



# **A VISION FOR BLACK LIVES:** **POLICY DEMANDS FOR BLACK POWER, FREEDOM, & JUSTICE**

## **An End To All Jails, Prisons and Juvenile Detention Facilities As We Know Them and the Establishment of Policies and Programs to Address the Current Oppressive Conditions Experienced by People Who Are Imprisoned**

### **What is the problem?**

According to the Bureau of Justice Statistics, the United States currently imprisons more human beings than any other country in the world, both in real numbers and in terms of the percentage of the population. As of 2014, more than 6,800,000 adults were living in prisons or jails or under the restrictions and surveillance of probation and parole. Over 2.2 million adults were confined in prisons or jails—more than a quarter of the adult population of this country. More than 54,000 youth were held in juvenile detention during this same period. While Black people represent about 13 percent of the population of the US, we represent upwards of 40% of those caged in jails, prisons, and juvenile detention. Black women continue to be incarcerated at a rate twice that of white women, and are among the fastest growing prison populations. Among Black transgender people, half report having spent time in prison. While recently state and federal prison populations have declined slightly, jail populations continue to swell.

The rate at which the US imprisons its people and the staggering percentage of imprisoned people who are Black indicates the country's orientation toward containment and control as its primary modes of dealing with the issues created by social, political, and economic inequities. The use of imprisonment and increasingly long sentences as “catch all” responses to everything from economic desperation, to substance dependence, to non-conforming gender identities also has devastating effects on the communities from which imprisoned people come. A Pew Charitable Trusts report found that a family with an imprisoned parent earned, on average 22% less per year than it did the previous year. Children with imprisoned parents are much more likely to be expelled from school than their peers—23% of students with imprisoned parents are expelled versus just 4% of the general student population. Communities suffering from high rates of imprisonment also frequently experience the consequences of destabilized neighborhoods and families including, poor physical and mental health outcomes, struggles to keep families afloat financially, and disintegration of family and other social bonds.

In addition to the punishment of loss of freedom, for those confined within prison, jail, and juvenile detention cages, life inside these institutions is often unbearable, with imprisoned people reporting daily humiliations, physical and psychological abuse, sexual violence, medical neglect and abuse, and withholding of information and communication with the outside world. These conditions are designed to compromise imprisoned people's abilities to stay connected to



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their social networks, maintain physical and mental health, and develop their educational and vocational abilities—all things that have been demonstrated to help people thrive outside of prison and decrease their likelihoods of return to confinement. Some of the conditions that make it difficult for imprisoned people to maintain the health and wellbeing necessary to fight for Black liberation while imprisoned include:

- **Solitary Confinement:** The use of solitary confinement—also known as segregation, isolation, the hole, supermax, and restrictive housing—has been described as torture by the UN Special Rapporteur on torture. People held in solitary are typically subjected to 22-24 a day confinement, denied human contact, are not allowed to participate in programming, and often experience “no touch torture” including sensory deprivation, extreme temperatures, or forced insomnia. Solitary is also often used as “the prison inside the prison”, acting as additional punishment for people already serving time, especially in cases of people trying to educate or organize other imprisoned people.
- **Physical and Sexual Abuse:** Physical and sexual violence are rampant in prisons, jails, and juvenile detention centers. The imbalance of power between imprisoned people and guards leads to the use of both direct physical force and indirect force based on guards’ complete control over imprisoned people’s access to basic necessities and ability to withhold privileges to coerce sex.

In popular culture, prison rape, physical beatings, and psychological coercion are often the subject of jokes; in public discourse, they have been dismissed by some as an inevitable — or even deserved — consequence of being sentenced to prison. Nearly half of prison staff who sexually abuse inmates face no consequences. In cases where sexual abuse is confirmed, only 30 percent of survivors receive crisis counseling or medical follow-up. The glaring levels of impunity, lack of attention to the needs of incarcerated people who experience sexual violence, and failure to take action against those who commit violence against imprisoned people sends a dangerous message.

