



March 28, 2024

President Joseph R. Biden
The White House
1600 Pennsylvania Ave NW
Washington, DC 20500

Via e-mail

Re: Request to Meet with Health and Job Creation Experts About Closing Adelanto ICE Processing Center

Human Impact Partners (HIP) and the UCLA Labor Center jointly write to request a meeting to discuss our data analysis and research about the possible Adelanto Processing Center closure. We understand from recent reports that the Administration is currently considering the closure of the Adelanto ICE Processing Center (Adelanto). We understand that three unions at the Adelanto facility have expressed their desire to keep Adelanto open, citing concerns about jobs. We write to address these concerns.

Human Impact Partners promotes advancement in the field of public health by centering equity and building collective power with social justice movements. By partnering with communities and governmental bodies, HIP aims to transform systems and institutions across our environmental, economic, social, and political landscapes. HIP leads a network of over 3,500 professionals and organizations who are dedicated to using public health approaches to address the challenges faced by marginalized communities, including the economic insecurity faced by these communities. Our commitment to equity and social justice aligns with the Adelanto community's request to close the Adelanto Processing Center. Given HIP's emphasis on health equity, HIP is deeply concerned by the adverse health impacts experienced by individuals detained in ICE facilities.

As part of the UCLA Institute for Research on Labor and Employment (IRLE), the UCLA Labor Center works to advance education equality and employment for all. We bring together partnerships of faculty, students, labor, and policymakers to address the most critical issues facing working people today. Our research, education, and policy work aims to lift

industry standards, leading to the creation of jobs that are good for communities. We have recently published reports focusing on employment in the Inland Empire (regional area which includes Adelanto, CA), and other reports focusing on California Workforce Development Board (CWDB) programs responding to economic shifts.¹ As described below, Healthy Economies Adapting to Last (HEAL), is one such CWDB program poised to meet the needs of workers should the Adelanto Processing Center close.

Based on our research and analysis, the Adelanto Processing Center imposes significant health risks to people detained there and workers at the center. Additionally, there are local and state resources available to support the transition of the local economy and jobs should the administration decide to close Adelanto. Furthermore, records show that excessive force, negligent care, and uninhabitable living conditions have been found at the detention center.² The harmful conditions at the detention center, including a lack of proper medical care, have contributed to the deaths of at least eight people.³ Furthermore, the multiple reports that the

¹ Omer, M and Sohail, D, *Unlocking Potential: The Inland Empire Black Worker Center's Transformative IE Works Program*, UCLA Labor Center (2023), <https://www.labor.ucla.edu/publication/unlocking-potential-inland-empire-black-worker-center/> (discussing the results of interventions such as a worker center and apprenticeship programs in increasing employment among Black residents).; Gonzalez-Vasquez, A and Lopez, M, *The High Road to Economic Prosperity*, UCLA Labor Center (2021), <https://www.labor.ucla.edu/publication/highroadreport/> (reviewing the CWDB High Road Training Partnership model, finding that it creates tailored initiatives for long term development in disadvantaged communities).

² NPR, *Government's Own Experts Found 'Barbaric' and 'Negligent' Conditions in ICE Detention*, available at: <https://www.npr.org/2023/08/16/1190767610/ice-detention-immigration-government-inspectors-barbaric-negligent-conditions>. (This in depth reporting began after the author read a report about the Adelanto ICE Processing center: "In 2019, I became aware of the confidential inspection reports written by experts working for the Department of Homeland Security's Office for Civil Rights and Civil Liberties (CRCL). A Freedom of Information Act (FOIA) request I had filed for records related to the Adelanto ICE Processing Center in California revealed a scathing report about the facility, which described how one immigrant detainee was placed in solitary confinement for about two and a half years. The medical expert found that it was likely that problems with medical care at the facility 'contributed to medical injuries, including bone deformities and detainee deaths.'")

