

DECLARATION OF SNM

DECLARATION OF [REDACTED]

I, [REDACTED], hereby declare under penalty of perjury pursuant to 28 U.S.C. § 1746 that the following is true and correct.

1. I make this declaration based on my own personal knowledge and if called to testify I could and would do so competently and truthfully to these matters.
2. My name is [REDACTED]. I am [REDACTED] years old and from [REDACTED]
3. I first came to the United States when I was a child, when I was around 15 or 16 years old. I last re-entered the United States in 2012 because I faced threats, physical assaults, and discrimination in [REDACTED] due to my sexual orientation and HIV status, and I hoped for a better life here. I have been removed and returned several times. Since 2012, I have resided in Minneapolis, Minnesota. In 2018, the Immigration Judge granted my withholding of removal pursuant to Section 241(b)(3) of the Immigration and Nationality Act, and I was released from immigration custody. After my release, I continued to reside in Minnesota, complied with supervision requirements, obtained employment authorization, and was gainfully employed. To me, the United States is my home. My mom and sisters live in the United States, and I have grown up here.
4. On or about January 7, 2026, during ICE's Operation Metro Surge in Minneapolis, I was arrested at a bus stop while on my way to work. During the apprehension, I sustained injuries to my shoulder and arm because the ICE officer pulled my shoulder, pushed me against a wall, and then pinned me to the ground. I was detained in Bloomington, Minneapolis, for more than 24 hours, where I was denied access to speak to counsel or family members, and I did not receive any medical attention either. ICE then transferred me to El Paso, Texas, which is far from my family and friends in Minnesota.
5. I arrived at the Camp East Montana ICE Detention Center, located at Fort Bliss in El Paso, Texas, on or about January 8, 2026.
6. Overall, conditions here make me think I'm being punished as if I were a criminal. Almost a decade ago, I served a few months in county jail for criminal conviction. I have worked very hard since that time to improve myself and not engage in the type of behavior that led me to jail. Conditions at Camp East Montana are much worse than they were when I was in jail and make me feel like I'm being punished again, more harshly this time. I feel that I am being exposed to unnecessary dangers and health and safety risks at Camp East Montana. I feel that I am being treated like a criminal, when in reality, I've tried to live my life as honestly as possible. I feel like I am being humiliated.

Housing at Camp East Montana

7. People refer to the housing units at Camp East Montana by letters of the alphabet, like "A," "B," and "C." When I arrived, I was placed in the "Echo" housing unit ("Echo" for

housing unit “E”) for about a month. The day that I arrived to E-unit I did not receive any handbook with the rules, but we were explained basic rules by a guard, such as the count times, rules for TV, and sleeping times. When I arrived, no one explained to me the process for filling a sick call to get medical attention. I learned how to submit a sick call request by asking the guards shortly after arriving at Echo unit. Similarly, when I arrived no one explained the grievance process to me. I learned about how submit a grievance when I had an issue with another detainee threatening me and I asked the guard about how I could complain.

8. At this time, I experienced serious pain in my shoulder. My shoulder pain prevented me from sleeping properly because the beds were made of metal and we had a 2-inch cushion. During the night, guards talk and laugh loudly and make a lot of noise and they make lots of noise at night with their keys as they walk by, which also makes it hard to sleep. There is also a light that is left on in the main entrance to the unit and the hallway lights are also on. As a result, these lights impact people who are nearest to the main entryway as they cannot sleep at night. When I was in Delta and Echo units, I slept near the front entryway, and the light prevented me from sleeping properly. Sometimes I tried to use a towel to block the light but the guards do not let us place a towel on top of our bunk to block out the light. In all, I am constantly sleep deprived. On average I’d say that I get about three hours of sleep a night.
9. There were about 72 other people in that housing unit when I was there. There were about six toilets (porta potties) and six showers for us all to share. There were not enough toilets and showers for us all and there were issues because the unit was dirty.
10. In all the units I have been in, there have not been any windows at all. We cannot see the sunlight during the day. I feel depressed because I cannot see the sun. We do not get sufficient vitamin D or C either through direct sunlight exposure or the food. The only opening is between the wall and ceiling of the tarp, which is where all of the dust and sand from the outside comes inside.
11. After being in Echo unit for about a month, the guards told me I was moved to “intake” processing where I was for a day. The intake processing is also located on Camp East Montana. From here, I was assigned to Delta-4 unit, the high security unit, and I was there for about a month.
12. I am currently detained in Alpha-14, the high security unit, and we all wear red clothing.
13. I was previously Delta-4, Delta-1, and two other units in Delta, which all have the same layout. There are 72 beds composed of 18 four-person bunkbeds. There are nine four-person bunkbeds on each side of the unit. There are no walls that separate the bunkbeds from each other. There is no privacy between us.

