Survivors Speak

Prisoner Testimonies of Torture in United States Prisons and Jails

A Shadow Report Submitted for the November 2014 Review of the United States by the Committee Against Torture
I. Reporting organization

The American Friends Service Committee (AFSC) is a Quaker faith based organization that promotes lasting peace with justice, as a practical expression of faith in action. AFSC’s interest in prison reform is strongly influenced by Quaker (Religious Society of Friends) activism addressing prison conditions as informed by the imprisonment of Friends for their beliefs and actions in the 17th and 18th centuries.

For over three decades AFSC has spoken out on behalf of prisoners, whose voices are all too frequently silenced. We have received thousands of calls and letters of testimony of an increasingly disturbing nature from prisoners and their families about conditions in prison that fail to honor the Light in each of us. Drawing on continuing spiritual insights and working with people of many backgrounds, we nurture the seeds of change and respect for human life that transform social relations and systems. AFSC works to end mass incarceration, improve conditions for people who are in prison, stop prison privatization, and promote a reconciliation and healing approach to criminal justice issues.

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I. Executive summary

The popular narrative of living in the United States is one of prosperity, equality, and opportunity. America is seen as a nation where everyone has the right to life, liberty, and freedom. While that may be true for some privileged segments of society many Americans are prevented from fully realizing these rights because they are in the custody of the U.S. government.

At the close of 2012 over 2.2 million adults\(^1\) were held in prisons and jails\(^2\), leading the world in incarceration rates.\(^3\) Why is this the case? Deeply flawed policies focusing on punishment – not healing or rehabilitation – have created a pipeline through which economically disadvantaged populations are funneled into prisons and jails. Incarcerated individuals are frequently exposed to deplorable, cruel, and dangerous conditions of confinement that no human being should experience.

The list of abuses committed against U.S. prisoners is long and deeply distressing: sexual violence, humiliation, unsanitary conditions, extreme temperatures, insufficiently nutritious food, inadequate medical care, isolation, psychological torture, racism, chemical abuse and disproportionate uses of force. These are just a sample of experiences you will read about in these first-hand accounts from individuals living in jails and prisons throughout the United States.

Other civil society shadow reports addressing corrections conditions feature legal analysis, data illustrating the prevalence of ill treatment committed against prisoners and insights from experts. This shadow report supplements those crucial examinations by bringing the human experience to bear. Statistics are helpful in understanding the ways in which the U.S. prison system is fundamentally broken. Yet even the best charts are unable to fully convey the reality of what it is like to live through breaches of CAT obligations. These are their testimonials – verbatim – of inhuman conditions under which they are held, abuses that irrevocably change their lives. The details are difficult to read; some of the language is crude and graphic. All are compelling narratives.

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\(^2\) The U.S. Bureau of Justice Statistics outlines the distinction between “jails” and “prisons” in the United States: “Jails are locally-operated, short term facilities that hold inmates awaiting trial or sentencing or both, and inmates sentenced to a term of less than 1 year, typically misdemeanants. Prisons are long term facilities run by the state or the federal government and typically hold felons and inmates with sentences of more than 1 year. Definitions may vary by state.” For more information please visit [http://www.bjs.gov/index.cfm?ty=qa&iid=322](http://www.bjs.gov/index.cfm?ty=qa&iid=322).

\(^3\) Sentencing Project, *supra* n. 1.
II. Questions from List Of Issues

Articles 1 and 4

Q2: Please clarify the State party’s position with regard to its understanding of acts of psychological torture, prohibited by the Convention. Does the State party recognize a wider category of acts which cause severe mental suffering, irrespective of their prolongation or its duration, as acts of psychological torture prohibited by the Convention?

Article 16

Q32: Please provide information on steps taken to:

(a) Prevent and punish violence and abuse of women, in particular women belonging to racial, ethnic and national minorities. Do these measures include providing specific training for those working within the criminal justice system and raising awareness about the mechanisms and procedures provided for in national legislation on racism and discrimination?

(c) Ensure that reports of violence against women are independently, promptly and thoroughly investigated, and that perpetrators are prosecuted and appropriately punished.

Q33: In light of the Committee’s previous concluding observations, please elaborate on the measures adopted by the State party to ensure that women in detention are treated in conformity with international standards, as well as on the implementation of these measures (para. 33). Furthermore, please provide information on the impact and effectiveness of these measures in reducing cases of ill-treatment of detained women.

Q37: Please describe steps taken to improve the extremely harsh regime imposed on detainees in “super-maximum security prisons”, in particular the practice of prolonged isolation.4

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III. Health care

The U.S. government obligation to prohibit torture encompasses third party actors, such as doctors and medical personnel in centers of confinement.\(^5\) Prisoners commonly report inadequate health care conditions that include significant delays in accessing medical treatment, medical personnel engaging in treatments for which they have not received adequate training, denials of prescription medications, and humiliating treatment by health care staff. Regrettably, prisoners have no recourse when medical treatment is requested but withheld. In the most serious cases, failing to secure timely medical attention can result in irreversible harm, and at times, death.

“I suffer from a rare form of benign tumors called Aggressive Fibromatosis… At my sentencing my primary care physician Timothy McBride testified that without proper medical care my health would deteriorate and could eventually lead to death if I was forced to do a lengthy sentence… I was sent to USP Big Sandy in Inez, KY. While there I continuously complained of a tumor in my chest and the Avascular Necrosis in the left head of the humerus… It took 14 months from the time I first reported these tumors until they were finally removed… I had a clinic with prison physician Dr. Roger Jones. On this date I reported another knot in my chest… If I’m forced to stay here and not sent to a proper federal medical center I may not survive those 8 years.” – M.B., USP Terre Haute, Terre Haute, IN, 2014\(^6\)

“Oh September 2, 2013, I witnessed two inmates being sprayed with chemical agents, both mentally ill, in solitary confinement, after their water supplies were shut off, for requesting to speak with medical- one did try to commit suicide the next day by cutting his wrist… Guards shut off the entire pod’s water supply and when I questioned this I was sprayed with chemical weapons and left in that state for 40-50 mins with only toilet water left in the bowl to help wash my face and body with. As I remained in pain and pleaded for help guards threatened to shoot me with a 37 mm riot control gun. I was securely locked inside a single man cell the whole time too as I was sprayed, etc. I did sustain first degree chemical burns from the amount of spray and the length of time it covered my body.” – F.D., Mount Olive Correctional Complex, Mt. Olive, WV, 2014\(^7\)

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\(^6\) Letter from M.B. to American Friends Service Committee (2014).