³ Deaths in Adelanto custody or where an individual became ill in ICE custody, and were inexplicably "released" before their deaths: Esquivel, Paloma, *"We don't feel OK here": Detainee deaths, suicide attempts and hunger strikes plague California immigration facility*, Los Angeles Times, Aug. 8, 2017 <https://www.latimes.com/local/lanow/la-me-ln-adelanto-detention-20170808-story> (mentioning Fernando Dominguez-Valvia's death in March 2012 following "egregious errors" by facility medical staff and could have been prevented); ICE, *"Detainee Death Review - Raul Ernesto Morales Ramos"*, <https://www.ice.gov/doclib/foia/reports/ddr-morales.pdf> (finding that Adelanto did not provide Mr. Morales Ramos with adequate medical care); ICE, *"Detainee Death Review of Jose Manuel Azurdia-Hernandez"*, available at: <https://www.documentcloud.org/documents/4598395-Ddr-Azurdia> (Finding that Adelanto did not meet the PBNDS standards of care. This is ICE's own review of Mr. Azurdia-Hernandez's death, which was produced through a FOIA request.); ICE, *"Detainee Death Review, Osmar Epifanio Gonzalez-Gadba"*, <https://www.ice.gov/doclib/foia/reports/ddrGonzalez.pdf> (finding many concerns with communication and medical care at Adelanto in Mr. Gonzalez Gadba's case); ICE, *"Detainee Death Review, Sergio Alonso Lopez"*, <https://www.ice.gov/doclib/foia/reports/ddrLopez.pdf> (finding Adelanto did not meet the PBNDS standards of care for Mr. Lopez); ICE, *"Detainee Death Review, Vicente Caceres"*, available at: <https://creeclaw.org/wp-content/uploads/2018/02/Caceres-Maradiaga-DDR-1.pdf> (finding several instances where

Department of Homeland Security’s Office of the Inspector General (OIG) has written on the derelict conditions in Adelanto indicate that some of the incidents, including deaths in custody, were preventable.⁴ Given the well-documented abuses and the economic support readily available to transition local jobs, we respectfully ask that the Administration consider our analysis below in its decision-making regarding the future of Adelanto.

I. California state funds, such as HEAL, can provide Adelanto with the resources necessary to support local workers if the detention center were to close.

In 2023, California created Healthy Economies Adapting to Last (HEAL), the first program of its type in the nation aimed at responding to job transitions and the maintenance of local economies when a detention center is slated to close.⁵ HEAL funds are administered through the California Workforce Development Board (CWDB), and may be used for such projects as the High Roads Training Partnership program, which offers job training in sustainable industries. The CWDB is experienced in helping workers find employment and receive training in the event of layoffs. The CWDB oversees workforce development throughout California. Tasked with creating a strategic workforce plan for the state, the CWDB carries out three distinctive policy goals for California: fostering demand-driven skills attainment; enabling upward mobility for all Californians; and aligning, coordinating, and integrating programs and services.⁶ The Board is composed of representatives from a diverse array of job sectors, and CWDB operates 45 Local Areas throughout the state, each with its own local Board.⁷ The CWDB partners with industry stakeholders to support jobs in construction, helps workers reenter the workforce after incarceration, and provides specific skill attainment such as apprenticeships, technical education, and workforce development for CalFresh recipients.⁸ If Adelanto were to close, workers and the local economy will be supported by this broad array of state funding and CWDB support.

Adelanto did not meet the standard of care for Mr. Caceres); Esquivel, Paloma, “*An immigration detainee fell into a coma and died at 27. His family wants to know why*,” Los Angeles Times, April 10, 2019, <https://www.latimes.com/local/lanow/la-me-ln-adelanto-detainee-death-20190410-story.html> (describing how Jose Ibarra Bucio fell into a coma in ICE custody, and was “released” before he died); Tchekmedyan, A. and Castillo, A., “*ICE released a sick detainee from Adelanto immigration facility. He died three days later*,” Los Angeles Times, available at: <https://www.latimes.com/california/story/2021-03-20/adelanto-detainee-death> (describing how Martin Vargas Arellano suffered a stroke in ICE custody and was “released” from custody while hospitalized before his death.).

⁴ DHS OIG, Management Alert – *Issues Requiring Action at the Adelanto ICE Processing Center in Adelanto*, California, September 28, 2018 OIG-18-86, available at: <https://www.oig.dhs.gov/sites/default/files/assets/Mga/2018/oig-18-86-sep18.pdf>; DHS OIG, Management Alert – *Issues Requiring Action at the Adelanto ICE Processing Center in Adelanto*, California, June 3, 2019, OIG-19-47, available at: <https://www.oig.dhs.gov/sites/default/files/assets/2019-06/OIG-19-47-Jun19.pdf>.

