

Medical neglect and preventable deaths spread across ICE detention centers

Anthony Callahan
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On December 15, 2025, 56-year-old Bulgarian immigrant Nenko Gantchev died at Immigration and Customs Enforcement’s (ICE) North Lake detention center in Baldwin, Michigan. He was found unresponsive and struggling to breathe on the floor of his cell that evening. Emergency care was administered, but he was declared dead less than 45 minutes later. Gantchev had lived in the United States since 1995, after being admitted on an exchange visitor visa. He was arrested by ICE in Chicago on September 23, 2025, during Operation Midway Blitz. At the time of his death, he was challenging his detention in immigration court.

ICE claimed Gantchev died of natural causes, and an autopsy by the Mid Michigan Medical Examiner attributed his death to hypertensive and atherosclerotic cardiovascular disease. But detainees at North Lake reported that Gantchev had requested medical assistance and that personnel ignored him. No information has been released about any investigation into his death, including whether he was receiving adequate medical care while detained.

What happened to Gantchev was not isolated abuse. Medical neglect has become an institutionalized feature of ICE detention. At North Lake alone, GEO Group has faced continuous accusations of inadequate medical care since the facility reopened in June 2025. Dozens of emergency calls have been placed from the detention center since then. GEO is also being sued by a former detainee who says he was denied prescribed antibiotics and other necessary emergency care, and was hospitalized after his release to prevent sepsis.

Shortly after Gantchev’s death, Representatives Delia Ramirez and Rashida Tlaib issued a brief statement expressing “deep concern” and calling for a “thorough and transparent” investigation into claims that North

Lake staff failed to respond to his requests for help. In mid-February 2026, Representatives Hillary Scholten and Haley Stevens toured the facility, but Stevens later admitted they had “no answers” about what happened to Gantchev.

The same pattern of abuse has played out across the ICE detention system. Oudone Lothirath, a 57-year-old Laotian refugee who came to the United States as a child in the 1980s, was arrested by ICE at his home in Minnesota on January 6. Lothirath had terminal Hodgkin’s lymphoma, and his arrest caused him to miss four of the five chemotherapy sessions he had been scheduled to receive. He was transferred to an ICE detention center in El Paso, Texas, where he was held in a tent with approximately 60 other detainees and missed his first two treatments.

ICE agreed to return Lothirath to Minnesota only after his friend and caretaker, Christina Vilay, presented officials with a letter from M Health Fairview stating that he would quickly succumb to cancer if he did not receive proper treatment. Once released, Lothirath was too weak to travel for several days. He was hospitalized immediately upon returning to Minnesota, causing him to miss two additional chemotherapy sessions. His cancer spread to his bone marrow, forcing him into hospice care before he died. ICE intended to deport Lothirath, but its own medical neglect so ravaged his health that it helped hasten his death.

ICE’s Camp East Montana, a tent detention facility near Fort Bliss, Texas, has likewise been the site of repeated abuse. At least three detainee deaths have been reported there, including that of Geraldo Lunas Campos, whose death was later ruled a homicide. A recent internal ICE inspection conducted from February 10 to 12 found dozens of problems at the site, including

poor medical care, deficient reporting, and the use of excessive force by staff.

The inspection found that detainees with possible tuberculosis were not quarantined and were not properly screened for HIV. In some cases, ICE was not even notified of possible tuberculosis infections. About one-third of logged medical grievances were not promptly referred to or answered by the medical department, with responses taking between six and 14 business days.

The report also found no documentation showing that staff sought help from medical or mental health personnel after gaining physical control of detainees during use-of-force incidents. Medical staff frequently failed to document examinations or treatment of injuries following these encounters. In some cases, there was no evidence that any medical care had been provided at all. It was often left undocumented whether use-of-force incidents required further investigation or referral to law enforcement. No institutionalized approach to responding to sexual abuse or assault had been implemented. Despite all this, ICE rated the facility “Acceptable/Adequate.”

Although Acquisition Logistics had originally been contracted to run Camp East Montana, ICE terminated the contract in March 2026, and the facility is now operated by Amentum Services Incorporated. No changes have reportedly been made to correct the deficiencies identified by ICE itself. Even so, an ICE spokesperson declared that the site would “continue abiding by the highest detention standards,” a contemptuous response in the face of the documented conditions.

Thirty-two detainees died in ICE custody in 2025, making it the deadliest year for immigrant detainees since 2004. The year 2026 is already on pace to be even worse, with 15 deaths reported by ICE so far. As of mid-January 2026, ICE was holding approximately 73,000 people in detention, an increase of more than 75 percent since Trump returned to the White House. Through the One Big Beautiful Bill Act, ICE now has funding to operate more than 135,000 detention beds through the end of fiscal year 2029. There has also been a more than 2,400 percent increase in detainees with no criminal record since Trump took office.

Thirty-two of the 46 deaths in ICE custody between January 2025 and March 2026 were reportedly people

with preexisting medical conditions whose health deteriorated while they were detained. Another nine were ruled suicides, though official causes of death are frequently disputed, and at least one case initially treated as routine has since been ruled a homicide. Any claim by ICE that its detention centers provide adequate medical or mental health care should therefore be treated with the utmost skepticism.

Nenko Gantchev’s death was not an aberration. It was the outcome of a system that places detention capacity and corporate profit above human life. The autopsy finding that he suffered from cardiovascular disease does not absolve ICE, GEO Group or their political backers of responsibility. The absence of transparency surrounding his treatment, together with the repeated deaths and documented abuse at facilities from North Lake to Camp East Montana, exposes a detention regime built to incarcerate, neglect and, in many cases, kill. This is not the result of a few bad employees or a string of tragic accidents. It is the predictable product of a bipartisan apparatus of repression, funded by the state and enriched by private contractors, directed against immigrant workers and the working class as a whole. The fight against mass detention and medical neglect cannot be entrusted to the parties that built this machinery, but must be taken up through the independent mobilization of the working class.



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