14. The toilets and showers have two window cutouts, one on at head level and one below at our feet, where guards or other detainees can see inside.
15. There is supposed to be one tablet for each of the four people assigned to the same bunkbed to share from 6 a.m. to 10 p.m., except for count. So that means 18 tablets for 72 people (if all the beds were full). When I was Delta-4, we only had 13 tablets instead of 18. In Delta-1 unit, we had all 18 tablets. Currently, at A-14 we have all 18 tablets. Currently, there are about 60 people in A-14 Unit. The population has fluctuated quite a bit while I've been here.
16. Since on or about April 18, 2026, when the new contractor took over the facility, there are now three daily counts. The first count starts at around 5:00 AM and ends at around 6:00 AM, which is when we are in bed and the guards wake us up to scan our bracelet. The second count starts at around 12:30 PM and ends at around 2 or 3 PM. The second count occurs either immediately after we are served our lunch or during our lunch, in which case we are forced to have lunch on our bunk beds. The third count starts approximately at 6:30 PM and ends at around 7:30 PM or 8 PM. This is a change from the previous contractor who operated the facility and they had three counts but the morning count was a head-count only, and we were not woken up and instead allowed to sleep, and our bracelets were not scanned. Now, all three counts are scanned which means that we have to be awake.
17. On or about April 28, 2026, I overheard someone in my unit ask the ICE official who was visiting our unit how long counts should take and explained the new counts were taking hours each time. In response, I heard that the ICE official said that each count should not take more than 30 minutes.

Health Care and Hygiene

18. When I first arrived to Camp East Montana at Echo unit, no one asked immediately me about any medical conditions, symptoms, or medication needs, and I wasn't seen by medical staff. It was not until about a week after I arrived that medical staff checked my weight, height, blood pressure, and temperature, and gave me a TB test. This is when I informed medical staff that I am HIV positive, that I require medication, and that I am immune-deficient. At this time, the medical staff said they would send me to the medical unit to get my HIV medication. But, they took about another week to send me to the medical unit, and it was about another week after that before I started getting medication from medical staff here. I was really lucky that I happened to have my HIV medication from before I was arrested in my personal belongings and I was able to take it, and that my family advocated on my behalf by calling Camp East Montana to request that I get my HIV medication and by calling local advocacy groups in El Paso. Otherwise, I don't think I would have had my HIV medication for a while.

19. I am taking Biktarvy medication once a day. On or about March 7, 2026, the medical staff here took away the HIV medication I had in my possession, and they told me that they were going to administer it to me (previously, they gave me a multiple day supply, which I would take on my own). I'm not sure why that did that; I used to self-administer my medication every day right before breakfast. The medical staff told me that they would bring it at 8:00 a.m. every day going forward. But they don't always bring it on time and instead they bring it between 8:00 a.m. and 11:00 a.m. I consider this to be very irresponsible on their end because the medical staff knows that I need to receive this medication at the same time every day and with a meal. Breakfast is also administered inconsistently. When I was Delta-1, breakfast was at 6:30 a.m., but now I am at Alpha-14 is administered at around 8:00 a.m. The medical staff is now bringing my medication at around 9:00 a.m. The medical team does not bring me anything to eat when they administer the medication. The medical staff administers the medication publicly in front of others, particularly one guard who accompanies a nurse, and there other detainees around me. I am not receiving the medication consistently every day at the same time, and I am not receiving it with a meal. I asked the nurse why they changed this and told her about my concerns about receiving it timely and with a meal, and the nurse said to her that these were her orders, did not know why, and since then nothing has improved.
20. The staff also provide us with limited hygiene supplies that include small bags with packets of shampoo, bodywash, body lotion, toothpaste, deodorant, and toothbrush. The quantity does not last beyond a single use, and so we must keep on asking for more supplies. Every day we ask for new supplies which are kept at the guards' desk near the front door. But the facility runs out of supplies and takes about a day to arrive upon request. Guards keep toilet paper on their desk for us to use, but sometimes this also runs out. I think that there have been times where people have to use the bathroom without toilet paper. We do not have access to shaving razors or shaving cream or finger/toenail clippers. Our beards are cut only by a barber, but only with a machine and it is not a razor. We can only cut our nails in front of our guard.
21. Since on or about April 13, 2026, detainees were no longer being used as barbers to cut hair or shave/trim our beards. We stopped receiving barbershop services and the guards told me that they are no longer having detainees work as a barber to cut hair. We were also not receiving any services to trim our nails or shave our beards. I was told by a guard that the facility is going to hire an outside contractor to cut our hair, but we do not know when this will be.
22. On or around May 13, 2026, I received a haircut from the barbershop after not having one for about a month. I also cut my nails and trimmed my beard. Other detainees were the ones who cut my hair and trimmed by beard.

