1 2 3 4 5 6 UNITED STATES DISTRICT COURT 7 WESTERN DISTRICT OF WASHINGTON 8 9 WILFREDO FAVELA AVENDANO; J.A.M.; NO. 2:20-CV-700-JLR-MLP NAEEM KHAN on behalf of themselves and all 10 others similarly situated, AMENDED PETITION FOR WRIT OF HABEAS CORPUS AND CLASS 11 **ACTION COMPLAINT FOR** Petitioners-Plaintiffs, **INJUNCTIVE AND** 12 **DECLARATORY RELIEF** v. 13 NATHALIE ASHER, Director of the Seattle 14 Field Office of U.S. Immigration and Customs Enforcement; TONY H. PHAM, Deputy Director 15 and Senior Official Performing the Duties of the Director of the U.S. Immigration and Customs 16 Enforcement; U.S. IMMIGRATION AND **CUSTOMS ENFORCEMENT; STEPHEN** 17 LANGFORD, Warden, Tacoma Northwest Detention Center, 18 Respondents-Defendants. 19 20 21 22 23 24 AMDENDED PETITION FOR WRIT OF NORTHWEST IMMIGRANT RIGHTS PROJECT

AMDENDED PETITION FOR WRIT OF HABEAS CORPUS & CLASS ACTION COMPL. FOR INJ. & DECL. RELIEF Case No. 2:20-cv-700 NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2nd Ave Ste. 400 Seattle, WA 98144 Tel: 206-957-8611 INTRODUCTION

1. We are eight months into a global pandemic on a scale not seen for over a century. Over a million people have died, including over two hundred thousand people in the United States. Governments around the world continue to mandate social distancing, recognizing that physical separation is still the only way to effectively prevent the spread of a deadly, rapidly-spreading virus with no vaccine and no known cure. But that basic protection is entirely unavailable to people in immigration detention, who are locked up as they await the adjudication of their civil immigration cases or their deportation. Across the country, Immigration Customs and Enforcement ("ICE") has reported that over seven thousand detainees have tested positive for COVID-19 and seven have died.¹

- 2. Yet in the midst of this pandemic, ICE continues to detain medically vulnerable people at the Northwest Detention Center ("NWDC") (also known as the Northwest ICE Processing Center), exposing them to an imminent risk of serious illness or death.
- 3. Conditions at NWDC make it impossible for detained people to protect themselves through social distancing by remaining at least six feet apart. Detainees at NWDC live, sleep, bathe, and eat next to other detainees—an environment that forecloses the possibility of maintaining even the *minimum* distancing necessary to slow the virus's spread. Nor can they protect themselves from the dangerous actions or practices of their custodians, such as their custodians' failure to reliably wear masks, or by receiving testing if they believe themselves to be exposed.

¹ Ngo Decl., Ex. A, Immigration and Customs Enforcement, *ICE Guidance on COVID-19* (last updated Nov. 1, 2020) (hereinafter "ICE Guidance") ("Confirmed Cases" page reporting that 7,015 ICE detainees have tested positive for COVID-19 as of Nov. 1, 2020).

- 4. This case challenges the detention of individuals who are highly vulnerable to COVID-19 because of their underlying medical conditions and/or age. Petitioners-Plaintiffs ("Plaintiffs") and members of the proposed class are noncitizens who are or will be held in civil immigration detention at NWDC in the midst of the COVID-19 pandemic. They are all at high risk of severe illness and death from COVID-19 due to their age and/or underlying medical conditions as identified by the U.S. Centers for Disease Control and Prevention ("CDC") and public health experts—conditions such as diabetes, asthma, chronic heart conditions, and chronic respiratory conditions. Dkt. 3 (First Amon Decl.) ¶¶ 10–11; Dkt. 4 (McKenzie Decl.) ¶¶ 23, 24, 26, 27, 31. Without this court's timely intervention, they will suffer severe illness, and some may die.
- 5. The continued detention of medically vulnerable people at NWDC in light of the imminent threat of COVID -19 creates not only a humanitarian crisis but also a constitutional crisis. The Fifth Amendment to the Constitution forbids the government from putting civil detainees squarely in the path of a lethal pandemic that poses a high risk of serious illness or death. The nature of the pandemic and the conditions of confinement at NWDC make it impossible for Defendants to provide vulnerable individuals reasonable safety as guaranteed under the Fifth Amendment. The risk of harm is "so grave that it violates contemporary standards of decency to expose anyone unwillingly to such a risk." *Helling v. McKinney*, 509 U.S. 25, 36 (1993) (emphasis omitted).
- 6. This Court has the authority to order Defendants to comply with the Fifth Amendment and release Plaintiffs and the members of the proposed class from civil detention. A judge of this Court has already ordered the release of one detainee from NWDC who is at high risk for serious illness from COVID-19, finding that "Respondents detain Petitioner at the

NWIPC in conditions that create a substantial risk he will be exposed to the coronavirus and contract COVID-19." *Pimentel-Estrada v. Barr*, 458 F. Supp. 3d 1226, 1244 (W.D. Wash. 2020) (*Pimentel-Estrada I*).

7. The Ninth Circuit recently sided with a class of immigrant detainees in a similar challenge to detention based on COVID-19, finding that "the Government likely failed to meet its constitutional duty to provide reasonably safe conditions," and concluding that detained people were likely to suffer irreparable harm given COVID-19's high mortality rate. *See Roman v. Wolf*, No. 20-55436, 2020 WL 6040125, at *6 (9th Cir. Oct. 13, 2020); *see also Xochihua-Jaimes v. Barr*, 798 F. App'x. 52 (9th Cir. 2020) (sua sponte release of immigrant petitioner). Similarly, courts across the country have ordered the immediate release of individuals like Plaintiffs from ICE detention facilities in light of the potentially fatal consequences of the continuing constitutional violation.²

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Colo. 2020); Yanes v. Martin, No. 1:20-cv-216-MSM-PAS, 2020 WL 3047515 (D.R.I. June 2,

2020); Carlos M.R. v. Decker, No. 20-6016 (MCA), 2020 WL 4339452 (D.N.J. July 28, 2020); Vazquez Barrera v. Wolf, No. 4:20-cv-1241, 2020 WL 6130717 (S.D. Tex. Oct. 19, 2020).

AMENDED PETITION FOR WRIT OF HABEAS CORPUS & CLASS ACTION COMPL. FOR INJ. & DECL. RELIEF - 3 Case No. 2:20-cv-700 NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2nd Ave Ste. 400 Seattle, WA 98144 Tel: 206-957-8611

² See, e.g., Zepeda Rivas v. Jennings, 445 F. Supp. 3d 36 (N.D. Cal. 2020); Ixchop Perez v. Wolf, 445 F. Supp. 3d 275 (N.D. Cal. 2020); Bent v. Barr, 445 F. Supp. 3d 408 (N.D. Cal. 2020); Castillo v. Barr, 449 F. Supp. 3d 915 (C.D. Cal. 2020); Hernandez Roman v. Wolf, No. 5:20-cv-00768-TJH-PVC, 2020 WL 6107069 (C.D. Cal. Oct. 15, 2020); Hernandez Roman v. Wolf, No. 5:20-cv-768-TJH-PVC, 2020 WL 3487632 (C.D. Cal. June 19, 2020), appeal dismissed, No. 20-55662, Dkt. 55-1, at *4 (9th Cir. Oct. 13, 2020); Alcantara v. Archambeault, No. 20-cv-756-DMS (AHG), 2020 WL 2315777 (S.D. Cal. May 1, 2020); Kaur v. U.S. Dep't of Homeland Sec., No. 2:20-cv-03172-ODW (MRWx), 2020 WL 1939386 (C.D. Cal. Apr. 22, 2020); Singh v. Barr, No. 20-cv-02346-VKD, 2020 WL 1929366 (N.D. Cal. Apr. 20, 2020); Doe v. Barr, No. 20-cv-02141-LB, 2020 WL 1820667 (N.D. Cal. Apr. 12, 2020); Ortuño v. Jennings, No. 20-cv-02064-MMC, 2020 WL 1701724 (N.D. Cal. Apr. 8, 2020); see also, e.g., da Silva Medeiros v. Martin, 458 F. Supp. 3d 122 (D.R.I. 2020); Savino v. Souza, 453 F. Supp. 3d 441 (D. Mass. 2020); Coronel v. Decker, 449 F. Supp. 3d 274 (S.D.N.Y. 2020); Basank v. Decker, No. 449 F. Supp. 3d 205 (S.D.N.Y. 2020); Coreas v. Bounds, 458 F. Supp. 3d 352 (D. Md. 2020); Vazquez Barrera v. Wolf, 455 F. Supp. 3d 330 (S.D. Tex. 2020); Malam v. Adducci, 459 F. Supp. 3d 867 (E.D. Mich. 2020) (Malam II); Fofana v. Albence, 454 F. Supp. 3d 651 (E.D. Mich. 2020); Malam v. Adducci, 452 F. Supp. 3d 643 (E.D. Mich. 2020), as amended (Apr. 6, 2020) (Malam I); Galan-Reyes v. Acoff, 460 F. Supp. 3d 719 (S.D. Ill. 2020); Essien v. Barr, 457 F. Supp. 3d 1008 (D.

