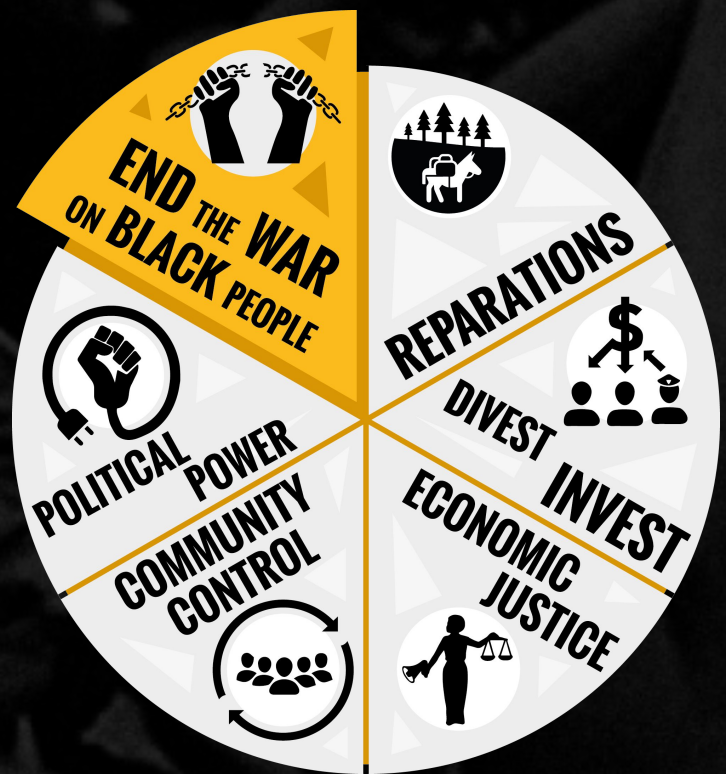


A VISION FOR BLACK LIVES

POLICY DEMANDS FOR BLACK POWER, FREEDOM, & JUSTICE

AN END TO ALL JAILS, PRISONS, IMMIGRATION DETENTION, JUVENILE DETENTION AND CIVIL COMMITMENT FACILITIES AS WE KNOW THEM AND THE ESTABLISHMENT OF POLICIES AND PROGRAMS TO ADDRESS THE CURRENT OPPRESSIVE CONDITIONS EXPERIENCED BY PEOPLE WHO ARE IMPRISONED

POLICY BRIEF 7 of 13



POLICY PLATFORM 1 OF 6

M4BL

THE MOVEMENT
FOR BLACK LIVES

END TO ALL JAILS, PRISONS, AND DETENTION SUMMARY



ACTION: AN END TO ALL JAILS, PRISONS, IMMIGRATION DETENTION, YOUTH DETENTION AND CIVIL COMMITMENT FACILITIES AS WE KNOW THEM AND THE ESTABLISHMENT OF POLICIES AND PROGRAMS TO ADDRESS THE CURRENT OPPRESSIVE CONDITIONS EXPERIENCED BY PEOPLE WHO ARE IMPRISONED

THE ISSUE:

The United States currently imprisons more human beings than any other country in the world, both in real numbers and as a percentage of the population.

The number of migrants, including children separated from their families, incarcerated in detention centers has reached record numbers. *While Black people represent about 13% of the population of the U.S., we represent upwards of 40% of people caged in jails, prisons, and juvenile detention. One in 3 Black men, and 1 in 2 Black trans women, will face incarceration in their lifetimes. Black women represent the fastest growing prison and jail populations. Black disabled people are disproportionately incarcerated in youth and adult jails, prisons, detention facilities, and state "hospitals." One in 2 Black women have an incarcerated loved one, and 1 in 9 Black children has an incarcerated parent.*

Incarcerated people are subjected to endemic physical, sexual, emotional, and spiritual violence, deprivation, degradation, violation, isolation, medical abuse and neglect, and forced labor, in gross violation of their civil and human rights. Mass criminalization, incarceration, detention, and deportation have devastating, generational impacts on individuals, families, communities, and generations of Black people.



