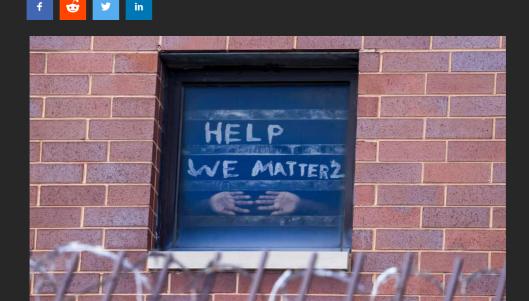
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# Activists, inmates and family members discuss the impact of COVID-19 on Illinois jails and prisons

By Maia McDonald



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COVID-19 continues to have a devastating effect on one of Chicago's most vulnerable congregate populations: jail and prison detainees. At least 153 inmates and 147 staffers in Illinois state prisons are currently diagnosed with the novel coronavirus, according to the Illinois Department of Corrections (IDOC) website. At Cook County Jail on April 25, officials reported 165 correctional officers, 37 other Cook County Sheriff's employees and 229 detainees have tested positive for COVID-19 — including 18 detainees who are currently being treated at local hospitals. This doesn't account for the 232 detainees who are no longer positive and are being monitored in a recovery facility at the jail.

As of Saturday (April 25), the Cook County Sheriff's Office reported the deaths of six jail detainees as a result of COVID-19. The deaths include 59-year-old Jeffrey Pendleton, the first Chicago inmate to die of the virus. His family has since filed a lawsuit against Sheriff Tom Dart, believing the treatment of their loved one was inhumane and in violation of the 14th Amendment. Pendleton died while shackled to a bed at Stroger Hospital, where he was on ventilator during a six-day battle with COVID-19.

Since the stay at home order went into effect in March, many activists, jail detainees, prison inmates and their families have been fighting for better protection and safety inside correctional facilities. The biggest question has been: how do we keep them safe in a place where social distancing is nearly impossible.

Many activists and families have been calling on government officials including Gov. J.B. Pritzker, Sheriff Dart, Cook County State's Attorney Kim Foxx and others to release detainees and inmates.

"It's clear that a thorough rethinking of our prison system — and much else about our country and its numerous racial and economic disparities — will need to take place if we want to successfully put this catastrophic pandemic behind us," Armanda Shackelford said during a virtual press conference on April 9. Her son is a Jon Burge torture survivor who is experiencing COVID-19-like symptoms while currently incarcerated at at Stateville Correctional Center. Burge was a Chicago Police Department (CPD) detective and commander who was accused, but never convicted of torturing more than 200 criminal suspects for a 20-year period, up to 1991, in order to force confessions from them.

"But for now," Shackelford continued, "The urgent priority must be removing as many prisoners as possible, especially elderly people and those with underlying conditions or compromised immune systems."

On Monday (April 27), a federal judge <u>ruled</u> that Sheriff Dart must implement social distancing protocols for incarcerated people at Cook County Jail. According to the Chicago Community Bond Fund, the order requires that incarcerated people at Cook County Jail can no longer share cells and that most forms of dormitory-style housing must end.

Also, Sheriff Dart must acquire the necessary materials needed to test inmates, provide soap and hand sanitizer to all inmates and distribute sanitation material to inmates and staff to regularly clean surfaces. Face masks must be provided, as well.

We spoke to community organizations and activists, in addition to detainees, during an April 9 virtual press conference with Parole Illinois, a nonprofit organization that raises awareness about mass incarceration and extreme-sentencing policies to get a better understanding of the situation impacting prison and jails in Illinois.

(These interviews have been edited and condensed for clarity).

# How has COVID-19 been impacting inmates and detainees? What about their families?

Raul Dorado, published author who is currently serving life without parole at Stateville Prison (as read by friend Eric Blackman of the MacArthur Justice Center who was formerly incarcerated at Stateville Prison): On Friday, [March] the 13th, we were keyed out of our cells at 5:08 p.m and escorted to the dining hall. The coronavirus was the subject of every dinner conversation. Rumors of an impending lockdown swirled through the empty spaces in between us and dark clouds of uncertainty loomed over our heads. The very next day, March 14, our suspicions were confirmed when we awoke to a Level 2 statewide lockdown. We braced ourselves for a storm, but in the steel Saturday morning, we couldn't imagine that the invisible danger that had reached our shores would breach these prison walls with such ruthlessness and that we would be left to fend for ourselves.

