An examination of the routine, violent deaths of people in the custody of the State of Alabama

2014 - 2020
People keep dying in ADOC custody.

Introduction

The deaths of George Floyd, Breonna Taylor, Rayshard Brooks, Daniel Prude, and others have generated increased scrutiny of how the government and law enforcement treat Black people. These police killings of unarmed Black people are perhaps the starkest example of the many ways the state inflicts violence on individuals, contrary to both our legal and social code.

But in Alabama and elsewhere, another, pernicious form of deadly state violence continues with far less scrutiny. Black people are dying violent deaths while in custody of the Alabama Department of Corrections (ADOC), the largest law enforcement agency in the state — and they are dying in disproportionate numbers as compared to their white peers. This continuum of Black people being killed by police and in prisons amounts to two sides of the same coin. Police are the front end of law enforcement, and prisons are its back end. They are inseparably connected. In this report, Alabama Appleseed seeks to document and demonstrate the ways in which deaths — particularly deaths resulting from homicide, suicide, and COVID-19 in Alabama prisons — are prompted by the same issues of state violence and deliberate indifference to the safety of people in government custody as the police killings that have inflamed the country and energized the Black Lives Matter movement.

Alabama Appleseed has identified, by name, 89 people who have died violent, preventable deaths from homicide, suicide, or drug overdose over the last six years while in the custody of the Alabama Department of Corrections. These incarcerated individuals lost their lives due to the State's failure to provide “basic human needs, one of which is reasonable safety” (1). The neglect, violence, and death disproportionately impacts Black men, who are dying at over three times the rate of white men.

The Alabama prison system has been in crisis for nearly fifty years. In 2019, the United States Department of Justice (DOJ) released a 56-page report that detailed intense physical and sexual abuse, corruption, and rampant drug use, stating that the ADOC “has violated and is continuing to violate the Eighth Amendment rights of prisoners housed in men's prisons by failing to protect them from prisoner-on-prisoner violence, prisoner on-prisoner sexual abuse, and by failing to provide safe conditions...” (2).
The patterns of violence, neglect, and lack of accountability around deaths of people in the custody of the Alabama government have worsened in the past five years. Through abuse, negligence, or indifference, state officials continually fail to protect individuals in their custody. In 2020, the specter of COVID-19 has been added. Because social distancing, basic sanitation, and adequate medical care are out of reach in prisons, incarcerated people are regularly dying from the virus.

Our tax dollars fund death traps. With this report, Appleseed hopes to show the people of Alabama the heavy human toll of decades of systemic neglect, callous indifference, and institutional violence by our government toward incarcerated people.

**Homicide Deaths in Alabama Prisons**

Unquestionably, the death and danger within state prisons has a disproportionate racial impact. Not only does Alabama disproportionately incarcerate Black men in its prisons, but Black men are disproportionately affected by the violence inside of them (3). There were 48 homicides in Alabama’s prisons between June 2014 and September 2020. Thirty-seven of the individuals who died by homicide were Black, and eleven were white. **Black men in Alabama prisons are 3.3 times more likely to be killed than their white counterparts.** From June 2014 to June 2020, individuals aged 24 to 67 were killed by homicide. In Alabama prisons, the average age of death by homicide is 38.3 years old.

The DOJ has made clear these deaths are the result of the prison system’s failure to protect people in its custody from harm, in violation of the United States Constitution. The state has failed to reduce overcrowding, failed to address understaffing, failed to control contraband and weapons, and failed to effectively classify and manage the prison population. As a result, an Alabama prisoner is **ten times more likely to be a victim of homicide than anyone else in the state.** In 2019, Alabama prisons had a homicide rate of 73 people per 100,000; the overall murder rate in Alabama is 7.8 people per 100,000 (4).

“In July 2017, a prisoner at St. Clair was found tied up and strangled to death. The incident report listed the incident type as “Death – Inmate-on-Inmate” but contained no details about the nature of the death. The incident report said only that at 2:15 p.m., officers entered the cell and observed the prisoner lying unresponsive on the floor and when he was checked, “appeared not to be breathing.” The report stated that a nurse was escorted to the cell and reported that the prisoner “had no signs of life.” A photograph from the aftermath of the murder painted a different, gruesome picture. It clearly showed that the decedent’s hands remained tied to a bedpost when prison officials found his lifeless body.”