THE DEMAND:

- ❖ A moratorium on all prison, jail, immigrant and youth detention construction, without an accompanying expansion of home arrest or GPS monitoring or other forms of e-carceration.
- ❖ Decommission all prisons, jails, and immigration and youth detention centers not currently imprisoning people, followed by demolition or repurposing for non-punitive purposes.
- ❖ Retroactive elimination of sentences of life without parole (LWOP) and sentences that will result in death by incarceration.
- ❖ Immediate release of all elders, people in comas, on life support, or in end of life care in prisons and jails.
- ❖ Immediate release of all political prisoners, and an end to the use of incarceration and solitary confinement as a tool of political repression..
- ❖ An end to all jails, prisons, immigration and youth detention, and civil commitment facilities.
- ❖ Additional actions are needed to reduce the daily harms faced by imprisoned people while they are incarcerated and to increase their ability to maintain their health and wellbeing while they remain imprisoned.

KEY FEDERAL LEGISLATION:

- ❖ *The People's Justice Guarantee*
- ❖ *Dismantle Mass Incarceration for Public Health Act*
- ❖ *Prison Litigation Reform Act*
- ❖ *REAL Act*
- ❖ *MERCY Act*
- ❖ *Mississippi Correctional Safety and Rehabilitation Act of 2020*



WHAT IS THE PROBLEM?

The United States currently imprisons more human beings than any other country in the world, both in real numbers and as a percentage of the population.

As of 2019, approximately 6,800,000 adults were incarcerated in prisons or jails or under the restrictions and surveillance of probation and parole. Over 2.3 million people were incarcerated in prisons, jails, youth detention or involuntary civil commitment.

The incarcerated population of the U.S. is larger than the population of its major cities, including Phoenix and Philadelphia.

- ❖ 63,000 of incarcerated people are in youth detention facilities, many for “status offenses” (acts such as missing school, breaking curfew, or running away that are only criminalized for youth).
- ❖ 22,000 people are involuntarily detained or committed to state psychiatric “hospitals” and civil commitment centers. Many have not been convicted of any offense, and some are being held indefinitely.

While recently state and federal prison populations have declined slightly, jail populations continue to swell.

The number of migrants incarcerated in detention centers has reached record numbers, with close to 55,000 migrants detained in about 200 detention centers across the country.




More than three quarters of the average daily migrant population in detention is being held in a for-profit detention facility. A record number of migrants have died in detention facilities since 2017, the majority in privately run facilities. A global record of 4,000 migrant children are currently in cages separated from their parents; close to 70,000 migrant children were held in U.S. government custody over the past year.

While Black people represent about 13% of the population of the U.S., we represent upwards of 40% of people caged in jails, prisons, and youth detention.


- ❖ 1 in 3 Black men, and 1 in 2 Black transgender women, experience incarceration at some point in their lifetime.
- ❖ Black women continue to be incarcerated at twice the rate of white women, and *represent the fastest growing prison and jail populations*. In some states, decreases in the population of people in men's prisons have been overshadowed by increases in populations in prisons for women.
- ❖ 1 in 2 Black women have an incarcerated loved one, and 1 in 9 children have an incarcerated parent.

The incarceration rate of LGBTQ people is three times that of the general population, and 42% of people in women's prisons and jails identify as lesbian, bisexual, or as having had a same sex relationship prior to incarceration.

People labeled with mental health disabilities and substance use, dependence, or addiction (noting that people often experience these conditions simultaneously), as well as people with physical disabilities, are overrepresented in carceral spaces. Official data indicates that **85% of youth in detention** and **30-50% of adults in jails and prisons** are disabled. Disability justice advocates emphasize that these figures likely represent an underestimate, as there is no truly accurate count of the total number of disabled people or people who experience substance dependence who are currently incarcerated.

