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# The Trump Administration's Deportation Policy Is Spreading the Coronavirus



By Jonathan Blitzer

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Story



*By the end of April, some twenty per cent of the nearly seven hundred confirmed cases of COVID-19 in Guatemala were those who'd been deported from the U.S.* Photograph by Edwin Bercian / EPA-EFE / Shutterstock

On March 28th, two days after he was deported to Guatemala from a detention center in Arizona, a twenty-nine-year-old man, from a village in the country's western highlands, became known as Patient 36. Up to that point, there had been thirty-five registered cases of COVID-19 in Guatemala, and Patient 36 was the first returning deportee to test positive for the illness. He had been put on a plane—part of a deportation fleet known as ICE Air—with forty other passengers, most of whom, like him, had spent several weeks in detention. After landing, they were briefly held in Guatemala City and evaluated, but, because the authorities claimed that he showed no symptoms, he was allowed to travel to his family's home, in Momostenango, Totonicapán, where six other relatives, including a nine-month-old baby, lived. By the time he got there, he had a fever and a cough. A local health official told the newspaper *El Periódico* that the man's wife had known that he was ill before he left the capital.

She alerted a medical clinic in town, which tested him. Almost a week later, the Guatemalan government announced that another deportee—a thirty-one-year-old man from Mazatenango, about eighty kilometres south of Momostenango—had also tested positive, making him Patient 49.

Guatemala, a nation of eighteen million people, has only two large urban hospitals and a regional patchwork of smaller medical facilities; its capacity to contain a virulent pandemic is limited. The government of President Alejandro Giammattei, who is a trained surgeon, suspended international flights into the country, and border transit largely ceased. But an obvious question was whether the government could persuade the Trump Administration to help it limit the spread of the coronavirus—the United States was fast becoming the global epicenter of the pandemic. As of late last month, there were some five thousand Guatemalans in U.S. immigration detention, and every week the Department of Homeland Security was sending between one and five flights to Guatemala City, each carrying up to a hundred and thirty-five deportees.

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*The New Yorker's* coronavirus news coverage and analysis are free for all readers.

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Other countries in the region have been forced to deal with deportees infected with the virus, including Colombia, Honduras, El Salvador, Mexico, and Haiti, many of which have fragile health-care systems, scant hospital space, and a dearth of ventilators. The United States deported eighteen thousand people in March, and nearly three thousand in the first eleven days of April. By then, the Trump Administration had also effectively sealed the U.S. border to immigrants, ending asylum and turning away tens of thousands of people, including unaccompanied children. The coronavirus was a convenient pretext for curbing immigration in all forms; President Trump, at the behest of his senior adviser Stephen Miller, also announced cuts to pending green-card applications. According to the *Times*, Miller, who within six months of Trump's taking office had tried to convince the President to limit immigration in the name of public health, frequently described migrants as “vectors of disease.” Late last week, Miller's wife, an aide to Vice-President Mike Pence, tested positive for COVID-19, raising questions about

the U.S. government's ability to shield its own top officials from the virus at a time when the American death toll has reached eighty thousand.

The irony has not been lost on Central Americans, because it is the United States that currently poses a public-health threat to them. In mid-April, there were more than six hundred thousand known cases in the United States, compared with a total of less than eight hundred in El Salvador, Honduras, and Guatemala combined. Nevertheless, when the Guatemalan government temporarily suspended the arrival of some deportation flights, to buy time to test other deportees, Trump signed an order threatening to impose a raft of sanctions on countries that "denied" or "delayed" the reception of deportees. "The U.S. was being heavy-headed, and the Guatemalans didn't want to pay too high a price," a person advising the Guatemalan government told me. "They don't want the wrath of the U.S. right now."

The flights resumed, and, a few days later, Guatemala's health minister, Hugo Monroy, announced that between fifty and seventy-five per cent of deportees who had just arrived in the country were found to be infected. In mid-April, the authorities said that seventy-four cases had originated from just two deportation flights. U.S. officials considered this an exaggeration, and sent scientists from the Centers for Disease Control and Prevention to conduct tests. Those results confirmed the Guatemalan government's analysis: when twelve deportees were selected at random, they all tested positive. By the end of the month, roughly twenty per cent of the nearly seven hundred confirmed cases of COVID-19 in Guatemala were people who had been deported from the U.S. "We must not stigmatize," Monroy said. "But I have to speak clearly. The arrival of deportees who have tested positive has really increased the number of cases." The United States, he added, had become "the Wuhan of the Americas."

