

Transcript of Interview with Philip Melendez by Chris Twing

Interviewee: Philip Melendez

Interviewer: Chris Twing

Date: 07/23/2020

Location (Interviewee): Marysville, California

Location (Interviewer): Leander, Texas

Transcriber: Sally Velez

Abstract: Philip Melendez was born and raised in Sacramento, California. His interactions with the police began in high school. He later committed a crime and served almost twenty years in prison. He was released from prison a few years ago and now works for Restore Justice, a California based non-profit, focused on criminal justice reform. Now married, with three grown children, he discusses his thoughts on the criminal justice system, reform, and the impact of COVID-19 on the incarcerated population within the United States, specifically California.

CT 00:59

Hello.

PM 01:01

Hello,

CT 01:02

how are you?

PM 01:04

I'm good. I'm good. And you?

CT 01:06

Good. Do you have any questions before I start?

PM 01:14

Um not that I could think of.

CT 01:19

Okay. Again, same story. If I ask a question you don't want to answer, that's totally fine. It's up to you. And at the end, I'll give you a chance to talk about anything that I didn't ask about that's important to you.

PM 01:30

Mhm.

CT 01:30

So I know yesterday, you told me where you were born. But can you tell me again, where you were born and then where you grew up?

PM 01:36

Sacramento, also grew up in Sacramento. Oh, (inaudible) question.

CT 01:45

Go ahead.

PM 01:45

I know we're recording but you said we, we're only going to record the audio. And that's what's going to be used?

CT 01:50

Yes.

PM 01:51

Okay, good. Cuz I just, I had something to my teeth right now. Is feelin self conscious about it.

CT 01:59

You can stop for a minute run away and come back.

PM 02:01

That's good. It's good. I'm okay.

CT 02:03

Okay, okay. Um, and because I want to be able to focus on your voice and your story, I won't respond like I would in a normal conversation. I'll just wait for you to finish talking and then move to the next question.

PM 02:16

Okay.

CT 02:18

Okay, so tell me how you're connected to the criminal justice system.

PM 02:23

I am connected to the criminal justice system in multiple ways. I myself was directly impacted. After I committed my crimes. I was arrested, convicted, and served nearly 20 years while incarcerated. I'm also connected, in that I work now tyo to do prison reform, criminal justice reform, sentencing reform. I work with you know legislators, district attorneys, bringing survivors of crime, all of them into prisons and putting up, put on events and, you know, put put them in close proximity, all the stakeholders and really figure out what needed what's needed for each person, each participant, especially survivors of crime, and people who commit harm, really understanding their needs, so that for one, people who

commit harm, don't, don't commit harm any further harm. And for survivors of crime, what they really need for healing, versus, you know, the traditional, traditional idea of justice, which basically is just vengeance. So we work on that. And what else do I do? As far as the criminal justice system, I work with survivors of crime. So in, in the settings that I just mentioned, right now, with the district attorney's and the legislators, those are usually surrogate type of encounters for, for survivors and people who've committed harm. And another thing that I do is actually work with people who've lost loved ones, or have been harmed, and facilitate dialogues with the actual person that, that had caused them harm or hurt or killed their loved one. And so those are the ways that I am connected with the criminal justice system.

CT 04:12

Okay. How long have you been connected to the criminal justice system? I think you said about 20 years.

PM 04:17

Yes. So actually, even even more, I had other encounters with school police, I think at age 14 and 15. So I'm 42. Now, I'm terrible at math. So like, yeah, like 20 something years.

CT 04:38

Yeah.

PM 04:38

Over 20 years.

CT 04:43

What was your opinion of the criminal justice system prior to your involvement and after your involvement?

PM 04:50

My opinion prior was basically F the system. You know, I don't want to I don't know if this is a family friendly Oral History or not to wet it was basically F the system F the police, to hell with all of them. And nowadays, I don't say those words, I don't have like that harsh of a anger towards them, I have more of a, a, a defund them, we don't need them, you know, that type of an idea. And it's just based on what I've learned throughout my incarceration as far as what I needed as a child, you know, and resources and I didn't need policing, I didn't need jail, I needed support, I needed you know, my needs to be met and to feel whole and and seen, which I'd never really got. And the system doesn't do that either. So my feelings are that it needs radical reform and it needs ab-abolition maybe, I don't, you know, those things I don't I don't want to get into that debate and others debates versus on, on reform versus abolition. But I've been called a radical reformers and I've been called a non traditional abolitionist. I think there's room for, for both of those ideas to coexist and and bring about great change for our society. So that's how I feel about it. Great change needs to happen for sure.