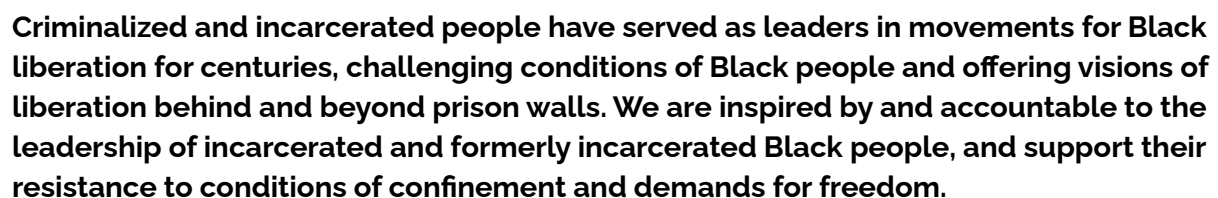


Everyone who comes into contact with the criminal punishment system is deeply harmed—and imprisoned disabled people experience exacerbated harms. Disabled incarcerated people are routinely subjected to all manner of abuse, neglect, and isolation, including physical and sexual abuse by guards, prison employees, and other incarcerated people, being doused with chemical sprays, shocked with electronic stun guns and restraint chairs, and strapped for hours and days to chairs or beds, and being held in solitary confinement for months and years at a time, creating and exacerbating existing mental health conditions and physical disabilities. This leads to higher rates of suicide and deaths among incarcerated disabled people, though the number of casualties is unclear in part because jails and prisons do not keep consistent or accurate records of deaths in custody. Additionally, incarcerated people who experience substance dependence are routinely denied medically assisted withdrawal, causing severe suffering and, in all too many cases, death.



The rate at which the U.S. imprisons its people and the staggering percentage of incarcerated people who are Black and disabled reflect a deep historical legacy of criminalizing Black and disabled people during slavery and in its aftermath as a means of controlling our bodies, labor, reproduction, and resistance.

They are also the products of our contemporary societal orientation toward criminalization, containment, and control as default responses to every harm, conflict, and need, and as the primary responses to conditions created by structural social, political, and economic oppression. The use of imprisonment and carceral control as responses to everything from homelessness, poverty, and participation in survival economies, to disability and substance dependence, to self-defense and self-managed care, to exercises of sexual, reproductive, medical, and gender autonomy, has devastating effects on criminalized and imprisoned people, their families, and their communities.



Criminalized and incarcerated people have served as leaders in movements for Black liberation for centuries, challenging conditions of Black people and offering visions of liberation behind and beyond prison walls. We are inspired by and accountable to the leadership of incarcerated and formerly incarcerated Black people, and support their resistance to conditions of confinement and demands for freedom.

SOLITARY CONFINEMENT

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**. Up to 100,000 people are currently being subjected to solitary confinement in the U.S., more than the entire prison populations of countries such as the U.K., France, and Germany.

Solitary is also often used as “the prison inside the prison,” as additional punishment for people already serving time, especially in cases of people working to educate or organize other imprisoned people, or people who have filed grievances relating to prison conditions. People held in solitary are typically subjected to 22 to 24 hour a day confinement in complete isolation, denied human contact, and are not allowed to participate in programming. They often experience “no touch torture,” including sensory deprivation, extreme temperatures, or forced insomnia. Pregnant people, people living with HIV, people who have reported sexual assaults, **people who have expressed suicidality**, and trans and gender nonconforming people are also routinely placed in isolation or “administrative segregation,” ostensibly for their own protection—with the same effects.

Solitary confinement is disproportionately used against disabled people, D/deaf, deaf-blind people, and people with mental (cognitive, intellectual, developmental and psychiatric) disabilities.

Punishment through solitary may be based on actual or perceived dissent, or failure to comply with rules or orders—regardless of whether a person’s disability interferes with their ability to understand or comply. It may also be imposed as punishment for refusing to take medication, or substance use and dependence. Solitary confinement also has a very disabling effect, particularly for people who are d/Deaf, deaf-blind, blind or people with mental health disabilities and/or substance dependency. The isolation of solitary increases the exposure of incarcerated people to abuse by prison and jail staff, and often leads to rapid deterioration in physical and mental health.



PHYSICAL AND SEXUAL ABUSE

Physical and sexual abuse are inherent in the operation of prisons, jails, and detention facilities—for instance, the strip searches incarcerated people, and often their families and other visitors, are subjected to on a regular basis are experienced as, and under any other circumstance would constitute, sexual assault. Additionally, physical and sexual violence perpetrated by, sanctioned, or facilitated by staff are rampant in prisons, jails, youth and immigration detention centers, and in state “hospitals” and nursing homes and group homes disabled people are committed to.

In addition to physical violence routinely used by staff to secure compliance, including use of batons, chemical sprays, and stun guns, imprisoned people are subjected to use of chair and bed restraints, which constitutes cruel, inhuman, and degrading treatment under international law. Use of shackling and restraints on D/deaf people, people who are nonverbal, and others with communication disabilities is particularly harmful, as it effectively eliminates or constrains their ability to communicate using sign language. Use of extreme temperatures, 24-hour lights, and substandard, rotten, or unhealthy food also perpetrates violence on the bodies of incarcerated people.

Disabled incarcerated people and people with unmet mental health needs 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. As a result, imprisoned people with mental health needs 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 experience higher rates of suicide. The abuse 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.

