Congress of the United States

Washington, DC 20515

March 9, 2026

The Honorable Kristi Noem
Secretary
U.S. Department of Homeland Security
Washington, DC 20528

Dear Secretary Noem:

We write to express grave concern regarding the death of Mr. Emmanuel Damas while in U.S. Immigration and Customs Enforcement (ICE) custody. Mr. Damas was a Haitian asylum seeker who died from a treatable infection while detained at the federal detention center located in Florence, Arizona. Pursuant to our oversight responsibilities as Members of Congress, we demand a full investigation into the circumstances surrounding Mr. Damas's death and request a complete accounting of the medical care he received while in federal immigration custody.

According to public reporting, Mr. Damas had been detained at the Florence Correctional Center for approximately four months. On February 12th, 2026, he sought medical attention for severe tooth pain and was given only ibuprofen. He died in an Arizona hospital on Monday March 2,2026, from sepsis, as a result of an untreated infection.

Mr. Damas is the 10th person to die in ICE custody in 2026. Reports indicate that Mr. Damas cried in agony as he asked for medical attention for over two weeks and was ridiculed by staff who assumed he was faking his illness. When Mr. Damas arrived at the Scottsdale hospital he was rushed to the Intensive Care Unit, where he was intubated and treated but ultimately succumbed to the infection.[1]

His death is unacceptable and raises grave concerns over treatment and quality of healthcare that individuals in ICE custody receive. Additionally, this incident calls into question the training, standards and guidelines that DHS provides to ICE and detention center staff. 2025 was reported to be "ICE's deadliest year" in more than two decades, with 31 deaths in custody. We are currently on track to surpass that in 2026, with ten deaths in ICE custody in just over two months.

Considering the reported population of more than 71,000 individuals currently held in federal immigration detention, it is imperative that Members of Congress have full and unfettered access

[1] https://tucson.com/news/local/border/article_a5053df1-4ade-4424-972f-e9f5270829bb.html

to detention facilities to conduct constitutionally mandated oversight responsibilities. We cannot allow policies that dramatically expand detention levels and lead to overcrowded facilities to undermine the medical care and treatment that every human being in federal detention is entitled to. [2]

According to the American Immigration Council, since January at least five deaths linked to untreated or undertreated medical conditions have occurred, including:

- Luis Gustavo Núñez Caceres, a 42-year-old son and brother from Honduras on January 5 while detained at Joe Corley Processing Facility in Conroe, Texas.
- Luis Beltran Yanez Cruz, a 68-year-old father from Honduras who had lived in the U.S for 26 years, died on January 6 while detained at Imperial Regional Detention Facility in Calexico, California.
- Parady La, a 46-year-old father from Cambodia who came the United States at age two, died on January 9 while detained at Federal Detention Center in Center City, Philadelphia.
- Heber Sánchez Domínguez, a 34-year-old husband and father from Mexico died on January 14 while detained at Robert A. Deyton Facility in Lovejoy, Georgia.
- Victor Manuel Díaz, a 36-year-old man from Nicaragua, died on January 14 at Camp East Montana in El Paso, Texas.

These incidents raise serious concerns about the adequacy of medical care and oversight within ICE detention facilities.

Just last week, former ICE instructor Ryan Schwank testified in a congressional hearing that ICE removed approximately 240 hours from its basic training program in 2025, representing roughly 40 percent of instructional time. Additionally, according to reports, ICE expanded recruitment efforts through incentives such as student loan forgiveness, $50,000 signing bonuses, and expedited hiring processes. These changes raise concerns about whether adequate training, screening, and preparedness standards are being maintained for personnel responsible for individuals in federal custody.[3]

The Department of Homeland Security has a responsibility to protect and ensure the health and well-being of every person in its custody. DHS must fully investigate the death of Mr. Damas and any deaths that occur in federal immigration custody. We request that DHS comply with its duty to conduct a thorough and impartial investigation and provide Congress with its findings.

Additionally, we request the answers to the following questions and document requests be provided within 14 days of receipt of this letter:

1. Please provide the full Medical Examiner's report and cause-of-death determination for Mr. Damas.

[2] https://www.americanimmigrationcouncil.org/blog/ice-deaths-shootings-2026/
[3] https://www.washingtonpost.com/investigations/2026/03/03/ice-training-cuts-graduation-rate/

2. What specific factors contributed to the delay or denial of appropriate medical care for Mr. Damas? Why was he not promptly provided antibiotics that are routinely used to treat dental infections?
3. What type of medical providers evaluated Mr. Damas and on what dates after he reported tooth pain? Please provide a complete timeline and documentation of all complaints made by Mr. Damas, who evaluated him, and all medical records related to his care while detained at the Florence facility.
4. What mandatory medical training or certifications are required for staff working in ICE detention facilities, including those responsible for identifying and responding to detainee medical complaints?
5. What measures have ICE and DHS taken to ensure they can provide adequate medical staffing and interventions, including dental and mental health services, within detention facilities?
6. Who has the authority to approve hospitalizations, medical transfers, or emergency care for detained individuals?
7. How are determinations made for medical transfers to outside hospitals, and why was Mr. Damas not transported for emergency care earlier?
8. How does ICE ensure consistent medical care standards across federal and privately operated detention facilities that house individuals in immigration custody?
9. Is ICE working to update or revise its detention standards and medical protocols in response to the increased population in immigration detention?
10. What procedures does ICE follow to notify family members when detained individuals experience serious medical emergencies or are transferred to hospitals?

Sincerely,

Adelita S. Grijalva
Member of Congress

Yassamin Ansari
Member of Congress

Greg Stanton
Member of Congress