CT 06:23

What is your impression of how the general public thinks and feels about incarcerated people in the US?

PM 06:29

My impression was that they don't understand who commits crimes and why. My impression is that they are fed and consume media, of incarceration. Whether it's news, whether it's movies that are that highlight, only negativity, like after I came home, I actually saw an episode of lockup, and, and the people that they were interviewing for me like looking back now I, I know what's going on with them. Like I know what's going on in their heads. I've seen seen these these cries for help these these outbursts, I've seen it. I've seen it happen a lot. And and I know what's behind it. And for the general public to see it. All they know is, that's a criminal. That's a an incarcerated person. And they probably wouldn't even say incarcerated person, that would probably just say, it's a convict right there. And that's what they do. And so when it comes to like mass releases that we're trying to get due to the COVID outbreak in California, it's like, no, we don't want 8000 people like, I can actually pick hundreds and hundreds of people that I know and this is just me. And I know another 100 people that can do the same and pick another few 100 who would be safe for release. And and I think there's just a huge misconception about who's in jail, what they're going to do when they're when they come home. There's a huge misconception about violent crime, who commits it and why. And and there's a misconception on whether or not there'll be violent forever, or violent again, there's just a misconception about violence in general. I just did a podcast recently where a guy was saying that you know, violence is actually in human nature. It's a, it's a natural reaction and, and just about everybody everyone's been on the table, everyone's you know, been had an outburst. And and just, it just varies in degrees. And so when people you know look at crimes and horrible violence and tragic violence, I get the fear and, and the disgust with it, but at the same time, we can't let those fears and just that disgust detour us from looking at the humanity that's on the other end of that. So that's one of the things that that bugs me the most about people's misconceptions is violent offenders and the labels that are placed on them, even offender I shouldn't even say that like, you know, that's just I'm using the rhetoric of you know, politicians in in media, but like that whole category of human beings that are incarcerated are hugely misunderstood.

CT 09:10

What was the podcast that you're on?

PM 09:14

Stor-transformation stories or stories of transformation. It's it's not out yet. It's supposed to be out soon. Hopefully. I did a few I did. I think Amanda Knox, the one I did with Amanda Knox has done that's out. I forget where hers is called. I mean, if you want to look up stuff, there's like, just google me. There, I have a lot of stuff all over the place. I even do live streams on Facebook about my parole process and help people bring their loved ones home or at least help them understand the probe word and preparations and all that. So, yeah, if you want to check it out, or if that's a necessary part of this.

CT 09:58

When did you first learn about COVID And what are your immediate thoughts?

PM 10:02

When I first learned of COVID. I can't remember the first moment where, you know, I heard the word COVID, or you know, Coronavirus. My initial thoughts were like, Oh, it's another flu. And you know, it's gonna be like H1N1, which I had, I believe I had it while I was incarcerated. And it was a terrible flu is a terrible experience. I didn't know about the respiratory aspect of COVID. I didn't know the deadliness of it. And, you know, just based on on history in general, you know, there's, there's the bird flu, swine flu, there's SARS. There's all you know, all these things that come about. And, and for me hearing about Corona, I was like, okay, that's, it's just another another one of these in the same category. But like I said, I didn't know it was going to be that, that deadly or that harsh on, on, on the world, basically.

CT 11:01

And have your opinions changed?

PM 11:03

Yes, deeply. I, as I said, I learned about the respiratory aspect of it, I learned about what happens, I've seen the symptoms I've seen, you know, so, so many varying and lasting effects on people. And, and it's actually frightening. The most, and I keep saying the respiratory part, because that could affect my wife, my wife has asthma. And so instead of like just thinking about it, thinking about it as a another flu strain, I actually was like, Whoa, let me wipe down everything. Let me make sure I limit my travel and everything. Everything's been limited. We've been sheltering in place. We've, we've taken these these warnings by CDC to heart, and really have been doing our best as a family and me as, as a, as the dad of the house has been making sure that we have our supplies and you know, just being as safe as possible.

