NEW YORK CITY

BOARD OF CORRECTION

CAPA HEARING RE RESTRICTIVE HOUSING PROPOSED RULE

Public Hearing 125 Worth Street New York, NY 10013 December 16, 2019 5:30 p.m. - 8:00 p.m.

MEMBERS PRESENT:

Jacqueline Sherman, Interim Chair

Stanley Richards, Vice-Chair

Felipe Franco

Michael J. Regan

Tino Hernandez

Jennifer Jones Austin

Michele Ovesey, Acting Executive Director

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December 16, 2019

(The public board meeting commenced at 5:58 p.m.)

MS. JACQUELINE SHERMAN: Good evening 4 5 and welcome to the second special public hearing on the Board's proposed rules on restrictive 6 7 housing, re- restrictive housing. We scheduled this hearing to begin at 5:30 p.m. to accommodate 8 9 a public request that we hold a hearing after 10 work hours. We are grateful for the public 11 comment we have received so far, including the 30 12 people who spoke at our first public hearing 13 earlier this month. We continue to learn from 14 all of you and the restrictive housing rules will 15 be improved by your input.

16 The proposed rules, which were publicly 17 posted on October 29th, are designed to ensure 18 that people in the Department's custody are 19 placed in restrictive housing in accordance with 20 due process and procedural justice principles and 21 are confined in the least restrictive setting and 22 for the least amount of time necessary to address 23 the specific reasons for their placement and to 24 ensure their own safety as well as the safety of

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2	staff and other people in custody.		
3	To encourage input from people in		
4	custody, correction officers and other facility		
5	staff, the Board worked with the Department to		
6	post fliers in the jails announcing the proposed		
7	rules and explaining how to obtain a copy and		
8	submit comments. The Department posted fliers in		
9	each jail's staff locker room, law library, visit		
10	area and clinic. The Department is keeping a		
11	copy of the proposed rule and related materials,		
12	which includes the statement of basis and		
13	purpose, in each facility's law library and		
14	office of the Deputy Warden of administration.		
15	The Board thanks the Department for its		
16	assistance in this important outreach effort.		
17	Additionally, if people in custody, correction		
18	officers or other jail staff call the Board and		
19	request a copy of the proposed rule package, we		
20	will mail them a copy. We also have created a		
21	voice mailbox so that anyone, including people in		
22	custody and people who work in the jails, can		
23	call and leave comments via voicemail.		
24	The Board recognizes the importance of		

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capturing the voices of people in custody and 2 uniformed staff about what it's like to reside in 3 restrictive housing and what it's like to work 4 5 there. Thus at the request of the Board's ad-hoc rulemaking committee, Board staff interviewed 6 7 correction officers and people in custody in various restrictive housing units as part of the 8 9 fact-finding and rules development process. The Board is grateful to the correction officers and 10 11 people in custody who shared their experiences 12 with Board staff, as well as Board staff's 13 dedicated work in this regard.

The Board also encourages jail staff and people in custody to make their views known during the CAPA process. The Board will review all comments, including comments submitted anonymously via phone or in writing.

Finally we recognize that not all people who want to provide input on the rules wish to present public testimony or submit written testimony. If you or someone you know would like to comment, but the methods we've set up don't work for you, please reach out to Board staff and

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2	we will work with you to find a way to best		
3	receive your comment. You can contact the Board		
4	by calling 212-669-7900 or e-mailing at		
5	boc@boc.nyc.gov. We are also exploring		
6	additional ways to expand avenues for comment,		
7			
	such as soliciting feedback from correction		
8	officers and people in custody onsite at Rikers		
9	Island.		
10	Today we will hear testimony from the		
11	public and we will continue to welcome written		
12	testimony via mail, e-mail, fax or posting to the		
13	city's rulemaking web page through January 3,		
14	2020.		
15	The Board will carefully consider all		
16	comments made at the hearings and submitted in		
17	writing or voice mail and determine whether		
18	revisions should be made to the proposed rules.		
19	The Board will submit final rules for		
20	certification by the Law Department in time for a		
21	final Board vote at a future public meeting.		
22	Under CAPA, any rules adopted by the Board will		
23	take effect 30 days after the Board vote.		
24	Before we begin our public comment		

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tonight, I must make two difficult announcements. 2 3 The first is that the Board is deeply concerned about the attempted suicide of Nicholas 4 5 Feliciano, a young man who is in DOC custody. We send our thoughts to Nicholas and his family at 6 7 this difficult time. The system also must urgently learn from this tragedy. Self-harm and 8 9 suicide are public health issues in jails and 10 prisons across the country.

11 The Board's new minimum standards 12 regarding serious injury reporting requires new 13 monthly public reports on self-harm. We will 14 begin publishing these on our website soon. The Board has begun its investigation into this 15 16 suicide attempt using a sentinel events model 17 that impartially reviews the incident to identify 18 policy and practice improvements needed to 19 prevent future acts of self-harm or suicide.

While our investigation has just begun, it is clear that we will need to review how the Department and CHS respond to acts of self-harm and suicide. Each act of self-harm must be treated seriously and has the potential to cause

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2	death or lifelong injury.		
3	The second announcement concerns a		
4	recent death in custody. It is our practice to		
5	announce each death, including the date, facility		
6	and age of the deceased. On November 23, 2019 a		
7	55-year old man in the Department's custody died		
8	at Elmhurst Hospital after being transported		
9	there from AMKC. The Board is reviewing this		
10	death as we do all deaths in custody.		
11	We will now turn to today's agenda to		
12	hear public comment on the restrictive housing		
13	proposed rule. I will call three speakers at a		
14	time. While the first speaker is providing		
15	testimony the other two people can sit in the		
16	front row. Speakers will be limited to four		
17	minutes and the iPad on the stage will tell you		
18	how much time you have left. First, I'm going to		
19	call Council Member Daniel Dromm, Council Member,		
20	good evening.		
21	COUNCIL MEMBER DANIEL DROMM: Good		
22	evening. First, I want to express my gratitude		
23	to the Board members and the staff for your work		
24	on this issue. The proposed rules show a		

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concerted effort to incorporate the concerns that many individuals and entities, including my, myself, have expressed over the years. I would however encourage the Board to go a much needed step further by adopting the following basic premises.

First, recognize that solitary 8 9 confinement or whatever name the DOC decides to 10 brand it is a complete and utter failure and must 11 end. Second, seize the opportunity to replace 12 the existing system and its attendant culture of 13 brutality and violence, just as the physical 14 facilities are being replaced with smaller ones 15 focused on reentry. Almost all individuals in 16 custody will at some point return to their 17 communities, our communities. And is incumbent 18 upon us to instill the tools these individuals 19 need to manage stress and conflict as positively 20 as possible.

21 Specifically, I ask that the rules be 22 amended to end restrictive housing for non-23 criminal infractions and instead implement 24 restorative measures wherever possible. In no

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case should any placement exceed 15 days, based on the U.N. standard. And reserve restrictive housing for temporary separation needed to secure facilities when facing imminent documentable threats. Facilities should rely on therapeutic alternatives that minimize punitive aspects for those with a wide range of mental health issues. There is precedent for this approach, namely the CAPS units.

11 I also want to talk about the need for 12 procedural reforms, which are critical given the 13 widely documented abuses of power in DOC 14 facilities. The rules should, among other 15 things, ensure lawyers are present for all 16 proceedings and that truly independent 17 adjudicators make the critical decisions and 18 ensure that rights are read to individuals where 19 there is any possibility of a future criminal 20 prosecution based on the incident in question. 21 Finally, there should never be placement 22 in restrictive housing unless there is a clear

> pa- path to release into a less restrictive unit. I applaud the Boar-, the Board's stated goal in

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2	accordance with the Mandela rules of placing		
3	restrictions on people in custody that are		
4	limited to those required to achieve the		
5	appropriate objectives for which the restrictions		
6	are imposed.		
7	However the DOC has long struggled to		
8	respect the basic human rights of individuals in		
9	its custody. As this process has been underway,		
10	the New York Times reported, as you have		
11	mentioned yourself, Madam Chairperson that COs		
12	stood idly by while teenager Nicholas Feliciano		
13	tried to hang himself. An intensive level of		
14	oversight is absolutely necessary, given the		
15	tragic history of our jails.		
16	I have worked closely with and		
17	befriended several survivors of this government		
18	sanctioned torture. I pray that this Board will		
19	hear their cries and also remember those who have		
20	not survived and end the practice of solitary		
21	confinement once and for all. Thank you.		
22	[APPLAUSE]		
23	MS. SHERMAN: Thank you, Council Member.		
24	Council Member Keith Powers. Good evening,		

Council Member.

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COUNCIL MEMBER KEITH POWERS: 3 Good evening, thank you and good evening everybody and 4 5 thank you everybody who's here tonight. I'm City Council Member Keith Powers, chair of the New 6 7 York City Council's Committee on Criminal Justice. Before I start my testimony, I just 8 9 want to thank the Board for holding an evening 10 meeting and holding multiple hearings, because I 11 do think there are many individuals who want to 12 be here and are impacted either because of their 13 workday or not being able to make it on a specific day, so I want to thank you for holding 14 15 multiple hearings and at both morning and at 16 night.

17 In June I joined Speaker Corey Johnson 18 in a letter to the Board requesting for you to 19 take up rulemaking on this issue. So, I'm 20 encouraged that the Board of Correction is here 21 today and has started this process to update 22 restrictive housing rules in our city jails. New 23 York City has been a leader in a number of issues 24 related to the criminal justice system, but most

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2	notably our reduction in solitary confinement and
3	restrictive housing.
4	And I do want to note, I just off, off,
5	off testimony today, I do think it's important to
6	remind ourselves about our leadership in terms of
7	this issue and where we are today relative to
8	many other jurisdictions. And I appreciate the
9	Board's effort to create a clear set of
10	guidelines to limit the use of solitary
11	confinement or restrictive housing, however you
12	want to call it, a practice which has been
13	condemned by international bodies, like the
14	United Nations, for its psychological effects and
15	failure to address underlying causes of violence
16	or to prevent recidivism.
17	I've submitted longer testimony, which
18	you have that highlights many of the concerns
19	that folks have about restrictive housing and
20	you're going to hear from many my colleagues,
21	just as you have, including the speaker of the

City Council about the dangers of restrictive housing particularly solitary confinement.

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I'm going to focus my testimony on

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2 specific parts of the proposal that I hope the Board will consider as it moves forward with 3 rulemaking and the proposal you have before you 4 5 today. First, the Board should clarify qualifications for punitive segregation and 6 7 strengthen the exclusions. Throughout the Board rules, as I was reading them even today, it 8 9 references grade-one violent infractions as the 10 standard for placement in punitive segregation 11 without a clear definition of what rule, of the 12 rules on what constitutes a grade-one violent 13 infraction. In fact, the definition of a grade-14 one violent infraction that I saw defines it as 15 an infraction that plays an individual, pla-16 places an individual into punitive segregation. 17 It is not, does not seem there is a clear 18 definition or a clear outlining in the actual 19 rulemaking of what are the infractions that would 20 put you in there.

21 Second, I would hope that the Board will 22 also clearly delineate what constitutes -- sorry, 23 additionally people with, in, in -- there are 24 exclusions for people in punitive segregation

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level two that include people with serious
medical conditions, intellectual disabilities,
elderly individuals and pregnant women. They
obviously should not be placed in punitive
segregation and we hope that those will also be
reflected in punitive segregation one as well.

8 Second, Council Member Dromm mentioned 9 it, but individuals sent to punitive segregation should also be allowed to have legal 10 11 representation at their hearing. In the 12 conversations I've had with folks, stakeholders, 13 I understand there are some immediate challenges 14 to doing that. But the minimum, the DOC and the 15 BOC you should explore pilot program immediately 16 to be able to provide representation in our city 17 jails.

18 Sort of third to that is there should be 19 also be an appeals process for placement in 20 punitive segregation and, and timely reviews that 21 include program and clinical staff as well. 22 Fourth, there's policies here around

lock-in with a maximum time for lock-ins beforeapproval is required by the Board. I think there

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2	are many of us who aspire to assure that lock-ins
3	are not used as an alternative method for
4	isolating individuals and would like to see some
5	of the policies strengthened about lock-ins to
6	both time and process for lock-ins.
7	Fifth, the Board should explicitly
8	require congregate programming, individualized
9	needs assessments in restrictive housing units
10	that address root causes of violent behavior.
11	That will be re-, crucial to creating real
12	rehabilitation and that program should include
13	therapeutic and restorative justice programs.
14	Finally, there is an end to restraint
15	desks, however I think two years is a long time
16	frame for implementation of that and would ask
17	that the Board end those restrictive on a faster
18	timeline or at least provide us a clear
19	justification for why that's not possible. You
20	know, I just want to say, I, I, you know, since
21	we've done this letter asking for the Board to
22	take it up, I've met with many individuals who

take it up, I've met with many individuals who have been placed in solitary confinement as well as those from the Department, the Board, the

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2	correctional officers and advocates for criminal
3	justice reform. And I do believe that we have to
4	pro-, you know, approach this issue carefully and
5	comprehensively. You're going to hear from many
6	people today about the dangers, of the harms that
7	could be caused by long term, especially long-
8	term solitary confinement. I've tried to make
9	some recommendations that are, you know,
10	implementable today. But I, I do want to
11	recognize practical considerations in our
12	implementation of those and I do, as we've had
13	this conversation and you'll hear today as well,
14	do actually, you know, do agree that the safety
15	of all individuals who work in our city jails is,
16	is, is very important. It's important that we
17	have an environment and rules and rulemaking and
18	laws that keep both the staff and incarcerated
19	individuals safe and I, I do ask the Board to
20	consider that as well.
21	The op-, you know, but the opportunity
22	here to institute sweeping reforms to restrictive
23	housing practices at DOC does not co- come often,

and we know through this process that it is

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2	difficult to come to. So, it's crucial that we
3	get it right. And as the city and the state are
4	moving towards landmark re-, landmark reforms to
5	our correctional system we should ensure these
6	re- reforms uphold this city's commitment to a
7	fair and more humane justice system and I believe
8	this rulemaking is a crucial step towards that
9	goal. Thank you.
10	MS. SHERMAN: Thank You, Council Member.
11	[APPLAUSE]
12	MS. SHERMAN: Council Member Carlina
13	Rivera. Good evening, Council Member.
14	COUNCIL MEMBER CARLINA RIVERA: Hi.
15	Good evening, everyone. Thank you. Thank you
16	for hosting this after work, being very inclusive
17	in trying to create a process that I know
18	includes, has included heated argument and debate
19	and a lot of passion. And I just want to thank
20	everyone for their time.
21	Thank you for the opportunity to submit
22	testimony this evening. I'm here once again to
23	call on the Board to abolish solitary confinement
24	in all forms in city jails. The Board of

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Correction must seek alternatives that respect the safety and humanity of all incarcerated people instead of the piecemeal reforms before us today that will not protect the lives of every New Yorker. Fifteen days of solitary confinement is 15 days too many and the Board needs to remove exceptions to the standards for solitary.

9 We all know the unnecessary tragedy that 10 someone whose names I don't typically invoke 11 because I try to respect that human experience 12 and their families but this one particular 13 example of Layleen Polanco and her experience 14 during the last nine days of her life in solitary confinement, I am unable to shake and where she 15 16 ultimately died from complications that could 17 have been prevented.

18 Should that appalling and tragic example 19 not be sufficient for our case, you might 20 consider studies that have shown solitary to be 21 unjust and inhumane. The New York Times analyzed 22 nearly 60,000 disciplinary cases in New York and 23 found that black inmates were 65 percent more 24 likely to be sent to solitary confinement

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compared to white inmates. Solitary cannot continue in any form, given the widespread evidence that it causes severe and long-lasting psychological, emotional and physical harm.

We heard of its devastating impact loud and clear at the last hearing from formerly incarcerated people, family members of currently incarcerated people, legal experts, faith leaders and community members. I would also like to note the absence of the Department of Correction at the previous hearing on December 2nd and that failure to engage, because that is why we are here, engagement, and not isolation, that absence leaves me with serious concerns about intentions to carefully consider the proposed changes and the lived experiences of survivors of solitary.

