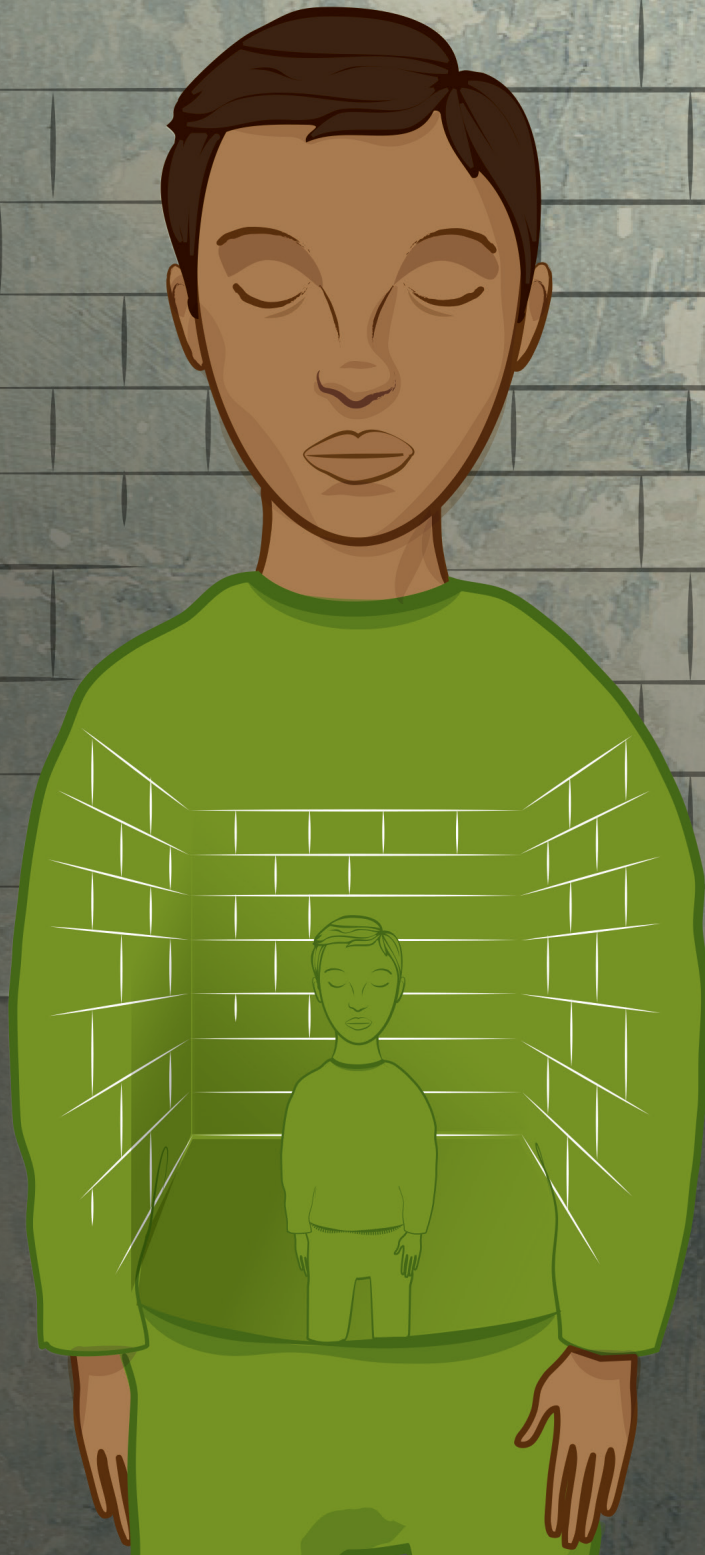


PRISON WITHIN PRISON

Voices of Women Held in Isolated Confinement in New York



“Not everyone is in solitary because they are bad. Any little thing and you can be put on keeplock, like just for speaking back to the officers even if you really didn’t say nothing wrong.”

“During breakfast in the mess hall pregnant women were a priority. Another woman gave me part of her breakfast. An officer rushed me to hurry up and move along. She knocked the sandwich out of my mouth and hand, and I reflexively threw [cold] coffee in her face. A group of officers threw me hard onto the mess hall table on my stomach. I was taken out and put in an isolation cell for four or five hours. The captain came to ask me what happened and told me I should have eaten faster. From this cell I was moved to

involuntary protective custody because the officer wanted to hurt me.”