CT 12:04

What was your initial reaction to COVID-19 in the criminal justice system?

PM 12:09

At first when I first heard about it, as I said it was you know, I had that whole progression, that mind change that shift in the severity of and then I thought about it inside, I was like, Oh my God. I remember being incarcerated and what it was like to have that bird flu. And I remember what it was like to have, was it norovirus at San Quentin and Legionnaires disease at San Quentin. A and, and you know, walking by cell after cell and hearing cough after cough. And it's like, like a sick ward. And it's disgusting. And, and I thought that this is going to spread like wildfire whenever it gets into a prison. And it was it, it made me sad and afraid for the folks that I left behind. And even just for the folks that are, are trapped in there, and I know what they're facing as far as the hopelessness and helplessness to get out. You know, my heart went out for them immediately. And so my organization we even, we did a lot of programs in prison, a lot of our work was done during those events that I had mentioned. And so we had to cancel all those, we still had the prisons, saying, 'yeah, no, it's good come on in,' you know, let's have this big gathering of people, let's run it and us as an organization, our stance was like, wait, no, that's irresponsible. And, you know, let's, let's stop this for one and two, let's, let's figure out how we're going to mitigate this if all if at all possible. And so, you know, our, our thoughts and our hearts went out to the folks inside and we have been banging any drum hitting any and every media outlet that we can to, to raise awareness to speak to different coalition's of, of family members and

we've been talking to legislators, we've been talk, we've been very vocal in what needs to happen, we definitely want to make sure that we do mass releases, we stopped transfers, we do all kinds of things to to ensure that no more people die. We've already had I think 42 In California alone in California state prisons die and and it's tragic, every one of those lives as, as a human being. And nobody was sentenced to die of COVID. Like that's, that's not in the in the law books at all anywhere. It's actually actually naw. It's under the Eighth Amendment under cruel and unusual punishment. That's the only place that I could think of where you would find any kind of circumstances like this pertaining to the law.

CT 14:44

Have you seen COVID-19 change the criminal justice system? And if so, how?

PM 14:49

I have I have seen so, you know, being home for three years, advocating for, for criminal justice reform even inside I've had a lot of support, I've seen a lot of people come in and be supportive of rehabilitation and change within the system. And then I've seen when I've since I've been home legislation that I've worked on, you know whether it's, you know, getting voting rights, whether it's ending the felony murder rule, which the organization I work for, we spearheaded that law, we've changed a lot. And we've had a lot of support along the way. But in in the last few months, what I've noticed is a huge uptick in community support, in mobilization of family members, and mobilization of members of the legislature, in in compassion, that and from them, especially to compassion that has always been there, but not to this level. A lot it's oftentimes, you know, it's politically safe to, you know, maybe support some criminal justice reform, but not get too heavily invested or put your heart that deeply into it. But I've seen people really horrified and those legislators come to our our a press conferences and, and, and townhall meetings and really get on stage and say, hey, look, we need to change things. Things are really bad right now. And they might be talking about Coronavirus and what's happening now, but at the same time, I feel like those will also have lasting effects on on future efforts, you know, as far as getting the realization of who can be released and why do we have such an outbreak right now? Why? And and it's because mass incarceration you know it existed pre COVID. And so, you know, that's the the one of the, I don't wanna say that's the real problem. But it is it is. It's the root of why this Coronavirus has torn so rampantly through California prisons in general because of the overcrowding and mass incarceration.

CT 17:01

What do you want people to know about being incarcerated during a pandemic?