Black trans and gender nonconforming people are routinely incarcerated in jails, prisons, detention facilities, and state hospitals, nursing homes and group homes based on sex assigned at birth. As a result, they experience high levels of physical and sexual violence: 29% of *Black respondents to the 2015 U.S. Trans Discrimination Survey who had been to jail or prison reported being physically assaulted, and 32% reported being sexually assaulted while in custody.*



The imbalance of power between imprisoned people and guards also contributes to the use of both direct and indirect force to enact sexual violence. Guards exercise complete control over imprisoned people's safety and access to basic necessities, and are able to withhold privileges to coerce sex. Additionally, in many prisons for women, male guards are allowed to watch and regularly sexually harass and assault women and transgender people when they are dressing, showering, or using the toilet. 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 incarcerated women and transgender people 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 incarcerated people are reluctant to report staff sexual abuse for fear of retaliation.

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. As a result, nearly half of prison staff who sexually abuse incarcerated people face no consequences.

In cases where sexual abuse is confirmed, only 30% 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.


HEALTHCARE:

Prisons and jails are some of the few institutions required by the state to provide medical care to the people they incarcerate.

Yet health care services inside prisons, jails, immigration and juvenile detention centers are often absent or abysmal, in many cases leading to severe suffering, disability, and death, as well as a serious threat to the health of incarcerated people and their communities when contagious diseases go undiagnosed or untreated.

Prisons, jails, and detention centers across the country often fail to provide necessary medical screenings for mental disability or substance dependency. They also fail to provide appropriate substance abuse treatment, including medically assisted withdrawal, as well as quality and timely medical treatment for HIV/AIDS and Hepatitis C, dental treatment, and treatment for diabetes, cancer, respiratory conditions, and gender affirming care. Routine practices of sterilization, forced abortion or denial of abortions, denial of appropriate prenatal care, elder abuse, medical experimentation on imprisoned people, and denial of medically necessary care and hospice care violate incarcerated people's rights and dignity.

Although shackling of pregnant people is widely regarded as an assault on human dignity, as well as an unsafe medical practice, incarcerated people who are pregnant are still routinely shackled during pregnancy and childbirth. Restraining pregnant people at any time increases potential for physical harm from an accidental trip or fall. This also poses a risk of serious harm to the fetus, increasing 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 people is degrading, unnecessary, and a violation of human rights, only 22 states and the District of Columbia currently prohibit the practice by law.




Additionally, conditions inside prisons and detention centers, including overcrowding, widespread pest infestations, mold, unsanitary conditions, expired, rotten, and low quality and low nutritional value food, intermittent and contaminated water supplies, and intermittent electricity pose significant health risks.

Incarcerated people are often charged fees (ranging from \$2 to \$100 annually in Texas) to obtain medical care. ***A survey of over 1000 LGBTQ prisoners*** found that the vast majority (83%) of respondents reported being required to pay a fee to see a doctor, preventing 43% of respondents from seeking medical care when they needed it. Additionally, more than half of respondents were denied some medical care they requested. *Similarly, a 2011 national survey 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 transgender respondents reported denial of hormones while incarcerated.*

Over half (55%) of men and three quarters (73%) of women incarcerated in state prisons have a mental health condition, and the number of people with mental health needs in prisons, jails, and youth detention continues to rise. Yet prisons, jails, and immigration and youth detention facilities across the country do not offer adequate mental health treatment—just 1 in 3 people in state prison and 1 in 6 people in jail have received treatment for their condition since being incarcerated. They also fail to protect people with unmet mental health needs from physical and sexual abuse by staff members.

The state is under an obligation to provide necessary medical treatment, including mental health treatment, to incarcerated people, which is essential to ensuring healthier communities both behind and beyond prison walls. This doesn't mean that incarceration is the way to provide health care. Incarceration is increasingly being proffered as the "solution" to unmet mental health needs: there is a growing trend toward provision of mental health services through specialized "mental health jails" or in regular jail facilities like the Cook County jail in Chicago. Obtaining necessary medical treatment should not require incarceration, and ultimately jails are not appropriate sites for mental health treatment. Quality community-based mental health services should be freely provided and easily accessed through multiple modalities in communities to meet mental health needs in non-coercive or violent settings. Additionally, incarcerated people should also not be punished through disciplinary measures, up to and including segregation, for refusal to take medication.