In many prisons for women, male guards are allowed to watch women and transgender people when they are dressing, showering, or using the toilet, and guards regularly sexually harass women prisoners. Women and transgender people also report groping and other sexual abuse by staff during pat frisks and searches. Studies reveal that male guards sexually abuse female and transgender prisoners with almost total impunity. For survivors who have been abused previously, this environment further exacerbates their trauma. The full extent of the problem is unknown because many prisoners are reluctant to report staff sexual abuse for fear of retaliation.



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- **Healthcare:** Imprisoned people face significant physical and mental health concerns. Yet health care services inside prisons, jails, and Juvenile detention centers are often abysmal, in many cases leading to severe suffering, disability, and death, as well as a serious threat to public health when contagious diseases go undiagnosed or untreated. Routine practices of sterilization, elder abuse, and medical experimentation on imprisoned people, and denial of medically necessary care violate prisoners' rights and dignity. To give just one example, a 2011 national survey by the National Gay and Lesbian Task Force of transgender people found that 12% of people who had been in jails or prisons reported denial of routine health care and 30% of Black respondents reported denial of hormones.

Although shackling is widely regarded as an assault on human dignity as well as an unsafe medical practice, women prisoners are still routinely shackled during pregnancy and childbirth. Restraining pregnant prisoners at any time increases their potential for physical harm from an accidental trip or fall. This also poses a risk of serious harm to the fetus, including the potential for miscarriage. During labor, delivery and postpartum recovery, shackling can interfere with appropriate medical care and be detrimental to the health of both the parent and newborn child. Despite the fact that shackling pregnant prisoners is degrading, unnecessary and a violation of human rights, only ten states currently prohibit the practice by law.

Additionally, the number of people with mental health issues in prisons, jails, and juvenile detention continues to rise. Prisoners with labeled with mental health issues may struggle more than others to adjust to the extraordinary stresses of imprisonment, to follow the rules governing every aspect of life in prison, and to respond to staff orders. Subsequently, imprisoned people with mental health challenges are routinely subjected to physical abuse by guards, including being doused with chemical sprays, shocked with electronic stun guns and strapped for hours to chairs or beds. They also suffer higher rates of suicide. The mistreatment has led to deaths, though the number of casualties is unclear in part because jails and prisons do not keep consistent records of deaths in custody. Prisons across the country are failing to offer adequate mental health treatment and failing to protect mentally ill patients from physical abuse by staff members. Providing prisoners with necessary mental health care today is essential to ensuring healthier communities both behind and beyond prison walls.

- **Prison Education:** Inadequate or complete denial of education to people serving both long and short-term sentences is pervasive across the prison system. Numerous reports



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have demonstrated a direct correlation between increased levels of education attainment and decreased likelihood of returning to confinement. Greater overall consistency is needed in the quality and accessibility of educational programming in prisons, as well as a standardized means through which people may continue to pursue formal education both inside and outside of prison.

## What does this solution do?

Action is needed at the local, state, and federal levels to break the United States' addiction to imprisonment as a remedy for the problems caused by its social and economic policies and to develop alternatives to imprisonment for adults and youth. Accordingly, federal, state and local governments should move toward:

- A moratorium on all prison, jail, and juvenile detention construction without an accompanying expansion of home arrest or GPS monitoring.
- Decommissioning of all prisons, jails, and juvenile detention centers not currently imprisoning people, followed by demolition or repurposing for non-punitive purposes.
- For example, a former women's prison in New York City is currently being [repurposed](#) as a women's center.
- Immediate release of all people in comas, on life support, or in end of life care in prisons and jails.

Additional action is needed to reduce the daily harms faced by imprisoned people while they are incarcerated and to increase their abilities to maintain their health and wellbeing while they remain imprisoned, including:

- An end to solitary confinement;
- Quality healthcare for all imprisoned people including an end to shackling of pregnant women and ensuring comprehensive reproductive health services and justice for all imprisoned people;
- Elimination of abuse in prison, including physical and sexual assault by prison and jail staff;
- Educational opportunities for people in prison, including expansion of second chance Pell grants;
- Policies ensuring safe conditions for trans and gender nonconforming people in prisons, jails, and juvenile detention.





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**How does this solution address the specific needs of some of the most marginalized Black people?**

The most marginalized members of Black communities—young people, transgender and gendernonconforming people, women, people suffering with mental health issues, those without stable shelter, and low income people—are often those people most frequently targeted for arrest and imprisonment, and for abusive treatment and conditions while incarcerated.