23. The showers and toilets are also dirty as the cleaning staff only come by maybe once a week to clean. For the other days, we must clean the showers and toilets, but we are not given adequate cleaning supplies to do so properly. We are given a spray bottle with some sort of blue cleaning liquid, broom, mop, and toilet scrubber. Sometimes they do not give us gloves. Sometimes, we use hand rags or shirts, towels to clean our bunk beds, toilets, showers, and lunch tables.
24. There is no hand soap in the bathrooms and, so, we must use some of the remaining hygiene products, like the bodywash packet, wash our hands, or just go without washing our hands. There are no hand sanitizers for us. So, I think people sometimes have unclean hands or just wash them with just water after using the toilet or before eating. There have been times where I do not have soap to clean my hands and I just use water to clean my hands. That's happened to me when I ran out of hygiene supplies.
25. There is a poster in my unit that has various rules posted. These rules have been posted since I've been here and posted in every unit. There are about ten rules posted. One of the rules states that we are supposed to store our personal belongings in a bin underneath the bed and that the facility is supposed to provide the bin. But, since I've been here, I have never been provided this bin. As a result, many people place their clothes on the floor. Others place their personal items (like toothbrush, hygiene products) in a cup or on a food tray, but guards come by and throw that away. The guards throw the personal belongings in the trash or on the bed or floor, in the best case scenario. For example, on or about May 16, 2026, I had my belongings in a food tray that I had cleaned to use to place my toiletries to prevent them from being on the floor and getting dirty. A guard, Detainee Officer Torres, came and threw away my belongings in the trash and she said that it was all contraband, although we use the tray for meals. She also said that the toiletries, like toothpaste, toothbrushes, soap, and bodywash are "single use" and that we cannot use save them for later (which is a new "rule" that I have never heard of and has never been the practice since I've been here). I ask where was I supposed to store my belongings if I do not have a bin. The guard said that this was an issue with ICE and not with her. And the guard said that if I had an issue I could file a grievance. I filed a grievance that same day. This is an example of how the facility staff does not follow their own rules in the facility and changes them on a day to day basis. This is another example of how we are mistreated with disrespect and subjected to live in dirty conditions.
26. I am really scared for my health here. There are a lot of us housed together in poorly ventilated housing unit. Since I've been here, people are constantly getting sick and there have been detainees in my units who have had COVID-19 and flu. I know this because people are sent to quarantine when they are sick. I hear people coughing and sneezing all the time. Because my immune system is very weak and sensitive, and because I cannot

keep my distance from others, I am constantly in danger of getting sick. The guards do have facemasks and sometimes we can request those masks, but they usually run out.

