

St. Patrick's Day at the House of Corrections,
17 March 2020

4:30 p.m.: The door to the visitor's entrance waiting room is already locked.. A sign on the door reads: "As of Monday, March 16th, 2020, all inmate visits will pause for the next 60 days or until the COVID-19 threat passes."

I knock and a correctional officer (C.O.) opens the door: "You here for bail?"

"Yep, I'm with the Bail Fund." He lets me in. Another volunteer is already inside waiting with cash to post bail for five people today. Two family members of people we are there to bail out are waiting with the volunteer, each person sitting in one of the modular chairs bolted to the ground, with several seats left empty between them. We're waiting for a roll-up metal door on a small window to open, where the bail clerk will appear. They'll take our money and

sign the paperwork that allows someone to be released.¹ None of us are wearing face masks. We take turns applying hand sanitizer at various intervals from a wall-mounted dispenser. The latest news suggests this helps.

The waiting room is normally buzzing—girlfriends, wives, parents, children waiting to see

their family members, people adding money to someone's commissary account through the electronic kiosk (which takes its own fee). The people in the room are almost always majority black and Latinx (especially Puerto Rican), with white lawyers passing through and occasionally some white family members.

Today, the linoleum-floored, fluorescently lit room is empty except for the C.O. and the group of us waiting to post bail.

"I heard they had corona here," one of the women says, not really looking at anyone. All the visitors' chairs face the same direction and can't turn. The C.O. is sitting at a high desk, facing toward us and the door.

"Naw. Someone was suspected, but he got released. I don't think he had it," the C.O. replies.

The woman pauses, then continues. "I think it's about population control." The C.O. says, "Mmm-hmm," but doesn't elaborate.

A delivery driver arrives, and the C.O. gets up to let him in. The C.O. brings the food back to his desk.

He picks up the phone and tells someone on the other side that the food is here. Two more C.O.s come out from the jail through "the bubble," the set of locked doors to the outside, which is controlled by other C.O.s behind a tinted glass window.

As they sort out whose food is whose, one of them remarks: "Cleaning crew was here when

Case Study: COVID-19, Care, and Incarceration in Massachusetts

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¹In Massachusetts, bail clerks personally receive a \$40 fee for each bail they process at a jail.

I got here. Did you hear what happened? Two cadets had fevers. Sent them home and they cleaned everything." The C.O.s nod, divvy up the food, and the two go back through to the jail.

More people start arriving to post bail for someone, two women and a group with two adults and one child. The bail clerk finally arrives and opens the divider separating her window from the waiting room. She starts taking our money and processing the paperwork for the five people we are there to get out. Everyone we're bailing out either has a bail of \$500, or lower, or the family members are covering the rest and we're contributing \$500 to help. Some have been incarcerated for months only because they couldn't afford a \$200 bail.

The clerk lets us know that the courts are closed at least until April and that, when they open, it's the defendant's responsibility to find out when their case has been rescheduled to. "It's gonna be a madhouse." One of the family members comments that she has just seen on the news that inmates from jails in New York were being released. The C.O. responds, "Yeah, that shit ain't happening here."

We're still waiting at 6:45 p.m. The C.O. tells us he's annoyed. He won't get time to take a walk and get coffee before his next shift. He says he'll call the sergeant to see what's holding up the release. "What they doin', takin' baby steps? Fuckin' moonwalkin'?" Eventually they release the people we're waiting for. I introduce myself to the three people I'll be driving home. I dodge a handshake and offer to bump forearms instead, apologizing that things have changed out here with the virus and all.

I drop off a young black man and a young

Puerto Rican man to their homes in Springfield and then drive the third, a younger white man, to the rural town of Monson. I wish them all luck with their cases and that they and their families stay healthy.

COVID-19 and the Prison-Industrial Complex

Early into the COVID-19 pandemic, lawyers, activists, and families of people incarcerated in Massachusetts (as in many other places) began to voice concerns about the extremely high risk that people inside prisons, jails, and detention centers would face, of both contracting the virus and dying from it.

Prisons, jails, and detention centers are prone to disease transmission under normal circumstances. By design, people are forced to share close living spaces, phones, tables, exercise equipment, showers, toilets, and more. Social distancing is physically impossible. People who are incarcerated are also mostly poor and working class. They are disproportionately black, Latinx, indigenous, and other people of color and are more likely to have health conditions like asthma that put them at even higher risk of infection and death from COVID-19. Prisons and jails tend to have very limited medical resources, at best, and shockingly neglectful or abusive medical staff, at worst. Sheriffs and wardens are extremely reluctant to transfer incarcerated individuals to outside hospitals (see Andrews 2017; Schwartzapfel 2018; Coll 2019).

