

Coalition For Prisoners' Rights Newsletter

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POSSIBILITIES FOR RELEASES

Releasing people is the only surefire option to slow the coronavirus' spread and lethal effects. The U.S. mass incarceration system keeps 2.3 million people a day locked up at the cost of \$182 billion dollars a year. To what end?

Governors can release those imprisoned with a variety of mechanisms. In some states the procedure is to first go through the parole boards—even for the release of sick and older incarcerated. Governors have not generally been very pro-active in this way of saving lives.

Multiple lawsuits have been filed for the release of sick and elderly incarcerated people. Release Aging People in Prison (RAPP), a New York grassroots organization, is clear that "The only solution we advocate for is decarceration." RAPP opposes legislation that excludes people from consideration for release on the basis of their conviction, rather than on their health status and accomplishments while incarcerated.

There are a few relatively positive developments. On March 31, in California, the governor unveiled a plan to let 3,500 people go, over a period of 60 days.

The covid-19 related releases that have happened are largely in jurisdictions with active campaigns against cash bonds and pretrial detention. The largest jail release to date has been in Los Angeles County, which set 1,700 people free on March 23—about 10% of the institution's population. In contrast, the mayor of New York City has let out just 300 people of the thousands that are being held in Rikers Island jail. On March 22, North Dakota released 56 prisoners early. Cook County (Chicago) has released 300 people, less than 6% of the jail population

We are living at a time of extreme crisis. The issues we are struggling with remain the same as they have historically been. As we work to transform the dangers of our current situation, our efforts must set our current emphases and goals in the broad context of the ongoing structural inequities and injustices of our lives today, which will determine our future.

& FOR SAFETY IMPROVEMENTS

Many humanitarian and safety related changes have been called for to increase the survival of those remaining locked up—and their keepers. The most sensible of all are those steps which have been taken throughout police, court and penal systems to reduce average daily populations. The only meaningful way to keep the most people safe is to decrease the number of people incarcerated (see column to left).

As we know, the danger of infection is high in the crowded, unsanitary U.S. jails and prisons both for those imprisoned and for the workers there. And people are admitted and released at high rates daily. In Florida alone, more than 2,000 per day.

Many jails and prisons have ended all in-person visits and begun to use video arraignments and hearings. Many people face a 14 day isolation/quarantine period on entering facilities. But also, there have been a number of expansions regarding phone calls. At the beginning of April, those held at the 122 federal prisons have up to 500 free phone minutes a month—which will affect the more than 175,000 people held in federal facilities.

One of the most specific set of plans and procedures for necessary safety measures to be taken by imprisonment facilities was developed by the American Friends Service Committee Newark NJ office (89 Market St. 6th Fl, Newark NJ 07102). Among their recommendations, in addition to the many ways the size of imprisoned populations can be reduced, are:

- > mandate screening of all entering,
- > provide soap, U.S. Centers for Disease Control (CDC) recommended hand sanitizer, medical care, comprehensive sanitation and cleaning of facilities and other safety measures free, including preparing for indicated quarantine and hospitalization of ill imprisoned people.
- > circulate educational materials that clearly state measures to take to minimize risk of contracting the virus. These should be written and audio, in a minimum of both English and Spanish
- > eliminate medical co-pays
- > eliminate unreasonable time limits on communications with loved ones.

El mayor foco de COVID-19 del país

En el estado de Dakota del Sur, los Centros para el Control y Prevención de Enfermedades están investigando una de las plantas de procesamiento de carne de cerdo más grandes del mundo, donde los casos de COVID-19 vinculados a la fábrica han aumentado al menos a 730. La planta de la empresa Smithfield, situada en la ciudad de Sioux Falls, es actualmente el mayor foco de coronavirus en Estados Unidos. El alcalde de Sioux Falls ordenó a los residentes de la ciudad refugiarse en sus casas, luego de que la gobernadora republicana Kristi Noem se negara a emitir una orden estatal de permanencia en sus residencias.

To receive the CPR Newsletter by postal mail monthly, send us up to 12 self-addressed, stamped envelopes—with the CPR return address in the upper left-hand corner of the envelope.

Keep sending us address changes and renewal requests in order for us to have our only permanent mailing list—the one for our January holiday card/new calendar—be as accurate as possible.

NONE OF US ARE LAWYERS OR LEGAL WORKERS; to maintain our best possible access to all of our prison-based readers, please do NOT mark envelopes addressed to us as "Legal Mail". Do not send us any legal papers. Despite our best efforts, we may not be successful in getting them back to you.

Many, many thanks to the Real Cost of Prisons project for posting our Newsletter on-line for free downloading and distribution. All issues since 2009 are there at: www.realcostofprisons.org—this is a GREAT site! THANK YOU ALL FOR YOUR SUPPORT *****

The U.S. Southern Border: Now a Militarized Zone

In early April, the Trump administration announced it will send 160 troops to the U.S. Mexico border. The U.S. Customs and Border Protection agency (CBP) was recently reclassified as a "security agency". So the same military-industrial complex that for decades benefited from foreign wars has now morphed into a new border-industrial complex and is receiving billions to provide various ancillary services to accomplish border militarization.

"SAVE LIVES - IMMEDIATE RELEASE OF IMMIGRANT DETAINEES"

—car top sign at demonstration in front of the governor's mansion, Santa Fe NM Apr. 2020

"To the privileged, equity feels like oppression.

— *Moms for Housing*, Oakland CA, Jan. 2020

SO DANGEROUS FOR SO MANY PEOPLE OF COLOR

Racism, comprised of many socio-economic factors (read: poorer—for example 11.8% of U.S. population as a whole is classified as "living in poverty" as compared to 20.8% of African Americans, 17.6% for Latinx, 25.4% for Native Americans), lack of health care access, and even geography, have resulted during our current pandemic in especially outrageous death rates among many African Americans and Latinx people. We realize that all of the specific numbers that follow will be outdated by the time this newsletter is being read, but believe that, unfortunately, the basic underlying message will still be all too accurate. Many of the numbers used here come from the federal government Centers for Disease Control (CDC). They reflect a disgraceful reality.

As of this writing, just past the middle of April, a CDC study has found that 33% of those who have been hospitalized because of the pandemic are African Americans, even though they make up only 13% of the population of the country. African Americans are also reported as being 27% of all confirmed covid-19 cases in New York, Philadelphia, Miami, Detroit, Chicago and New Orleans.

Related to all this is that people of color are more likely to suffer from chronic conditions which leave immune systems vulnerable: asthma, heart disease, hypertension, diabetes and obesity and as poorer people, they receive poorer care.

Some examples of how these tragedies have played out so far: In Milwaukee, Black people have a 14 year shorter life expectancy than "whites" do. Milwaukee's population is 26% Black, yet recently made up 81% of those dying from covid-19.

In Louisiana, 70% of the people who have died were Black, despite making up only 32% of the state's total population. In Michigan, African Americans are 40% of people who have died and 33% of the total cases, but only 14% of the population. More than a quarter of the Michigan cases have occurred in Detroit, where Black people are 79% of the population. In Chicago, also close to 70% of those who have died are Black, 118 people—six times the death rate of "white" residents. And Blacks are only 33% of the city's population.

In New York City, Latinx make up 34% of those who have died, but only 29% of the city's population. Black New Yorkers account for about 28% of the deaths, but only 22% of the population. City officials report that Black and Latino residents have been dying at twice the rate of "whites".

In contrast, in New Mexico, nearly 37% of those with covid-19 are Native American, although only 10% of the total population.