Since 1975, I have been a human rights advocate on behalf of prisoners throughout the country. I coordinate the Prison Watch Project for the American Friends Service Committee, which is a Quaker based organization.

AFSC’s Prison Watch is an advocacy project which monitors prisoners and their conditions of confinement. We receive testimonies through the mail and collect telephone calls from people in Federal and state prisons and county jails. We also hear from family members, lawyers, advocates and correctional staff, with whom we often consult or provide technical assistance. An important backdrop of our work are the United Nations Conventions and other international and regional treaties that the United States has signed, including the Convention Against Torture.

In 1984, we received a letter from a prisoner who was being held in the Management Control Unit at Trenton State Prison. He said he had been placed in isolation and had no idea why. He asked us to monitor him which we did that through 2000, when after 16 years he was released from that unit. For many of those 16 years I visited him. I began to notice a distinct increase in irritability and repetitiveness. He reported feeling emotionally deadened. He would report on the changing emotional state of other prisoners there, noting which ones began to break down emotionally and physically. There were at least two men there who refused to ever come out of their cells. Another began to masturbate whenever officers or other staff came onto the tier.

Since that time, AFSC’s particular focus has been to monitor the escalating use of extended isolation in US prisons in the form of control units, supermax prisons, security threat group management units and administrative segregation units. We receive about 1800 letters and calls each year. One result of our monitoring is our awareness that the majority of reports on the use of devices of restraint are coming to us from men, women and children living in isolation cells.

These past years have been full of thousands of calls and complaints of an increasingly disturbing nature. The proportion of those complaints coming from women living in isolation has risen dramatically. In January I was invited to speak before the United Nations Committee on Women and I’d like to share with you some of the testimonies that I carried there.

One voice was that of Judith V., a 45 year old mother of three serving a life sentence in New Jersey. Judith wrote of her depression and desperation, reporting that she had stopped bathing and stopped combing her hair. She said, “I was locked in isolation, sitting there day after day, week after week, month after month, year after year. Not once
was I ever taken out of my isolated cell. I was in a separate building and was not allowed to have recreation, library, television or church. I was prevented from making telephone calls or having visits. I was allowed a short shower, after which I was locked back in my cage. My cell had a window that was four inches wide and three feet long. The window was wide enough to fit one eye. I needed fresh air so badly that I started to rub my nails against the rubber seal around the window. It was a thick, hard rubber which I rubbed for months. My nails broke down but the pain and blood didn’t disturb me. It took me 8 months to get a tiny opening. I felt worse than a caged animal. I spent three years there and have phobias where I still need to be enclosed in my cell”. Judith’s story doesn’t end there. She was abused sexually by two members of the correctional staff. When she finally came forward to report the abuse, she wrote that “they took me back to an isolation cell, had me stripped naked and searched.”

A woman from Texas writes, “the guard sprayed me with pepper spray because I wouldn’t take my clothes off in front of five male guards. They carried me to my isolation cell, laid me down on my steel bed and took my clothes off. They left me with that pepper spray on my face and nothing to wash my face with. I didn’t give them any reason to do that. I just didn’t want to take my clothes off.”

Another woman from Arizona wrote, saying that “the only thing you get in isolation here is a peanut butter sandwich in the morning, a cheese sandwich in the afternoon and for supper another peanut butter sandwich”. She reported drinking toilet water when she got thirsty.

Keisha, a New Jersey prisoner in a county isolation unit who is in her late 50’s, tells us that a number of the women are suffering from mental illness, including herself. She talks about her depression, her suicidal feelings saying, “We are forced to sleep on the floor in the middle of winter with bad backs and aching bodies, cold air still blowing in from the vents no matter what the temperature is outside. At two o’clock in the morning they wake you and tell you to clear the cell. They go through your personal belongings and put them in the trash.”

We recently received a letter from a man being held at the same county jail as Keisha who talked about being forced to wear what he called “a chicken suit” in isolation. He said that the suit was made of transparent material. The man was a minister imprisoned for lack of child support, and was mortified at the exposure of his body.

A man writes telling us of the suicide of a man in isolation at Ohio State Penitentiary. He says that no one told this man why he was in segregation. He had no violence on his record. He was transferred with no conduct report, no notice, no conference and did not know why he was here. In a letter to his family he spoke of having “no hope”.

Another wrote from the federal facility in Florence, Colorado talking about his disorientation. He described sleep deprivation because of the lights never being turned off, the constant banging of electronic doors, the echo of his own voice in the steel and concrete cell and thoughts that he was already in his grave. “There are counts every hour,
with people knocking on the door and putting a flashlight in my eyes all night. I’m unable to read and find myself drifting, not able to absorb a thing”.