PM 17:06

Man there's a lot to know about being incarcerated during a pandemic. For one I would say it's impossible to social distance. I have not seen any setting in which it was possible for people to be six, six feet apart at all times. You know there's security protocols, which require guards to to be on your either cuffed you cuffing you, escorting you anywhere that you go. The the cells are never big enough to socially distance, six feet, the way that chow and food are distributed. There, they try to make those protocols but at the end of the day, they they don't have the staff or the resources to to implement them in in a safe way. I would say that prisons in general are not built for hospice care for hospital care, actually, prisons. They're not built for that and so prisons, I always call them warehouses, because you

know, that's what they do they warehouse people, and how do you make a very profitable warehouse, you cram as much stuff in one space as you can. And that's basically what happens. And so they crammed as many people as they can in small spaces. And so that's part of prison. And then as far as what happens during a pandemic, what has been happening that I've seen recently is that you know they shut down phones, they you know didn't want people to use the phone, they didn't want, you know, they said it's to mitigate the spread, but I feel like it was to stop the, the flow of information going out. And so that's one thing that the the state had did had done, especially at San Quentin is that they they shut down phones, like they really did that. And they because a lot of people were speaking out about the conditions, there was a lot of public outcry specifically for San Quentin, because there's like, so many volunteers are going in annually. And so what else was goes on in the pandemic. So, when it comes to illness, the the prisons response is to isolate you, and they isolate you in the same manner in which people go to the hole. Solitary confinement, and it's the same conditions, it's the same place. So basically, you're punished for being sick. And that's partially again, because they don't have the resources to stop a pandemic, or even deal with major medical issues in general. And so that's one thing to know is that when people get really sick, if you're going to have a surgery, if you have a really, really horrible illness, they will take you to an outside hospital. That's just what happens because like I said, they don't have the resources so it's yeah, so if you do get sick, and if it's something that they feel like it's not going to need for you to go to outside facility, the hole is their solution. And so it's a punitive place and it's not hosp-hospitable at all. What else happens in prison during a pandemic? I would say there's a lot of fear and panic, just based on what I said about the, the the coughs all throughout the cells like that's, it's really bad like when I when I had or when I saw the Norovirus and the the legionnaires, and I seen people coughing and all that stuff, I was like, I guess I'm just gonna get it right, there's like really nothing that you can do. And so that's really sad and its scary. And I just wonder about the mental health of folks inside. Because, you know, here I am, over here, let's just take me for instance. And if I was still inside, I am a person who is going to the parole board, I'm doing a lot of work on myself, I'm trying to get to my humanity and re-reclaim that. And then your lack of humanity is reinforced by the way that they treat you as not even a second class like a third or fourth class citizen, with with no rights with no compassion. So that's definitely one of the things that's terrible. And it is not conducive for rehabilitation for people to reclaim their, you know, humanity, not that it's gone. But it's just something that the state tries to tries to impart the idea that it's not there. And so they reinforced that with these inhumane and basically mean spirited tactics. I think that's all I have for what it's like, I would say also to just the story, like I got, I was punished in the same way, as I was just outlining. When I had H1N1, I had shivers, I had the worst flu of my life, I remember thinking that I might die, I was in a cell by myself, fortunately, which is rare. And I remember going to sleep and thinking, I hope I wake up, I really, really hope I wake up, this is really bad. And, you know, there was nothing I could do, I could have went to the to the nurse and be like, hey, I need some help, and then went to the hole, and then we just go to the hole. And there's really nothing that could really had done. And so I woke up in the morning, and I felt better. And then I had just a little bit of a cough left or a sore throat. So I asked for some lozenges during the pill distribution line. And they're like, why, what's wrong? And I said, well, all this left, I got this little scratchy throat and they were like all this left, what else did you have? And I told him, I said, but I'm good. So don't you got to take into the hole. And then they took my temperature and they was like eh its a little high were taken you to the hole. And so I had to go to the hole and suffering there for a few days with just a scratchy throat. And it was it was the worst. And it's just another

example of one of the many, many ways that the prison is not the place to deal with a pandemic at all in any way, shape, or form.

CT 23:23

What do you think the solution is to dealing with COVID in a correctional facility?