\(^7\) Letter from F.D. to American Friends Service Committee (2014).
“Over the years that I have been here many people have died here that had gone over a month without their heart medications. It is a shame that I and many others in here cannot get any medical treatment for our medical problems. The infirmary nurses are fond of saying ‘you are not worth the cost.’” – R.K., Cummins Unit, Grady, AR, 2014

“In January 2014, without being seen by any medical person, APN Griswold discontinued my Propranolol 20 mg. Noteworthily, [sic] at that time, the Unit did not have an actual doctor assigned to it. According to a Physician’s Desk Reference, a beta blocker, such as Propranolol, must not be stopped suddenly as I was because there can be severe medical complications (e.g. a heart attack). In February/March of 2014 an inmate laid in the infirmary complaining of severe pains on his right side. They did not send him out to a hospital but let him lay in the infirmary. There he died of appendicitis. In April of 2014 inmate Eugene Lilly went to the infirmary complaining of chest pains. They gave him aspirin and sent him to his barracks. He went to his barracks, laid down for a nap and died. Two nurses were fired for falsification of records. In May of 2014 inmate Ridling fell out in the exercise yard. Infirmary staff finally responded, however, it was inmates who brought him back from his heart attack. He was taken to the infirmary and there he died.” – J.G., Cummins Unit, Grady, AR, 2014

“One guy was in the infirmary here at LCF not long ago and as he fell to the floor in his cell, clutching his chest in severe pain of a heart attack- nurse Suzy told him to shut up, quit whining, and get off of the floor and up on his bunk. The poor chap died on the spot, right then and there- due directly to nurse Suzy’s neglect.” – T.T., Lansing Correctional Facility, Lansing, KS, 2014

“I’ve had serious mental illness since childhood, ‘bipolar disorder’ and behavioral problems, ‘intermittent explosive disorder’ and I’ve got intellectual functioning disorder! As well as chronic seizures, grand mal seizures...my mental illness went 100% untreated for my first couple years in prison! Which caused me to be put into confinement...I’ve been in ‘strip cells’ with nothing but a steel bunk in the

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9 Advance Practice Nurse
10 Letter from J.G. to American Friends Service Committee (2014).
middle of winter and no heat in the cell house and had the officers spray water in my cell and on myself, and I would stay like that for up to 10-12 days at times! With the whole cell having a thin layer of frost! – B.B., Tamms Correctional Center, Tamms, IL, 2010\textsuperscript{12}
IV. Inhuman, cruel and degrading treatment

Despite the U.S. Constitutional prohibition on cruel and unusual punishment\textsuperscript{13} and obligations under CAT to ban cruel, inhuman and degrading treatment\textsuperscript{14} abuses against prisoners in the custody of the U.S. government are all too frequent. The myriad of abuses falling within the scope of CAT Article 16 are diverse in nature, yet all fall within the scope of State obligation to prevent torture, as “conditions that give rise to ill-treatment frequently facilitate torture.”\textsuperscript{15}

Many of the testimonies AFSC receives document cruel acts committed by prison and jail staff. A culture of impunity and an “us versus them” mentality of prison/jail staff create an environment ripe for prisoner abuse.

Prisoners frequently report denials of food and water, forced nudity, unsanitary confinement conditions, inadequate nutrition, and use of racial and ethnic slurs by guards. Regardless of the origins and classification of the prohibited acts, the consequences to victims are the same: dehumanization and trauma.

A. Concerns about confinement conditions

“I have to beg for water and food. We are being killed slowly. If you were to come here you would find us in this “dry cell” naked, cold and hungry. We are being cut off from all avenues of recourse. I was removed from special needs and placed here. Please can you get somebody, anybody to get us out of these torture chambers? We are doing nothing wrong and have no intention of doing so. I’m having serious problems with the staff and administration here. I’m getting threatened to be physically assaulted by staff as well as other inmates, I don’t eat much either, this started after I filed my lawsuit. I don’t feel safe, I don’t eat or sleep, nothing. The staff wants me to withdraw my complaint. They won’t even give me paper to write on any more. It’s two other people on this Unit scared for their lives due to staff misconduct and misinformation. They will kill us.” – W.T., New Jersey State Prison, Trenton, NJ, 2014\textsuperscript{16}

“Staph infection, scabies, spider bites, TB, hepatitis (A, B, C) is present among the brothers... I’ve witnessed CO\textsuperscript{17}’s beating other incarcerated citizens unjustly.” – K.S., William E. Donaldson Facility, Bessemer, AL, 2014\textsuperscript{18}

\textsuperscript{13} U.S. Const. amend. VIII.
\textsuperscript{14} Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, (December 10, 1984), General Assembly Resolution 39/46.
\textsuperscript{15} Id. at 2,¶ 3.
\textsuperscript{16} Letter from W.T to American Friends Service Committee (2014).
\textsuperscript{17} Corrections Officers
\textsuperscript{18} Letter from K.S. to American Friends Service Committee (2014).
“It’s 5 of us back here and our cell has feces, bug/insect infested, toilet bowl filthy, feces on door and walls, showers are extremely hot, showers are bug infested [and] unclean, cold food, locked in cell 24 hours 7 days a week, no yard-calls at all, not allowed to buy hygiene off store, insect and bug infested vents of heat in rooms that give off a distinctive smell, very few cell clean outs, and no cleansing just straightening up by cart team and etc.” – X.C., Hayes State Prison, Trion, GA, 2014

