Border Observatory

SITUATION REPORT:

PANDEMIC AT THE BORDER

by HOPE BORDER INSTITUTE
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The Hope Border Institute (HOPE) brings the perspective of Catholic social teaching to bear on the realities unique to our US-Mexico border region. Through a robust program of research and policy work, leadership development and action, we work to build justice and deepen solidarity across the borderlands.

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Border Observatory. Situation Report: Pandemic at the Border
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Introduction: Pandemic at the Border

Isolated from other major urban centers, the COVID-19 pandemic took its time arriving in the El Paso-Ciudad Juárez region. Once it did arrive in mid-March, it became apparent that our community was particularly vulnerable. A month of lockdown gave way to a premature reopening of the Texas economy and the willingness of state political leadership to sacrifice essential workers collided with the effects of economic inequality, a historically chronic lack of investment in healthcare, and tightened immigration enforcement at the border.

El Paso is currently experiencing a surge of COVID-19, including hospitalizations and ICU admissions, and the positivity rate is increasing steadily. Over 250 deaths have been reported and clusters have emerged at nursing homes, jail facilities, immigrant detention centers, businesses and healthcare centers.

El Pasoans are experiencing mass unemployment; in June, the unemployment rate in El Paso was 9.9%, a decline from an April high of 14.8%. While cash, rental and utility assistance programs were implemented by El Paso’s city and county governments, the aid was late in coming and limited. Tens of thousands of families in El Paso, with members of both documented and undocumented immigration status, were summarily excluded from the individual stimulus checks and unemployment benefits passed as part of the CARES Act in March.

The burden of COVID-19 has fallen hard on majority Latino communities like El Paso. The virus and the faltering government response have laid bare inequities baked into the systems we base our lives on, from the job market to healthcare to schools. Latinos are experiencing both a higher rate of infection and death from the virus as well as disproportionate economic hardship, with 29% of Latino households having a family member who has lost a job.

Border communities have high rates of illnesses like diabetes and hypertension that increase the risk of complications from COVID-19, and families often live together in multi-generational households. Essential workers don’t have the financial resources to allow them to stay home, and the Texas governor’s decision to reopen the economy sent many Latinos right back into the workforce even as the virus was raging and the state failed to meet its own health metrics for reopening.

The El Paso-Juárez relationship has been disrupted by the closure of the border, first announced on March 20, that halted nonessential travel while allowing essential workers and trade to continue crossing. The closure has been re-implemented every 30 days since then. Crossings have dropped precipitously, putting a heavy strain on the culture and economy of people in the borderlands.

While it remains relatively simple for Americans to enter Mexico, crossing into the US is more difficult for Mexican nationals. Moreover, as the virus has surged in Texas, Texas travelers entering Mexico could contribute to even more rapid spread of the disease, even as Mexico grapples with its own alarming outbreak.

Juárez counts nearly three times as many deaths from the virus as El Paso, but a lack of testing means that both cases and deaths are vastly undercounted.

Maquiladora workers have been especially vulnerable because of crowded conditions and a lack of protective equipment. A recent outbreak killed at least 13 workers at a Lear Corporation maquiladora after a group of people from Germany visited the facility in mid-March. Employees began to fall sick after the visit but the company did not disclose information about the virus or the outbreak.

12 Johns Hopkins University, Coronavirus Resource Center, Mexico Data, https://coronavirus.jhu.edu/map.html.
provide workers with protective equipment like masks.\textsuperscript{15} Several maquiladoras shut down and many workers have been sent home with partial pay, while some factories were classified as "essential" and remained open. Many maquiladoras have reopened under pressure from American companies.\textsuperscript{16}

In the midst of the upheaval, the US-Mexico-Canada Agreement (USMCA) went into effect in July. On paper, the agreement includes improved wages and enhanced labor protections. The arrest of labor advocate and attorney Susana Prieto Terrazas on June 8 in Matamoros, Tamaulipas was a concerning sign that these protections may be more aspirational than effective.\textsuperscript{17} Prieto Terrazas, who represents maquiladora workers in northern Mexico, was arrested for allegedly inciting riots, making threats and coercion. She was released on July 1 after outcry from community members on both sides of the border but still faces charges and is prohibited from traveling.\textsuperscript{18}

\textbf{What does migration look like during a global pandemic?}

Often forced to leave their countries due to exploitation and violence. Migrants arrive at the border seeking asylum only to be left waiting in Juárez where they often suffer from extortion with the added burden of the pandemic.