“I got 30 days on keeplock for taking a bar of soap. The officer said I stole it and wrote me up. At the hearing I

explained that I saw it [the soap] and took it because I needed it, but I got a 30-day sentence, no time cuts. It was like, I was in for robbery, therefore, I must have stolen the soap. The hearings for solitary are a little too harsh. A warning would have been sufficient. If you didn’t stab or kill, why solitary? There are other ways to do things.”

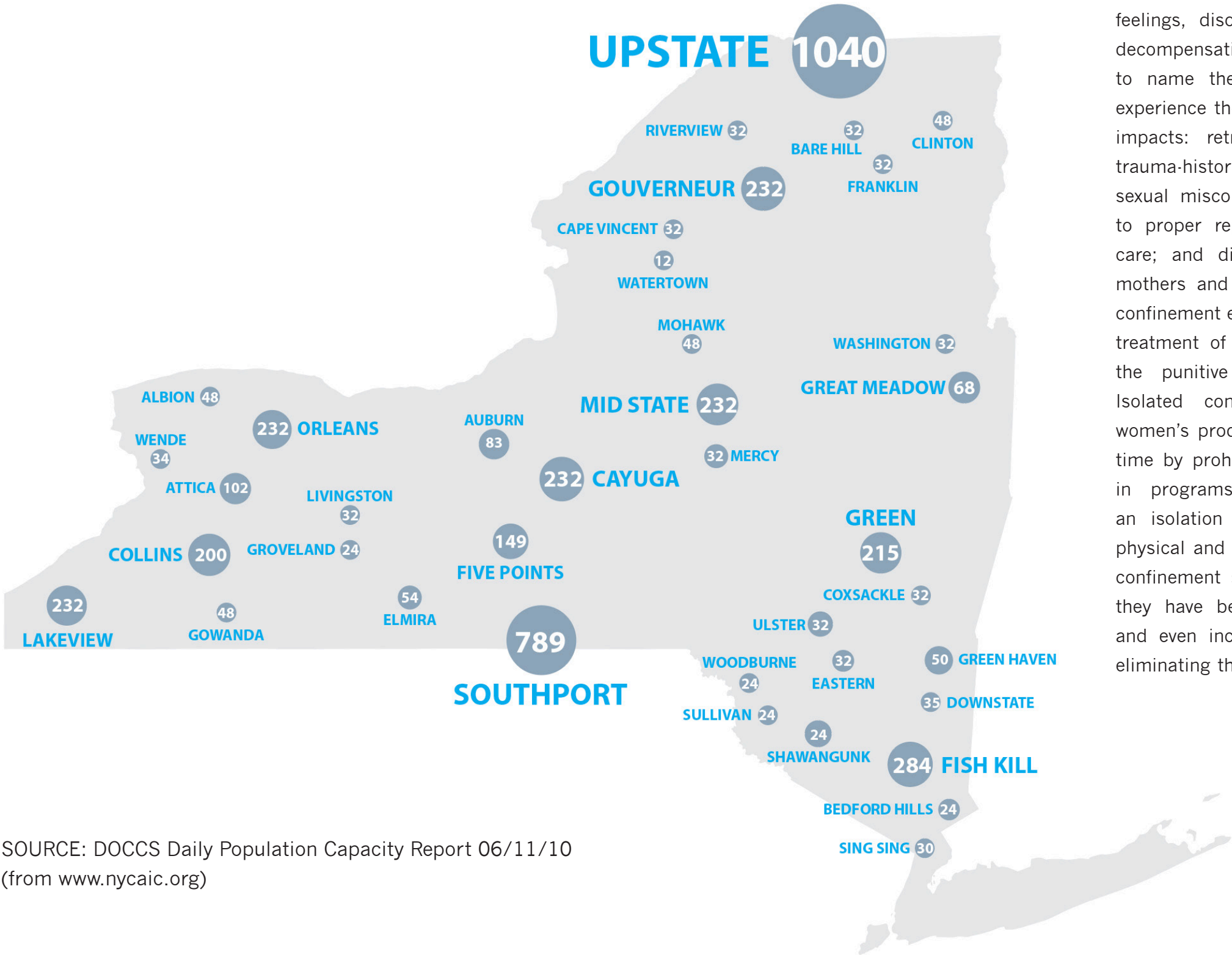
THE PROBLEM

In New York prisons and jails, isolated confinement sentences are imposed at high rates—approximately 4,000 are held in isolated confinement in New York prisons, and multitudes of others are held in isolated confinement in the jails.¹ When a person is isolated in prison or jail they are held for 23 or 24 hours a day in a cell the size of a large elevator and restricted in their contact with others and the outside world. They cannot participate in programs or receive packages, and their access to showers, telephone calls, and visits are limited.²