⁵ HEAL Act, available at: <https://www.ilrc.org/sites/default/files/2023-09/California%20State%20Budget.pdf>.

⁶ California Workforce Development Board, Initiatives, available at: https://cwdb.ca.gov/about_us/.

⁷ *Id.*

⁸ California Workforce Development Board, available at: <https://cwdb.ca.gov/>.

The state of California passed this funding to help localities transition workers in the event of a detention center closure, with the understanding that localities cannot control when the federal government or private prison companies decide to renew or cancel contracts that provide jobs to their residents. Given the record of abuse in detention centers, California provided this funding with the recognition that many localities aspire to transition away from carceral economies. HEAL may also be leveraged with other state and federal funds to ensure that communities are robustly resourced. For example, organizers in Adelanto are already exploring combining HEAL with California Jobs First funding, (formerly known as Community Economic Resilience Fund (CERF)), which supports the creation of regional economic development through innovative strategies to diversify local economies and establish sustainable industries by investing in creating high-quality jobs.⁹

If the detention center were to close, the city of Adelanto is ready to provide a rapid response and support the transition of detention center workers to new high quality jobs. The city of Adelanto is eligible for HEAL funds, and the CWDB already operates programs for workforce development in the region. One such program is PluginIE, which has begun discussions with community groups surrounding support it can provide to transition detention center workers to high-quality union jobs.¹⁰

II. Working in a detention center exposes healthcare workers to occupational hazards leading to poor mental health. Workforce support following a closure will allow healthcare workers to find safer jobs where their skills are in high-demand if the detention center were to close.

The conditions at detention centers negatively impact healthcare workers. A recent study examining workers in correctional facilities found that approximately 48% of healthcare workers and 32% of correctional officers reported mild to severe depressive symptoms, 37% reported mild to severe anxiety symptoms, 47% of healthcare workers and 57% of correctional officers reported symptoms of burnout, and 50% of healthcare workers and 45% of correctional officers reported post-traumatic stress symptoms.¹¹ While both correctional workers and healthcare workers reported high levels of mental health issues, healthcare workers had significantly higher depression and sleep disturbance scores than did correctional officers.¹² These alarming statistics demonstrate the toll that a carceral institution takes on the mental health of its workers. As explained above, any decision to close the detention center will trigger support for workers to

⁹ Thrive Inland SoCal, available at: <https://www.thriveinlandsocal.org/> (exemplifying the Inland Empire planning for California Jobs First funding).

¹⁰ PluginIE, available at: <https://pluginie.org/> (showing the program's work in the Inland Empire).

¹¹ M. Haroon Burhanullah, *Mental Health of Staff at Correctional Facilities in the United States During the COVID-19 Pandemic*, available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8821525/>.

¹² *Id.*

find high quality jobs. Such a decision may help many workers who were burdened by mental health stressors to finally get the needed assistance to transition to safer employment.

While we understand the concerns cited in the union letters regarding healthcare workers losing their jobs, healthcare workers consistently remain in high demand. There is a steady need for healthcare worker expertise to maintain the wellbeing of individuals and communities. According to the U.S. Bureau of Labor Statistics, healthcare support occupations are projected to grow the fastest of all occupational groups, at 15.4% from 2022 to 2032.¹³ Due to a growing elderly population, home health and personal care aides, nurse practitioners and other related healthcare occupations are projected to experience the largest increase in new jobs out of any industry over the next few years.¹⁴ These statistics portray that healthcare is one of the most in-demand industries in the United States. Additionally, within California, there is a shortage of mental healthcare workers, particularly after the COVID-19 pandemic.¹⁵

We agree that healthcare workers are deeply needed in this region, though their services would be best utilized in addressing the greater healthcare gaps in the region, outside of the carceral setting. Similar to the nationwide trends, the local Inland Empire (where Adelanto is located) regional workforce development board has also identified healthcare as a priority industry in high demand.¹⁶ The need for increased healthcare capacity is highlighted by the fact that Adelanto does not have a hospital or clinic. For urgent care or severe trauma, high desert residents have to drive 50 to 60 miles away, to San Bernardino or Fontana. CDWB has introduced programs to the Inland Empire to support more employment in the healthcare industry.¹⁷ If the detention center in Adelanto were to close, HEAL funds, other state programs, and high demand for services will ensure that any healthcare workers who lose their jobs due to the closure of Adelanto will be in a favorable position to regain high quality employment.

