



## Wednesday, August 13, 2014 – Congressional Testimony

Representative Joe Garcia, Representative Ted Deutch, and Members of the Committee, thank you for inviting Community Initiatives for Visiting Immigrants in Confinement (CIVIC) to testify today on the U.S. immigration detention system.

CIVIC is a national nonprofit working to end the isolation and abuse of people in U.S. immigration detention through visitation, monitoring, and other targeted campaigns. As a network, we conduct nearly 20,000 visits to people in over 30 immigration detention facilities across the country each year. Our network of visitor volunteers provides the only consistent community presence in many of these facilities. This testimony has been compiled from visits to people in immigration detention, interviews with people in detention over the phone, letters from people in detention, and tours of these facilities under U.S. Immigration and Customs Enforcement's Stakeholder Tour Directive.

### I. Overview

The scale of the current U.S. immigration detention system is unprecedented in U.S. history and unmatched in any other country. Over 34,000 men and women are held in civil immigration detention each day in the United States.

The main complaints we receive from people in immigration detention across the country concern one of the following: prolonged detention, physical abuse, sexual harassment, medical abuse/neglect, arbitrary or overuse of solitary confinement, lack of access to legal representation or to the law library, visitation problems, exorbitant phone call prices, frequent transfers, religious freedom violations, food/nutrition issues, hygiene/detention cleanliness, and unsafe releases.

Our testimony provides an overview of each of these complaints. We also have included more in depth testimony from three immigration detention facilities in Florida: the Krome Service Processing Center, the Broward Transitional Center, and the Monroe County Jail.

We respectfully request Representative Joe Garcia and Representative Ted Deutch to continue pushing for an end to the immigration detention bed quota, and eventually, an end to the entire immigration detention system. We also hope that the Congressmen will not accept any more campaign contributions from private prisons corporations that profit off of this inhumane system. While CIVIC hopes for an end to the immigration detention system entirely, we also recognize the long road ahead to achieving this goal. In the next two years, we would like to see Congress pass a bill to establish a protected right to visitation from family and the community for people in immigration detention. We also would like to see Congress create an independent oversight committee comprised of non-governmental stakeholders and appointed by Congress, which would have the power to conduct unannounced inspections of any ICE-contracted facility, document these inspections, and obtain documents.

### II. Prolonged Detention

The problem of prolonged detention is due in part to the extraordinary expansion of immigration detention in general as U.S. Immigration and Customs Enforcement (ICE) has ramped up its enforcement efforts and Congress has authorized more and more detention beds through appropriations. In just over a decade, immigration detention has tripled. In 1996, the daily bed capacity was less than 10,000. Today, ICE holds over 34,000 individuals each day.

Under immigration laws, many immigrants are subject to mandatory detention during the pendency of their immigration cases. These individuals are held without any right to a bond hearing before an



immigration judge. In 1996, Congress significantly expanded the categories of individuals who are subject to mandatory detention to include immigrants convicted of essentially any crimes, including non-violent misdemeanor convictions.

CIVIC routinely visits with people in immigration detention who have been held for over six months and sometimes for years. To prevent people from being held in indefinite limbo, the Supreme Court ruled in *Zadvydas v. Davis* (2001) that the indefinite—or potentially lifelong—detention of immigrants raised “serious” constitutional concerns and interpreted the immigration statute to authorize detention of such immigrants only where their removal is reasonably foreseeable in the future. However, *Zadvydas* only applies to people who are in post-removal detention, that is, they have a final order of removal from an immigration judge. The majority of people in immigration detention are in pre-removal detention and are still fighting their case in immigration court. For them, there is no time limit for how long they may stay in immigration detention.

Some lower courts have tried to at least provide people who are in mandatory immigration detention with a bond hearing if they have been in pre-removal immigration detention for at least six months. For example, the Court of Appeals for the Ninth Circuit ruled in August 2013 that immigrants who have experienced prolonged detention have a right to a bond hearing to determine whether or not they should continue to be detained. See *Rodriguez v. Robbins*. The ruling stands to benefit thousands of people in immigration detention across the Ninth Circuit, where an estimated 25% of immigrant detainees are held every year.

However, due to the arbitrary nature of detention transfers, ICE still has the power to prevent people from benefiting from this ruling. For example, when the Ninth Circuit issued its decision in *Rodriguez v. Robbins*, dozens if not hundreds of individuals were transferred out of the Ninth Circuit. Sylvester Owino was one of these individuals. Mr. Owino was close to obtaining a bond hearing under *Rodriguez v. Robbins*, after spending seven years in immigration detention at the El Centro Service Processing Center in California. “Most of us that were fighting our cases were moved to Alabama where we cannot have those kinds of hearings,” explained Sylvester Owino. Owino remains in detention today at the Etowah County Detention Center in Alabama, after spending eight years in immigration detention without a bond hearing.

When a federal district court in Massachusetts issued a similar ruling earlier this year that entitles immigrants who have been detained for more than six months or more to a bond hearing, CIVIC saw another influx of immigrants transferred from Massachusetts to Alabama and Louisiana.

### Physical Abuse

People in immigration detention often do not report abuse to government authorities for several reasons, including fear of retaliation. When they do report abuse to the government, the government does not always track the claims or report them through the proper channels, according to a recent Government Accountability Office review. When physical abuse is reported to CIVIC directly, we classify the abuse in one of two categories: abuse at the hands of ICE/detention officials or abuse by other detainees/inmates that ICE is either unwilling or unable to prevent.

Over the course of the last few months, CIVIC has received increasing reports from people detained around the country about how they have been physically assaulted by ICE officers. Over 20 people who are either currently in detention or who have been deported have reported to CIVIC that ICE has transported them to international airports and used physical force to coerce them into signing for



voluntary departure or physically assaulted them prior to their deportation. Most of these reported incidents of abuse have occurred in Louisiana, Alabama, Florida, and California.

CIVIC has documented these instances of abuse, and CIVIC may be open to providing Congress with more information about other cases. However, we are concerned that ICE will retaliate against these individuals. Yu Wang is brave enough to come forward for this testimony:

Yu Wang explained that on the morning of September 10, 2013, at approximately 10 a.m. PST, on the way to board United Airline flight 889 (SFO to Beijing), the following occurred: "I, Yu Wang, was brutalized by four officers from ICE's Northern California Field Office when they tried to deport me on United Airline flight 889. The ICE officers cuffed and tied me and hauled me like a piece of luggage with my face scraping against the ground. They kicked my head and face while ignoring my plea. In front of passengers, these officers did not stop torturing me even though blood was gushing from my face and head. Knowing I have a heart problem, the officers took turns to cover my mouth when I was gasping for air. During this ordeal, I was cuffed and tied for more than eight hours, denied water and food despite my repeated begging. As of today, I still bear the scars from the torture, and I will have to bear them for the rest of my life."

When CIVIC's Christina Fialho visited the California City Correctional Center on October 11, 2013, she met Mr. Wang. Mr. Wang showed Ms. Fialho the bruises he still had on his arms, legs, and face from this beating. Mr. Wang has been deported to China. CIVIC submitted a complaint on behalf of Mr. Wang to the Department of Homeland Security's Office for Civil Rights and Civil Liberties, but we have not received a response.

CIVIC has documented dozens of cases where detention staff seem either unwilling or unable to prevent or stop abuse. One man who has been released from detention recounts an experience from earlier this year in immigration detention: "When I asked for help because there was a man threatening me in my cell, and I wanted him to be moved out, the manager told me that I can't always get what I want. They left that man in my room for 3 days and 2 nights. I didn't sleep for all three days because I was so afraid. When I would call for the guards through the glass in my cell door, they would just get up and close their door to not see me and to ignore me. They acted like they really didn't care what we wanted. When we send detainee request sheets, the guards almost never reply or we get denied."

Most recently, a person in immigration detention was brutalized in the Bergen County Jail in Hackensack, New Jersey. According to Sue Kenney who is a visitor volunteer with First Friends of New Jersey and New York, a CIVIC-affiliated visitation program, another person held at the Bergen County Jail who had been put in the same cell attacked one of the men in immigration detention. All the other men in that immigration detention pod started yelling from their locked cells to the officer on duty. The officer did not get up to stop the fight, until the fight was over. After the fight was over, the officer got up and walked slowly to the cell where the fight had taken place, looked inside and said, "You guys are about done?" The fight was so brutal, that the men report seeing staff cleaning up blood from inside the cell. The detention staff's response was to put both of the men who had been fighting in solitary confinement, although according to the men in detention, it was clear that only one of the men had instigated the fight. Additionally, because the other men in immigration detention had been yelling at the officer on duty to stop the fight, the entire pod of about 60 men were put on a 24-hour lockdown as punishment.

Additionally, at the Etowah County Detention Center (ECDC) in Gadsden, Alabama, detainees have raised serious concerns regarding their safety and wellbeing. The Etowah County Detention center is an ICE contracted detention facility run by the Etowah County Sheriff's Department. The Etowah County



Detention Center houses approximately 350 male detainees for periods of time ranging from several weeks to several years. Both ICE and ECDC staff work on-site at ECDC and cooperate fully in the assignment of detainees to the housing units. Four men who are detained at ECDC report that the facility is chronically and dangerously unsafe for immigrant detainees due to being understaffed and the lack of proper training for staff. Currently, approximately 120 male detainees in Unit 10 at ECDC are monitored by only one Sheriff's Officer. "Understaffing and lack of proper training at ECDC is the root cause of numerous unsafe and intolerable conditions that afflict detainees at the facility, including increased violence, tension, discomfort, stress, mental suffering and psychiatric problems," one detainee reports.

For example, on June 23, 2014, Mouhamed Ndiaye, an immigrant detainee who has been in ICE custody since April 2013 was violently assaulted by another detainee. The assault took place by the facility barber shop, which is approximately less than 10 feet from the Officer's station. At the time Mouhamed Ndiaye was being attacked, the Officer on duty did little to protect Ndiaye. The attack proceeded without staff intervention and Ndiaye was viciously sliced on his neck requiring him to be airlifted to a medical center in Birmingham where he was treated with 28 stitches and told that he nearly lost his life. Detainees note that there is no first aid kit in Unit 10, and as a result, detainees that offered first response assistance used clothing that was not sanitized, which risked infecting his open wound. It took the Etowah County Detention Center medical staff almost 7 minutes to arrive on site. While at the hospital in Birmingham, Mouhamed Ndiaye requested a phone call from the Officer in charge of his supervision to notify his family of the medical emergency, but his request was flatly denied. Meanwhile, although Mouhamed Ndiaye has requested that charges for attempted murder be filed against the other detainee who attacked him, no action has been taken. Additionally, Mouhamed Ndiaye filed a grievance on July 4<sup>th</sup>, 2014, but has not received any response.

#### Sexual Abuse/Harassment

The Government Accountability Office, in its analysis of available data, found 215 allegations of sexual abuse and assault in ICE detention facilities from 2009 to March 2013, during which more than 1.2 million people were admitted into immigration detention. Eighty-six were made against staff members. Of the total allegations, the GAO found that only 15 were substantiated, 11 of those involved detainees assaulting other detainees and in the other four, the alleged perpetrator was a guard.

As mentioned above, people in immigration detention often do not report abuse for several reasons, including fear of retaliation. When they do report abuse to the government, the government does not always track the claims or respond to them properly. For example, between July 31, 2013, and August 6, 2013, CIVIC's affiliated visitation program at the Otay Detention Center in San Diego, California, raised the following three issues with ICE's San Diego Field Office: 1) We had received a complaint from a woman detained at Otay that a female guard had sexually assaulted her and that the guard still remained on active duty in her pod; 2) There was a severe bacterial infection in the legs of people in detention causing their legs to swell and weep fluid, and despite the spreading of this infection, it had not been addressed in the women's pod; and 3) There were concerns that transgender immigrants were not being housed according to their gender identification and were subject to harassment and abuse by other detainees. ICE responded by providing our affiliated visitation program with a form to sign that basically required volunteers to waive their First Amendment rights (see Attachment A). As visitors refused to give up their Constitutional rights, the visitors were blacklisted from visiting Otay. After eight months, the visitors were allowed back in to visit, but by then the woman who had been sexually assaulted had been deported. ICE never followed up with us about how the agency would be handling the concerns we raised.