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8. For the reasons given below, this Court should establish a process to consider members of the medically vulnerable Plaintiff class for release from detention, which is the only effective means for them to avoid infection by a lethal virus with no vaccine or cure. The Court should also require Defendants to conduct periodic testing of detainees at NWDC for COVID-19 in accordance with CDC guidelines, and limit the number of people detained at NWDC to reduce the risk of viral spread.

JURISDICTION AND VENUE

- 9. This Court has subject matter jurisdiction over this case under 28 U.S.C. § 1331 (federal question), 5 U.S.C. § 702 (waiver of sovereign immunity), 28 U.S.C. § 1343 (original jurisdiction), 28 U.S.C. §§ 2241, 2243 (habeas jurisdiction), and Article I, Section 9, Clause 2 of the United States Constitution (the Suspension Clause).
- 10. Venue lies in the United States District Court for the Western District of Washington because Plaintiffs are detained by Defendants at NWDC, which is located within the Western District of Washington. 28 U.S.C. § 2242. Venue is proper in the Western District of Washington because a substantial portion of the relevant events occurred in the District and because multiple Defendants reside in the District. 28 U.S.C. § 1391(b), (e)(1).

PARTIES

11. **Plaintiff Wilfredo Favela Avendaño** is a 46-year-old man from Mexico. He has been detained at NWDC since March 13, 2020. He has asthma that is not well-controlled. He uses two inhalers. He uses one inhaler twice daily, once when he wakes up and once before bed. The other inhaler is a rescue inhaler that he uses only when he has symptoms of an asthma attack. At NWDC, he uses this rescue inhaler on average twice every day. His asthma puts him at high risk of serious illness or death if he contracts COVID-19. Dkt. 4 ¶ 26.

- 12. **Plaintiff J.A.M.**³ is a 57-year-old man from El Salvador. Part of his right lung has been removed as the result of a gunshot injury; the bullet was never removed. Due to the presence of the bullet, his right lung does not function properly. He also has Type II diabetes. Due to his medical conditions, he is at high risk of serious illness or death if he contracts COVID-19. Dkt. $4 \, \P \, 23$.
- 13. **Plaintiff Naeem Khan** is a 47-year-old man from Pakistan and a lawful permanent resident of the United States. He has diabetes. His diabetes has worsened while in ICE custody because he is not able to exercise enough or eat properly. Due to his medical condition, he is at high risk of serious illness or death if he contracts COVID-19. Dkt. 4 ¶ 24.
- 14. **Defendant Nathalie Asher** is the Field Office Director for the Seattle Office of ICE. The Seattle Field Office is responsible for carrying out ICE's immigration detention operations at NWDC. Defendant Asher is a legal custodian of Plaintiffs. She is sued in her official capacity.
- 15. **Defendant Tony H. Pham** is the Deputy Director and Senior Official Performing the Duties of the Director of ICE. Defendant Pham is responsible for ICE's policies, practices, and procedures, including those relating to the detention of immigrants. Defendant Pham is a legal custodian of Plaintiffs. He is sued in his official capacity.⁴
- 16. **Defendant ICE** is a federal law enforcement agency within the Department of Homeland Security. ICE is responsible for the criminal and civil enforcement of immigration laws, including the detention and removal of immigrants. Enforcement and Removal Operations

³ Plaintiff J.A.M. proceeds in this action using only the initials of his first and last name, pursuant to a protective order issued in this case. Dkt. 61.

⁴ Defendant Pham is automatically substituted for Mathew T. Albence, the former Senior Official Performing the Duties of the Director of ICE, pursuant to Federal Rule of Civil Procedure 25(d).

("ERO"), a division of ICE, manages and oversees the immigration detention system. Defendant ICE is a legal custodian of Plaintiffs.

17. **Defendant Stephen Langford** is employed by the private corporation the GEO Group, Inc. as Warden of the Tacoma Northwest Detention Center, where Plaintiffs are detained. Defendant Langford is a legal custodian of Plaintiffs. He is sued in his official capacity.

FACTS

- I. COVID-19 Poses A Grave Risk of Harm, Including Serious Illness or Death, to Older Adults and Persons with Certain Medical Conditions.
- 18. In the United States, at least 9,284,966 people have already tested positive for the virus, and at least 231,510 have died.⁵ The United States has more reported cases than any other country in the world.⁶ In Washington, there are at least 113,329 confirmed cases and 2,468 known deaths, and rates of both cases and hospitalizations are increasing throughout the state—20% increase in cases and 21% increase in hospitalizations in the past two weeks alone.⁷
- 19. As the CDC now recognizes, COVID-19 can be spread through airborne transmission, via respiratory droplets that contain the coronavirus, such as those produced when an infected person coughs or sneezes, or through even smaller particles called aerosols, which are produced through normal breathing. Dkt. 3 ¶ 13; Second Supplemental Declaration of Joseph Amon (Second Supp. Amon Decl.) ¶¶ 8-9. Viral droplets can spread between people at a distance of at least six feet, and aerosols can spread between people at an even greater distance and remain suspended in the air for hours. *Id.* ¶ 9. Airborne transmission of COVID-19 beyond a

⁵ Ngo Decl., Ex. B, John Hopkins Univ. of Medicine, *COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)* (updated Nov. 2, 2020).

⁶ *Id*.

⁷ Ngo Decl., Ex. C, The New York Times, *Washington Covid Map and Case Count* (updated Nov. 2, 2020).

distance of six feet is of particular concern in enclosed spaces with poor ventilation such as detention centers, jails, and prisons. *Id.* ¶¶ 10-11. The virus that causes COVID-19 may also be transmitted when one person touches a surface or object that has the virus on it and then touches their mouth, nose, or eyes. *Id.* People who have contracted COVID-19, but who are asymptomatic, presymptomatic, or only mildly symptomatic can spread the virus and place all others with whom they have contact in danger. *Id.* ¶ 19(g).

- 20. The congregate nature of detention poses greater risks for viral spread. Based on studies of COVID-19 transmission in prisons and jails, the CDC recently clarified that a "close contact" for COVID-19 transmission is defined as anyone who is "within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the time a patient is isolated." Detainees are very likely to be in contact for this greater than this time threshold, especially because the time for exposure depends on cumulative exposure. Second Supp. Amon Decl. ¶ 12(d).
- 21. There is no vaccine to prevent COVID-19. Dkt. 3 ¶ 8. Nor is there a known cure or anti-viral treatment. *Id.* The only known means of preventing infection—and the corresponding risk of illness from COVID-19—is maintaining a distance of *at least* six feet from other people, including people who are not symptomatic, a practice known as "social distancing." *Id.* ¶ 15; *see also* Second Supp. Amon Decl. ¶ 7. Increased sanitization, including frequent hand- and face-washing and sanitization of commonly used surfaces, can mitigate, but not eliminate the risk of infection. Dkt. 3 ¶ 15; Second Supp. Amon Decl. ¶ 7. Lack of appropriate measures to prevent introduction of the virus, rapidly identify cases of COVID-19

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AMENDED PETITION FOR WRIT OF HABEAS CORPUS & CLASS ACTION COMPL. FOR INJ. & DECL. RELIEF - 8 Case No. 2:20-cv-700

with adequate testing, and conduct appropriate contact tracing, quarantine, and isolation compound the challenge to ensure a safe environment. Second Supp. Amon Decl. ¶ 7.