III. Despite high-skilled workers, systemic negligent mental healthcare and poor medical care, merit strong consideration in the decision-making regarding the future of Adelanto.

As detailed by various non-governmental organizations, lawsuits, the California Attorney General, and the inspections by the DHS Office of the Inspector General (OIG), Adelanto has a

¹³ U.S. Bureau of Labor Statistics, *Employment Projections: 2022-2032 Summary*, available at: <https://www.bls.gov/news.release/ecopro.nr0.htm>.

¹⁴ *Id.*

¹⁵ Cal Matters, *Unanswered Cries: Why California Faces A Shortage of Mental Health Workers*, available at: <https://calmatters.org/health/2022/09/california-shortage-mental-health-workers/#:~:text=A%20report%20published%20by%20the,the%20shortage%20is%20especially%20dire>.

¹⁶ Inland Empire 2021-2024 Regional Workforce Development Plan, available at: <https://www.sbcounty.gov/uploads/WDD/WDBoard/StrategicPlans/IERegionalPlanFINAL.pdf>.

¹⁷ High Road Training Partnership, *Inland Empire High Road to Healthcare*, available at: https://cwdb.ca.gov/wp-content/uploads/sites/43/2023/08/2022.HRTP_.SBCCD_.Inland-Empire-High-Road-to-Health-Care_ACCESSIBLE.pdf.

history of poor conditions of confinement. The OIG inspected the detention facility in Adelanto and identified a number of concerning issues. Through interviews with detained individuals and review of medical records, it was revealed that detained people are placed on waitlists for months and, sometimes, years to receive basic dental care, which results in unnecessary medical issues such as tooth loss.¹⁸ These dental care findings demonstrate the systemic issues at play, where too few staff cannot appropriately meet the needs of those detained. Only two dentists were on staff for all those detained, and as a result one of the dentists reported he did not have time for baseline care such as cleanings and fillings.¹⁹ The inspectors found that these statements corroborated other reports of individuals detained at the center who complained of long wait times for treatment of acute illness/injury or care for chronic conditions.²⁰ Between November 2017 to April 2018, those detained in Adelanto filed 80 medical grievances due to not receiving urgent care, not being seen for months for persistent health conditions, and not receiving their prescribed medication.²¹ Although the healthcare workers are highly skilled and competent in their fields, the detention environment hinders proper medical care and healthcare practice.

Adelanto's conditions create and exacerbate mental health issues for those detained. For individuals with preexisting mental health issues, studies show that Adelanto's practice of placing individuals in solitary confinement for prolonged periods of time worsens those diagnoses.²² DHS's own inspection report shows that Adelanto routinely ignores and refuses to treat the mental health issues of detained individuals.²³ In fact, the same report also outlines Adelanto's practice of segregating detained individuals based on their mental health status and placing individuals with mental health issues in solitary confinement because of their diagnosis.²⁴ Most concerning, 32% of those with serious mental illnesses were placed in solitary confinement.²⁵ On numerous visits to Adelanto, inspectors found that "mental health leadership and oversight is absent at Adelanto."²⁶ They described conditions in which the staff repeatedly failed to administer the proper medications to individuals with mental health issues.²⁷ Further evidence of medical neglect has been found in Adelanto's practice of putting "detainees in

¹⁸ DHS OIG, Management Alert – *Issues Requiring Action at the Adelanto ICE Processing Center in Adelanto, California*, September 28, 2018 OIG-18-86, at p. 7, available at:

<https://www.oig.dhs.gov/sites/default/files/assets/Mga/2018/oig-18-86-sep18.pdf>.

¹⁹ *Id.* at 8.

²⁰ *Id.*

²¹ *Id.*

²² Jessica Sandoval, *How Solitary Confinement Contributes to the Mental Health Crisis*, available at:

<https://www.nami.org/Blogs/NAMI-Blog/March-2023/How-Solitary-Confinement-Contributes-to-the-Mental-Health-Crisis#:~:text=Among%20many%20other%20mental%20health,of%20an%20acute%20mental%20illness.>

²³ Corrections Expert's Report on Adelanto Correctional Facility, available at:

<https://www.documentcloud.org/documents/6278922-HQ-Part2-Copy.html>.

