

Dirk Greineder, MD, PhD
MCI-Norfolk, P.O. Box 43
Norfolk, MA 02056

April 30, 2021 Update from MCI-Norfolk

Although there have been a few incremental changes, overall there has been little improvement during the six weeks since the last update. I delayed this installment in anticipation that things might change in concert with the relaxation of restrictions in the community at large. But, I waited in vain.

About three weeks ago, yard restrictions were reduced, allowing the 3 units of 60 men each that comprise each of the seven housing blocks, combined area-restricted yard access, increasing access to two pre-specified hours daily. Limited classroom work also has resumed in the school, albeit with fewer students and classes. No other group interactions are permitted, including any self-help rehabilitative programming such as AA, NA, Alternatives to Violence, Jericho Circle, or even religious services. The extreme segregation and isolation of prisoners might possibly be justified except for the continued deployment of prisoner workers. Hundreds of prisoner workers from all units daily congregate in prison Industries, Maintenance, janitorial, laundry and canteen services, then return to their individual housing unit each afternoon. There they mix with all other prisoners in chow halls, tiers, bathrooms, shower areas and cells. Since these workers have regular contact with prison staff, it is important to note that the majority of DOC staff has refused vaccination and are not routinely tested. By contrast well over 70% of prisoners are fully vaccinated. There is currently no active infection among prisoners, not surprising after earlier almost universal infection of prisoners (with subsequent natural immunity) and their high vaccination rates.

It simply makes no sense to block prisoner interactions and shared activities when the highest risk of infection is from staff infecting prisoner workers who then disperse to all units every day. This egregious violation of basic quarantining procedure obviates any possible benefit that could be derived from these unnecessarily imposed prisoner restrictions which, however, have real deleterious consequences. Preventing prisoner interactions interferes with rehabilitative, education and self-help group programming. It has also closed the general library and severely impaired access to the Law Library, which is essential for working on legal appeals. And, it has eliminated gym, reduced yard access, and severely compromised social interactions between fellow prisoners. All this has increased stress, contributed to deteriorating mental health, and increased aggressive and suicidal behaviors.

May 5, 2021

I needed to interrupt this update because of a medical issue which I describe only to illustrate institutional dysfunction. I experienced sudden, unexplained and painful knee swelling in a joint a year after total knee replacement surgery. I barely managed to hobble, on a knee repeatedly giving way, the 1/3 mile to the outpatient department at 9:30 AM Saturday. I was seen by a triage nurse who told me, even though I had a history of possible joint infection (a potentially catastrophic complication), that there was no staff to evaluate me until Monday morning and she was not authorized to issue any crutches. Hobbled, I returned to my unit. Unfortunately, such dysfunction is not limited to the medical department, but is prevalent throughout the

institution.

All aspects of prisoner movement and activities continue to be substantially curtailed under guise of the pandemic even though there has been no documented prisoner infection for months. It has long been obvious that the continued severe lockdown restrictions and prisoner isolation insisted upon by the DOC no longer make sense, especially with the DOC's aforementioned self-serving daily deployment of prisoner workers. It is clear that the current lax policies about workers exist for the convenience and benefit of prison staff, with no concern about possible infectious ramifications. By contrast, it is equally obvious that the unrelenting, no longer necessary and coercive lockdown isolation of prisoners using the excuse of pandemic necessity is a byproduct of the administration's persistent disdain and dehumanization of prisoners.

A sad consequence of the resultant psychological stress has been an increase in behavioral issues among prisoners. One of these is that a small number of vulnerable men resort to use of home brew (home-made alcohol), illicitly smuggled drugs such as K2 (a synthetic marijuana) and, occasionally, narcotics. The DOC's response, instead of punishing the readily identified perpetrators, has been to punish the entire prisoner population with largely unnecessary and ineffective measures. Even though independent evidence clearly shows that almost all illicit drugs are brought in by guards and staff, the DOC continues to punish all prisoners by declaring all mail contraband. All incoming mail is copied and the originals destroyed, thereby eliminating one more ephemeral but vital contact with family and the community. Similarly, to prevent home brew, the DOC has banned all fresh fruit and sugar from the chow lines and canteen rather than impeding known perpetrators. These counter-productive measures exacerbate prisoner stress, punishing all for the misdeeds of a few. An important side effect is to exaggerate the deficiency of the mandated state diet which has already been subverted by using illegal and cheap substitutions. For example, chicken patties made from chicken waste products and fish patties containing no fish but only bread saturated with fish juice now routinely replace real chicken and fish products as required by state recipes. Sadly, cheap cakes and cookies replace fresh fruit.

All of the above reinforces the perception that the administration does not consider prisoners and their conditions to be meaningful priorities. Treating all prisoners so dismissively debases and dehumanizes all prisoners, exacerbating behavioral problems and diminishing the effectiveness of the already severely weakened rehabilitative programming. There can be little doubt that prisoner engagement in constructive activities and behaviors is at an all-time low, severely interfering with the little rehabilitative programming offered. The current situation is nothing other than simple, mindless warehousing of prisoners--85% of whom must eventually be released into the community. Never before has the Department of Correction been allowed to so completely fail in its mission to safeguard prisoners and to provide education and rehabilitation for prisoners as required by Massachusetts law.

* * *

Additional prior "Norfolk Updates" (dated May 10 & 20; June 1, 13 & 30; July 15 & 29; August 17; Sept 12; Oct 13 & 31; Nov 30; Dec 8 & 29, 2020 and Jan 20; March 15, 2021) as well as Lifers' Group Inc. Fast Facts and other relevant reports are accessible at www.realcostofprisons.org/writing.