27. On or about mid-January 2026, I had COVID-19. I had a fever, running nose, cough, teary eyes, headaches, and body and tooth aches. I was taken to quarantine for two weeks and then taken to another unit for 10 days and then a week in another unit. These units were the same layout as the others but they had sick people. Because the ventilation is shared between units, I believe that airborne diseases can spread. There were other sick people there with COVID-19. There were other people from my unit who were there but others in my unit were not tested for COVID-19 until they started exhibiting symptoms. Three days after my positive COVID-19 test result, I received a ten-day treatment for Paxlovid.
28. I have put in a few requests for medical care to, for example, keep receiving my HIV medication treatment, to get refills for my ibuprofen for shoulder pain, to get muscle rub for my shoulder pain, or to get medicine for my clogged nose because of the sand/dirt. Usually, the medical team takes a few days to respond to my sick call requests or sometimes they cannot give me the medication even if they have it, unless it is specifically for me. For example, if the nurse has Ibuprofen and is administering it to another detainee, they cannot give us one unless we are specifically prescribed for it.
29. The medical staff take days to respond to my sick call requests. People are waiting for days in their units while they are sick. This happened when I was in Echo. I saw people who were sick in their beds waiting to go to the clinic. I know that people from my units who have been deported who had COVID-19 symptoms or were very ill.
30. I have had two medical appointments after submitting a sick call slip where the guards woke me up late at night, like at 11 p.m. or 2 a.m., to go to the waiting room next to other sick people sitting and waiting for hours. After I was seen by the medical staff, I returned to our unit around 4 a.m. or 5 a.m. After these appointments, I was taken to the yard in the early morning. I don't know why they had to have us seen in the middle of the night. It makes me not want to ask for medical help because it's really hard to sleep already, and I don't want to have to wait for hours in the middle of the night to be seen. One time I refused to go to a medical appointment because I was woken up at 3 a.m. and I was tired. The guards wrote this off as a willing refusal. I wanted to get medical help, but I just didn't want to go at 3 a.m. and spend the whole night waiting.
31. The medical appointments are still occurring in the hallway where other detainees and guards can listen and see the medical appointment. The medical appointments are in front of 3-5 other detainees who made a sick call. The medical staff set up a few tables to

evaluate us. Anything that we say in front of the nurse, we have to say it in front of the other detainees and guards. At this point, the nurses decide whether or not we will go see the doctor in another room. But the main medical appointment is not private. The hallway area is dirty because of all the sand/dirt in the hallway, and our bodies are examined in front of others in an area that is dirty.

32. Everything in the housing unit is covered by sand. There is a thick layer of sand on our bunk beds, and that sand is circulated throughout the unit. I and others have respiratory issues from the sand, like dryness, dry throat, cough, nosebleeds, congested, dry eyes, and headaches. I have asked for medicine to help with these symptoms, but I have not received it. We need a prescription just to get a cough drop. When we do complain about these symptoms, medical staff say that they need to give us a COVID-19 test. For example, around a month ago, I went to the medic with these symptoms, and I was just prescribed three cough drops. That didn't help.
33. I am particularly worried about getting a serious pulmonary infection because of my compromised immune system. I am particularly worried because of the poor nutrition here, being sleep deprived, and the poor medical treatment, which all makes my immune system more vulnerable to serious illness.
34. There was a measles outbreak at Camp East Montana when I was housed there. Staff told me like around early March 2026, that they could not give me the measles vaccine because they wanted to test my white blood cell count first. In mid-March, I had a blood test. During the exam, the nurse forcefully took blood out from my left arm without my consent, because that's where she wanted to take it from, even though I told her that she should do it from my right arm because that's where I usually get blood drawn from and my left arm veins is not as good. As a result, the nurse ruptured my vein in my left arm and ended up getting blood out of my right arm.
35. About two weeks later, I received another lab blood work to check my HIV viral load. But when I asked why they were giving me this blood work up, they said that I had requested but I never did. They also gave me an STI test which I was felt offended because I am not having sex with anyone here. I feel that I was given this STI tests solely because I am gay. During this appointment I asked if the medical team has the results from my blood work for my white blood cells, the medic said no that they could only give me the measles vaccine until they did a complete blood work up and x-rays. About a month later, I received the results from my white blood cell tests. During that appointment, I asked again if I could receive the measles shot, but the medical staff told me "No" because they were not giving it anymore. They told me that they were only

giving the measles vaccine a month ago, which is precisely when I initially requested the measles vaccine. To this date, I have not received my measles vaccine.