Since then, we have received a number of other complaints about the guards at Otay. Most recently, a woman in immigration detention at Otay who had undergone a mastectomy for breast cancer was sexually assaulted by a female guard at Otay. The female guard stopped the woman in the middle of the co-ed cafeteria and performed a public search on the female detainee; no other detainees were being searched at the time. The guard made the female detainee take out the towel she had been using in her bra as a replacement for a mastectomy prosthetic. It is our understanding that ICE took some action around investigation, but to our knowledge, the female guard has not been disciplined. Additionally, we have received reports from people at Otay that this same female guard has been caught kissing at least one of the male detainees in the Receiving & Departure room where there are no cameras or audio. When one of the detainees approached her and told her that he had seen what she was doing to the male detainee, the female guard threatened him with deportation if he went public with the information.

Sexual assault and harassment is particularly concerning for vulnerable populations, such as transgender immigrants, asylum seekers, and young adults. Just recently, Marichuy Leal Gamino, a transgender woman who is detained at the Eloy Detention Center in Arizona was raped by her cellmate. Immediately after the assault, Marichuy reported the abuse but the staff instead tried to cover up the attack by pressuring Marichuy to sign a statement that the rape was consensual. The Transgender Law Center, CIVIC, and a number of other organizations have reported this to ICE's national office. Unfortunately, ICE's only response so far has been to put Marichuy in solitary confinement.

Besides running the risk of rape, transgender immigrants in detention suffer additional harassment. For example, transgender women are told to use their "male voice" or "act male" on a daily basis. They are called "princesses" by detention guards and not afforded with the medical care or hormone treatment that is required under ICE standards.

Women who are on their period in immigration detention are often not provided with underwear that fits them properly. In one egregious situation, a woman, C.M., in immigration detention reported to us that when she bled onto her underwear accidentally, a female guard gave C.M. and extra large pair of underwear. C.M. is a petite woman about 5 feet, 3 inches. When C.M. asked for a smaller pair of underwear, the guard said that she was being disobedient and put her into solitary confinement with only the extra large pair of underwear.

At the Sherburne County Jail in Minnesota, a county jail that contracts with ICE, an 18-year-old high school student in immigration detention was repeatedly sexually assaulted in April 2014 by his cellmate, a registered sex offender serving time in the jail as a "boarder" from the Minnesota Department of Corrections. Since the incident, the jail has supposedly separated the immigration detention population from the rest of the jail population. However, many other county jails across the country do not separate people in civil immigration detention from the rest of the jail population.

### Medical Abuse/Neglect

The standards for medical care are governed by the ICE Performance Based National Detention Standards, which vary in their application from facility to facility. People in immigration detention often struggle to get medical attention. People in immigration detention who need to see a doctor have to fill out a medical request form. Although ICE has told CIVIC that people are seen within 24 to 48 hours, nearly every single person we have interviewed across the country have told us that wait times are usually multiple weeks. One person in immigration detention explains the process, "Sick call is when you're supposed to go when you don't feel good or feel sick and they will attend you in the next 3 to 4 days. Sometimes they would take up to 2 weeks and sometimes they would just not call you at all. When I



was taken to see the doctor for an emergency, the doctor, thinking that I didn't speak English, told the nurse to tell me that he ran out of magic and to send me back. The nurse not believing what he said excused me. The doctor then yelled at the nurse that he was out of magic, and I was sent back to my cell."

Grassroots Leadership, which operates a CIVIC affiliated visitation program in Texas, spoke to several men at the Polk County Detention Center in Texas who explained that they were not "able to receive medication for chronic illnesses (e.g. hypertension, depression, PTSD), others reported not being seen for 3-4 days once they reported an illness. Several of the men were sick at the time of interview. Besides the head nurse, no other medical personnel were present at the time of tour. No pharmacist was mentioned. Several men reported serious chronic medical conditions that were not being adequately addressed by medical staff."

One man that we have been working with has had considerable difficulties getting his medication. John Emanuel Ferron was repeatedly denied his medication for a series of weeks at both the Eloy Detention Center in Arizona and the Etowah County Detention Center in Alabama. Mr. Ferron, a U.S. veteran, suffers from a number of psychological disorders. His medical records dating from 1986 at the Houston VA Medical Center explain that he has been diagnosed with PTSD and Major Depression; additionally, in a medical interview in 2000, he stated that he first started Thorazine in the 1980s. He should be taking daily doses of two medications, including 150 mg. daily dose of Thorazine. Thorazine is an antipsychotic medication used to treat schizophrenia as well as manic disorders in individuals with bipolar disorder. If a patient is abruptly taken off this medication not under the guidance of a trained psychiatrist, Thorazine withdrawal symptoms can include, but are not limited to Schizophrenia symptoms, such as hallucinations or delusions, nausea, vomiting, diarrhea, dizziness, and shakiness. It is our understanding that for over 2 weeks, Mr. Ferron was refused Thorazine at the Eloy Detention Center. Once we were able to work with ICE to get him back on his daily medication, he was transferred to the Etowah County Detention Center where he suffered similar problems with obtaining his medication.

Another man who was detained at the Otay Detention Facility in California recounts this story: "There was a pretty big man in an old wheel chair, which was provided to him by Corrections Corporation of America (CCA), the company that runs Otay. This man only had one leg, and the one leg that he had didn't work with the wheel chair they gave him because the wheel chair didn't have a piece for him to rest foot. So, he dragged his foot alongside the wheel chair for at least one to two months. After that, CCA promised him a new wheel chair that never came. Instead, they just broke off a foot piece off another wheel chair and put it on his. His wheel chair was so old that the chair was ripping and wasn't able to hold him for long periods of time. He kept making requests for a new chair. A human rights organization came and toured the Otay Detention Center earlier this year, and he was able to tell them about the problem with his chair. The organization told the staff that they needed to replace his chair. The next day, by joke, CCA brought a very tiny chair that he couldn't fit into. So, they gave him back his old chair."

A gay man detained at the Otay Detention Facility explains, "Me being openly gay, I went to the doctors and when he found out I was gay after 3 months of seeing him, he told me that I needed to be checked. I said why, and he said because you just have to be checked because my 'kind of people carry sickness and disease' and its better to be sure then sorry."

Dental services are rarely, if ever, used preventively. For example, on a tour of the Rappahannock Regional Facility in Virginia that CIVIC organized, we were able to speak to the dentist. The dentist told us that the only dental procedures he conducts are extractions. At the Bergen County Jail in Virginia, one man explained that he had asked to see the dentist for multiple weeks; his request had never been



answered. So, he had to resort to pulling out four of his own teeth. He showed his four teeth to his CIVIC visitor volunteer.

Mental health services are scarce in immigration detention. A former employee and psychiatrist of GEO Group reported to us that he had to conduct his sessions with this patients via video conferencing. When he would ask GEO to take the shackles off of the men in detention, GEO staff would rarely comply. When it was clear to him that the patients could not get the treatment they needed at the GEO facility, he would tell GEO that the person needed to be referred out to a hospital. The psychiatrist reports that GEO would tell him that it is not worth the money because the detainee is just going to be deported soon anyway.

As of December 2013, 141 people have died in immigration detention in the last decade (See Attachment B). Fernando Dominguez Valivia died in immigration detention at the Adelanto Detention Center; he was the thirteenth person recorded as a death in detention. ICE lists his cause of death as pneumonia, but a recent inspection report by the Department of Homeland Security concluded the center's medical staff committed egregious errors and "failed to provide adequate health care to the detainee." The report goes on to say Dominguez's death could have been prevented. (See Attachment C). Despite this report, ICE not only continues to partner with GEO Group, the publically traded corporation that runs Adelanto, but is going to be expanding detention at Adelanto by 640 beds by Summer 2015.

#### Arbitrary or Overuse of Solitary Confinement/Lockdowns

Solitary confinement and lockdowns are arbitrary. Currently, at the Santa Ana City Jail in California, people who are being held in the gay and transgender pod have been subjected to increased lockdowns. We have raised this with ICE's Los Angeles Field Office and with ICE's National office. We have received no response. The staff at the jail have told us that the reason for the lockdowns has been that they are short on staff. We have seen a similar trend at the Sherburne County Facility in Minnesota.

At other immigration detention facilities, such as the Ramsey County Jail in Minnesota, people are on lockdown every day for 18 hours. At places like the Ramsey County Jail and the Elizabeth Detention Center in New Jersey, people in detention also are not provided with any outdoor recreation.

Every day, approximately 300 people are in solitary confinement in immigration detention. People in solitary confinement are frequently deprived of telephone calls and visits. Some immigration detention facilities, such as the Hudson County Jail in New Jersey, have a policy not to allow people in solitary confinement to obtain a visit.

The devastating psychological and physical effects of prolonged solitary confinement are well documented: prolonged solitary confinement causes significant mental harm and places human beings at grave risk of even more devastating future psychological harm. Moreover, people can be put into solitary confinement for any reason. For example, it is our understanding that while Mr. Wang was detained at the Otay Detention Facility, he was held in administrative segregation, or solitary confinement, for over 50 days. The length of his confinement violates ICE's directive on segregation. Furthermore, it amounts to torture, according to the United Nations, which has called for an absolute ban on indefinite and prolonged solitary confinement in excess of 15 days. The ICE officers at Otay told Mr. Wang that he was being held in solitary confinement because he refused to be deported. They threatened him by saying that they would keep Mr. Wang in solitary confinement "forever" unless he would sign for voluntary departure. CIVIC submitted a formal complaint to DHS' Office of Civil Rights and Civil Liberties, but we have not received a response.

ICE also uses solitary confinement as a way to punish immigrants who try to advocate for improvements. For example, Standard 5.1 of ICE's Performance-Based National Detention Standards (PBNDS) reads, "A detainee may not act as a reporter." This standard explains why ICE placed six DREAMers at the Eloy Detention Center into solitary confinement after they interviewed and collected stories from people in detention who had committed no crimes. It also explains why ICE placed many of the immigrants who were on the hunger strike at the Northwest Detention Center in Tacoma, Washington, into solitary confinement.

## Lack of Access to Legal Representation or the Law Library

According to the American Bar Association, eighty-four percent of people in immigration detention lack attorney representation. Immigrants in detention must find a non-profit, pro-bono attorney, or private lawyer willing to take their cases, or forego representation. Accessing an attorney can be extremely difficult because phone calls from inside immigration detention are exorbitant. Additionally, many detention facilities, such as the Polk County Detention Center in Texas and the Theo Lacy Facility in California, do not have legal service organizations even providing know your rights or legal orientation programs.

Without a legal representative, people in immigration detention are subject to ICE coercion. For example, ICE has used misinformation, deception, coercion, and even physical abuse to pressure thousands of immigrants into forfeiting their right to a fair hearing and a chance to live here lawfully. One person who was recently released from immigration detention explains, "ICE would take advantage of the people who didn't speak English and didn't read English and making them sign their own deportation by telling them that this paper is just to see the judge when it actually said that they were not in danger of going back to their country. When they would refuse to sign, ICE would scream at them and insult them and tell them if they don't sign they will get deported." A lawsuit in California, *Lopez-Venegas v. Napolitano*, is actually challenging this practice as it pertains to Mexican nationals.

Without a legal representation, people in immigration detention often have to rely on their Deportation Officer (D.O.) in order to obtain information about their case. However, many people in immigration detention do not know the name of their D.O. One person who has been released from detention explains, "In the 4 months that I was locked up and asked for my ICE officer to come talk to me, he never did. I never met my officer. ICE would come and tell us we had no right for nothing and if we didn't like it to just go back to our country. They would talk to us like if they were disgusted by us."

Immigration cases can be appealed to the circuit court of appeal in the circuit in which the person resides. If a stay of deportation is either not granted or not available in that circuit, ICE can deport the person in some cases, even though the appeal is still pending. Without an attorney to help with the appeal process and to advocate for a stay of removal, people in detention experience attempted deportations often. One man recounts the six times that ICE has tried to deport him. ICE has tried to deport him six times since 2010, four of these times occurred in Florida and the two other times in Louisiana. He recounts: "ICE physically lifted me while I was shackled in chains from my waist, hands, and feet. One of the ICE agents, who were supposed to escort me to Bangladesh already knew what time it was because I refused in advance. Anyway, he told me while I was still in the ICE minivan if I was going to comply. I told him, with all due respect to him and ICE that I will not comply because I have imminent fear for my life and freedom in [my home country] due to my past political affiliation there. He was understanding and then told me that he and the other agents would go forward with the deportation order. I told them that this is not personal and that the only reason I am non-complying is due to the fear, my two children here who I do not wish to abandon, and also because I have a pending appeal with the higher courts in the



Eleventh Circuit. He then told me that I will have to refuse at the entrance of the aircraft, not from the minivan. He also told me that as we were close to the plane door that he would squeeze my arm to let me know when to start screaming and resisting physically. I was glad for the heads up. I complied all the way from the front of the airport through the airport lobby to the tarmac.