As our neighbors fell ill, we clenched our cell bars and yelled for help. Security staff would be the first to respond, wearing face masks, examination gloves, surgical aprons, head and shoe coverings. It was infuriating to see security staff wearing all this personal protective equipment when it was us that needed protecting from them. They brought COVID-19 in from the outside and infected us, yet we weren't given as much as a drop of hand sanitizer. I witnessed my friends become unresponsive and get carried out on canvas stretchers only to be returned a few hours later. And the chaos of it all? A standard emerged.

First, to receive any medical attention you had to deteriorate to the point of becoming unresponsive. Second, someone had to die before the medical director would send anyone out to the emergency room. While COVID-19 caught many people off guard, IDOC's inability to effectively respond to the crisis is rooted in four decades worth of ill-conceived sentencing policies and the elimination of a parole system. Prisons are congregate living facilities and Illinois prisons are grossly overcrowded, making social distancing impossible. More ominously, Illinois prisons are home to a geriatic population with pre-existing health conditions that render them more vulnerable to COVID-19.

This population of immunocompromised individuals has been locked away for decades as a result of a tough-on-crime era, not because they are more guilty and not because they pose a threat to public safety. Prison for them has become a de-facto nursing home in the same way prisons operate as a de-facto mental health facility for people with mental health issues. My friend Joseph Wilson and others were initially denied medical treatment and returned to their cells.

[They] are now on ventilators. The last communication that IDOC has had is an emergency contact sheet in the mail, so in the event that we die of COVID-19, they know who to contact.

Alan Mills, executive director of the Uptown People's Law Center: More cases arise that are connected to Cook County Jail than any other thing in the United States, including things like domestic and foreign travel. So it's devastating inside Cook County. [That's] the only way to put it. And the number five hotspot now in the country is Stateville, where there are over 100 prisoners and staff, mostly prisoners, who have been infected and tested positive for COVID-19. Two of those have died as a result. And hundreds more are waiting results of tests.

The medical situation in Stateville became so dire that [Gov. Pritzker] had to mobilize the National Guard to provide additional medical care. They were sending National Guard doctors into Stateville in order to try to fix the situation and try to put a cap on it before everybody in the system became infected. It also got so bad to the outside hospital that they were dealing with, St. Joseph's Hospital in Joliet, [it] became overwhelmed with the number of patients that were being referred there from Stateville. At one point, every single Intensive Care Unit bed in the hospital was filled up with people. So the people from the surrounding community had no ability to get that level of intensive care if they should need it.

Patrice Lamumba Daniels, currently serving life without parole at Joliet Treatment Center: This pandemic has sort of shined a light on how insidious this whole idea of locking people up indefinitely is. Or locking people up, period. The state of Illinois has already determined in its court system that I don't deserve to be in society ever again. So they've already sort of denied me, already sort of thrown me away. And then on top of that, I am now living in an environment where there is an invisible virus that is literally taking people's lives and there's nothing I can do about possibly being exposed to it.

Although I may not have been in direct contact with the staff member who was sick, I've definitely been in contact with people who were in contact with the staff member that was sick. There are staff members who work here [where] some decide to wear a mask, others who don't. Although we're being told [that] them wearing the mask is for our safety. And yet there are people who elect to not do that.

The very concept of prison makes social distancing an impossibility. And so for no other reason than that, I believe everybody should get out. This is a dangerous situation. Sometimes I feel like I need to be recording "in the event of" kind of messages.

Armanda Shackleford, mother of Jon Burge torture survivor and Stateville Prison inmate Gerald Reed: Like all mothers of incarcerated children, I am terrified about the reality of the coronavirus blasting through Stateville as it is currently doing at Rikers Island. The New York City mayor is moving faster than our own officials to get incarcerated people out of harm's way. Yet it's not enough there, and is certainly insufficient here.