Under Title 42, migrants who arrived at the US border are almost immediately expelled. Approximately 2,000 unaccompanied children have been expelled to their home countries, some without notification to their families.

In the US, ICE continues to hold migrants in crowded spaces, exponentially spreading the virus and exporting the disease to other countries by deporting people with symptoms. Those forced to remain in Mexico struggle to find housing and the shelter networks are not always safe due to the pandemic.
On March 20, 2020, the Centers for Disease Control and Prevention (CDC) and DHS, acting under Title 42, Section 265 of the US Code (Public Health Service Act), took action to prohibit the entry of anyone arriving at the US border who would otherwise be held in a congregate setting after crossing. In other words, the order targeted asylum seekers and migrants who would be apprehended and held in custody by the Border Patrol.

Under the guise of public health, the order has effectively temporarily ended asylum at the border. Arriving migrants and asylum seekers are almost immediately turned back to Mexico or returned to their home countries, even if they request asylum or state that they are afraid or fleeing persecution. Life-or-death decisions that properly belong to asylum officers and the immigration courts are now routinely made by Border Patrol agents in the field. And in a remarkably cruel departure from previous practice and the law, unaccompanied minors are forcibly returned to their home countries without appeal.

As of June 2020, CBP has carried out over 72,000 expulsions, including of unaccompanied children, families and single adults. There were 11,542 apprehensions in the El Paso sector between March and June, a majority of which likely resulted in expulsion. Approximately 60% of those returned in the El Paso region have been Mexican.

The practice of expulsion of migrants to Mexico has led many people to attempt multiple crossings in remote areas of the desert, which poses a special danger as summer temperatures hit record highs. Border Patrol agents and migrants are thereby repeatedly exposed to each other, heightening the risk of COVID-19 transmission. There does not appear to be systematic screening of unauthorized crossers for COVID-19 before they are returned to Mexico, putting the community of Juárez in danger.

The government argues that if normal asylum and migration processing were to occur, migrants would be placed in “congregate settings” for a period of hours or days during immigration processing, putting their health at risk. While this is true, it evades the responsibility border agencies have for ensuring an adequate and humane standard of care within their custody, a chronic issue that precedes the COVID-19 crisis.

Historically, the government has been woefully slow to upgrade facilities to accommodate the changing landscape of migration and facilitate processing of asylum seekers, despite the enormous resources at the disposal of Customs and Border Protection. In 2020, CBP’s budget was $16.9 billion. Moreover, a portion of the $112 million included in a 2019 emergency supplemental bill to provide food and medical care to arriving migrants was

21 Note: The number of expulsions is not equal to the total number of people expelled because many individuals attempt repeat crossings. Exact data on the total number of people expelled is unavailable.
23 Omar Rios, personal communication (28 July 2020).
misappropriated and used instead for dirt bikes, office supplies and a canine program, among other things.\(^\text{26}\)

While exceptions to Title 42 expulsions are supposed to be made for “humanitarian and public health interests,”\(^\text{27}\) stories like that of Angeline, a 24 year-old pregnant Honduran woman who arrived at the border in July, indicate that even the most vulnerable are being turned away. Angeline was 8 months pregnant when she arrived at the border. When Border Patrol encountered her in the desert, she was picked up and taken to a port of entry in downtown El Paso at 5:00am. She was told to walk south into Juárez despite having no place to go, no resources and no connections in the city.\(^\text{28}\)

### Unaccompanied Minors

One of the most troubling aspects of the Title 42 order is the expulsion of unaccompanied minors.

