

The Catastrophic Failure of Corrections

*“The state, whether we like it or not, is in loco parentis
and serves as one of the most powerful
moral teachers we have.”*

-Justice Brandeis-

The Technical Assistance Report on Suicide Prevention within the Massachusetts Prison System, February 2007 reports that, “...the suicide rate within the Massachusetts Department of Corrections during the past 10 years was 26.9 deaths per 100,000 inmates. According to the most recent national data the suicide rate in the federal, state and private prisons throughout the country during 2002 was 14 deaths per 100,000 prison inmates. As such, the suicide rate within the MA DOC was almost double the national average during this 10 year period, and several times greater than the national average in 2006.” Following this report there have been additional suicides in the Massachusetts prison system.

While these statistics are alarming, little if anything has been done to curtail the suicide rate, especially in the maximum security Souza-Baranowski prison in Shirley, MA. Prison officials there have recently adopted or allowed a number of questionable and even risky practices that defy logic and common sense.

In an effort to reduce costs the mental health director and MHM Services, the agency that provides mental health care to prisoners discontinued all prescriptions for Adderall, Ritalin, Klonopin and other necessary psychotropic medications. Without reason or warning inmates were advised by Dr. Fletcher that their meds were stopped. Another mental health clinician, Nurse Johnson claimed it was for, “security reasons,” because, “men are being raped for their meds.” But considering that these drugs are crushed, placed in a cup of water and then consumed in view of a c.o. who inspects the inside of each mouth, it is obvious that Ms. Johnson was not being truthful.

Because this move has directly contributed to prisoners’ instability, repeated trips to the Special Management Unit (SMU) by inmates whose medication had been discontinued, and has created an angrier and a more volatile population that endangers the lives of both staff and prisoners, one must wonder why the DOC is allowing the health care agency to control the atmosphere inside Massachusetts prisons.

Another new directive has recently been issued by the director of the health care services, Russell Phelps. While inmates have always had to be evaluated by a mental health clinician prior to being moved to the SMU, in the past there have always been a physician available. Not so at SBCC where there are no therapists on site on weekends. So from Friday afternoon until Monday morning prisoners are kept naked with only a large vest secured with Velcro, under 24 hour watch in an empty cell until cleared to be moved to the segregation unit. Even if a prisoner’s issue is a minor one, and has never had suicidal

ideations or exhibited irrational behavior he will be held for up to 72 hours without even a bar of soap, a toothbrush or toothpaste.

Once he is approved to be taken to the segregation unit he's again placed in an empty cell. This time he will only be allowed on item for the first 24 hours. He will not receive a book, a Bible or rosary beads. He will not be allowed a pen, a pencil or a writing pad. And he won't get a shower, a phone call or even cosmetics. But he will be given a bedroll. In other words, after days of psychological torture this prisoner, who may be suffering from mental illness, substance abuse issues or withdrawal symptoms is given absolutely nothing except a set of sheets with which to hang himself.

It is important to mention two very significant points: 1) Every prisoner who has committed suicide in the SMU has hung himself, and; 2) Every inmate is given a manual containing a complete and comprehensive set of rules and regulations which govern the SMU. And nowhere in this or any other manual is it written or even hinted that prisoners are not entitled to anything for the first 24 hours in the segregation unit.

It is absolutely imperative that these arbitrary policies be addressed. Are Superintendent Thomas Dickhaut, and Deputies Bruce Gelb and Anthony Mendonsa so inept as not to have the capacity to understand the potential consequences of their mindless and oppressive rules? Or are they intentionally aiding and even causing the suicides that are being committed in the SMU? In either case, their actions are inexcusable.

Psychiatrist Stuart Grassian, formerly at Harvard has researched the mental damage solitary confinement inflicts on healthy people. But what about the prisoners suffering from mental illness? Professor Grassian told **Time Magazine** this year, "We're taking criminals who are already unstable and driving them crazy."

A U.S. Justice Department study in 2006 says that upwards of 2/3 of all prisoners report mental health problems. Why? According to criminologist Bernard Harcourt in a January 2007 **New York Times** op-ed piece entitled, "The Mentally Ill Behind Bars," "Over the past 40 years the United States dismantled a colossal mental health complex and rebuilt an enormous prison, bed-by-bed."

While bills to establish both an inspector general office to review charges of staff misconduct and an external oversight board to review general practices and policies languish in the legislature, rogue prison officials continue to overclassify the mentally ill to maximum security where their condition worsens dramatically.

Globe correspondent Michael Naughton, in an April 23, 2007 article wrote, "An independent study of the state's handling of inmates at risk of committing suicide." "The report, commissioned after a sharp increase in prisoner suicides, concluded that prison policies and practices were contributing to the problem." What's worse is that SBCC was never needed in the first place.

Dr. Michael W. Forcier testified before the Joint Committee on Public Safety on October 28, 2003. Professor Forcier, a sociologist with over 25 years' experience in the criminal justice and corrections arena testified, "I will never forget that I was called by Associate Commissioner Ernest Vandergriff who asked: 'Based on your research findings what types of security level beds should the DOC be requesting?' I responded, "**Minimum Security.**" One week later I learned that the DOC had requested 1,000 **maximum security** beds, and hence came Souza-Baranowski."

Now, to perpetuate the fraudulent necessity of maximum security beds the DOC has decided to double-bunk some of the cells in that violent and hostile prison, which will obviously make that maximum security warehouse more dangerous for both staff and inmates.

