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October 13, 2020 Update from MCI-Norfolk

Another month has passed with little change. Basically we remain locked down and restricted to our individual units except whenever it benefits the institution.

School has opened with very restricted schedules and classes limited to 6 or 7 students. BU students are allowed only one course this semester, rather than the three courses normally scheduled. GED (Hi-Set) classes are in session, also with limited access and students. Vocational education is also severely limited. Culinary, which provides meals for correctional officers, is back in business. Barbershop is open with reduced numbers of students. Access for prisoner haircuts, with appropriate social distancing and masks, is limited. Numbers of students and courses for all educational and vocational opportunities remain severely limited

Law library access, which is a critical lifeline for prisoners needing to access the courts and work on their cases, continues to be extraordinarily limited. It is still only one prisoner for one hour at a time, with few slots available every day. The law library easily has capacity for at least 6-8 socially distanced prisoners at a time, but this is not allowed. These limitations make it functionally impossible for prisoners to pursue their cases, denying them access to the courts for their appeals.

There are no group prisoner programs of any sort, with even religious gatherings completely shut down. There is no access to the Community Services Department building (CSD) which normally houses all the religious and self-help groups, including AA and NA as well as Alternatives to Violence and various other critical rehabilitative programs. Despite this extreme shut-down of rehabilitation, the administration continues to allow prisoners from many units to work in multiple areas for the purpose of promoting prison operations. Recently, even more prisoner workers have been assigned to the CSD building and Gym for the sole purpose of cleaning in anticipation of a departmental audit scheduled for early November. This continues the policy, frequently mentioned in prior updates, that there is no concern about violating otherwise strict quarantine whenever it is convenient for the purposes of the administration.

Today they have posted, for the first time, that all workers will need to be screened (presumably by temperature check and simple questioning) in order to be allowed to attend their work assignments. While this may be reasonable, one wonders why such precautions were not taken much earlier. As emphasized above, there seems little concern about violating quarantine for prisoners when they are needed to facilitate the running of the institution. By contrast, where education, rehabilitation and other activities that benefit prisoners are involved, those opportunities are simply canceled.

Fortunately, to date, Covid infections have been very limited at Norfolk. The news media recently did report a major outbreak involving more than one-third

(over)

of the prisoners at the prison in Plymouth at MASAC (the Massachusetts Alcohol and Substance Abuse Center). As sizable number of guards were also infected. There is little doubt, if prisoners were to be infected here, that the routine violations of quarantine would likely facilitate wide-spread infection at Norfolk.

Access to the medical department has become a bit easier. Medical visits are occurring, although access is still limited and often delayed. The KOP (keep on person) medication now is being distributed from the previously condemned mold-infested P1 building, rather than from the medical department. This has improved access for prisoners. However, a new problem now seems firmly entrenched: the pharmacy often seems to fail to fill one or more necessary medications for many prisoners. This results in prisoners not able to access often critical maintenance medications for days and even weeks even if the nursing staff seeks to communicate with the off-site pharmacy to remedy these omissions.

Food continues with frequent unauthorized omissions and/or unhealthy substitutions of the regular menu. As before, the items substituted are typically poor quality, salty, highly processed, and of limited nutritional value.

Yard access continues to limit prisoners to restricted areas for one unit at a time. The gym remains closed to prisoners except for the cleaning in preparation for the audit. As previously reported, these limits severely disrupt prisoner to prisoner contact, markedly exacerbating the isolation experienced by prisoners separated from friends because of separation due to assigned housing. On the other hand, visits with family and friends have resumed with one-hour, non-contact visits through plexiglas barriers. Hearing your visitor is reported to be very difficult, especially since masks are also required. It is concerning that, all in all, the isolation experienced by prisoners, now more than 6 months into the Covid era, is much more severe than that burdening members of the free world community. There is also little doubt that the public would not tolerate the drastic restrictions on movement and interpersonal contact routinely experienced by prisoners. The toll on prisoner mental health is undeniable.

In brief, while so far infection has been largely kept out of MCI-Norfolk, the price in terms of isolation and lack of rehabilitation has been dramatic and debilitating. The DOC does not appear to have any intent to improve prisoner conditions or rehabilitation until prisoners are vaccinated for Covid-19. Incidentally, flu vaccines have not been provided to date.

[Prior Updates (May 10 & 20; June 1, 13, & 30; July 15 & 29; August 17; and Sept. 12) are accessible at [www.realcostofprisons.org/writing](http://www.realcostofprisons.org/writing)]

ADDENDUM (Oct 14, 2020)

Inexplicably, today we receive and are mandated to wear only new, fabric, single-layer masks made in Industries. The commercial surgical masks previously issued may no longer be used. The new masks do not have the form-fitting nasal strip, making them difficult to wear with glasses and also fit much more loosely than the multilayer surgical masks. There is little doubt that these new masks, which also will need to be washed regularly, will not be as protective of the wearer or others, but they are now mandated. Is this a cost-saving measure? If so, it's penny wise and pound foolish. The new masks are less effective and less likely to be worn... And will still need replacing as the laundered elastics wear out.