“While at the tarmac, there were 6 airport police and 4 ICE agents. Just in front of the plane where the terminal leads to the plane entrance, there are steps from the side of the terminal where the pilot and service people get in. This is where I was brought in. Now that I am a “pro” since this is my 6<sup>th</sup> time doing this, I was still nervous and scared. The ICE agents then proceeded to carry me up the steps to the plane. I was airborne during this time. We got to the top of the stairs and were in the front of the airplane entrance, the ICE agent squeezed my arm to begin my antics. I immediately started to resist and yell. Mind you, I am still shackled. My mobility is very limited. I tried to grab the handle of the walkway in between the terminal and the aircraft, but unfortunately, the plastic handle gave away and the whole thing almost fell down to the ground. The pilot immediately signaled the proceeding to stop and smiled at me. I was then put on my two feet and the ICE agents then proceeded to bring me down. I was repeatedly warned that I would be prosecuted in federal district court for failure to comply.”

### Visitation Problems

The United States’ current detention system provides minimal access to family and the community, and the degree of access is dependent upon the rules of the particular detention facility. Most U.S. immigration detention facilities only allow detained persons to visit with family through Plexiglas barriers or via video, even when visitors themselves are physically present in the detention facility. As many facilities are a considerable distance away from any major cities, some families are unable to afford visiting their loved ones in detention. Some families travel across states to see their loved ones in detention only to be turned away. For example, at the Stewart Detention Center in Lumpkin, Georgia, there are only five visitation booths for a facility with bed space for close to 2,000 immigrants each day. Family members sometimes are denied visits after travelling hours to get to the rural facility; this was happening so frequently that the community decided to establish El Refugio, which provides hospitality to families outside the gates of Stewart Detention Center.

No statutory right to visitation exists for persons in immigration detention. In the absence of a statutory right to visitation, ICE has established Performance-Based National Detention Standards (PBNDS) for ICE and ICE-contracted facilities. Different versions of the three sets of PBNDS currently apply to ICE’s various detention facilities. Standard 5.7 of the 2011 PBNDS, Standard 32 of the 2008 PBNDS, and the Standard on Visitation of the 2000 PBNDS all encourage community visitation. ICE’s most recent standard on visitation, Standard 5.7 of the 2011 PBNDS, ensures that persons in detention will be able to maintain morale and ties through visitation with their families, the community, legal representatives, and consular officials, within the constraints of safety, security and good order.

ICE’s PBNDS on visitation does little to incentivize detention facilities to create visitation policies that ensure people in detention can visit with family and friends. First, these standards are neither statutory nor incorporated into regulation. Therefore, they are not legally enforceable and lack disciplinary and financial consequences for facilities that fail to comply. In the absence of an enforceable regulation or policy, grave inconsistencies among detention facilities exist. Moreover, due to the lack of uniform application of detention standards, community groups hoping to establish a CIVIC-affiliated visitation program or family members who are denied visits cannot rely on the standards to help them gain access. Second, Standard 5.7 of the 2011 PBNDS gives detention facilities broad discretion with regards to visitation, as visitation may be restricted for “safety, security, and good order.” The 2008 and 2000



PBNDs on visitation contain comparable language. Thus, without violating Standard 5.7, detention facilities can refuse to work with groups advocating for increased visitation services by simply saying that an increase in visitors might negatively impact safety or security.

Moreover, ICE can and has restricted visitors for many different reasons, including advocating for improvement in detention or attending vigils outside of detention facilities. For example, in July 2013, ICE suspended three immigration detention visitation programs and blacklisted certain volunteers from any type of visit with people in detention, in clear violation of the ICE PBNDs. At the time of the suspensions, there existed 28 CIVIC-affiliated CVPs across the country, including two in Southern California: Friends of Orange County Detainees, which had been conducting visits at the Santa Ana City Jail and James A. Musick Facility since 2012, and the Friends of Adelanto Detainees, which had been recently approved by ICE and had begun visits at the Adelanto Detention Center. Together, the two groups had more than 130 volunteers.

These programs were abruptly suspended on July 24, 2013. The suspension occurred less than 48-hours after CIVIC's co-executive director Christina Fialho published a blog post on the Huffington Post in which she criticized ICE's treatment of LGBT immigrants in detention and called for certain reforms. In subsequent conversations with ICE's national office, ICE made clear that it suspended the programs because of Ms. Fialho's blog post and because of certain Facebook posts by visitor volunteers that were critical of conditions at detention centers. ICE requested that CIVIC and its volunteers remove the Facebook posts and cease public criticism of ICE.

CIVIC and the American Civil Liberties Union (ACLU) of Southern California, along with other legal service providers and advocates, sent two letters to ICE requesting that ICE reinstate the community visitation programs immediately and issue a public statement explaining its actions. The ACLU explained that the suspensions raised grave First Amendment concerns and gave the clear appearance that ICE was trying to silence its critics and shield the public's awareness of detention conditions.

After a vigil outside of the Adelanto Detention Center and media attention from the *Los Angeles Times*, the *Associated Press*, and other news media, ICE resumed visitation.

#### Violations of Phone Privileges/Exorbitant Phone Prices

When anyone in immigration detention wants to make a phone call to a family member or to an attorney, they must use special phones that make either collect or pre-paid debit calls. The phone rates for these calls are so exorbitant that the lifeline of phone communication is at risk for all people housed in immigration detention facilities. For example, calls can cost anywhere between \$.89 a minute to \$5.00 a minute. In most circumstances, families on the outside must initiate the creation and payment of phone accounts. Thus, if they are not able to locate their loved one in the immigration detention system, they will be unable to communicate.

Reasonable phone rates are particularly vital to people in immigration detention not only in terms of maintaining contact with their families, but also in terms of due process. Immigrants in detention are not afforded the right to a court appointed attorney, and as a result, 84% of immigrants in detention nationally must represent themselves in their immigration case. In order to adequately represent themselves, detained immigrants must be able to secure evidence, witnesses, and human rights reports to defend against deportation proceedings and to support asylum applications. It is impossible to amass such material without access to affordable telephone calls.



The prison phone industry is based on a monopolistic model in which companies bid on contracts to provide phone services for prison and jail facilities. As an incentive to obtain these lucrative contracts, phone companies provide commissions, commonly referred to as kickbacks, to the contracting agency. These kickbacks, which range up to 80 percent of gross prison phone revenue result in inflated phone rates for consumers (i.e. people in detention and their families).

Recognizing this practice, several states have eliminated the collection of concession fees, resulting in very affordable calls. Additionally, in late 2013 the Federal Communications Commission (FCC) approved an order mandating that inter-state calls to inmates be “just and reasonable.” As a result of the FCC decision, for example, the cost of a 15-minute phone call in Alameda County, California, has been capped at \$3.75, reduced from its former cost of \$16.70. This is beneficial for immigrants who are often detained in different states from where they entered custody or from where their families live, but it doesn’t affect calls within states. In fact, currently the cost of a 15-minute within-state call in Alameda County, California, billed at \$12.75 far surpasses the newly regulated cost of a long distance call at \$3.75.

It’s time that phone calls are based on actual cost and become accessible to everyone in immigration detention. While phone calls are more affordable in select facilities owned and operated by ICE, such as the Krome Service Processing Center in Florida, it is the responsibility of ICE to ensure fair rates and equitable telephone access for everyone in contracted immigration detention facilities.

ICE’s pro bono telephone system also is problematic: ICE’s self-inspection in 2008 revealed that 79% of the consulate telephone numbers ICE checked on the pro bono telephone system did not work and 100% of the pro bono legal service telephone numbers did not work.

Moreover, ICE and detention facility staff set up arbitrary roadblocks to making a phone call from inside detention. For instance, during his detention at Otay, Mr. Yu Wang was held temporarily incommunicado, despite his pleas to call his wife. The officers denied him the ability to call his wife for four days while in solitary confinement. According to ICE’s PBNDS on telephone access, a person in administrative segregation cannot be restricted from using the telephone unless the person is using it for criminal purposes, had previously damaged the telephone equipment, or the restriction is necessary for the safety and security of the facility. As none of these exceptions were present in Mr. Wang’s case, Mr. Wang should not have been prevented from calling his U.S. citizen wife. CIVIC submitted a formal complaint to DHS’ Office of Civil Rights and Civil Liberties, but we have not received a response.

### Frequent Transfers

In addition to the issues mentioned above about transfers, we have followed many individuals in immigration detention who have been transferred on average four times before being released or deported. Human Rights Watch reports that of the 2 million transfers that the government reported between 1998 and 2010, 46% were transferred at least twice and more than 3,400 were transferred over 10 times.

Transfers are horrific because they usually occur in the middle of the night. The person being transferred is not notified in advance. They are just woken up in the middle of the night, shackled, and put on a bus. It seems to be ICE policy not to notify the individuals in detention where they are going for “security” purposes because no one we have ever spoken to about their transfer experience has been told to where they were being taken. During the transfer process, people in detention do not even know if they are being transferred to another facility, released, or deported.



Some of the buses used to transfer people do not have bathrooms, and even if they do, ICE rarely lets an individual get up to use it. People have reported peeing in their pants because of the long trips without time to use the bathrooms.

### Religious Freedom Violations

Most immigration detention facilities have a chaplain on staff. This chaplain is usually a nondenominational Christian chaplain who administers religious services for people in immigration detention. We have received concerns from Catholics and Muslims in immigration detention.

At the California City Correctional Center—a facility that stopped operating as an ICE contract facility earlier this year—people in immigration detention who were Catholic explained that they were sad because they had not been able to receive the sacrament of the Eucharist. One person explained that for some time, a chaplain posing as a Catholic priest was providing them with grape juice rather than wine for the Eucharist. It is a definitive doctrine of the Catholic Church that only pure and natural grape wine can be employed as valid matter for transubstantiation into the blood of Christ. The 1983 *Code of Canon Law* declares: “The most holy Sacrifice of the Eucharist must be celebrated . . . in wine to which a small quantity of water is to be added . . . The wine must be natural, made from grapes of the vine, and not corrupt” (CIC 924). Moreover, the *Catechism of the Catholic Church* asserts that one of the “essential signs of the Eucharistic sacrament” is “grape wine” (CCC 1412). For a Mass to be valid, a consecration of wine—not grape juice—into Christ’s blood must occur.

Across the country, we have received reports from Muslims that they are prevented from worshiping. All of the immigration detention facilities CIVIC is aware of do not employ an Imam. For regular daily five prayers, Muslims do not need an Imam. However, for Friday congregational prayers, an Imam is needed. In absence of an outside Imam, the Shura Council of Southern California recommends that Muslims in immigration detention designate one from themselves. CIVIC has received accounts from Muslims in detention that guards have prevented them from freely convening every Friday for their prayers.

Muslims also have explained to CIVIC that some of the facilities do not have a halal diet. A halal diet is one that follows the rules of the Islamic faith, concerning what foods are prohibited, and how some foods should be prepared. At facilities that do not offer halal diet, the Muslims explain that they are given only rice and beans for nearly every meal.

LGBT immigrants in detention face discrimination by some of the employed Christian chaplains. One gay man explains, “They would call us criminals and give us criminal pamphlets and say that our kids are going to turn the same way as us. For the gays and the transgender people, we had to sit in the front and the church lady would get the transgender and make them kneel. The church lady would grab their heads and shake them and say out loud, ‘let the evil come out of you.’” The church lady would call the transgender women men. For the gays, she would make us read parts from the Bible and say that this would save us.”

### Food/Nutrition Issues

CIVIC has received thousands of complaints about food quality in immigration detention. The food is often described as “not clean,” the plates as “dirty with food from the previous meal and dirty water on the plate as if it was never dried,” the cups of juice come with some type of “oil floating on top of the juice.” One person in detention described the food in the following way: “There wasn’t a day when the food didn’t come with hairs, roaches sometimes metal or pieces of wood. Sometimes the food came burnt or

undercooked, and sometimes the meat came green and they would just say that, that is how it's supposed to be. I cut open the green meat and inside something like puss came out."