There are two broad ways of understanding the public-health dangers posed by current U.S. immigration policy. One is as a reflection of the Administration's callous and politically shortsighted disregard for the wider region. "Decisions are always screened through the lens of whether or not they help POTUS's reelection," an American official told me. "The White House doesn't have time for Guatemala's bullshit. Deportations

must continue.” The second way concerns the management of American detention centers, in which some thirty thousand people are being held in substandard conditions that heighten the risk of spreading disease. The agency in charge of detention, ICE, spent the first two months of the pandemic insisting that detainees were safe, but it was slow to conduct testing. Many detainees across the country, who say that they “don’t want to die in here,” have launched hunger strikes to protest conditions in which social distancing is virtually impossible. An asylum-seeking Cuban doctor, who is being held in a privately run facility in Louisiana, told the *Mississippi Free Press*, “There’s no way to ‘distance’ here. We sleep in bunk beds on top of each other, in columns with less than a few feet between us, head to toe. We use the same cafeteria as those in quarantine with no cleaning in between. . . . My medical opinion is that many people will die.”

Most detention centers were punishing places before the pandemic. In 2017, ICE inspectors found that the medical unit at a facility in Irwin County, Georgia, which had a long history of sanitation and health-care infractions, fell short of federal standards. Little seems to have been done there to institute precautions or protocol since the coronavirus outbreak. According to a report by Type Investigations, a woman who arrived at the facility in late March told the staff that she felt sick—she had a cough—but they ignored her. She later joined more than seventy other women in a dorm area in which the beds are less than three feet apart. It’s unclear whether the woman was infected, but someone in the facility was; in April, a guard and a detainee tested positive for COVID-19.

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Because testing in the facilities has been sporadic and inconsistent, ICE officials have not had a clear sense of how widely the disease has spread among those in custody. On April 11th, BuzzFeed News reported, the agency began bussing and flying dozens of immigrants held in the Northeast to a detention center across the country, apparently to try to limit density in centers with known cases; among those transferred, however, twenty-one were already infected. In mid-April, ICE reported about a hundred COVID-19

cases in custody. A month later, having tested sixteen hundred and eighty-six detainees, it registered eight hundred and sixty-nine positive cases. About half of all the people who've been tested in custody are infected, meaning that there could already be more than ten thousand detainees exposed to the virus.

Under pressure from federal courts, ICE has released on bond a hundred and ninety-two detainees who are at a higher risk of succumbing to COVID-19, owing to preexisting medical conditions. But it has resisted calls to release other groups who should not have been detained in the first place. As of late April, "there were more than five thousand asylum seekers still in ICE detention, even after D.H.S. ruled that they had credible persecution claims," Kevin Landy, who was in charge of ICE's Office of Detention Policy and Planning under President Obama, told me. "There are another forty-five hundred detainees who were arrested by ICE even though they had no criminal convictions. ICE should release those detainees, for starters." The Trump Administration has made a point of expanding the number of people that ICE keeps in custody, in large part to send a message to anyone who might seek refuge in the U.S. in the future, and it has shown no willingness to relent in the name of public health. Earlier this spring, when the current head of ICE, Matthew Albence, indicated that the agency might limit enforcement operations, unnamed White House officials attacked him in the press and vowed to continue roundups.

The high rates of infection among deportees returning to Guatemala made international headlines, but that was primarily because the government briefly tried to stand up to Washington. Coming from Giammattei, a conservative who was sworn into the Presidency in January, the move was unexpected. The neighboring countries of El Salvador and Honduras also have citizens held in U.S. detention centers. Nevertheless, they have allowed deportation flights to continue, claiming that they have relatively low levels of infections, particularly among deportees. In the case of El Salvador, that is plausible, because far fewer Salvadorans are now being apprehended in the U.S. compared with Guatemalans and Hondurans. Last week, though, ICE announced the first person in custody to die from COVID-19: a fifty-seven-year-old man, held at a facility in California, named Carlos Ernesto Escobar Mejia—a Salvadoran.