“First off I’m in Segregation Lockdown 23 hours a day… The officials here commonly use chemical agents on inmates with documented asthma then leave you in your cell naked, no property at all, no blankets, sheets, or mattress for 24 hours and no shower or soap to wash off the tear gas or pepper spray. Just last summer in 2013 an inmate named Wolverton, I think, here the ECB High Security Seg building died of chemical agents. He was left on his cell floor covered in feces, he had a colostomy bag, and he was found dead the next day after several counts… We are woken up at every count, every 1 to 2 hours round the clock for count. You can never sleep more than 2 hours at a time.” – J.W., Clements Unit, Amarillo, TX, 2014

“We are forced to be totally naked in front of staff constantly as well as other inmates-forced to be naked in front of them when we dress, wash, do bodily functions… I had Nurse Fleming and Sr. Champman on 6-22-14 smear feces inside a nasal medication and laugh ‘he just blew shit up his nose’” – C.G., State Correctional Institution Greene, Waynesburg, PA, 2014

“My friend Barry begged and pleaded to have the lights turned out in his room. Officers sadistically laughed at the suffering they caused. Barry tore out his own eyes so he could get some sleep. They all laughed at him and abused him greater. Later – he killed himself.” -C.P., FMC Devens, Ayer, MD, 2010

“In this housing unit the windows are welded shut… They had one fire and used CO2 gas twice. The fire, [sic] we were taken out one by one and when they sprayed the gas we went nowhere… it made a lot of guys feel sick including myself. And there is no fire

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19 Letter from X.C. to American Friends Service Committee (2014).
20 Expansion Cell Blocks
21 Letter from J.W. to American Friends Service Committee (2014).
22 Letter from C.G. to American Friends Service Committee (2014).
suppression in this unit so we were forced to breath [sic] in smoke because windows don't open.” – T.M., SCI Frackville, Frackville, PA, 2014

B. Degrading and cruel acts committed by jail and prison staff

“As I was kneeling down to submit to leg restraints, CO25 Baker grabbed me around my neck in a choke hold position and pulled me, attempting to get me into the cell out of the view of cameras and witnesses… still having me in a choke hold position, slammed my face and forehead into the ground, causing severe excruciating pain and a brief blackout. While I was on the floor, CO26 Best struck me forcefully in the testicles and CO27 Baker struck me in the head with this hand… The other unknown CO28 twisted my leg and CO29 Pashel stomped on my knee… I attempted suicide by trying to hang myself and I was found by CO30 Godley and Pashel, hanging with a [sic] pants around my neck. After spraying me with chemical agent … I was then placed in cell 1.A.130 without being given a shower to wash off the chemical agents. I was made to walk naked all the way to cell 130. In addition the cell was filthy and had fecal matter smeared on the walls and floor. I was left in this cell for three days without being allowed to wash off the chemical agents… They did this one more time. Then they picked me up and carried me to the cell I was assigned to, all the while tormenting me with racial slurs such as “we should have hit this piñata harder” and “I think we cracked this taco shell.” – C.M., Crossroads Correctional Center, Cameron, MO, 2014

“A white guy that came into the trailer at 12 a.m. drunk with a distinct odor to his body, he was yelling at us, calling us dumb ass niggers for not eating… I still have nightmares from my experiences and I still live with the fear of being sent back there and beat or killed just for being black.” – M.S., South Woods State Prison, Bridgeton, NJ, 2014

“I’ve witnessed an inmate get beat up by a gang of officers for allegedly sticking his mirror out his cell to look at a nurse. He was sent to a hospital where he died. I’ve witnessed an inmate get denied medication for his heart, threatened by an officer if he didn’t stop complaining, and returned to his cell. He died in his sleep that very night. Just recently I witnessed an officer physically abuse an inmate during a routine pat frisk. When the inmate fought back, at least twelve other officers came running to restrain him, and then kick him while he lay on the floor with handcuffs on. The sergeant was

24 Letter from T.M. to American Friends Service Committee (2014).
25 Corrections Officer
26 Corrections Officer
27 Corrections Officer
28 Corrections Officer
29 Corrections Officer
30 Corrections Officer
31 Letter from C.M. to American Friends Service Committee (2014).
32 Letter from M.S. to American Friends Service Committee (2014).
overheard yelling, “Break his arm!” The inmate went into a coma.” – Anonymous, Sing Sing Correctional Facility, Ossining, NY, 2014

“On 11-26-12 Monday, at around 5:35 p.m., 3 C.O. brought me mattress. 1 of them pinned me to my bunk, punched me at least twice in right side of ribs, semi-choked me, while the other 2 watched… Afterwards, before lunch, 3 C.O. entered my cell again, pull me off bunk, punch on me, but intentionally avoid punching my face.” –G.E., Alfred Hughes Unit, Gatesville, TX, 2014

“The lead building seven officer was not satisfied with the normal squat and cough procedure and decided that he wanted me to “spread my cheeks” with his smirk on his face so I simply stood my ground and looked at him like he was a pile of mule excreta so he pulled out his MK 9 oleo resin capsicum spray and emptied it in my face where I stood passively. However I withstood stubbornly the effects of the officer’s MK 9 each officer in succession and [they] emptied a total of 4 MK 9 canisters into my face and due only to my glasses the substance did not get into my eyes. This enraged the officer and he then decided to pull his expandable baton to hit me. I was cuffed and shackled and carried to the patio with a canvass “spit bag” over my head even though no one had been spit on but I had a head and face full of “orange crush” MK 9 which the canvass bag held inside. While on the patio a water hose was directed at the canvass bag on my head and I being handcuffed. Water and canvass over one’s head was nothing nice. This was the CDCR’s new form of torturous waterboarding without the board. I could not breath through the pepper spray and water mixing on canvass bag over my head and if not for the arrival of another supervisory staff so one of the facility S+E’s removed the bag and I was then able to breath.” –B.B., Wasco State Prison, Wasco, CA, 2014

“[Officers] locked me in solitary confinement for 10 days handcuffed and shackled to a metal bed. During that time they would extinguish their cigarette butts on my body and flip hot ashes in my face and eyes and place meal trays just out of reach. Once I yelled for water to drink. The officer rammed the nozzle of a chemical fire extinguisher into my rectum and flooded my insides with liquid and chemicals that caused me to scream with agony. Another officer told me to shut up or he would kill me and used his boot to kick me in the head...” –C.P., FMC Devens, Ayer, MD, 2010