Grassroots Leadership, which operates a CIVIC affiliated visitation program in Texas, explains that despite the fact that officials at the Polk County Detention Center reported that men were fed 2600-2800 calories daily, nearly every man Grassroots Leadership spoke to on a tour reported that food quality was poor and that the quantity of food was not sufficient. Grassroots Leadership explains, "They also reported that the meals at Polk are sometimes over 14 hours apart. One man brought a sample in a plastic bag and showed interviewers a bug present in the food. He and others also claimed that pieces of wire brushes from the kitchen were sometimes found in the food. Men also reported insufficient fresh fruit and milk. Some men reported that they believe that they were given insufficient food so that they would buy food from the commissary, but that that commissary items were too expensive for many to purchase."

In March 2014, 750 detainees went on hunger strike at the Northwest Detention Facility in Tacoma Washington, an ICE contract facility that is run by the private prison company GEO Group. The strike was prompted by a call for better food, better treatment by guards, better medical care, and lower commissary prices—as many people in detention are forced to supplement their diets by buying additional food from the commissary. However, people in detention who are indigent are not able to do so.

At the Etowah County Detention Center in Alabama, immigrant detainees began a hunger strike on August 7, 2014, in protest of the lack of sufficient food. Detainees complain that the quality of the food is deplorable and that they are not served enough food to sustain themselves. Many people in detention are forced to supplement their diet by purchasing food from commissary, but for many indigent detainees, this supplementation is not an option. This is not the first time concerns about the food at the Etowah County Detention Center have been raised. In 2012, the facility was rated among the 10 worst immigration detention facilities in the U.S. by the Detention Watch Network. In July 2012, immigrant detainees held a hunger strike and 100 detainees signed a protest letter saying the food they were being served was rotten or nutritionally inadequate.

At the Ramsey County Jail in Minnesota, it is our understanding that most people in immigration detention lose weight, often get served cold food, and the food is not culturally appropriate.

At the James Musick Facility in California, people who are vegetarians are not afforded with vegetarian meals. One woman who was detained at Musick asked ICE and the jail staff for a vegetarian diet for religious reasons. She was not afforded a vegetarian diet for the six months she was detained there.

### Hygiene/Detention Cleanliness

The temperature in many immigration detention facilities and border patrol cells are not regulated properly. In a recent heat wave in Orange County, California, people at the James Musick Facility explained that the air conditioning unit was broken and it felt like a swamp inside the sleeping areas. In the Border Patrol "iceboxes," the temperature is kept at refrigerator temperatures in what seems to be an effort to pressure immigrants to sign for voluntary departure.

Showers are not provided every day of the week at every detention facilities. Some facilities also do not provide hot water for the showers. Other facilities provide water that is too hot. One person in immigration detention explains, "They kept the shower water at extremely hot for four days and when we told some one that it was too hot they said we had to wait. They didn't do anything about it for four days."





People in immigration detention are not provided with adequate toiletries. For example, people in immigration detention at the Polk County Detention Center reported moldy showers and explained that their requests for bleach to clean the showers were denied.

Women in detention facilities across the country are often rationed to one or two feminine pads per day, and one toilet paper for the week. If people in immigration detention get caught by the guards with more than one roll of toilet paper, detainees are thrown into solitary confinement and the toilet roll is confiscated as “contraband.”

A person who was detained at the Otay Detention Center explains, “On our rule book, it said we had the right to 5 white shirts, 3 pants, 5 socks, 5 underwear, 3 blue vests, and 1 pair of crocs. However, the guards said we couldn’t have more than one of each, and they would come into our rooms with huge trash bags and go through our stuff and throw away our cloths and even the things we purchased from the commissary.”

At other immigration detention facilities, such as the Ramsey County Jail in Minnesota, it is our understanding that people are not provided with long sleeve undershirts or even provided with the opportunity to purchase them, even in the middle of the winter.

People in immigration detention have reported facilities that have problems with bugs. For example, the Polk County Detention Center seems to have a problem with bugs and mosquitoes entering the detention pods through the drains and sinks. The Adelanto Detention Center had an infestation of flies, in which thousands of bugs were swarming through the pods. The officers reportedly ignored the problem, and the med had to swat the flies on their own with newspapers and collect them in paper bags.

### Unsafe Releases

Because immigration detention facilities are in remote areas and because ICE often releases people at night, people are often released into a very unsafe environment.

For example, at the West County Detention Facility in Richmond, California, a contract ICE facility run by the Contra Costa County Sheriff’s Department, immigrant detainees are routinely released in an extremely unsafe manner. Recently, the ICE population of the facility has changed drastically and asylum seekers now constitute 70 percent of the total population of 300 detainees. People applying for asylum are afforded a credible fear interview in San Francisco to determine if they have a viable asylum claim. After passing the interview, detainees are given bonds that their families must pay to secure their release. On average, bonds are set at \$10,000 but may be reduced to as low as \$1,500 on appeal.

Due to the high cost of phone calls for people detained at the West County Detention Facility, it is difficult for family members to communicate with their loved ones in immigration detention and arrange for their safe release and travel to reunite with their families within the United States. Immigrants are released from ICE custody by the local jail staff on the day their bond is paid. They are released only with the clothes they were booked in with and with shoes that lack shoelaces. All property that individuals had on their person before being taken into custody are stored at the San Francisco Immigration court, 30 miles away from the facility. As a result, asylum seekers are released from the facility with no identification or money, often as late as midnight and with no safe place to seek refuge. The jail staff at the West County Detention Facility is extremely disappointed by the lack of accountability on the part of Immigration and Customs Enforcement to ensure the safe release of people from their custody. In many cases, the jail



staff will call CIVIC to notify us of when people in ICE custody are released in unsafe circumstances, which is exacerbated by the fact that many asylum seekers do not speak English.

CIVIC collaborates with two other San Francisco Bay Area organizations to provide a Post Release Accompaniment Program. Volunteers and staff of this emergency response initiative work with people in detention and their families to pick up detainees who have been released, provide them with food, clothing, and in some cases overnight shelter, and arrange for their safe transportation to their families in many different parts of the country. The services that are provided by CIVIC and its local partners with no financial support are the duty and responsibility of ICE, however, ICE has continually failed to ensure the safety of people in their custody upon release.

#### Florida has 10 immigration detention facilities.

Florida has ten immigration detention facilities. Most are in very remote parts of the state, such as the Monroe County Jail on the small island of Key West. We are providing you with an overview of the Krome Service Processing Center in Congressman Garcia's district as well as the Broward Transitional Center and the Monroe County Jail.

#### Krome Service Processing Center

CIVIC's affiliated visitation program, Friends of Miami-Dade Detainees, operates a visitation program at the Krome Service Processing Center, which is one of a handful of detention facilities owned and operated by U.S. Immigration and Customs Enforcement (ICE). Opened in 1980 to detain an influx of Cuban and Haitian immigrants, Krome today detains approximately 600 men, mostly from Central and South America. Friends of Miami-Dade Detainees has been visiting men confined at the Krome Service Processing Center in Miami-Dade County since February 2014. The visitation program was approved by ICE, thanks to the support of Representative Garcia who wrote ICE a letter of support. To date, this is the only known approved immigration detention visitation program in the state of Florida.

CIVIC led an initial tour of Krome in June 2013, where we saw the inside of the facility and spoke to over 30 people in immigration detention. One of the most shocking aspects of the tour was the gunshots heard on the property. ICE officers have target practice on the detention facility property each day. This was very unnerving for the participants on the tour, and people in detention explained that it is psychologically tormenting, especially for the asylum seekers fleeing war-torn countries.

The following account was written by leaders of the Friends of Miami-Dade Detainees, Glenn Hutchinson (a professor at Florida International University) and Bud Conlin (a retired high school principal):

"Since we were officially approved as a visitation program in February 2014, we have conducted over 200 visits to Krome. We also sponsor a phone line where the men detained can call us at no cost to themselves. This access has given us a first-hand look at life inside an immigration detention center in general and Krome in particular.

Life inside Krome is bleak. It gives the appearance of an efficient warehouse where inventory is stored, maintained, and transferred in the best interest of a corporation. It is also always cold. The men at Krome are housed in large open pods consisting of rows of bunk beds and two televisions, one tuned to Spanish and one tuned to English. Diversions are scant. These are limited to a minimal supply of recreational reading material and a law library with donated books. Most men report they pass the time sleeping. We have noticed that many men report high blood pressure, diabetes, and chronic coughs. This spring, men reported up to 100 men detained in housing pods designed for 60. We saw evidence of



this during a tour/visitation. It was reported by the men that this was due to a quarantine situation related to an outbreak of chicken pox.

Perhaps the most vexing problems noted are the limited opportunities for visiting family and the frequent transferring of the men throughout Florida and the Southeastern United States. In order to have a family visit, a man detained at Krome must supply his visitor's name, address, and date of birth at least 48 hours before the requested visit. Assuming he has this information, he must then communicate the date and time for his approved visitor to arrive at Krome. Visiting times are also strictly regulated by the first letter of the last name, further restricting when family members can visit. All family visits are noncontact behind a thick glass, further increasing isolation.

Attorney visits also are rare. Although a few lawyers offer pro-bono help, most of the detainees I've visited are not able to get a lawyer.

During our time at Krome, we have noted frequent and seemingly arbitrary transferring of men. For example, men may be at Krome for a month, be transferred to the Glades County Detention Center in Moorehaven, Florida, two months later sent to the Monroe County Detention Center in Key West, Florida, next, they may be moved to the Baker County Detention Center near Jacksonville, Florida, or even the LaSalle Detention Center in Louisiana, and then finally returned to Krome. These long and frequent transfers are debilitating and stressful to the men and their families. They also make preparing a defense in their cases almost impossible.

I have visited several times with Heriberto Del Valle, a 64 year-old man who has been held in Krome since 2009. He was born in Cuba, but has lived in the United States since 1980. It is my understanding that because of his psychological evaluation, he is isolated in an individual cell with little human contact. He can't be deported to Cuba, but ICE won't release him; so, he lives in limbo for five years.

There's Wally Quijano, who has an 11 year-old son in Bradenton, Florida. Wally was deported, separated from his family. Last Christmas, Wally's son wrote a letter to his father's deportation officer. "Please return my father...The only thing I want is him." So now the Quijano family in Bradenton, Fla., has an empty chair at the head of the table. Like thousands of detainees held in the 250 detention centers across our country, Quijano had no criminal record. He overstayed his visa and then came back for his son.

I have met many other men who want to pursue their education and the American dream, and they sit in a detention center for months, sometimes years, without legal representation. They sit and wait at the expense of taxpayers.

During our time at Krome we have noted frequent and seemingly arbitrary transferring of men. Men may be at Krome for a month, be transferred to the Glades County Detention Center in Moorehaven, two months later sent to Monroe County in Key West, next then moved to the Baker County Detention Center near Jacksonville or even the LaSalle Center in Louisiana; and then back to Krome. These transfers are debilitating and stressful. They also make preparing a defense in their cases almost impossible. And many detainees tell us that the conditions at the other centers are far worse than Krome.

If a detainee is lucky enough to be released, he exits the center, often late at night outside the gates of Krome. It is an isolated, dimly lit road, and the nearest gas station is nearly a mile away.

This is a system that separates immigrants from their families. Detainees should not be forced to sit in a prison cell for months and years often without legal representation. While we deplore the wasteful



warehousing of human beings and this tremendous loss of human potential, we urge a good faith creative effort to expand visiting opportunities for families and a reduction of the frequent destabilizing transfers of the men detained at Krome. Please help these people, many whose only offense is pursuing the American dream, like all of us want to do, and how our ancestors before us did. We need change now.”

#### Broward Transitional Center

CIVIC’s affiliated visitation program, Friends of Broward Detainees (FOBD), is awaiting approval by ICE of a formal visitation program. The program will be coordinated by Christine Ho, who is an applied anthropologist and Professor Emerita at Fielding Graduate University. While waiting for formal approval, we have participated in ICE-approved group tours of the Broward Transitional Center (BTC). On the most recent tour on August 1, 2014, the group met with 24 men and 9 women in immigration detention. The following is a compilation by Christine Ho of the serious issues raised by the individuals in immigration detention during these meetings:

#### “1. Perception of Unfairness in Immigration Court Hearings at BTC

Complaints ranged from the shortage of language interpreters, to the shortage of people being released on bond, to judges overwhelmingly supporting deportation. There is a perception that the immigration court at BTC is exceptionally harsh as compared to other immigration courts and that if you are at BTC a fair hearing is not possible and you are almost guaranteed deportation. We were told some people in detention spend their entire day planning how to kill themselves, especially those from countries with extreme violence, who no longer have family or other connections there.