As a city that aspires to uphold progressive and inclusive ideals, New York City must honor the rights of all people who are incarcerated. Policy alternatives to the BOC's proposal already exist. I strongly urge the Board of Correction to adopt the HALT Solitary Campaign's blueprint to end the practice. The

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2	evidence against its continued use is simply too		
3	compelling, compelling and the stakes are too		
4	high.		
5	Therefore, we must pursue the		
6	alternatives before this system experiences		
7	another tragedy. Thank you very, very much for		
8	allowing me to speak today.		
9	MS. SHERMAN: Thank you.		
10	[APPLAUSE]		
11	MS. SHERMAN: Brenda Cooke from the		
12	Department of Correction, the Chief of Staff,		
13	good evening.		
14	MS. BRENDA COOKE: Good evening and		
15	thank you for letting me have the opportunity to		
16	speak. I'm encouraged by the Board's commitment		
17	to meaningful corrections reform in the City of		
18	New York. We at the Department of Correction are		
19	very encouraged by the productive dialogue		
20	between our agencies in the formulation of the		
21	proposed restrictive housing rules published by		
22	the Board that we're here talking about today.		
23	As you're aware, the New York City		
24	Department of Correction in collaboration with		

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the Board has implemented some of the most progressive restrictive housing reforms in the nation over the past six years, many of which have been highlighted here today. As an agency the Department is not new to significant and systemat- systematic reform and the hard work such progress requires.

9 In 2013, we eliminated the use of punitive segregation for all seriously mentally 10 11 ill individuals in custody. In 2014, we 12 eliminated the use of punitive segregation for 13 adolescents aged 16 to 17. In 2015, the use of 14 punitive segregation for adults in Department's, 15 the Department's custody was fundamentally 16 transformed by the creation of a tiered system of 17 proportional responses and long term management 18 alternatives. Previously, punitive segregation 19 had been the only proposed response to all infractions. In 2015, punitive segregation two 20 21 was created in response to nonviolent or grade-22 two infractions. Punitive segregation two 23 individuals receive seven hours out of cell each 24 day. With the addition of this unit, punitive

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segregation now narrowly applies to only violent 2 3 grade-one infractions. In June 2016, the 4 Department led the nation in the elimination of 5 punitive segregation for all 18-year-olds. The Department further led the elimination of 6 7 punitive segregation nationwide for the remaining 8 young adult population 19 to 21-year-olds in October of 2016. 9

We thank the Board for the support that 10 11 the Department received in implementing these 12 tremendous reforms. The Department has further 13 implemented some of the most progressive punitive 14 segregation sentencing reforms in the nation. 15 For example, all nonviolent refra-, all violent 16 infractions, with the exception of assaults on 17 staff that cause serious injury, currently 18 results in a maximum penalty of 30 days. Most 19 violent infractions however result in penalties 20 of fewer than 30 days and take the individual's 21 infraction history into account during 22 sentencing. Further infractions from previous 23 incarcerations are no longer applied to an 24 individual's current incarceration.

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2	This practice differs vastly from the
3	practices of many correction departments across
4	the country where indefinite punitive segregation
5	sentence lengths are imposed in response to non-
6	serious or nonviolent behavior.
7	In June 2019, the Department implemented
8	an out of cell structure in punitive segregation
9	that affords all individuals a minimum of four
10	hours out of cell each day, including three hours
11	for engagement and outdoor recreation and
12	congregate activities, where additional hours may
13	be provided for mandated services. As of June
14	2019, the Department no longer operates punitive
15	segregation units with 22 hours of lock-in.
16	This differentiates the Department's
17	punitive segregation units from those defined as
18	solitary confinement under the United Nations
19	Mandela rules. We're incredibly proud of these
20	achievements and the Department's place as a
21	national champion of restricted housing reform
22	and must recognize the work and dedication from
23	staff that has proven so integral to implementing
24	these changes. We're incredibly thankful to our

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partners at the Correctional Health Service, whose creativity and passion for this important work has led to the creation and co-management of clinical alternatives to punitive segregation, otherwise known as CAPS units.

CAPS units provide standard general population lockout time 24/7, on unit clinical support for individuals with serious men-, serious mental illness who commit violent 11 infractions and previously would have qualified 12 for punitive segregation placement prior to the aforementioned reforms. 13

14 The Department staff have also worked 15 incredibly hard to create alternatives to 16 punitive segregation for young adults, such as 17 enhanced supervision housing and the secure unit. 18 These units provide for the safe management of 19 young adults with the most violent behavior in 20 custody, while ensuring access to rehabilitative 21 programming designed to address root causes of 22 violent behavior and criminogenic risk factors. 23 The Department, in collaboration with 24 the Board, has made significant improvements to

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2	these units in order to ensure consistent access
3	to meaningful services and a clear pathway for
4	level or phase progression and re-entry into
5	general population.
6	The Department frequently receives
7	visits from correctional leaders representing
8	agencies from across the country who are
9	interested in replicating these reforms and
10	punitive segregation alternatives in their own
11	jurisdictions. All of these achievements and the
12	dedication from staff that make them a reality
13	have resulted in fundamental changes to the
14	operation of punitive segregation units and a
15	landmark reduction in the use of punitive
16	segregation. The Department has approximately
17	eighty percent fewer people in punitive
18	segregation today than we had five years ago.
19	We're not the same department that we
20	were just a few years ago. With these
21	achievements, they represent significant progress
22	but we recognize the need to go further. We are

but we recognize the need to go further. We are eager to continue building upon these reforms and we support many of the proposed rules made by the

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Board, including the elimination of the automatic 2 \$25 fine imposed on guilty infractions; the 3 further limitation of punitive segregation 4 5 sentence lengths while maintaining a maximum of 60 days for individuals who cause serious harm to 6 7 DOC, CHS or program provider staff and volunteers; the increase in the frequency of 8 reviews for individual in the most restrictive 9 10 levels of ESH, thereby potentially reducing the 11 time a person spends in a program desk; further 12 changes to the use of program desks during 13 lockout in facility housing units; and the provision of additional levels of review and 14 15 support for the due process around restrictive 16 housing placements.

17 While we support these reforms and the 18 rulemaking process, we acknowledge there are 19 still areas of proposed rulemaking where 20 additional discussions is needed in order to 21 ensure the Department is able to safely and 22 effectively operationalize the final rules. 23 These include, for example, the potential for 24 individuals who commit multiple serious

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infractions within the same few months to go 2 without meaningful disciplinary action for each 3 act, due to the proposed limits to the punitive 4 5 segregation backlog and the six months sentence limit; reduced incentives for level progression 6 7 in ESH, the regulation of de-escalation protocols which are a security operation, and not a form of 8 9 restrictive housing; restrictions on strategies for managing individuals who have persistently 10 11 engaged in serious violence; and the requirement 12 to videotape various due process refusals which 13 will duplicate current mechanisms for accurate 14 recording while requiring substantial spending 15 that may otherwise be utilized for expanded 16 programming and services.

17 While these latter impacts require 18 further discussion in the coming weeks, we 19 acknowledge that the rulemaking process is 20 important and fair. We are confident this 21 process will produce a set of proposed rules that 22 will ensure that individuals who commit serious 23 violence while in the Department's care receive 24 an appropriate consequence that imposes the least

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Page 29 1 December 16, 2019 2 restrictive possible and maintains safety for 3 everyone. We are committed to upholding values of 4 5 rehabilitative and procedural justice and we believe these rules are aligned with that 6 7 commitment. The safety of all people who stay and work in our facilities remains our ultimate 8 9 concern and we look forward to continuing our 10 discussions with you, the Board, and as we work 11 to finalize rules that are safe and further 12 affirm the Department's place as a national and 13 global leader on restrictive housing reform. 14 Thank you very much. 15 MS. SHERMAN: Thank you. I'll now call 16 Ben Farber from Correctional Health Service. 17 Good evening. 18 MR. BEN FARBER: Good evening, Ben 19 Farber, Correctional Health. We applaud the 20 Board's Correction, the Board of Correction's 21 intent to set parameters in an effort to ensure 22 that punitive segregation is used judiciously and 23 to establish explicit restrictions in order to 24 help mitigate the detrimental effects of

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confinement. CHS is grateful to the Board for its partnership in this endeavor and for reflecting CHS's input in the proposal. The proposed rules include provisions to expand the mental health and medical exclusions for punitive segregation, exclusions for punitive seg one would expand to include pregnant individuals, individuals within eight weeks of pregnancy outcome, individuals caring for a child in the Department of Corrections' nursery program and individuals aged 55 and older. The mental health exclusion for individuals diagnosed with serious mental illness would broaden to include those diagnosed with an intellectual disability, conforming with CHS current practice.

17 The proposal underscores a separate 18 exclusion for individuals with serious medical 19 conditions from punitive segregation one and two. 20 Although this exclusion already exists in the BOC 21 minimum standards, the term serious medical 22 conditions has never been clinically defined. As 23 a result, the exclusion has proven to be 24 challenging to implement and monitor. To address

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this and help ensure implementation of this medical exclusion moving forward, the Board has requested CHS to identify certain medical conditions and corresponding markers of acuity and advancement of disease for which separation could present a higher level of risk.

For CHS to clinically define, subject to 8 9 the Board approval exclusionary medical 10 conditions for punitive segregation is 11 groundbreaking. Although the Board's intentions 12 are to exclude individuals at elevated risk in 13 punitive segregation, there is no body of medical 14 literature that reliably guides the assignment of 15 health risk to any individual. There are 16 conditions that are risk factors for outcomes 17 that are worse than baseline harm, but the 18 absolute risk of harm of punitive segregation to 19 an individual is unknowable and cannot be 20 predicted. Moreover, the possibility of risk of 21 worse than baseline harm is present for all 22 persons, regardless of clinical condition. 23 The Board's request of CHS to define 24 serious medical conditions for this purpose is

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2	innovative and CHS can only attempt to identify
3	health risk. Because the Board is the sole
4	entity that can weigh the health risk against any
5	security benefit, CHS appreciates that the Board
6	will approve this list of conditions and markers
7	and all future modifications to it.
8	We are grateful to the Board for
9	providing Correctional Health this opportunity to
10	share additional input on the Board's proposed
11	restrictive housing rules and thank you for your
12	time and consideration.
13	MS. SHERMAN: Thank you very much. I'll
14	now call Alana Sivin from Council Speaker Corey
15	Johnson's office. And Asher Freeman and Rama
16	Issa-Ibrahim, you can make your way to the front
17	as well. Good evening.
18	MS. ALANA SIVIN: Good evening members
19	of the Board. My name is Alana Sivin. I'm the
20	senior counsel within speaker Corey Johnson's
21	legislative division. I'll be delivering
22	comments on his behalf today and we will submit
23	written comments as well in the next few days.
24	As speaker of the City Council, I have

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been actively engaged in all the issues
surrounding our city jails. I visited Rikers
Island multiple times, including the punitive
segregation unit just two months ago. I
repeatedly said that we need to do more than
close Rikers if we are going to truly change the
culture of the Department of Correction.

9 I have also said repeatedly and publicly 10 that solitary confinement is cruel and unusual. 11 It is torture, it is degrading, it is sick and 12 unacceptable. I said it on March 24, 2015. I 13 said it on May 9, 2016, May 26, 2016 and just two 14 months ago, on October 17, 2019. And I am here 15 to say today unequivocally that we must ban 16 solitary confinement all together. And when I 17 say that we should ban solitary confinement, I 18 don't mean that we should introduce new solitary 19 units and call them something else, like 20 separation status. I don't mean that we should 21 continue to shackle teenagers or anyone else to 22 their desks, while they are out of their cells 23 for the next two years, or that we should allow 24 for the existence of units where rec time means

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Page 34 1 December 16, 2019 2 being let out into a small cage. I mean that we should get rid of 3 punitive segregation, punitive segregation two, 4 5 restricted housing units and anything else that looks and feels like solitary confinement. 6 7 Because we know that the impacts of solitary confinement are devastating. Dr. Homer Venters 8 9 concluded that people in solitary are seven times 10 more likely to engage in self-harm and six times 11 more likely to engage in fatal self-harm. 12 Psychiatrist Stuart Grassian concluded that 13 solitary can cause hallucinations, panic attacks 14 and paranoia. Layleen Polanco, Jason Echeverria 15 Bradley Ballard and Kalief Browder, may they rest 16 in peace, might have been alive today if we 17 hadn't put them in solitary. 18 But solitary is not just deeply and 19 morally wrong. It also doesn't work. There is 20 no proof that solitary has any significant effect 21 on reducing violence. A study by the National 22 Institute of Justice in 2016 stated that there is

has had effects on overall levels of violence

little evidence that administrative segregation

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within individual institutions or across correctional systems. Studies of new super max prisons, which only have solitary units in Minnesota, Illinois and Arizona showed no significant difference in violence after their opening.

And here in New York City, though some 8 9 claim that solitary is necessary to keep people 10 safe, the indi-, the data indicates that the 11 Department's drastic cuts in its use of solitary 12 in 2015 did not impact the rates of violence or 13 the use of force in our jails. Sadly, many of 14 those rates rose steadily before 2015 and have 15 continued to rise ever since. In Colorado, where 16 they decreased the use of solitary by 85 percent 17 in 2012, studies showed that assaults on staff 18 assaults between people in custody and use of 19 force all declined in the four years after their 20 changes went into effect.

21 And the impact of solitary goes beyond 22 the walls of a jail. Studies from states like 23 Florida and Washington show that recidi-24 recidivism rates are dramatically higher for

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2 those who are incarcerated in solitary confinement. We can do better. 3 In San Francisco, where they provide people with some of 4 5 the most violent histories with targeted group programming through the Resolve to Stop Violence 6 7 Program, recidivism for program recipients is down 46.3 percent. And the number of violent 8 9 incidents per year within units with this program went down from 24 to one. 10

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11 Meaningful alternatives to solitary 12 confinement exist not only across the country, 13 but right here in New York City. Just look at 14 the success of the CAPS units. The people in 15 those units, but for a diagnosis with an SMI 16 would be housed in some form of solitary 17 confinement. But instead we've chosen to give 18 them treatment, group therapy and constant 19 programming and what is the result? A 50 percent 20 increase in medication adherence, a 25 percent 21 decrease in both self-injury and injuries 22 sustained as a result of fights and a reduction 23 in 30-day re-hospitalization rates. And 24 according to the last quarterly report, zero

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incidents of Class A use of force or recovery of contraband. Compare that to the thirty-seven instances of contraband found in ESH in the last quarter or the five instances of Class A use of force.

7 I visited a solitary confinement unit this year and I was horrified. These cells are a 8 9 stain on our city and I refuse to believe that we 10 cannot do better. Members of the Board, I am 11 asking you to listen, not just to me, but to the 12 cries for help of the people who are living in 13 solitary and to the advocates and the survivors 14 of coli-, solitary confinement who have come to 15 board hearings time and time again to relive the 16 trauma of their experiences, hoping that we will move to the right side of history. We can get 17 18 there. You can change the rules, change the sol-19 , the cap on solitary confinement from 15 days to 20 zero, no exceptions. Mandate truly therapeutic 21 and treatment based units that give people at 22 least 14 hours out of their cells with at least 23 seven hours of congregate programming and do not 24 allow one more day to go by where we continue to

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use enhanced restraints.

3 I am proud of the work that this Board 4 has done to better the lives of people in jail 5 custody. These rules are a good start and I am in support of many of their provisions. The 6 7 elimination of \$25 fines is important to ensure 8 that we are not furthering, further impoverishing 9 people who are already too poor to pay bail. And requiring the DOC to provide the Board with a 10 11 written comprehensive implementation plan is 12 necessary to ensure that the Department doesn't 13 open new solitary units and disguise them with 14 another name. These are good things. 15 But I am asking you to go further. The 16 people in our city's jails need you to go further 17 to end solitary confinement once and for all. 18 Thank you. 19 MS. SHERMAN: Thank you. 20 [APPLAUSE] 21 MS. SHERMAN: Thank you. Good evening. 22 MR. ASHER FREEMAN: Good evening 23 everyone, my name is Asher Freeman. I'm the 24 legislative director for Council Member Antonio

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Page 39 1 December 16, 2019 Reynoso and will be delivering remarks on his 2 3 behalf. I want to thank the Board of Corrections 4 5 for holding this important hearing today and beginning a discussion around the practice of 6 7 solitary confinement. The BOC has an incredible opportunity to make history on criminal justice 8 9 reform in, in New York City with this process. Since its inception, the criminal justice system 10 11 in the United States has been based on 12 vindictiveness and revenge, often crossing the 13 line into cruel and unusual punishment. 14 Furthermore, our system has unjustly targeted

people of color throughout its history making it difficult to assert that there's any justice at all present within the institution.