PM 23:28

What I think the solution is, is mass release, you know, we have mass incarceration. So when you do mass release, you know that's, as I mentioned, that is a huge part of the problem. And so you have all this overcrowding, you have prisons that are I think, collectively, throughout the state, the CDCR is operating at 120% capacity. And so that's ridiculous. People, I think the governor was calling for 100% capacity. And that's also ridiculous. Because if you get to that point, then you're you're basically saying here prisons are full to the gills. And it doesn't make any room for social distancing in a meaningful way. And so more releases and looking at it, who's eligible? I mentioned earlier, the whole false ideology about violent offenses. And that needs to be looked at that, the criteria for the releases need to expand. There's always these exclusions, the non violent, you know, non this non non non It's like okay, well, what about the, the violent offenders but they're ready. When it comes to stats. I think the recidivism rate for lifers like myself is one two to three, between 1 to 3% and it fluctuates. I don't know how or why but I've heard different reports, but the highest is 3% like 3%. That's crazy right? Where the average non-lifer their recidivism, this is a hard word, I don't know why they always have to use that one. But the recidivism rate for non lifers hovers around 60%. So that's, you know, when you look at stats and data, when it comes to who's safe to be released, it, it's the lifers. And so, lifers need to be considered in these eligibility's there needs to be stopping of transfers is one. That's, that's a no brainer. You know, the outbreak at San Quentin started because they brought patients from Chino, I don't know if you know about the story. And so they brought people from that prison, which was a hotbed and where there was a huge outbreak going on. And the the state actually tried to say that they did their best to screen and make sure the transfers were safe. They were trying to get people out of this situation. But what they did is they tested people, and then they said, okay, well, we're going to wait for your results. And once we get your results, and you're negative, we're going to send you back, I mean, we're going to transfer you so they sent them, they tested them, sent them back to the general population where all the COVID was. And so transfers need to stop, I think a a new protocol or procedure needs to be put in place as far as transfers go. cohorting needs to be utilized when when doing testing. So the ends, and it goes same goes for the guards like if, if the guard is tested, isolate them, once it's negative, okay, now you're going with the negatives. If it's positive, then you go with the positives. And so that's one huge thing about cohorting that I feel that the state doesn't understand, or maybe they just don't have the capability. So that's why I mean, transfers need to stop. What else needs to happen?

CT 26:46

What do you mean by cohorting?

PM 26:48

So cohorting, like so when I say cohorting, like it, it depends on testing, or it depends on transfers, it depends on on on a lot of factors. So like, let's say, you want to, you have an outbreak in one prison,

and you want to get the the non COVID patients or the patients that are they're COVID free, you want to get them safely out of there. So you, what you would do is you would take them, you would test them and and put them in a safe space in a clean space. And that would be their cohort. And so once they're they're cleared, and they're good to go, then you can put them on a bus, but that bus would need to be cleaned and and COVID free. The officers that come into contact with them also would need to be in in a cohort cohort of their own of officers who are are COVID negative. And they need to be isolated and stay away from from outbreaks and things like that. So that's what I mean by cohorting. And then just in general, I think the big push one of the big push when I when I talk about mass releases, or at least one big number that I've heard is is reducing the population by 50%. And I've heard about that at San Quentin, specifically, there was a report by I think it was called Amend. They operate out of UCSF, and they did a report and they were calling for a 50% reduction at San Quentin. And so these huge shifts need to happen because as I said, these places are operating at 120% capacity. If you drop it to 100, then you're just basically full if you drop it to 50. Now you're in a place where you can possibly have people isolated in their own cells without, you know, a coughing cellmate. And you know, and and have, you know, showers and food distribution done in a safe manner in which you know social distancing, distancing as possible. So I think those are some of the main things that need to happen.

CT 28:46

How has the medical staff within the corrections facilities responded to the pandemic?