#### 2. Serious Food Problem at BTC & GEO Staff Abuse

The food problem is so serious that, about a month ago, some people in detention engaged in a peaceful protest, a sit-in in the central courtyard, skipping several meals. We were told that the protestors were persuaded to enter the dining room, where they were handcuffed and beaten by GEO staff in riot gear, then sent to Krome. Such extreme measures, in response to complaints about food, serve to confirm their fears that any complaints will be swiftly punished. It was extremely disturbing to hear such accounts. Such a climate of fear could foster an environment of abuse.

To be more specific about the food, it is sometimes spoiled or dirty, has bugs or even leeches and is often served partly frozen or burnt. When the food is not appetizing, some detainees prefer to throw it away and go hungry. They also go hungry because there is not enough food. Furthermore, there is no effort to provide culturally appropriate food, even though the majority of detainees are Hispanic. Lastly, the food available in the commissary looked old and overpriced and is, therefore, not a healthy or reasonable option.

#### 3. Telephone charges are hidden, too expensive, and phone numbers are blocked.

With regard to phone calls, people in detention are informed of one price and then charged a higher price for actual calls, which is deceptive. The phone rates recently went up drastically from 35 cents per minute to \$1 per minute, making it prohibitive to call loved ones. Also, the phone and commissary accounts are now fused together so that when they are overcharged for phone calls it cuts into their commissary dollars leaving them hungry.

Another problem is blocking phone numbers and charging \$50 to reinstate the blocked number, which appears to be a common practice at BTC. For example, a person detained at BTC called a relative who,

in turn, called a third person using a 2<sup>nd</sup> phone and put them both on speaker phone. The call was immediately disconnected and the phone number was blocked. The cost to unblock the number was \$50. Given the extreme poverty of many of these immigrants and their families, these policies seem unnecessarily harsh and cruel.

#### 4. Separating Immigrant Families

On a previous group tour, we met a young man who had been in BTC for 9 months and had only seen his U.S. citizen wife and two U.S. citizen children, ages 4 and 2, once in that time. He told us his wife worked delivering pizza for minimum wage, which was insufficient to buy gas for the two-hour journey each way to BTC to visit him. She was also unable to pay the rent, so she and the children were evicted from their apartment. His story is just one of many tales of separation and the hardships imposed on families by detention.

In conclusion, tearing families apart, punishing immigrants in detention for wanting something as basic as edible food and overcharging for phone calls to families should not be the American way. Please do what you can to humanize the detention system.”

#### Monroe County Jail

The below account was written by a man who was detained at the Monroe County Jail. He is in his late thirties, and he has lived in this United States since he was nine-years-old. Saginor Francois. Saginor Francois is currently detained at the Baker County Facility in Florida. He has been in immigration detention since November 2013:

“The United States of America, which supposedly represents itself as the great shining beacon of democracy and human rights, actually thrives on the imprisonment of human beings and the legalized practice of reversed trafficking of immigrants.

U.S. Immigration and Customs Enforcement (ICE), under the Department of Homeland Security, contracts with over 250 county jails and for-profit prisons across the country that are home to many disadvantaged, hopeless, and helpless immigrants who spend months and years in an inhumane condition. These immigrants are deprived of their family and of their liberty. Moreover, they are victims of human rights abuses, and they are not afforded with the same due process rights as people in the criminal justice system.

Inside this supposed civil immigration detention system lies a dark, scary life that is completely unknown to the outside world. Hundreds of immigrants, mostly with families and kids in the United States, live in small cells inside ICE-contracted detention facilities where they are deprived of life’s basic requirements. One of these detention facilities is the Monroe County Jail, hidden on the small island of Key West, off the coast of Florida.

The Monroe County Jail has the capacity to hold up to 96 immigrants in a pod, while they await a very long and stressful immigration process. I was held at the Monroe County Jail before being transferred to the Glades County Detention Center, where I was held in solitary confinement, before being transferred to the Baker County Facility. At Monroe, all people in immigration detention must fight for the ability to use the bathroom, as there are only six showers and two useable toilets for defecation. On one occasion, one of these two toilets was out of service and for eight days, 96 people were using just one toilet. Showers are only open from 9am to 10:30am, 3pm to 4pm, and 9pm to 10:30pm. This creates a hostile





environment where the showers become overcrowded and people become susceptible to harassment as well as physical and sexual abuse.

Sanitation in the showers and in the dorms is poor. Mold and dirt cover the shower curtains. There is no working water fountain from which to drink and no clean source of hot water. People have to use the sink water to make tea and coffee.

The quality and quantity of the food is extremely poor. On multiple occasions, we have been greeted by bugs and roaches in our food trays. Sometimes, we even have had stones in our food that are big enough to damage our teeth. In fact, on one occasion, a big rock in the beans broke the tooth of a detainee. He presented the broken tooth and the rock to one of the officers on duty. The detainee was taken to the medical unit, but we were not provided with any information about what the officers were going to do to prevent that from occurring again. Unsurprisingly, stones were found again in the food on two other occasions, and the officers told us that they could not do anything about it as it was a problem with the food distributor.

The extremely poor, and even sometimes dangerous, quality of food was what caused people in immigration detention at Monroe to go on a hunger strike earlier this year. I was part of this hunger strike, which lasted only about four days. The officers at the jail told us to talk to ICE about our concerns, but when we tried to contact ICE, the jail officials said that our actions were exciting a riot, and if we continued on a hunger strike, the officers would apply any use of force necessary. The officers locked all of us down. The officers threatened us with tear gas if we did not eat our food on the trays at the next meal. Those who refused to eat were taken to a medical unit to be under observation in a small cell where they were held incommunicado.

After the hunger strike, we were all transferred away to different detention facilities. Although I am supposedly in a civil form of confinement in immigration detention, I am shackled and handcuffed whenever I am transferred, whether that be to another detention facility or to one of my immigration hearings. As a civil immigration detainee, I have no release date and no court-appointed attorney. When I was at the Monroe County Jail, I had no access to books, newspapers, periodicals, or magazines. I was completely cut off from the outside world. I was not allowed a radio or even a watch. The cost of a phone call to a family or friend was so exorbitant, that I was unable to maintain a connection to the outside world. A fifteen-minute call to my family inside the United States cost \$9 to \$11, with a \$2.50 connection fee. A fifteen-minute international call cost \$20.

The majority of people in immigration detention are held in these county jails and for-profit prisons.

However, the federal government has created a handful of facilities, such as the Krome Service Processing Center, that are owned and operated by ICE. These facilities are nice-looking, high-quality facilities that serve as the cover-up and are used to pull the wool over the eyes of the public and the world.

Do not be fooled.”



Thank you, Representative Joe Garcia, Representative Ted Deutch, and Members of the Committee, for the invitation to testify today on the U.S. immigration detention system.

Respectfully submitted,

A handwritten signature in cursive script, reading "Christina M. Fialho".

Christina M. Fialho  
Co-Founder/Executive Director  
Community Initiatives for Visiting Immigrants in Confinement (CIVIC)  
Active Member of the State Bar of California (#285808)

A handwritten signature in cursive script, reading "Christina Mansfield".

Christina Mansfield  
Co-Founder/Executive Director  
Community Initiatives for Visiting Immigrants in Confinement (CIVIC)

# Attachment A

Mother Jones

# Watchdog: Feds Are Muzzling Us for Reporting Alleged Immigrant Detainee Sex Abuse

*After a community group raised concerns about alleged sexual abuse at an immigrant detention facility in California, the feds asked the group to sign away its First Amendment rights.*

By [Erika Eichelberger](#) | Wed Mar. 19, 2014 10:02 AM EDT

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## Social Title:

Watchdog: The feds are muzzling us for reporting alleged immigrant detainee sex abuse.

Last summer, [Solace, a community group that helps oversee immigrant detention](#) [1], warned US Immigration and Customs Enforcement (ICE) about alleged sexual assault, harassment, and neglect at the agency's Otay detention facility in San Diego. But instead of working with the organization to address its concerns, ICE is now blocking its access to the center.

In August, ICE told Solace that it would no longer be able to continue its visitation program at the facility unless its volunteers agreed to sign a [confidentiality agreement](#) [2]. The confidentiality agreement is "extremely confusing," says Carl Takei, a staff attorney with the ACLU's National Prison Project. "It's vague enough that it could be used as a cover for inappropriate termination of visitation rights based on advocacy or other free-speech activities." The form also requires volunteers to "defend" and "indemnify" ICE and Corrections Corporation of America, which runs the detention facility, from any liability "arising" out of the volunteers' work, meaning that if a volunteer tells a detainee she has the right to sue Otay for sexual abuse, the volunteer would be required to defend Otay if the detainee were to bring a lawsuit against the facility. Takei says that this type of language would "chill" volunteers from raising concerns about detention conditions.

For six months, Solace tried unsuccessfully to persuade ICE's San Diego field office to reinstate the visitation program and to modify the language in the confidentiality form to comply with ICE's [national detention standards](#) [3], which merely require volunteers to sign an acknowledgment that they understand the rules of the facility and a waiver that releases ICE from responsibility in case of volunteer injury.

[Civic, an umbrella network of visitation programs that includes Solace](#) [4], sent a formal request to ICE's national office last week requesting that the agency force its San Diego field office to modify the application

form and reinstate Solace's visitation rights. Civic asked for a response by Monday but has not received one. On Tuesday, when Civic told ICE it was going to publicize the issue, the agency said it was willing to meet with the immigrant visitation organization. "We hope to have a collaborative resolution," says Kristen Kuriga, who helps run Solace. "But it has already taken six months." ICE did not return a request for comment. Neither did the Department of Homeland Security.

This is not the first time that ICE has suspended visitation after volunteers criticized the agency. Last July, in response to [an editorial](#) [5] penned by Civic's co-executive director, Christina Fialho, which slammed the lack of oversight at immigrant detention facilities, ICE [suspended](#) [6] Civic-affiliated visitation programs at three ICE detention centers in California. Fialho says that there have been other instances around the country in which individual Civic volunteers have participated in vigils outside of detention facilities and then been denied visiting privileges.

ICE detains about [34,000 people every day](#) [5]. It's a big system and there is "very, very little oversight," says Grisel Ruiz, a law fellow at the nonprofit [Immigrant Legal Resource Center](#) [7]. Oversight of ICE detention facilities, which are often run by counties or private prison companies, has improved over the past half decade, Takei says. But unlike the federal prison system run by the Bureau of Prisons, there is no third-party overseer built into the ICE immigrant detention system, which is housed within the Department of Homeland Security. Most oversight of immigrant detention comes from civil-society groups, including groups like Solace.

Now, ICE "is asking us to choose between our First Amendment rights and visiting our friends in detention," Fialho says. "This is not a choice any democracy should ask its people to make."

