

Over 10,000 mentally ill Michigan inmates face Tasers and torture

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10 March 2012

The recent authorization of the use of Tasers in Michigan prisons has focused attention on the inhuman conditions inflicted on mentally ill inmates. Civil rights organizations have questioned their use in the prison system, noting special danger to the large percentage of mentally ill inmates.

A 2010 University of Michigan study found that more than 20 percent of the state's prisoners, or about 10,000 inmates of a total of 45,000, had severe mental disabilities. The same study found that 65 percent of those with severe mental disabilities in the state's prison system had had no treatment for their illness in the past year.

A Taser uses electrical current to incapacitate its victim through uncontrolled muscle contraction. Their use in prison amounts to a torture device to subdue and control inmates who are unarmed and cannot escape.

The *World Socialist Web Site* spoke to Natalie Holbrook of the Michigan Criminal Justice Program in Ann Arbor, Michigan. The program is run by The American Friends Service Committee. She said, "We are very skeptical about the use of Tasers in the Department of Corrections. We are trying to get numbers from the different facilities about how often they are using the Tasers and under what conditions.

"They have been denying our FOIA [Freedom of Information Act] requests saying it is a security issue. One thing we asked for was the training manual related to their use. That request was denied saying it would be a breach of security. We're going to have to reframe our request and keep trying in order to find out the details.

"We have gotten some complaints from prisoners about officers not shouting commands before Tasers were deployed. We hope that the use of Tasers would in every case generate critical incidence reports.

"As to the mentally ill in Michigan prisons, [Dan] Heyns, the new director has been very open about this. He has been saying something to the effect that 'we can't do anything about who gets sent to us and once someone comes to us with a mental condition we're charged with caring for them.' What I think he is getting at is that the prisons are not supposed to be mental institutions. We have written about this problem in a major report we did. (See the report, "Tolerating Failure: The State of Health Care and Mental Health Care Delivery in the Michigan Department of Corrections" .)

"My main concern with the Tasers is that bad things happen

inside even without having a weapon. I am nervous and afraid that the use of Tasers will end up with a senseless death on our hands and a big lawsuit. I cringe when a weapon comes into play in this situation."

Tasers have certainly been lethal. The US Department of Justice reported in 2009 that over eight years their use by state and local law enforcement left 334 people dead.

Civil rights organizations have documented over 700 deaths since the early 1980s after victims were shocked by the device. Though outlawed in Michigan in the mid-1970s, electric stun devices are now pervasive among police agencies in cities and jurisdictions across the state. Across the US they are deployed with regularity against the public.

Taser devices were first authorized for use by guards in five of 31 Michigan prisons last December by the newly appointed Michigan Department of Corrections Director Dan Heyns.

Michigan prison guards have used the devices against inmates 39 times since their implementation last year.

Testifying before state lawmakers in February, Heyns called the program a "success." "We're seeing a dramatic drop in the number of assaults," he told the Michigan officials. Prisoners "are going to think twice before they take on a staff member." He has indicated he will use them throughout the prison system.

Solitary confinement

Already Michigan has been criticized for using solitary confinement, a cruel practice deemed to be torture and outlawed in certain countries, to manage the mentally ill in prisons. There are at least one thousand prisoners in solitary in Michigan of whom a sizable percentage are diagnosed as mentally ill. "It's one of the worst things you can do for the seriously mentally ill," Mark Reinstein, president of the Mental Health Association in Michigan, told the *Detroit Free Press*.

Lois DeMott, co-founded the advocacy group Citizens for Prison Reform in Michigan after her son, who suffers from mental illness, experienced punishment rather than treatment in a state prison facility.

In 2006, a mentally ill inmate died in the Southern Michigan Correctional Facility. Timothy Joe Souders spent four days in a

segregation cell. Souders, who suffered from a severe mental disorder, was originally transferred to the segregation cell and placed in soft restraints, then prison guards restrained him on a concrete slab.