Since taking office last year, the President of El Salvador, Nayib Bukele, a thirty-eight-year-old newcomer to politics who has shown an increasingly authoritarian streak, has been relentless in courting Trump's support. The Honduran President, Juan Orlando Hernández, already enjoyed close ties to the White House, which paid off in December, 2017, when it supported his reelection, despite evidence of vote tampering and fraud. Maintaining that relationship has now become critical to his political survival. Hernández has been named in a Justice Department indictment of a high-ranking former Honduran police chief accused of overseeing a substantial drug-smuggling venture. According to the indictment, which was released on April 30th, the police chief helped ship cocaine to the U.S. "on behalf of convicted former Honduran congressman Tony Hernández and his brother the President." (Both the police chief and Juan Orlando Hernández denied the allegations; Tony Hernández was arrested and convicted for drug trafficking in a federal court in New York last October, and is awaiting sentencing.) A U.S. official involved in national security policy told me that President Hernández "is giving the U.S. whatever it wants," adding, "there's no way the indictment is not playing in this."

Late last month, Bukele and Hernández both received a political boost from the Trump Administration: large shipments of ventilators, accompanied by enthusiastic Presidential tweets. Each was also granted a one-on-one telephone call with Trump; Giammattei was not. In the meantime, the Guatemalan government built four provisional medical centers in anticipation of a spike in coronavirus patients. For two weeks, beginning in mid-April, Guatemala again attempted to suspend deportation flights, while it negotiated with representatives from the White House and D.H.S. By early May, the flights had resumed, with some modest changes. At the Guatemalan government's request, each flight will carry around seventy-five deportees, and ICE has given its assurance that each person will be given a medical screening prior to boarding. When I asked an ICE official whether the agency could competently test immigrants prior to their deportation, the official replied, "I would be skeptical."

This is not the first time that a U.S. deportation policy has caused upheaval in Central

America. Throughout the nineteen-nineties, under the Clinton Administration, the United States deported gang members from Los Angeles to El Salvador, just as that country was emerging from twelve years of civil war. There they enlisted former soldiers and guerrillas to form clones of the L.A. gangs, and violent crime rose. Many Salvadorans started to regard anyone who had been returned from the U.S. as dangerous, even though most had no record of violent crime and were merely casualties of harsh new immigration laws passed by a conservative Congress. Echoes of that history are unmistakable in Guatemala now. The government has begun holding all returnees, even those without apparent symptoms, in quarantine for extended evaluation. Groups of angry residents in the western highlands, fearful of the coronavirus, have threatened to set fire to the shelters and attack newly returned immigrants and their families. One deportee, a nineteen-year-old man from a village near Lake Atitlán, was confronted by a mob after several residents saw footage of him on a television broadcast as he was being transported into the town by ambulance. “They threatened to set my family on fire,” he told Reuters. “I was really afraid, and I could only think about leaving the village so that I wouldn’t cause any more trouble.”

In the nineties, the U.S. wasn’t just deporting more people to El Salvador than it ever had before; it was so eager to deport gangsters from California, in particular, that it often didn’t bother to send their criminal records to the Salvadoran authorities. Unsurprisingly, the gangs spread throughout the country and then across the region, leading tens of thousands of residents in Guatemala and Honduras to flee to the United States. (One of the most notorious gangs, MS-13, has become President Trump’s main talking point when he speaks about the risks of immigration, missing the fact that the gangs began in the U.S.) Alarmed by how quickly the gangs were growing, observers resorted to metaphor; the spread was like a disease, or a contagion. As a Los Angeles police detective put it at the time, “It was like a petri dish that you put an Ebola virus in.”

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By late last week, it seemed increasingly clear that ICE was attempting to deport people whom the agency knew were infected. According to a report in the *Miami Herald*, a twenty-six-year-old Haitian man, who'd twice tested positive for COVID-19 while in an immigration detention center, in Pine Prairie, Louisiana, was scheduled for deportation on Monday, despite the fact that he continued to show symptoms. He claimed to know four others who were also sick, but who were still expected to be deported with him.

There was also another setback in Guatemala, where the hospitals are under increasing strain. The country's health ministry decided to test ten passengers on one of the first deportation flights to arrive in Guatemala City under the new arrangement with D.H.S. All the detainees had paperwork confirming that ICE had tested them for the virus and cleared them. Yet the Guatemalan health ministry found that one was positive for COVID-19. Cindy Espina, a reporter for *El Periódico*, asked the foreign minister what would happen next. "We had the need to suspend [flights] as of today," he told her on Friday morning, in a recording that she shared with me over the weekend. "But that doesn't mean we won't resume them next week."

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## A Guide to the Coronavirus

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