36. Again, I am deeply concerned that I have not received my measles vaccine because my immune system is particularly vulnerable to getting seriously ill if I were to get measles. From I was not detained, my personal doctor would keep me up to date on all necessary vaccines.
37. I also received a skin-test TB exam on or about January 11, 2026. The medical staff did not examine my body to check if I had a positive test result. Instead, I saw my arm and noticed that I had a skin rash and indication that I had a positive TB result. So, I asked to see the medic for this. About a week later, I later received an X-ray chest examination for TB, which I was told came out “negative.” The medical staff told me that they wanted to give me another X-ray because they couldn’t find my X-ray results, but they never did.
38. On or about April 1, 2026, I started to feel discomfort in my right jaw when I ate. Then, on or about April 8, 2026, I started to feel a pain of a 4/5 out of 10, then on or about April 10th-12th, I started to feel a lot of pain, like an 8/9 out of 10, when I would open my mouth to brush my teeth and when I ate. After I eat, the pain subsides. On or about April 9, 2026, I submitted a handwritten sick call request. The next day, the nurse evaluated my blood pressure, temperature (vitals), and checked my mouth to see if I had an infection and checked my right ear to see if I had an infection. During that appointment, I asked the nurse if she knew what was going on. The nurse responded that it was not an infection, but she shared that if it is what she thinks it is, then it is serious and there is no medical treatment for it. But she did not tell me what she suspected it was. Then, I was evaluated by a doctor/provider who told me that he was going to take an x-ray exam. But he told me that if the issue was not an issue with my bones, meaning that if it was an issue with my ligaments or tissue, then he could not evaluate me further because he did not have the proper equipment to do so. The doctor said that he would share the results when they get them. The doctor did the x-ray the same day. After I returned to my unit, a guard told me that it would take three days to get my x-ray results. I was not prescribed any pain medication. Three days later, I was also seen by a dentist at Camp East Montana. The dentist said that this is an issue with my jaw and has to do with the stress that I am experiencing here. The dentist prescribed me muscle relaxers. I am receiving this medication twice a day.
39. Ever since I was taken into ICE custody in January 2026, I feel shooting pain when I move my shoulder, including when getting in and out of bed. It makes it hard to sleep. I have not received proper care for my shoulder. In early March 2026, I finally received an x-ray for my shoulder, and I received my x-ray results on or about mid-March 2026. The

x-rays only showed that my bones were not fractured or broken. The nurse only told me that there were no broken bones or fractures. That's it. The nurse did not offer any other treatment plans or other evaluations. My shoulder still hurts, especially when I lay down on the thin mattress that sits on top of a cold metal bed. I do not have full mobility on my right shoulder. My injury prevents me from full mobility of my body. I cannot stretch my right arm to clean my back or even reach my back of neck. The pain in my right shoulder blade extends to the right side of my neck and jaw.

40. About three years ago, I was diagnosed with a borderline personality disorder. When I was in Minneapolis, I was receiving talk therapy, but I was not receiving medications; it was not needed. But, when I was in Minneapolis, I was not under this stress. Sometimes, I do feel very depressed, stressed and anxious all day; on some days I feel irritable and that I cannot talk with my partner or family. On some days, I feel very emotional all day.

Food

41. Nutrition is really important to me to help my immune system function well. The food we get at Camp East Montana is scarce and bad, which worsens my condition. By "bad" I mean that the pasta is raw, veggies are raw, and that we receive about four small cubes of meat. Every two weeks the food menu changes. The food is not enough. I do not think I am receiving enough calcium and protein, which is important for my health. Since I arrived, I would estimate that I have lost about 10 pounds. Because of the lack of sufficient food and my HIV condition, I often feel very weak, with low energy, and tired. People are not allowed to save some food for later, e.g., like milk and crackers in their bunk beds as it is considered contraband. Any food that we save is thrown away by guards and cleaning crew. We are hungry constantly. To help with my hunger, I drink water throughout the day.
42. Sometimes people fight over extra food that is left over because people are hungry all the time. For example, people who clean the unit are promised extra food from the guards. But, other people who do not clean feel that this is not fair. Now, however, with the new contractor, guards have stopped offering extra food to those who clean the unit. As a result, it seems that people are less incentivized to want to clean the unit and I have observed that the unit is more dirty during the week now and being cleaned less often.
43. On or about May 5, 2026, we received meals that we think had expired. The meal was chicken penne pasta with basil broccoli cream, and the milk in the cream tasted sour as if it had expired. We all returned our dinner because it tasted terrible and we didn't want to get sick. Staff took the trays back but did not give us anything else to eat. We went to sleep without dinner.

Communication with Counsel

44. Since being at the facility, neither the guards nor facility staff have offered me the opportunity to call my attorney via phone.
45. The only way that I am able to contact my attorney is through calling my family, which I am charged for. I speak with my family, who then speak with my attorney, and my attorney relays her messages and updates to me. But my call with my family is recorded, so the government can hear anything I say.
46. In theory, I could call my attorney through the tablet, pay for the call, but the call would be monitored, and I would be calling my attorney in the unit in front of other guards and detainees.
47. If I send a text message or call my attorney, then the guards and staff can monitor the messages and listen to the calls. Each time we call on the tablet, we receive a notice that all calls are recorded and monitored. When we send text messages, the facility staff reviews and either approves or denies the messages. So, even if I did call my attorney on the tablet, the guards or staff would listen into the call. I don't feel comfortable with that.
48. There are no private phones or areas to call my attorney.
49. The only way to talk to my attorney is if my attorney schedules a VTC with me or visits me in person. But I cannot initiate any calls with my attorney.
50. Recently, in early May 2026, the facility posted a list of pro bono attorney contact sheets but we do not have a way to call an attorney in a private, free, and confidential manner.