What hurts the most is that our children didn't bring the virus onto themselves. It's being brought to them. I have befriended many prisoners because not everyone has family to speak for them. The message I'm hearing from those inside is the same: We need help because the prisons aren't sanitized and aren't clean.

Armanda Shackleford in December 2019 | Photo by Tiffany Walden [The TRiiBE]

### Why are inmates especially vulnerable?

Matt McLoughlin, director of programs at the Chicago Community Bond Fund: We've heard over and over and over again that people are not getting soap. People have told us that they have not gotten any increase in soap and typically, people incarcerated at Cook County Jail are given soap either once a week or once every other week — and that comes in the form of a hotel-sized bar of soap. That is not just for showering and hand washing, but also for cleaning their clothes and for cleaning themselves. When we're being told that we should be like washing our hands every 20 minutes when we're in contact with people, the idea that that [amount of

soap] is actually sufficient is ridiculous. We've also heard, you know, that we're all supposed to be socially distancing ourselves.

And then the sheriff says, 'Well, I've taken steps to do that.' Well, we've talked to multiple people who were in divisions where there were 30 or 40 people [that] have been moved into dormitory-style settings where now they're being incarcerated with well over 100 people. And those people are all sharing the same phone. They're sharing the same showers. They're sharing the same toilet and those facilities are at most being cleaned once a day.

Alan Mills, executive director of Uptown People's Legal Health Center: "Prisons and jails were just never designed as medical units. They were never designed for quarantine. And the way they're designed requires a huge amount of contact between different people both between prisoners and prisoners, but also between prisoners and staff.

So it's impossible to keep a virus from spreading throughout a prison once it gets inside. And it's also impossible to cut off a prison from the outside world, even if you don't have new prisoners coming in. You have thousands of staff members coming in every week, into the prison and back out again to the community. So the staff brings in the infection, it spreads among the prisoners, it spreads through additional staff, and then that staff brings it right back out to their families, and other people within those surrounding communities. So it's very much a two-way street."

Kim Foxx, Cook County State's Attorney: "The sad reality around all of this that we've seen with COVID-19 is the fact that African Americans are dying at a disproportionate rate. And all of the disparities related to health care and underlying conditions and indicators of the inequities in our healthcare system are the same inequities in our criminal justice system.

The reality is that neighborhoods that are most impacted by violent crime are also in the Black community. When we talk about disinvestment of resources, a lack of health care, a lack of grocery stores, [a lack of] educational attainment, all of those disparities lead to disproportionate health outcomes. And so historic, systemic structural racism is at play in all of it. And this is just where we see it manifesting itself.

# What is the process for getting prisoners released due to medical concerns? Or what should the process be?

**Mills:** State law gives a sheriff the right to move somebody out of a dangerous facility into some other facility in the county. That has always been there. Now, it was not originally intended to deal with a pandemic because nobody had that mind. It had more to do with a jail that, for example, had no heat like in the middle of the winter. So the sheriff has the power to move people out of that facility into someplace else in the county. And that someplace else is not defined. So that could include somebody's home. So I think the sheriff has that authority, that legal authority.

The U.S. Constitution mandates that the sheriff take reasonable steps to protect detainees. The 14th Amendment's Due Process clause has been read to include that requirement.

The governor has the absolute right to commute anybody's sentence he wants to, with no paperwork or anything else. He can just say you're free to go. We also regularly take people out of the prison for medical furloughs, that is for medical treatment. What [Gov. Pritzker] did earlier this week was to expand that ability so you can move people out of the prison not just for medical furloughs [but for] any medical reasons, which would include protecting them from infection with the coronavirus. So it could be that simple.

I don't want to say that they should just open the doors and let everybody out. I think that some level of review is appropriate to determine whether or not people have a place to go, for example, nobody's interested in dumping everybody out and becoming homeless. We don't need more homeless people in Chicago.