*After we published this article, ICE sent this response:*

*"US Immigration and Customs Enforcement (ICE) is committed to an immigration detention system that prioritizes the health and welfare of detainees. The agency welcomes visits to its facilities by members of community groups and encourages constructive feedback for improving conditions of immigration detention. In the interest of ensuring the safety of facility staff and detainees, ICE policy [as detailed in the agency's 2011 Performance-Based National Detention Standards] requires that members of community service organizations seeking to participate in voluntary detainee visitation programs undergo background checks prior to being admitted to these secure facilities."*

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**Source URL:** <http://www.motherjones.com/politics/2014/03/ice-sexual-abuse-immigrant-detention->



[oversight](#)**Links:**

- [1] <http://www.firstuusandiego.org/solace>
- [2] <http://www.motherjones.com/documents/1093569-otay-volunteer-application>
- [3] <http://www.ice.gov/detention-standards/2011/>
- [4] <http://www.endisolation.org/>
- [5] [http://www.huffingtonpost.com/christina-fialho/who-is-overseeing-immigration-detention\\_b\\_3632009.html](http://www.huffingtonpost.com/christina-fialho/who-is-overseeing-immigration-detention_b_3632009.html)
- [6] <http://www.aclusocal.org/press-release-groups-call-on-ice-to-reinstate-community-based-visitation-programs/>
- [7] <http://www.ilrc.org/>

# Attachment B

List of Deaths in ICE Custody  
October 2003 - December 2, 2013

	ALIEN NAME	SEX	DATE OF BIRTH	COUNTRY OF BIRTH	DATE OF DEATH	LOCATION OF DEATH	LOCATION OF LAST DETENTION	IHSC STAFFED *	FACILITY TYPE	FINAL CAUSE OF DEATH
1	CARLOS, TIOMBE KIMANA	F	11/21/1978	ANTIGUA-BARBUDA	10/23/2013	York County Jail, PA	York County Jail, PA	Yes	IGSA	Pending
2	MPONDA, CLEMENTE NTANGOLA	M	12/31/1985	MOZAMBIQUE	9/2/2013	Hermann Memorial Northeast Hospital, TX	Houston Contract Detention Facility	Yes	CDF	Pending
3	RODRIGUEZ, LESLIS	M	1/21/1963	HONDURAS	7/31/2013	Valley Baptist Medical Center, Harlingen, TX	Port Isabel Detention Center, Los Fresnos, TX	Yes	SPC	Pending
4	MENDEZ-HERNANDEZ, FEDERICO	M	4/1/1985	GUATEMALA	6/11/2013	Christus Spohn Memorial Hospital, Corpus Christi, TX	Brooks County Jail, Falfurrias, TX	No	USMS IGA	Pending
5	GARCIA-MALDANADO, JORGE	M	3/5/1973	GUATEMALA	4/30/2013	Eloy Federal Contract Facility, Eloy, AZ	Eloy Federal Contract Facility, Eloy, AZ	Yes	DIGSA	Pending
6	GUADALUPE-GONZALES, ELSA	F	12/15/1988	GUATEMALA	4/28/2013	Eloy Federal Contract Facility, Eloy, AZ	Eloy Federal Contract Facility, Eloy, AZ	Yes	DIGSA	Pending
7	TOMANEK, OLDRICH	M	9/25/1961	CZECH REPUBLIC	4/25/2013	Haskell Memorial Hospital, Haskell, TX	Rolling Plains Detention Center	No	IGSA	Pending
8	SMITH, GLASTON	M	2/16/1962	BRITISH VIRGIN ISLANDS	4/4/2013	Centro Medico Hospital, Rio Piedras, PR	Guaynabo MDC (San Juan)	No	HOLD	Pending
9	ORTIZ-MATAMOROS, PABLO	M	11/24/1987	HONDURAS	2/8/2013	Conroe Regional Medical Center, TX	Joe Corley Detention Facility	No	IGSA	Pending
10	COTA-DOMINGO, MANUEL	M	1/12/1978	GUATEMALA	12/23/2012	Saint Joseph's Hospital Phoenix, AZ	Eloy Detention Center	Yes	DIGSA	Diabetes
11	FLORES-SEGURA, JUAN PABLO	M	9/9/1980	MEXICO	5/30/2012	Saint Bernardine Hospital, CA	San Bernadino Hold Room, CA	No	HOLD	Pending
12	MANDZA, EVALIN-ALI	M	12/5/1965	GABON	4/12/2012	Aurora Medical Center, CO	Denver Contract Detention Facility, CO	No	CDF	Myocardial Infarction, Severe Left Main Coronary Artery Stenosis
13	DOMINGUEZ-VALIVIA, FERNANDO	M	5/10/1953	MEXICO	3/4/2012	Victor Valley Community Hospital, CA	Adelanto Correctional Facility, CA	No	IGSA	Pneumonia
14	SARABIA-ORTEGA, MIGUEL ANGEL	M	7/27/1975	MEXICO	1/17/2012	Desert Springs Hospital, NV	Las Vegas Hold Room, NV	No	HOLD	Methamphetamine Intoxication
15	ROJAS-MARTINEZ, RICARDO	M	6/28/1958	MEXICO	12/19/2011	Memorial Hermann NE Hospital, Humble, TX	Houston CDF, Houston, TX	Yes	CDF	Heart Attack
16	GRACIDA-CONTE, PABLO	M	3/9/1957	MEXICO	10/30/2011	University Medical Center, Tucson, AZ	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Congestive Heart Failure
17	RIVERA-ROMERO, MAURO	M	1/10/1968	EL SALVADOR	10/5/2011	Del Sol Medical Center in El Paso, TX	El Paso SPC, El Paso, TX	Yes	SPC	HIV complications (presumed)

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18	RAMIREZ-RAMIREZ, ANIBAL	M	4/15/1976	EL SALVADOR	10/2/2011	University of Virginia Hospital, Charlottesville, VA	Immigration Centers of America Farmville, VA	No	IGSA	Liver Failure
19	RAMIREZ-REYES, VICTOR	M	4/25/1955	ECUADOR	9/26/2011	Trinitas Hospital, Elizabeth, NJ	Elizabeth CDF	Yes	CDF	Hypertensive and atherosclerotic cardiovascular disease
20	BAMENGA, IRENE	F	11/10/1981	ANGOLA	7/27/2011	Albany Memorial Hospital and Medical Center, NY	Albany County Jail, NY	No	IGSA	Cardiomyopathy
21	HERNANDEZ, MIGUEL ANGEL	M	12/24/1956	EL SALVADOR	4/28/2011	Northeastern Georgia Medical Center, Gainesville, GA	North Georgia Detention Center, Gainesville, GA	No	IGSA	Heart attack
22	MILITEC, AMRA	F	2/15/1964	BOSNIA	3/20/2011	McKay Dee Hospital, Ogden, UT	Weber County Jail, Ogden, UT	No	IGSA	Chronic colitis/ Atrial fibrillation
23	GUO, QI GEN	M	6/9/1963	CHINA	2/23/2011	Clinton County Correctional Facility, PA	Clinton County Correctional Facility, PA	No	IGSA	Asphyxia Suicide
24	AGUILAR-ESPINOZA, JOSE	M	11/1/1955	HONDURAS	1/31/2011	UCI Medical Center, Orange, CA	Theo Lacy Facility	No	IGSA	Natural Causes
25	PALOMO-RODRIQUEZ, JUAN	M	9/20/1980	MEXICO	1/13/2011	Memorial Hemann Northeast Hospital, Houston, TX	Houston, Texas CDF	Yes	CDF	Acute Coronary Disease
26	SEGUNDO, JOSE MANUEL	M	2/28/1969	PANAMA	12/23/2010	Krome Service Processing Center, Miami, FL	Krome Service Processing Center, Miami, FL	Yes	SPC	Blood Cancer
27	STERLING, JOHN	M	11/14/1955	JAMAICA	11/6/2010	Rapides Regional Medical Center, LA	Oakdale Federal Detention Center, LA	No	BOP	Sepsis
28	HERNANDEZ-GOMEZ, JOSE ANTONIO	M	1/24/1944	MEXICO	11/5/2010	Loyola Medical Center, IL	Broadview Service Staging Area (BSSA)	No	Staging Area	Liver Failure
29	REYES-ZALAYA, JOSE NELSON	M	1/15/1982	EL SALVADOR	7/17/2010	Orleans Parish Sheriff	Orleans Parish Sheriff	No	IGSA	Cancer
30	HOLOWIENKO, KAZIMIERZ	M	4/19/1956	POLAND	6/16/2010	Providence Northeast Hospital	Columbia Care Center, Columbia, SC	No	HOSPITAL	Cancer
31	COGLE-DEL PINO, JULIAN	M	2/17/1938	CUBA	5/7/2010	(BOP) Butner, NC	(BOP) Butner, NC	No	BOP	Cancer
32	RODRIGUEZ-SOLIS, ARNULFO	M	8/15/1947	GUATEMALA	3/13/2010	Oakdale Community Hospital	(BOP) Oakdale, Oakdale, LA	No	BOP	Pneumonia Complications
33	OBEY, EVELYN	F	4/4/1973	LIBERIA	3/12/2010	York Hospital, PA	York County Jail	Yes - Staging Only	IGSA	Cancer
34	GOMEZ-VASQUEZ, ERNESTO	M	10/10/1979	GUATEMALA	3/5/2010	Kindred Rehabilitation Hospital	Mira Loma Detention Ctr., Lancaster CA	No	IGSA	Multiple Conditions

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35	PADILLA-PEREZ, SEBASTIAN	M	3/4/1938	CUBA	11/21/2009	York Hospital, PA	York County Jail	Yes - Staging Only	IGSA	Leukemia
36	TAVAREZ, PEDRO JUAN	M	7/25/1960	DOMINICAN REPUBLIC	10/19/2009	Brigham & Womens Hospital	Suffolk Co. HOC	No	IGSA	Heart Failure
37	JIMON TINIGUARDO, ROLANDO	M	10/5/1989	GUATEMALA	9/30/2009	Providence Memorial Hospital	Columbia Care Center, Columbia, SC	No	HOSPITAL	Diabetes Complications
38	NEGUSSE, HULUF	M	9/2/1984	ETHIOPIA	8/14/2009	Tallahassee General Hospital	Wakulla County Jail	No	IGSA	Cardiac Arrest
39	STOJKA, VERA	F	10/20/1952	CZECH REPUBLIC	7/24/2009	Columbia Care Center, Columbia, SC	Hudson County Jail	No	IGSA	Liver Cancer
40	CRUZ -SILVA, ARNOLDO	M	5/6/1956	CUBA	5/10/2009	Retrama Manor	Port Isabel SPC	Yes	SPC	Cardiac Arrest
41	MARTINEZ MEDINA, ROBERTO	M	6/7/1969	MEXICO	3/11/2009	St. Francis Hospital, GA	Stewart Detention Ctr	Yes	IGSA	Cardiac Arrest
42	JIMENEZ-ROJAS, SERGIO	M	5/15/1984	MEXICO	2/7/2009	EA Conway Memorial Hospital	Tensas Parish Detention Ctr	No	IGSA	HIV Complications
43	CORONADO-GABRIEL, CLAUDIO	M	4/9/1979	GUATEMALA	1/12/2009	LaSalle Detention Facility (Jena)	LaSalle Detention Center	Yes	IGSA	Acute Cerebral Vascular Incident
44	MARTINEZ, JULIO	M	9/21/1956	MEXICO	1/4/2009	Alvarado Hospital	Otay Detention Facility/CCA, San Diego, CA	Yes	CDF	Lymphatic Cancer
45	ALVAREZ GOMEZ, JOSE	M	5/18/1979	HONDURAS	12/27/2008	LaSalle General Hospital	LaSalle Detention Center	Yes	IGSA	Seizure
46	NEWBOROUGH, GUIDO	M	4/21/1960	GERMANY	11/28/2008	Piedmont Regional Jail, Farmville Virginia	Piedmont Regional Jail, Farmville Virginia	No	IGSA	Meningitis/HIV/ Pneumonia
47	SAYLAB, HADAYATULLAH	M	6/21/1950	AFGHANISTAN	11/24/2008	Del Sol Medical Center (El Paso)	Otero County Jail	No	IGSA	Lung Cancer
48	SANTOS MAIDIQUI, ALBERTO	M	10/31/1948	CUBA	11/18/2008	(BOP) Springfield Federal Medical Center, Springfield, MO	(BOP) Springfield Federal Medical Center, Springfield, MO	No	BOP	Electrocution
49	BAIRES, JUAN	M	4/27/1982	EL SALVADOR	11/12/2008	Kern Medical Center, Bakersfield, CA	Kern Co. Jail Bakerfield, CA	No	IGSA	Self-Sustained Head Injuries
50	OWUSU, EMMANUEL	M	1/10/1946	GHANA	10/6/2008	Casa Grande Regional Hospital, AZ	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Suicide by Hanging
51	BARNETT, EDWIN	M	7/22/1950	JAMAICA	8/12/2008	Brigham & Womens Hospital	Plymouth County HOC	No	IGSA	Sequelae of Chronic Renal Failure (on dialysis)