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 have demonstrated a direct correlation between increased levels of educational 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.



PRIVATIZATION:

Some police and security forces, prisons, jails, and immigration detention facilities, and virtually all services inside prisons, including canteen, phone services, and commissary, have been privatized, placing incarcerated people at the mercy of corporations bent on profiting off of caged Black people. A 2014 Department of Justice Office of the Inspector General report found that private prisons had a 28 percent higher rate of assaults and were more likely to endanger incarcerated people's security and rights.

A 2019 report from the Office of Inspector General on ICE oversight of contracted detention facilities found that the agency routinely waives its own standards, leading to "egregious violations of detention standards."



COMMUNICATION:

Incarcerated people are denied communication with the outside world and loved ones through strict and often arbitrary rules and regulations governing conjugal, telephone, mail, video, and in person visitation, as well as regular surveillance and censorship by prison officials and third parties. Additionally, d/Deaf incarcerated people are often denied use of sign languages (on the pretext of prohibiting “gang signs”), hearing aids or hearing aid batteries, and cochlear implants, effectively rendering them unable to communicate inside or outside prisons.

Thanks to privatization of phones used by incarcerated people, the cost of contact with the outside world is prohibitively expensive, costing upwards of \$1 a minute.



FAMILIES OF INCARCERATED PEOPLE

The impacts of punishment ripple through families and communities. A Pew Charitable Trusts report found that 1 in 9 Black children have an incarcerated parent. 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.

These burdens fall particularly hard on women, who carry the financial burden of bail, fees and fines, for both themselves and incarcerated loved ones, the costs of visiting family members incarcerated in distant locations, and of financially and emotionally supporting incarcerated loved ones, and the social and political isolation of living with an incarcerated family member.



THE DEMAND

Continued caging and criminalization of Black people is inhumane and unacceptable. Action is needed at the local, state, and federal levels to break the United States' addiction to surveillance, policing, caging, and punishment as a remedy for the problems caused by structural racism and social and economic policies.

WE DEMAND:

- ❖ A moratorium on all prison, jail, youth, and immigration detention construction, without an accompanying expansion of home arrest or GPS monitoring and other forms of e-carceration.
- ❖ Decommission all prisons, jails, immigration, and youth detention centers not currently imprisoning people, followed by demolition or repurposing for non-punitive purposes.
- ❖ Retroactive elimination of sentences of life without parole (LWOP) and sentences that will result in death by incarceration.
- ❖ Immediate release of all elders, people in comas, on life support, or in end of life care in prisons and jails.
- ❖ Immediate release of all political prisoners.
- ❖ 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.
 - An end to prisoner strip searches and cavity searches, including visual cavity searches.
 - An end to all forms of abuse in prison and detention centers, including physical and sexual assault and use of electroshock, pepper spray, and restraints by staff.



THE DEMAND

- **Quality, free, and accessible healthcare for all imprisoned people, including durable medical equipment during incarceration and upon release, comprehensive mental health and voluntary drug treatment services, comprehensive reproductive, sexual, and gender affirming health care, including full and free access to abortion, condoms, hormone treatments, menstrual products, and PrEP, HIV, Hep C, and STI treatment for all imprisoned people, and an end to shackling and restraints of pregnant people and disabled people. Elimination of all fees for medical care in prison, jails, and detention facilities.**
- **Clean, accessible, and healthy environments free of contaminants and environmental hazards, mold, pests, and infestations.**
- **Full and free access to a variety of fresh, nutritional, healthy foods sufficient to fully nourish human beings, and to clean, uncontaminated water.**
- **An immediate end to prison slavery. All persons imprisoned in any place of detention under United States jurisdiction must be paid the prevailing wage in their state or territory for their labor.**
- **Policies and practices ensuring safe conditions for trans and gender nonconforming people in prisons, jails, youth and immigration detention, and state “hospitals” and other civil commitment facilities. Policies for housing imprisoned transgender people should be based on individualized assessments that presume housing is assigned according to gender identity (rather than legally assigned sex). However, in all cases, individual prisoners must also be allowed to specify their housing preference and have that preference respected, even if it seems to differ from their gender identity. LGBTQ prisoners should also have the option of being housed with other LGBTQ prisoners in their facility, although no resources should be spent on building additional bed space that would be used to incarcerate more individuals. Ensure access to gender affirming care, clothing, and commissary items consistent with gender identity.**



