



# New York State Catholic Conference

## Issue in Brief

### **Humane Treatment for Incarcerated Individuals**

#### **ISSUE**

Ensure Humane Treatment for Incarcerated Individuals

#### **BACKGROUND**

We are called to recognize the innate dignity of every person made in the image and likeness of God, even those who are incarcerated for having committed crimes. In New York, there is a growing number of old, feeble and very sick individuals languishing in the state correctional system who have paid their debt to society and are no longer a threat to anyone. These individuals experience additional suffering as a result of their physical deterioration, and are an extraordinary drain on state resources, because of their special needs and medical expenses. We are advocating for a system whereby, after careful screening to ensure that such individuals pose no threat to public safety, such individuals are released under supervision in the community.

The NYS Department of Corrections and Community Supervision (DOCCS) historically has operated some cells that segregate incarcerated individuals for periods of time for disciplinary and administrative purposes. In recent years the state has expanded and developed new “Special Housing Units” (SHUs) where individuals spend 23 hours a day in their cells. The successful management of correctional facilities depends in part on the ability of correction officers and administrators to maintain discipline and respond to violations of facility rules. We have long questioned the conditions under which SHUs are operated, the extent of their use and the extended time they are used. In the last month, DOCCS announced an agreement to be implemented over the next two years to limit the use of SHUs significantly, particularly in vulnerable populations. This is a positive development. However, we continue to be concerned regarding the use of SHUs for those suffering serious mental illness. It is clear that lengthy periods of isolated incarceration can induce psychosis in inmates with mental disorders, and serious psychotic symptoms in individuals without prior mental illness.

#### **MESSAGE POINTS**

- The compassionate release of incarcerated individuals who are elderly or infirm is both humane and cost effective.
- One of the best predictors of recidivism is age. Older and sick individuals are a low risk for reoffending.
- The extent and duration of confinement in SHUs is excessive, and the recent agreement by DOCCS to limit its use is a positive step.
- The incidents of self-harm and suicide while in disciplinary confinement is of great concern, especially for people with mental illness, who are being punished by confinement in SHUs for behaviors over which they have no control.
- The closure of mental health facilities and lack of appropriate treatment resources in community settings has resulted in mentally ill individuals ending up in state and local correctional facilities. Savings from closure of mental health facilities must be reinvested in community-based programs, for the good of all.

#### **Church Teaching**

“No cell is so isolated as to exclude the Lord, none. He is there, he weeps with them, works with them, waits with them. His paternal and maternal love reaches everywhere.”

– *Pope Francis, address to participants of the National Congress of Chaplains of Italian Prisons, 10/23/13*

“What Christ is looking for is trusting acceptance, an attitude which opens the mind to generous decisions aimed at rectifying the evil done and fostering what is good.”

– *Blessed Pope John Paul II, Message for the Jubilee in Prisons, 7/9/00*