The 21-year-old went through the days being restrained in a cell lying naked in his own urine with temperatures rising higher than 100 degrees. A federal judge later said that the conditions Souders went through were “torture.” The judge also said that the even the six-hour maximum, a policy imposed by prison officials after Souder’s death, was too much and put a complete ban on any punitive restraints.

Nevertheless, in January 2010, 19-year-old Kevin DeMott was pepper sprayed and shackled to his bed during an episode in which prison guards found him bloody and banging his head on the cell wall.

DeMott was sent to prison in May 2007 at the age of 15. He was sentenced to 23-60 months on four counts of attempted armed robbery. He had already tried to kill himself on more than one occasion and is diagnosed, among other things, with bipolar disorder. He has been in segregation for more than a year of his current sentence.

In May 2010, the Treatment Advocacy Center warned of the degeneration in care for the mentally ill in America. They noted: “It is also useful to compare the present paucity of beds with the situation in the 1840s, when Dorothea Dix was decrying the practice of keeping mentally ill individuals in jails rather than in hospitals... in 1850 there was approximately one public psychiatric bed available for every 5,000 people. Currently, there is one bed available for every 3,000 people...” They note that in 1955 there was one psychiatric bed available for every 300 people in the general population in the US.

Between 1987 and 2003, Michigan closed three-quarters of its 16 state psychiatric hospitals. Michigan now provides fewer psychiatric beds per capita than all but five other states, according to the Treatment Advocacy Center. Michigan’s mentally ill prison population grew as Michigan closed down mental health hospitals.

Dorthia is a professional caregiver for mentally ill citizens in group homes in the Detroit area. She reacted immediately when she was informed that Tasers were now being used in Michigan prisons.

She told the WSWS, “Well, the mentally ill are going to get Tasered for sure. They are not getting proper care and medication and things are bound to happen.” She added, “They have closed so many mental hospitals in the state in the past several years that people have nowhere to go. They come to us or we get them referred to us from the agencies. One of my close family members is mentally ill I can understand how hard it is for the families, how hard it is for the patients.

“The past eight years the economy has made everyone that is poor worse off. The government is really cutting people a lot, too. But it really started with the mentally ill because they are really the poorest of the poor. The state cut a lot of money from Community Mental Health. As we are a nonprofit we have to rely on donations to take care of people in our charge now. They cannot even afford their basic needs. The maximum food assistance used to be \$200 a

month on the bridge card and now that has been reduced. In addition, if you have a balance on your card at the end of the month, it won’t be rolled over to next month. What about people who are in the hospital and can’t use their benefits?

“Some agencies come to us to provide housing for clients their agency is responsible for. We get clients who are private pay, some are from Community Mental Health [CMH], some are from Easter Seals. I spend plenty of time every day on the phone trying to get what our clients need to make sure they are cared for. They are cutting people a lot. Even some do not have Medicare. So if our clients are not in some sort of program we have to find enough money to keep and care for them properly.

“People on SSI [means-tested federal benefits for the disabled] do not get very much money. For example, the maximum they can get is about \$600 a month. They cannot work because they are ill. I have one client who is paid \$600 in Social Security Disability and he gets \$115 in Food Stamps. What grown man can live on that kind of money?

“But what of the people who have nowhere to go? Say after 5 to 10 day visit in the hospital the insurance coverage runs out. They put the people on the street. First the person has to get to a doctor to get their prescription after they leave the mental ward. They may get a discharge paper but they have no place to stay and no phone and they are in trouble right away. Nobody likes taking the meds in the first place and often on the street the patients are not monitored so they do not take their prescriptions. They may have insurance or Medicaid but some do not. I cannot understand why some do not even have Medicare.

“Often you have the people who hear voices, that is the people who are schizophrenic. The street drugs will stop it. That’s how they get by. Even with a prescription if it is \$45 for your prescription co-pay and five dollars for some drug they can buy on the street, and you don’t have much money at the time, which one is cheaper? Which one do you think they will go for? So the drugs or the stealing to get the drugs are not the real cause of the mentally ill entering jails and prisons. It is the cause that is put down on paper, but it is not the real cause.”



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