Communication with Family and Loved Ones

51. It is really hard to be so far away from my family, friends and partner, to worry about how they are doing, and to not know what is going to happen me. It's really hard to stay in touch with people while incarcerated here. The main way of communicating with our family members and loved ones is by phone or text, and that costs money. We get charged about 7 cents per minute to call our family members and loved ones and 21 cents per minute to make video calls. Currently, however, we are no longer permitted to video calls and the guards have not explained why the video calling app was blocked on the tablet. The shutdown of the video calls has negatively impacted me because my friends, family, and partner cannot visit me in-person because they live in Minnesota. So, video calls are essential for me to stay in contact with my family and friends, and partners. It really helps to see their faces – I miss them so much. They also charge us 3 cents per minute to use the SMS application for text messages, and they charge us additionally for each message we send. For the messages that we receive, our family and loved ones are charged. To receive photo messages, we are charged extra fees. On top of those fees, we are charged state taxes. That may not sound like a lot, but it is a lot when you are incarcerated and not

earning a paycheck, and that is the only way to speak with your loved ones. On average, I speak to my partner for about 10 minutes multiple times a day. I make several calls to siblings and family members. A 9-minute call costs about \$1, including state taxes and fees. I also make calls to my mother who lives in Mexico which costs me more. On average, I am spending about \$20 per day calling my family and partner each day. Because there is no programming here, making phone calls is the best and only way I can spend my time in a way that is productive and helpful for my mental health.

52. I have not seen my family since I was detained by ICE. El Paso, Texas, is very far from my friends, family, and partner, so it would be hard and expensive for them to visit.
53. When we used to have video calls, they occurred in the common space area right next to the TVs which are loud, making it hard to hear. The video calls were not private, so guards and other detainees could see my family and could hear what we were saying. It made it difficult to be vulnerable and share my feelings and experience with them.
54. In my case, I feel restricted and worried when I talk to my life partner, who is a man, because I fear that other detainees will hear me (and see him if I make a video call), and they will humiliate me and make homophobic comments. There's no designated space to use the phone on the tablet in a private setting, so people usually make calls on their bunk bed when other people are around. I feel that I must limit what I can speak with my life partner about and feel restrained to share the affectionate words I share.

Personal Safety

55. I do not feel safe here or protected by the guards. Because I am gay, I am worried about my safety and do not think that the guards keep me safe.
56. For example, in March 2026, another detainee made a homophobic slur against me in front of a guard, and the guard did not do anything about it. When I was in the bunk bed, a detainee from another bunk bed section passed by and called me a "fag," and he asked me for the tablet that belonged to my bunk bed section. I told the man that he could not have it because he was being aggressive, rude, and he had another tablet that he could access. The detainee was insistent that I give him the tablet if I was not using it. When the detainee started to insult me and I became scared for my safety, I called over the guard. I told the guard that happened and asked the guard to file a grievance and file a report, but the guard told me to just brush it off because the other detainee was having a bad day. I asked the guard to report it, but the guard was bothered and he said that he did not have to report it. When the guard was there, another detainee came and threatened me in front of the guard that if I made a grievance that I should be aware of how "things are handled in prison if you filed a grievance." I felt intimidated by this threat. At that moment, the guard told the man that "now I have to file a report." Later that day, Captain Stanfield arrived and told me my only option was to relocate to another unit, but I did not want to move

because I felt that this would be punishing me, and I had several friends and people I got along with in that unit. I did not see Captain Stanfield talk to the other detainees who threatened and I don't think any of the ones who use demeaning language against me was moved. After this, the detainees who walked by my bunk bed kept making homophobic slurs. It makes me feel humiliated, degraded, and unsafe.

