

*The following piece is written by Christopher Blackwell, a 39-year-old man incarcerated at Washington State Reformatory in the Monroe Correctional Complex (MCC), serving the last 23 years of a 45-year sentence. Blackwell was first incarcerated at the age of 11 and by the time he was 18-years-old, he faced 16 charges. Since then, he has served time in numerous prisons in Washington State. He spent a total of about one year in solitary confinement and says the “roughest times” were when he was young in the juvenile institutions. Blackwell’s work has been published in the Marshall Project, BuzzFeed, Crime Report, Truthout, and Jewish Currents.*

*In this piece, Blackwell reports that the solitary confinement units at MCC are being used to hold people sick with the coronavirus from other state prisons. Blackwell describes the grueling bus ride this transfer entails and torturous conditions of the solitary confinement unit that only serve as a deterrent against reporting coronavirus symptoms. A recent Seattle Times [article](#) reported that the Washington Department of Corrections is now transferring sick people directly from Coyote Ridge Corrections Center to Washington State Penitentiary (WSP) as well, according to the family member of an incarcerated man. Coyote Ridge has had the largest outbreak of the coronavirus, but after the transfers, WSP now faces an outbreak, with 114 incarcerated people reported to be infected since mid-July. —Valerie Kiebala*



For weeks rumors echoed throughout the Monroe Correctional Complex (MCC) as people whispered about prisoners who had tested positive for COVID-19 being transferred here from other facilities across the state. The prison where I’m incarcerated, MCC, was the first in

Washington to confirm a positive case but has recently seemed to have things under control. The administration has even started to reopen the prison in little ways, allowing us to have more access to the phones and the yard. However, with new rumors, fears of another wave and another lockdown spread rapidly.

Our fears were confirmed when we received a memo from prison administration in early June stating what prisoners had already thought to be true: our prison has become a hub for housing individuals confirmed to be positive with the virus. Sick prisoners across the state will now call MCC, and in our particular solitary confinement units, their new home.

Outbreaks have reached such high numbers in two eastern Washington prisons, Coyote Ridge Corrections Center and Airway Heights Corrections Center, that there's not enough bed space to treat the sick. Instead, sick prisoners are to be transferred to Monroe, which involves a grueling 10-hour bus ride across the state.

These transfers are not luxury bus rides even when you're healthy. You are stripped down to nothing but a bright orange jumpsuit, no underwear or socks, cuffed and shackled at the ankles and the waist for 8 to 10 hours straight. The bus is like a Greyhound but with no padding on your seat, just hard plastic, ensuring you feel every bump. The cuffs and shackles cause biting twinges of pain that never allow you forget they are there. You shift their resting place every few moments hoping to bring relief from their cold steel, but this rarely works. Using the restroom on this ride is next to impossible, you are forced to crouch down, using your tightly bound hand to wiggle the zipper in hopes of undoing your jumpsuit, all while trying to maintain your balance as the bus sways to and fro.

All I can do when I think of the past experiences I've had during transfers is have empathy for the prisoners forced to embark on such a journey while fighting off a deadly virus. I cannot

imagine adding a mask on a hot summer day, while you're already experience respiratory issues, to what is already a nightmare situation.

The memo went on to assure prisoners that, "the medical and correctional staff working in [these sick units] are fully trained in [the] proper use of appropriate PPE." And that our safety and wellbeing are at the forefront of the Department's actions during this time.

This attempt at reassurance fell on deaf ears. History has and continues to show that our health and well-being as prisoners have never been a top priority for the DOC. Our prison was even recently under investigation for [medical negligence](#), making it impossible to trust that correctional staff have adequate training for such situations. Actual medical doctors, along with other highly trained professionals, are having a hard time not contracting the virus themselves and potentially spreading it to those in their care, it's unlikely the DOC will find success where hospitals have not.

One of the biggest concerns is that correctional staff may be working in the units with sick prisoners who have recently transferred to Monroe while also working in the general population units. When the administration was confronted about this during a meeting with prisoner representatives, administrators confirmed that there was no choice but to have staff work where they are needed given the Department is so short staffed. I have no doubt the Department is short staffed; I've seen many officers work double shifts and work without days off. I also have no doubt that correctional officers themselves are not comfortable working in such conditions, you can hear grumbles about this throughout the units.

Officers are not trained medical professionals. Many correctional officers have little more than a GED, let alone a medical degree or the level of training a registered nurse would receive. The health and safety of prisoners should not be reliant on their skills and expertise during a global pandemic. In California, [San Quentin State Prison](#) is in the midst of an outbreak due to

the transfer of sick prisoners from other parts of the state. It seems inevitable that we too will suffer this fate given the WA DOC are *intentionally* transferring sick prisoners.

The memo continued by encouraging prisoners to report any symptoms of COVID-19 to staff so they can be relocated into solitary confinement for treatment. The encouragements came in the form of the newly added perks of medical solitary confinement: prisoners would graciously receive the use of a TV, small radio, Game Boy, and playing cards. The advertisement to stay in this luxurious concrete box—that often triggers horrible memories for those that have spent months or years within them—came with the bonus of receiving three thirty-minute phone calls a week with our loved ones. In two different places in the memo the Department touted we would be free to move in solitary with no restraints, since one is usually handcuffed every time they leave their cell to do things like shower or use the phone. I found most of this to be nothing short of a slap to the face. Given the torturous conditions of solitary, even with the presence of a Game Boy, it is understandable that prisoners are reticent to come forward with symptoms. Most would prefer to suffer silently in the comfort of their own cells. Plus, on the off chance that you are sick but not with COVID-19, people are scared to go to solitary with the confirmed sick transfers.

The memo ended with a familiar DOC tactic: the threat of infractions, this time for not wearing a face mask or practicing social distancing, the later almost completely impossible given the layout and living conditions in this and most prisons. The possibility of receiving an infraction for a request one cannot comply with allows correctional staff to target whomever they please. Instead of protecting prisoners, these measures become nothing more than another way to overuse and abuse their power.

Frustratingly, a large portion of correctional staff fail to wear masks or practice any form of social distancing themselves. Just the other day while walking back from work a correctional officer yelled at me because my mask had slipped a little below my nose. After I pulled up my mask, I noticed the officer standing next to her had his mask around his chin completely

exposing both his mouth and nose. Having more of a sense of justice than I probably should have, I shouted, "What about his mask, does the mandate to wear masks only apply to prisoners?" I was met with a cold silent stare by the officer that gave me the directive, and a smirk from the one not wearing his mask at all.

These recent memos make it clear the DOC continues to expect prisoners to live and survive in what many would deem unthinkable conditions, like the use of solitary confinement for medical quarantine and the transfer of sick and shackled prisoners across the entire state to otherwise not infected facilities. The DOC has continued to ignore the advice of medical professionals—we still don't even have hand sanitizer. I promise you Game Boys are the least of our concerns. The time has come for the DOC to stop telling prisoners and our loved ones these feeble lies. They must show us we are a priority by letting their actions do the talking. Until then prisoners will wait for what seems to be the inevitable, our next quarantine lockdown and the possible contraction of a deadly virus.