²⁴ *Id.* at 7.

²⁵ *Id.*

²⁶ DHS CRCL, *Adelanto Onsite Inspection*, 2016, at p. 55, available at:

<https://www.documentcloud.org/documents/23873555-17-adelanto-detention-facility.>

²⁷ *Id.* at 51.

disciplinary segregation prior to a guilty finding.”²⁸ Not only is preemptory segregation unjust, it poses the risk of exacerbating mental health issues for detained individuals by robbing them of their ability to visit with family and retain a sliver of personal freedom while detained. Others who enter solitary confinement without preexisting conditions find that their mental health rapidly declines when they experience the trauma of solitary confinement.²⁹ Medical experts continuously reject the practice of placing individuals with mental health disabilities in solitary as contrary to standard medical care; however, this practice continues at Adelanto.³⁰ Healthcare workers cannot meet their duty of care under the conditions of Adelanto where they do not have control over the placement of those detained.

Lawsuits filed based on conditions of the Adelanto Processing Center highlight these poor conditions. The ACLU of Southern California filed litigation during the COVID-19 pandemic to protect the lives of the immigrants in the detention center.³¹ Judge Hatter of the U.S. District Court for the Central District of California ruled that the conditions at the facility violated the detained immigrants’ Fifth Amendment right to reasonable health and safety while in custody and ordered ICE to reduce the population of the detention facility.³² Even before the pandemic, immigrants detained in the detention center filed a lawsuit, which was converted into a nationwide class action during the pandemic, challenging GEO and ICE’s failure to provide timely medical and health care.³³ Others filed a class action suit against GEO for violations of state and federal labor laws when GEO forced detained individuals to clean Adelanto for \$1 a day.³⁴ Another recent class action lawsuit was filed against GEO when it failed to use safe cleaning products in Adelanto, resulting in over one thousand detained individuals being poisoned by chemicals.³⁵ We do not highlight these lawsuits to blame the healthcare industry or

²⁸ DHS OIG, Management Alert – *Issues Requiring Action at the Adelanto ICE Processing Center in Adelanto*, California, September 28, 2018 OIG-18-86, at p. 7, available at: <https://www.oig.dhs.gov/sites/default/files/assets/Mga/2018/oig-18-86-sep18.pdf>.

²⁹ Sandoval, *supra* note 21.

³⁰ Jules Lobel and Huda Akil, *Law and Neuroscience: The Case of Solitary Confinement* (asserting that solitary confinement can have long lasting effects on memory retention and results in depression, psychological pain, paranoia, and hallucinations), available at: https://www.amacad.org/sites/default/files/publication/downloads/05_Lobel%20%26%20Akil.pdf; Prison Policy Initiative, *New Data: Solitary Confinement Increases Risk of Premature Death After Release*, available at: https://www.prisonpolicy.org/blog/2020/10/13/solitary_mortality_risk/.

³¹ ACLU of Southern California, *Roman v. Wolf*, available at: <https://www.aclusocal.org/en/cases/roman-v-wolf>.

³² *Roman v. Wolf*, Case No. 5:20-cv-00768-TJH-PVC, Amended Adelanto Population Reduction Order, Dkt. No. 914 (C.D. Cal. Jan. 11, 2021), available at: https://www.aclusocal.org/sites/default/files/ord.dct_914_amended_adelanto_population_reduction_order.pdf.

³³ *Fraihat v. U.S. Immigr. & Customs Enf't*, 445 F. Supp. 3d 709 (C.D. Cal. 2020), order clarified, No. EDCV191546JGBSHKX, 2020 WL 6541994 (C.D. Cal. Oct. 7, 2020), and *rev'd and remanded*, 16 F.4th 613 (9th Cir. 2021).

³⁴ *Novoa v. GEO Grp., Inc.*, No. EDCV 17-2514 JGB (SHKX), 2022 WL 2189624 (C.D. Cal. Mar. 31, 2022), available at: <https://www.geoadelantoclassaction.com/admin/api/connectedapps.cms.extensions/asset?id=f5caf4d9-96f0-4f51-a0c9-be55042edfd3&languageId=1033&inline=true>.