*United States Department of Justice, Investigation into Alabama’s State Prisons for Men, 2019*
Homicides in the past five years have occurred in nine of ADOC’s prisons for men. Bibb, St. Clair, Ventress, and Elmore Correctional Facility were home to a majority of them. Between June 2014 and June 2020, eight individuals died as a result of homicide at St. Clair. There were ten deaths at Elmore. Indeed, the same patterns of neglect and violence have been occurring for years in Alabama prisons, with no meaningful action by ADOC to address them. In 2014, violence at St. Clair - and a tolerance of violence by prison staff and administration - was the subject of a federal lawsuit brought on behalf of incarcerated people by the Equal Justice Initiative (5). EJI reported 6 homicides over 36 months and multiple incidents of life-threatening injuries between 2012 and 2014.

One year after the 2019 Department of Justice report detailed the need for immediate action to prevent more deaths, nothing has changed; in fact, 2020 is on pace to be one of the most deadly years on record in Alabama prisons, with deaths by homicide between January and July at 10 compared to seven for the same time period in 2019. Neither the 2019 nor the 2020 legislative sessions yielded substantive assistance to address the underlying issues. The inaction of the State has led to the death of people in Alabama prisons, and pain and confusion for their families.

ADOC created an internal task force in December 2019 to investigate the “inmate-on-inmate violence as well as alleged excessive use of force by staff” (6). This internal task force has done little to prevent an uptick in deaths by homicide in 2020, despite its founding mission. In an attempt to reduce the violent and dangerous prison conditions across the state that have produced such high homicide rates, ADOC engaged in prison raids to collect contraband, particularly weapons. But some of the raids themselves have been violent and produced the opposite effect (7).
Davieon Williams, 24, died in August 2016, from stab wounds (9). Mr. Williams was serving a five-year sentence. He was serving time on a nonviolent offense, yet suffered deadly violence in ADOC custody.

Michael Smith, 55, from Fairfield, Alabama, was hospitalized after a use-of-force incident on November 30, 2019 at Ventress Correctional Facility. He suffered blunt force trauma to the head, intracranial bleeding, fractures of his nose and left eye socket, and had six teeth knocked out. ADOC personnel told hospital staff that he had fallen from his bunk (10). Mr. Smith died in the hospital five days later. Two correctional officers were placed on mandatory leave after the incident, and the ADOC Commissioner announced the formation of a task force to scrutinize “inmate-on-inmate violence and alleged excessive use of force incidents by staff” (11).

Eight months later, ADOC has refused to release anymore information about Mr. Smith’s death. In response to a request from Appleseed, the department provided this statement: “Out of respect for the ongoing legal processes, the Department is unable to provide further information on ongoing investigations – including Michael Smith’s. Please know, however, that we are conducting proper due diligence on our end, taking proactive steps, and remain committed to transparency.”

In January 2019 Moses Robinson, a 38-year old man, died from an assault by another incarcerated individual. His death marked the fourteenth homicide reported in Alabama prisons in 2019 (12).

Jamie Prim, 34, had been granted parole in November 2018 and was planning to live with his sister in Baldwin County, Alabama. However, Mr. Prim was injured in an assault which left him with traumatic brain injury and paralysis. In February 2019, Mr. Prim died from his injuries. His release from ADOC custody was never processed (13).
One such raid occurred in March 2020 at Staton Correctional Facility. It was conducted by the Corrections Emergency Response Team — a team which has such a history of violence that it prompted an investigation for excessive use of force. Interviews with individuals by the Alabama Smart Justice Project found 10 men reported being beaten with batons, seven reported beatings occurring as they complied with orders to get down, and one man reported laying in his bunk for hours with a badly injured broken hand (8). Despite being responsible for shattering this man’s hand, ADOC then delayed a needed surgery to repair the man’s shattered hand, due to the COVID-19 outbreak.

In response to a request from Appleseed, ADOC shared that the Task Force “has resulted in protocol, programmatic, staffing, and training assessments as well as actions – the full benefits of which have yet to be realized with the implementation of certain outputs still in early stages. The recommendations of the Task Force include refresher protocol and procedure training; health and wellness interventions for correctional officers and staff; an emphasis on inmate rehabilitation programs and resources; and the reexamination of enhanced surveillance measures such as facility cameras and the use of body cameras for on-duty correctional officers.”

Billy Smith, 35, was hospitalized in late 2017. According to the internal ADOC report Billy had been punched by another individual. After this, correctional officers beat and hogtied him outside of an office. Yet Mr. Smith was denied treatment at the medical facility at Elmore Prison. His family struggled to reach anyone at the prison or within ADOC to find out what was happening. When they finally ended up at the hospital Mr. Smith had been given a “Do Not Resuscitate” bracelet (14).