THE DEMAND

- Accessible educational opportunities for people in prison, including expansion of second chance Pell grants, and universal access to free, well-stocked, and up-to-date prison libraries. Prison education programs and legal resources must also be provided in a manner that is accessible to all disabled people, including people who use sign languages as their primary or only language. Books should be available in audio format, online, in sign languages, and in Braille for visually impaired people and people of all literacy levels.
 - An immediate end to all bans on entry of physical books into facilities and charges for reading e-books or using other electronic devices.
 - A right to full, in person, accessible, contact visitation, including relocation of incarcerated people to facilities closer to their families and legal and community support. Ensure free access to food during contact visits. Ensure equal visitation rights for incarcerated LGBTQ people. Increase visitation access between incarcerated grandparents and parents and their children and grandchildren, and between grandparents and incarcerated grandchildren.
- ❖ Policies and practices ensuring regular and consistent access to communication, including communication with other incarcerated people, without interference, surveillance, or censorship by staff. Ensure all prisoners can make free and unrecorded calls to domestic violence, sexual assault, LGBTQ, drug abuse, and legal referral hotlines. End all prison, jail, youth and immigration detention contracts with phone companies charging more than \$5.00 or 15 cents/minute for phone calls.



THE DEMAND

DEMANDS OF INCARCERATED PEOPLE

THE PELICAN BAY FIVE CORE DEMANDS:

1. Eliminate group punishments and administrative abuse.
2. Abolish the debriefing policy and modify active/inactive gang status criteria.
3. Comply with the recommendations of the US Commission on Safety and Abuse in America's Prisons and end long-term solitary confinement.
4. Provide adequate and nutritious food.
5. Create and expand constructive programming.





THE DEMAND

2018 PRISON STRIKE DEMANDS:

1. Immediate improvements to the conditions of prisons and prison policies that recognize the humanity of imprisoned men and women.
2. An immediate end to prison slavery. All persons imprisoned in any place of detention under United States jurisdiction must be paid the prevailing wage in their state or territory for their labor.
3. The *Prison Litigation Reform Act* must be rescinded, allowing imprisoned humans a proper channel to address grievances and violations of their rights.
4. The *Truth in Sentencing Act* and the *Sentencing Reform Act* must be rescinded so that imprisoned humans have a possibility of rehabilitation and parole. No human shall be sentenced to Death by Incarceration or serve any sentence without the possibility of parole.
5. An immediate end to the racial overcharging, over-sentencing, and parole denials of Black and brown humans. Black humans shall no longer be denied parole because the victim of the crime was white, which is a particular problem in southern states.
6. An immediate end to racist gang enhancement laws targeting Black and brown humans.
7. No imprisoned human shall be denied access to rehabilitation programs at their place of detention because of their label as a violent offender.
8. State prisons must be funded specifically to offer more rehabilitation services.
9. Pell grants must be reinstated in all U.S. states and territories.
10. The voting rights of all confined citizens serving prison sentences, pretrial detainees, and so-called “ex-felons” must be counted. Representation is demanded. All voices count.

HOW DOES THIS SOLUTION ADDRESS THE SPECIFIC NEEDS OF SOME OF THE MOST MARGINALIZED BLACK PEOPLE?

The most marginalized members of Black communities—low- and no-income people, disabled people, people whose mental health needs are not met, young people, transgender and gender nonconforming people, women, and people without stable shelter —are often most frequently targeted for arrest and imprisonment, and for abusive treatment and conditions while incarcerated.





FEDERAL ACTION:

- ❖ Pass the **People's Justice Guarantee** (H.Res. 702) and enact legislation to implement its provisions.
 - ❖ Pass the Dismantle **Mass Incarceration for Public Health Act**
 - ❖ Repeal the **Prison Litigation Reform Act**.
 - ❖ Eliminate Medicaid suspension during incarceration.
 - ❖ Pass the **REAL Act** restoring access to Pell grants for educational financial aid to imprisoned people in state and federal prisons.
 - ❖ Restore and expand federal Bureau of Prisons guidance providing for transgender people to be held in facilities according to their individualized assessment of their safety.
 - ❖ Pass the **MERCY Act** banning the use of long-term solitary confinement for federally adjudicated youth.
- ❖ The Federal Communications Commission must mandate universally accessible calling services for incarcerated people, including the installation of videophones, captioned telephones, and other auxiliary aids to support access to telecommunication for deaf, hard of hearing, deaf-blind, and speech challenged prisoners and their family members in all places of incarceration and detention. However, video visitation should never become a substitute or justification for limitations on in person visitation.
- ❖ Pass the **Disability Integration Act** to eliminate unnecessary indefinite institutionalization of people with disabilities.
 - ❖ Ensure that federal laws addressing prison conditions, such as the **Prison Rape Elimination Act**, are not weaponized against incarcerated people.
 - ❖ Ensure that parole, pardon, and commutation procedures are fully accessible to disabled people, and that disability is factored into decisions.