- 22. Outcomes from COVID-19 vary from no or mild symptoms to respiratory failure and death. Dkt. 3 ¶ 8. Individuals who are at least 55 years old and those with certain underlying medical conditions are at the highest risk of severe disease and death if they are infected with COVID-19. *Id.* ¶¶ 10-12.8 According to recent estimates, the fatality rate of COVID-19 is about ten times higher than a severe seasonal influenza. *Id.* ¶ 4. For people in the highest-risk populations, the fatality rate of COVID-19 is about 15 percent—or one in seven. *Id.*
- 23. Those who survive severe cases of COVID-19 often have lasting damage. COVID-19 can severely damage lung tissue, requiring long-term rehabilitation. *Id.* ¶ 9. It can also cause significant damage to other organs. COVID-19 can target the heart muscle, causing a condition called myocarditis that can limit a person's ability to exercise and work for the rest of their life. Dkt. 5 (Golob Decl.) ¶ 9. There is also evidence that COVID-19 may trigger an immune system over-response, leading to permanent damage to organs, such as neurologic damage and kidney damage requiring dialysis. *Id.* People in higher-risk categories who contract COVID-19 are more likely to need advanced support. Dkt. 3 ¶¶ 8-12. This level of supportive care requires highly specialized equipment, such as positive pressure ventilators and extracorporeal mechanical oxygenation. *Id.* ¶ 9.
- The extensive degree of support that COVID-19 patients need can quickly exceed 24. local healthcare resources, and this could be especially true for patients coming from immigration detention centers. *Id.* ¶ 50. By far the best way to avoid further burdening an already

⁸ See also Ngo Decl. Ex. D, ICE, Enforcement and Removal Operations COVID-19 Pandemic

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over-taxed healthcare system is to enable individuals, particularly those who are highly vulnerable to serious complications from COVID-19, to avoid infection in the first place. *Id.* ¶ 55.

- 25. The only way to protect vulnerable people from serious health outcomes, including death, is to prevent them from being infected with the coronavirus. Because meaningful risk mitigation is not possible at NWDC, these individuals must be considered for release to avoid needless suffering or death. First Amon Decl., Dkt. 3 ¶¶ 55-57; Second Supp. Amon Decl. ¶ 7.
- II. Conditions at the Northwest Detention Center Increase the Risk of COVID-19 Infection.
 - A. COVID-19 Spreads Rapidly in Detention and Correctional Facilities.
- 26. The conditions at NWDC place immigrant detainees at serious risk of infection with COVID-19. By detaining them at NWDC, Defendants thus place detainees who are vulnerable to serious illness or death from COVID-19 due to their age and/or underlying medical conditions at serious risk of these consequences.
- 27. COVID-19 continues to spread rapidly through ICE detention centers throughout the country, with outbreaks still occurring late into the pandemic. See, e.g., Hernandez Roman v. Wolf, 5:20-cv-00768-TJH-PVC, 2020 WL 579798 (C.D. Cal. Sept. 29, 2020); Zepeda Rivas v. Jennings, No. 20-cv-02731-VC, Dkt. 500 (N.D. Cal. Aug. 6, 2020) (Att. A). As of the date of this filing, there are over 7,000 confirmed cases among people detained by ICE. Moreover, because the only mandated testing that ICE requires is for detainees at initial intake into a facility, there is no systematic means of testing or discovering positive COVID-19 test cases among staff or detainees in the general population after intake. Second Supp. Amon Decl. ¶ 19(*l*).

28. As the CDC has indicated, enclosed spaces with inadequate ventilation create an environment where the risk of airborne transmission of COVID-19 is even greater. Second Supp. Amon Decl. ¶ 10. Immigration detention centers also present a greater risk of outbreak and spread due to crowding, structural limitations, and limited ability for detainees to practice proper hygiene and take measures to protect themselves from exposure. *Id.*; Dkt. 6 (Schriro Decl.) ¶¶ 23, 31, 35, 38-40.

- 29. NWDC is an enclosed environment in which contagious diseases easily spread. People live in close quarters and are subject to security measures that make social distancing impossible. Further, people at NWDC are unable to follow the relevant directives promulgated by medical and public health officials for mitigating the spread of COVID-19. *Id.* ¶¶ 35, 36, 38, 41, 45-47, 51, 52. For example, ICE's most recent COVID-19 Pandemic Response Requirements, dated October 27, 2020, acknowledges that "strict social distancing may not be possible in congregate settings such as detention facilities," and requires social distancing measures only "to the extent practicable." Such policies are insufficient to protect detainees from COVID-19 transmission. Second Supp. Amon Decl. ¶ 12(f). Nowhere in ICE or NWDC's policies or documents do Defendants address airborne transmission. *Id.* ¶ 11.
- 30. The spread of COVID-19 at other correctional facilities, which are similarly structured and operated, demonstrates this danger. Many of the largest COVID-19 outbreaks in the nation have occurred in correctional facilities, including the Avenal State Prison in Avenal, California (3,284 confirmed cases); San Quentin State Prison in San Quentin, California (2,557

AMENDED PETITION FOR WRIT OF HABEAS CORPUS & CLASS ACTION COMPL. FOR INJ. & DECL. RELIEF - 11 Case No. 2:20-cv-700

cases); Marion Correctional Institution in Marion, Ohio (2,453 cases); and Pickaway Correctional Institution in Scioto Township, Ohio (797 cases).

- 31. The University of California, Los Angeles School of Law's Behind Bars Project has confirmed that over 143,149 incarcerated people and over 30,000 correctional staff have contracted COVID-19 nationwide. Over 1,000 incarcerated people and 56 correctional staff have died of COVID-19. Unsurprisingly, one analysis found that COVID-19 case rates for prisoners is 5.5 times higher than the case rate of the general U.S. population, and this rate is likely an underestimate of the actual prevalence of COVID-19 in prison settings. ¹⁰
 - **B.** Immigration Detainees at NWDC Cannot Engage in Necessary Social Distancing.
- 32. Social distancing is crucial to preventing the spread of COVID-19. Dkt. 3 ¶ 15. The nature of detention at NWDC denies people the opportunity to protect themselves from the spread of COVID-19. Social distancing at NWDC is physically impossible. *Id.* ¶ 30; *see also* Second Supp. Amon Decl. ¶ 12. NWDC and other immigration detention facilities are not designed or operated to allow for the necessary physical distancing. *See* Dkt. 3 ¶¶ 22, 23, 29, 30, 40, 52; Second Supp. Amon Decl. ¶¶ 11–12; Dkt. 6 ¶¶ 31(c), 35–44.
- 33. Recent CDC guidance underscores the threat this inability to social distance poses to detainees. Transmission of the virus to a "close contact" can occur with anyone who is "within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period." Because social distancing is not possible at NWDC, an infected person, including a guard, staff

⁹ Ngo Decl., Ex. E, The New York Times, *Coronavirus in the U.S.: Latest Map and Case Count* (updated Nov. 2, 2020).

¹⁰ Ngo Decl., Ex. F, Brendan Saloner et al., *COVID-19 Cases and Deaths in Federal and State Prisons*, JAMA Network (July 8, 2020).

- 34. The accounts of detainees and Defendants' own representations to this Court demonstrate why social distancing is not possible at NWDC. Most immigration detainees at NWDC live in pods. Months into the pandemic, these pods still house 20, 30, or even 40 detainees. Dkt. 104 (Lippard Decl.) ¶ 38. These pods serve as dormitories for large numbers of detainees, and have common areas in which detainees must congregate by necessity. Dormitories are divided into different sleeping areas, but detainees' beds—usually bunkbeds—are so close that one can reach out and touch the neighboring bunk, much closer than six feet away. Dkt. 7 (First Favela Avendaño Decl.) ¶¶ 5, 9, 10; Dkt. 9 (First Khan Decl.) ¶ 5; Dkt. 10 (Diaz Reyes Decl.) ¶ 6; Dkt. 11 (J.A.M. Decl.) ¶ 10. The facility is designed to prevent the beds from being moved. Dkt. 104 ¶ 39.
- 35. Detainees spend nearly all their time, including eating, socializing, and sleeping, in the sleeping areas or common spaces of the pods. This environment makes social distancing impossible. Robles Rodriguez Decl. ¶ 11; Second Khan Decl. ¶¶ 2–3; Cha Decl. ¶ 12; Melgar Alas Decl. ¶ 7.
- 36. Indeed, detainees must share communal areas and surfaces, and they share just a small number of showers, sinks, and toilets among many people and at times must line up to use them. Dkt. 7 ¶ 11; Second Favela Avendaño Decl. ¶¶ 9–10; Dkt. 10 ¶¶ 8, 13. Meals occur at the same time for detainees in each pod, making it difficult to engage in social distancing. Dkt. 7 ¶ 14; Second Khan Decl. ¶ 3; Cha Decl. ¶ 12; Melgar Alas Decl. ¶ 7.

