worry and uncertainty. We know that these stressors are exacerbated for our most vulnerable communities – people currently incarcerated, including in immigrant detention. The only legitimate response to the COVID-19 pandemic is decarceration. Arizona has the fourth highest imprisonment rate in the United States, and the State forces people to remain incarcerated for far longer than the national average. Unconstitutional policing practices by the State’s largest police department have frequently led to the mass incarceration of vulnerable and marginalized communities members. There are over 42,000 people incarcerated in Arizona’s prisons. As for people detained in immigration facilities, there are nearly 40,000 people in ICE custody nationwide, and Arizona incarcerates 10% of the immigrants in detention across the country. Incarcerated people are at an increased risk of exposure and death, and the consequences of foregoing the responsibility to protect their lives will be devastating.

Dr. Homer Venters, an epidemiologist and the former chief medical officer on Rikers Island who helped oversee efforts to contain the outbreak of the H1N1 virus inside New York City’s jails, argues that jails and prisons are uniquely vulnerable to an outbreak of COVID-19. First, they are “full of people who are at higher risk than the general public”. Our prisons are filled with people who have multiple medical diagnoses, older than the general population, and more impoverished as well.

In jails, the situation is even worse, according to Dr. Venters because of the structures and practices inherent to jails. After people are arrested, they transfer from room to room with groups of people larger than ten, creating the ideal environment for viruses to spread. “The jails are built to operate this way: big pens, big groups of people coming in. Five, ten, fifteen, twenty at a time going in blocks through cells. They start out in one cell, then they go to a second cell. They might go through six or eight cells. They don’t really have hand-washing access built in. That is basically a system designed to spread communicable disease.”

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2 Id.
8 Id.
9 Id.
Because of the inherently dangerous conditions Dr. Venters highlights, officials around the country are taking steps to reduce the threat to the people they currently detain, the guards and staff they employ, and the general public. Officials in Cuyahoga County reduced their jail population by 17% in 8 days because of the public health and safety threats of COVID-19.10 Similarly, in Tampa Bay, officials have released 164 people awaiting trial because of COVID-19.11 In Los Angeles, Sheriff Alex Villanueva has reduced his jail population by 600 since February and decreased arrests in an effort to protect public safety.12 Finally, more than 30 prosecutors from across the country have called on public officials to release people from jail and prison, issue summonses instead of making arrests, suspend new detentions of non-citizens, and release all people under the age of 21 from immigration detention unless there are specific, articulable, and compelling public safety concerns.13

The COVID-19 pandemic emphasizes a fundamental truth: mass criminalization and incarceration must be understood as a public health crisis. The Centers for Disease Control and Prevention (CDC) recommends physical distancing, which is impossible for incarcerated people who live in incredibly close quarters and lack freedom of movement. The people incarcerated in Arizona’s prison system have suffered from its longstanding failure to provide any semblance of medical care,14 and the alarming rise of deaths and disease in ICE facilities is tied to medical neglect, unsanitary conditions, and inadequate resources for the people detained. These conditions throughout the carceral systems in Arizona heighten the risk of both a viral outbreak and a wholly inadequate medical response in the midst of this global crisis.

This heightened risk of harm is multiplied by the fact that the criminal legal system, which includes the state’s immigration enforcement and incarceration systems, targets and ensnares the most vulnerable members of our community. The imprisonment crisis is disproportionately felt by communities of color, namely Brown and Latinx, Black, and Native communities in Arizona.15

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Additionally, almost 1,200 people in Arizona’s prison systems are already over the age of 55.\textsuperscript{16} We have witnessed firsthand the lack of medical attention for people incarcerated in immigrant detention centers. During a stakeholder visit to Eloy Detention Center in August of 2018, we met with people who were detained who shared with us recurring stories about the lack of quality medicine, as if they were from a “dollar store,” as well as the neglect of people’s needs and conditions.\textsuperscript{17} One woman we spoke with shared that she had developed diabetes while being at Eloy – several people shared that it would often take repeated requests over several days in order to see a doctor for an ailment.\textsuperscript{18} This pandemic further exacerbates the already abysmal conditions in these facilities. Due to inaction and lack of care, multitudes of people – including incarcerated and detained people, legal advocates, jail workers, and the broader public – will be cruelly placed on the frontlines of this crisis. Their protection warrants immediate emergency action.

The preventative actions recently announced by the Department of Corrections (DOC)\textsuperscript{19} and ICE\textsuperscript{20} in response to community and legal advocacy remain inadequate. Responses such as lockdowns, solitary confinement, and the elimination of visits from loved ones are punitive and dangerous to the mental and physical health of people, and the limited access within DOC and ICE facilities to sanitation supplies, phone calls, and medical care is insufficient. Much more must be done to protect the lives endangered by the carceral systems in our state.

Continued incarceration will be a death sentence. To protect our most vulnerable community members, we demand the following actions:

- Release all people who are incarcerated or detained. In particular, immediately release individuals over the age of 50 and all populations identified by the CDC as vulnerable.\textsuperscript{21}
- Provide good time credits and release all people who have release dates in 2020 or 2021.
- End all immigration enforcement throughout the state.
- Eliminate ICE check-ins and mandatory court appearances.
- Stop holding people for or releasing people into ICE custody.
- Issue a moratorium on new bookings and carceral sentences.
- Release people from incarceration with a holistic release plan, including connecting them to emergency housing, Medicaid or Medicare enrollment, access to food, and mental health care.

\begin{thebibliography}{9}
\bibitem{id_at_31} Id. at 31.
\bibitem{shoichet_supra} Shoichet, supra note 5.
\end{thebibliography}
- Treat any people who remain incarcerated with the dignity they deserve. Provide unlimited free phone and video calls, universal free COVID-19 testing, and unlimited free soap and other sanitation supplies (including hand sanitizer, which should no longer be deemed contraband). Corporation and vendors should not be allowed to profit from this pandemic.
- Eliminate punitive measures, such as solitary confinement or further restrictions on people’s mobility. Such measures cannot replace adequate healthcare measures.
- Loosen restrictions on electronic monitoring, supervised release, or house arrest so people are able to move freely to access medical care, food, or to provide care for loved ones in need during this crisis. All requirements for in-person check-ins, including drug testing or other mandatory appearances, must be waived.
- Release all individuals who are being detained solely because they cannot afford cash bail.
- Eliminate Parole and Probation Revocations for Technical Violations. In 2016, approximately 60,000 people nationwide were returned to state prison (and a larger number were arrested), not because they were convicted of a new criminal offense, but because of a technical violation of probation and parole rules, such as breaking curfew or failing a drug test. States should cease locking people up for behaviors that, for people not on parole or probation, would not warrant incarceration. Reducing these unnecessary incarcerations would reduce the risk of transmitting a virus between the facilities and the community, and vice-versa.

In this time of unprecedented uncertainty and crisis, we believe that implementing these changes immediately are necessary in order to protect the health and wellbeing of the entire community in Arizona. Please do not hesitate to contact us with any questions or concerns. Please direct your questions or concerns to L.Jimenez@advancementproject.org and Jovana@puenteaz.org or (202) 728-9557. Thank you for your time and attention to this matter.

Sincerely,

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