In Support of SB 459: AN ACT CONCERNING THE COMMISSION FOR CORRECTIONAL OVERSIGHT, THE USE OF ISOLATED CONFINEMENT, SECLUSION, RESTRAINTS, STRIP SEARCHES, SOCIAL CONTACTS FOR INCARCERATED PERSONS, TRANSPARENCY FOR CONDITIONS OF INCARCERATION AND CORRECTIONAL OFFICER TRAINING.

Good Afternoon Senator Winfield, Representative Stafstrom, and members of the Judiciary Committee. The New England Healthcare Employees Union District 1199 represents 26,000 members across Connecticut in a variety of private and public direct healthcare settings, including 7,000 health care workers at state agencies. Today, we are here to testify in support of SB 459.

Of our members working in state service, we represent all 600 front line health care workers in the Connecticut Department of Corrections. Our members are doctors, nurses, psychiatrists, social workers, and other health care professionals who care for a population with acute medical and mental health illnesses. Our members must uphold a constitutional mandate to treat and rehabilitate these individuals while they serve their sentences.

In addition, a large majority of our members are people of color. Black and brown people in Connecticut, much like people of color in the rest of the United states, are disproportionately incarcerated compared to their white neighbors. Therefore, this issue is not only a criminal justice issue but a racial justice issue.

Solitary Confinement, also euphemistically known as “administrative segregation,” “punitive segregation,” “disciplinary segregation,” “involuntary protective custody,” or “restrictive housing,” is a state of being in which incarcerated people are isolated for the majority of the day, deprived of resources, and often subjected to conditions akin to torture. UN Special Rapporteur on torture Juan E. Méndez once said “Segregation, isolation, separation, cellular, lockdown, Supermax, the hole, Secure Housing Unit… whatever the name, solitary confinement should be banned by States as a punishment or extortion technique.”[1]

Our members see the negative impacts solitary confinement has on incarcerated individuals firsthand. For people in solitary confinement the endless monotony and lack of human interaction can quickly lead to serious psychological conditions. Our members can attest that those placed in solitary confinement often experience anxiety, depression, and problems sleeping, or in more severe instances a complete descent into madness. These conditions plague incarcerated individuals not only during their incarceration but as they attempt to re-enter and
reintegrate themselves into society. It is for this reason we fully endorse SB 459. This bill would end the practice of solitary confinement as it exists today. It would mandate that incarcerated individuals have additional time outside of their cells and facilitate the human and social interaction that we know is so critical for our mental health.

SB 459 would also limit the use of chains or shackles within locked cells as well as limit the use of strip search, both being practices used by DOC officers to humiliate and degrade incarcerated people. We also fully endorse the additional training and benefits for prison staff.

The United States has the highest incarceration rate in the world.[2] In Connecticut we have a choice to make. Are we going to continue to allow the suffering of human beings or are we going to make a real change in DOC — by eliminating solitary confinement, expanding human and social interaction in prisons, and producing healthier communities for all of us? Just like 1199 health care workers aim to prevent rather than react to emergencies—it's time for Connecticut to take action now in following through on its progressive vision to be a force for racial justice. We must pass SB 459 now!

Thank you for your time.
