



WISCONSIN CATHOLIC CONFERENCE

TO: Senator André Jacque, Chair
Members, Senate Committee on Human Services, Children and Families

FROM: Kim Vercauteren, Executive Director, Wisconsin Catholic Conference

DATE: January 21, 2021

RE: Opposition to Senate Bill 8, Allocations of Vaccinations to the Incarcerated

The Wisconsin Catholic Conference (WCC) appreciates the opportunity to offer testimony on behalf of the Roman Catholic bishops of Wisconsin in opposition to Senate Bill 8, which prohibits the Wisconsin Department of Health Services from prioritizing an incarcerated person for vaccination.

The WCC supports public policies that foster restoring both victims of crimes and offenders to full participation in the community. In 1999, Wisconsin's Roman Catholic bishops issued *Public Safety, the Common Good, and the Church: A Statement on Crime and Punishment in Wisconsin*. In their statement, the bishops stress the importance of mercy and forgiveness, and call for society to exercise mercy as a means of furthering the rehabilitation process. The bishops also emphasize that public policies and responses must be fashioned in ways that heal victims betrayed by crime and restore dignity to offenders.

Senate Bill 8 fails to respect the dignity inherent in every incarcerated person and the mercy that must be afforded to all. The Wisconsin Department of Corrections (DOC) COVID-19 dashboard indicates that as of January 20, 2021, there have been 10,642 positive COVID-19 test results for individuals under the care of the DOC.¹ This number of tests is equal to about half the number of total DOC incarcerated individuals and does not include DOC staff that have tested positive for COVID-19. Twenty-five incarcerated persons have died from COVID-19 in Wisconsin.

On December 22, the U.S Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) issued the "Updated Interim Recommendation for Allocation of COVID-19 Vaccine — United States, December 2020."² Along with this recommendation, the ACIP referenced an additional resource, "Interim Considerations for Phased Implementation of COVID-19 Vaccination and Sub-Prioritization Among Recommended Populations."³ This document provides some insight into how to sub-prioritize COVID-19 vaccine distribution when supply is limited.

Beyond suggestions regarding how to distinguish between frontline and other essential workers, the document concludes with "Considerations for Other Populations in Phase 1b and 1c." The

¹ <https://doc.wi.gov/Pages/COVID19%28Coronavirus%29/COVID19TestingDashboard.aspx>

² <https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19.html>

³ <https://www.cdc.gov/vaccines/covid-19/phased-implementation.html>

document notes that sub-prioritization may be necessary in Phases 1b and 1c based on factors other than essential worker classifications, such as age, underlying medical conditions, and congregate living situations. It specifically states that:

Based on local, state, or territorial epidemiology and implementation considerations, jurisdictions may choose to vaccinate persons who reside at congregate living facilities (e.g., correctional or detention facilities, homeless shelters, group homes, or employer provided shared housing units) at the same time as the frontline staff, because of their shared increased risk of disease.

In response, a limited number of states have included incarcerated individuals living in congregate settings as part of their Phase 1A vaccine priority distribution plan. Many more states followed the path Wisconsin is considering by allowing incarcerated individuals in congregate settings to access vaccinations in Phase 1B.⁴

While it is true that many individuals are in desperate need of vaccination, those who are incarcerated have limited means to mitigate their chance of infection and no opportunity to institute certain protective measures, such as spending time outdoors, incorporating increased ventilation, seeking isolation from others, etc. Also, individuals in the DOC's care have already been processed by the criminal justice system and sentenced. Failure by corrections authorities to properly mitigate a threat of illness or death through communicable infection is not an allowable additional penalty under the law.

We are also concerned about SB 8's impact on people of color. Though less than ten percent of our state's population, people of color account for nearly half of our prison population. Health authorities have found that racial and ethnic minority groups experience disproportionate COVID-19 incidence, morbidity, and mortality. Lack of timely access to vaccinations coupled with this heightened risk for many in our state's DOC facilities will likely impact individuals of color unfairly.

Finally, there is concern over the appropriate stewardship of resources. With the enhanced risk for those living in congregate living situations, the State must act to mitigate any sign of major outbreaks in DOC facilities. This requires extensive testing, possible quarantine, and other infection mitigation measures, including utilizing the Wisconsin National Guard to administer testing at DOC facilities. Then there are the resources needed to care for those who become symptomatic. By utilizing vaccination where infection and spread are most likely to occur, it ensures that the State preserves personal protective equipment and other resources for wider community application.

We ask that you follow ACIP guidance and allow state officials to provide vaccine prioritization for groups that live in congregate settings, including correctional facilities. In the interest of justice and mercy, we urge you to oppose SB 8.

⁴ <https://www.kff.org/coronavirus-covid-19/issue-brief/the-covid-19-vaccination-line-an-update-on-state-prioritization-plans/>