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Things are changing though and while democratic systems often move slowly when we are talking about people's human rights, it is critical that we act with the necessary level of urgency. Each member of this Doard has the power to not only move our city forward but to restore dignity and humanity within our criminal justice

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system.

3 We're here today to talk about a proposed rule on the use of solitary confinement 4 5 by the Department of Corrections. As someone who believes that solitary confinement is torture, 6 7 I'm saddened that we are having a conversation like this. You can't make rules around torture. 8 9 How can we take any, how can we take any human being and completely cut them off from human 10 11 contact for any period of time? How can we do 12 this to folks who are dealing with layers of trauma and often suffer from mental illness? 13 14 We must take a stand on this issue. We 15 must show that New York is a leader on human 16 rights and that we have moved forward towards a 17 justice system that reflects the values our city 18 represents. Running a jail is not easy and 19 addressing violence within a facility is, is a 20 complex and fraught task. However if we are 21 going to deprive people of their liberty, it is 22 our, it is our collective responsibility to 23 ensure that these individuals are treated with a 24 level of dignity that reflects their status as a

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2	human being. This begins with enacting the
3	blueprint to end solitary put forth by HALT
4	Solitary in the Jails Action Coalition.
5	I want to appeal to the members of this
6	Board to do what you know to be right. We must
7	ban solitary confinement once and for all. No
8	rules that we place around the use of torture
9	negates the fact that we are engaging in torture.
10	For once, let us take bold action. Let's not
11	take a piecemeal approach to ending a practice
12	that we know to be indefensible. I want to thank
13	the members of the Board for their time and I
14	again urge you to seize this historic opportunity
15	and end the practice of solitary confinement in
16	New York City once and for all. Thank you.
17	MS. SHERMAN: Thank you.
18	[APPLAUSE]
19	MS. SHERMAN: Good evening.
20	MS. RAMA ISSA-IBRAHIM: Good evening.
21	My name is Rama Issa-Ibrahim and I serve as a
22	deputy public advocate for justice, health and
23	safety in the Office of Public Advocate Jumaane
24	Williams. As public advocate, Jumaane Williams

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testified at this Board's hearing on December 2nd, our office unequivocally supports ending the torturous practice of solitary confinement and urges the Board to revise its proposed rule on restrictive housing to reflect this moral imperative.

I would like to use this opportunity to 8 raise concerns that our office has around this 9 10 rulemaking process. At the December 2nd hearing, 11 many members of the public, including many who 12 had personally experienced solitary confinement 13 raised numerous shortcomings present in the rule 14 before us today. In response to these 15 testimonies, Board Member Robert Cohen stated, a 16 lot of the things you're asking for should be in 17 the rule. I hope they end up back in the rule. 18 Some of it just disappeared.

19 The natural question that follows is how 20 are critical human rights protections simply 21 disappearing as this process progresses? It is 22 the understanding of our office that the Board 23 had previously intended on the following 24 provisions being included in the rule but they

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2	were ultimately removed.
3	In addition to supporting the complete
4	end to solitary confinement, the public
5	advocate's office calls on these provisions to be
6	included in the rule. One, increase due process
7	protections in disciplinary hearings, including
8	the right to counsel or an advocate. Two,
9	clearer mechanisms and time limits for getting
10	out of restrictive housing. Three, the immediate
11	end to the use of restraint desks. Four, a pilot
12	program for introducing restorative justice
13	principles into disciplinary cases including
14	staff trainings and usage of peacemaking
15	practices. And five, the codification of a five-
16	hour requirement for programming as a minimum
17	standard.
1.0	To this contout the warested deless

In this context, the repeated delays 18 19 around the introduction of this rule and the 20 mayor's unprecedented decision not to renew the 21 term of Commissioner Bryanne Hamill, who had worked extensively on restricting solitary 22 23 confinement, appear to be a product of deliberate efforts by external parties to interfere with 24

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2	this Board's vital work on this issue and water
3	down the rule before us today.
4	The Board of Correction is intended to
5	function as an independent body that advances
6	improvement and change towards safer, fairer
7	smaller and more humane New York City jails. The
8	office of the Public Advocate implores the Board
9	to fulfill this function by passing rules that
10	will end solitary confinement in New York City
11	once and for all. The comprehensive blueprint
12	put forward by the New York City Jails Action
13	Coalition and the HALT Solitary Campaign makes it
14	clear that the Board has the ability to make this
15	happen through this rulemaking process. The
16	reforms that are needed here are not radical.
17	They will simply expand existing standards and
18	programs like CAPS, the Clinical Alternative to
19	Punitive Segregation, that have a proven track
20	record of success in New York City jails.
21	Further, in allowing for clearly
22	regulated separation in cases of serious
23	behavioral disruption, but prohibiting punitive
24	isolation, these reforms prioritize the safety of

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2	those in DOC facilities without violating basic
3	human rights, endangering health and exacerbating
4	behavioral issues. The Office of the Public
5	Advocate urges the Board to adopt the
6	recommendations made in the blueprint and improve
7	the rules before us today accordingly. Thank
8	you.
9	MS. SHERMAN: Thank you very much.
10	[APPLAUSE]
11	MS. SHERMAN: And before I call up the
12	next three people to testify, I did want to note
13	that Board Member Bobby Cohen very much wanted to
14	be here this evening in person. He is unable to
15	attend this meeting in person. He is however
16	tuning in to hear the testimony from where he is,
17	so he very much wanted me to let everyone know
18	that he was unable to attend this evening.
19	And now I will call Zachary Katznelson
20	from the Independent Commission on New York City
21	Criminal Justice and Incarceration Reform, Elias
22	Husamudeen from the Correction Officers'
23	Benevolent Association and Mary Lynne Werlwas
24	from the Legal Aid Society Prisoners' Rights

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2	Project.
3	MR. ZACHARY KATZNELSON: Good evening
4	everyone. I'm Zachary Katznelson.
5	MS. SHERMAN: Good evening.
6	MR. KATZNESLON: I'm the policy director
7	at the Independent Commission on New York City
8	Criminal Justice and Incarceration Reform,
9	commonly known as the Lippman Commission. As we
10	continue down the path to shut the Rikers Island
11	jails and move towards a much smaller system in
12	our city, something our Commission has espoused
13	and fought for over the past three years,
14	alongside so many people in this room, we must
15	immediately begin to implement a new vision for
16	how that system will operate.
17	Restrictions on solitary are one place
18	to start. I speak today based on my decade-and-
19	a-half working in jails and prisons around the
20	world, either representing people directly or
21	investigating conditions in the facilities. I
22	have toured numerous solitary confinement units
23	and sat down with easily over a thousand people
24	who've been held in solitary confinement, from
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death row to Guantanamo Bay to Rikers Island. Unquestionably, we need accountability within jails. Acts of violence must have consequences, but solitary breaks people.

After just a couple days in solitary, people start to suffer from headaches, vertigo, heart palpitations, insomnia, memory loss and inability to maintain a coherent flow of thoughts and disorientation in time and space follow. Anxiety, paranoia and even hallucinations and psychosis develop. In the end, many of the people I met with were no longer able to properly assist me with their defense, even if they'd been fully capable of doing so before they were subjected to solitary.

17 It does not take long for the harms to 18 begin. A study out of Norway found that almost 19 half of people started to suffer from the harms 20 of solitary after fewer than 40 hours. A review 21 of 200 people in solitary by Dr. Grassian who Ms. 22 Sivin referred to earlier, was a psychiatrist at 23 Harvard, found that just after a few days in 24 solitary EEGs demonstrated brain patterns

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consistent with stupor and delirium. For so many people, the pain and trauma of solitary is too much. You heard the stat earlier from the ststudy by Homer Venters and others at Rikers, people in solitary are six times more likely to commit self-harm.

Solitary also puts correction officers at increased risk. Dr. Grassian found that almost half the people who spent time in solitary had uncontrollable thoughts of revenge, torture and even mutilation of correction officers. And the same proportion had loss of impulse control, resulting in random violence. This harms everyone. And solitaire has serious ramifications after people are released.

17 A Florida study of recidivism found 18 people who had been in solitary were 20 percent 19 more likely to commit violent crimes, even after 20 controlling for criminal history and regardless 21 of how long the people spent in solitary or how 22 long ago it had been. Researchers in North 23 Carolina tracked over 200,000 people after their 24 release from prison. They found that people who

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2	had been held in solitary had a 78 percent higher
3	chance of suicide and a 127 percent higher chance
4	of death by opioid overdose.
5	These proposed rules are certainly an
6	improvement on the current system. I'm glad to
7	see New York catching up with places like North
8	Dakota and Colorado, but we need to do more. We
9	should envision the day when solitary would no
10	longer be used in our jails and do everything we
11	can to achieve it.
12	The Cook County Jail, where over 5,000
13	people are incarcerated eliminate, eliminated
14	solitary in 2016. Assaults there, including on
15	staff, have declined significantly. At minimum,
16	the proposed rules must be improved. For
17	instance, DOC should be required to develop
18	behavior and programming plans for people in
19	punitive segregation also and provide programming
20	during the four hours people there get out of
21	cells. When steady staff who were trained to
22	work in discipli- disciplinary units are
23	unavailable, replacement staff must also have
24	such training. And there's no legitimate reason

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2	to provide two years for DOC to eliminate the
3	blanket chaining of people to desks.
4	The proposed rules are a positive start,
5	but we can do even better. We look forward to
6	working together to make that happen. Thank you
7	so much.
8	MS. SHERMAN: Thank you.
9	[APPLAUSE]
10	MS. SHERMAN: Good evening.
11	MR. ELIAS HUSAMUDEEN: Good evening, how
12	are you guys doing? Did the clock just started
13	working all of a sudden? I've been sitting here
14	for about an hour, and it wasn't working. It's
15	working now. Good evening. There are so many
16	things that, first of all my name is Elias
17	Husamudeen. I'm the president of the Correction
18	Officers' Benevolent Association and there are so
19	many things to be said and to address. But I'll
20	try to stay focused on a few.
21	One thing I will say is, can you imagine
22	if the Speaker Corey Johnson and the rest of the
23	council people who come up here to speak would
24	put the type of energy and resources in keeping

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2 people out of jail as they're putting in 3 concerning and talking about punitive seg. I mean if they did their jobs and there was job 4 5 programs and job training and educational programs, then we probably wouldn't be here. 6 7 Here's the reality. Currently we have approximately 6,400 inmates / detainees in 8 9 custody, 6,400. Out of the 6,400 inmates we have in custody, there's about 100 in punitive 10 11 segregation and the 100 that's in punitive 12 segregation is responsible for this. This is 13 what they're in for. They're not in because 14 their cell wasn't clean, they're not in because 15 they called the CO a bitch, they're not --16 they're in because of violent crime. The reason 17 I did this here and guess what you're looking at, 18 in case you didn't read it. These are correction 19 offices, inmates and civilians. And they're all 20 what? A victim of a crime. And all I can hear 21 the City Council speak and the rest of the City 22 Council members talking about is the people who 23 perpetrated this crime against those people in 24 jail. And that's sad.

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2	The reality is out of 6,400, 100 inmates
3	in punitive segregation, should say a lot to you
4	those of you in this room. We have answers and
5	we have solution as correction officers as to
6	what we think can and should be done in order to
7	help this situation. The reality is punitive
8	segregation is a jail within the jail. If you go
9	outside this building right now and someone
10	assaults you, and the police come and they arrest
11	them they're going to do what? Put them in jail.
12	Isn't that punitive? Aren't you removing them
13	from their family? Aren't you removing them
14	from, from, from their neighborhood and the
15	community? Yes, that's what you're doing. So
16	when this same crime happens inside of jail,
17	guess what we do? We have what's called punitive
18	segregation, besides the inmate being rearrested
19	and other things, this is one of the things that
20	we do.
21	And contrary to what people are saying

21 And contrary to what people are saying 22 up here, when they're in punitive segregation 23 there is therapeutic treatment for them. When 24 they're in punitive segregation, they are being

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seen by the Health and Hospital Corporation, they are being seen by this Correctional Health Services. They are being seen. So, you know, this show that the City, the City Council and the City Council Speaker want us to come up here and try to act as if correction offices are creating some type of culture of violence, it's shameful. And he should be ashamed of himself.

10 And anybody, anybody that knows me know 11 that I have family who are on this job and I have 12 family who are locked in, locked up in this job. 13 And quite frankly, I don't want nothing to happen 14 to either one of them. I don't want either one 15 of them to be injured. I don't want either one 16 of them to be attacked. I don't want my mother 17 to get a call because my sister, who's a 18 correction officer, has been attacked. I also 19 don't want to get a call that my brother, who's 20 an inmate, has been attacked.

21 So correction officers are not the 22 responsible for this culture of violence. We're 23 basically stuck with the people that you give us. 24 You gave us the 12 people who murdered Julian

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2	Guzman in the Bronx, you gave them to us. They
3	were violent when they came to us.
4	In closing I would just like to say to
5	the Board, please vote no. Vote no as far as
6	these changes is concerned as far as punitive
7	segregation. I don't think it should be changed.
8	I think it actually should stay just the way it
9	is. But again, like some of the people are
10	saying we do need to do more as far as programs
11	as far as trying to figure out what it is.
12	I have one inmate and then I'll stop.
13	He's been in our custody, since he's been in our
14	custody, he's been rearrested 29 times. He's
15	been in the punitive segregation unit 15 times.
16	Do you think punitive segregation is working for
17	him? Because we don't think so, but the reality
18	is what is it that we can do because the Board is
19	not addressing what we should do with these
20	inmates or detainees who are responsible of
21	committing crimes while they're incarcerated.
22	The Board is only voting on what should
23	not be done to them but they're not paying any
24	attention to the victims of their crimes and,

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2	and, and that needs to change and we need to
3	change that. Thank you very much.
4	MS. SHERMAN: Thank you. Good evening.
5	MS. MARY LYNNE WERLWAS: Good evening
6	I'm Mary Lynn Werlwas of the Legal Aid Society's
7	Prisoners' Rights Project. They were violent
8	when they came to us. That says a lot to me of
9	that this is what we are hearing. That it's
10	they, that's they were violent who came to us.
11	This is what we are dealing with, the view that a
12	person who was incarcerated in our city jails is,
13	comes in wanting to hurt other people there, with
14	absolutely no recognition of what the conditions
15	they're being held in and how we treat them
16	causes them to react.
17	The question of whether violence is in
18	fact at times reactive to the conditions in which
19	people are placed. So, as astonished as I am to
20	hear that view so vividly put, we, this evening
21	wanted to also call out the hypocrisy of the
22	administration that in some rooms professes to be
23	ending solitary, that promises reforms, that
24	talks about culture change. And yet in other

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2	rooms, and in this room, is asking you to codify
3	in essence its worst practices.
4	And I know that the Department has stood
5	up and said we want reform and you adopted the
6	rhetoric around these roles, which is, if it were
7	backed up by the reality would be important. But
8	what we're also hearing with some vitriol and
9	rhetoric from some corners, but with the
10	bureaucratic language of exceptions, the
11	talismanic muttering of well security, is we are
12	hearing the Department as well want to work in
13	here the same views that the union president just
14	articulated, which is that you can have these
15	rules but there is a certain core of people,
16	there are certain exceptions that we have to
17	have.
18	Of course you need operational
19	flexibility, complex agencies need that. We all
20	work within them. That however, in these, is not
21	the same as simply saying there's a security out.
22	We need the discretion to do, continue the
23	incompetence and violence that has caused so many
24	problems in our jails.