In New York’s women prisons, there are two types of isolated confinement. “SHU” (which stands for Special Housing Unit), is where a person is locked down in a SHU cell for 23 hours or 24 hours a day. SHU cells are usually in separate areas of the prison, such as a cellblock or a SHU building. Keeplock is somewhat less restrictive than SHU but still involves isolation 23 or 24 hours a day. On keeplock a person is confined to their own cell, dorm cube or in a cell on a special keeplock unit.³ In the New York prisons, women spend less time in keeplock (usually no more than 60 days), while they can spend months or years in SHU.⁴ At Rikers Island, a New York City jail complex on an island in the East River, the isolation unit is referred to as the “bing”. People with mental illness,

young people, pregnant women and the elderly are just some groups particularly vulnerable to the negative impacts of isolated confinement. The United Nations Special Rapporteur on Torture considers isolated confinement for more than 15 days a form of torture for any person because of the harmful mental, emotional and physical effects that prolonged isolated confinement has on people.⁵ Certainly, isolation can also exacerbate negative tendencies or behavior and, thus, is not healthy for any incarcerated person or the safety of the prison as a whole.⁶ A significant problem in New York is the habitual use of isolated confinement as a disciplinary response to non-violent behavioral issues and prison/jail rule violations.⁷

Map of SHU Cells Across New York State



SOURCE: DOCCS Daily Population Capacity Report 06/11/10
(from www.nycaic.org)

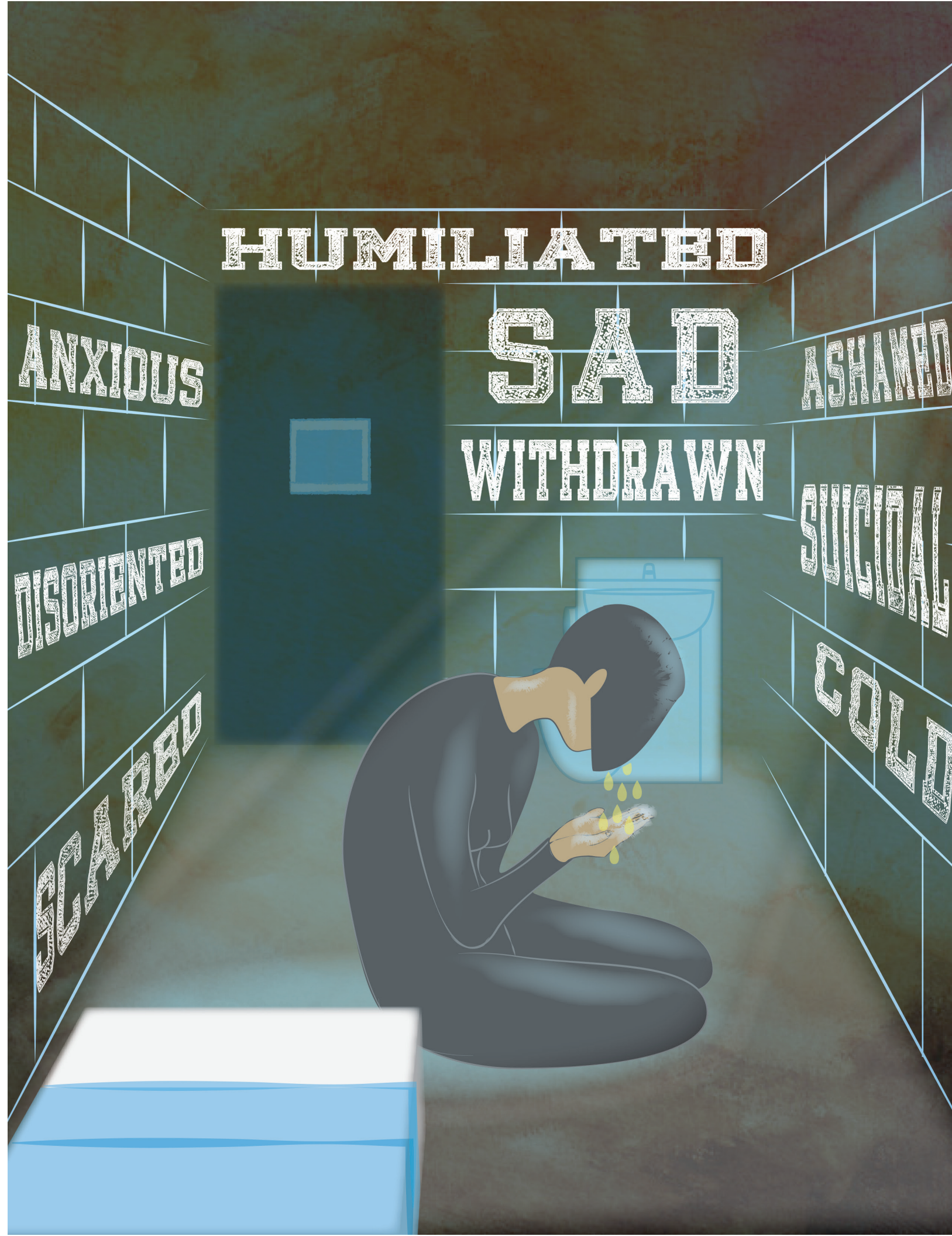
The specific, negative impact resulting from isolated confinement is well known: fear, anxiety, depression, suicidal feelings, disorientation, emotional strain, decompensation, and sleep deprivation, to name the most common.⁸ Women experience these and other gender-specific impacts: retraumatization due to their trauma-histories; vulnerability to staff sexual misconduct; limitations on access to proper reproductive and other health care; and disruptions in their roles as mothers and primary caregivers. Isolated confinement exacerbates the dehumanizing treatment of women who already endure the punitive impact of incarceration.⁹ Isolated confinement also undermines women's productive use of prison and jail time by prohibiting women's participation in programs and work while serving an isolation sentence. As a result, the physical and emotional impact of isolated confinement stays with women long after they have been released from isolation, and even incarceration. The solution to eliminating the negative impact of isolated