- 37. Detainees who participate in immigration court hearings are also placed into crowded situations in which social distancing is not possible. They wait in holding areas or in court where social distancing is not feasible. Robles Rodriguez Decl. ¶ 11.
- 38. GEO officers often refuse to engage in social distancing as well, placing themselves and detainees at risk. Dkt. 15 (First Nerheim Decl.) ¶¶ 5, 6, 9.
- 39. These conditions and shared common spaces and objects, such as bathrooms and sinks, maximize the likelihood that COVID-19 will spread rapidly across the facility, infecting vulnerable detainees. Dkt. 3 ¶¶ 15, 22, 23, 29, 30, 40, 42, 43, 52. In addition, movement of detainees, guards, and other staff within and among housing units, as well as to and from other areas of the facility, expose detainees to many new individuals and put them at risk in the absence of the ability to socially distance. Dkt. 6 ¶¶ 37–43.
 - C. Defendants Fail to Take Necessary Measures Protect Detainees from COVID-19 at NWDC.
- 40. Defendants have failed to adopt adequate and appropriate measures to prevent the introduction and spread of the virus.
- 41. In particular, Defendants have failed to rapidly identify cases of COVID-19 with appropriate testing, screening, and contact tracing. Their quarantine and isolation practices of confirmed COVID-19 cases likewise remain inadequate. Defendants have failed to provide specific protections for those who are medically vulnerable to COVID-19. Defendants have also failed to provide adequate measures necessary to mitigate the spread of COVID-19 in the facility, including the rigorous use of face masks and proper sanitation and hygiene.
- 42. **Failure to Test for COVID-19.** While detainees are now tested at intake, COVID-19 testing at NWDC remains sporadic at best and is insufficient to detect the virus among employees and detainees. For example, Defendants have failed to test detainees who

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24 AMENDED PETITION FOR WRIT OF HABEAS CORPUS & CLASS ACTION

COMPL. FOR INJ. & DECL. RELIEF - 14 Case No. 2:20-cv-700

likely have been exposed to staff with confirmed COVID-19 cases, even after quarantining these detainees. Defendants' current testing and screening practices do not conform with CDC protocols, or even their own. Second Supp. Amon Decl. ¶ 19(e)-(f), (j).

- 43. ICE's most recent Pandemic Response Requirements, Version 5.0, acknowledges and cites to CDC guidance that recommends COVID-19 testing for "asymptomatic individuals with recent known or suspected exposure to SARS-CoV-2 to control transmission."11
- Two staff members at NWDC, including a guard employed by GEO and an ICE Health Service Corps (IHSC) employee have tested positive for COVID-19 in the last two weeks. In response to the GEO guard's positive test on October 21, 2020, Defendants placed at least one housing unit in quarantine because of likely COVID-19 exposure. See Declaration of Emily Simcock Ex. A. But Defendants have categorically refused to conduct any testing of these detainees who they placed into quarantine, even after detainees or their attorneys requested tests. See id. Similarly, they have made clear that they will not conduct any tests of detainees in response to the positive test of the IHSC employee. Dkt. 129-1 (Bostock Decl.) ¶ 5. By contrast, following another GEO guard's positive test in late September 2020, all detainees in the quarantined pod were offered voluntary tests. Compare Dkt. 122-1 (Bostock Decl.) ¶ 8 (stating that detainees would be offered tests after guard tested positive) with Dkt. 128-1 (Bostock Decl.) (declining to mention testing for detainees following a second guard's positive test) and Simcock Decl. Ex. A (email from ICE deportation officer refusing testing to individual in pod where positive guard had been present). Defendants' failure to test any detainees after exposure to a guard with a confirmed case of COVID-19 is inconsistent with the CDC's guidance. Second

¹¹ Ngo Decl. Ex. D, ERO PRR (Version 5.0, October 27, 2020) at 33.

Suppl. Amon Decl. ¶ 19(e)–(f). Without having tested any of the quarantined detainees, Defendants now claim that there are no active COVID-19 cases at the facility.

- 45. The presence of staff and employees who have tested positive, and ICE's failure to adequately test detainees after exposure to infected staff, have been the cause of COVID-19 outbreaks at other immigration detention facilities. *See, e.g., Hernandez Roman v. Wolf*, No. 20-55436, 2020 WL 5683233 (9th Cir. Sept. 23, 2020); *Zepeda Rivas v. Jennings*, No. 20-cv02731-vc, Dkt. 500 (N.D. Cal. Aug. 6, 2020) (Att. A). Failure to adequately test staff and detainees presents a clear risk of spread of the virus throughout the facility. *Id.* ¶¶ 32, 33, 40; Second Suppl. Amon Decl. ¶ 19(d), (j), (*l*).
- 46. **Failure to Screen and Conduct Contact Tracing.** Defendants' screening mechanisms to ensure that COVID-19 does not enter the facility through employees, staff, and vendors are inadequate. Moreover, Defendants' employees have failed to adhere to existing screening mechanisms.
- 47. For example, on Thursday, October 1, 2020, Defendants reported that a GEO staff member who works in the general population units at NWDC tested positive for COVID-19. Dkt. 122-1 ¶ 3. This staff member had a fever and loss of taste and smell—classic symptoms of COVID-19—on Sunday, September 27, 2020, and called in sick on Monday, September 28, 2020. However, the staff member returned to work on Tuesday, September 29, 2020, completed NWDC's screening questions, and entered the facility. *Id.* ¶ 4. The staff member claimed he had no symptoms that day and was able to clear screening, as the screening inquires only about symptoms "in the last 24 hours." *Id.* ¶ 5. This episode clearly indicates that NWDC's screening protocol is inadequate to identify symptomatic cases of COVID-19, and that staff are not adequately educated on the proper steps to take if they experience symptoms. Second Supp.

Amon Decl. ¶ 19(c). Defendants also failed to conduct a thorough contact tracing investigation following the identification of this officer, because only detainees in one dorm that the officer last worked were tested; other detainees and officers who may have had contact during the symptomatic period were apparently not tested. Second Suppl. Amon Decl. ¶ 19(d).

- 48. The possibility of asymptomatic or presymptomatic transmission means that monitoring staff or detainees for fever is also inadequate to identify all who may be infected and prevent transmission. Dkt. 3 ¶¶ 14, 32, 53.
- 49. **Inadequate Quarantine and Isolation**. In detention settings, quarantine and isolation are necessary to ensure that individuals who are sick or who have been exposed to COVID-19 do not interact with others. Yet Defendants' quarantine and medical isolation practices are insufficient, if not dangerous. ICE guidance states that "[d]etainees who do not have fever or symptoms, but meet CDC criteria for epidemiologic risk, are housed separately in a single cell, or as a group." ¹² However, experts have concluded that cohorting vulnerable detainees together *increases* their risk of becoming infected with COVID-19. Dkt. 3 ¶ 36.
- 50. CDC guidance for detention facilities directs that facilities should separate detainees with symptoms of COVID-19 from others. 13 It instructs that each individual with a confirmed or suspected case of COVID-19 should be assigned their own room and bathroom.¹⁴ CDC guidance provides that as a last resort, "if there are no other available options," multiple

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¹⁴ *Id.* at 5, 17.

laboratory-confirmed COVID-19 cases—not suspected COVID-19 cases—may be placed together. 15

- 51. Quarantine practices at NWDC also place together detainees who may have been exposed without providing a way for them to socially distance. If one person has symptoms of COVID-19, the entire pod may be quarantined, but no measures are taken to ensure that the individuals in the pod are able to socially distance during this time. Cha Decl. ¶¶ 4, 6-7, 10, 12. This failure to separate detainees with COVID-19 symptoms in a manner consistent with best medical practices exposes other detainees to possible COVID-19 infection, facilitating rather than preventing disease transmission. *See* Dkt. 3 ¶¶ 36, 54.
- 52. This flawed use of quarantine in the place of proper medical care is also dangerous. If an individual is potentially exposed to COVID-19, the pod is placed into quarantine but high-risk individuals are not quarantined separately to protect the most vulnerable from the disease. *See, e.g.*, Dkt. 122-1 ¶ 8 (explaining that Defendants quarantined an entire pod together after a guard tested positive); Cha Decl. ¶¶ 6, 12 ("While quarantined, we are not forced to be socially distant within this space.").
- 53. Individuals detained at NWDC ordinarily have trouble accessing timely and adequate medical care, even for emergencies. Dkt. 10 ¶¶ 14, 15; Dkt. 9 ¶ 4. An increase in symptomatic individuals would make it difficult for detainees to timely receive the medical care they need for both COVID-19 and other medical problems. Dkt. 3 ¶ 49.
- 54. Individuals may also be placed into solitary confinement cells for medical isolation due to COVID-19. Dkt. 10 ¶ 16. The solitary confinement cells are dirty, poorly ventilated, and windowless. *Id.* ¶ 17. Using solitary confinement cells for this purpose is contrary

Case No. 2:20-cv-700

AMENDED PETITION FOR WRIT OF

HABEAS CORPUS & CLASS ACTION

COMPL. FOR INJ. & DECL. RELIEF - 17

to best correctional practice and is likely to lead individuals to hide symptoms if they fear perceived punishment. Dkt. $6 \, \P \, 44$.