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2	We are going to be, when we, in our
3	written comments to the rules, pointing out some
4	of the ones in which the draft that was
5	promulgated in far too many areas and in far too
6	many ways, has the exceptions that swallow the
7	rule. The Board has worked very hard on drafting
8	rules to be comprehensive and rules that will be
9	effective. But there are many ways in which in
10	seeking to put in flexibility, they undermine
11	their purposes and I believe, there are two other
12	areas in which we think the same dynamic is at
13	work where the rules are not achieving their
14	intended purposes and I would just flag them
15	here. One is with respect to our youngest
16	incarcerated people. This Board, which has some
17	of the best known child advocates in this city,
18	has overseen the, the betrayal of the young adult
19	plan and the dismantling of protections for our
20	youngest people. There are protections for them
21	in the proposed rules, they need to be
22	strengthened. This is where we start now.
23	And the last is this Board cannot put
24	its stamp of approval on a view that New York

7	Page 58
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2	City cannot do any better than shackling black
3	men in order to control their behavior. That's
4	what your restraint desk grace period is. And
5	it's refusing to acknowledge there are far better
6	ways and far more imaginative ways than the
7	administration has professed here to address
8	these problems with our city. Thank you.
9	MS. SHERMAN: Thank you.
10	[APPLAUSE]
11	MS. SHERMAN: The next three speakers
12	will be Martha Grieco, Jack J. Davis and Julia
13	Kerbs. Good evening.
14	MS. MARTHA GRIECO: Good evening. My
15	name is Martha Grieco. I'm an attorney with the
16	Bronx Defenders. At the Bronx Defenders, we urge
17	you to adopt the Jails Action Coalition blueprint
18	for ending solitary confinement and to give our
19	clients access to true procedural due process. I
20	have represented incarcerate, incarcerated people
21	as a criminal defense attorney for ten years, so
22	my testimony is going to focus on due process.
23	We recently formed a small unit at the
24	Bronx Defenders to take referrals and track

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stories of disciplinary restrictions. Our project has been operating for several months now and what we have seen over and over and over again is that our clients are not getting hearings. The law requires that they have a hearing before placement in solitary, before ESH, before giving them mitts to wear out of the cell. But they do not get these hearings.

Instead, this is what they tell us. I'm 10 11 in solitary confinement I'm locked down all day, 12 I'm 19 years old. DOC won't believe me because 13 my birth certificate is blurry, no hearing. Ι 14 was infracted and lost good time because I 15 stripped myself naked after having a hot flash 16 due to a new psychotropic medication I was 17 taking, no hearing. I showed up to my hearing 18 with all my witnesses, but the officer said if I 19 insisted on having the hearing, he would sentence 20 me to 30 days in solitary, but if I refuse the 21 hearing he would give me 5 to 10 days. So, I 22 refused the hearing.

And of course the vast majority of our clients in solitary report that they weren't even

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offered hearing. DOC lied and said that they refused it. DOC is wholesale ignoring the law, denying our clients due process and this is happening on your watch. Board, do something about it. What can you do? Let people's attorneys onto the island. The earlier version of the proposed rule allowed this and the provision was wiped out in the new rule. Dr. Cohen mentioned at the last hearing that this was due to cost.

12 I want to be clear we're not asking you 13 to create a right to appointed counsel, we're not 14 asking for the city to give people lawyers at 15 these hearings. They already have lawyers. 16 Every single person in the jails already has a 17 lawyer, why can't their advocates represent them 18 in this collateral process? At my office and at 19 probably every public defender office in the 20 city, lawyers already follow their clients to 21 ancillary hearings, hearings at the DMV, hearings 22 at OATH, hearings at TLC. We don't get paid 23 extra for this. It's the very definition of our 24 holistic model at the Bronx Defenders that we

1	Page 61 December 16, 2019
2	fight for our clients in every arena.
3	We have advocates at our office who are
4	not lawyers, who represent our clients in
5	hearings at the Human Resources Administration,
6	at NYCHA and at meetings with ACS. It
7	strengthens our relationship with our clients and
8	ultimately helps us solve their problems
9	holistically.
10	On this issue, New York is completely
11	backwards. Counsel is permitted at disciplinary
12	hearings in Massachusetts, Colorado, Washington
13	State and a pilot program is being developed in
14	L.A. The public defender in Washington, D.C.
15	represents clients in disciplinary hearings.
16	They have a whole unit of their office devoted to
17	it and they meet regularly with the Commissioner
18	of DOC in a friendly exchange of information.
19	It's not so novel.
20	I commend the Board for requiring
21	videotaping of all hearing refusals, as this will
22	do a lot to protect our clients and for requiring
23	DOC to notify the person's attorney that they
24	received a ticket. But this won't stop the

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practice of coercing clients to give up their rights and it won't help clients who don't deserve to be infracted in the first place. If you allow the person in custody's advocate to come to the jail to do what they do, advocate, the jails would be safer and a more humane place for everyone.

9 Denying incarcerated people due process 10 is unacceptable, outrageous and 11 counterproductive. You're allowing this agency 12 you regulate to impose torture, 23-hour isolation 13 and our clients rarely understand why. They're 14 shackled to a desk and they don't understand why. 15 They're wearing mitts 14 hours a day and they 16 don't understand why. They can't explain their 17 side of things to anyone. No wonder there's 18 violence. No wonder there's anger. People feel 19 completely ignored there and that's because they 20 Shine a light. Let us in. Thank you. are. 21 [APPLAUSE] 22 MS. SHERMAN: Thank you. 23 MS. JULIA KERBS: Good evening. My name 24 is Julia Kerbs and I'm a correction specialist at

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Page 63 1 December 16, 2019 New York County Defender Services, a public 2 defender office in Manhattan. I am here to 3 4 comment on proposed changes to restrictive 5 housing regulations. NYCDS opposes solitary confinement in 6 7 all forms. Isolated confinement constitutes torture and wholly undermines rehabilitation. 8 9 The practice should be abolished, but at a minimum this Board should institute due process 10 11 protections for people facing transfers to 12 restrictive housing. For the past six months the 13 Corrections Specialist Unit at NYCDS has 14 monitored, collected data and conducted wellness 15 checks with every one of our clients in solitary 16 confinement.

17 On a given day we have anywhere between 18 one and nine clients in solitary confinement. In 19 total, 39 of our clients have spent a collective 20 774 days in solitary since July 9th of this year. 21 When we visit our clients in restrictive housing 22 units and ask about conditions within punitive 23 segregation, the majority report that they never 24 received a hearing.

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We demand that people in jail be given the right to an advocate at mandatory disciplinary hearings that determine whether they are placed in solitary confinement. This advocate could be the client's attorney, social worker or other office staff familiar with the individual and his or her case. Solitary confinement is an extremely serious punishment, so incarcerated people must be given a chance to meaningfully defend themselves. Many are not familiar with the system or are unable to fully articulate themselves due to mental health issues, language barriers or a host of other reasons.

16 Just as we do not expect individuals to 17 represent themselves unassisted in a courtroom, 18 we should not obligate people to advocate for 19 themselves without assistance in this vital 20 context. A requirement that an advocate be 21 notified of an upcoming disciplinary hearing 22 would also guarantee that such hearings actually 23 occur, something that does not appear to be 24 happening consistently, despite the DOC mandate.

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2	Collection of data is also crucial to
3	ensuring that existing rules are being followed.
4	Only with the assistance of advocates can we be
5	certain that hearings are held, witnesses called,
6	evidence collected and appeals considered. We
7	would know how often incarcerated people win or
8	lose hearings, what types of charges are filed
9	against them and the nature of the proof normally
10	provided to support charges. In sum, we could
11	play our role in strengthening due process rights
12	for our most vulnerable population citywide. We
13	insist on the primacy of due process,
14	transparency and accountability in these
15	disciplinary proceedings, proceedings that
16	threaten such immediate and significant harm to
17	our incarcerated population. Permitting the
18	inclusion of an advocate at these proceedings is
19	one crucial step toward that goal and one that
20	respects the basic human rights of all people.
21	The change is long overdue. Thank you for your
22	consideration.
23	MS. SHERMAN: Thank you.
24	[APPLAUSE]

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2	MR. JACK J. DAVIS: Hello, my name is
3	Jack Davis.
4	MS. SHERMAN: Good evening.
5	MR. DAVIS: And I'm a victim, but before
6	I go any further, I would like to ask the Board,
7	right, how many people have died in the
8	Department of Correction since y'all have been
9	members of the Board. That's my first question.
10	And my second question to the Board is why are we
11	here? And my third question to the Board is
12	this, why is it so hard to make a wrong into a
13	right when you're just letting a right a wrong
14	stay wrong over a right. You just told us that a
15	person died in prison, two persons died, on your
16	watch.
17	Now when I was last here, we talked
18	about [unintelligible] [01:36:59]. Y'all was
19	standing up here talking on the Board that this
20	was supposed to happen and this was gonna happen
21	and this was gonna. And nothing has happened.
22	Y'all keep telling us about all these felonious
23	rules and everything that go. We those that's
24	been in prison know what's gonna happen. The

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rule is gonna be ignored, the guy's gonna go to prison or the girls gonna go to prison, or the LGTBT is gonna go to the box. What I'm asking y'all is that when we gonna get it right?

Don't stand up there and look at me like you're surprised because that's not the answer. The answer is this. You just said two more people died. Are we waiting for another to die? Or are we waiting for three more to die, so you can come back here and tell us, well, you know, we feel sorry for this person that died this day for this.

14 What I want to know from the Board is 15 this. Why? Don't stand up there and look at me 16 and be surprised. Because we have a problem and 17 our number one problem is you, you, you, you, you 18 and you. You're our number one problem because 19 you want to know why? Because every time we come 20 here, we come here to advocate about a problem. 21 And what y'all do is escalate the problem, 22 because you know what, you do nothing about the 23 problem. You just told us again, two more just 24 died. What y'all want again? What do y'all

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2 want? Tell us. What do we have to do to convince you to forget it, let solitary go, shut 3 What do we have to do? We got to come 4 it down. 5 in here thousands and thousands of packs, right, so y'all can see that yeah, we're strong? No, we 6 7 ain't got to do that. We want y'all to use your integrity, your morals and think about human 8 9 life. And just don't say to yourself, oh well I, I, I listen to Corrections and Corrections told 10 11 me and I listened to the officers.

12 We understand all that, but you, we also 13 want you to understand the same people you talked 14 about that died, look at their families. We also 15 want you to talk about the guy that comes home 16 that's mental health from being in the box and 17 upsets his own family, upsets his community, 18 upsets his neighborhood because his neighborhood 19 and community don't know what to do with him, or 20 her. Because you know why? Because you let it 21 go on. You stood up here at the same time as you 22 was a correctional member or board, and told us 23 well, we're looking at it, we're making slight 24 changes.

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2	But come on, what do you want from us?
3	I just asked y'all three questions. Nobody said
4	nothing. All y'all did was look. Nobody said
5	nothing. I asked y'all three questions. How
6	many people died? In the last 20 years, 374 in
7	the last 20 years, right. Why are we here? We
8	got look at all the advocates that's here,
9	fighting to shut something down. Y'all ain't
10	said nothing. And I ask y'all again why it's so
11	hard to make a wrong into a right? And you know
12	what y'all doing? Y'all just standing looking at
13	me. You don't want me to tell you how I feel,
14	because then y'all say I'm being disrespectful.
15	But I'm asking y'all again, what got, what we got
16	to do? What do the advocates got to do to get
17	y'all to really understand what solitary
18	confinement, the hole or the box is really about.
19	What we gotta do, ladies and gentlemen? Don't
20	just look at me.
21	MS. JENNIFER JONES AUSTIN: Just so you
22	know, I'll interject you know I'll tell you that
23	I sit here and I listen and I listen intensely
24	and intently. And when you ask the questions I

Page 70 1 December 16, 2019 2 was listening and respecting you and, and listening to you ask those questions. I saw them 3 in part as rhetorical, that you were making a 4 5 point. I didn't think that I needed to respond point by point by point. I'm listening to you. 6 7 I'm listening to everybody that has been here, at, at the first hearing and at the second 8 9 hearing. And we will take into consideration all 10 of the points that be-, are be being made. 11 Judge us after you've heard the rules 12 that come out. Don't judge us in the moment and 13 honestly you don't know what it's like to sit 14 here. You can't judge me, because you don't know 15 me. 16 MR. DAVIS: [unintelligible] [01:41:53]. 17 MS. AUSTIN: No, no, no, let me just 18 19 [unintelligible] [01:41:55]. MR. DAVIS: 20 MS. AUSTIN: No, no, no, you asked me to 21 respond. You wanted it --22 MR. DAVIS: [unintelligible] [01:41:58]. 23 MS. AUSTIN: You wanted a response. You 24 -- did you not -- did you not want a response?

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2	Did you not want a response?
3	MR. DAVIS: [unintelligible] [01:42:12].
4	MS. AUSTIN: Did you not want a okay,
5	good deal. You wanted a response, but then you
6	don't like the response when it's given to you.
7	MR. DAVIS: Thank you. I'm just telling
8	you when you do that [unintelligible] [01:42:19].
9	MS. AUSTIN: You did not want a
10	response.
11	UNIDENTIFIED FEMALE: [Unintelligible]
12	[01:42:23].
13	MS. AUSTIN: I'm sorry?
14	UNIDENTIFIED FEMALE: [Unintelligible]
15	[01:42:28]
16	MS. AUSTIN: I don't know. Look, we're
17	here, trying to listen, trying to lean in
18	MS. SHERMAN: And we'll continue.
19	MS. AUSTIN: trying to understand, so
20	that we can then respond in the best way
21	possible.
22	MR. DAVIS: [unintelligible] [01:42:46].
23	MS. AUSTIN: I understand that. We
24	understand that. That's why we're here. We

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2 don't get paid to do this work. We do this because -- let me finish please, we are here 3 4 because we care. You may not like every decision 5 but we do care and we're here, just as you, volunteering our time and our attention, because 6 7 we care. You don't know what our day jobs are. You don't know what our lives are like. But you 8 9 come and you chastise when we're trying to do the 10 best that we can. So, we're here this evening 11 because we care. Thank you. 12 MS. SHERMAN: Thank you. 13 MR. STANLEY RICHARDS: And the only way, 14 the only way that we're gonna get to where we all 15 want to go is we've got to respect each other. 16 MS. AUSTIN: Yes. 17 MR. RICHARDS: We might not agree with 18 every decision, we might not agree with every 19 point of view, but the starting point has to be 20 we have to respect each other. That, that has to 21 be the basic that we afford each other we need to 22 stop demonizing, because nobody, nobody in --23 MR. DAVIS: What you just said was very 24 disrespectful.

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2	MS. AUSTIN: What was disrespectful?
3	Tell me what was disrespect.
4	MR. DAVIS: [unintelligible] [01:43:49].
5	MS. AUSTIN: Good deal. Thanks for
6	that.
7	MR. RICHARDS: Yes. I think we, we have
8	to, we can't demonize each other
9	MR. AUSTIN: No.
10	MR. RICHARDS: And we have to work
11	together. We're not always gonna agree. But if
12	we want to figure out a way forward we have to
13	start by respecting each other.
14	[CROSSTALK] [01:42:11]
15	UNIDENTIFIED FEMALE: [unintelligible]
16	[01:43:45].
17	MR. RICHARDS: Yeah, no, no I know that.
18	UNIDENTIFIED FEMALE: Many of us have
19	been coming here for years saying the same thing
20	and nothing has been done. And that's
21	[unintelligible] [01:44:34].
22	MR. RICHARDS: And thank goodness for
23	y'all sticking in there and continuing to talk
24	because, because change doesn't happen overnight,

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2	right. And, and
3	UNIDENTIFIED FEMALE: [Unintelligible]
4	[01:44:47].
5	MS. SHERMAN: What I'm gonna excuse
6	me. I am gonna we are all here. I think we,
7	you, you have the attention of this Board and
8	we're going to move through the remaining
9	speakers, okay. I'm going to call the next three
10	speakers Mik Kincaid, Nikki Tourigny, and Ms. V.
11	MR. MIK KINKEAD: Good evening. My name
12	is Mick Kincaid, and I'm testifying today as a
13	member of the Jails Action Coalition and I'm
14	going be reading two statements from people who
15	are currently inside the city jails. And I do
16	want to say that I think as people who have city
17	held positions, whether that's something like
18	being an attorney for people or whether that's
19	being a city council member or whether it's
20	sitting on the Board of Corrections, we have to
21	be able to hear when people who've been through
22	extreme trauma are telling us that what they want
23	us to do better. And I hear that from my clients
24	all the time and I often disagree with them or

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often wish they had said it in a different way to 2 me, but that doesn't mean that's part of my job 3 to sit there and to listen to it and then think 4 5 about it. I can always be doing better and I, I think all of us can and when we hold a position 6 7 of such responsibility, it's very important to, to hear it. And I think it's very important to 8 9 remember when people have been through extraordinary trauma and they're still coming 10 11 forward to tell their stories.

