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Criminal Justice Issues and Prisoners' Rights

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by Rachel M. Cohen | May 29, 2013

The immigration reform bill approved by the Senate Judiciary Committee last weekincludes an amendment that would curtail the use of solitary confinement on immigrant detainees. Whilethe measures reach is limited, its passage by the Committee nonetheless represents a significant step for human rights activists working to help shape the Border Security, Economic Opportunity and Immigration Modernization Act, which will be debated by the full Senate in June.

The amendment, <u>Blumenthal 2</u>, was drafted by Senator Richard Blumenthal (D-CT). It sets limitson the use of solitary confinement for adultsin most cases, 15 daysand bans it for all children under 18 years old. The measurealso explicitly prohibits the use of solitary confinement to protect detainees based on their sexual orientation or gender identity.

While the amendment does make it more difficult, it falls short of banning solitary confinement for detainees with mental illness. Detention centers that opt to isolate mentally ill individuals are required to have a medical professional visit with the immigrant at least three times each week as well as weekly visits by a mental health clinician for regular evaluations.

Lastly, the amendment has an oversight component so that detention facilities must submit both the reason for and the duration of all solitary confinement sentences to Congress annually for review.

The Senates attention to solitary confinement is relatively historic. Last June the first-ever congressional hearing, led by Richard Durbin (D-IL) was held to discuss the legal, economic and psychological costsof solitary confinement. While a host of local groups have cropped up to fight solitary confinement on the state level, Congress has largely avoided the issue.

The Leadership Conference on Civil and Human Rights, a coalition of more than 200 national organizations, sent a letter in support of Blumenthal 2 to Senator Patrick Leahy and Senator Charles Grassley, Chairman and Ranking Member of the Senate Judiciary Committee, respectively. The letter said, The amendment balances the operational needs of facilities that hold immigration detainees with basic respect for the health and human rights of detainees subject to solitary confinement.

The American Civil Liberties Union also gave vocal support to the passage of the amendment and said, The adoption of the amendment takes positive steps forward in fixing a serious injustice the extent of which has only recently come to light.

Due to increased enforcement measures put in place by the Obama administration, the immigration detention population has dramatically increased. There are 85 percentmore immigrants detained today than there were in 2005, and these detentions are usually indefinite sentences. Individuals are held, often for months at a time, until either they voluntarily sign deportation documents or until immigration authorities decide whether to deport the immigrants or let them stay.

Observers argue that while placing U.S. prisoners in solitary confinement is problematic, placingalledgedly undocumented immigrants in solitary confinement is even worse because these individuals are not even serving criminal sentences, but are simply waiting for civil deportation hearings. Beyond that, critics argue that solitary confinement hurts detainees ability to fight their cases due to highly restricted access to telephones and other means of communication.

In March, Homeland Security Secretary, Janet Napolitano said that she believes solitary confinement should be the exception, not the rule. She asked federal immigration officials to report back with greater detail about the usage and implementation of solitary confinement in federal facilities.

A March 2013article by the New York Times and The Investigative Reporting Workshop found that on any given day, U.S. Immigration

and Custom Enforcement (ICE) officials hold approximately 300 immigrants in solitary confinement at the 50 largest detention facilities across the country. Their research showed that nearly 50 percentof these individuals are kept in solitary confinement for 15 days or morea point that psychiatric experts say detainees are at risk for severe mental harm. The study found that about 35 detainees are kept for more than 75 days.

Senator Charles E. Schumer, Chairman of the Senate Judiciarys subcommittee on immigration, responded to the report by sending a letter to John Morton, director of ICE urging him to change their use of solitary confinement. This report suggests an overreliance by the ICE on the harshest forms of incarceration, Schumer wrote.

In 2012, the Heartland Alliances National Immigrant Justice Center and Physicians for Human Rights, surveyed conditions in many detention centers and county jails that work in conjunction with the ICE. This was the first comprehensive study on the effects of solitary confinement on immigration detainees. The research showed that solitary confinement is often arbitrarily and punitively applied, inadequately monitored and damaging to detainees health; investigators also found that most immigrants are denied any meaningful avenues of appeal. Additionally, they found that ICE failed to hold detention centers and jails accountable for their use and abuse of solitary confinement.

Blumenthal 2 would be first federal legislation to place limitations on the duration and circumstances under which detained immigrants can be placed in solitary confinement. It is unclear at this point whether the amendment will pass the full Senate or the House.

The measure would apply only to those held inimmigrant detention, andnot to allfederalprisoners. The U.S. Bureau of Prisons is estimated to hold at least 10,000 individuals in isolation in prisons across the country, and is not subject to any laws thatthat regulate, monitor, and restrict the use and abuse of solitary confinement in federal prisons.

Accurate information and authentic storytelling can serve as powerful antidotes to ignorance and injustice. We have helped generate public awareness, mainstream media attention, and informed policymaking on what was once an invisible domestic human rights crisis.

Only with your support can we continue this groundbreaking work, shining light into the darkest corners of the U.S. criminal punishment system.

by Juan Moreno Haines

October 25, 2022

by Solitary Watch Guest Author

October 13, 2022

by Vaidya Gullapalli

September 29, 2022

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http://www.vgronline.org/articles/2013/summer/markham-immigration/?src=

First the Fence, Then the System Lauren Markham Scott Dalton, Photographer

Excerpt:

Jordi looked young, but he insisted he was nineteen. As a result, he was transferred to an adult detention facility in Corpus Christi. I couldnt walk for two months after the accident. I got a cast and a wheelchair for two weeks. I was only in the hospital for like five hours, then I went to the prison. At Corpus Christi, he was given an orange uniform and locked in solitary confinement. I really dont know why, Jordi said, laughing. Maybe because I didnt know anyonebut I really dont know. After ten days alone, he was moved into a crowded cell, then sent to a nurse to inspect the progress of his leg. She seemed suspicious of his age, studied his face. He insisted he was nineteen. But with each visit, she asked him again, until finally, after about three weeks, Jordi confessed he was actually fifteen.

I would like to know why US prisoners are not allowed the same treatment. Our medically disabled are in Correctional Treatment Centers. Locked down 22-24 hours aday. The same confinement as SHU units with the exception that CTC gets a phone call. Those Brain Trauma patients have a harsher time, because medical staff do not know how to deal with them.

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