- 55. Failure to Provide Specific Protections to Medically Vulnerable Detainees.

 ICE's most recent COVID-19 Pandemic Response Requirements (v. 5.0) requires documented temperature and verbal screenings of medically vulnerable detainees twice daily, and designation of rooms near each housing unit for evaluation of individuals with COVID-19 symptoms.

 Defendants' failure to implement these protections would place medically vulnerable detainees in danger.
- Equipment, Hygiene, and Sanitation. Whenever strict social distancing is not possible, masks are necessary to mitigate, although not prevent, the spread of COVID-19. Second Amon Supp. Decl. ¶ 20. CDC guidance instructs everyone to wear face masks in settings where social distancing is not feasible. ¹6 CDC guidance also provides that those detained must wear personal protective equipment, including coveralls and gloves, while cleaning in an area where a person with a confirmed or suspected case of COVID-19 has been present. ¹7
- 57. ICE's most recent COVID-19 Pandemic Response Requirements (v. 5.0), however, adds one note not included in the CDC guidance—that workers need not wear a mask "if contraindicated." This exception places all detainees in danger. Second Suppl. Amon Decl. ¶ 19(f).
- 58. Despite CDC guidance, mask use at NWDC is sporadic, including among those for whom it matters most: guards who interact with detainees. Detainees are not required to wear

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¹⁶ Ngo Decl., Ex. K, CDC, *Recommendation Regarding the Use of Cloth Face Coverings* (last updated Aug. 7, 2020).

¹⁷ Ngo Decl. Ex. G, CDC Correctional Guidance at 18.

masks. Robles Rodriguez Decl. ¶ 13; Second Khan Decl. ¶¶ 4, 6; Second Favela Avendaño ¶ 8. Even more worryingly, guards regularly fail to wear masks in both the proximity of detainees and other guards. Robles Rodriguez Decl. ¶¶ 5, 7; Second Khan Decl. ¶ 7; Cha Decl. ¶ 9; Second Favela Avendaño ¶ 3. Attorneys who regularly visit the facility agree that guards at the facility regularly exhibit a disregard for this most basic of prevention measures. See First Nerheim Decl., Dkt. 15 ¶ 9; Second Nerheim Decl. ¶¶ 7-8, 13; Avila Decl. ¶¶ 2–4. This state of affairs substantially increases the possibility of an outbreak. For example, recently, a guard who regularly refused to wear a mask tested positive for COVID-19. Dkt. 122-1; Robles Rodriguez Decl. ¶ 4–5; Cha Decl. ¶ 9. This failure to properly wear personal protective equipment significantly increases detainees' risk of exposure to COVID-19. Dkt. 3 ¶¶ 38, 40–41; Second Suppl. Amon Decl. ¶ 20. Indeed, breakdowns in safety among guards have led to other outbreaks at immigration and correctional facilities, including the SeaTac Detention Center. 18 59. CDC guidance instructs everyone—including people who are incarcerated or detained—to wash hands often with soap and water for at least 20 seconds and, absent soap and

water, to use a hand sanitizer of at least 60% alcohol. 19 CDC guidance directs that detention centers provide detainees with no-cost access to soap, running water, hand dryers or disposable paper towels, and, where possible, hand sanitizer.²⁰ It also directs that those incarcerated or detained, like all others, cover their mouth and nose with a disposable tissue when coughing or sneezing.²¹

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¹⁸ Ngo Decl., Ex. H, Jim Brunner, "COVID infections hit 31 inmates and 6 staff at federal detention center in SeaTac," The Seattle Times (Aug. 28, 2020).

¹⁹ Ngo Decl., Ex. G, CDC Correctional Guidance at 8, 10. ²⁰ *Id*.

²¹ *Id*.

60. Individuals detained at NWDC are unable to engage in the hygiene practices necessary to protect themselves from COVID-19. Announcements regarding sanitation and hygiene practices are given only in English and Spanish, and sometimes only in English, with no translation for individuals who do not speak either of those languages. Dkt. 7 ¶ 8; Dkt. 11 ¶ 13.

- 61. Sinks turn off every five or ten seconds, making it difficult for detainees to wash their hands for twenty seconds. Dkt. 7 ¶ 15; Dkt. 9 ¶ 12. Detainees have to push buttons to run the sink or flush the toilet, and those buttons are not disinfected. Dkt. 10 ¶ 13. Soap and towels run out and may not be replaced until the next day Dkt. 9 ¶ 12; Dkt. 10 ¶ 12. The CDC instructs that, in detention facilities, frequently touched surfaces and objects must be cleaned several times per day. However, detainees are generally responsible for much of the cleaning, but are not necessarily able to fully sanitize objects after every use or conduct adequate cleaning. Dkt. 9 ¶ 8; Second Khan Decl. ¶ 2; Robles Rodriguez Decl. ¶ 12; Second Favela Avendaño Decl. ¶ 5. Cleaning of common areas and objects does not always happen regularly, or even every day. Second Khan Decl. ¶ 2; Cha Decl. ¶ 13. NWDC's failure to provide adequate sanitation and hygiene measures will allow COVID-19 to spread freely in the facility. Dkt. 3 ¶¶ 29, 37, 40.
- 62. In sum, NWDC has failed to implement measures necessary to protecting the safety and health of detainees in light of the COVID-19 pandemic. *See* Dkt. 3 ¶¶ 52-54; Second Suppl. Amon Decl. ¶¶ 6–21. As a result, Defendants continue to hold Plaintiffs and members of the class in conditions where they are at grave risk of contracting COVID-19.

²² *Id*. at 9.

III. Continued ICE Detention is Unsafe for Individuals, Like Plaintiffs, who are Vulnerable to Serious Illness and Death from COVID-19.

- 63. Without a vaccine or cure for COVID-19, mitigating the risk of contracting the virus is the only known way to protect those who are most vulnerable to serious harm from infection. Dkt. 3 ¶¶ 15, 55.
- 64. Because the overwhelming danger of infection in detention centers, public health experts with experience in detention and correctional settings have recommended release of vulnerable individuals. Dkt. 3 ¶ 55. Indeed, two medical experts for the Department of Homeland Security have concluded that COVID-19 poses an "imminent risk to the health and safety of immigration detainees," in light of the nature of detention facilities and have recommended release of vulnerable people, both to mitigate that risk and to reduce the strain on local healthcare systems. ²³
- 65. The Named Plaintiffs and putative class members in this case are all individuals who are especially vulnerable to serious illness and death if they are infected with COVID-19. But ICE nonetheless detained or continues to detain them at NWDC. Given ICE's inability to protect the named Plaintiffs and the proposed class while they remain at NWDC, the only effective remedy is consideration for release.

CLASS ALLEGATIONS

66. Plaintiffs bring this action pursuant to Federal Rules of Civil Procedure 23(a) and 23(b)(2), and as a representative habeas action, on behalf of themselves and all other persons similarly situated. The proposed class is defined as follows:

²³ Dkt. 2-3 (Allen & Rich Letter).

All individuals detained at the Northwest Detention Center who are age 55 years or older or have medical conditions²⁴ that place them at heightened risk of severe illness or death from COVID-19 as determined by Centers for Disease Control and Prevention guidelines.

See Dkt. 3 ¶¶ 10, 11 (listing medical conditions that the CDC has identified as placing individuals at heightened risk for serious illness and death from COVID-19, including all of the above); Dkt. 86 (Venters Decl.) ¶¶ 12–16 (same). 25 Joinder of all members is impracticable. As of September 22, 2020, Defendants were detaining at least 410 people at NWDC. 26 A significant proportion of these individuals have serious medical conditions and/or are over the age of 55.

Two of these medically vulnerable individuals currently detained at NWDC are Plaintiffs in this case. It is reasonable to infer that there are at least dozens more who are detained at NWDC who fit the class definition. 27

²⁴ Those medical conditions include: chronic kidney disease (e.g., receiving dialysis); chronic liver disease (e.g., cirrhosis and chronic hepatitis); endocrine disorders (e.g., diabetes mellitus); compromised immune system (immunosuppression) (e.g., receiving treatment such as chemotherapy or radiation, received an organ or bone marrow transplant and is taking immunosuppressant medications, taking high doses of corticosteroids or other immunosuppressant medications, HIV or AIDS); metabolic disorders (e.g., inherited metabolic disorders and mitochondrial disorders); heart disease (e.g., congenital heart disease, congestive heart failure, and coronary artery disease); lung disease (e.g., asthma, chronic obstructive pulmonary disease (chronic bronchitis or emphysema), or other chronic conditions associated with impaired lung function or that require home oxygen); neurological and neurologic and neurodevelopment conditions (including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability, moderate to severe developmental delay, muscular dystrophy, or spinal cord injury); current or recent pregnancy (in the last two weeks); body mass index (BMI) greater than 25; and, hypertension.