Incarcerated people have also been killed at the hands of ADOC officers. In July 2020, the Department of Justice released a second report that documented unconstitutional use of excessive force by correctional officers, along with cover-ups by ADOC staff and supervisors. The 2020 DOJ report demonstrated that excessive use of force by correctional staff is widespread, unaddressed, and even covered up throughout Alabama’s prisons for men. At least three men in the last three years have even been killed while being brutalized by ADOC staff. Here is what federal investigators concluded:

“ADOC employees often fail to document or report uses of force. It is especially troubling that supervisors often fail to document, investigate, or otherwise address uses of force, demonstrating a deliberate indifference to the harms to prisoners caused by the use of excessive force. In some instances, surveillance video reveals unreported uses of force, while in others, officers admit using force after an inquiry from a supervisor. On other occasions, correctional officers—sometimes including supervisory officers—falsify reports related to uses of force.”

"One former correctional officer informed us that in the facility to which he was assigned, some nurses help correctional officers ensure that injuries caused by uses of force are concealed and not properly documented on body charts. We also found evidence that following a use of force, officers sometimes place prisoners in segregation for extended periods, so that any injuries can heal unobserved and undocumented."
Suicide Deaths in Alabama Prisons

Nearly twenty percent of individuals incarcerated in Alabama prisons have a diagnosed mental illness requiring treatment (17). Yet, there is a lack of mental and medical healthcare across the entire system. U.S. District Court Judge Myron Thompson in Braggs v. Dunn required a fix to the “horrendously inadequate” mental health system (18). In 2017, Judge Thompson found that in addition to a wholly unconstitutional mental health system, ADOC suicide prevention methods were “too limited” to identify those in crisis (19). The opinion described a “culture of skepticism” that contributes to lack of care for these individuals in crisis (20). Years later, the federal court has determined ADOC still has not addressed these problems and federal monitoring was ordered in September.

“ADOC’s long history of repeated litigation regarding the inadequacy of its mental-health care is independent evidence of its inability to sustain improvements without the type of oversight ordered today,” Judge Thompson wrote in the order (21).

During our period of analysis, the suicide rate in Alabama prisons was much higher than the national average, at 60 people per 100,000 (22). Reports detail the horrific circumstances for incarcerated individuals struggling with mental health issues. One individual’s monthly mental health counseling lasted for no more than ten minutes (23).

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Alabama Appleseed was able to identify 25 individuals who died by suicide between June 2014 and June 2020. These individuals ranged in age from twenty-three to fifty-seven. The average age of death of individuals who have died by suicide is 35 years old. The majority of deaths by suicide occurred at Donaldson, St. Clair, and Holman Correctional Facilities.

### Remembering Their Names

Jaquel Alexander died by suicide in April 2020. Mr. Alexander was incarcerated on a sentence of fifteen years for a nonviolent offense. He was not on suicide watch (24).

Ben McClure, 23, was from Dekalb County. He jumped to his death from a top tier bunk at Limestone. Mr. McClure had been diagnosed with depression and anxiety before his incarceration (25). In the 2017 Braggs v. Dunn opinion, Judge Thompson shared Mr. McClure's story, noting that correctional officers waited for nursing staff to begin life-saving care (26).

Jeffrey Lynn Borden, 57, was from Huntsville. He died by suicide at Holman Correctional Facility's Death Row, supposedly the most secure place in Alabama's prison system. He had a long, thoroughly documented history of serious mental illness and repeatedly threatened suicide (27).

Paul Ford, 49, from Talladega, died in January 2019. Mr. Ford had a history of mental health challenges, and attempted suicide while incarcerated at Holman. He fell and hit his head and was placed in segregation for two days and returned to his cell. Mr. Ford attempted suicide a second time, and was transferred to Kilby Correctional Facility. He “was not flagged as having a serious mental illness,” and died by suicide (28).