The expulsions sidestep protections carefully enacted by Congress and send children back into uniquely dangerous circumstances in their home countries. Under a 2008 reauthorization of the Trafficking Victims Protection Act, children who arrive alone at the border are supposed to be screened and released within 72 hours to the Office of Refugee Resettlement (ORR), a branch of the Department of Health and Human Services. ORR operates a network of shelters throughout the country licensed to provide childcare services. Children stay in these shelters until sponsors or guardians in the US can be identified and screened. The process was designed by legislators to ensure that unaccompanied children would be temporarily housed and cared for in an appropriate non law-enforcement environment.

Under the Title 42 order, child migrants are being expelled to their home countries in violation of US law and their human rights. Reports reveal that unaccompanied children as young as 1-year-old have been expelled.\(^\text{29}\) Families of some detained children have not been notified of their whereabouts after arriving at the border or alerted that their child will be expelled.\(^\text{30}\) CBP Acting Commissioner Mark Morgan testified before the Senate Homeland Security Committee on June 25 that approximately 2,000 children had been expelled since the Title 42 order went into effect in late March.\(^\text{31}\) The day before his testimony, a federal judge halted the deportation of a 16 year-old Honduran boy under Title 42 and agreed with the central argument of the plaintiffs that the order was likely unlawful and exceeded the CDC’s authority. While the boy was permitted to remain in the US, the narrow ruling did not apply to other children in the process of expulsion.\(^\text{32}\)

CBP has declined to update the numbers of expelled children.\(^\text{33}\)

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children since Morgan’s testimony in the Senate. However, a comparison of the number of children placed in ORR shelters with the number of “encounters” at the border (when an unaccompanied minor is apprehended or expelled by CBP) reveals that expulsions of children have ramped up dramatically.

In the months of April, May and June (after the CDC order went into effect), 3,379 unaccompanied minors were “encountered” at the border. In those same months, however, only 162 children (less than 5%) were referred to an ORR shelter. It is highly likely that the rest were expelled to their home countries. As of mid-July, the total population of children in ORR shelters dropped to 820, a record low not seen in over a decade.

In El Paso, a new 500-capacity child migrant shelter run by Caliburn International Company was in the process of opening before the pandemic began, but Title 42 expulsions have made those plans uncertain.

Rule Changes
On top of Title 42 expulsions and existing programs like Remain in Mexico that drastically limit asylum seekers’ options, a slate of proposed rule changes were introduced in June that would further cement the undoing of asylum once the public health emergency of COVID-19 passes. The proposed changes would impact asylum seekers at every stage in their journey, making it almost impossible to access and ultimately win any form of protection.

Among other things, the proposed changes would:

- Significantly raise the threshold for proving persecution as a ground for asylum
- Permit judges to rule on cases without hearing the testimony of asylum seekers
- Expand asylum officers’ ability to dismiss cases
- Reject asylum applications based on gender-based violence

When the new asylum changes were introduced, advocates and the public were given only 30 days to comment, as opposed to the usual 60 days.

“The proposed regulations are not good-faith reforms meant to strengthen a failing system. Rather, they are tools in an ongoing effort to end immigration into the US and make the process of migration and asylum-seeking so full of hardship and heartache that people give up and turn back.”

- Hope Border Institute, Asylum Comment, 2020

Alternatives
While COVID-19 has necessitated drastic changes to all aspects of daily life, ending asylum and rapidly expelling the most vulnerable is not the answer, especially when we have ample resources to ensure the safe processing of migrants and asylum seekers.

The best way to prevent an outbreak in detention is not to detain people. Community-based alternatives to detention are more humane and effective in assisting people navigate legal proceedings. CBP has the operational capacity to quickly process asylum seekers in the field and safely release them to local non-profit and faith-based community organizations who could arrange for their reunification with family members.

Bishop Seitz Reflection on Title 42 Expulsions

During a recent visit to Ciudad Juarez, Bishop Mark J. Seitz of the Diocese of El Paso shared the following statement regarding Title 42. “Think about ways to make his words more prominent. They look like the rest of the report, but they need to be demarcated differently.

“Respect for the truth demands that I speak up to say that this fundamental right to asylum here at the border really is effectively over.