²⁵ See also Ngo Decl. Ex. D, ERO PRR, at 8–9 (adopting definition of conditions placing individuals at higher risk from *Fraihat v. ICE*, 445 F. Supp. 3d 709 (C.D. Cal. 2020). ²⁶ *Moturi v. ICE Field Office Dir.*, No. C19-2023-RSM-BAT, Dkt. 71, slip op. at 12 (W.D.

²² Wash. Oct. 1, 2020) (Att. B).

Nationally, out of about 24,000 detainees in mid-June 2020, ICE identified 5,736 individuals (about 24%) who fell into the *Fraihat* subclasses, similarly defined to the class proposed here of individuals whose age or medical conditions make them medically vulnerable to COVID-19. *Fraihat v. Immig. & Customs Enf't.*, No. EDCV 19-1546 JGB (SHKx), Dkt. 240, slip. op. at 6–7

- 67. Proposed class members' detention presents common questions of fact and law. All class members are similarly situated as a result of their increased risk of serious medical complications or death from contracting COVID-19. All class members are similarly situated in that conditions at NWDC make social distancing and other protective measures impossible. They all share the common question of whether their continued detention at NWDC violates the Due Process Clause.
- 68. The claims of the proposed class representatives are typical of the claims of the proposed class. All proposed class representatives face a grave risk of serious illness or death from COVID-19 due to their age and/or underlying medical conditions, and all raise the same due process challenge to their detention. The proposed class representatives' legal challenges to their detention are identical to those of the proposed class.
- 69. The proposed class representatives are adequate representatives because they seek the same relief as the other members of the class, including: an expedited process for consideration for release by ICE or interim bail by the Court, declaratory relief that their ongoing custody violates the Due Process Clause, final injunctive relief and a writ of habeas corpus requiring their release or alternatively a class-wide conditional writ or final injunctive relief that provides a process for considering release by ICE or the Court; periodic testing of detainees, staff, and employees in accordance with CDC guidelines; and, injunctive relief ensuring that ICE may not detain more than an appropriate level to permit for adequate social distancing. The proposed class representatives do not have any interests adverse to those of the class as a whole.

⁽C.D. Cal. Oct. 7, 2020) (Att. C). Thus, assuming a similar ratio, there are likely around 100 higher risk individuals currently detained at NWDC.

- 70. The proposed class would be represented by counsel from the ACLU Foundation of Washington, the ACLU Foundation, and the Northwest Immigrant Rights Project. Counsel have extensive experience litigating class action lawsuits, including lawsuits on behalf of incarcerated people generally and immigration detainees in particular.
- 71. Defendants have acted on grounds generally applicable to the class by continuing to detain them in circumstances where they are likely to suffer serious medical complications and/or die from COVID-19. Thus, injunctive and declaratory relief is appropriate with respect to the class as a whole.

LEGAL FRAMEWORK

- I. Immigrant Detainees Are Entitled to Due Process Protections Against Exposure to Infectious Disease.
- The Whenever the government detains or incarcerates someone, it has an affirmative duty to provide conditions of reasonable health and safety. As the Supreme Court has explained, "when the State takes a person into its custody and holds him there against his will, the Constitution imposes upon it a corresponding duty to assume some responsibility for his safety and general well-being." *DeShaney v. Winnebago Cty. Dep't. of Soc. Servs.*, 489 U.S. 189, 199–200 (1989). As a result, the government must provide those in its custody with "food, clothing, shelter, medical care, and reasonable safety. . . ." *Id.* at 200; *see also Pimentel-Estrada I*, 458 F. Supp. 3d at 1243. As the Ninth Circuit recently made clear, this principle applies with equal force in immigration detention centers during the current pandemic. *See Hernandez Roman*, 2020 WL 6040125, at *6.
- 73. Conditions that pose an unreasonable risk of future harm violate the Eighth
 Amendment's prohibition against cruel and unusual punishment, even if that harm has not yet
 come to pass. The Eighth Amendment requires that "inmates be furnished with the basic human

AMENDED PETITION FOR WRIT OF HABEAS CORPUS & CLASS ACTION COMPL. FOR INJ. & DECL. RELIEF - 24 Case No. 2:20-cv-700

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at 200). Accordingly, "[i]t would be odd to deny an injunction to inmates who plainly proved an unsafe, life-threatening condition in their prison on the ground that nothing yet had happened to them." *Id.* Exposing imprisoned people to the risk of infectious disease is unconstitutional, even when it is "not alleged that the likely harm would occur immediately and even though the possible infection might not affect all of those exposed." *Id.* (citing *Hutto v. Finney*, 437 U.S. 678, 682 (1978)). For this reason, a judge of this Court released a detainee from NWDC, even though there were no confirmed COVID-19 cases in the detention center at that point. *Pimentel*-Estrada, 458 F. Supp. 3d at 1246, 1253 (citing Helling, 509 U.S. at 33; Hutto, 437 U.S. at 682; Hoptowit v. Spellman, 753 F.2d 779, 784 (9th Cir. 1985); Malam I, 452 F.Supp.3d at 661.

- 74. Civil immigration detainees, like Plaintiffs and the proposed class, are entitled to even stronger constitutional protections. In contrast to convicted prisoners, immigration detainees, regardless of prior criminal convictions, are civil detainees held only to ensure their appearance for civil removal proceedings or for deportation. Thus, their constitutional protections in custody derive from the Fifth Amendment Due Process Clause. See Zadvydas v. Davis, 533 U.S. 678, 690 (2001) ("[G]overnment detention violates the [Fifth Amendment Due Process] Clause unless the detention is ordered in a *criminal* proceeding with adequate procedural protections . . . or, in certain special and 'narrow' nonpunitive 'circumstances' "); *Pimentel-Estrada*, 458 F. Supp. 3d at 1250.
- 75. The protections of the Fifth Amendment are stronger than those of the Eighth Amendment. In contrast to the Eighth Amendment, the government violates the Fifth Amendment rights of a person in civil detention when the conditions of his or her confinement "amount to punishment. . . ." Bell v. Wolfish, 441 U.S. 520, 535 (1979). The Ninth Circuit has

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applied this principle to make clear that civil detainees, like Plaintiffs here, are entitled to conditions of confinement that are *superior* to those of convicted prisoners and even to those of criminal pretrial detainees. *Jones v. Blanas*, 393 F.3d 918, 933–34 (9th Cir. 2004), *cert. denied*, 546 U.S. 820 (2005) (holding presumptively punitive, and thus unconstitutional, conditions of confinement for civil detainees that are similar to those faced by pre-trial criminal detainees); *see also King v. Cnty. of Los Angeles*, 885 F.3d 548, 557 (9th Cir. 2018) (same).

76. Because civil detention is governed by the Fifth Amendment rather than the Eighth Amendment, the "deliberate indifference" standard required to establish constitutional violation in the latter context does not apply to civil detainees like Plaintiffs. See Jones, 393 F.3d at 934. "A petitioner can demonstrate punitive conditions by showing that the challenged condition is: (1) expressly intended to punish or (2) not rationally related to a legitimate government objective or is excessive to that purpose." Pimentel-Estrada I, 458 F. Supp. 3d at 1250. (citing Wolfish, 441 U.S. at 535 & n.16). Thus, a condition of confinement for a civil immigration detainee violates the Constitution "if it imposes some harm to the detainee that significantly exceeds or is independent of the inherent discomforts of confinement and is not reasonably related to a legitimate governmental objective or is excessive in relation to the legitimate governmental objective." Unknown Parties v. Johnson, No. cv-15-250-TUC-DCB, 2016 WL 8188563, at *5 (D. Ariz. Nov. 18, 2016), aff'd sub nom. Doe v. Kelly, 878 F.3d 710 (9th Cir. 2017) (citing Kingsley v. Hendrickson, 135 S. Ct. 2466, 2473–74 (2015)); see also Castro v. Cty. of Los Angeles, 833 F.3d 1060, 1071 (9th Cir. 2016) (outlining elements of pretrial detainee's failure to protect claim under the Fourteenth Amendment); Pimentel-Estrada, 458 F. Supp. 3d at 1244 (citing *Castro*, 833 F.3d at 1071) (same). Immigration detention that places

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detainees at a substantial risk of serious illness or death is not rationally related to a legitimate governmental objective and thus violates the Fifth Amendment.