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52	NG, HIU LUI	M	8/3/1974	CHINA	8/6/2008	Rhode Island Hospital Providence RI	Wyatt Detention Ctr	No	IGSA	Complications of Metastatic Hepatocellular CA
53	DAWOOD, NAIL YOURSEF	M	8/13/1966	IRAQ	7/21/2008	Eloy Detention Ctr	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Coronary Artery Vasculitis
54	CANALES BACA, ROGELIO	M	3/28/1972	HONDURAS	7/8/2008	Pike County Jail, Milford, PA	Pinal County Jail	Yes	IGSA	Asphyxia
55	VALASQUEZ, AMBROCIO	M	12/19/1965	GUATEMALA	6/27/2008	Vaughan Regional Medical Ctr, AL	Perry County Correctional Ctr	No	IGSA	Cardiopulmonary Arrest
56	JOSEPH, VALERY	M	7/7/1984	HAITI	6/20/2008	Glades Detention Center, Florida	Glades Detention Center, Florida	No	IGSA	Seizure Disorder
57	DUBEGEL-PAEZ, LUIS	M	7/31/1947	CUBA	3/14/2008	Rolling Plains Detention Ctr, TX	Rolling Plains Detention Ctr, TX	No	IGSA	Hypertension and Athersclerotic Heart Disease
58	SUARES-ALMENARES, ARTURO	M	11/11/1935	CUBA	3/3/2008	St. Peters Hospital, NJ	Middlesex County Jail	No	IGSA	Hypertensive and arteriosclerotic cardiovascular disease with CHF and severe pulmonary edema
59	DIAZ-SALGADO, ALEJANDRO	M	5/22/1959	CUBA	2/3/2008	Savoy Medical Facility LA	Basile Detention Ctr	No	IGSA	Multi-System Organ Failure
60	GUMAYAGAY, PEDRO	M	5/27/1957	PHILIPPINES	1/29/2008	Stewart Webster Hospital	Stewart Detention Ctr	Yes	IGSA	Metastic Adenocarcinoma of Lungs
61	GONZALEZ_BAEZ, CESAR	M	2/2/1972	MEXICO	12/5/2007	USC Burn Center	Mira Loma Detention Ctr., Lancaster CA	No	IGSA	Electrocution
62	GUEVARA-LAZARO, ALEJANDRO	M	3/4/1986	MEXICO	8/13/2007	Thomason Hospital	El Paso SPC, El Paso, TX	Yes	SPC	Ruptured Berry Aneurysm of the Right Middle Cerebral Artery
63	CONTRERAS-DOMINGUEZ, ROSA ISELA	F	9/17/1971	MEXICO	8/9/2007	Del Sol Medical Center (El Paso)	El Paso SPC, El Paso, TX	Yes	SPC	Pulmonary Thromboembolism
64	DE ARAUJO, EDIMAR	M	10/9/1972	BRAZIL	8/7/2007	Rhode Island Hospital Providence RI	Providence RI Field Office	No	HOLD	Acute Intoxication due to the Combined Effects of Cocaine and Hydroxyzine
65	ARELLANO, VICTOR	M	10/10/1983	MEXICO	7/20/2007	Little Company of Mary Hospital – San Pedro; previously AKA San Pedro Peninsula Hospital	San Pedro SPC, San Pedro, CA	Yes	SPC	Sequalue of Acquired Immune Deficiency Syndrome
66	BAH, BOUBACAR	M	1/1/1955	GUINEA	5/30/2007	University of Medicine, NJ	Elizabeth CDF	Yes	CDF	Traumatic Brain Injury
67	ROMERO, NERY	M	4/9/1984	EL SALVADOR	2/12/2007	Bergen County Jail, NJ	Bergen County Jail, NJ	No	IGSA	Asphyxia
68	RODRIGUEZ-TORRES, FELIX	M	10/31/1970	ECUADOR	1/18/2007	Maricopa Medical Center, Phoenix, AZ	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Germ Cell Tumor with Metastasis

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69	CHAVEZ-TORRES, MARIO FRANCISCO	M	11/10/1979	COLOMBIA	12/13/2006	Eloy Detention Ctr	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Ruptured Arteriovenous Malformation Midbrain
70	ABDEULAYE, SALL	M	4/27/1956	GUINEA	12/2/2006	Piedmont Regional Jail, Farmville Virginia	Piedmont Regional Jail, Farmville Virginia	No	IGSA	Hemoperitoneum due to spontaneous rupture of right renal vein
71	CERVANTES-CORONA, JESUS	M	7/16/1964	MEXICO	11/19/2006	Northwest Detention Ctr. Tacoma, WA	Northwest Detention Ctr. Tacoma, WA	Yes	CDF	Atherosclerotic Coronary Artery Disease
72	MARTINEZ-RIVAS, ANTONIO	M	11/19/1961	MEXICO	10/4/2006	Houston, Texas CDF	Houston, Texas CDF	Yes	CDF	Asphyxia
73	CARLOS-CORTEZ, RAUDEL	M	9/17/1984	MEXICO	10/3/2006	Mira Loma Detention Ctr., Lancaster CA	Mira Loma Detention Ctr., Lancaster CA	No	IGSA	Asphyxia
74	LOPEZ-GREGORIO, JOSE	M	1/1/1974	GUATEMALA	9/29/2006	Eloy Detention Ctr	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Asphyxia
75	SINGH, JAMER	M	11/8/1965	INDIA	9/20/2006	Lerdo Pretrail Facility, Bakersfield CA	Lerdo Pretrail Facility, Bakersfield CA	No	IGSA	Severe Atherosclerotic Heart Disease
76	KIM, YOUNG SOOK	F	11/5/1948	KOREA	9/11/2006	LoveLace Medical CenterAlbuquerque, New Mexico	Bernalillo County Detention Ctr	No	IGSA	Widely Metastatic Pancratic Cancer
77	CASTRO-JIMENEZ, RENE	M	8/26/1939	CUBA	8/15/2006	(BOP) Devens FMC, Ayer, MA	(BOP) Devens FMC, Ayer, MA	No	BOP	Coronary Artery Athlersclerosis
78	OSMAN, YUSIF	M	1/7/1972	GHANA	6/27/2006	Otay Detention Facility/CCA, San Diego, CA	Otay Detention Facility/CCA, San Diego, CA	Yes	CDF	Coronary Artery Vasculitis
79	LAZANO-BLANCO, JORGE	M	4/22/1955	CUBA	6/3/2006	(BOP) Springfield Federal Medical Center, Springfield, MO	(BOP) Springfield Federal Medical Center, Springfield, MO	No	BOP	Severe Emphysema
80	RODRIGUEZ-GONZALEZ, MIGUEL	M	1/19/1930	MEXICO	5/21/2006	San Pedro SPC - San Pedro Peninsula Hospital	San Pedro SPC, San Pedro, CA	Yes	SPC	Sequelae of Chronic Renal Failure
81	RODRIGUEZ CASTRO, WALTER	M	6/21/1977	EL SALVADOR	4/23/2006	Kern Co. Jail Bakerfield, CA	Kern Co. Jail Bakerfield, CA	No	IGSA	Cryptocacal Meningitis
82	INAMAGUA-MERCHA, MARIA	F	11/19/1975	ECUADOR	4/4/2006	Ramsey County, St. Paul MN	Ramsey ADC Annex	No	IGSA	Neurocysticercosis
83	POLANCO-MOLINA, ANGEL	M	8/2/1952	CUBA	3/30/2006	St. Johns Regional Healthcare Facility	(BOP) Springfield Federal Medical Center, Springfield, MO	No	BOP	Pulmonary Embolus and Cardiac Arrest
84	GARCIA-MEJIA, GEOVANNY	M	3/18/1979	HONDURAS	3/18/2006	Newton Co. Correctional Center Newton, TX	Newton Co. Correctional Center Newton, TX	No	IGSA	Asphyxia
85	GARCIA-SANCHEZ, FELIPE	M	11/19/1984	COLOMBIA	2/13/2006	(BOP) Oakdale, Oakdale, LA	(BOP) Oakdale, Oakdale, LA	No	BOP	Asphyxia

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86	MURPHY, VINCENT	M	6/5/1946	JAMAICA	2/4/2006	Suffolk Co., Boston, MA	Suffolk Co. HOC	No	IGSA	Hypertensive Cardiovascular Disease
87	KENLEY, SANDRA MARINA	F	5/3/1953	BARBADOS	12/18/2005	Hampton Roads Regional Jail, Portsmouth, VA	Hampton Roads Regional Jail, Portsmouth, VA	No	IGSA	Hypertensive Cardiovascular Disease
88	SALAZAR-GOMEZ, JUAN	M	6/24/1976	MEXICO	12/14/2005	Eloy Detention Ctr	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Asphyxia
89	LEDESMAN-GUERREO, ROBERTO	M	10/10/1933	MEXICO	12/2/2005	Otay Detention Facility - Sharps Chula Vista Hospital	Otay Detention Facility/CCA, San Diego, CA	Yes	CDF	Cardiopulmonary Arrest
90	MARRERO-ABREO, DOMINGO	M	2/22/1943	CUBA	11/15/2005	Little Company of Mary Hospital – San Pedro; previously AKA San Pedro Peninsula Hospital	San Pedro SPC, San Pedro, CA	Yes	SPC	Acute Myocardial Infarction
91	SANCHEZ-RODRIGUEZ, SERGIO	M	9/9/1951	CUBA	10/30/2005	(BOP) Butner Medical Center - Butner, NC	(BOP) Butner Medical Center - Butner, NC	No	BOP	Metastatic Carcinoma of Lung
92	PRADO-ARENCILIA, REINALDO	M	11/10/1967	CUBA	10/3/2005	Houston - Northeast Medical Center Hospital	Houston Texas CDF	Yes	CDF	Seizure Disorder of Unknown Etiology
93	DELAPAZ, EDUARDO	M	10/13/1935	MEXICO	9/27/2005	Richland Memorial Hospital Columbia, SC	Columbia Care Center, Columbia, SC	No	HOSPITAL	Acute Cerebral Vascular Accident
94	AHMAD, TANVEER	M	2/3/1962	PAKISTAN	9/9/2005	Monmouth County Jail	Monmouth County Jail	No	IGSA	Occlusive Coronary Atherosclerosis
95	ALVAREZ-ESQUIVEL, WALTER	M	10/4/1958	GUATEMALA	7/6/2005	Laredo Medical Center, Laredo TX	Laredo Contract Detention Facility	No	IGSA	Acute Hemorrhagic Cerebral Vascular Accident
96	CRUZ GARCIA, RENE	M	3/12/1952	CUBA	6/11/2005	(BOP) Butner Medical Center _ Butner, NC	(BOP) Butner Medical Center _ Butner, NC	No	BOP	Non-Small Cell Lung Cancer
97	VARGAS, NHUNG	F	9/23/1968	VIETNAM	6/8/2005	Columbus Regional Hospital, Columbus, GA	Harris County Jail	No	IGSA	Cardiac Arrest
98	TUNON-ABEAL, JOSE	M	4/7/1952	CUBA	5/21/2005	E.A. Conway Hospital, Monroe, LA	Tensas Parish Detention Ctr	No	IGSA	Acute Renal Failure
99	LAZO REINOSO, SILVIO	M	9/10/1954	CUBA	4/7/2005	(BOP) Springfield Federal Medical Center, Springfield, MO	(BOP) Springfield Federal Medical Center, Springfield, MO	No	BOP	Pancreatic Cancer
100	BELBACHIR, HASSIBA	F	8/24/1977	ALGERIA	3/17/2005	McHenry County Jail, Woodstock, IL	McHenry County Jail, Woodstock, IL	No	IGSA	Asphyxia
101	HEO, SUNG SOO	M	2/13/1954	KOREA	2/16/2005	Passaic County Jail	Passaic County Jail	No	IGSA	Asphyxia
102	NAND, MAYA (AKA NARID, MAYA)	M	2/24/1948	FIJI	2/2/2005	Eloy - St Mary's Hospital, Tuscon, AZ	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Cardiac Arrest