confinement on all people is to replace it with more humane and effective alternatives such as interventions and therapies to address people's core behaviors. Formerly incarcerated people, family members of currently incarcerated people, concerned community members, advocates, and organizations are challenging the use of isolated confinement in New York correctional facilities. More information about the #HALTsolitary campaign is included at the end.

What follows is a collection of oral and visual observations from 20 women about their experiences being held in isolated confinement in New York's all-women prisons and Rikers Island and their views for alternatives to this practice. A subset of the interviewees worked with a graphic designer, exploring the sensory aspects of their experiences that they want the public to understand and engaging in design concept work to create the images that accompany their experiences.

“If you called the officers, they didn’t answer. When I was in pain, they acted like I was lying and not important. There was no eye contact. I had to call over and over for a shower and then put on the same clothes for the ten days. The officers are cold.”

“I was at Bedford Hills on a violation. I had just given birth two months before. I had a bladder infection and medical permission to use the bathroom whenever I needed. I asked the officer if I could use the bathroom and she said no because someone was in there. I went anyway. It happened during count time and they take count time seriously. I got a ticket for not complying with a direct order. The officer wasn’t one of the regulars and didn’t let me explain. She also said I spoke to her in a bad manner. I got ten days in SHU.”



OFFICERS/STAFF BEHAVIOR

“I experienced solitary twice. One time, at Beacon,¹⁰ I was feeling depressed because my daughter was getting married and I was locked up. My boyfriend at the time was very supportive and I was on the phone with him. When I got off an officer asked me what was wrong. She asked me twice and both times I didn’t answer. Then she ordered me to say what was wrong. I pushed back on this. It was my phone time and I said so. She ordered me to go back to my bunk, said I could not go to my job in the mess hall, and she wrote me up – a horrendous ticket filled with lies. It was three or four pages long. Beacon was a low-status facility, so it didn’t have lock. I was sent to a closed unit with two other incarcerated people assigned to watch me. Then I was sent to Taconic where I was put on keeplock. From Taconic, I was sent to Albion to complete my sentence. I had another experience with solitary there—I was placed on keeplock for one week for refusing to be pat frisked by a male officer. I prevailed in my hearing and was released back to general population. While at Albion I told a nurse that I was depressed and she sent me to a psychiatrist who wanted to prescribe meds. I refused because I had experience with recovery while home. I was threatened with lock for refusing meds. I was also sent to see the therapist. She was good, but her time was limited. She suggested that I journal and that we talk about my entries when I was able to see her. I did this consistently and it helped a lot. We need more advocacy on how to make it so that women are heard. If a woman wants to talk, is trying to get talk therapy, and is told her only option is medication, this is a shut down.”