Jamie Lee Wallace, 24, was from Graysville. Mr. Wallace testified during the Braggs v. Dunn trial, was cleared by his doctor to not be at risk; despite Mr. Wallace’s verbal inclinations about self-harm and suicide (29). Mr. Wallace died by suicide in December 2016, two days after being taken off suicide watch by ADOC officials. After Mr. Wallace committed the offenses that would lead to his incarceration, his father said this about his son: “Everybody is portraying my son as Frankenstein, and he's not... If they knew him, they would know he has a good heart. No one could have seen this coming” (30).
COVID-19 Deaths in Alabama Prisons

COVID-19 has been omnipresent in prisons and jails across the country. The lack of ability to social distance due to overcrowding, lack of access to proper hygienic supplies and procedures recommended by the CDC, and lack of access to medical care have contributed to the COVID-19 deaths of more than 1,200 incarcerated people across the United States as of October 24, 2020 (31). In Alabama, there had been 27 confirmed COVID-19 deaths among incarcerated people as of the same date (32).

ADOC has a history of failing to protect people in its custody from outbreaks of contagious illness.

A 2014 investigation from the Southern Poverty Law Center about the state of medical care in Alabama prisons, revealed that during ADOC Tuberculosis outbreaks, quarantine protocols were not properly followed. Individuals who were known to have TB were moving in between the quarantine dorm and normal dorms, while testing remained scarce. Sanitation issues including open sewage were rampant across all facilities. The report concluded “The ADOC also has no effective system for preventing or managing infectious diseases” (38).

Policy recommendations from public health experts to protect those in Alabama prisons came before the first case was even reported. Advocates called for releasing medically frail and elderly prisoners early on, knowing that a COVID-19 outbreak would be fatal for many (33). With little response, the results have been predictable: a surge in COVID deaths of older people and a rise in unexplained deaths among people in their 40s and 50s (34). ADOC’s failure to maintain facilities and infrastructure has resulted in broken plumbing, leaking roofs, and poor ventilation that exacerbate the unhealthy conditions.

Social distancing is impossible in Alabama prisons, and increased access to hygienic items will do nothing to reduce that reality. At a statewide level, ADOC prisons are overcrowded to 170% of their designed capacity (35). As a result, areas to quarantine positive individuals are scarce on a normal day. So scarce, that ADOC re-opened Draper - which had been decommissioned in 2018 due to deplorable andunsanitary conditions - for COVID quarantine even though there is no running water or indoor bathroom facilities in much of the dilapidated prison (36).

Making the situation more dire, nearly 1,100 individuals who are currently incarcerated in Alabama were identified as 65 and older by an SPLC investigation. Of those individuals, 201 were sentenced to life with the possibility of parole and have been in ADOC custody for over three decades (37). Within this group, Black people over the age of 65 were more than twice as likely to have life sentences without the possibility of parole. The same report noted that the Hamilton Aged and Infirm Facility was at 231% overcapacity prior to the COVID-19 crisis. This overcapacity demonstrates the impossibility of social distancing in this facility built for individuals who are at high risk of contracting and dying from COVID-19. Ultimately, many of these people pose little risk to the community, have served long sentences in ADOC custody, and are at extreme risk of catching COVID-19 in prison.
The average age of death from COVID-19 for those incarcerated is currently sixty-four years old. Collectively, the group of individuals who have died from COVID-19 were sentenced to an average of seventy years in prison. Unfortunately, Appleseed was unable to identify any racial trends of COVID-19 in Alabama prisons due to a lack of available data.

The first COVID-19 case inside Alabama prisons was documented on March 19th, 2020. This case was a Correctional Officer (39). The news that the first inmates to be confirmed positive was released nearly a month later on April 17, 2020. Dave Thomas, 66, was both one of the first confirmed cases and confirmed deaths in the State. He died April 16, 2020 (40). Mr. Thomas had been incarcerated for four decades, and had been identified as a high risk individual by the SPLC just weeks prior to his death.

The warnings that advocates made about an impending disaster came to pass in a first wave of COVID-19 deaths during the summer. Eight individuals in Alabama prisons died from the disease in June 2020 alone. Eleven facilities across the state have reported COVID-19 deaths, and the disease is present in twenty-three out of twenty-six facilities. The facility-by-facility death rate is concerning. At Staton Correctional, positive cases resulting in death were 18.4 percent of the total cases within the facility. As of October 23, 2020, ADOC has reported 501 confirmed cases among incarcerated individuals and 443 confirmed cases among prison staff. ADOC had only reported testing 5,257 of the roughly 22,000 people in its custody (41). So far, the death rate from confirmed COVID-19 cases in Alabama prisons is 5.4 percent. However, that number is likely to rise as death investigations and autopsies from the spate of unexplained deaths over the summer are completed.