STATE ACTION

- ❖ End pretrial detention.
- ❖ End solitary confinement in state prisons.
- ❖ Eliminate the practice of sterilizing imprisoned and criminalized people.
- ❖ End shackling of D/deaf, pregnant, and disabled people in prison.
- ❖ Allow full and free access to comprehensive reproductive, sexual, and gender affirming medical care, hormones, hair-removal procedures, surgeries, clothing, and commissary items consistent with gender identity.
- ❖ Ensure access to adequate menstrual hygiene products and other hygiene products in all facilities.
- ❖ End policies restricting hair length and style (no more punishment for Afros, braids, dreadlocks, beards, long hair, short hair, etc. regardless of gender).
- ❖ Expand visitation access and contact with the outside world. Increase contact visits for all incarcerated people, and ensure access to food during contact visits. Ensure equal visitation rights for incarcerated LGBTQ people. Increase visitation access between incarcerated grandparents and parents and their children and grandchildren, and between grandparents and incarcerated grandchildren.
- ❖ Ensure free and unlimited access to phone calls.
- ❖ Ensure regular, consistent access to mail without censorship or surveillance.





STATE ACTION:

- ❖ Mandate installation of videophones, captioned telephones, and other auxiliary aids to support access to telecommunication for D/deaf, hard of hearing, D/deaf-blind, and speech challenged prisoners and their family members in all places of incarceration and detention. *However, video visitation should never be mandated as a substitute for in person visitation.*
- ❖ Eliminate media bans.
- ❖ End all bans on entry of physical books into facilities and charges for reading e-books or using other electronic devices. Increase access to LGBTQ, ethnic studies, and culturally appropriate reading material without punishment.
- ❖ Offer benefits counseling for all incarcerated people.
- ❖ Discharge people with weather-appropriate clothing at places with good public transportation during daylight hours.
- ❖ Increase parole grant rates, implement and expand compassionate release programs, particularly for aging prisoners and medical release programs.
- ❖ Repeal laws authorizing involuntary inpatient or outpatient commitment.
- ❖ Create plans for evacuating incarcerated people and staff safely prior to hurricanes and other disasters.
- ❖ Repeal laws that prevent currently or formerly incarcerated people from voting or changing their name.
- ❖ Ensure that commutation procedures are fully accessible to disabled people.
- ❖ Pass the **Mississippi Correctional Safety and Rehabilitation Act of 2020**.



LOCAL ACTION

- ❖ End money bail and pretrial detention.
- ❖ End solitary confinement in local jails.
- ❖ Eliminate the practice of sterilizing imprisoned and criminalized people.
- ❖ End shackling of D/deaf, pregnant, and disabled people in jails.
- ❖ Allow full and free access to comprehensive reproductive, sexual, and gender affirming medical care, hormones, hair-removal procedures, surgeries, clothing, and commissary items consistent with gender identity.
- ❖ Ensure access to adequate menstrual hygiene products and other hygiene products in all facilities.
- ❖ End policies restricting hair length and style (no more punishment for Afros, braids, dreadlocks, beards, long hair, short hair, etc. regardless of gender).
- ❖ Expand visitation access and contact with the outside world. Increase contact visits for all incarcerated people, and ensure access to food during contact visits. Ensure equal visitation rights for incarcerated LGBTQ people. Increase visitation access between incarcerated grandparents and parents and their children and grandchildren, and between grandparents and incarcerated grandchildren.
- ❖ Ensure free and unlimited access to phone calls.