“Requesting sick call was terrible. If we wanted sick call, they came to you and they only wanted to give you “medicine D”—cough syrup. We didn’t get proper medical attention. I put in for sick call twice. When I got the medication I needed, I held it just in case I needed it later. I made sure I had everything I needed while on lock because the medical was inconsistent in general population and in solitary.”

HEALTH, MENTAL HEALTH AND TRAUMA “I have a mental health diagnosis. When I was at Bedford, I had a psychotic break. My friend was in SHU. She had a mental illness and killed herself—she was suicidal and they didn’t watch her, even though she was telling them she wanted to hurt herself. So I tried to kill myself too. I was put in SHU for a week for protective reasons. It was bad. They took my dentures, my sweatsuits and some other personal items. I had a hearing and got a two-month keeplock sentence. I was allowed to stay on my housing unit. The officers treated me pretty good. My friends were allowed to come by and sit and talk and offer support. That was better. As far as medical, I saw psych because of my issues and flashbacks, and a trauma program could come by and talk to me. The person keeping my children never let them come to visit—they felt it was bad for them. I could and did reach out to my children though. Once I was released from prison I never talked about my experience on lock. I hid it, blocked it out, because of what happened to my friend. It messed me up mentally, especially because she was telling them things about how she wanted to hurt herself.”

“One time I signed up due to stomach pains that were making me cry. The nurse said it was gas and gave me a stool softener even though I told her this was not the problem. It turns out there was a cyst on my ovary. I also had a headache for six days for which I was given Tylenol. When I got out of solitary, I was sent to an outside doctor. It turned out to be chronic migraines.”

FAMILY TIES “At Bedford Hills I was placed on keeplock for leaving the nursery ‘unauthorized’. The nursery had a black binder with the rules we had to follow. If your child was sleeping and you notified someone nearby, you could leave your room. I did this, first to go to the other end of the nursery and then to the library across the building to return a book. I asked for and received a pass and the women nearby were informed. When I returned, an officer was there saying I was unauthorized to leave. When I said it’s in the binder, he said no, that he took it out. I was put on lock with my child and they took my ID. This was a Friday. I had a visit with my mom on Saturday. When I went down to see her I had to tell her what was going on because I had a hearing on Monday or Tuesday. Being on lock had a bad effect on me because of the real possibility that my child could be taken away. The civilian nursery staff person was a lawyer and tried to help me as much as possible, but the administration wouldn’t drop the charge. I was really scared. Everyone knew I was concerned about having my child sent out of Bedford without saying goodbye. I was walking on egg shells, nervous about what else could happen because I’d seen it with others.”

“I got allotted one call a week in solitary. I couldn’t talk to my daughter because I didn’t know when the phone call would be allowed. It might have been while she was in school. I also didn’t know when a call was going to end.”

“My ticket was for sleeping in the bed with my daughter. I was removed from the nursery to general population and put on keeplock. Because I was on lock, when my children visited, we couldn’t go to the play areas with the others.”

“Visiting was only allowed every seven days at Bedford if you were in SHU. My family came to see me sometimes. However, they were deterred because of how long it took to process. This was hard on them and on me, so I told my family not to bother with visits—just wait until I was out of SHU.”

“My first time in solitary at Taconic, I was angry, depressed and mad as hell. I felt helpless and cut off from the world. My second time in solitary at Albion, I used the time for the positive—study and researching the things that I wanted to do.”



COPING “I initiated a fight. On the housing unit, everyone who knew the other person started to threaten me. I had a hearing and was sentenced to 20 days. My stuff was packed and I was sent to solitary. I was sent first, then the other person. It was the only time I had been alone in my entire life. The first couple of days I cried a lot, but I soon created a routine—I would exercise before my shower. The walls had stuff like ‘Jesus was here.’ Showering was the most degrading. You needed to be handcuffed through the slot and then walked to the shower. There was a gate from the floor to the ceiling at the shower, so you could be seen naked in front of people with men nearby. I’d take the quickest shower, put on a robe and get dressed in my cell. Hearing the women’s cries was hard, but I felt safer than I had throughout Rikers. I felt chilled to my soul by the crying, screeching, and yelling of the women who just could not take being confined. They would cry all night, at three and four in the morning. It was seldom quiet in that area. I wouldn’t go to rec, so I got no breath of fresh air. At one point the chaplain came by and I was in a fetal position and crying. He asked if I was okay and I said that I wanted to die. He talked to me through the door, and I held fast to what he was saying, his words of consolation. The next day I started to lift. The days blurred into each other. I took a pen and calendar and wrote what each meal was. I still have that calendar and menu.”