12 So, my first statement is from Ms. 13 Baker, who is a transgender woman inside Rose M. 14 Singer. And she says, my memories are of the 15 unfairness of even how the hearing was presented. 16 There were lies written on the report and I asked 17 for witnesses from other incarcerated people, but 18 they were too scared to say anything because they 19 felt that they were going to be retaliated 20 against by the staff, so at that point they did 21 not want to get involved anymore. When there is 22 a ticket of a real seriousness, they should have 23 a lawyer to help represent them. Even within the 24 holding box in the SHU, even before the hearings

Page 76 1 December 16, 2019 2 you should have cameras that watch the unit because there's an mistreatment in the past where 3 they turn on all the cold air in order to keep us 4 5 quiet. That's from Ms. Baker. And then the other statement is from Ms. 6 7 Brooks, who is also a transgender woman currently at Rose M. Singer. And I wanted to say that both 8 9 of these were voluntarily given to me by them and 10 they both said that they didn't see any of the 11 postings, so I'm sure the postings did go up but 12 they, neither of them saw them in the clinic or 13 the law library. 14 So, Miss Brooks says, on November 27th 15 2019 I was housed in Rose M. Singer Center, 16 building number six. According to staff this is 17 the house that is the reception unit for the 18 transgender male-to-female inmates upon entering 19 this housing unit, I noticed how unkept it was, 20 how filthy it was. I was the only person in 21 building number six, not only are most of the 22 cells down, meaning uninhabitable to live in, but 23 the running water was brown and incredibly cold.

I complained about the infestation of rodents,

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who were running around in and out of my cell at all times and even got into my bed a few times. While I was in there, I made several complaints and they continued to house me in building number six all by myself from 11/27 to 12/1.

7 It was Officer Lodge who was assigned to work the 7:00 a.m. to 3:00 p.m. shift who took it 8 9 upon herself to take one, take me to the main intake, because she felt the conditions in there 10 11 were not livable. She also did not want to be 12 there herself. If it wasn't for this officer, I 13 would have had to have another shower and brush 14 my teeth in that dirty, filthy water that was 15 incredibly cold. I'm so grateful for Officer 16 Lodge who took me out of there. I'm ever so 17 grateful to now be housed with other women, as I 18 should have been from the start. Thank you in 19 advance for your assistance.

20 And I wanted to point out because we've 21 been talking about restrictive housing and we 22 often default to talking about disciplinary, but 23 protective custody and other kinds of isolation 24 also should be part of this discussion because

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2	when people are default isolated that also causes
3	incredible harm. Thank you.
4	MS. SHERMAN: Thank you.
5	[APPLAUSE]
6	MS. NIKKI TOURIGNY: Good evening, Board
7	members and thank you for making space for this
8	tonight. My name is Nikki Tourigny and I'm
9	actually here representing a group of students
10	from Hunter College School of Social Work who are
11	advocating for the blueprint to end solitary
12	confinement.
13	Just to be clear, we chose social work
14	as a profession because we believe that people
15	and communities can lift each other up. We
16	promote social justice with and on behalf of the
17	people who are most vulnerable and we focus our
18	attention on the environmental forces that
19	create, contribute to and address individual and
20	systemic problems. In layman's terms, when we
21	see someone who is struggling to thrive, we don't
22	ask what they did to deserve it, we wonder what
23	happened that led to their struggle. We chose
24	CUNY because we want to believe that public

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2	institutions can work. We want to believe that
3	our city can create and maintain effective
4	systems that educate, heal and govern our
5	communities. But our experience in this room has
6	brought that faith into question.
7	As interns, we're here to advocate for
8	justice while learning about the process of
9	policymaking. And aside from incredible
10	mentorship, our one privilege as interns is that
11	for two full years we get to be rookies. We get
12	to ask we get to look at everything with an,
13	an inquisitive eye and ask seemingly naive
14	questions about circumstances that we might
15	normalize over time. Questions like, one, why is
16	it that board members are excused from attending
17	monthly meetings and public hearings? The
18	community of lawyers social workers and advocates
19	that regularly fill this room are here to
20	represent your constituents, people who can't be
21	here because they're stuck behind bars. We
22	recognize that you also have full-time jobs, but
23	we are here. Is it not the responsibility of
24	each member of this Board to engage in dialogue

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2	with the people whom they represent?
3	And two, why is it that people talk
4	about alternatives to isolation as though they
5	are not an acceptable response to violence? Mr.
6	Husamudeen, if he were here I would ask, when we
7	advocate for rehabilitation, instead of punitive
8	segregation we're not suggesting that people
9	avoid responsibility for their actions. Anyone
10	who's been through good mental health therapy
11	knows that the process of recognizing trauma,
12	undoing harm and developing healthy coping skills
13	is hard work. They also know that taking
14	accountability is core to this work and it cannot
15	be done alone.
16	As social workers we promote the
17	responsive- responsiveness of institutions to
18	individual needs and social problems. This is
19	one of our, part of our code of ethics. And so
20	to this point, mission integrity is really
21	important to us, as we hope it is for those of
22	you who represent organizations that employ our
23	profession.
24	For example, Mr. Richards, as Vice

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President of Fortune Society, you might, "imagine 2 a world where all who are incarcerated or 3 formerly incarcerated will thrive as positive 4 contributing members of society." How does 5 solitary confinement fit into this world you've 6 7 imagined? How does trauma of isolation prepare people to navigate family and community and the 8 9 workplace when they return home?

And Ms. Jones Austin, as CEO of FPWA, you've promised to "advocate for groundbreaking policy change that improves the lives of millions of New Yorkers." Can you explain to us what's so groundbreaking about a solitary sentence four times greater than the U.N.'s definition of torture?

17 I don't know if Dr. Safyer is still on 18 the Board because I never see him here, but if he 19 were here, I would remind him that he earned the 20 nickname Dr. Social Justice by leading a medical 21 system that cares for people regardless of who 22 they are and trains the next generation of 23 healthcare professionals. Yet the proposed rule 24 allows someone to be locked to a restraint desk

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2	unable to move freely during their few hours out
3	of cell. What does this teach young
4	professionals about a person's basic human right
5	to healthcare?
6	And finally, Ms. Sherman and Mr. Franco,
7	you've spent your entire careers as promoting the
8	welfare of young people and their families.
9	Thank you for that, but in what other
10	circumstance would you permit a young person to
11	live without access to educational programming or
12	to be locked in a room for 14 hours a day?
13	We recognize that this process isn't
14	easy. It's incredibly complicated and this is
15	really hard for us to believe that this Board
16	right here could write the current proposed rules
17	on restrictive housing. The Board is supposed to
18	be an independent body, not loyal to the
19	Department or to City Hall. It's supposed to be
20	loyal to the people of New York City. Any of us
21	are at risk of incarceration, some more than
22	others. And given the current rules that you
23	proposed, we're also at risk of being restrained,
24	locked down or confined to a cell.

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2	As social workers, we will not be
3	monitors for human suffering now or in the years
4	to come. We support the blueprint to end
5	solitary confinement and the more than 60
6	organizations that have signed on to it. That's
7	60 organizations that this next generation of
8	social workers will look to support after we
9	graduate.
10	We urge you to recognize this
11	opportunity for a groundbreaking policy change
12	that will improve the lives of New Yorkers and we
13	urge you to enact rules consistent with the
14	blueprint to promote alternatives to violence and
15	to truly end solitary confinement in New York.
16	Thank you.
17	[APPLAUSE]
18	MS. SHERMAN: Thank you.
19	MS. AUSTIN: Thank you for your
20	testimony. I want to ask you, just so that I'm
21	certain. Were, were those rhetorical questions
22	or do you want a response?
23	MS. TOURIGNY: Do you want me to come
24	back to the stand?

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2	MS. AUSTIN: No, I'm just curious. Just
3	ans-,
4	MS. TOURIGNY: [Unintelligible]
5	[01:54:22]
6	MS. AUSTIN: Okay. Well I'll just tell
7	you that when we would put forth the rules into
8	the CAPA process, what was stated here in this
9	room and I expressly stated it, that it was a
10	beginning in a starting point. And that we want
11	to hear from all of you, so that we can make sure
12	that we promulgate the best rules possible. So,
13	with respect to, you know, your question about me
14	and groundbreaking, that is the work that I do
15	and I have done it in other spaces and I'm
16	looking at it here as well. Thank you.
17	MS. SHERMAN: Thank you.
18	DR. VICTORIA A. PHILLIPS: Members of
19	the Board of Correction, good evening. I'm
20	Minister Dr. Victoria A. Phillips, Ms. V.
21	founder of Visionary V and longstanding member of
22	the Jails Action Coalition and have sat on the
23	adolescent and young adult advisory board for the
24	last five to six years. Tonight, I want you all

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2	to remember that everything that settles ends up
3	on the bottom.
4	For the past nine years, I have
5	testified relentlessly regarding one injustice
6	barbaric action or inhumane display of authority
7	after another to this Board and City Council. I
8	thank you for honoring our request to have
9	individuals who often are unable to attend BOC
10	monthly hearings the opportunity to go on the
11	record is evening.
12	Since 2014, this great city has heard
13	the mayor's office and DOC, DOC speak of criminal
14	justice reform, new initiatives, policies,
15	revamping of investigations and many other
16	culture shifting tactics. In fact, that was the
17	same year City Council voted to in solitary for
18	16 to 21-year-olds in New York City facilities.
19	Yet in 2015, this oversight Board voted to allow
20	DOC to open ESH, meaning this Board decided to
21	settle.
22	As a black spiritual woman in America, I
23	understand all too well how settling can give one
24	the illusion of doing what is best for all.

Since opening ESH, this oversight Board has
chosen to settle for mediocre, untimely responses
from DOC, late reporting if things are even
reported at all, corruption and a consistent lack
of accountability for officers' illegal actions.

In 2018, over 60 percent of all sexual assault reports were reported against officers. This was reported via the Bronx DA herself at your April 2019 hearing. In addition to the Eighth Nunez Report released this past October clearly stating in its 302 pages, how in 2019 DOC remains undertrained, unsupervised and unprofessional across all levels of management.

15 When leadership settles, systems fall 16 apart, when this oversight Board settles, the 17 ones in DOC custody suffer the most. Just ask 18 the families of Kalief, Layleen and even now, 19 Nicholas. I demand that you all enact rules of 20 con-, that are consistent with the Jails Action 21 Coalition and HALT Solitary's blueprint released 22 October 2019 on how to end solitary confinement 23 in this city.

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Number three of our blueprint states,

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2 end punitive segregation and make ESH and any other alternative unit actually about safety, 3 rehabilitation and prevention of violence. That 4 5 starts with upholding those who are in control of those in custody accountable. Solitary units are 6 7 torture. Having worked behind the walls, correctional walls, doing CBT, I believe solitary 8 9 confinement is the mental Holocaust and any one placed in this unit is forever changed and 10 11 mentally scarred.

12 Solitary should not be a part of DOC 13 culture, even the Federal Monitor reports on page 14 26 from the Eighth Report, that since 2016 there has been a 92 increase in the uses of the force. 15 It also states on the same page, how DOC does not 16 17 have effective strategies for managing young 18 people in custody. Page 4 also mentions DOC 19 failure to properly and timely document uses of 20 force incidents, pages 9 through 10 gives you the 21 okay to truly set boundaries when it states how 22 the Department needs a foundation in place that 23 can sustain and focus on compliance.

Then it goes on to state, the Department

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has tried several initiatives to train staff which has not been effective. Page 11 speaks volumes on DOC's lack of investigations and disciplinary backlog, all things that I have testified previously on.

7 Several years ago, I sat in City Council requesting that DOC be given funding to expand 8 9 its poorly ran investigation unit. Yet with additional funds, we have yet to see any real 10 11 change or timely accountability. Yet this Board 12 has voted again and again to extend ESH, all the 13 way officers are being reported by the Federal 14 Monitor for falsifying records, abusing their 15 authority and mishandling incarceration, 16 incarcerated individuals from top brass on down 17 the line.

DOC is a paramilitary agency and as an army brat, I know all too well how insubordination is unacceptable and not tolerated. Yet outside of the military, law enforcement agencies such as DOC are allowed to inhumanely house individuals on domestic soil based on alleged behavior, all while never being

held accountable in real time for their own. 2 We tell our incarcerated youth and young adults to 3 do better while beating them to a pulp. We tell 4 5 them to respect their elders all the while we ignore their own cries for help. Did you hear 6 7 the cries in the pages of the Federal Monitor's report? Did you hear the cries of those with 8 9 invisible disabilities after Layleen died? Have you heard the cries of those with mental health 10 11 concerns, such as Nicholas, who was viewed 12 exactly as, as I have reported to you all 13 previously, as less than human.

14 I am concerned with the path that this 15 new DOC administration is headed on. They lack 16 the very structure and leadership needed to 17 create long-lasting change. I was told recently 18 that I at times get up here and I speak as if I'm 19 threatening the Board, when I speak of organizing around your lack of accountability. But I point 20 21 out that the one who made such a statement is 22 still an active member of DOC and is not here 23 tonight.

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Well, I believe DOC needs to be defunded

1	Page 90 December 16, 2019
2	and de-, dismantled. And while I refuse to
3	settled until lives are no longer on the line.
4	I, I refuse to settle until every individual that
5	requests a call or is in need of medical care
6	receives it. I refuse to settle until every desk
7	shackle in DOC is removed and outlawed.
8	In 2019, City Council made yet another
9	historic vote, a vote to close Rikers Island, now
10	the ball is in your court. Will you continue to
11	condone torture? It will en- en- enable abuses
12	to misuse and abuse their authority under the
13	disguise of safety for staff in facilities, or
14	will you say no more, not on my watch, solitary
15	ends today. Do your job.
16	MS. SHERMAN: Thank you, Ms. V. The
17	next three speakers are Ryan Brown, Eli Dreyfus
18	and Eie Litwok.
19	MR. RYAN BROWN: Hi. My name is Ryan
20	Brown. I am coordinator for the Brooklyn Chapter
21	of Amnesty International, also known as Amnesty
22	International Brooklyn Local Group 27. If you
23	don't know, Amnesty International is the largest
24	human rights organization in the world with

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2 millions of dues paying members around the globe. Two of the major human rights violations that 3 Amnesty fights in this country are the death 4 5 penalty and torture by solitary confinement. Well, we have the death penalty in New York 6 7 State. It's called death by incarceration. A thousand people have died in our prisons and 8 9 jails while Governor Cuomo has been in office and we have death in, by incarceration and we will 10 11 continue to have it unless we end our broken 12 parole system, and end the eqregious practice of 13 life without parole sentences.

14 But we also have solitary confinement. 15 Amnesty International has said about solitary 16 confinement, the callous and dehumanizing 17 practice of holding people in prolonged solitary 18 confinement amounts to cruel, inhuman, degrading treatment and is in violation of international 19 20 So, I think we like to consider New York an law. 21 international city, but how can we do so if we 22 are in violation of international law? 23 We shouldn't consider ourselves 24 international just because we indulge a lot of

	Page 92
1	December 16, 2019
2	wealthy international investment. We should be
3	international because we uphold basic principles
4	of treating our fellow human beings with respect
5	and humaneness, no matter who they are or where
6	they come from.
7	One of the cases that Amnesty
8	International has worked on is the case of Albert
9	Woodfox. He was held in solitary confinement for
10	over 40 years in Louisiana and he has said of
11	solitary confinement and these are his words, the
12	sole purpose of solitary confinement is to
13	destroy human spirit. So, what I would ask you
14	today is what possible justification can you give
15	the people in this room, what possible

justification can you give the people of New York City not to end a sadistic form of torture whose sole purpose is to destroy human spirit? And you may answer that question if you'd like.

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And it was mentioned earlier today, that we have to respect one another to find a way forward. But we have the way forward. We've been giving you the way forward for months now. You've got the blueprint to end solitary

1	Page 93 December 16, 2019
2	confinement. What more is there to talk about?
3	You have the solution. Please just use it and
4	just end this. Just end it.
5	[APPLAUSE]
6	MS. SHERMAN: Thank you. I'd, I'd like
7	to remind folks who are testifying and have
8	written remarks that they're reading, that you
9	should submit those written remarks so that they
10	can, we can make them a part of the record.
11	Thank you
12	MR. ELI DREYFUS: Good evening. My name
13	is Eli Dreyfus and I work for Robert F. Kennedy
14	Human Rights. Robert F. Kennedy Human Rights is
15	an international human rights organization
16	dedicated to realizing Robert Kennedy's vision of
17	a more just and peaceful world. In the United
18	States, we advocate for an end to mass
19	incarceration including the elimination of unjust
20	pretrial detention practices that
21	disproportionately impacts the poor and
22	communities of color.
23	We appear before you today in solidarity
24	with community activists, faith leaders and

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elected officials to urge the complete abolition 2 of solitary confinement in New York City jails. 3 The DOC's practice of solitary confinement 4 5 routinely amounts to cruel inhuman or degrading treatment and even torture, in violation of 6 7 international human rights law and the tenets of basic human dignity. The Board of Corrections 8 9 bears the responsibility of ensuring that no person in DOC custody is subjected to torture. 10 11 According to the United Nations Special 12 Rapporteur on torture "solitary confinement when 13 used for the purpose of punishment cannot be 14 justified for any reason, precisely because it 15 imposes severe mental pain and suffering beyond 16 any reasonable retribution for criminal 17 behavior."