57. On or around April 5, 2026, I had an issue with other detainees. There was a group of us watching a movie which had about 15-20 minutes left until the end. Another person wanted to watch the 5:00 PM news. The person started to insult me with homophobic slurs and was threatening to hurt me. The guards tried to convince me that I should just let the other person watch the news. During the 15-20 minutes that the movie was ending, the man threatened me that he and others would attack me if I filed a grievance. I filed a grievance with the facility anyway, because I wanted this behavior to stop. Later that day, I spoke with the Captain who did not offer me any real solutions. He only offered to change my units. I did not think it was fair that I should leave the unit, and I told the captain this. The captain said that because the situation did not result in a physical fight, then in the captain's view, we only had a disagreement over the TV. There was no real solution to this issue. On the tablet, I also sent a message to the guards that I wanted to see the captain. In total, I submitted two grievances, one on the tablet and a written one to ensure that Captain would see it. But, the issue was never resolved by the guards. Instead, I just had to tolerate and deal with it and move on as if nothing had happened. However, I felt anxious and afraid after that incident. Generally, I try to avoid people who are homophobic because I am worried they might hurt me.

Lack of Programming and Recreation

58. We are not offered any educational, vocational, or meaningful activities. We only have two communal Televisions for the whole unit and the guards keep the TV controller on them. So, if we want to change the channel, we have to ask the guards for permission. The TVs have the streaming applications but we can only see them if someone has an account to that streaming application. Otherwise, we can only watch the free channels which are like Tubi, and local TV channels. The majority of the people spend their time in bed because we are depressed, and a few people watch TV. There are only a few chairs in the TV area.

59. I spend most of my time reading. Our "library" is a small bookshelf with about 30 books. These books are shared with everyone at Camp East Montana. The majority of the books are in English, with only a few in Spanish. Sometimes, I go and there are only 10 books available. The books are very limited. We are only allowed to take one soft cover book to our bunk beds, which are very few. We are allowed to read hard cover books but only when we are at the library. The majority of the books are fiction. We may be taken to the


library once every week or once every other week. I wish there were more books to help pass the time. Currently, there are fewer books than before.

60. Outdoor recreation is limited and inconsistent. The guards post up yard times, but they do not meet those yard times. Sometimes guards take us out early in the morning at around 8 a.m. or 9 a.m. and force us to go outdoors to “recreation.” Other times they take us out late. But, sometimes we are not taken outside even if it’s on the schedule. For example, on or about May 4, 2026, my unit was scheduled to go out to the yard at 6:30 PM but we were not taken out because the guards for the yard went home. The temperature can be really cold outside when we go out early in the morning, like around 8 or 9 am. Sometimes it is raining outside in the yard. We do not have sufficient clothing to keep us warm outside. Other times, we go out to the yard at around 5 p.m. right before dinner, when we are very hungry. People are visibly angry and upset because they want to eat first before going out to the yard – as I mentioned above, food is really scarce here, and people think about food constantly. Any time people think they might miss or be delayed in getting a meal, things can get tense. In all, yard time is not consistent at all.
61. The yard is small, it has artificial grass full of sand, and there is not enough space for everyone in our unit to be out there at the same time. There is one soccer ball and nothing else to do. People cannot walk or run or exercise because the yard is small and because people are playing soccer and if we walked we would get in the way and get hit. When someone gets hit by a ball, things get tense. The ball is heavier than a normal soccer ball so it does not puncture easily. In some of the units that I have been in, there was a porta-potty available for use in the yard. But, currently in A-14 unit, there is no porta-potty in the yard and people have to ask for permission to use the bathroom in the unit. There are no benches or chairs or places to sit. Guards give us tap water to drink. In other units, we could not see the sun because the yard is fully covered from above. Sunlight would only entered through the chain linked fence on the side. In my current unit, A-14, there is a roof covering half of the yard and the other half of is uncovered. Usually, when we go to recreation, people just stand or sitting on the sides.

Everything in this declaration is true and correct to the best of my knowledge and recollection.
This declaration was read back to me in Spanish, a language in which I am fluent.

Executed on the *19*th of *May* 2026 in El Paso, Texas.

Signat

A large black rectangular redaction box covers the signature area, obscuring the name and any handwritten notes.

ATTESTATION AND CERTIFICATE OF TRANSLATION

I, [REDACTED], certify that I am fluent in both English and Spanish. On [REDACTED], I personally spoke with SNM and read the foregoing declaration to her/him, translated into Spanish faithfully and accurately. SNM affirmed that s/he understood my translation and that the information in the above declaration is true and accurate.

I declare under penalty of perjury, pursuant to 28 U.S.C. § 1746, that the foregoing is true and correct.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]