Yesterday, before Title 42, immigration judges adjudicated asylum claims. Today, Border Patrol agents and CBP officers on the line make that decision and forcibly return migrants to this, now the second most dangerous city in the world.

Yesterday, asylum seekers could be safely paroled into our El Paso community. Today, those who are able to get over the ‘demilitarized zone’ that our border has become, go from being trapped in Ciudad Juárez to being trapped in detention centers which have become petri dishes for COVID-19.

Yesterday, we valued the life of babies, toddlers and youth. Today, we run roughshod over the law and forcibly return unaccompanied children, putting them at risk of exploitation, trafficking and coronavirus. There will be a day when all of this pain will be no more, when the walls of hatred come tumbling down and when grace will transform the dark present into something better. But it is ours to undo. To transform racism and hatred into repentance and reconciliation. To transform the weight of the law into the sweetness of mercy. To stop the suffering.”
Court proceedings as part of the Remain in Mexico program (also known as the Migrant Protection Protocols or MPP) have ground to a halt, leaving thousands of people in Ciudad Juárez unsure of their futures.

Approximately 2,300 people have been newly enrolled in MPP in the El Paso/Juárez region since the beginning of 2020, but since Title 42 expulsions began, most new arrivals at the border are rapidly expelled to Mexico and prevented from accessing the asylum process. Those who arrived earlier and were placed in Remain in Mexico are in a state of limbo as the pandemic has significantly delayed court hearings and thrust them into further uncertainty.

Before the pandemic, those in the Remain in Mexico program would arrive at ports of entry on the Juárez side for scheduled court dates and be transported to courthouses in El Paso. After court hearings, they would be held in detention for the night and transported back to Ciudad Juárez.

MPP court hearings were postponed beginning on March 23 to avoid overcrowding courtrooms and spreading COVID-19. The postponements have been continually renewed, with the last delay announced for all court hearings through July 17.

Approximately 5,400 people are still waiting for their first hearing in Juárez and thousands more are stuck somewhere in the middle of the court process. Only 3.9% of people in the program in the El Paso sector have legal representation, leaving them with few sources of reliable information about the future of their case. Nearly 11,000 people (approximately 55.6% of people in the program in El Paso) did not show up to their last hearing, leaving their whereabouts and wellbeing in doubt.

When hearings were first postponed, asylum seekers were instructed to travel to ports of entry to pick up “tear sheets” (paper notices) with new court dates. The entire family was required to travel to ports of entry to pick them up, putting asylum seekers at risk of both crime and COVID-19. In-person document service was finally suspended on May 10. Asylum seekers must also go in-person to the ports to renew their Mexican residential paperwork or permisos.

A complicated patchwork of federal and local guidelines makes it unclear when Remain in Mexico hearings will be able to resume.

38 Transactional Records Access Clearinghouse, Details on MPP (Remain in Mexico) Deportations Proceedings (data through June 20), https://trac.syr.edu/phptools/immigration/mpp/
40 Interview with immigration attorney Taylor Levy, (24 July 2020).
Executive Actions Impacting Migrants During the COVID-19 Pandemic*

Since January of this year, the Trump administration has issued close to 50 immigration-related executive actions related to COVID-19. This is a sample of these sweeping measures.

1. Asylum Seeker Ban
2. Refugee Entry Suspension
3. UAC Placement Restrictions
4. MPP Hearings Postponed
5. Suspension of Legal Immigration
6. Proclamation Expanding and Extending Immigration Suspensions
7. Suspension of Visa Appointments
8. China Visa Suspension
9. Multiple Travel Bans
10. Restriction of Nonessential Travel on the US-Mexico Border
11. Closure of USCIS Offices
12. Suspension of Premium Processing for Worker Petitions
13. Student Visa Flexibility
14. Guestworker Visa Processing Allowance
15. Waiving of In-Person Requirement for I-9 Processing
16. Issuance of Labor Certifications Offered Electronically
17. Waiver of Interview Requirement for Some Temporary Guestworkers
18. Waiver of Biometric Submission for Those with Records on File
19. Expansion of Flexibility for those Responding to USCIS Requests
20. Retraction of H-2B Visa Expansion
21. Allowance of Visa Processing for Doctors
22. Additional Flexibility for H-2A Agricultural Guestworkers
23. Waiver of Medical Requirements for H-1B Doctors
25. Postponement of Immigration Hearings and Closure of Courts
26. Closure of Seattle Immigration Court
27. Temporary Varick, New York Immigration Court Closure
28. Allowance of Scanned Signatures
29. Introduction of Public Health Guidelines for Visitors as EOIR Facilities Reopen
30. Suspension of Removals of Sick Individuals
31. Cancellation of ICE In-Person Check-Ins
32. Restrictions to ICE Enforcement Activities
33. Limitation on Deportation Flights
34. Repatriation of Americans from Abroad
35. Closure of CBP Trusted Traveler Program
36. Limitation on US Passport Processing