“Because Bedford is a maximum, some lifers there who knew my brother from the neighborhood tried to help me and give me some comfort. I didn’t feel I should have been in SHU, so I kept to myself, held my emotions in. I didn’t talk to anybody or ask any questions. I was able to read books.”

“At Rikers, I cried a lot, the most that I’ve ever cried in my life. I felt that I was bad and that I could not do anything right, that I deserved this punishment. I felt suicidal as well. At Bedford Hills I had the same feelings, like I was an outcast, exiled, that I couldn’t do the little bit that others were allowed to do, that I couldn’t be a part, that I was not worthy. I would just sit and watch, like I was living in a world and life was going on.”



“Eventually I just heard my own heartbeat. I had crazy thoughts. After 30 days, the walls started closing in on me. Three to four weeks in the dark, cold, and scared. The only comfort being there was that I didn’t have to worry about beatings.”

IMPACTS “I received multiple tickets for being out of place— a 109.10 violation—I got known for it. I was always speaking to people. Talking to others is a natural human thing. For example, if someone asked me a question, I would stop and answer instead of just keeping my mouth shut. The officers were always writing me up for this. The rule in prison is to keep it moving. When I worked in the mess hall I got sent to SHU for taking cheese. We would sneak food because we were hungry. I was flabbergasted. Taking cheese is not that serious yet I was treated like I fought with staff. I couldn’t believe what I was in SHU for. My mom couldn’t come see me and there was no way for me to communicate with her. This made me feel helpless because I called my mom every day or every other day. She was the one person I could count on to get through, my only source of strength, and I couldn’t contact her. I felt I was all alone, suicidal and stuff. I felt I couldn’t ask for help because they would punish me more, and no one asked me how I was doing. I just accepted the time. It made me feel a little ashamed, like it’s enough that I was in prison and I was making it worse by making bad decisions and getting deeper in prison.”

“The quiet and isolation, having no one to talk to, no materials to read. I felt like the four walls were closing up on me. You don’t hear or see anyone, and you have to ask someone to come for everything, like a shower or sick call. In jail you already feel like an animal and this makes you feel even more so.”

“I was stressed, depressed and scared. I didn’t know what to do. I was afraid because the officer was out to get me. I was concerned about the baby because of the way they slammed me on the table.”

LONG-TERM EFFECTS “I did ten days in SHU for having a ‘weapon’ – it was a lock wrapped in a shirt. I didn’t intend to use it. I had it in my cell because I was being threatened by a woman on my unit. I received a 90 day SHU sentence but the woman reached her max-out date and was released, so I only served ten days. The first few days in SHU I slept and slept and slept. There was no one to talk to and I barely saw an officer. It took me a few days to get the routine. I had rec—they came around at 6 AM. I went a few times and then stopped. There was no programming. I got a shower three times a week and I was cuffed to the door while in the shower. There was a person every two cells, so I couldn’t talk to the person next to me. A dead bug on the window became my friend. I asked for pen and paper, got it days later. I had no concept of time and I was confused about the days. Once I was home for good I became a hermit. I couldn’t be around people. It took me three years to make friends. This was because of SHU. I had been released from prison once before and I wasn’t like that. I have nightmares to this day. I also have a fear of being cuffed. I am scared of police brutality of any kind because I don’t want to be cuffed. I was cuffed while pregnant, cuffed while giving birth, and cuffed while showering. Women in isolation, we lose more of our humanity than we do from just being incarcerated.”

“As a long-termer, I notice subtle things. I was very depressed. Today I’ll get invited places and say I’m going, but then I don’t go. I feel safer at home. The fact that in SHU you couldn’t really communicate, see or touch had a really bad effect on me.

“I bring up issues about being in solitary in therapy now. I don’t like small spaces and feeling closed in. I also realize how incarceration and isolation impacted my PTSD.”

“To this day I’m skittish. I can’t do closed spaces. In isolation some people have more mental issues. You hear crying, the banging against the door, the officer threatening to beat a person, and you really don’t know what’s happening because you are in your individual cell and your imagination is taking you a thousand places. It’s a harrowing experience.”