Built to house, "the worst of the worst," and, "only the most incorrigible," SBCC is home to men serving multiple and consecutive first and second degree life sentences for murdering cellmates and other inmates prior to being transferred to that facility. There are also men there who are still awaiting trial dates and have yet to be convicted of a crime, men serving county jail sentences who should be in a House of Detention, and men whose point-based score is so low they belong in medium and even minimum security. Which was another serious issue addressed by the Harshbarger Commission following the murder of defrocked and overclassified priest, John Geoghan.

The Boston Globe reported in a May 2, 2007 edition that State Legislators were seeking assurances from prison officials that they were taking greater precautions with mentally ill prisoners to prevent further suicides. One proposed solution is more funding for better training of guards, including a new protocol to check on potentially suicidal prisoners, and inmates in the SMU every 15 minutes instead of every half hour.

The reason this "band-aid" approach will fail is because guards and prison officials can't be trained to care and have compassion for other human beings.

In his capacity as a lieutenant at MCI Concord, now Deputy Superintendent of Operations at SBCC, Bruce Gelb, placed human feces in a box and offered it to a mentally handicapped inmate who was constantly missing his door for lock-in. He told the inmate that it was a box of donuts.

In May 2008, a county jail inmate Sage Edenjacques, who had been in the SMU at SBCC for several months told a c.o. on the tier, "I'm sick of this @#\$%, and I'm tired of waiting on you mother%\$&@*%s! I'm gonna hang it up! The guard responded, "I'll get you a rope." The prisoner replied, "I'm not f'n with you! I've got a razor in my mouth." The c.o. was saying "Yeah, yeah, yeah, as he walked off the tier. He never returned to check on the inmate. And fortunately, the prisoner, who was in the cell next to me did not attempt to hurt himself.

Even though additional funding had been approved to implement even stricter measures for guards to follow, as of June 2008, security rounds were still being conducted every

half hour in the SMU. But instead of pretending to be able to curb suicides by making rounds more frequently in the segregation unit, in the interest of common sense, why not change the oppressive and punitive conditions that are causing feelings of hopelessness, despair and anger? Because if and when a prisoner has made up his mind to take his own life, the only thing a guard can do is cut him down after he's hung himself.

The critical issue at stake is there are human beings locked away in these so-called "correctional" facilities, and they're dying on an unprecedented scale. And those that aren't killing themselves are returning to the community at a rate of 20,000 per year. How they return is determined by the way they're treated while they are incarcerated.

State Legislators and concerned constituents have argued for decades for the creation of a citizen's advisory and oversight committee to monitor the DOC's treatment of prisoners, and its policies. And while administrators and guards promise transparency and claim to be the epitome of all that is honorable, professional and committed to positive change, they have continued to fight aggressively against the proposal. So why are they trying so hard to conceal what's really going on inside Massachusetts prisons? For one reason, offenders are coming out of prison much worse than when they went in. So, of course, officials don't want anyone to know that MA prisons only make offenders more violent.

The bottom line is that the citizens of the Commonwealth are paying with their taxes for every facet of the prison industry, from the construction of each cell to the wages of employees, and have every right to see for themselves how their billions are being spent. But because prison officials have been allowed to subvert rules and regulations, cut corners and abuse the mentally ill for so long, some members of the community are also paying with their lives, their property and their peace of mind as released offenders take out their rage and frustration on an unsuspecting society.

This agency that has the audacity to refer to itself as a Department of "Correction" has been creating any angry and violent underclass unabated for decades and releasing them directly to the community from maximum security. No one is asking to be coddled. But the DOC and prison officials must be held to the same degree of accountability as offenders. And until a citizens advisory & oversight panel is established to hold administrators responsible for their counterproductive and dangerous policies, both the prisons and the community will remain unsafe as society and the mentally ill continue to pay the toll.

Post Script

The Catastrophic Failure of Corrections was written in an effort to educate legislators, the media and the concerned citizens of the Commonwealth about the Massachusetts prison system. It is the hope of all prisoners that someone in a position of leadership will have the courage and the integrity to take a close look at SBCC and the officials in charge there, do the right thing and make the necessary changes.

Superintendent Thomas Dickhaut, the Deputies Anthony Mendonsa and Bruce Gelb are in a position of authority at SBCC, with the ability and the means to improve the quality

of life of offenders and make it possible for them to become a responsible and productive asset to their communities following release. Instead, they have chosen to become a sort of infectious disease, intentionally inflicting emotional and psychological harm, and then sending into the community an angry and potentially dangerous ticking time bomb.

Commissioner Harold Clarke claimed that he wanted to be out front inside prisons, out front in the community, and he wanted to monitor the relationship between staff and offenders. Mr. Clarke has visited SBCC but has never spoken to a single inmate. Instead, officials there work round the clock prior to his arrival waxing floors and painting walls. So it appears that the Commissioners' main concern is how shiny everything is, rather than the issue of suicides and the atmosphere at that facility.

Until the concerned citizens affected by crime **demand** accountability for the rogue officials, and until Commissioner Clarke actually makes public safety, and reentry & reintegration a priority, instead of a lot of hot air, people in prison and out in society will continue to die. And "corrections" will continue to be a catastrophic failure.

Copies of this article have been sent to various newspapers and publications, State Representatives, Legislators, Prison Officials, members of the Public Safety Committee, the Governor, Attorneys and concerned constituents of the Commonwealth of Massachusetts.

John Feroli is currently being housed at the Old Colony prison in Bridgewater, MA.