Not only do prisons and jails pose a threat to the people within them but they also risk becoming epicenters of disease transmission, espe-

cially as staff come and go each day, bringing the virus in with them and back out—the same reason schools and businesses have been closed. This occurred early on in Chicago when the Cook County Jail became the country’s biggest “hotspot” for COVID-19 transmission in April 2020 (Williams and Ivory 2020).

Activists raised all these concerns. Across states as politically disparate as Washington, Ohio, Alabama, California, and New York and even within the Federal Bureau of Prisons, officials under pressure from civil-rights organizations and community groups initiated early releases to rapidly decrease the number of people incarcerated (and to decrease their liability to care for them; see Kindy, Brown, and Bennett 2020). In Massachusetts, there were no mass releases. A trickle of early releases began only after the ACLU, the Committee for Public Counsel Services, and Prisoners’ Legal Services filed an emergency petition, demanding that the Massachusetts Supreme Judicial Court act to release as many prisoners as possible from prisons and jails in the state. The court ruled that it would initiate a process for lower courts to review individual cases of incarcerated people awaiting trial and make some categories presumed eligible for release. The ruling did not impact people who were already sentenced, even if they were close to the end of their sentence or especially vulnerable because of age or illness.

In western Massachusetts, the sheriffs who operate the jails and the district attorneys in charge of prosecutions that put people in jail spoke out against the ruling and against the efforts of activists to decrease the number of people locked up.

The central reason they have given for opposing release is their concern for the well-being of prisoners after incarceration, specifically the lack of housing and the lack of access to addiction treatment and recovery programming. They care too much, the sheriffs argue, to release prisoners from their custody—despite the heightened risks of contracting and dying from COVID-19 (See Johnson 2020; Cahillane 2020).

It would be reasonable to question how genuine these sheriffs’ feelings of care are for the people they incarcerate. As formerly incarcerated activists and organizers have pointed out, there is never adequate support for people returning from incarceration, and this problem long predates the COVID-19 era. Most activists and many people who have been incarcerated would insist that the sheriffs have only their own economic and political self-interest in mind, that if they release people, they might risk receiving less funding. If they genuinely cared about the well-being of people in their jails, activists argue, they would be fighting for more resources and more support for people to access after leaving their jails, not fighting to keep people inside them.

While it is entirely legitimate to remain skeptical of the intentions of the carceral system, I argue that the refusal of sheriffs in Massachusetts to release people under COVID-19 is consistent with a type of care, but one that is ultimately infantilizing and dehumanizing and that highlights the need for prison abolition as well as the dangers of reform. At the base of the sheriffs’ refusal to rapidly decarcerate as other states have done is a paternalistic mode of care based

on an assertion that the people they incarcerate are better off under their supervision than outside of it. This paternalism—deeply grounded in white supremacy, misogyny, homophobia, transphobia, and ableism—has been at the core of incarceration in Massachusetts since its colonial Puritan founding. State officials have long prided themselves on progressive, reform-oriented, and rehabilitative models of jailing.

In Massachusetts, sheriffs are elected officials who make their case to voters to be able to stay in power. And in western Massachusetts, sheriffs who champion more interventions and more rehabilitative programming—job training and certification, high-school equivalency and higher education, counseling and therapy, addiction treatment, parenting-skills classes, meditation, reentry support, and even permaculture—get elected; all these programs and more are currently running or have been run in western Massachusetts jails, to the extent that at least one sheriff has referred to his jail as a “locked treatment facility” (quoted in Becker 2019a). How well supported or how accessible or effective any of these programs are is highly dubious, especially within the coercive context of the jail, but the existence of these programs, and the emphasis placed on treatment and rehabilitation, determines where funding comes from and what it goes to. Programming is used by sheriffs, state officials, and private and nonprofit partners to present jails as necessary and

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positive institutions within the community.