33 Letter from an anonymous prisoner to American Friends Service Committee (2014).
34 Corrections Officer
35 Corrections Officer
37 California Department of Corrections and Rehabilitation
38 Security and Escort Officer
40 Kerness, supra n. 23, at 52-3.
V. Sexual violence

In early 2014 the Bureau of Justice Statistics, an agency of the U.S. Department of Justice, announced that reports of sexual abuse in prisons and jails increased significantly between 2007 and 2011. In 2011 alone, 8,763 prisoner claims of sexual abuse were filed with correctional administrators at their facility. Approximately 51 percent of reported sexual violence was committed by a prisoner against another prisoner, and around 49 percent of incidents were perpetrated by staff against a prisoner.

However, the statistics change significantly when prisoners are surveyed directly about sexual violence they have experienced (as opposed to relying solely on reported incidents to examine rates of sexual abuse). In light of guard retaliation against prisoners who file complaints or may consider doing so, it is unsurprising that surveys indicate far greater rates of sexual abuse incidents than what official accounts suggest. These surveys show that during 2011 – 2012, 30,490 acts of prisoner-on-prisoner sexual violence occurred and over 47,300 incidents involved guard-on-prisoner abuse.

Sadly, the true rates of abuse is likely higher than what these surveys indicate given the level of fear of reprisals prisoners experience. Regardless of who perpetrated the cruel act, Article 16 of the CAT obligates the U.S. government to protect all those in their custody from inhuman and degrading acts.

A. Abuses committed by prison and jail personnel

“In or about April 2012, Former Detention Center Officer Sherrie Brown-Braswell began to sexually assault and demand sexual acts from me which were non-consensual and against my will. Braswell threatened me with physical abuse should I resist her sexual assaults or report this activity to another employee. Braswell continued the sexually assaults and threats until approximately November 2012… This is humiliating considering the fact I was raped at the Detention Center.” – S.F., Union County Jail, Elizabeth, NJ, 2014

“We [women raped by prison/jail staff] are constantly given false write ups and put in segregation on the littlest things… because of my RV5 rating [indicating that the prisoner has had sexual contact with an officer] another officer, as he stated, ‘you will never tell

42 Id.
43 Id.
44 Please refer to section VII on page X.
46 Letter from S.F. to American Friends Service Committee (2014).
again since you got screwed so bad by CDOC47 you learned your lesson.’ Then he forced me to perform. I had no choice, when one is grabbed around the neck and breathing difficult it is easier to comply and besides I learned that if you resist you get broken body parts and I can’t take any more of them. So I did as required. But my friend is still going through it and needs help. This RV5 rating makes you open to all who want to get you…it never stops and once a cop has an inmate they become serial rapists because no one stops them.” - Anonymous, Colorado Dept. of Corrections, Pueblo, CO, 2010

B. Abuses committed by third party actors while in the custody of the U.S. government

“My cell mate started to beat me and stomp on me about October [sic] and he beat and rape me for 11 days and he broke both sides of my jaw, deformed my left ear and swole [sic] my nuts 2 times their normal size. Then he shoved a plastic spoon up my ass… Now I suffer from paranoia and constant fear of others and always feel that people are going to hurt me or kill me. Now I am a victim of rape and a brutal beating and suffer from Post-Traumatic Stress Disorder.” – D.K., Jester IV Unit, Richmond, TX, 2014

“In 2004 at the Smith Unit I was sexually assaulted by a Crip Gang Member… Upon receiving a custody change I was sent to the Robertson Unit in 2010 and upon being placed back into General Population where I was again harassed by the Mexican population and the Crip Gang members. I decided to pay the required extortion payments to a white Crip gang member for the protection I need to keep from harm. Then I was sexually assaulted and physically assaulted by this same Crip, and forced to perform sexually for his other Crip homeboys… They were going to place me back into the General Population of the Robertson Unit when I attempted to take my life… In October 2013 I started receiving sexual harassment in my workplace by a TDCJ Food Service Manager. It was ongoing until I had had enough and refused to continue to perform homosexual acts to shame me for his pleasure.” – W.K., Ellis Unit, Huntsville, TX, 2014

47 California Department of Corrections
48 Kerness, supra n. 23, at 75-6.
50 Texas Department of Criminal Justice
VI. Isolation and solitary confinement

Concerns surrounding the use of isolation are most frequently rooted in the long term psychological effects on survivors of solitary confinement. In the U.S. federal system isolation from the general prison population is classified as “special housing units” (SHU), of which there are two categories: administrative isolation is designed to remove the prisoner from the general population to keep that individual and/or the facility safe for prisoners and staff, whereas disciplinary segregation is used for punitive purposes. As you will read below, prisoners may find themselves in the SHU through no fault of their own or for minor rules infractions.

Prisoners in isolation report anger, bitterness, boredom, stress, losing a sense of reality, suicidal thoughts, difficulty concentrating, sensitivity to stimuli and hallucinations. Mental health experts found the rates of psychological and psychiatric issues were greater in populations exposed to solitary confinement than among those who had never been isolated. Those with a previous history of psychological problems placed in isolation “generally experience a significant deterioration of their condition” while in isolation.

Some survivors of solitary confinement have lost decades of their life and countless people suffer irreparable psychological harm due to U.S. government reliance on isolating people from meaningful human contact.