## **Model Legislation**

While these efforts could all go further, promising models include:

### **Eliminate Prisons, Jails and Detention Centers As We Know Them**

#### **Federal Action:**

- A recent [report by the Urban Institute](#) outlines both “front-end” and “back end” policy recommendations for reducing federal prison populations and increasing cost savings.

#### **State Action:**

- In 2011, [New York](#) State Governor, Andrew Cuomo announced a [plan to close seven state prisons](#) (upstate, minimum security)
- A recent [report by the Sentencing Project](#) outlines a range of approaches states have used to close state prisons.

**Local Action:** Cities and counties are rejecting expanding their jail systems in favor of investing in community-based resources serving vulnerable populations.

- [Los Angeles](#)
- [San Francisco](#)
- [New York City](#)

### **Establish Policies and Programs to End the Oppressive Conditions Currently Experienced by Imprisoned People**

#### **Federal Action:**

Efforts are currently underway to eliminate the use of solitary confinement within jails, prisons, and juvenile detention.

- The [MERCY Act](#) (Booker, Durbin, Paul, Lee) recommends banning the use of long-term solitary confinement for federally adjudicated youth.

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- Access to Pell grants for educational financial aid to imprisoned people in state and federal prisons such as through the [REAL Act](#) (Edwards).
- The Federal Bureau of Prisons is moving toward a policy of housing trans and gender nonconforming people based on self-described gender identity unless the individual expresses a desire for a different placement for safety reasons.

## State Action

Efforts are currently underway to eliminate the use of solitary confinement within prisons, and juvenile detention. While these efforts could all go further, promising models include:

- Changes in policy compelled by lawsuits that limit the use of solitary on youth ([Ohio](#)); and adults ([California](#))

Community groups are putting pressure on state prisons and juvenile detention centers to eliminate medical abuse:

- Eliminate the practice of sterilizing imprisoned people ([California](#))
- End shackling of pregnant women in prison ([New York](#) and [California](#))
- Allow access to gender affirming surgeries ([California](#))

Expand visitation access and contact with the outside world

- Increase visitation access between incarcerated grandparents and parents – including fathers, whose parenting role while in prison often goes unrecognized – and their children and grandchildren
- Increase visitation access between grandparents and imprisoned minor grandchildren ([CT](#))
- Increase contact visits for all prisoners
- Ensure equal visitation rights for LGBTQ individuals
- Increase access to phone calls at lower calling rates
- Ensure regular, consistent access to mail
- Eliminate media bans in CA and other states
- Increase access to ethnic studies and culturally appropriate reading material without punishment.

## Local Action

Efforts are currently underway to eliminate the use of solitary confinement within jails and juvenile detention at the local level. Examples include:

- [New York City](#), [Los Angeles](#) (youth)

## Resources:



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- [Urban Institute: Stemming the Tide](#)
- [Black and Pink: Coming Out of Concrete Closets](#)
- [ACLU: The Shackling of Pregnant Women and Girls in US Prisons, Jails and Detention Facilities](#)
- [Administrative Segregation, Degrees of Isolation, and Incarceration: A National Overview of State and Federal Correctional Policies {June 2013}. Metcalf et al., Yale Law School](#)
- [Solitary Confinement: Common Misconceptions and Emerging Safe Alternatives {May 2015}. Shames, Alison et al. Vera Institute of Justice.](#)
- [RAND report "Evaluating the Effectiveness of Correctional Education: A Meta-Analysis of Programs That Provide Education to Incarcerated Adults"](#)
- [U.S Department of Justice, Special Report: Sexual Victimization Reported by Adult Correctional Authorities, 2009-11](#)

## **Organizations Currently Working on Policy:**

- Critical Resistance
- Dignity and Power Now
- Justice Now
- Just Leadership USA
- Black and Pink
- Federal LGBT Criminal Justice Working Group
- Solitary Watch
- Vera Institute of Justice, Pathways from Prison to Postsecondary Education Project
- Center for American Progress
- Movement Advancement Project (MAP)
- American Civil Liberties Union

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