**Foxx:** "So, [in] Cook County, we've been working with the public defender and the sheriff and the chief judge's office around the people at the Cook County Jail. And just for clarity, the Cook County Jail is generally where people are detained pretrial. They've not yet been found guilty of

a crime. They're waiting to have their day in court. And so that's where our work at the county level goes.

On the statewide level, one of the things that has also been happening is the governor has been looking at the state prison [system]. So the prison system is where people go to serve a sentence. And so that is outside of our jurisdiction. That's under the governor's jurisdiction. But even as COVID-19 has hit the prison system, we have been working with the governor's office and the Prison Review Board to review cases of clemency or sentence commutations for people who are serving time in prison where they may be eligible for some type of relief, and we've been dedicating a staffer to look at clemency petitions on the state level so that we can make recommendations for people to released from the Illinois Department of Corrections.

### What about non-violent vs. violent offenders?

Mills: If you look at the science, which is what the governor keeps saying he's being guided by, the most likely to commit a new crime and go back to prison are the nonviolent drug offenders; those people who have been convicted of a drug related offense. So those are the most likely to commit a new crime, but least likely to commit a new crime are elderly people who were convicted of murder. The idea that somehow releasing so-called non-violent felons is somehow safer for the community than releasing people who were convicted of a crime that involved violence is simply a false distinction.

Now, that does not mean that there's nobody in the Department of Corrections [who] is dangerous, because there clearly are. [There] needs to be an individualized determination so that the people who really are dangerous stay inside and everybody else can be removed.

Foxx: We have a fundamental responsibility to make sure that we're protecting public safety and public health. Those are two interests that we have to make sure that we're looking after. And the reality is there are people who are currently detained who have been considered to be a threat to public safety. And that's real. And so, even though they are detained, we also must make sure that their health, their safety, as [well as] the people who are employed to care for them, are taken care of. But to simply say that everyone is released without reviewing individual cases, [it] is not in the interest of public safety.

We have to be able to balance whether the harm that might be caused by their release is greater than the harm of that person being [incarcerated]. We also believe that they should be in conditions that are healthy and sanitary, and that they are protected from COVID-19. But I think we have to have a real conversation about what this looks like.

Alex Ding, organizer with Parole Illinois: Our calls for release must include everyone, including those who've served many years after having been convicted of violent crimes and are now ready to return home and those serving shorter sentences, or we run the risk of leaving behind those most vulnerable. From executive acts of clemency to earned discretionary release, we believe every mechanism of release must be used and expanded right now before more lives are lost.

#### What are some other concerns?

McLoughlin: Another thing that we're also very concerned [about] when it comes to the jail and the sheriff's department is the 2600 people that are on electronic monitoring and incarcerated in their own homes right now across Cook County. The reality is that people on house arrest with electronic monitoring under the Sheriff's Department have very limited access to movement. They can't even request movement under normal circumstances to do basic things like go to the grocery store or to a laundromat.

And so you know, we've heard a lot of people who are on electronic monitoring who've been very stressed out knowing that the grocery stores were getting cleared out and they don't have the ability to get some of the most basic necessities that people need to get through this crisis,

whether that's the cleaning supplies or them finding out that literally all the toilet paper is gone.

Additionally, people on electronic monitoring, in order to get approved movement, they have to have signed forms from the places where they're going to get movement. So if it's your work, you have to have your boss turn in paperwork. If you're going to a doctor's visit, your doctor needs to send paperwork over to the sheriff's department saying that you need movement. And so if you leave your house without permission, you could be facing an escape charge, which is another felony. So you'd be fighting two criminal cases. And you'd be taken back to the jail. And the reason that's so significant to us right now is that people do not need any additional deterrence to seek medical care.

**Ding:** We demand an immediate and mass review and release of people in IDOC custody. We also demand to end the lockdown. People need yardtime for their mental and physical well-being so that they can social distance as well as the people on the outside can. We also demand the provision of adequate cleaning supplies and access to commissary as well as phone calls and video visits on tablets. And more broadly in the long-term, we demand that the Illinois Department of Corrections should be transformed from a punitive model of corrections to an educational and rehabilitative model.

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