Statement on Examining Best Practices for Incarceration and Detention During COVID-19 Senate Judiciary Committee Full Committee Hearing June 2, 2020

Thank you, Mr. Chairman. Before turning to today's hearing, I would like to say a few words about recent events.

The death of George Floyd is an outrage and never should have happened. The protests in Minnesota and across the country show the level of anger and frustration that people are feeling everywhere.

Violence and looting is never acceptable. It needs to stop. But the majority of these protests are peaceful and send a powerful message.

Simply put, there is a problem with racism in policing. This country needs to confront that pervasive problem.

Chairman Graham and I spoke last Friday, and I'm grateful for his agreement to hold a hearing. But we need a sustained focus on the problem of police brutality, racial injustice, and the need for more criminal justice reform.

While the United States has less than 5 percent of the world's population, we have almost 25 percent of its prisoners. The majority of that population is Black and Hispanic.

We should keep those statistics in mind today. Because when we talk about the problem of the spread of COVID-19 in this country's detention facilities, it is yet another problem that disproportionately affects people of color. We cannot continue to accept this as a nation.

Today's hearing focuses on the alarming spread of COVID-19 in correctional and detention facilities throughout the country.

As of June 1, the Bureau of Prisons reported that a total of 5,263 inmates have tested positive for COVID-19, along with 616 prison staff. Sixty-eight inmates have died.

Two of the worst federal prison outbreaks are in California. At the Lompoc Correctional Complex, a total of 1,076 inmates have tested positive for the virus as well as 42 staff. Three inmates have died there.

Similarly, at FCI Terminal Island, 692 inmates have tested positive in addition to seventeen staff. And nine inmates have died from COVID-19.

The pandemic is also spreading rapidly in state and local correctional facilities. For example, just today, the Los Angeles County Sherriff's Department reported that 1,984 inmates in local jails had tested positive for the virus, in addition to 294 Department employees.

With regard to immigration detention facilities, as of May 31, a total of 1,461 immigrants have already contracted COVID-19. The Otay Mesa Detention Center near San Diego has the largest outbreak in the U.S. immigration system, with 160 people testing positive for the virus.

On May 8, Carlos Escobar Mejia died after spending four months at that facility. He had a history of diabetes, heart problems and high blood pressure, making him extremely vulnerable to the risk of contracting COVID-19 and suffering severe consequences once infected.

Mr. Escobar Mejia's death came just days after a federal court found that conditions at the Otay Mesa Detention Center were unconstitutional and put medically vulnerable detainees "at substantial risk of serious illness or death."

To prevent tragedies like this, the Centers for Disease Control has issued guidelines for correctional and detention facilities. Among other things, the CDC recommends that all detention facilities:

- Ensure sufficient soap, hand sanitizer, cleaning supplies, facemasks, gloves and tissues;
- Reinforce healthy hygiene practices and provide soap, paper towels, and other basic supplies at no-cost to detainees;
- Limit unnecessary transfers of detained persons between facilities;
- Implement social distancing strategies such as staggered meal times and limited group activities; and
- Isolate individuals with symptoms of COVID-19 and quarantine anyone exposed to someone with the virus.

I am concerned, however, by reports that these guidelines and measures are not being fully implemented within the Bureau of Prisons or in ICE detention facilities.

For example, it has been reported that at one point, a federal detention center in New York had only nine nasal swab test kits available for 1,700 inmates.

It has also been reported that at some facilities, ICE is not providing detained immigrants with basic hygiene products, including access to soap and clean water.

If true, this needs to be fixed immediately. It is unconscionable to deny anyone these most basic means of protecting against this infection.

This hearing is an important first step in understanding how prison and immigration officials are responding to COVID-19 infection.

But it cannot be the only thing we do.

In April, the Department of Justice Inspector General visited several Bureau of Prisons facilities to determine whether they were adequately responding to the virus.

This Committee should ensure that proper oversight continues at the Bureau as well as at ICE detention facilities, and that these agencies have the resources they need to conduct this oversight continually and effectively.

There is also legislation that we should take up.

For example, Senator Booker and I recently introduced the *COVID-19 Correctional Facility Emergency Response Act*, which would provide resources to state correctional facilities as they address outbreaks.

Senators Durbin and Senator Perdue have introduced a bipartisan bill, the *Healthcare Workforce Resilience Act*, to allow more foreign medical professionals to enter the country and assist where needed during this pandemic.

I hope the Chairman will devote more of our resources and time to addressing the COVID-19 pandemic.

Thank you, and I look forward to hearing from our witnesses today.