

PA Democratic Policy Hearing on Solitary Confinement
Written Testimony of Rev. Dr. Chris Kimmenez, Psy D

Good Morning!

I am the Rev. Dr. Chris Kimmenez and I currently serve as pastor of Lombard Central Presbyterian Church in West Philadelphia and as Executive Director of Healing Communities PA, a faith based justice transformation organization. I am also a licensed psychologist and mental health first aid and trauma instructor and a returning citizen and survivor of solitary confinement. I was released 26 years ago and I am grateful for the opportunity to testify before this committee this morning, as both a policy person and a survivor.

The pastor in me believes we are at a defining moment in the history of this commonwealth as we debate the ending the overuse of solitary confinement in prison systems all across Pennsylvania. Those in opposition will try to overcomplicate the issue and justify continuing the practice that the U.N. Commission of Human Rights has defined as torture when it established what is known as the Mandela Rule. This determination clearly states that any period of solitary conditions over 15 days is torture due to the negative effects of those conditions on the mind, yet it is not unusual to see someone placed in those conditions for months, years or even decades here in Pennsylvania.

That is the simple irrefutable human argument. Prolonged isolation is torture. The use of solitary began here in PA as a noble Quaker experiment at Eastern State Penitentiary in 1829. However, it quickly became obvious that this was detrimental to the mental health of incarcerated citizens and was basically ended nationwide until the 1970s. Since then, especially, here in PA we have continued to abuse it's use.

Research concludes that people in prolonged isolation are traumatized, and are more likely to develop mental illness and increased antisocial behavior than those living in general population.

My own story is that I was a former military law enforcement officer, who after a car accident developed an opioid addiction and was imprisoned for possession with intent to distribute in the federal system. I spent 6 months in what they called "protective custody" because I was former law enforcement, which meant being housed in the same conditions, subject to the same treatment, and housed in the same unit as those in solitary.

I can emphatically say I have more trauma from 6 months in solitary then 4 combat tours in the marines. 26 years later and I still have to remind myself to slow down when eating because nobody is going to take my plate until I'm done, unlike in solitary where corrections officers will demand your plate 2 minutes after giving it to you and then call for an extraction team if you refuse.

I have to tell myself not sleep with one eye open because the officers decided to wait until 3AM to let me have my hour out of the cell. I don't have to hide food for later anymore because the

officers have decided not to feed me today. To this day I still can't wear my keys on my belt because the jingling sounds like an officer coming down the tier. And those are just a few of the petty tortures that I experienced, and my story is nowhere near the worst I've heard.

Think about this for a minute. 95% of currently incarcerated citizens are coming home at some point. When you consider that you have a current incarcerated population in state facilities, as of June 30, 2021 at over 38,000, and since 85% of those sent to solitary are there for simple rule violations and not for some form of violent behavior, or are there for being mentally ill, transgendered, or in protective custody, that means there are a lot of incarcerated citizens being sent back to their communities more hardened, more traumatized, and more antisocial than when they first went to prison.

And since there is no attempt to reintegrate those in solitary back to general population prior to release, we have seen many instances of folks released straight out of solitary when their sentence is maxed out. Do we think this is safe for the community or the newly returned citizen?

I know we've also heard the argument about this practice being used to establish order and to promote safety, but that doesn't hold up either. Several states including, New York, New Jersey, Colorado, Louisiana and even Alabama, have reduced or eliminated solitary and in almost every instance reported fewer incidents of violence on both incarcerated citizens and staff as a result. Are we saying that Alabama can do this and we can't?

We should also examine cost. It cost nearly twice as much to segregate someone as it does to have them live in general population. Over \$75,000 per year per incarcerated citizen in solitary as opposed to around \$45,000 per person in general population. This becomes even more expensive to tax payers for because the cost of medications for emerging mental health issues skyrockets the cost to nearly \$100,000 per person.

In 2019 when we had approximately 2300 people segregated, or about 5% of the incarcerated population, we could have saved approximately \$75 million by eliminating it then. \$75 million is real money.

As I said at the beginning of my testimony, we have a choice to make about what kind of just and free society we want to be. Do we want to continue to perpetuate this current practice that is drastically over used, considered torture, actually compromises staff, facility and community safety, and cost too much? Or do we look to the alternative? Thank you for listening.