## Testimony of Dr. Frances Geteles, PhD., Clinical Psychologist

Presented before the Board of Corrections of New York City Regarding the Proposed Rules for Restrictive Housing in Correctional Facilities

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My name is Frances Geteles and I am a Clinical Psychologist, licensed in New York State. Since 1993, I have been a member of the Asylum Network of Physicians for Human Rights (PHR) providing psychological assessments for survivors of persecution and torture. That work led me to also become a member of the Campaign for Alternatives to Isolated Confinement (CAIC). As a member of CAIC, I have been working with colleagues to reform the way solitary confinement is used in the prisons and jails throughout New York State. These two areas of work are closely related since, as you might know, The UN, in its Standard Minimum Rules for the Treatment of Prisoners (the Mandela Rules), has declared prolonged solitary confinement to be a form of torture. It has also indicated that solitary confinement should not be used with people who have not been convicted, but are awaiting trial.

In the introduction to your newly proposed rules you say "these proposed rules end the inhumane practice of solitary confinement ..... replacing it with a more humane alternative." Sad to say, if you approve these rules, you will accomplish neither of the claims you make in this statement.

I am part of the HALT Solitary Campaign, but to be clear, our organization's actual name is the Campaign for Alternatives to Isolated Confinement, a name that makes it clear that we are opposing all forms of extreme isolation, because it is that condition – extreme isolation -- which is the source of the very severe mental and physical harm which is caused by the way in which you have been treating the people in your custody. Solitary confinement is the most commonly used name, but there are many others. You yourselves have called it Punitive Segregation (PSEG) or Enhanced Supervision Housing (ESH), and now you are planning to build a new model called the

Risk, Management and Accountability System (RMAS) to which you will be subjecting vulnerable human beings, and which, once again, is characterized by the torture of extreme isolation. No matter what you claim, these new rules are not "ending the practice of solitary confinement."

This is clear if we examine the nature of the RMAS units (especially level I) which you plan to build to hold individuals who are accused of being violent. An individual will be held in a small cell and when he is supposedly being given "out of cell" time, he will simply be allowed to move into an attached, slightly larger cell, in which he might - or might not – have a neighbor who he can see and talk to. So, where s/he is supposed to have out of cell time in which there is an opportunity to engage in meaningful social interactions and helpful programs, s/he is not actually being allowed either of those opportunities. The limited description we have had of these units (due to your failure to provide pictures or draft models) and the very limited possibility of any kind of genuine human interaction, makes it clear that this is simply another form of extreme isolation (or solitary confinement).

To make matters worse, there is no clear limit to the time someone might stay in such a unit. At one of the required periodic reviews, at which no legal representation is also required, someone can claim that the individual is likely to be violent again in the future and this will be sufficient basis for keeping her/him in isolation. It is not clear who gets to make such a claim or what foundation of knowledge or human understanding it might be based on. So often we have heard formerly incarcerated people describe how they were never told there was a hearing at which they could defend themselves, or we have heard them describe how a particular officer might have disliked an individual or reported an incident inaccurately with the result that a person in custody was punished inappropriately. Why aren't you listening to this testimony and giving it appropriate weight?

Given the problems with your new rules as described above, there is a strong likelihood that you will be continuing to torture the people in your custody and thereby causing the same psychological problems we have warned you about so often. It will cause increased anger and rage, depression, anxiety, cognitive problems or even episodes of decompensation and full blown psychosis.

Your claim that these new rules are more humane than the old rules is also subject to questioning. When we say something is humane, we mean that it is marked by compassion and kindness and is not inflicting pain, suffering or injury. Where is any of that in your rules of how the jails you supervise are to be run?

We live in a society that is racist and unjust and most of the people in your custody are the victims of that racism and injustice. This means that their lives have been filled with deprivation and trauma and many are already suffering with anxiety and depression. As a psychologist, I would advise that, if you truly want to create a safe environment, you need to understand that and be sure that all the jails staff understands it too. As far as I can tell, this matter is not even considered – certainly not in these rules. All that we see here is more of the same – control/punish, control/punish, control/punish – and an "US against Them" attitude. You seem to make no effort to help the staff to understand that there are other ways to work with people, to calm the tension, and to reduce the violence. They must be required to learn these things and helped to put them into practice. Where that has been done, positive results have been reported, and some correctional staff have spoken of the improved environment. (See the bios of Steve Blakeman and Travis Trani in "Six by Ten: Stories from Solitary" edited by Taylor Prendergrass and Mateo Hoke).

In view of everything I've said, I strongly urge you not to approve these rules, but instead to go back to the drawing board and initiate rules that are truly more understanding and humane and that end the use of isolated or solitary confinement.