“I feel these practices are used to keep people in prison longer and to strip them of whatever they have left. It’s used to break people down. It’s not a good practice. It just strips the core of your being, having people feel like a hunted or scared animal. It’s not a humane practice. People are human beings, not offenses. If they are trying to regulate behavior then have a time when people can talk or give them a chore.”

WHY WE NEED TO END SOLITARY “To be in an environment where you only hear your heartbeat brings an unnerving sense of insanity. It’s day after day with nothing to do, hearing agonizing screams, driving me insane, praying just to have human contact. Solitary deteriorates the mental stability of anyone. If you are a mother, you can keep happy thoughts about your children initially, but eventually they will dwindle. If you kill the head, the body will follow. Solitary is built just for that, to break you down. It plays a serious part in mental diagnoses. I know it played a heavy part in mine. I would like it to be abolished. Solitary does not rehabilitate. It debilitates. It changes your perception on life. If it was implemented to assist, what is it assisting with?”

“Women’s situations should not be taken lightly. They are paying the price for the crimes they did. Women shouldn’t be violated while doing their time. Educate women. Have more programs where women can sit down and talk. More support groups. A lot of people don’t have strong support networks. Many are lost. Women need more empowerment groups.”

“I feel a way about being segregated in an environment where we are already separated from society. We don’t have human contact except one hour a day and we don’t get showers more than three times a week. It’s like being in an insane asylum. Everything about solitary is wrong.”

HOW YOU CAN TAKE ACTION

Support the #HALTsolitary campaign!

The Correctional Association of New York is an active member of the #HALTsolitary campaign and supports the H.A.L.T. Solitary Confinement Act. The #HALTsolitary campaign brings together formerly incarcerated people, family members of currently incarcerated people, concerned community members, advocates, and organizations interested in challenging the use of isolated confinement in New York correctional facilities.¹¹ The H.A.L.T. Solitary Confinement Act will end long-term solitary confinement in New York and replace it with more humane and effective alternatives. Specifically, H.A.L.T. will:

End the torture of isolated confinement by ensuring that no person is ever held in isolation beyond 15 days, in line with international standards.

Create more humane and effective alternatives by fundamentally transforming the response to people's needs and behaviors—shifting the response from deprivation and isolation to additional support, programs, and therapy. Anyone held in isolation beyond 15 days would get at least seven hours per day out-of-cell with meaningful human contact and programs.

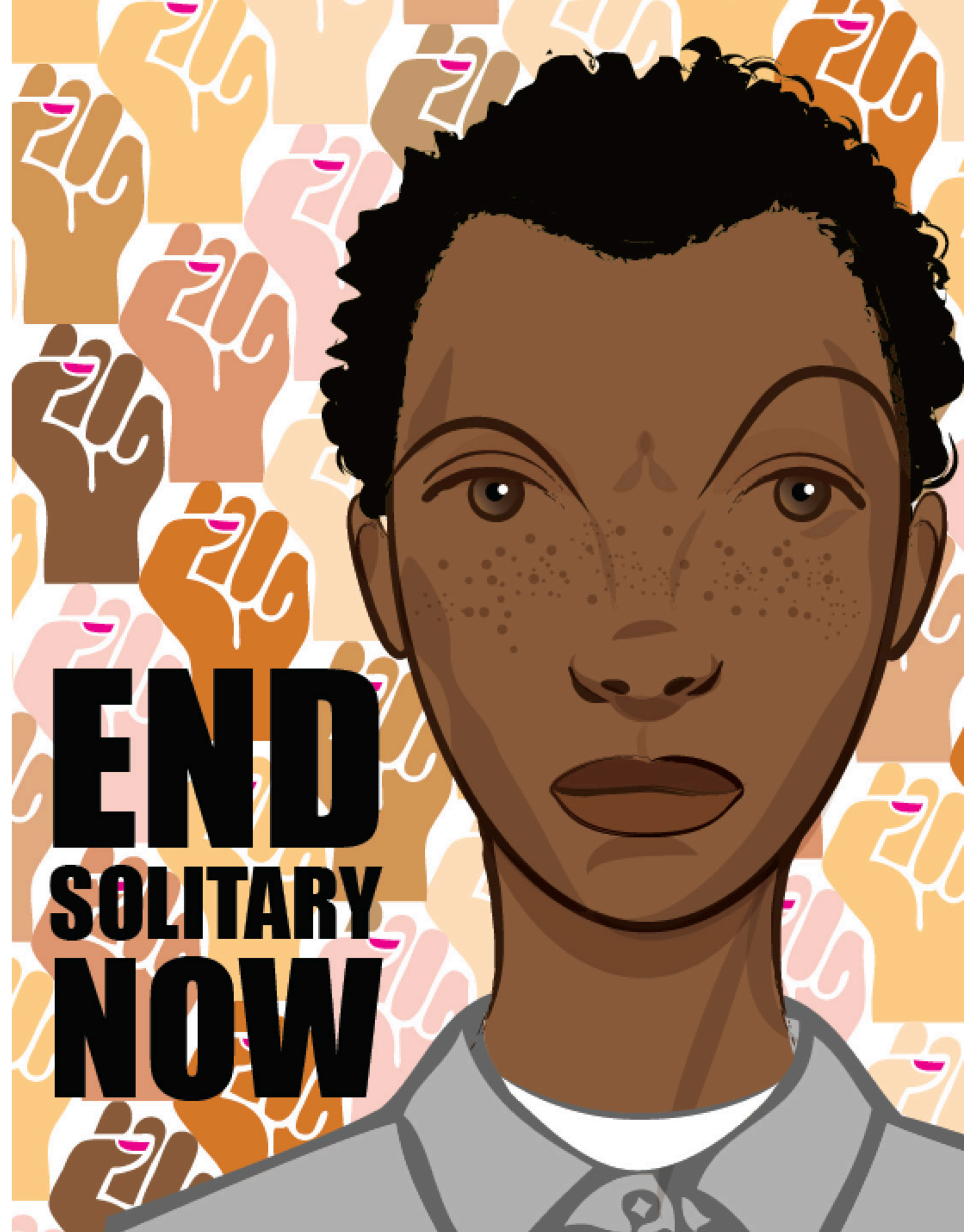
Drastically restrict the criteria that can result in extended isolated confinement to the most egregious conduct in need of an intensive therapeutic and rehabilitative intervention.