II. Defendants Are Violating Plaintiffs' Fifth Amendment Rights.

- 77. The conditions described above at NWDC violate Plaintiffs' due process rights. Due process requires that the nature and duration of noncriminal confinement bear "some reasonable relation to the purpose for which the individual is committed." *Jackson v. Indiana*, 406 U.S. 715, 738 (1972). The only legitimate purpose, consistent with due process, for civil immigration detention is to prevent flight and ensure the detained person's attendance for a legal hearing adjudicating their status or for removal, or to otherwise ensure the safety of the community. *See Zadvydas*, 533 U.S. at 690.
- 78. Keeping medically vulnerable people detained in a setting where effective hygiene and social distancing is impossible, in the midst of the COVID-19 pandemic, serves no legitimate purpose. Nor is detention under these circumstances reasonably related to the enforcement of immigration laws. Defendants' continued detention of Plaintiffs and the proposed class at NWDC thus violates the Fifth Amendment.
- 79. Plaintiffs' Fifth Amendment rights are also violated because Defendants have made an intentional decision to detain them under conditions that are objectively unreasonable and that place them at serious risk of being infected with COVID-19.
- 80. COVID-19 poses a serious risk to Plaintiffs. As explained above, Plaintiffs are at extreme risk because of their age and/or underlying health conditions. *See supra* ¶¶ 11–14. COVID-19 is highly contagious and can cause severe illness and death, and the only known measures to prevent the spread of the disease cannot be practiced at NWDC. *See supra* ¶¶ 19–58.

81. The best means to protect the Fifth Amendment rights of Plaintiffs and the proposed class is consideration for release through individualized bail hearings. The severe risk to which they are being subjected cannot be abated if they remain at NWDC. Public health experts have made clear that slowing the spread of COVID-19 requires social distancing and increased hygiene and that individuals with Plaintiffs' underlying medical conditions are vulnerable to serious disease and death if they contract the virus. *See supra* ¶ 2, 4–5, 24–26, 49, 55, 63–65, 96; Dkt. 5 ¶ 3, 14. However, Plaintiffs cannot take the requisite social distancing and other protective measures while detained at NWDC. Because risk mitigation at NWDC is impossible, the only effective remedy for the unconstitutional conditions to which Plaintiffs and the proposed class are being subjected is release from the detention center. This process will allow the Court to determine whether a class member can be released, or whether no set of release conditions could ameliorate the risk of flight or danger to public safety.

82. Defendants have full knowledge of but are disregarding the serious risk that COVID-19 poses to people like Plaintiffs and the proposed class at NWDC. Defendants have long been on notice of the risk that COVID-19 poses to Plaintiffs and others with serious medical conditions and/or who are at advanced age, and that consideration for release is the only effective way to protect them. Indeed, as early as February 25, 2020, two medical experts for DHS alerted the agency about the specific risk posed to immigrant detainees by COVID-19. On March 19, 2020, they brought their concerns to the House and Senate Committees on Homeland Security and warned of the danger of rapid spread of COVID-19 in immigration detention facilities. ²⁸
They explained that in order to save both the lives of detainees and lives in the community at

²⁸ Dkt. 2-3.

large, "minimally, DHS should consider releasing all detainees in high risk medical groups[.]"29 John Sandweg, a former acting director of ICE, has written publicly about the need to release detainees because ICE detention centers "are extremely susceptible to outbreaks of infectious diseases" and "preventing the virus from being introduced into these facilities is impossible."³⁰

III. ICE Regularly Uses Its Authority to Release People Detained in Custody Who Are Vulnerable to Serious Medical Conditions.

- 83. ICE has a longstanding practice of humanitarian releases from custody. The agency has routinely exercised its authority to release particularly vulnerable detainees. In fact, ICE has exercised its discretion to release several particularly vulnerable people from NWDC since the start of the pandemic.³¹
- 84. ICE has a range of highly effective tools at its disposal to ensure that individuals report for court hearings and other appointments, including conditions of supervised released. Dkt. 6 ¶¶ 61–65. For example, ICE's supervision program, the Intensive Supervision Appearance Program ("ISAP"), relies on, when necessary, the use of electronic ankle monitors, biometric voice recognition software, home visits, reporting to supervise participants. *Id.* ¶ 63. A government-contracted evaluation of this program reported a 99% attendance rate at all immigration court hearings. *Id.* ¶ 62.
- 85. ICE's release authority is based on a range of statutory and regulatory provisions, and follows a long line of agency directives that explicitly instructed officers to exercise

²⁹ *Id*.

³⁰ Dkt. 2-14 (John Sandweg, I Used to Run ICE. We Need to Release the Nonviolent Detainees, The Atlantic (Mar. 22, 2020)).

³¹ See, e.g., Dawson v. Asher, No. C20-409 JLR-MAT, 2020 WL 1704324, at *3 & n.5 (W.D. Wash. Apr. 8, 2020) (noting that ICE voluntarily released four of nine Plaintiffs claiming severe risk from COVID-19).

favorable discretion in cases involving severe medical concerns and other humanitarian equities
militating against detention. For example, under 8 C.F.R. § 212.5(b)(1), ICE has routinely
exercised its discretion to release detainees "who have serious medical conditions in which
continued detention would not be appropriate." See also 8 U.S.C. §§ 1182(d)(5), 1225(b),
1226(a), 1231; 8 C.F.R. §§ 1001.1(q), 212.5, 235.3, 236.2(b).

- 86. While ICE officers may have been exercising discretion to release less frequently in recent years, the statutory and regulatory authority underlying the use of prosecutorial discretion in custodial determinations remains in effect.
- 87. Moreover, ICE has released noncitizens on medical grounds regardless of the statutory basis for a noncitizen's detention. Dkt. $6 \, \P \, 29$.
- 88. Here, the Due Process Clause of the Fifth Amendment to the U.S. Constitution requires ICE to release detainees where civil detention is unable to provide reasonable safety or has become punitive and where release is the only effective remedy. To be clear, Plaintiffs seek release on constitutional grounds by Court order, and not in the exercise of ICE's discretion. However, the fact that ICE has the authority to release immigrants from custody and has exercised this authority in the past demonstrates that the remedy Plaintiffs request is neither unprecedented nor unmanageable.
 - IV. This Court Has Authority to Order Plaintiffs' Release to Vindicate Their Fifth Amendment Rights, and Such Relief Is Necessary Here.
- 89. Courts have broad power to fashion equitable remedies to address constitutional violations in prisons. *Hutto*, 437 U.S. at 687 n.9; *Hernandez Roman*, 2020 WL 6040125, at *5. "When necessary to ensure compliance with a constitutional mandate, courts may enter orders placing limits on a prison's population." *Brown v. Plata*, 563 U.S. 493, 511 (2011); *see also Duran v. Elrod*, 713 F.2d 292, 297–98 (7th Cir. 1983) (concluding that court did not exceed its

authority in directing release of low-bond pretrial detainees as necessary to reach a population cap).

90. "Regardless of the statutory basis for Petitioner's detention, the Court has the authority to order his release if his continued detention violates the Constitution." *Pimentel-Estrada I*, 458 F. Supp. 3d at 1253 ((releasing detainee subject to mandatory detention) (citing *Swann v. Charlotte-Mecklenburg Bd. of Educ.*, 402 U.S. 1, 15–16 (1971); *Stone v. City & Cty. of San Francisco*, 968 F.2d 850, 861 (9th Cir. 1992); *Malam I*, 452 F. Supp. 3d at 647–49 (ordering release of detainee held under 8 U.S.C. § 1226(c)); *Vazquez Barrera*, 455 F. Supp. 3d at 333 (same)).

91. In light of the imminent threat posed by COVID-19, a chorus of courts across the country have ordered the release of particularly vulnerable detainees from ICE facilities. Recognizing the danger posed by asymptomatic carriers, ICE's lack of testing, and detention facilities that do not allow for social distancing, courts, as in *Pimentel-Estrada*, have ordered release even where there were no confirmed cases in the facility at issue. Since the pandemic has begun, courts across the country, including in the Ninth Circuit, have invoked their inherent

Mich. Apr. 9, 2020) (same for one); *Malam I*, 452 F. Supp. 3d at 647 (same).