*Migrant situation in Juárez

Approximately 1,100 migrants are currently living in shelters in Ciudad Juárez, a number of which are run by faith groups.41 Over 90% of shelter residents are in the Remain in Mexico program, with roughly 70% from Honduras, Guatemala or El Salvador and others coming from Cuba, Venezuela, Mexico, Nicaragua, Ecuador, Colombia and Brazil. Additionally, a “filter hotel” (hotel filtro) was set up when the pandemic began to accommodate recently arrived migrants and asylum seekers, quarantine them for two weeks and arrange for their relocation to other shelters. The filter hotel has hosted a number of migrants who have tested positive for COVID-19.42 The extent of the presence of COVID-19 in the migrant shelter network is simply unknown.

Many shelters have largely stopped accepting new residents and have limited entry to minimize the risk of contagion. Social distancing and frequent disinfecting have been implemented and face masks are generally required. Families in migrant shelters have reported depression, anxiety and anger as a consequence of lockdown.

Many migrants are still determined to make life work in Juárez, while others have taken advantage of a problematic International Organization for Migration (IOM) program that busses them back to their home country, sometimes without fully informing them of the consequences for their asylum case.

By conservative estimates, 2,000 migrants in Juárez live outside the shelter network and in rented homes. Prior to the pandemic, many worked in maquiladoras, restaurants, stores and in the informal sector, but those jobs were quickly lost when non-essential businesses were shuttered in Juárez beginning on March 20. Migrants have increasingly been victims of theft and petty crime as the economic situation in Juárez worsens and are increasingly vulnerable to homelessness.43

43Interview with immigration attorney Taylor Levy (24 July 2020).
Even as the government has used the health risks posed by crowded holding facilities as an excuse to turn back asylum seekers, it has continued to hold immigrants in ICE detention in conditions guaranteed to widely transmit the virus. This puts people in detention, border enforcement personnel, judges, attorneys and the broader community at risk.

The three ICE detention facilities in the area encompassing west Texas and southern New Mexico have all experienced outbreaks of COVID-19. At the time of this writing, 162 individuals have tested positive at the El Paso Service Processing Center (EPSPC) in east El Paso, 150 at the Otero County Detention Facility in Chaparral, New Mexico and 55 at the Torrance County Detention Center in Estancia, New Mexico. Elsewhere in Texas, ICE facilities have experienced large outbreaks with hundreds of reported cases, and a July analysis of COVID-19 data found that people in ICE detention in Texas are 15 times more likely to contract the virus than the general state population.

Nationwide, 941 people in immigrant detention are currently COVID-positive, while over 3,917 total cases have been reported as of July 29. There are 45 confirmed cases among ICE employees, including one employee at EPSPC. Three men have died in custody, one at Stewart Detention Facility in Georgia, one at Glades County Detention Center in South Florida, and one at Otay Mesa Detention Center near San Diego.

**Failure to Protect Detainees**

The vast majority of people in ICE detention are detained for civil immigration violations and pose no risk to the community. There is no legitimate reason to detain them, especially during an unprecedented public health emergency. Continuing to hold people in crowded facilities that endanger their health violates their human rights and puts the broader community at risk.