In some contrast with the open white supremacy of Southern convict leasing and plantations-turned-prisons (Lichtenstein 1996), and also with the massive warehouses of surplus humanity in California and other Western states (Gilmore 2007), the “progressive” jails of New England employ a domesticating form of vanilla power, no less grounded in racism but couched within a framework of paternalistic care and rehabilitation. In Massachusetts, only a small percentage of people incarcerated at state pris-

ons work within the state’s Massachusetts Correctional Industries, producing furniture, clothing, and other products mostly for other state agencies. At the county level, a minority of incarcerated people have jobs within the jails. Some in minimum-security or prerelease units do “community

service” for as little as one dollar a day. For most people incarcerated in the state, days are marked by boredom and by programming. Exploitation in this context is focused less on extracting free labor and more on subjecting incarcerated people to programming for which prisons, jails, and private, state, and nonprofit contractors receive funding and continue to employ themselves.

One example is the use of Section 35: involuntary confinement for individuals considered at risk of harming themselves or others because of addiction. Judges, petitioned by family members, doctors, or law enforcement, can order someone

to be arrested and brought into jail for mandatory drug-addiction treatment even if they have committed no crime. The sheriff of Hampden County in western Massachusetts, Nick Cocchi, has dedicated a unit of the jail to this program, with the support of local law enforcement and state legislators. In various press releases and interviews, former Section 35 detainees as well as their families have spoken in praise of the program. For these families, the dire shortage of space in nonprofit and private addiction-recovery programs means that the jail is their only option for readily accessible treatment (see Becker 2019b). This should not be the case, but in many communities like those of western Massachusetts, jails are the largest source of behavioral-health and addiction treatment. In these contexts, care and the violence of incarceration are not separable; as others have argued, care that comes from patriarchal white-supremacist institutions can itself be a form of violence.

In the context of forensic nursing, anthropologist Sameena Mulla (2014) argues that the “victim-patients” who seek medical assistance after sexual assault often experience additional violence during the enactment of care by health-care workers. This violence occurs without any individual nurse’s conscious intention. It is an outcome of a dehumanizing process in a setting that centers the forensic priorities of the state and the institutional and professional norms

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of the healthcare industry rather than the person seeking medical help. In the name of care, forensic nursing may retraumatize “victim-patients” in the process of collecting evidence. But this is in the context of the hospital. In the context of even the most “progressive” jails, care in the form of rehabilitation and sobriety is used to justify other forms of dehumanization: severing ties between incarcerated people and their parents, children, and communities; isolating individuals from each other; subjecting them to the routine humiliation of strip searches and deprivation of bodily autonomy and privacy; and, in this current moment, exposing them to heightened risk of contracting and dying from COVID-19.

Asking for a more caring criminal-justice system in this context means asking for more carceral intervention, more exposure to death for the sake of re-

legitimizing the political economy of incarceration. Only the abolition of that system—through decarceration and through defunding prisons and the police—can create the space needed for scaling up forms of care and responses to harm that are not paternalistic and that do not center the state or exist to benefit the industries that make up the prison-industrial complex. Interventions can look like the following: training community members in the mediation and de-escalation of conflict, building community-accountability processes to support those who have been harmed and those who have done

harm, and ensuring access to safe housing for people in crisis. These liberatory forms of collective care and transformative justice are already being imagined—and practiced!—in communities and in pockets of autonomous organizing, often building on preexisting practices and relationships that have long been neglected or targeted by the police and prison system.²

²For more discussion and examples, see Chen, Dulani, and Piepzna-Samarasinha (2011), Dixon and Piepzna-Samarasinha (2020), and Kaba and Hassan (2019).

Groups like the Bay Area Transformative Justice Collective in California, Safe OUTside the System Collective in New York City, and Pa'lante Restorative Justice in Holyoke, Massachusetts, have been exploring and practicing transformative justice for years. Movement thinkers and organizers like Mariame Kaba, Shira Hassan, Leah Lakshmi Piepzna-Samarasinha, and Mia Mingus have theorized, popularized, and helped facilitate the formation of new transformative-justice projects around the country and the world.

These ideas are not new, but they have gained new life. A wave of mobilizations for decarceration and prison abolition began in response to COVID-19 and the neglect of prisoners and other populations made vulnerable by capitalism and the state. By June, that wave has grown exponentially, articulating with community organizing and mass protests, across the country and the world, that have demanded the defunding and abolition of police in response to the police murders of George Floyd, Breonna Taylor, and Tony McDade and the ongoing killings of black people in the United States. Building on decades of work by black women scholars like Ruth Wilson Gilmore, Angela Davis, Keeanga-Yamahtta Taylor, and Michelle Alexander, on-the-ground

community organizations like Black Visions Collective and Reclaim the Block in Minneapolis—organizations working toward decarceration, defunding, and abolition—are leading the way toward envisioning and building communities of care, without prisons or police.