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103	CORREOSO-JAY, CONRADO	M	2/19/1941	CUBA	1/31/2005	(BOP) Butner	(BOP) Butner	No	BOP	Complications of Metastatic Prostate Cancer
104	ROSELL SIERRA, JOSE	M	12/25/1933	CUBA	1/8/2005	(BOP) Forth Worth Federal Medical Center	(BOP) Forth Worth Federal Medical Center	No	BOP	Pneumonia
105	SARABIA-VALLASENOR, IGNACIO	M	7/31/1972	MEXICO	1/4/2005	Otay Detention Facility/CCA, San Diego, CA	Otay Detention Facility/CCA, San Diego, CA	Yes	CDF	Cardiac Arrest
106	LOPEZ RUELAS, ELIAS	M	2/16/1950	MEXICO	1/4/2005	RTA Hospice in Casa Grande, AZ	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Cirrhosis of Unclear Etiology
107	HERRERA-LIMAS, PEDRO	M	11/29/1972	CUBA	12/15/2004	Shepherd's Choice Nursing and Rehab, Gettysburg, PA	York County Jail	Yes - Staging Only	IGSA	Carcinoma of Lung
108	ANACHE-CAMPOS, LUIS	M	1/6/1957	CUBA	11/30/2004	(BOP) Devens FMC, Ayer, MA	(BOP) Devens FMC, Ayer, MA	No	BOP	Cardiac Arrest
109	FILS-AIME, YVEL	M	1/3/1956	HAITI	11/22/2004	Hampton Roads Regional Jail, Portsmouth, VA	Hampton Roads Regional Jail, Portsmouth, VA	No	IGSA	Drowning
110	DANTICA, JOSEPH	M	2/7/1923	HAITI	11/4/2004	Jackson Memorial Hospital, Miami, FL	Krome Service Processing Center, Miami, FL	Yes	SPC	Acute and Chronic Pancreatitis
111	ZAROU, JOSE	M	10/18/1948	ARGENTINA	11/1/2004	Wicomico Co. Detention Center, Salisbury, MD	Wicomico Co. Detention Center, Salisbury, MD	No	IGSA	Cardiac Tamponade
112	LOPEZ-LARA, JOSE	M	10/20/1948	MEXICO	10/24/2004	Maricopa Medical Center, Phoenix, AZ	Eloy Detention Center, Eloy, AZ	Yes	IGSA	Cerebral Infarct
113	REYES-ALTIMIRANO, SIMON	M	3/24/1979	HONDURAS	10/12/2004	Mesa Hills Specialty Hospital, El Paso, TX	El Paso SPC, El Paso, TX	Yes	SPC	Brain Tumor
114	RUIZ-TABARES, ERVIN	M	3/25/1980	COLOMBIA	9/25/2004	(BOP) Guaynabo Metropolitan Detention Center, San Juan, PR	(BOP) Guaynabo Metropolitan Detention Center, San Juan, PR	No	BOP	Asphyxia
115	AYALA-GARCIA, ANTONIO	M	6/19/1937	CUBA	9/24/2004	(BOP) Springfield Federal Medical Center, Springfield, MO	(BOP) Springfield Federal Medical Center, Springfield, MO	No	BOP	Renal Failure
116	SINGH, BHUPINDER	M	1/3/1956	INDIA	9/21/2004	Columbia Care Center, Columbia, SC	Columbia Care Center, Columbia, SC	No	HOSPITAL	End Stage Renal Disease
117	SOCA-ROS, OTALIO	M	12/3/1981	CUBA	8/23/2004	Krome Service Processing Center, Miami, FL	Krome Service Processing Center, Miami, FL	Yes	SPC	Hypertensive Cardiovascular Disease
118	MEJIA VICENTES, SEBASTIAN	M	2/25/1977	MEXICO	8/22/2004	Hampton Roads Regional Jail, Portsmouth, VA	Hampton Roads Regional Jail, Portsmouth, VA	No	IGSA	Asphyxia
119	ENRIQUEZ-BETANCOURT, N	M	5/21/1949	CUBA	8/11/2004	Etowah County Detention Center, Gadsden, AL	Etowah County Detention Center, Gadsden, AL	No	IGSA	Arteriosclerotic Heart Disease

List of Deaths in ICE Custody  
October 2003 - December 2, 2013

	ALIEN NAME	SEX	DATE OF BIRTH	COUNTRY OF BIRTH	DATE OF DEATH	LOCATION OF DEATH	LOCATION OF LAST DETENTION	IHSC STAFFED *	FACILITY TYPE	FINAL CAUSE OF DEATH
120	ALONSO, JUAN	M	9/14/1930	GUATEMALA	8/1/2004	Columbia Care Center, Columbia, SC	Columbia Care Center, Columbia, SC	No	HOSPITAL	Renal Failure
121	MARTINEZ, JOSE ALBERTO	M	1/24/1957	DOMINICAN REPUBLIC	7/28/2004	Maryview Hospital, Portsmouth, VA	Hampton Roads Regional Jail, Portsmouth, VA	No	IGSA	Sepsis
122	HERRERA-TERAN, JOSE	M	4/12/1933	CUBA	6/15/2004	Pike County Jail, Milford, PA	Pike County Jail, Milford, PA	No	IGSA	Myocardial Infarction
123	MENDEZ, ENRIQUE	M	8/23/1933	MEXICO	6/14/2004	El Centro Regional Hospital, El Centro, CA	EL Centro SPC	Yes	SPC	Metastatic Carcinoma of Prostate Gland
124	FIGUEREDO-LOPEZ, JUAN	M	6/8/1958	CUBA	5/29/2004	(BOP) Springfield Federal Medical Center, Springfield, MO	(BOP) Springfield Federal Medical Center, Springfield, MO	No	BOP	Acute Pulmonary Embolis
125	RUST, RICHARD	M	4/5/1970	JAMAICA	5/29/2004	(BOP) Oakdale Community Hospital, Oakdale, LA	(BOP) Oakdale, Oakdale, LA	No	BOP	Cardiac Arrhythmia
126	FANKEU, SAMOU	M	6/16/1966	CAMEROON	5/11/2004	Lourdes Hospital, Padukah, KY	INS Airport Hold	No	HOLD	AIDS
127	SATKUNES-WARAN, KANDIAH	M	5/6/1964	SRI LANKA	4/17/2004	Robert Wood Johnson University Hospital, New Brunswick, NJ	Middlesex County Jail	No	IGSA	Natural Causes
128	MENDEZ-BACCA, CARLOS	M	9/4/1974	HONDURAS	3/19/2004	Methodist Hospital, San Antonio, TX	Guadalupe City Jail	No	IGSA	AIDS
129	PEREZ-AYALA, MANUEL	M	12/24/1949	CUBA	3/14/2004	St. Thomas More Hospital, Canon City, CO	(BOP) Florence	No	BOP	Sudden Cardiac Death
130	ALVAREZ ARIAS, JOSE DE LA CONCEPCION	M	12/8/1957	CUBA	3/10/2004	(BOP) Butner	(BOP) Allenwood Federal Correctional Institute	No	BOP	Metastatic Renal Clear Cell Carcinoma
131	SOLIS-PEREZ, MARIA	F	10/20/1959	EL SALVADOR	3/6/2004	Ben Taub Hospital, Houston, TX	Jefferson County Jail	No	IGSA	Subarachnoid Hemorrhage due to Ruptured Berry Aneurysm
132	HERNANDEZ, WILFREDO	M	1/20/1939	CUBA	3/3/2004	Richland Memorial Hospital, Columbia SC	Columbia Care Center, Columbia, SC	No	HOSPITAL	Coronary Artery Disease
133	RODRIGUEZ, JOSE RANGEL	M	11/8/1971	GUATEMALA	3/3/2004	Kern Medical Center, Bakersfield, CA	Kern Co. Jail Bakersfield, CA	No	IGSA	Histoplasmosis Sepsis
134	MOSLEY, HECTOR	M	2/25/1947	PANAMA	2/27/2004	Columbia Care Center, Columbia, SC	Columbia Care Center, Columbia, SC	No	HOSPITAL	AIDS
135	RIOZ-MARTINEZ, CEZAR	M	9/9/1978	MEXICO	2/13/2004	Frio County Jail, Pearsall, TX	Frio County Jail, Pearsall, TX	No	IGSA	Asphyxia
136	POPOOLA, ADETUNJI	M	8/10/1955	NIGERIA	2/2/2004	Parkland Memorial Hospital, Dallas, TX	Dallas County Jail	No	IGSA	Cardia Arrhythmia

List of Deaths in ICE Custody  
October 2003 - December 2, 2013

	ALIEN NAME	SEX	DATE OF BIRTH	COUNTRY OF BIRTH	DATE OF DEATH	LOCATION OF DEATH	LOCATION OF LAST DETENTION	IHSC STAFFED *	FACILITY TYPE	FINAL CAUSE OF DEATH
137	GUTIERREZ, RAMIRO	M	2/28/1966	MEXICO	1/17/2004	San Joaquin General Hospital, French Camp, CA	Sacramento County Jail	No	IGSA	Upper Gastrointestinal Tract Bleed
138	LEYVA-ARJONA, ARGELIO	M	6/18/1953	CUBA	1/5/2004	(BOP) Victorville	(BOP) Victorville	No	BOP	Asphyxia
139	LINDE-CEPERO, ALBERTO	M	8/14/1940	CUBA	12/20/2003	Columbia Care Center, Columbia, SC	Columbia Care Center, Columbia, SC	No	HOSPITAL	Brain Tumor Calioblastoma
140	JORRIN-MILLER, DANIEL	M	7/21/1951	CUBA	11/4/2003	San Pedro SPC, San Pedro, CA	San Pedro SPC, San Pedro, CA	Yes	SPC	Hypertensive Cardiovascular Disease
141	VERDECIA-CARRILLO, HERIBERTO	M	3/16/1963	CUBA	10/7/2003	(BOP) Atwater, Atwater, CA	(BOP) Atwater, Atwater, CA	No	BOP	Acute Thrombotic Occlusion Left Descending Coronary Artery

**FACILITY TYPE**

BOP (Bureau of Prisons): a facility operated by/under the management of the Bureau of Prisons.  
CDF (Contract Detention Facility): a facility that is owned by a private company and contracted directly with the government.  
IGSA (Inter-governmental Service Agreement): a facility operated by local government(s). IGSA facilities may fall under public or private ownership.  
HOLD: a holding facility.  
HOSPITAL: a medical facility.  
SPC (Service Processing Center): a facility that is owned by the government and staffed by a combination of federal and contract employees.

**MEDICAL ACRONYMS**

AIDS: Acquired Immune Deficiency Syndrome  
CF: Cystic Fibrosis  
C-spine Fx: Cervical Spine Fracture  
CVA: Cerebrovascular Accident  
DM: Diabetes Mellitus  
HBP: High Blood Pressure  
Hepatocellular CA: Hepatocellular Carcinoma  
HIV: Human Immunodeficiency Virus  
HTN: Hypertension  
MI: Myocardial Infarction



# Attachment C

## **Exclusive: Report Blames Detainee's Death On Immigration Center's Medical Staff**

February 24, 2014 8:09 PM

**MONTEBELLO (CBSLA.com)** — Juana Lopez stroked her 58-year-old son's hand as he lay dying in an immigration detention center in Adelanto.

"I would hold his hand. I would touch him. I would tell him 'I am here.' But it was clear her was not understanding anything that was going on," Lopez said in Spanish to CBS2/KCAL9 reporter Randy Paige.

Just days later, Francisco Dominguez Valivia passed away.

His death has prompted damning allegations about medical care at the Immigration and Customs Enforcement facility, with the government's own report pinning the blame on the medical staff. Lopez says her adult son became ill while he was being detained at the ICE facility. He was being held because the undocumented father of five was trying to convince immigration officials to let him stay in the United States.

Lopez says she crossed the border during a raging storm when her son was two years old, in search of a job and good medical care for her children.

Fifty-six years later, Lopez is suing because her son reportedly didn't receive the kind of medical care that would have kept him alive.

"There was gross medical neglect and this is somebody's death that could have been prevented," American Civil Liberties Union attorney Michael Kaufman, who monitors issues related to medical care at ICE detention facilities.

The inspection report by the Department of Homeland Security concluded the center's medical staff committed egregious errors and "failed to provide adequate health care to the detainee."

The report goes on to say Dominguez's death could have been prevented."

Immigration and Customs Enforcement will not comment on matters that are the subject of litigation, but, in a written statement the agency said, "...significant changes have been made to the immigration detention system and health care management...All ICE detainees should expect.

Attorney Arnaldo Casillas, who's representing the family, says the lawsuit isn't about money. He says there are severe limits on the amount that can be recovered in a case like this. He says the family brought this lawsuit to try and make sure a death like this doesn't happen again.

Juana Lopez says she still can't believe her son is gone: "What I miss most is that I'm not going to be able to see him anymore."

<http://losangeles.cbslocal.com/2014/02/24/exclusive-report-blames-detainees-death-on-immigration-centers-medical-staff/>