ICE has failed to be transparent about plans to protect detainees and staff, and accounts from people in detention indicate that basic public health guidelines are not being implemented. ICE has not only failed to proactively address the risk of COVID-19 in detention, but has also continued practices that actively spread the virus. For example, ICE continues to transfer detainees between facilities, greatly increasing the risk of contagion. Reports from detained migrants also indicate that COVID-positive detainees have been removed and then returned to barracks and co-mingled with the general population while still sick.

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**ICE Detention**

48 Ibid.
In El Paso, six women being held in the El Paso Service Processing Center with a range of medical complications sued ICE in April for its failure to protect them from COVID-19. The women claimed that ICE had not implemented CDC guidelines, that social distancing was not possible, that masks and hand sanitizer were not provided and that detainees had limited access to soap and running water. Some of the women were held in barracks with people who were clearly ill, and sick detainees were treated with inappropriate remedies, like being told to drink water.49

Lack of Transparency
ICE has failed to be transparent with people in detention, local officials and the advocate community about the spread of COVID-19 within its facilities and the extent of its adherence to CDC guidelines. Local ICE leadership initially declined to release any information about the total number of cases in local facilities. The first cases of COVID-19 in detention were reported by local attorneys through interviews with their detained clients and then made public in local media.

While ICE has national plans to address COVID-19 in detention, the El Paso Field Office has been unwilling to detail how these plans are being implemented in individual facilities.

Deportations
ICE has facilitated the transmission of COVID-19 in several countries by continuing to deport immigrants. More than 40,000 people have been deported since March and 11 countries have confirmed receiving deportees who were positive for the virus. Some deportees were sick before being deported but were denied medical care. Others were likely exposed during the flight or had contracted the virus in detention but were asymptomatic.50

While ICE says that it performs temperature checks on everyone boarding a deportation flight, accounts of people who have been deported suggest that some clear signs of illness were ignored and some boarded flights while sick. Migrants from various detention centers throughout the country are taken to staging facilities before deportation, where they are commingled on outbound flights.51

Central America has been the region hardest-hit by coronavirus deportations. Almost 60% of deportation flights have been sent to Honduras, Guatemala or El Salvador despite internal border restrictions.52 In late April, Guatemalan public health officials announced that at least 20% of cases in Guatemala could be traced to deportations and attempted to halt the flights.53 The Trump administration retaliated against Guatemala with threats of visa sanctions, and the flights soon resumed. COVID-positive deportees continued to arrive in Guatemala,54 which has confirmed approximately 42,000 cases and more than 1,600 deaths. Other countries like Haiti have pleaded with the Trump administration to halt flights, to no avail.55

49 Robert Moore, El Paso Matters, 6 women, including 1 who tested positive for COVID-19, sue ICE to be released from El Paso detention, (24 April 2020), https://elpasomatters.org/2020/04/24/6-women-including-1-who-tested-positive-for-covid-19-sue-ice-to-be-released-from-el-paso-detention/
51 Ibid.
52 Ibid.
Katty

Katty (a pseudonym) is an indigenous woman from Guatemala who fled after being kidnapped by gang members trying to extort her family. Her first asylum claim was rejected because an asylum official misunderstood her description of why she was seeking refuge, partly because she speaks an indigenous language. After being deported, she continued to experience threats in Guatemala and fled again to the border. A judge found that her claim of fear was valid and that her first claim had been wrongfully rejected. Since mid-March, Katty has been detained in El Paso, where she has been held together with other women in barracks despite several having symptoms of COVID-19.

Katty developed symptoms of COVID-19 but was not tested until late June; the results were positive. She was isolated in a cell for a period of time but then returned to the general population despite not having a follow-up test to ensure that she was COVID-free.

Katty’s attorney, Eduardo Beckett, has repeatedly requested that his client be released on humanitarian parole. He describes that health screenings of people entering the detention facility are inconsistent and many guards do not wear masks, even in the presence of people like Katty who have tested positive for the virus. In-person court hearings continued in March and masks were not mandated. Decisions on whether to hold hearings virtually were up to the discretion of individual judges.  