LOCAL ACTION:

- ❖ Ensure regular, consistent access to mail without censorship or surveillance.
- ❖ Mandate installation of videophones, captioned telephones, and other auxiliary aids to support access to telecommunication for D/deaf, hard of hearing, D/deaf-blind, and speech challenged prisoners and their family members in all places of incarceration and detention. *However, video visitation should never be mandated as a substitute for in person visitation.*
- ❖ Eliminate media bans.
- ❖ End all bans on entry of physical books into facilities and charges for reading e-books or using other electronic devices. Increase access to LGBTQ, ethnic studies, and culturally appropriate reading material without punishment.
- ❖ Offer benefits counseling for all incarcerated people.
- ❖ Discharge people with weather-appropriate clothing at places with good public transportation during daylight hours.
- ❖ Repeal laws authorizing involuntary inpatient or outpatient commitment.
- ❖ Create plans for evacuating incarcerated people and staff safely prior to hurricanes and other disasters.
- ❖ Follow the lead of cities and counties, including Los Angeles, Seattle, and San Francisco, that are rejecting expanding their jail systems in favor of investing in community-based resources.

RESOURCES

- ❖ 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***
- ❖ Caged In: ***The Devastating Harms of Solitary Confinement on Prisoners with Physical Disabilities***
- ❖ ***EAR HUSTLE*** podcast
- ❖ Jeremy Woodie, ***Marshall Project*** report
- ❖ ***The Prison Strike*** Challenges Ableism and Defends Disability Rights
- ❖ ***In the Fight to Close Rikers***, Don't Forget Deaf and Disabled People
- ❖ ***The Unequal*** Price of Periods
- ❖ Louisiana Department of Corrections' ***Use of Hearing Imprisoned People as "interpreters" for Deaf Imprisoned People***
- ❖ Center for American Progress, ***Disabled Behind Bars***
- ❖ ***Disabled People Are Tortured in Solitary Confinement***, But Tides May Be Turning

ORGANIZATIONS CURRENTLY WORKING ON POLICY

**AMERICAN CIVIL
LIBERTIES UNION**

**ABOLITIONIST LAW
CENTER**

BLACK AND PINK

**CENTER FOR
AMERICAN PROGRESS**

**COALITION TO
ABOLISH DEATH BY
INCARCERATION**

**CLOSE THE
WORKHOUSE (ST.
LOUIS, MO)**

**CAMPAIGN FOR
PRISON PHONE
JUSTICE**

**DIGNITY AND POWER
NOW**

**ESSIE JUSTICE
GROUP**

**FEDERAL LGBT
CRIMINAL JUSTICE
WORKING GROUP**

**FAMILIES FOR JUSTICE
AND HEALING**

BEHEARDDC

ORGANIZATIONS CURRENTLY WORKING ON POLICY

JUSTICE NOW

**JUST LEADERSHIP
USA**

**MOVEMENT
ADVANCEMENT
PROJECT (MAP)**

NO NEW JAILS

**NATIONAL COUNCIL OF
INCARCERATED AND
FORMERLY
INCARCERATED WOMEN
AND GIRLS**

**PEOPLE'S ADVOCACY
INSTITUTE (JACKSON,
MISSISSIPPI)**

**PRINISON POLICY
ITIATIVE**

SOLITARY WATCH

AUTHORS & CONTRIBUTORS

- ❖ *Rachel Herzing, Center for Popular Education*
- ❖ *Andrea J. Ritchie, Interrupting Criminalization*
- ❖ *Talila “TL” Lewis, HEARD, Harriet Tubman Collective*
- ❖ *Dustin Gibson, Harriet Tubman Collective*
- ❖ *Mark-Anthony Clayton-Johnson, Funders for Justice*
- ❖ *Marbre Stahly-Butts, Law for Black Lives*
- ❖ *Gina Clayton-Johnson, Essie Justice Group*
- ❖ *Dionna King, Drug Policy Alliance*
- ❖ *Rachel Gilmer, Dream Defenders*
- ❖ *Crystal Peters, Bronx Defenders*
- ❖ *Marbre Stahly-Butts, Law for Black Lives*



JUSTICE!

RELATED BRIEFS

**END MONEY BAIL AND
PRETRIAL DETENTION**

**END THE WAR ON
BLACK COMMUNITIES**

**END THE WAR ON
BLACK WOMEN**

**END THE WAR ON
BLACK MIGRANTS**

**END THE WAR ON
BLACK TRANS
PEOPLE**

**END THE WAR ON
BLACK HEALTH**

**END THE WAR ON
BLACK YOUTH**

A VISION FOR BLACK LIVES

POLICY DEMANDS FOR BLACK POWER, FREEDOM, & JUSTICE



M4BL.ORG

M4BL

**THE MOVEMENT
FOR BLACK LIVES**