ADOC is not the only state agency that has been complicit in the needless exposure of prisoners to COVID-19. Instead of working to protect those incarcerated from COVID-19, the Alabama Bureau of Pardons and Paroles (ABPP) cancelled parole hearings in March 2020 (42). They did not resume until May 18th, 2020 (43). ABPP has the authority to utilize the Medical Parole Act, on referral by ADOC, to release individuals who are considered geriatric. These individuals are “are age 60 or older, suffer from debilitating age-related diseases, need assistance with daily activities like walking and pose a low risk to the community” (44). They have done little to leverage this opportunity to save the lives of individuals most at-risk from COVID-19.
More than 2 months after her son died while in the custody of the Alabama Department of Corrections, Wanda Payton still had no answers. “I want to know what happened. I don’t understand and no one will tell me anything,” she said.

She did not know how he died. Or who was with him as he took his last breath. A chaplain at Bullock Correctional Facility called her early one Saturday in August to let her know. “I just fell to my knees and asked them ‘what did you all do to my baby?’ And I just kept screaming,” she recalled.

Ms. Payton’s 45-year-old son, Scottie Johnson, had stopped breathing a few hours earlier. Prison staff took him to a free world hospital. Within two hours he was dead.

Finally, in mid-October, Ms. Payton was notified that an autopsy revealed her son tested positive for COVID-19. A news reporter told her; no one from the prison system ever contacted her about her son’s cause of death. The outbreak that took Scottie Johnson’s life infected 57 other people incarcerated at Bullock. ADOC has failed to address flooded cells, broken sinks, and crowded dorms, according to video that emerged in August, making basic sanitation during the raging pandemic impossible (45).

So far this year in Alabama’s prisons, seventeen people have died from homicide, suicide, or overdose, and another 27 have died from COVID-19. Still others, many in their 40s and 50s, have just died, maybe from COVID-19, but neither the families nor the public knows for certain, as prison officials have opted not to do mass testing. Investigations and autopsies take months so families are often left in the dark with their grief.

For Wanda Payton, that grief has been all-consuming. Even though Scottie was locked away from her for 29 years, from the age of 16, she devoted herself to taking care of him any way she could. He relied on her for all the basics – socks, underwear, thermals in the winter. She made sure he had nice shoes, the $75 Nikes, not the stiff prison-issue boots. “He got new glasses that came from me,” she said before he died. And when he was beaten so badly last year that he lost sight in his good eye, she practically had to beg prison staff for decent medical care, and they still haven’t provided an account of how he was so badly hurt. “The only thing they told me was, he was in a confrontation,” she said.  

Continued...
Until his death, they talked almost daily.

Their last call was 4 days before he died, and “he told me he had a scratchy throat,” she recalled. Then she did not hear from him for a few days, which was unusual because she always put money into his account so he could call.

For 33 years, Wanda has worked a manufacturing job in Midland City, pouring money into the prison system that held her son captive until his death. She purchased food packages to supplement meager chow hall provisions, shoes, clothing, towels, and toiletries. When Scottie graduated from a substance abuse program and she was permitted to bring in food for him, she made extra for a dozen or so other men whose families didn’t attend. She still remembers the spread with pride: steaks, ribs, shrimp, and chocolate cake.

She had faith that someday the parole board would see fit to parole Scottie, especially since he was still a child when he was locked up. Recently she pulled out the letter he wrote to the Alabama Bureau of Pardons and Paroles in advance of his 2018 parole hearing, apologizing for his crime and sharing how he had changed since his conviction at the age of 16. Parole was denied and his life sentence became a death sentence.

The primary victims of Alabama’s shockingly violent prisons are incarcerated people. Once removed from this misery are thousands of Alabama mothers and fathers who must reckon with the knowledge their children might never come home. With COVID-19 bearing down inside the prisons, where social distancing, basic sanitation, testing, and medical care are inadequate at best, there is ever more to fear.

“I want to know what happened. I don’t understand and no one will tell me anything.”