A. Conditions in solitary confinement

“I am currently in solitary confinement here at SCI Greene (since 2005). I have been repeatedly sexually harassed/threatened by guards here multiple times... Col Moore who is the leader of inmate brutality (brags about “finding” by himself 4 inmates hanging dead- has to be a record!) here at SCI Greene, repeatedly has threatened to hang me in my cell with a “black bag over my head” in front of the whole block... Also, Col Moore told the whole block that they needed a good “beat down” and he’d march us all to yard naked in our socks and he’d start sodomizing inmates... He threatened to “execute” all the long term inmates... I have already been assaulted by another C.O. for reporting abuses.” – C.G., State Correctional Institution Greene, Waynesburg, PA, 2014

52 28 CFR 541.23 (2010).
55 Id. at 451, 476.
56 Id. at 494.
57 Corrections Officer
58 Letter from C.G. to American Friends Service Committee (2014).
“None of the locks on cell doors work which resulted in the death of 5 prisoners in one month... We are supposed to get an hour a day outside our cell but that’s not true in Georgia. We gone [sic] months without seeing the sunlight with nothing to read but a bible. Prisoner suicide has tripled and it’s a medical fact that everyone has lost weight in this program.” – J.H., Hayes State Prison, Trion, GA, 2014

“They called it a 23 hour lockdown, but during the hour out, you had no other human contact- not even staff... As you are aware we are made to eat and sleep in a concrete and steel bathroom...In my particular case they never turned off the light. My window was covered on the outside with some type of white plastic so that we could not attempt any type of visual communication with whatever may have been out there.” – D.L., Plymouth County Correctional Facility, Plymouth, MA, 2014

“I have been in solitary since 1998. From 1998-2005 I was held on “High Risk Potential”... which in part includes zero staff and/or inmate contact, no group activities, no program participation, stripped of privileges (e.g. phone, canteen, contact visits, hobby craft, inter alia), and escorted with arm and leg restraints that have a dog leash attached to them during any movement. In 2005 I was removed from the “HRP” status and Disciplinary Segregation, but placed on Administrative Segregation. I'm still stripped of privileges, staff and/or inmate contact, no group activities, no program participation and in-cell confinement for 23 hours a day. I also only get to shower every 3 days.” – G.P., Ely State Prison, Ely, NV, 2014

“First and I feel most importantly is the solitary confinement at the last prison I was at. It is a dungeon like setting. Dark, no windows, you go weeks and months sometimes not seeing light. These are dangerous and unsupervised for the most part. Men are put in these cells with other men which fight and get injured without anyone knowing for hours on end... I have seen several times inmate getting beat while in cuffs or ganged up by a number of officers...” – C.M., Staton Correctional Center, Elmore, AL, 2014

“The conditions were very inhumane...hot, no working vents at all... stuffy and humid...my first cell bugs were biting me all over my body, when I said something about it they (the medical staff) played like I was crazy then finally after constant complaining they gave me Benadryl then moved me and still didn’t clean the cell. They had a light on all day that felt like a rotisserie lamp. It was hard to sleep because of the hot humid cells and constant bugs biting me all day and night...we had no cups to drink the brown colored water that came out of the sinks and toilets. There was constant screaming

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59 Letter from J.H. to American Friends Service Committee (2014).
60 Letter from D.L. to American Friends Service Committee (2014).
62 Letter from C.M. to American Friends Service Committee (2014).
yelling kicking and banging (with objects on doors to multiply the sound on the doors).” - A.S.A., SCI Dallas Restricted Housing Unit (confinement), Jackson Township, PA

B. Mental health and isolation

“I have basically been in seg housing unit and while being here the guards have tormented and encouraged me to cut myself and even specified jugular, carotid arteries, and have taunted me every time I have cut my wrist arteries, saying that I did not do it to their satisfaction and have threatened to beat me to a pulp.” – G.C., Wapun Correctional Institution, Wapun, WI, 2014

“It’s hard to explain the multitude of little factors that induce stress, anxiety, frustration, and depression...My best attempt to describe prolonged isolation in a supermax prison is that it’s like Chinese water torture. A single drop may not harm you but the millions of little drops of stress, anxiety, uncertainty, depression, and sorrow build up until you can begin to feel your mind breaking. I wish I could explain it better. Maybe then people could understand and wouldn’t allow this hell to continue.” – J.D., Tamms Correctional Center, Tamms IL (2009)

“I’ve been in the (hole) for three years and now so paranoid that I can’t be around people. I can’t even sleep in a cell with someone else even if I knew him all my life. I’ve tried every treatment, medication possible, no help...I am now so paranoid I can’t even be on the yards. Even in a lock cell, a lock shower, a lock rec cage, I’m still paranoid so how is it going to be on the streets when I am around others? I’ve really tried to work on it but nothing at all works even the medications. So all I ask is, is this place really need[ed].” – J.H., Federal Correctional Complex, Oakdale SMU, Oakdale, LA, 2010

“A suicide attempt. That’s what happened to me during my time in solitary. A serious, legitimate suicide attempt. I suffer of [sic] schizophrenia and while I was in segregation all I had to talk to was the voices in my head... While in solitary I was electrocuted due to faulty wiring. After that everything just went downhill for me. Every day I talked to delusions more and more. It got to the point that I did whatever the voices told me. Eventually I decided that was no way to live and chose to try to kill myself. I was found in my room passed out and cover [sic] in blood. The next morning I went right back into

63 Kerness, supra n. 23, at 11.
64 Segregation
65 Letter from G.C. to American Friends Service Committee (2014).
66 Kerness, supra n. 23, at 10-11.
67 Kerness, supra n. 23, at 9-10.
trying to kill myself as soon as [sic] woke up. I tried to kill myself by diving into a metal stool... I suffer of brain damage... If I would [sic] had daily conversations with other people, I would have not interacted with delusions. Delusions that led me to try to kill myself.” –D.A., Central New Mexico Correctional Facility, Los Lunas, NM, 2014

C. Life after isolation

“This term [in solitary confinement] I have been in a little over 4 years straight, but overall most of the past 15 years... After doing a substantial amount of time inside alone, then being released is shocking. It is a blast for a few days then the people, colors, sounds, touching, movement, kids, cars, and social interactions become way too much, kind of like over-stimulation of the senses, it gets really uncomfortable around everyone and everything, so much that it usually takes alcohol or drugs to 'feel' comfortable.” – R.T., Corcoran State Prison, Corcoran, CA, 2014

“Even now, six months out of the hole I still remain affected. I withdraw from social interaction/setting. I feel frustrated for no apparent reason. Possibly the most damaging aspect of segregation is the sense of powerlessness. You can yell, scream, report misconduct and abuse to prison officials to no avail.” B.S., Jefferson City Correctional Center, Jefferson City, MO, 2010

Kerness, supra n. 23, at 19.
VII. Political prisoners and Control Management Units

In the U.S. federal prison system Control Management Units (CMU) are distinctly different from all other confinement facilities, as they were “established to house inmates who, due to their current offense of conviction, offense conduct, or other verified information, require increased monitoring of communication with persons in the community in order to protect the safety, security and orderly operation of Bureau facilities, and protect the public.”