56 Interview with immigration attorney Eduardo Beckett, (21 July 2020).
Policy Recommendations

US Government and Congress
- End Title 42 expulsions and reverse proposed rule changes that restrict asylum.
- End Remain in Mexico and permit those in the program to be safely paroled into the US and reunited with family members.
- Provide migrants and refugees with equitable access to prevention, testing, treatment and emergency support, including economic assistance.
- Make immediate and large-scale investments in public health systems and food and income support for vulnerable families in Central America, Mexico and other sending countries.
- Ensure that undocumented immigrants are included in local economic relief plans and that all public health guidelines, testing and services are accessible to people regardless of immigration status or documentation.

Customs and Border Protection
- Resume asylum and immigration processing and work with community partners to coordinate the safe release of migrants to family members and sponsors.
- Implement CDC guidelines to prevent infectious disease transmission within all border facilities and upgrade them to allow for prompt, safe and dignified processing and release of people in custody.

ICE
- Coordinate the orderly release of detained people with public health authorities, local governments and the advocate community. ICE and local governments should ensure that the process is safe, efficient and respectful of human rights and that all partners in the process have access to necessary protective equipment, testing and supplies.
- Take immediate steps to slow the spread of the virus in immigrant detention centers.
- Halt intra- and inter-facility transfers of detained persons.
- Provide all persons within facilities, including detained people, staff, subcontractors, etc. with appropriate protective equipment, masks and hygiene supplies, as well as the ability to social distance.
- Ensure that testing and medical care are easily available to people in detention and appropriate to their situation. Regular testing and temperature checks should be conducted on anyone entering, leaving or detained in the facility.
- Share the agency’s pandemic plan with local governments and advocates and allow for independent oversight, including oversight of subcontractors. Provide a way for detained people to report concerns and non-implementation of standards without fear of reprisal.

Mexico
- End collaboration with the US government in programs designed to halt migration and curtail the right to asylum, such as Title 42 expulsions and the Remain in Mexico program.
- End the harassment of labor activists and implement reforms in the USMCA that are designed to improve worker protections and democratic organizing.
- Ensure that maquiladoras are opened in response to public health realities rather than political pressure and assist companies in providing appropriate protective equipment and social distancing measures for workers.
- Ensure that public health guidelines, testing and health services are available to migrant populations in a culturally competent and rights-respecting fashion.

Faith Leaders
- Demand that the US respect the right to asylum and migration.
- Take concrete steps to be in solidarity with asylum seekers and migrants. Educate congregations on the importance of a rights-respecting and compassionate immigration system. Take up a collection for organizations (like social service providers and legal aid societies) who work with asylum seekers and migrants. Organize in your community to support people living at the margins and advocate for their full inclusion in economic relief packages, testing and healthcare services.

Local Political Leaders
- Put pressure on local ICE field office directors to release detainees, improve health standards within detention and release COVID-19 preparedness plans for the region.
- Include COVID-19 case numbers within detention facilities as part of the overall area case count.

Philanthropy and Civil Society
- Funders should provide flexible operational support for nonprofits. Initiatives should prioritize long-term capacity building rather than short-term or fixed projects, especially given the rapidly changing immigration landscape.
HOPE’S RESPONSE

• Root Causes Work
HOPE has continued to work with grassroots communities in Mexico and Central America and Faith in Action International to develop concrete policy recommendations on how to address the root causes of migration.

• Coalition for the Common Good
HOPE is working with a coalition of local service providers, philanthropic organizations, immigrant advocates and faith groups to address the need for equitable economic relief during the COVID-19 pandemic. We secured $2 million in local government funding to support those most in need in El Paso, including families that did not receive individual stimulus checks.

• Border Refugee Assistance Fund
In partnership with the Diocese of El Paso and Bishop Mark Seitz, HOPE continues to provide humanitarian support to migrants in Juárez.
The Border Refugee Assistance Fund

Genesis of the Border Refugee Assistance Fund
After refurbishing the diocesan pastoral campus to act as a fully operational migrant shelter for the bulk of 2019, Bishop Mark Seitz was compelled to continue supporting migrants forced to remain in Mexico as part of the Migrant Protection Protocols. His vision to establish a fund to support systemic challenges faced by those awaiting their asylum proceedings in Ciudad Juárez remains through the work of the Border Refugee Assistance Fund. The fund is supported by the Hope Border Institute and contributions from supporters from across the country.