In a visit I had with one prisoner, he said “if I locked you in your bathroom for 22 hours a day, you’re not going to get into too much trouble. But when they let you out, you’re going to get into trouble you would never have seen before. I have never met anyone who’s been exposed to isolation whose attitude didn’t harden”. We were sitting in a small, sealed cinder-block booth in the visitors’ room, speaking through a telephone, the man could see me through the glass, but hardly anything else. He said the control and humiliation “presses into my face” all the time. This fifty six year old man noted that one of the “most difficult things is the noncontact visits themselves. I haven’t touched my three daughters since 1989.”

Another testimony described a new supermax prison unit, “I got a concrete bunk, felt strip mattress, a steel toilet and a telephone booth sized shower in the cell.. Water comes out in 90 second sprays making me feel like a house plant. The outer door is solid steel with a peepshow panel of plexiglass. Through this door is a small trap of dead space, then a second door of steel bars. Can’t see left nor right – only the wall across from the cell. Meals are in the cell. All movement is in restraints. Outside rec is an area at the base of the cell block. High concrete walls. Look straight up and it’s crisscrossed with I-beams covered with steel mesh. Look through this and you can see a patch of blue.”

The prisoners describe an environment so devoid of stimulation that it is toxic to mental functioning. I’ve spoken with people who begin to cut themselves just so that they can “feel” something. I once asked man why he threw feces, what could possibly compel him to do that. He said it was the only power he had left.

People tell me that they experience a progressive inability to tolerate ordinary stimulation. Many describe having panic attacks and problems with impulse control. In dialogue by mail with Ben, in a South Carolina prisoner, we talked about his desire to get out of isolation. He held grave doubts about his ability to adjust after six years there. For the six months after his release from that control unit, he described trying to adjust. He wrote over and over again about the feeling of being watched, of knowing people were out to “get” him. As the months went on, he spent more and more time in his cell, unable to deal with different personalities, demands, and emotions. He had grown to hate what he called “all that freedom” and finally deliberately spit on an officer, knowing this would lead to being returned to solitary.

Some of the most poignant letters I receive are on behalf of the mentally ill being held in isolation like that man in California who spread feces over his body. The staff response to this was to put him in a bath so hot it boiled 30% of the skin off him.

Mentally ill prisoners are disproportionately confined in sensory deprivation settings. The isolated mentally ill suffer cruelly, with many decompensating. I have a Master’s in Social Work, and in thirty years have treated hundreds of ex-prisoners for symptoms of
post traumatic stress. Once released, the prognosis for those who have lived in long term isolation is difficult.

I’ve had the good fortune, over the years to form some remarkable relationships with front line officers, teachers, mental health workers, administrators and other members of departments of corrections. I’ve had the privilege of being able to voice my concerns candidly with all my biases showing. In one very recent dialogue, a NJ correctional officer talked to me at length about his experiences working in an isolation unit. He said that he felt personally safer when the movement of prisoners was controlled, saying, “There is very little you can give to isolation prisoners, except to check on them regularly, to let them hear a voice and to know that I’m there and that I know they are there.”

He talked about the about the stress of working in a control unit environment. He talked about friends going on stress leave, willfully taking smaller pensions. He said that the attitude of many of the prisoners was that “you can’t do anything else to me” and that people in isolation units with that attitude were often agitated or enraged. “When I see a human being who is reduced to throwing feces and urine, it wears me down. I believe there is a place for isolation, but I am breathing the same canned air, sitting under the same fluorescent lights, listening to the same noises. I don’t believe this is good for the officers or good for the inmates. It’s too much for both. You can’t leave someone in a cage month after month for the duration of their sentence”. This particular 20 year officer served in Viet Nam. He went on to talk about seeing symptoms of madness in people who were POW’s there, going on to say that “there’s no difference in what was done there and what we are doing in long term isolation here”.

Over the years the testimonies which come in my mail each day, have rocked my soul. The voices haunt me. I’ve come to believe that departments of correction are more than a set of institutions, they are also a state of mind. In May of 2000, the United Nations Committee on Torture cited the “excessively harsh regime” of supermax prisons as violations of that treaty, adding that such violations are widespread in the United States. The UN Human Rights Commission has specified that “prolonged solitary confinement” is prohibited as a form of torture.

The testimonies I’ve heard for thirty years have implications for all of us. In a system where 95% of prisoners return to our communities, the impact of these practices is felt beyond prisons. To take away someone’s civil rights is something we can and should debate regularly as a society. To take away someone’s human rights isn’t negotiable.

You are breaking down the wall of silence that has been built around prisons. The AFSC is grateful to the Commissioners for your willingness to listen to these voices. Thank you.