In line with this principle, the blueprint proposed by our allies eliminates all forms of punitive segregation in New York City jails. It requires that any other form of segregation such, EHS, ESH is only used as a last resort for as short a time as possible and with effective judicial oversight. Additionally, the

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UN standard minimum rules for the treatment of
prisoners, also known as the Mandela Rules
explicitly prohibit indefinite and prolonged
solitary confinement, defining prolonged solitary
confinement as anything longer than 15 days.

7 The Board's proposed rule allows for solitary confinement for up to 60 days. This is 8 9 out of step with international law and in violation of basic human rights. Seventy-five 10 11 percent of people detained in New York City jails 12 are awaiting trial. This should be of particular 13 concern for this body, because solitary 14 confinement in the pre-trial context is 15 associated with additional danger and harm. 16 According to the UN Special Rapporteur "the 17 practice of solitary confinement during pretrial 18 detention creates a de facto situation of 19 psychological pressure."

This can influence individuals to plead guilty to an offense that they did not commit simply to end the suffering of solitary. Therefore we urge the adoption of the blueprint for ending solitary confinement in New York City

1	Page 96 December 16, 2019
2	jails drafted by the NYC Jails Action Coalition
3	and the HALT Solitary Campaign.
4	Punitive segregation must be eliminated.
5	All other forms of segregation must be re-
6	imagined to provide actual therapeutic,
7	restorative programming. DOC's use of lock-ins
8	and lockdowns must be curtailed to allow
9	necessary programming to continue. This could
10	result in decreased trauma, increased continuity
11	of care and the opportunity for relationship
12	building within our jails and with loved ones on
13	the outside.
14	We at Robert F. Kennedy Human Rights
15	believe this is a once in a generation
16	opportunity for New York City to again take the
17	lead on meaningful criminal justice reform.
18	Please seize that opportunity. Adopt the
19	blueprint. Thank you for your time.
20	MS. SHERMAN: Thank you
21	[APPLAUSE].
22	MS. SHERMAN: Good evening.
23	MS. EVIE LITWOK: Good evening. One
24	second, short people have to adjust. Okay, my

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1	December 16, 2019
2	name is Evie Litwok. I'm the Executive Director
3	of Witness to Mass Incarceration and a formerly
4	incarcerated Jewish lesbian. I was placed in
5	solitary for writing an article about poor
6	medical care. In the facility I was in, all
7	1,300 women were seen by one physician's
8	assistant and whether you had cancer, a cyst, a
9	broken foot or a headache his diagnosis was the
10	same, you're fat, walk on the track and drink
11	water.
12	So when Miriam Hernandez walked in
13	looking like she was going to die, he gave her
14	the fat speech and two weeks later, she died when
15	her gallbladder burst. He could have performed
16	a, a blood test, he could have done anything to
17	test her situation but he didn't. And, and I
18	wrote an article about this. An hour after it
19	was posted, I was arrested, shackled and told I
20	would stay in solitary for as long as they wanted
21	to keep me which could have been years, because I
22	wrote about an officer.
23	Solitary is a prison within a prison and
24	no matter what laws you think you're writing or

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2 what rules you think you're writing, it's run by a few people and they do whatever they want to do 3 and that's true across this country. I was kept 4 5 in solitary for seven weeks, a month past my release date. I have never recovered physically, 6 7 mentally or emotionally from that experience. Ι was strip searched, given a t-shirt, shorts 8 9 underwear, a jumpsuit and a thin blanket. It 10 was, the temperature was kept freezing. I had to 11 wear all my clothes all the time, including the 12 blanket. And when I asked the guard for a second 13 blanket, I was 64 years old at the time I was in 14 solitary. They knew I suffered from anemia. The 15 answer was no, no blanket.

To understand the gravity of the 16 17 situation, I want each of you to imagine you 18 being in your own bathroom at home, lock the 19 All you have is the toilet and where your door. 20 bath or shower is a metal bed and there is no, no 21 books, no computers, nothing for you to do, no 22 lap-, no telephone, no television nothing. You 23 have three choices in your bathroom. You can 24 stand up, you can sit on the toilet or you can

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2 lie on your metal bed and get crippled. The question I have for each of you is do you really 3 think you could sit in your own bathroom for 24 4 hours with -- and I think the answer as I cross 5 this country and ask that question I get maybe 6 7 three people who are wise guys who say I want to try it and I say sure then I want to talk to you 8 9 afterwards.

I suffered from high blood pressure, 10 11 vertigo and migraines the day after I was put in 12 solitary due to the fluorescent lights that are 13 kept on all the time it was two weeks before they 14 took my blood pressure, in spite of the fact that 15 I had a history of heart disease and then on both 16 sides of my family, my relatives have died from 17 heart disease. So, my blood pressure two weeks 18 after I begged for it to be taken, was 200 over 19 100 and when I asked the guard I said is it time 20 I have a problem, like I could go into cardiac 21 arrest he laughed and he said we get \$75,000 on a 22 life insurance policy if you die in prison. 23 What you can't understand and what the 24 rules will never show you is the, when you have

Page 100 1 December 16, 2019 people in a position of power with people who are 2 not in a position of power, people abuse the 3 4 power. It's historically correct, it's, it's 5 everywhere. So, when I was given my first roll of toilet paper and I asked for a second one the 6 7 quard looked at me and said wipe yourself. I'm a human being. I'm 64 years old. That's not an 8 9 answer. But that's the things you don't see in 10 your rules and the torture that you don't 11 understand. The list of what I can tell you is 12 long. I heard 60 women screaming 24 hours a day 13 get me the fuck out of here and it wasn't done 14 together. So, all it was was loud noise. Many 15 women tried to commit suicide. I heard them die, 16 those who were successful.

17 And frankly I didn't want to kill 18 myself, but I, because of being in solitary I 19 looked up at God and I said I've had a good life 20 it would be okay with me if I didn't wake up 21 tomorrow. And the truth was I didn't want to 22 I could not take what was being done to wake up. 23 me and it's not only 16 and 17 and 18 year-olds 24 who suffer. I'm 64 years old. I'm a senior with

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1	December 16, 2019
2	medical issues and you can't even begin to
3	understand the consequences of those medical
4	issues.
5	I was released five years ago. I did
6	not know at the time of my release that I, that
7	the time I spent in solitary would impact the
8	rest of my life. A very crowded subway, an
9	airplane, an elevator caused me to stop
10	breathing. Small spaces caused me to suffer
11	severe panic attacks which leads to my
12	hospitalization and I've suffered numerous mini
13	strokes. My doctor fears that the next panic
14	attack will be my last stroke. I also can't be
15	in a loud space, because it's reminiscent of the
16	60 women screaming. I continued to suffer from
17	vertigo for weeks at a time, an illness I did not
18	have before prison, which renders me unable to
19	leave my bed. And when you come out of prison,
20	you're poor and you have to leave your bed in
21	order to pay your bills.
22	So, the consequences of your economic
23	security and the mental illness and the physical

illness that you suffer from solitary combined

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-	Page 102
1	December 16, 2019
2	leads you to maybe I don't want to be here
3	anymore. It's inconceive-, solitary
4	confinement is a way to permanently destroy a
5	person's mental health, if you have no concern
6	for that human being.
7	It's inconceivable to me that in spite
8	of the number of people testifying about the
9	impact of solitary, the number of printed
10	articles detailing the horrors, the body of
11	research showing the harm it causes that we're
12	even sitting here discussing it. I testified
13	before you four years ago in 2015, about solitary
14	and its impact on my life. Four years later
15	nothing much has happened. There's a lot of
16	conversations. I hold you and this oversight
17	committee responsible for the damage done to
18	every person placed in solitary confinement.
19	What's it going to take for you to abolish
20	solitary? How many more deaths, suicides, mental
21	breakdowns will have to occur before it was
22	eliminated?
23	If it were up to me, I'd put you in

23 If it were up to me, I'd put you in 24 solitary because only one of two things can

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2	happen if you were in solitary, which is you
3	would have to see how well your rules were
4	working, and I wrote these notes while speaking
5	so bear with me. You would have to see how your
6	rules are working and I guarantee you you would
7	understand the despair we feel. And I highly
8	recommend that you put yourselves in solitary for
9	a week, honestly. Because I don't think you get
10	it I don't want your prayers and thoughts just
11	like whenever there's a mass shooting, I don't
12	want to hear the prayers and thoughts for the
13	people that died in solitary. I want you to do
14	something. I've been here, you made a comment so
15	that we are at the beginning of the process.
16	This process is decades late in responding. You
17	cannot be at the beginning of the process. Four
18	years ago, you were at the beginning of the
19	process. It's too late for you to be at the
20	beginning, because history is not going to view
21	your actions and responses kindly as more and
22	more people like me who've been in solitary come
23	out and talk and testify about what you allowed
24	to happen. Thank you for your time.

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1 December 16, 2019 2 MS. SHERMAN: Thank you. 3 [APPLAUSE] MS. SHERMAN: The next three speakers 4 5 are Jennifer Parish, Cynthia Tucker and Anna 6 Arkin-Gallagher. 7 MS. JENNIFER PARISH: Good evening. My name is Jennifer Parish. I'm the Director of 8 9 Criminal Justice Advocacy at the Urban Justice 10 Center Mental Health Project and a member of both 11 the Jails Action Coalition and the HALT Solitary 12 Campaign. Thank you for this opportunity to 13 testify and for having this additional hearing. 14 Fundamentally, the rules regarding 15 restrictive housing must ensure humane treatment 16 for everyone incarcerated in the city jails. The 17 Board sets the minimum standards for how people 18 in custody must be treated and that minimum 19 should respect the human dignity and inherent 20 value of each person regardless of the charges 21 against them or the crime for which they've been 22 convicted. Overwhelmingly, the testimony at 23 these hearings has shown that isolation is not 24 humane treatment. You have heard from people,

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who though now released from jail, still bear the scars of solitary confinement. For the Board to continue to sanction treatment that includes such pain and has such long-lasting effects is unconscionable.

7 Instead, the Board should end the use of solitary confinement in the city jails, make ESH 8 9 and other alternative units about safety, rehabilitation and the prevention of violence 10 11 without restrictions on out-of-cell time; adopt 12 specific mechanisms and time limits for moving 13 people out of ESH and other alternative units; 14 create minimum standards for emergency individual 15 lock-ins and lockdowns; and dramatically limit 16 the use of restraints with a strong presumption 17 against their use.

18 The blueprint for ending solitary 19 confinement in New York City jails spells out 20 this vision and our proposed rules submitted to 21 the Board in October specify how the standards 22 should be changed to achieve that vision. We are 23 asking the Board to require the Department to 24 change its approach from a punitive one that

1	Page 106
1	December 16, 2019
2	relies on isolation, restriction and restraints
3	to an approach that separates individuals from
4	the general jail, jail population and affords
5	them services and programs, programming in a
6	supportive, non-punitive environment
7	I'm going to focus on our recommendation
8	for replacing solitary confinement. For the
9	alternative units we take ESH as a starting
10	place, because the current rules describe what it
11	should be, housing to protect the safety and
12	security of persons in custody while promoting
13	rehabilitation, good behavior and the
14	psychological and physical wellbeing of persons
15	in custody, that separate people from general
16	population when they propose, when they, when
17	they pose the greatest threat to safety, but
18	promote rehabilitation by incentivizing good
19	behavior and providing the programs necessary and
20	therapeutic resour- resources.
21	But ESH has never realized those

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objectives, because although they espouse these, these purposes, the Board's current standards allow for lockout time to be cut in half from 14

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hours down to seven hours, and a schedule that shifts that lockout time from seven hours in the morning one day to seven hours out in the evening the next, so that there are 24 hours people are locked down every other day. They also allow for out of cell time to be spent shackled to a desk or in a recreation cage when outdoors. This infusion of restrictions prevented those units from accomplishing the stated purpose.

11 Instead, our proposed standards add the 12 elements that we believe would make these units 13 truly rehabilitative. This includes congregate 14 human interaction, congregate recreation and 15 seven hours of quality programming, including 16 programming that's effective and successful at 17 reducing violence. We ask for steady staff to 18 promote consistency and predictability and 19 community in the unit and staff that are trained 20 annually in the skills needed to operate the unit 21 as a rehabilitative setting. We recommend that 50 percent be civilian staff or officers with 22 23 social work degrees and on each unit the 24 individual, each person should have an individual

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rehabilitation plan that provides clear guidance 2 on what they will be offered and what they need 3 to achieve to advance through the unit, with the 4 presumption that they will advance and, and be 5 released after four months at a maximum. We also 6 7 call for a fair process on being placed in that unit, including the right to representation at 8 9 the hearing, a neutral decision maker and the 10 right to an appeal. 11 Personally, I'm stunned that the Board 12 proposed rules that will permit indiscriminate 13 use of shackling for more than two years and even 14 still permit individualized use of restraint

desks indefinitely without any process or protections.

17 Finally, we join the Children's Rights 18 and Children's Defense Fund and others who have 19 called for the Board not to eliminate the 20 requirement that young adults be afforded 21 developmentally appropriate treatment separate 22 from adults. The city generally recognizes that 23 services for young adults must be tailored to 24 their needs. The Board should not roll back its

1	Page 109 December 16, 2019
2	requirements for this population. Thank you.
3	MS. SHERMAN: Thank you.
4	[APPLAUSE]
5	MS. SHERMAN: Good evening.
6	MS. CYNTHIA TUCKER: Good evening. My
7	name is Cynthia Tucker and I am a mother, I am a
8	mother of my son being incarcerated, I am a
9	sister, I'm a niece of whoever you want to call.
10	Well, I wanted to let y'all know, your nephew is
11	in jail. He's been incarcerated, he's been
12	shackled, he's been in the box. They didn't want
13	to feed him, they put him in the box. He got in
14	a fight, they put him in the box. And why they
15	put him in the box, because he wouldn't testify
16	against who had to fight with him, because he
17	would have been in problems, he would have had
18	trouble being signified out that if he did tell
19	he'd be in trouble. So, he considers staying in
20	the box.
21	It's unfair that we have to go through
22	this. All of y'all up there wear glasses just
23	like I do. I hope that you can go to a jail and
24	sit down see how it's being really treated

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2	because we are unjustly unfair. You can make a
3	difference. I don't know how to come to you.
4	I've came to you before when the director, she
5	left. But I'm seeing the same faces and being
6	mass incarcerated, it's not good. It's not good
7	at all. They crying out. My son called me the
8	other night. He said, ma, I need help 'cuz I
9	understand I need to talk to somebody. You can't
10	talk to no one incarcerated. The officers are
11	not going to talk to you, they're not gonna let
12	you see your counselor. He had to go do medical,
13	they had not let him see medical yet because the
14	fight caused him to be deaf and they told him he
15	LC30, but he's really LC20, meaning he's
16	definitely deaf in the ear and he's not getting
17	help, but being put in the SHU without anybody
18	coming or hearing you. Could you imagine that?
19	Mr. Regan, can you imagine that? Not at
20	all. So, he's your nephew. You need to vote on
21	it. I don't know what that officer was talking
22	about no. No, we say yes. We need you to say
23	yes. Hope is here for us to fight with you, not
24	against you. But we need you. We need y'all to

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come together. We need you to hear. I am a mother. I am somebody's sister. I have opened my phone out to people that are in jail I don't even know, because they need us. They really need us. Well, we need y'all. I need you. My son needs you. Your nephew, I gave him to y'all just now. He needs you along with everybody else who's standing here testifying and coming to you and pleading. But if you feel that I'm begging, then I'm begging. But I feel that I'm asking and I'm reaching. Because in our United States, who do we stand with? Are we standing with each other or we're standing against us?

15 It's just like, I have a cat. My cat 16 was in the closet. When the cat come out the 17 closet, he came out crazy. But that's what the 18 SHU does. It makes you crazy and it's unfair. 19 The ASPCA take care of their animals. We, as a 20 people, that's what they do. They do create an 21 animal and we are not that type of people. How 22 can we collectively come together, because I'm 23 coming to you pleading a case and I know you have 24 a heart because your heart beat like my heart.