Food & Medical Assistance
While there are almost 20 shelters for migrants in Ciudad Juárez, the vast majority elect to live outside of shelters if they can figure out the means to do so. The Border Refugee Assistance Fund has supported the delivery of food and medicine to over 100 people living outside of shelters with the help of Juárez-based NGO Derechos Humanos Integrales en Acción (DHIA). This represents a substantial help for migrants who are struggling with food insecurity during the COVID-19 crisis.

Infrastructure
Apart from the long-standing Casa del Migrante, many migrant shelters popped up quickly to meet the needs of a growing migrant population in Ciudad Juárez. Once it became evident that court dates would be months away, temporary shelters needed to become more permanent. In April, the fund supported a flood prevention project for the Espíritu Santo shelter. Other shelters, like El Buen Pastor, have received support for security camera systems. Mattresses and beds were donated to the Pasos de Fe shelter and Pasos de Fe & Old Solus Christus received heaters and gas tanks.

PPE
The COVID-19 pandemic places migrants in an even more vulnerable position as many are dealing with both the risk of contagion and job loss. The Border Refugee Assistance Fund has distributed face masks and face shields to those in need on both sides of the border, including migrant shelters, farmworker centers, local NGO’s and community groups.
**Spotlight: Las Zadas**

The Zadas project, co-founded by local attorney Taylor Levy in collaboration with Derechos Humanos Integrales en Acción and supported by the Border Refugee Assistance Fund, among other partners, was created to ensure that pregnant migrants in Juárez can access the support they need to have a dignified and healthy pregnancy.

Las Zadas connects pregnant migrants with local doctors (including specialists for high-risk pregnancies), legal assistance, humanitarian aid, and health education via nurse-midwife Anna White. The women stay connected to each other and get updates about the status of asylum on the border via a Whatsapp group. Levy educates the women in the program about the risks of COVID-19 and provides legal support when she can. She describes the women’s struggle as incredibly difficult and complex.

“They’re isolated. They’re marginalized as migrants and they’re all worried about their legal cases. Pregnancy is hard enough, and with COVID and the volatile migration situation, it’s the perfect storm of awfulness. At least we can still approach people with love and compassion and try and help make the process a little less stressful and a little more dignified. We’re doing our best and folks know there are people who care about them and who are trying to get them access to services. We’re trying to bring a little more joy into pregnancy and childbirth.”

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**Reflection from Blanca Navarrete Garcia, Director of Derechos Humanos Integrales en Acción**

“Las Zadas” surge como una idea de la abogada y activista Taylor Levy, quien estaba escuchando testimonios de mujeres embarazadas bajo MPP, que no recibían atención médica del lado mexicano. Al mismo tiempo, organizaciones como Seguimos Adelante y DHIA, también estaban entrando en contacto con algunas mujeres.

Se unieron esfuerzos y un día a la semana, Taylor Levy y su amiga Anna White, que es partera, acuden a las oficinas de DHIA para conversar con las mujeres acerca de sus casos de asilo en los Estados Unidos, hacen revisiones médicas e identifican si hay casos de riesgo por preclampsia, miomas u otra complicación.

Por su parte, a través del Fondo Fronterizo de Asistencia a Refugiadxs, DHIA cubre los gastos de atención médica, estudios, medicamentos y vitaminas. Al nacer los bebés, se han donado pañales, toallas húmedas, artículos de aseo e higiene íntima.

DHIA también hace incidencia con el gobierno estatal para garantizar que las mujeres sean atendidas al momento del parto o la cesárea y acompaña a las familias para hacer el registro de nacimiento de sus hijxs.

Karina Breceda, coordinadora del Albergue San Juan Apóstol, también ha donado kits post parto y artículos para el cuidado de los bebés, gracias a los donativos que ella recolecta con la comunidad fronteriza.

La suma de esfuerzos permite que las mujeres estén protegidas y acompañadas durante su y después de su embarazo. #JuntasSomosMásFuertes.