The most well-known CMU residents are those convicted of terrorism-related activities such as the men deemed responsible for the 1993 World Trade Center bombing, individuals convicted for the 1976, 1985, and 1996 hijacking cases, and at least one person convicted of providing material support to a terrorist organization.

Two CMU facilities are commonly referred to as “Little Gitmo” and “Guantanamo North” because, reminiscent of the U.S. Guantanamo Bay facility, two-thirds of the prisoners are Muslim (despite only representing six percent of the general federal prison population). In these facilities the use of solitary confinement is rampant, prisoners are exposed to constant surveillance and their ability to interact with others is severely restricted.

Today, CMUs house not just those serving time for terrorism-related convictions but others in social justice movements, who engage in prisoners’ rights advocacy, and who file grievances about their treatment while incarcerated, whose beliefs and ideology the U.S. seeks to track. Prisoners sent to CMUs are deemed security threats and thus are constantly observed of their actions, letters, emails, calls and visits. The uniting characteristic of these prisoners is not the nature of their conviction, but that the U.S. government fears they may recruit others to undertake “terrorist” or “criminal” acts.

CMUs rely heavily on extreme conditions of solitary confinement, isolate prisoners from the general population, and create conditions intentionally hindering their ability to communicate with the outside world.

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75 National Public Radio, supra n. 72.
76 National Public Radio, supra n. 72.
77 Center for Constitutional Rights, supra n. 74.
78 Center for Constitutional Rights, Communications Management Unit Factsheet, ccrjustice.org/cmu-factsheet (2013).
79 National Public Radio, supra n. 72.
80 Daniel McGowan, Court Documents Prove I was Sent to Communications Management Units (CMU) for my Political Speech, www.huffingtonpost.com/daniel-mcgowan/communication-management-units_b_2944580.html (April 2, 2013, 8:36AM).
81 National Public Radio, supra n. 72.
82 McGowan, supra n. 72.
Conditions in CMU are severe and disproportionate to the crime for which they were convicted. Prisoners are prohibited from physical contact with visitors, all communications are monitored, and prior to legal action taken prisoners were permitted only one 15 minute call per week.\textsuperscript{83} Access to programming, education, and job training is limited.\textsuperscript{84} Isolation, inability to interact with other humans in a meaningful way, not being told how long they may be in CMU\textsuperscript{85}, and limited visits from immediate family call into question the U.S. government compliance with CAT.

“This notice informs you of your transfer to a Federal Bureau of Prisons (Bureau) facility that allows greater management of your communication with persons in the community through more effective monitoring of your telephone use, written correspondence, and visiting. Your communication by these methods may be limited as necessary to allow effective monitoring. Your general conditions of confinement in this unit may also be restricted as necessary to provide greater management of your communications.” – Federal Bureau of Prisons, Notice to Inmate of Transfer to Communication Management Unit\textsuperscript{86}

“I learned why the Federal Bureau of Prisons (BOP) sent me to the CMU… In short, based on its disagreement with my political views, the government sent me to a prison unit from which it would be harder for me to be heard, serving as a punishment for my beliefs… What's also notable about the CMUs is who is sent there…many CMU prisoners were there because of their religion or in retaliation for their speech. – Daniel McGowan (2013)\textsuperscript{87}

“Inmate McGowan’s communications warrant heightened controls and review due to the fact that he was an organizer of the group; wrote communiques for ALF/ELF (Animal Liberation Front/Earth Liberation Front) actions; used coded communications during the commission of the offenses; participated in the recruitment of others into the group; espoused his anti-government beliefs verbally and in written communications… While incarcerated and through social correspondence and articles written for radical publications, inmate McGowan has attempted to unite the radical environmental and animal liberation movements.” – Leslie S. Smith, Chief, Counter Terrorism Unit (2008)\textsuperscript{88}

“So my question was, what government agency labeled me a terrorist? What terrorist offense did I commit against the American government or any American citizen? What evidence demonstrated my guilt? Why was I not afforded my constitutional right to a due

\textsuperscript{83} McGowan, supra, n. 76.
\textsuperscript{84} Center for Constitutional Rights, supra, n. 74.
\textsuperscript{86} Center for Constitutional Rights, supra, n. 71 at 8.
\textsuperscript{87} McGowan, supra n. 76.
process hearing?” – A.T., former prisoner in the Communications Management Unit, Terre Haute, IN (2011).89

“I’m being persecuted and discriminated against. You feel that my affiliation with the Black Liberation Army and the Anarchist Black Cross Foundation poses a problem… What concerns do [sic] Administration have with my political affiliation? In 2002, I was released into GP with the same affiliation.” – Ojore Lutalo, New Jersey State Prison (2008)90

“Your radical views and ability to influence others poses a threat to the orderly operation of this Institution… Your actions continue to pose a threat to the safety and security of any correctional facility.” – MCURC, New Jersey State Prison (2008)91

89 National Public Radio, supra n. 72.
91 New Jersey Department of Corrections Management Control Unit Review Committee, Notice of Classification Decision Routine Review for Ojore Lutalo (2008).
VIII. Psychological / “No Touch” torture

U.S. law includes a definition of “torture” accounting for non-physical acts, such as “prolonged mental harm caused by or resulting from...the administration or application, or threatened administration or application, of...procedures calculated to disrupt profoundly the senses or the personality.”