Decarcerate Car Rally, 6 June 2020

2:30 p.m.: Some of us from Decarcerate Western Mass have started arriving at the parking lot of the AMF Chicopee Lanes bowling alley. Referred to here as A., the partner of a person incarcerated in the Hampden County Jail and House of Corrections (known as the Ludlow Jail) had proposed the idea of a car rally outside the jail to protest jail conditions. The jail, the main “men’s” facility, had been placed on lockdown: prisoners were unable to shower, access educational or therapeutic programs, make calls to family members, or access medical care. Building on that idea, we decided to include the regional “women’s” jail.

Two longtime community organizers from Springfield, Massachusetts, pull up in their own cars and say hi from behind face masks. They start decorating their cars with messages to “#FreeThemAll,” “Abolish Prisons,” and “Hold Corrupt Police Accountable.” More cars start arriving, first a dozen or so, and then the parking lot starts to fill. Some drivers stay in their cars; others get out, greeting each other at a distance and drawing on their cars with washable markers or taping signs demanding medical care and phone calls for prisoners to their windows. Some black and Latinx protesters are present. Most of the people are young and white, either arriving individually or in twos or threes. There are a couple families, some peo-

ple with babies. Some immunocompromised activists, who've messaged us ahead of time that they're excited to be able to attend the protest, wave from within their cars.

A reporter arrives, and organizers direct the reporter to talk to A. so she can share her family's experience, the demands that have been shared in a letter signed by people incarcerated at the jail, and the reasons why we've all assembled. A local activist lawyer arrives to check in with us. Police officers from the Chicopee Police Department tell us, unsolicited, that they and the Ludlow Police Department are going to "accompany" us "to keep us safe." A formerly incarcerated organizer and her family arrive. A volunteer with Western Massachusetts Community Mutual Aid arrives with a carload of donated bagels and greens that she offers to all the protestors to take home.

By 3:10, we decide to start the program. Several organizers from Decarcerate Western Mass speak on a megaphone borrowed from the local workers' center and address the more than sixty carloads of people spaced out across the lot, and A. shares her family's experience again and the demands of prisoners in the county jail. Other organizers discuss logistics, legal risks, and support resources. A Decarcerate Western Mass organizer offers up painted cardboard butterflies for people to attach to or hold from their cars. We disperse to our cars, and the lead cars make their way to the edge of the parking lot, with everyone else slowly lining up behind them.

The line of cars winds its way through the residential suburbs of Chicopee and Ludlow, toward the jail. Most of the people incarcerated there are black and Latinx, and most

are from the nearby cities of Springfield and Holyoke, but the jail is located far down a rural road, behind an office park. As we get within sight of the jail, we start honking, making noise to let people inside know that we're thinking of them and to let the sheriff and his staff know that we're paying attention. The sheriff's department has blocked the entrance to the jail parking lot with a tactical mobile response unit, and dozens of administrative staff and officers stand outside the jail, staring us down. Our cars slowly drive down a road alongside the jail, make a U-turn, and drive back again, honking. An older white sheriff's department official in slacks and a dress shirt steps out toward each car, trying to hand us what looks like an informational sheet, but each driver declines.

Eventually, the line makes it back to the bowling alley, where we park again and regroup. Formerly incarcerated and now an organizer with Massachusetts Against Solitary Confinement, C. arrives and addresses the crowd about the importance of supporting incarcerated women, who are often forgotten by both the system and social movements. We hop into our cars and head out again, this time to drive and make noise outside the regional women's jail in a different part of Chicopee. Once more, the road into the jail is blocked by the sheriff's department, but we pass by as close as we can and honk before dispersing. At 7:00 p.m., Decarcerate Western Mass organizers host a zoom call to debrief the action and discuss the Phone Zap action that has also begun—three days' worth of calling into the sheriff's office, district attorney's office, and local legislators' offices in order to uplift the demands of people inside the prisons.

By the first day of the Phone Zap, the sheriff's department has already stopped answering the phone. A new voicemail message states that, due to the high volume of calls from the Decarcerate Western Mass action, callers were asked to leave a message and someone from the department would respond ...

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