Wanda Payton
Discrepancies in ADOC Reporting on Deaths of People Held in its Custody

The number of violent deaths is likely higher than the reported numbers suggest. Among the disturbing findings in the first U.S. Department of Justice report was the fact that ADOC mischaracterized at least three deaths that had all the signs of homicide as “other.” As a result, the DOJ stated, “These unreported homicides provide reasonable cause to believe that ADOC’s homicide rate is higher than what ADOC has publicly reported.” For example, DOJ investigators reported the following (46):

“In February 2017, a prisoner died at the Staton Health Care Unit. I&I investigated the matter and found that the victim and another prisoner began fighting near the officer cubical because the victim felt the other prisoner was standing too close to him. Once the two were separated, the victim followed the other prisoner back to the bed area. The assailant produced a homemade knife and another fight ensued in which the victim was stabbed and ultimately died. The autopsy detailed numerous stab wounds to the victim’s back and chest. ADOC could not explain why this prisoner’s death does not appear on the list of prisoner deaths that they produced to the Department, but does appear on a list of deaths that its private medical care provider tracked.”

“A prisoner died in February 2018, from wounds he sustained four days earlier in a knife fight at Kilby. The autopsy details multiple stab wounds to the prisoner’s head, abdomen, back, and arm. One stab wound extended “through the scalp and impact[ed] the skull and [was] associated with a depressed skull fracture 1/4 inch in diameter.” The toxicological analysis report also revealed the presence of methamphetamine in his system. The incident report listed this prisoner’s death as “Natural,” despite the original incident report narrative describing an altercation with a weapon. Though ADOC reported the death as “Natural,” the autopsy report definitively states that manner of death was “homicide.”

With a record that includes these kinds of documented misclassifications, inconsistencies, and falsehoods, it is impossible to know precisely how many people have died from various causes while in ADOC custody. This report can only account for deaths that we are able to verify using available records.
Conclusion

Alabama Department of Corrections Commissioner Jeff Dunn has repeatedly said the violence and deaths are partly due to an inmate population that has become increasingly comprised of “violent felons” because of sentencing reforms that have reduced the numbers of incarcerated people convicted of nonviolent offenses. He also blames the buildings themselves: “When you have a disproportionally violent group of individuals living in close proximity and crowded conditions within aging and flawed facilities, violence is hard to prevent,” Dunn recently wrote in an op-ed (47). This explanation overlooks the fact that every prison system in the U.S. houses people convicted of violent crimes in close proximity to one another, many in aging and flawed facilities. None have homicide and suicide rates approaching Alabama’s.

The numbers continue to rise with the death of Demarcus Harrison, a 46-year-old Black man from Lauderdale County who was killed at Fountain Correctional Facility in September, 2020. Mr. Harrison’s violent death comes 18 months after the U.S. Department of Justice warned the State of Alabama that its prisons were unconstitutionally violent, and 10 months after the ADOC Commissioner Jeff Dunn announced an internal task force to address this violence.

As the Black Lives Matter movement seeks accountability and reform of police brutality against Black people in this country, we encourage Alabamians to confront the brutality against Black people happening on the other end of the justice system and demand change. People in government custody have no choice but to rely on the State for their safety. But in Alabama, “reasonable safety” as required by the Constitution is clearly out of reach for too many incarcerated people. The numbers are shocking: 78 deaths by homicide, suicide, or drug overdose since 2015. And the racial disparities are dramatic: 77% of prison homicide victims are Black. We must not forget these victims, and we must demand an end to the appalling deaths of people in ADOC custody.
Methodology

Appleseed set out to identify those who have died in ADOC custody from June 2014 to July 2020, to and identify who, why, when, and how, these people have died. Our research has found that a majority of people identified by ADOC by name, or in the news media, have died by homicide or suicide. Utilizing ADOC’s public monthly reports, external investigations such as the DOJ report, and external news media reporting, we were able to determine:

1. The name, age, race, facility, date of death, cause of death, and picture, for a majority of those who died in ADOC by homicide, suicide, and COVID-19.
2. The name, age, race, facility, date of death, cause of death, and picture, of those who have died by “Other” causes, those cases mainly being: those on death row, overdose victims, and work-release accidents.
3. Month-to-month trends in reporting of deaths (ADOC Reported Deaths vs. Publicly Reported Deaths).
5. Racial disparities in homicide deaths and suicides.

Appleseed utilized the ADOC’s monthly statistical reports to compare their reporting numbers to the number of individuals incarcerated who died in their custody. We were able to identify these individuals to compare to the ADOC reported number through news media, press releases, or external investigatory sources. The lives of those incarcerated in Alabama matter. Analysis of those who died by homicide, suicide, and COVID will include individuals we were able to positively identify by name, age, and race. There were six ADOC-reported suicides, and six ADOC-reported homicides that Appleseed was unable to identify by name between June 2014 and June 2020.
Endnotes

20. Ibid, p. 139.
Acknowledgements

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