Prisoners experience this form of mental suffering through being shackled for excessive periods of time, stress positions, exposure to extreme temperatures and subjection to unrelenting light exposure. Psychological torture may not leave visible wounds and scars but the suffering experienced is equally cruel.

“I was being extradited from AR to WV and locked in the back of a van in a cage for 13 days straight by a private transport company called PTS (Prisoner Transport Services). 13 days (only 1 time day 8) was [sic] we allowed out the van to sleep and shower. The rest of the time we had to urinate, defecate, and vomit on ourselves, 8 of us in a 6 ft by 4 ft cage. Below freezing temps, the water was freezing inside with us, no heater, no medications, they gave everyone cigarettes to “stay calm.” Handcuffed, shackled, belly chained 13 days. 90+ mph the whole time my head was swollen up, it was so rough. I about died.” –M.T., Federal Corrections Institution, El Reno, El Rino, OK, 2014

“...For at least the next 67 days...I was literally chained to the metal bed frame in the middle of the cell, by a 3-4 foot section of heavy tow chain with defective shackles (no working safety locks) tethering me there for 24 hours a day. I was given perhaps at best six showers during this period of time and only three opportunities to change my clothing... the room temperature stayed at near freezing, and there were large fluorescent lights directly over the bed I was tethered to, that never turned off. When I complained to the Sheriff’s deputies, I was told there was no on/off switch for the...”

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93 Arizona
94 West Virginia
95 Letter from M.T. to American Friends Service Committee (2014).
lights in my cell and there were likewise no temperature controls accessible.” -M.D., New Jersey State Prison, Trenton, NJ, 201096

“I was stripped and handcuffed to a chain link fence in a freezing snow-ice storm for seven hours because I was ten minutes late to an appointment…I was sprayed with chemicals and a chemical fire extinguisher for having a Christian cross on the wall of my cell. I was handcuffed to a wall and sprayed with a high pressure fire hose…I was forced to stand on a foot stool while three officers handcuffed my hands above my head to a chain link fence and then the stool was removed to leave me dangling in the air for four hours…I was forced to stand in a telephone [booth] sized room for 27 hours without food, water, or toilet breaks…Five times I suffered a ‘hook up’ for arbitrary spiteful reasons. The hands are handcuffed and I am lifted up and the chain of the handcuffs are draped over a tall door so I am dangling with my feet off the floor. It takes less than five minutes to be agonizing. They leave you hooked up until unconsciousness, then let you drop to the floor by raking you off the door…” -C.P., FMC Devens, Ayer, MD, 201097

96 Kerness, supra n. 23, at 51.
97 Kerness, supra n. 23, at 52-3.
IX. Reprisals against prisoners for airing grievances

Accountability for inhumane treatment within centers of confinement is severely limited despite the prevalence of prisoner abuse. Complaint mechanisms are the primary means through which prisoners are able to air grievances about their treatment and to report abuses committed by guards. Recurring challenges for prisoners are facing threats and retaliation from guards after complaining about mistreatment, and/or when guards believe a prisoner may be inclined to do so. This atmosphere of fear is a significant hindrance to ensuring humane conditions and treatment, while at the same time perpetuating a climate of impunity for those responsible for rights violations.

“I tried to explain the cuffs were extremely too tight and that my hands were numb, he [Sgt. Broughton] laughed and stated something akin to “I thought you niggers were used to shackles by now”… He stated something akin to “you haven’t felt pain yet faggot Write another grievance against me and the next time I’ll stick my key up your black ass nigger”… As he locked the cage he again threatened me that “next time I’m going to say ‘stop resisting’ then slam your punkass on your head. So if you even think about writing this up or to report me to Lt. Mitchell again I’ll have my boys take care of your nigger faggot ass!” – T.D., Santa Rosa Correctional Institution, Milton, FL, 201498

“Other things multiple officers do is refuse to feed inmates if they find out a certain inmate filed a complaint step one grievance against them, they throw out outgoing mail, or which is really fucked up give a offender another person’s mail on purpose, people who can’t speak English are mostly victims of this bullshit deny them medical or jacking them for their food…The people here with rank are out of control…my point is yeah we’re in prison for breaking the law, but we’re still human beings and deserve to be respected as one especially if we don’t.” – R.Z., Estelle High Security Unit, Huntsville , TX 201099

“On 6/12/14 Thursday…Hyatt too k me to the floor and Wartanin started kicking me in the face on my left side and splitting my eye open and blood began to spill no the floor. Next he began on my right eye hitting me 3 times and began to spray my face with gas while saying, “this will teach you to write a grievance on me, little bitch!”… On 6/13/14 Friday Wing Officer Wartanin deprived me my lunch… On 6/14/14 Saturday Wartanin deprived me breakfast and ripped up 2 of my medical kites… Later C/O100 Clement deprived me lunch… On 6/15/14 Sunday Wartanin deprived me breakfast and lunch and influence [sic] RN101 Casper to deprive me morning and afternoon meds… On 6/16/14 Monday

99 Kerness, supra n. 23, at 49.
100 Correctional Officer
101 Registered Nurse
Wartanin deprived me lunch and unfluence [sic] RN\textsuperscript{102} to deprive me meds."—J.L., Baraga Correctional Facility, Baraga, MI, 2014\textsuperscript{103}

“Other acts of retaliation and abuse include: being shocked with an electric body immobilizer device; being forced into a restraint chair...[sic] and was neglected and left to live on the floor, and in very filthy and unsanitary conditions for approximately nine months; during this time I was tortured with a bright florescent light that stayed on for twenty four hours a day.” —S.R., Graterford Correctional Facility, Graterford, PA, 2010\textsuperscript{104}

“Five very big cowboys – correctional officers – took me to a special control unit, placed me in restraints and tortured me for over two hours to punish me for grievances and/or legal action on their friends and coworkers...they screwed their knuckles into my temples, bent my wrist backwards until the cartilage popped and cracked, pulled my neck back as far as they could without breaking anything, made me yell, scream, beg, cry, defecate/urinate due to the excruciating pain, for over two hours.” — J.E., Colorado State Penitentiary, Canon City, CO, 2010\textsuperscript{105}