³² Favi v. Kolitwenzew, No. 20-CV-2087, 2020 WL 2114566, at *1 (C.D. III. May 4, 2020) (same); Doe v. Barr, 2020 WL 1984266, at *6–7 (N.D. Cal. Apr. 27, 2020) (same) (filed at Dkt. 22-1); Kaur, 2020 WL 1939386, at *1 (same); Singh v. Barr, 2020 WL1929366, at *11 (N.D. Cal. Apr. 20, 2020) (same); Ixchop Perez, 445 F. Supp. 3d at 280 (same); Doe, 2020 WL 1820667, at *1 (same); Bent v. Barr, 445 F. Supp. 3d at 411 (same); Bahena Ortuño, No. 20-cv-02064-MMC, 2020 WL 1701724, at *5 (N.D. Cal. Apr. 8, 2020) (same for four detainees); Francisco Hernandez v. Wolf, No. 5:20-cv-00617-TJH-KS, Dkt. 17, at 1, 14 (C.D. Cal. Apr. 1, 2020) (Att. D) (ordering release of one medically vulnerable ICE detainee); Coreas v. Bounds, No. 8:20-v-00780, Dkt. 93, at 1-2 (D. Md. May 7, 2020) (Att. E) (same for two detainees); Manuel Hernandez v. Kolitwenzew, No 2:20-cv-02088, Dkt. 12, at 1 (C.D. III. Apr. 23, 2020 C.D. III.) (Att. F); Amaya-Cruz v. Adducci, No. 1:20 CV 789, 2020 WL 1903123, at *1 (N.D. Ohio Apr. 18, 2020) (same); Zaya v. Adducci, No. 20-10921, 2020 WL 1903172, at *1 (E.D. Mich. Apr. 18, 2020) (same); Vazquez Barrera, 455 F. Supp. 3d at 333-34 (same); Fofana, 454 F. Supp. 3d at 655 (same); Malam v. Adducci, No. 20-10829, 2020 WL 1809675, at *3 (E.D.

authority to order individual bail hearings for civil immigration detainees who filed habeas

petitions and then sought release based on the risk they face of contracting COVID-19 while

detained.³³

92. Alternatively, the Court could order ICE to conduct its own review of class

members and determine who to release, starting with the presumption of release that can only

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92. Alternatively, the Court could order ICE to conduct its own review of class members and determine who to release, starting with the presumption of release that can only be overcome by a showing of flight risk or danger. *See, e.g., Alcantara v. Archambeault*, No. 3:20-cv-00756-DMS-AHG, Dkt. 38, at 3 (S.D. Cal. Apr. 30, 2020) (filed at Dkt. 22-4) ("Release of subclass members shall begin immediately, with the expectation that most subclass members will be released under appropriate conditions determined by Defendants[.]"); *Hernandez Roman v. Wolf*, No. 5:20-cv-00768-TJH-PVC, 2020 WL 6107069, at *6 (C.D. Cal. Oct. 15, 2020) (ordering ICE to begin depopulating a facility beginning with individuals covered under *Fraihat* subclasses). The Court should also separately establish a process for considering bail for those whom ICE has initially denied release. *See Alcantara*, No. 3:20-cv-00756-DMS-AHG, Dkt. 38, at 3.

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³³ See, e.g., Hernandez Roman v. Wolf, No. 5:20-cv-00768-TJH-PVC, 2020 WL 3487632 (C.D. Cal. June 19, 2020), stay denied, No. 20-55662, Dkt. 9 (9th Cir. July 8, 2020), appeal dismissed, Dkt. 55-2 (9th Cir. Oct. 13, 2020) (order establishing bail process for class of habeas petitioners); Zepeda Rivas, 445 F. Supp. 3d at 40 (same); Malam v. Adducci, No. 5:20-cv10829-JEL-APP, Dkt. 168 (E.D. Mich. Aug. 4, 2020) (Att. G), amended, Dkt. 177 (E.D. Mich. Aug. 12, 2020) (Att. H) (same for subclass of medically vulnerable petitioners); Yanes, 2020 WL 3047515, at *1, 5–6 (ordering individual bail hearings for class of habeas petitioners); Gomes v. Acting Sec'y, U.S. Dep't of Homeland Sec., No. 20-cv-453-LM, 2020 WL 2113642, at *1 (D.N.H. May 4, 2020) (provisionally certifying a proposed class for the "purpose of holding expedited bail hearings for class members"); Savino, 453 F. Supp. 3d at 453 (granting several class members to bail and issuing decision to consider bail applications for other class members); Avendaño Hernandez v. Decker, 450 F. Supp. 3d 443, 446-49 (S.D.N.Y. Mar. 31, 2020) (admitting habeas petitioner to bail due to the threat posed by COVID-19); Coronel, 449 F. Supp. 3d at 290 (same); Calderon Jimenez v. Wolf, No. 18-cv-10225-MLW, Dkt. 507-1, at 6 (D. Mass. Mar. 26, 2020) (Att. I) (same).

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93. By continuing to detain Plaintiffs, Defendants are subjecting Plaintiffs to unreasonable harm, and to unconstitutional punishment. The course of action that can remedy these unlawful conditions is consideration for release from NWDC.

CLAIM FOR RELIEF

Violation of the Fifth Amendment (All Plaintiffs and the Putative Class) (Substantive Due Process; Unlawful Punishment; Objectively Unreasonable Risk to Health and Safety)

- 94. Plaintiffs repeat and reallege all the allegations above and incorporate them by reference here.
- 95. The Fifth Amendment to the United States Constitution guarantees that civil detainees, including immigration detainees, may not be subjected to punishment or to conditions that create an objectively unreasonable risk of serious harm. The federal government violates this substantive due process right when it fails to satisfy its affirmative duty to provide conditions of reasonable health and safety to the people it holds in custody. The federal government also violates substantive due process when it subjects civil detainees to conditions of confinement that amount to punishment.
- 96. By detaining Plaintiffs and the proposed class members at NWDC, Defendants subject them to a heightened risk of contracting COVID-19, for which there is no vaccine or cure, and which is likely to be extremely dangerous or fatal for Plaintiffs and proposed class members. Plaintiffs and the proposed class are vulnerable to serious medical complications from COVID-19 and are at risk of serious illness and death so long as they are held in detention. By subjecting Plaintiffs to this risk, Defendants maintain detention conditions that amount to punishment and fail to ensure reasonable safety and health, in violation of Plaintiffs' due process rights.

- 97. Likewise, Defendants' continued detention of Plaintiffs at NWDC is deliberately indifferent to Plaintiffs' health and safety because only releasing Plaintiffs from custody can adequately protect them from COVID-19. Defendants are aware of the serious risk posed by COVID-19 and are failing to take the only action that can respond to Plaintiffs' medical needs, which is to release Plaintiffs. Defendants' failure to release Plaintiffs and proposed class members has caused them constitutional harm by continuing to subject them to this unreasonable and potentially fatal risk.
- 98. For these reasons, Defendants' ongoing detention of Plaintiffs violates the Due Process Clause.

PRAYER FOR RELIEF

WHEREFORE Petitioners-Plaintiffs request that the Court grant the following relief:

- Certify the Petitioners and all similarly situated civil immigration detainees held a. at NWDC as a class, appoint named Petitioners as class representatives, and appoint the undersigned as class counsel;
- b. Exercise the Court's inherent power to undertake an expedited bail process that would consider the enlargement of custody of individual putative class members, including release from detention, pending a final decision on the merits of their habeas claims;
- c. Declare that conditions of confinement for Petitioners and putative class members held at NWDC are currently unconstitutional under the Due Process Clause of the Fifth Amendment;
- d. Issue a Writ of Habeas Corpus or final injunctive relief on behalf of the Petitioners and all putative class members and order their release or placement in community-

HABEAS CORPUS & CLASS ACTION

Case No. 2:20-cv-700

COMPL. FOR INJ. & DECL. RELIEF - 35

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	AMENDED PETITION FOR WRIT OF	NORTHWEST IMMIGRANT RIGHTS PROJECT

AMENDED PETITION FOR WRIT OF HABEAS CORPUS & CLASS ACTION COMPL. FOR INJ. & DECL. RELIEF - 36 Case No. 2:20-cv-700

NORTHWEST IMMIGRANT RIGHTS PROJECT 615 2nd Ave Ste. 400 Seattle, WA 98144 Tel: 206-957-8611

1 **CERTIFICATE OF SERVICE** 2 I hereby certify that on December 2, 2020, I electronically filed the foregoing and attached declaration with the Clerk of the Court using the CM/ECF system, which will send 3 4 notification of such filing to those attorneys of record registered on the CM/ECF system. 5 DATED this 2nd day of December, 2020. 6 s/ Aaron Korthuis Aaron Korthuis 7 Northwest Immigrant Rights Project 615 Second Avenue, Suite 400 8 Seattle, WA 98104 (206) 816-3872 9 (206) 587-4025 (fax) 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 AMENDED PETITION FOR WRIT OF NORTHWEST IMMIGRANT RIGHTS PROJECT

AMENDED PETITION FOR WRIT OF HABEAS CORPUS & CLASS ACTION COMPL. FOR INJ. & DECL. RELIEF - 37 Case No. 2:20-cv-700

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