³⁵ *Ronduen, et al v. The GEO Group, Inc*, Case No. 5:23-cv-00481, Class Action Complaint for Damages, (C.D. Cal. Mar. 20, 2023), available at:

the workers, but rather to highlight the systemic issues that arise when immigrants are detained in such facilities.

With over eight deaths of detained individuals, Adelanto is one of the deadliest detention facilities in the nation.³⁶ This is due in large part to substandard medical care.³⁷ Additionally, Performance Based National Detention Standards (PBNDS) have not been met by GEO. While GEO is contractually obligated to meet PBNDS standards, Adelanto continues to fall short of these standards throughout the years.³⁸ Collectively, these failures signal a larger systemic lack of suitable care at Adelanto.

The untimely death of one individual detained in Adelanto illustrates the facility's dearth of adequate medical and mental health support:

In April 2020, at the start of the COVID-19 pandemic, 53-year-old Martin Vargas Arellano was ordered released by a federal judge due to his numerous health conditions (diabetes, Hepatitis C, hypertension, cellulitis, gout, and schizophrenia, among others), which made him vulnerable to severe illness. ICE declined to release him and denied his attorney's multiple applications for humanitarian parole. Inevitably, Mr. Vargas contracted COVID-19 in December 2020 and suffered a stroke. Due to medical negligence at Adelanto, by the time he was released, it was already too late. It was only days after his release that he was in a vegetative state in a hospital. He died three days later.

Adelanto not only failed to notify Mr. Vargas's attorney of his death, but they deliberately led her to believe that he had been released to the community. She was forced to file a missing person's report and contact the Mexican Consulate to discover that Mr. Vargas had died 10 days earlier. The U.S. District Court for the Central District of California later found that Mr. Vargas was "released" on his deathbed in order to avoid having to report another in-custody death. Mr. Vargas's case also demonstrates how the Adelanto facility's systemic medical negligence put those in custody in danger.³⁹

<https://www.socialjusticelaw.org/wp-content/uploads/2023/03/Ronduen-et-al-v.-The-GEO-Group-Inc.-Complaint.pdf>.

³⁶ *Supra*, note 3, (compiling in custody deaths and deaths where individuals became ill at Adelanto and were "released" before their death).

³⁷ Adelanto Detention Facility, *Detainee Death Review of Jose Manuel Azurdia-Hernandez*, available at: <https://www.documentcloud.org/documents/4598395-Ddr-Azurdia>; see also "Systemic Indifference Dangerous & Substandard Medical Care in US Immigration," Human Rights Watch, May 2017, https://www.hrw.org/sites/default/files/report_pdf/usimmigration0517_web_0.pdf (featuring the story of Mr. Morales-Ramos who died in ICE custody during his Adelanto detention in 2015, and experts believe should have been treated for cancer earlier).

³⁸ See *supra* Note 3, detailing deaths in Adelanto from the years 2012-2021, where review of these deaths noted failure to follow PBDNS; see also, PBDNS § 4.3.I, available at: http://www.ice.gov/doclib/detention-standards/2011/medical_care.pdf.

³⁹ ICE released a sick detainee from Adelanto immigration facility. He died three days later, available at: <https://www.latimes.com/california/story/2021-03-20/adelanto-detainee-death>

IV. Conclusion

In closing, we would like to set up a meeting with your administration to discuss our analysis and ideas outlined in this letter. We respectfully request that you consider our research information and data about the risks that those detained face at the centers, the deplorable standard of living below ICE's own PBNDS, and the dangerous conditions within the facility. Like you, we care about the impact on jobs and are grateful to see California is providing the necessary transition support should the Administration decide to close down the detention center. HEAL exists to support all Adelanto workers, including healthcare workers, in regaining meaningful, well-paying employment in areas such as healthcare, technology, and other sustainable industries. We look forward to hearing from you by April 12th, 2024.

Sincerely,

Clara Long
Director of Policy and Organizing
Human Impact Partners (HIP)

Victor Narro
Project Director, UCLA Labor Center
Core Faculty, UCLA Labor Studies and UCLA School of Law

CC Secretary Alejandro Mayorkas
Attorney General Merrick B. Garland