\textsuperscript{102} Registered Nurse
\textsuperscript{103} Letter from J.L. to American Friends Service Committee (2014).
\textsuperscript{104} Kerness, supra n. 23, at 52.
\textsuperscript{105} Kerness, supra n. 23, at 53.
X. Conclusion

In its 2013 Periodic Report to the Committee on Torture, the U.S. government acknowledged its obligation to ban acts of torture, stating “(t)he absolute prohibition of torture is of fundamental importance to the United States.” A quote from U.S. President Barak Obama was included to further underscore the U.S. commitment to domestic and international laws on torture, “I can stand here today, as President of the United States, and say without exception or equivocation that we do not torture…”

Despite these assurances AFSC continues to have grave concerns that the U.S. government violates its CAT obligations to prevent and address acts of torture. Specifically, we believe the following Convention Against Torture Articles have been breached by the U.S. government while housing individuals in prisons and jails:

Article 10

- The U.S. breaches its adherence to Article 10 by permitting guard retaliation or threats of reprisal against prisoners who have or may file complaints of inhumane confinement conditions. This system of intimidation undermines the possibility of rectifying prior abuse and securing redress.

Article 16

- The State practice of delaying health care treatment to prisoners, even in the face of symptoms suggesting a medical emergency have resulted in permanent harm to prisoners, violating its Article 16 obligations to prevent cruel treatment.
- Denying prisoners access to clean water, providing inadequately nutritious food, permitting insect and pest infestations, failing to protect prisoners against disease, forced nudity and unsanitary conditions of confinement constitute violations of the Article 16 prohibition of inhuman and degrading acts.
- Prisoners are not shielded from cruel and degrading acts by guards while in confinement, such as excessive and unnecessary uses of force, being subjected to racial and ethnic slurs, and unrestrained use of chemical agents. In these ways the U.S. breaches Article 16.
- Failing to keep prisoners safe from degrading acts of sexual violence, especially at such appalling rates, constitutes U.S. noncompliance with its obligations under Article 16.
- The use of isolation for prolonged periods of time - that in some cases can span decades – is a torturous act causing severe mental suffering and psychological harm extending far beyond the period of time they are in solitary confinement. The U.S.

107 Id.
embrace of prolonged isolation is cruel and inhuman treatment violating its commitment to Article 16.

- The U.S. has violated Article 16 by allowing prisoners to be subjected to acts of psychological harm that rise to the level of torture. These Article 16 violations include stress positions, exposure to extreme temperatures, and constant light exposure.
Xi. Questions

Health care

1. Please explain how the State protects and provides for the unique needs of vulnerable populations in jails and prisons, particularly the mentally ill.

Inhuman, cruel and degrading treatment

1. Please explain the complaint procedure and process in place for prisoners who experience ill treatment by prison staff.
   a. Does that process include keeping the prisoner informed of the status of their claim?
   b. What remedies have been issued by higher authorities in regard to claims of abuse?
   c. How has the State changed its policies in response to claims of ill treatment that indicate systemic violations of prisoner rights?
2. What are the conditions under which prison and jail personnel are permitted to use force against a prisoner? How does the State monitor if force was used in appropriate situations and implemented in accordance with domestic and international laws?
3. How many prison or jail staff members have been reprimanded as a result of complaints filed for prisoner abuse?

Sexual violence

1. What systems are in place to prevent sexual violence perpetrated by guards as well as by other prisoners?
2. What procedures and services exist to ensure an effective response to allegations of sexual violence (including accessibility to support services for victims/survivors)?

Isolation and solitary confinement

1. Does the State anticipate developing and implementing uniform standards for the use, or restrictions on the use, of isolation?
2. What actions is the State taking to end the overuse of solitary confinement?
Political prisoners and control management units

1. Please explain how the State determines which prisoners are to be housed in control management units, given that thousands of prisoners fit the criteria outlined in your guidelines for possible CMU placement.

2. Control management unit personnel monitor the activities and communications of prisoners at all times. Yet extreme limitations on human contact are still in place. What is the rationale for restricting access to others given the heightened levels of supervision?

3. How do you respond to accusations that the State is using control management units to suppress criticisms of the U.S. government and expressions of free speech?

Psychological torture

1. Please explain the position of the State regarding acts designed to impose mental suffering, including practices that may rise to the level of psychological torture.

2. What training is provided to jail and prison personnel regarding non-physical acts that could result in mental suffering?

Reprisals against prisoners for airing grievances

1. What systems are in place to prevent and respond to reprisals against prisoners who make complaints?

2. How do the numbers of complaints of reprisals filed compare to the number of reprimands imposed on personnel?

3. How many prison and jail staff members were reprimanded for reprisals against prisoners who filed complaints about their treatment? What where their reprisals?
3.

**XII. Suggested concluding observations**

- Ratify the Optional Protocol to the Convention Against Torture.

- Removing a human being from their community, depriving them of human contact, denying them of stimuli and subjecting them to inhumane conditions is cruel. Treating others in this manner denies our shared humanity and fails to honor the Light present in each of us. The use of isolation / solitary confinement must be ended immediately.

- Provide conditions of confinement in jails and prisons that align with U.S. domestic laws, protect the U.S. Constitutional rights of prisoners, and are in accordance with international norms and obligations.

- The U.S. must permit international observers to enter and evaluate centers of confinement. For prisons/jails not under the direct control of the federal government, the U.S. government must actively engage states and localities to facilitate such access.

- Ensure that the Prison Rape Elimination Act of 2003 is immediately implemented in all confinement facilities nationwide to protect those entrusted to their care against sexual violence.

- Prison and jail personnel should only use the least restrictive response to avert harm to another prisoner or staff.

- Chemical agents should never be used in prisons and jails. Limitations on mobility and lack of ventilation significantly undermine the safety of all exposed to harmful agents.

- The State should honor its responsibility to keep those incarcerated safe from harm. This includes abuses at the hands of staff and guards, as well as violence perpetrated among prisoners. A robust monitoring system must be put into place to honor this obligation that also includes accountability mechanisms for all perpetrators of abuses.