> **Geneva Worldwide, Inc.** 256 West 38th Street, 10th Floor, New York, NY 10018

1	Page 112 December 16, 2019
2	We are of the same color. I don't care what
3	color we are because if you cut me, my skin won't
4	be white. But if you cut me, we all gonna bleed
5	blood, the same.
6	We all are the same. We are God's
7	creatures. Could we come together? Could we
8	come to a solution could you stop the hole
9	because it's not good for nobody. My heart went
10	out to her when she's telling me 64 years old and
11	you in the SHU, it can't be. Come on, she's
12	somebody mother, somebody's sister, she's my
13	momma right about now, and she got me by four
14	years and I just turned 60. Come on, please.
15	We need you to hear us. We've been
16	here. This is my second time before y'all.
17	They've been here and I, I don't see the change.
18	I see y'all looking, but I need to feel it
19	because y'all know what? God forgave and Jesus
20	saved, all right. Thank you, thank you so much
21	thank you.
22	MS. SHERMAN: Thank you.
23	[APPLAUSE]
24	MS. ANNA ARKIN-GALLAHER: Thank you for

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the opportunity to speak this evening. My name is Anna Arkin-Gallagher and I'm a senior staff attorney in the education practice at Brooklyn Defender Services. In this role, I work with our clients to help them achieve their educational goals. For young people who are in DOC custody, that means helping them to navigate a system that often seems expressly designed to limit their access to educational services.

11 I echo many of the concerns of those who 12 have testified already. Others and most of all, 13 those who have experienced solitary confinement 14 have spoken bravely and eloquently about the 15 trauma of solitary and have raised compelling 16 arguments as to why these rules provide an 17 insufficient safeguard against the harms to which 18 this practice gives rise and the inhumanity of 19 the practice of holding people in solitary 20 confinement full stop.

As an education attorney, I'm here to express a set of specific concerns related to the educational rights of young people who are placed into so-called restrictive housing units which

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are barely referenced in the proposed rules. In New York City, young people have the right to receive an education through the school year in which they turn 21. Despite this unequivocal right, we hear all too often from our clients on Rikers Island, both inside and outside the restrictive housing units, that they encounter great difficulty in accessing educational services. But the problem is especially serious in the restrictive housing units.

12 The July 2018 monitoring report from the 13 Hansberry litigation specifically called out the 14 restrictive hous- housing units as being perhaps 15 the least compliant in terms of making sure young 16 people could go to school, failing to ensure that 17 those students in custody receives the minimum 18 requirement, minimal as it is, of at least three 19 hours of school daily. The findings of the 20 monitoring report echo what we continue to hear 21 from the people we serve on a regular basis. A 22 young adult recently represented by our office 23 was eager to work towards getting his high school 24 equivalency credential while on Rikers Island.

1	Page 115 December 16, 2019
2	While in a general population unit, he wasn't
3	being brought school on a regular basis. But
4	after some advocacy, he told us he'd started
5	being brought to school regularly and happily
6	reported he was making progress towards earning
7	that high school equivalency credential.
8	Unfortunately, shortly thereafter he was
9	transferred to a secure unit. While there, his
10	school attendance was spotty at best. Many days,
11	no one came to bring him to school and he
12	received no school work. As a result of his time
13	in secure, he lost much of the momentum he'd
14	built up going to school.
15	Another young person we worked with,
16	also working to earn his high school equivalency,
17	spent a significant amount of time in TRU. He
18	reported he received no educational services
19	while there. Once he came out of restrictive
20	housing, he told us he was giving up trying to go
21	to school on Rikers at all. It just wasn't worth
22	it because it was nearly impossible to ever get
23	to school.

The proposed rules state that one of

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2 their core principles is the idea of promoting rehabilitation, which includes "providing 3 necessary programming." But the rules make 4 essentially no mention of educational services 5 and provide virtually nothing in the way of a 6 7 firm guarantee. While I appreciate that the Board has included some requirements to report on 8 9 the provision of educational services and 10 programming more generally, I would urge the 11 Board to make sure the rules include a clear 12 recognition of the right of all young adults to receive educational services, alongside concrete 13 14 provisions aimed at ensuring young people have 15 every opportunity to realize that right. Thank 16 you. 17 MS. SHERMAN: Thank you. 18 [APPLAUSE] 19 MS. SHERMAN: Brandon Holmes, Brooke 20 Menschel and Alison Dowdle. 21 MR. BRANDON HOLMES: Good evening. 22 MS. SHERMAN: Good evening. 23 MR. HOLMES: My name is Brendan Holmes.

I'm here as a member of the Jails Action

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Coalition in support of this Board using the blueprint as defined by HALT Solitary, CAIC and Jails Action Coalition to end solitary in New York City. I've testified in the last hearing, but I wanted to read testimony from one of our partners and a transgender woman currently at RMSC named Jenna, that was provided on December 6, 2019.

10 My experience with protective custody 11 was like any other men's facility, because they 12 do put us in a men's facility when we asked for 13 protective custody. This makes no sense. So, if 14 I have an issue with someone, I must be subject 15 to being treated as a man due to asking for help 16 and risk isolation. Protective custody in a 17 men's facility is just like in general 18 population. There's always a fight in the units 19 and a lot of discrimination. You still deal with 20 lockdowns, special searches and sexual 21 harassment. Why don't they have real protective 22 custody for us here? Why don't we have any cell 23 blocks to live in?

The last expe-, my last experience in

Page 118 1 December 16, 2019 2 the box or solitary confinement was horrible. They served one hot meal and that was lunch. 3 Breakfast was cold cereal and dinner was baloney 4 on bread. This was at OBCC. We were locked in 5 for 23 hours a day with one hour of recreation. 6 7 Phone usage was limited to one time per month and most times that they ran rec- recreation, it was 8 9 so early that you never got to go. They never 10 let me out, due to me being a woman. 11 MS. SHERMAN: Thank you. 12 [APPLAUSE] 13 MR. MICHAEL REGAN: Excuse me, excuse me. 14 Hi, was that give it to you anonymously? 15 MR. HOLMES: No, Jenna. 16 MR. REGAN: Can you send that to me? 17 MR. HOLMES: Yes. 18 MR. REGAN: Thank you. 19 MS. BROOKE MENSCHEL: Good evening. My 20 name is Brooke Menschel. I'm the Civil Rights 21 Counsel at Brooklyn Defender Services. Thank you 22 to the Board for hearing our thoughts this 23 evening. Over the past few weeks, you've heard 24 numerous responses to the proposed rules and

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2 suggestions on how to minimize the use of restrictive housing, especially when it's 3 punitive in nature and to ensure robust due 4 5 process protections for people detained in city custody. All of the suggestions and 6 7 recommendations have been incredibly important. Many of the comments come from lawyers, like me 8 9 who work on issues related to our jails. Others 10 come from social workers and community advocates 11 who provide invaluable services to the people 12 detained in city custody. Most importantly 13 though directly impacted people have shared their 14 voices persuasively and compellingly on the Board's proposed rules. 15

The common thread of these comments is 16 17 that they all seek to ensure that the voice of 18 directly impacted people informs the Board's 19 process as you consider how and when to impose 20 solitary confinement in our jails. Yet far too 21 often, the voices of those very people are absent 22 during the disciplinary process when the 23 Department considers whether to sentence a person 24 to days, weeks or months locked alone in a cell.

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At the December 2nd hearing, we heard that the Board previously considered a provision that would allow people to bring an advocate to their disciplinary hearings. BDS and many other organizations have called on the Board to adopt that type of, of a provision and we were disappointed that it was not included in the initial proposed rules. We hope that moving forward, that will be rectified. Allowing for an advocate in the process would be an important step to providing due process protections guaranteed by the Constitution.

14 Outside the jail setting, this concept 15 is hardly novel. In employment disputes, civil 16 actions and all types of administrative hearings, 17 parties are regularly represented by advocates, 18 legal or otherwise. And as we know corrections 19 officers receive this type of representation when 20 they face disciplinary charges. Certainly, 21 incarcerated people deserve the same opportunity 22 for their advocates to represent them. This type 23 of representation helps amplify, amplify the 24 voice of people whose rights are implicated. As

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2	a society, we recognize that such representation
3	is appropriate when our livelihood or financial
4	health will be affected. Surely we should allow
5	for such representation when the stakes go far
6	beyond bank accounts or employment, but are
7	likely to result in long-term physical, mental
8	and emotional harm.
9	We urge the Board to require the
10	Department to develop a system that allows people
11	to bring a representative or advocate to
12	disciplinary hearings. Such a system will
13	improve transparency and enhance accountability
14	in the disciplinary process. Most importantly,
15	it will ensure that impacted people are able to
16	mount a defense before being sanctioned to time
17	and isolation.
18	You heard tonight that the legal service
19	providers that are here are ready to work with
20	the Board and the Department to develop such a
21	system and to ensure that the people we represent
22	are able to tell their truths throughout the

disciplinary process. We hope you'll heed that invitation. Thank you.

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1	Page 122 December 16, 2019
2	MS. SHERMAN: Thank you.
3	[APPLAUSE]
4	MS. SHERMAN: Good evening.
5	MS. ALISON DOWDLE: Good evening. Hello,
6	my name is Alison Dowdle and I am a social work
7	intern in the jail services unit at Brooklyn
8	Defender Services. My specific role is to
9	advocate for the rights and welfare of those
10	incarcerated in our city jails. In addition to
11	working as an intern with BDS, I am also a
12	licensed emergenc- emergency medical technician,
13	where I work to ensure the safety of people who
14	are in a state of emergency. My role is to keep
15	my patients safe, treat any immediate life
16	threats and provide adequate care to people in a
17	state of extreme vulnerability.
18	Although I don't provide treatment to
19	people in our city jails, I regularly hear
20	stories of people in need of medical and/or
21	mental health attention regularly as a part of my
22	internship with BDS. As an EMT, I see the
23	significant gaps within the system to request for
24	any form of care and sadly enough, I often learn

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that there are serious barriers to receiving 2 3 necessary treatment for people incarcerated in all jails. A major issue that our office 4 encounters is that the Department has the ultimate veto when it comes to a person in need 6 7 of medical or mental health care. Correctional officers serve in many respects as gatekeepers, 8 9 without the requisite knowledge or training. The system is rife with opportunities for abuse or 10 11 human error.

12 For instance, to access medical care in 13 a DOC facility, an individual must submit a sick 14 call request to officers in their housing unit 15 who are responsible for forwarding requests to 16 medical staff. Far too often correctional staff 17 can and do fail to forward sick call requests to 18 the medical staff or falsely claim that an 19 individual refused to be brought to their 20 appointment as a tool of control or punishment. 21 While these situations threaten the 22 health and wellbeing of all people in custody, 23 they are especially dangerous for those isolated

in restrictive housing units and I want to share

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two examples of the harm that can result, both of which BDS has previously brought to the Board's attention.

Mr. R had a diagnosed seizure, seizure 5 disorder. Following a fight, he was given a 6 7 maximum time in solitary confinement, despite written notification from medical staff outlining 8 9 the specifical, specific medical dangers should 10 he be placed alone in a cell. DOC ignored 11 concerns and kept him isolated and alone in a 12 cell for 23 hours a day. Unsurprisingly, his 13 isolation only exacerbated his medical condition, 14 resulting in more regular seizures and him 15 seriously injuring himself during a fall. 16 Nonetheless and despite repeated 17 advocacy, DOC denied his transfer to an open

18dorm. Instead, and despite repeated -- oh,19sorry, instead the Department opted to keep him20inside a solitary cell and assigned a DOC officer21to provide check-ins and unfortunately the22officer was regularly absent or asleep.23And Mr. A's case is equally troubling.24Mr. A entered DOC custody confined to a

1	Page 125 December 16, 2019
2	wheelchair and in need of round, and in need of
3	round-the-clock medical care and full-time
4	assistance with basic activities. Nevertheless,
5	Mr. A was sent to solitary confinement for an
6	alleged rules violation, where he was isolated
7	from medical staff. When our office learned of
8	his isolation from his wife, we raised our
9	concerns with the Department and the Board.
10	While the Board, especially former Executive
11	Director Martha King was able to advocate for Mr.
12	A's release to a more medically appropriate
13	housing assign- assignment, his health had
14	already decompensated by the time he was re-
15	housed.
16	In both of these cases, Department staff
17	who were not trained medical clinicians,
18	dictating housing conditions that have a direct
19	impact on people's healthcare. This is
20	incredibly troubling. While Mr. R and Mr. A both
21	have advocates who were willing to intervene on
22	their behalf and bring attention to their
23	situation, these types of situations are often
24	overlooked.

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	DOC's impact on medical treatment
3	requires serious oversight by the Board and for
4	people housed in restrictive custody, we urge you
5	to incorporate guidelines and accountability
6	measures into the rules. As written, we fear
7	that the proposed rules grant the Department a
8	license to continue the culture of DOC as
9	gatekeeper to medical care. Instead, we must
10	bolster CHS's authority and role in decision
11	making to ensure people in State custody have
12	access to care that they need. Thank you.
13	MS. SHERMAN: Thank you.
14	[APPLAUSE]
15	MS. SHERMAN: The next three speakers
16	are Kelsey De Avila, Brooke Taylor and Fran
17	Geteles.
18	MS. KELSEY DE AVILA: Hello, my name is
19	Kelsey De Avila, I'm with Brooklyn Defender
20	Services and I echo the comments made by those
21	who are directly impacted and the advocates who
22	have spoken here this evening and the many, and I
23	want to thank the many elected officials who are
24	calling for an end to solitary and who have

1	Page 127 December 16, 2019
2	endorsed the HALT and Jails Action Coalition
3	blueprint to ending solitary confinement in New
4	York City jails.
5	So, I want to use this time to elaborate
6	on the comments made by my colleague, Alison who
7	just spoke, who spoke about the access and
8	barriers to healthcare while in restrictive
9	housing. Over the last four years, we have
10	frequently told this Coard and City Council that
11	DOC serves as a gatekeeper to acc-, to accessing
12	care. The proposed rules by the Board of
13	Correction fail to address this flaw in the
14	system and continue a practice that we know isn't
15	working. Correctional Health Services must have
16	the ultimate authority to remove a person from
17	restrictive housing any time there is a threat to
18	the person's physical or mental health.
19	To ensure this option is a practical
20	reality and not merely illusory, CHS must be
21	notified immediately any time someone is

22 transferred to any type of restrictive housing.
23 Further, in order, in order to recognize signs of
24 decompensa- decompensation, CHS must be allowed

1	Page 128 December 16, 2019
2	the mandate, resources and access to provide
3	constant and continuous rounding.
4	By its nature, corrections is punitive.
5	The Department staff serves to fulfill the
6	Department's punitive mission. Department staff
7	are not medically trained to recognize
8	contraindications to restrictive housing
9	placement and the cases of the people that our
10	office represents, including those that my
11	colleague Allison described, demonstrate that
12	it's not possible nor appropriate for Department
13	staff to make housing decisions when input from
14	healthcare staff is ignored.
15	And earlier today, CHS came up here and
16	that they are the sole entity to override DOC
17	security, but as it's already been described,
18	that's not exactly what happens in practice. BDS
19	and other organizations are privileged that when
20	we advocate for people in our jails, we are able
21	to call the Board of Correction and DOC
22	leadership directly to ensure immediate action,
23	often in the case, as in Mr. A's case, within
24	hours.

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2	Now there are, there are many people in
3	jail who do not have BDS or Legal Aid or Bronx
4	Defenders or the other organizations who are
5	being represented here. And even for those who
6	do we often do not know that medical input is
7	ignored until it is too late. CHS staff are, are
8	our on-the-ground advocates that people rely on
9	and it is up to the Board to ensure that their
10	input is heard and followed. The rules should
11	address the gaps in care and prohibit DOC from
12	making medical decisions that can, that have and
13	will continue to directly harm individuals.
14	And I want to take this time to also
15	mention one former BDS client, whose name we have
16	all learned tragically in the last week.
17	Nicholas Feliciano is a young man whose story
18	should horrify us all. We will undoubtedly learn
19	more as the investigations go forward, but what
20	seems clear at this point is that Mr. Feliciano,
21	a young man with a significant history of mental
22	health needs and suicidal ideation did not
23	receive proper attention or treatment by DOC or
24	CHS. We don't know the reasons but we know the

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results.