PM 28:50

How have they responded? I think they responded in the best way that they can. They don't have, as I said, the the necessary tools to make the best impacts they don't they're they're hands are tied by safety and security versus hospitality or hospital work. Prisons operate as a as I said, it's not just the warehouse but in a way that puts safety and security even, and not health in the in the forefront. And so like safety and security only pertains to stopping violence or stopping the possible drug distribution or whatever happens in prison that is you know negative. Except for pandemics. So nursing staff, medical staff, they'll be they might want to do one thing. They might say we need to release people and then the city sure up like nope, that's not going to be good for safety and security of the the communities. We don't have protocols to release people so no, maybe they want to give people hand sanitizer like no there's alcohol in that they can drink it. I know that they're doing it now. They they are, they are giving hand sanitizer, they are giving masks for the folks inside. But prior to that decision, you know, face coverings were not allowed. One one thing that I remember was being in prison that was in the desert by the border of Mexico and a sandstorm comes. And you know, people put their shirts over their their face. People had bandanas and throw the bandana over their face, and the guards would yell at them, like, 'hey, take those off your face, you can't have your face obstructed.' Because they would say that, you know, your, if you do that, and you and a bunch of people beat somebody up, we can identify the assailants and you know yada yada yada so that safety and security protocol overriding, you know, medical needs, you know, for people to breathe in a sandstorm like, that's crazy. So, but recently, masks have been deemed okay. But like that those are some ways that there's conflicts between prison staff, prison administration and medical staff and and their inability to do their job. And I think that they also, I mean, we struggled in the community, for PPE, you know, so I can only imagine the shortcomings that they would have as far as having supplies, having the masks, respirators, having the respirators that would be for the outside hospital, but the, the, the gowns, whatever they need, I'm sure

like they're, and this is like anecdotal, I'm just guessing, based on what I remember from from medical staff and what they had what they didn't have, they didn't have much. And so I'm just kind of like saying that, I'm guessing that they had a huge lack of of supplies.

CT 31:41

What are your thoughts on COVID-19 and testing and correctional facilities?

PM 31:45

I think it needs to happen. I think testing needs to happen more widespread, I think it needs to happen for everyone for for prison staff, for the guards, for the medical staff, for for the there's there's people that come in, to work in the prisons to do like maintenance to work on maintenance crews, and all of them need to be tested, all of them need to be given whatever test antibodies the the then the swabs all of that regularly, whatever tests can get them the the best and most accurate results in the fastest manner. I think that's hugely important for for stopping the spread inside.

CT 32:25

Can you respond to the media coverage in regard to COVID-19 and correctional facilities? Is there anything that you specifically want to talk about or that hasn't been covered that you wish were talked about?

PM 32:39

Well, there's a couple of things. Well, definitely the the violent versus non violent. I haven't seen any news outlets say, hey, Governor, or or Secretary of the CDCR. I see you're releasing 8000. And you're excluding lifers, you're excluding, you know, people with violent offenses. Here's the data. Here's the here's the recidivism rates. Here's the- I haven't seen that reported on at all. And you know, and and it's scary for people to do that. It's it's like going out on a limb. And and, you know, trying to do the right thing in a in a world full of wrong. So I, I haven't seen that. And the other thing that, that I've seen recently, that I don't like, is people reporting on crimes, right? Like, let's just say somebody's incarcerated, die of COVID. Why would you say that a convicted murderer on death row has died of COVID? Like it's a human being. These these comments in these titles and labels are meant to sensationalize the story itself stories I get that, you know, media is a business, but there, there needs to be some, some oversight. I know there's supposedly some but some in these little more nuanced instances I feel like that that oversight is not being implemented, or at least not even cared about, but I just don't see a, a need for that. And so I I don't like when I see that. And as far as reporting on COVID inside prisons.

CT 34:10

Is there anything else you want to add?

PM 34:12

Yes, I don't know what this is gonna. I forget where this is going and how far the reach is or whatever. But I would say please stop labeling people use peop- person first language, you know, formerly incarcerated person, currently incarcerated people, individuals, not felons, not convicts, not monsters, not crimes. These people and yeah they have families. Oh, yeah, that's the other thing that I would like

to see reported, or at least have some understanding about as far as like, you know, false, not false claims, but not completely correct comments by the Governor talking about I don't want to release people to homelessness. I don't want to release people to, I don't want increase poverty or whatever. I have seen so many community based organizations and this is something I want folks to know is that there are I don't know how many community based organizations move in right now mobilizing to ensure safe reentry to ensure possible quarantines for people upon release like they're coordinating this statewide. And I I have personally tweeted this fact out and and people have responded in saying like, 'hey, naw, I'll go pick up mine. I'll go pick up my son. I'll pick up my husband right now. I'll take his celly too, you know, cellmate,' like I have seen a huge outpouring of support for people from for more releases and for safe releases. So I definitely would like to see more reporting on that or at least, you know, mention it here and get the word out that way.

CT 35:51

Okay, if you can hang on for just a minute, I'm gonna stop the recording.

PM 35:54

Mhm.