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Without requiring CHS input and 3 mandating that DOC cannot override a CHS 4 5 decision, we fear that the proposed rules will only codify the practice we know leads to 6 7 tragedy. BDS, as well as many of our allies here, will be submitting additional written 8 9 comments in the weeks to come. And we urge you 10 to seriously consider each and every point that 11 has been raised and address them as you revise 12 the rules. What is now merely words on paper 13 will have an enormous impact on the wellbeing of 14 people in city's care. For many, like Nicholas 15 Feliciano, like Layleen Polanco and many names 16 we've all been talking about, your decisions are 17 truly a life and death matter. Thank you. 18 MS. SHERMAN: Thank you. 19 [APPLAUSE] 20 MS. BROOKE TAYLOR: Hi, my name is 21 Brooke Taylor and I'm a social worker at the 22 Urban Justice Center Mental Health Project and I 23 regularly work with individuals whose mental 24 health conditions have been negatively impacted

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by their time spent in solitary confinement 2 specifically. And I assist them with applying 3 for disability benefits, due to their mental 4 health conditions, they're not able to work. 5 But, and I'm very supportive of the 6 7 implementation of the blueprint by the Jails Action Coalition and the HALT Solitary Campaign 8 9 but here, I'm here today to read a comment from 10 someone who's currently incarcerated at MDC, so 11 these are this person's words.

12 To change solitary confinement, you need 13 to change the culture of the jails, the officers 14 and the individuals who work here. You need to 15 have a culture where people actually treat each 16 other like people. This environment breeds hate. 17 When I go to the box, I build a wall around 18 myself. I read, I try to get my time through 19 The box is bad. It does something to me. sleep. 20 Every time, it makes me worse than I am, worse 21 than when I went in. I'm always coming out of it 22 with a vengeance, especially if I didn't do 23 something. I'm not a violent guy but I can 24 become extremely violent if I feel like my safety

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and life is at risk. My parents taught me to defend myself but not to the level of violence that I feel. When you were put in a cell, you get angry and then you have nothing but time to think about how you're going to fight back.

7 September 12, 2004 was the night I had my jaw broke. I was a kid in a fight with 8 9 another kid, an officer pushed me to the ground, 10 punched my face and broke my jaw. They took me 11 to Bellevue, I had surgery and my jaw was wired 12 shut. That night changed me forever. Every 13 officer is a threat to me now. When I came back 14 to Rikers in 2005, I came back fighting for my 15 life. I've been in and out of solitary during 16 incarceration. The first time I was ever in the 17 box was 2005 at OBCC. I was 17, 24 hours a day I 18 was locked-in. In the city you aren't supposed 19 to be in for long periods of time, but if they 20 get a security override for the seven days out 21 you can stay in the box for months without a 22 break.

This April, at GRVC was the last time I was in the box. I got into a fight with another

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inmate and then a verbal alterca- altercation
with a CO. I noticed he favored a certain group
of inmates, Trinitarios. I picked a bone with
him about that. He looked at me, touched his bat
and said I'm untouchable. That night, I was sent
to the box.

8 Officers pick a side. If they don't 9 like you, they can mess with your solitary 10 sentence. All they have to do is change the 11 number in the computer to say 45 days instead of 12 30. Officers steal and starve people. When you 13 lock someone in a cage, all the mistreatment 14 breaks you down even if you're good when you go 15 in. I have PTSD and I have certain triggers. 16 Because of my mom and aunt, if an African-17 American woman disrespects me, it really gets to 18 me I freak out. And if I get upset, I get stuck 19 in the box and if they are angry at me, I don't 20 get fed, don't get a shower. They feed us like 21 savages in the box, especially if they are angry 22 They walk around and ask you if you want at vou. 23 food, but if they don't want to feed you they 24 don't wait for you to say yea or nay.

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2	And the box is disgust- disgusting.
3	It's never cleaned properly and the slot in the
4	door and the cage around that slot are not clean,
5	so you get a small amount of disgusting, dirty
6	food and you have to eat it because you need to
7	survive and that's all you have. Sometimes the
8	lights, water and toilets don't work and there's
9	no communication. Everything you hear is
10	screaming. You have to yell, but you have 40
11	people screaming around you, so you can't
12	actually get attention if you need it. Officers
13	are supposed to make their rounds but they don't.
14	Once when I was in the box, the man next to me
15	almost died. I had to yell and yell.
16	In city jails, you got a six minute
17	phone call every day when you are in P seg, six
18	minutes so you call your lawyer quickly and then
19	you try to talk to your dad and sister but you
20	can't really, so then you get upset. How can you
21	not get upset? This gets depressing just

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thinking about it. I can't help but think that this could be the rest of my life.

Think about what's happening here. You

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2 have people who are super violent and negative operating this place. You have officers that 3 live out in Brooklyn commute all the way here and 4 5 work however many hours in a row. It's a thankless job. These people come in angry too, 6 7 because they're mistreated by COBA and then they bring that anger to us. I see it when new 8 officers start. You have someone, you have some 9 10 who started out strictly pro officer. Thev're 11 the ones who think I don't care if you're right, 12 you're wrong. And you have others who want to be 13 good, who do mean well but then they get jaded 14 and angry and they don't have the mental health 15 screenings that they should be getting either. 16 They say it's a necessary evil, the violence that 17 comes from the officers keeping this thing going 18 around and around. It's never about COs, 19 inmates, cops. We are all human here. If you 20 were a fly on the wall in this place, you would 21 morph back into a human just to do something 22 about it. Solitary does things to you, this 23 place breeds hate. Thank you.

24 MS. SHERMAN: Thank you.

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2	[APPLAUSE]
3	MS. SHERMAN: Good evening.
4	MS. FRANCES GETELES: Good evening. I'm
5	Dr. Fran Geteles, and I'm an active member of
6	CAIC and the HALT Solitary Campaign and working
7	with the people from JAC, who with us have put
8	together the blueprint that we are asking you to
9	implement. One of the core principles that you
10	state in your new regs is that people should not
11	be dehumanized and should not be demeaned. Well,
12	the testimony that you've just heard and all the
13	testimony prior to that about the effects of
14	solitary confinement show that no matter what
15	you're doing, if you don't end solitary
16	confinement, you are not keeping up with your
17	concept that people should not be demeaned and
18	dehumanized. That's exactly what you are doing
19	to them. I want to address three particular
20	items in, in the new regs. The first one is the
21	one I spoke to you about the last time I was here
22	a couple of weeks ago and I raised the question
23	of the fact that you have a time limit on
24	solitary and then you were constantly granting

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waivers so that the, the limit was 30 days then a person had to be put out for seven days and then could go back into solitary. You were granting waivers that the seven days weren't needed. And in the process, of course, you were potentially granting indefinite solitary confinement.

Now your new rule says 15 days and then 8 9 vou can let some, must let someone out for seven 10 days, but now you're codifying the waiver so that 11 the people in charge won't even have to come to 12 you to ask for permission, they simply can waive 13 the seven days on their own. That's horrendous. 14 I don't understand why you're doing it and how 15 you would even begin to think that that is going 16 to improve things, how you would even begin to 17 think that they're not going to take advantage of 18 the situation and constantly waive that 19 requirement.

20 My second point has to do with the fact 21 that we hear all the time about how solitary 22 confinement is a measure that is used for safety 23 and yet your own document talks about the fact 24 that there are over 800 people who've been

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sentenced to solitary who are sitting in general
population waiting to their term to go to
solitary. Now, if you think about that it makes
no sense whatsoever. If it's safe enough to keep
them in general population during that waiting
period, then they don't need to be put in
solitary confinement. There's no logical reason.

9 The other thing I wanted to address was in the introduction to what you had to say about 10 11 youth services and specifically out of cell time 12 for youths, you quote from several other studies 13 that have been doing more progressive action with 14 youth in other prison systems. And you described 15 some of what they talk about as parts of the 16 program. It prior- prioritizes family 17 engagement, self-expression, peer support, 18 personal growth and development, education and 19 career readiness.

The young adults in, for another study are out of cell and unrestrained, free to be in common space, a dedicated outdoor area or one of many converted cells within the unit that serve as a library, study room, meeting room and quiet

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2	space. That's fine. I believe that those things
3	are necessities for youth.
4	I would also argue that that's precisely
5	what you need to be doing for all the adults in
6	your custody. If you truly are dedicated to some
7	kind of rehabilitation, then isolation we know
8	for example that one of the reasons solitary
9	confinement is so deadly psychologically is
10	because of the idleness.
11	And you could see that in the example
12	that's been given to people saying sit in your
13	bathroom with nothing to do for 24 hours and
14	imagine what that would do to your head. Well,
15	idleness is one of the destructive components of
16	solitary confinement. And something that says
17	there needs to be some kind of active
18	programming, active education, active
19	rehabilitation efforts, that's what you should be
20	doing not throwing people in a cell and torturing
21	them. Thank you.
22	MS. SHERMAN: Thank you.
23	[APPLAUSE]
24	MS. SHERMAN: The, the final person who

1	Page 140 December 16, 2019
2	has signed up to testify is Candie. Good
3	evening.
4	MS. CANDIE HAILEY: Good evening. Hi
5	my name is Candie. I'm a member of the Jails
6	Action Coalition and I'm also a solitary
7	survivor. I use the alias solitary survivor
8	because the approximately three years that I
9	spent in solitary confinement was absolute
10	torture. I was denied rec, showers, food,
11	sanitary napkins and even though it's been four
12	years that I've been out of solitary confinement,
13	I still suffer from the nightmares.
14	People say Kalief Browder committed
15	suicide, but I'm here to tell you he didn't
16	commit suicide. He was killed by the police and
17	by the Department of Corrections. One thing you
18	cannot erase I, I, I was given not I was not
19	given food, I was denied religious services, but
20	one thing that I could there's no cure for
21	nightmares. I always have these nightmares that
22	this, that this is a dream that I'm speaking in
23	front of you and that I'm going wake up and be in
24	solitary. What, what kind of treatment is there

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2	to erase nightmares? The only treatment is
3	death. I spend most of my time thinking of a way
4	to commit suicide to get away from the nightmares
5	or that. So, I don't sleep at all. I go days
6	without sleeping, because I'm afraid to go to
7	sleep. How would you feel if it was your loved
8	one stuck inside of an elevator and you had no
9	way of contacting them because you could not get
10	the telephone? The telephone is out of order or
11	you have six people ahead of you or someone broke
12	the phone. I couldn't even make phone calls.
13	Before I was incarcerated I was
14	outgoing. I liked going to parties I liked going
15	to sweet sixteens, I liked going to bridal
16	showers, I liked going to weddings. Now I don't
17	like going anywhere. I hate the world. I'm
18	afraid that if I go outside, I'm going to be
19	abused and put in solitary again. I'm afraid to
20	be intimate with anyone. As a result, my husband
21	committed suicide. He thought I didn't love him.
22	I do love him I'm just afraid of being in love
23	with him and then I have a nightmare flashback,
24	that he's Captain Morgan on top of me, or officer

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Terry.

3	I'm here and I'm begging you to end
4	solitary confinement. Solitary is absolute
5	torture. There is no way of alternating it. The
6	only way to alternate it is to destroy it,
7	demolish it, end it. It ended I'm here
8	physically, but spiritually and emotionally, I'm
9	gone. I sat in my cell and I never told anyone
10	because some people would think I'm crazy, but I
11	don't care what the atheists think. I'm, I'm, I
12	was here for a reason and I said God if you're
13	real, turn the light off. And if you're a
14	believer you know that light went off in my cell.
15	And I questioned it. I said no maybe it's a
16	electrical outage or no. I even thought it was a
17	bug in my brain and they thought they were
18	listening to me. Then I said if you're really,
19	God, turn the light off again and the light went
20	off again. And I'm banging on the door banging
21	on the door and I'm like who's gonna believe me?
22	What am I banging for and I laid back down.
23	And four years later I realized the
24	reason why that light went off was for God to

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2 show me why he put me there. He put me to tell you all that solitary is torture. Look at my 3 4 arms I tried to kill myself every day in there. 5 It wasn't an act. If I was dead, I wouldn't be here to testify but there was a reason why I 6 7 swallow all those pills and I survived. I, I, I tied jumpers around my neck and hung from light 8 fixtures and I survived. I tied sheets around my 9 10 neck and I, I, I survived. I swallowed 11 industrialized detergent, Nair. I'm not making 12 this up. And I survived.

13 And I'm here today to beg you to end 14 solitary. It's absolute torture put people in a 15 program where they could learn how to paint, 16 learn how to, learn how to fix the toilet, learn 17 how to unclog the sink. It's people in solitary 18 that don't even know how to read and write. 19 Instead of having them sit in a cell destroying 20 their, their, their lives, put them in a program 21 where they can learn to read and write. And when 22 they come out, they could be a better person than 23 they were when they came in. Thank you so much 24 for listening to me. I wish I had more time to

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2	speak. Thank you.
3	[APPLAUSE]
4	MS. SHERMAN: Thank you. Thank you very
5	much. And that concludes the, the testimony this
6	evening. I want to thank everyone again who's
7	provided comment today, on December 2nd and in
8	writing. We appreciate your sharing your
9	experience, your expertise and your views with
10	us. It is an honor to be part of such an engaged
11	and thoughtful community of people working
12	towards safer, fair, smaller and more humane
13	jails.
14	We take our responsibilities here very
15	seriously and are committed to enacting rules
16	designed to ensure that people in the
17	Department's custody are placed in restrictive
18	housing in accordance with due process and
19	procedural justice principles and that people are
20	confined in the least restrictive setting and for
21	the least amount of time needed to address
22	specific reasons for placement and to ensure
23	their safety and the safety of staff and other
24	people in custody.

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2	As I said at the beginning of the
3	meeting, we will continue to welcome written
4	testimony via mail, e-mail, fax or posting to the
5	city's rulemaking web page through January 3rd
6	2020. The Board will carefully consider all
7	comments made at the hearings and submitted
8	otherwise and determine whether revisions should
9	be made to the proposed rules. The Board will
10	submit final rules for certification by the Law
11	Department in time for a final Board vote at a
12	future meeting. Under CAPA, any rules adopted by
13	the Board will take effect 30 days after the
14	Board vote. The Board's next regularly scheduled
15	public meeting is on January 14, 2020 at 9:00
16	a.m., back in this auditorium. I hope you all
17	have safe and happy holidays, and we'll see you
18	early next year. Thank you.
19	MR. RICHARDS: And, and echo what Jackie
20	said. We really do appreciate you look, look
21	in the room. I look at the faces that are out

there. Y'all have been coming meeting after meeting and we really do appreciate it. But let me, let me just articulate the five things that I

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feel the urgency as a Board member that we need to tackle as a result of your testimony, and not just tonight, just your testimony overall. It's been very passionate, it's been very clear and I really appreciate it.

7 I do think the time is now to end punitive seg and we have to be bold as a city to 8 9 be able to do it. We need to look at and end the 10 restraint desk. Our system needs to be filled 11 with, as a foundation, restorative justice. That 12 has to be the principles of how we work. We need 13 to have a vision and plan for how we deal with 14 our young folks. We need to make sure that the 15 due process that we laid out, that there is fair 16 representation and support for people as they go 17 through the process. And, and this is something 18 that really crystallized for me when we went and 19 met with the Jails Action Coalition, is that 20 right now we do have a system that when we had 21 Commission Ponte, he said that the ESH was the 22 new way of handling behaviors on the island. 23 And we need to fix it. It's not, it's 24

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not perfect. It's not what we want it to be and

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2	need it to be. We need to fix it. But it is a
3	tool that if done right could make a difference
4	and make jails safer for the officers, for the
5	people who visit and for people who are detained.
6	And so, I just want to close by thanking
7	y'all. We heard you. I have this is really
8	crystallizing for me about this moment we're in
9	and I have confidence that every one of the Board
10	members up here have heard you and will take this
11	really seriously to try to bring about the change
12	we need in this moment. So, thank y'all.
13	MS. SHERMAN: Thank you.
14	[APPLAUSE]
15	(The public board meeting concluded at
16	8:00 p.m.)
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CERTIFICATE OF ACCURACY

I, Devin Turpin, certify that the foregoing transcript of CAPA Hearing re Restrictive Housing Proposed Rule on December 16, 2019 was prepared using the required transcription equipment and is a true and accurate record of the proceedings.

Certified By

Devin Tunp

Date: January 10, 2020

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