It would also ban the use of solitary for protective custody and ensure that any protective custody units have meaningful out-of-cell human contact and programs.

Ban isolated confinement for people particularly vulnerable to the effects and abuses of isolation, including youth, the elderly, people with mental health needs or physical limitations, pregnant women, and new mothers.

Make the processes and practices around isolated confinement fairer, with more transparency and accountability, by requiring expanded training for prison staff, access to legal assistance for incarcerated people, mandatory public reports on the use of isolation, and outside oversight over implementation of the law.

To learn more about the facts concerning isolated confinement in New York prisons and jails, the H.A.L.T. bill, and the effort of the New York Campaign for Alternatives to Isolated Confinement to end this practice go to <http://nycaic.org>.



ENDNOTES

1. <http://nycaic.org/facts>
2. <https://www.correctionalassociation.org/wp-content/uploads/2015/03/Reproductive-Injustice-FULL-REPORT-FINAL-2-11-15.pdf> (*Section 5, Special Issues: Women in Solitary Confinement, Women Growing Older & Women Living With HIV, Reproductive Health Care and Women in Solitary Confinement*)
3. Ibid.
4. Ibid. Men in the New York prisons can spend months, years and decades in SHU. New York has two men’s super-maximum security prisons with the primary purpose of holding people in solitary or isolated confinement. For more about one of these prisons, see <https://www.correctionalassociation.org/wp-content/uploads/2017/12/Solitary-at-Southport-Final-Web-12-10-17.pdf>.
5. <http://nycaic.org/wp-content/uploads/2013/02/UN-Special-Rapporteur-on-Tortures-Statement-on-Solitary-in-NY-State.pdf>.
6. <https://www.theatlantic.com/politics/archive/2016/01/solitary-confinement-reform/422565/>
7. <http://www.correctionalassociation.org/news/isolated-confinement-the-fact>
8. See <http://solitarywatch.com/wp-content/uploads/2011/06/fact-sheet-psychological-effects-final.pdf>
9. <https://www.correctionalassociation.org/wp-content/uploads/2015/03/Reproductive-Injustice-FULL-REPORT-FINAL-2-11-15.pdf> (*Section 5, Special Issues: Women in Solitary Confinement, Women Growing Older & Women Living With HIV, Reproductive Health Care and Women in Solitary Confinement*)
10. A minimum security prison for women that was closed by Governor Cuomo in 2013.
11. <http://nycaic.org/facts>

ABOUT THE CORRECTIONAL ASSOCIATION OF NEW YORK

The Correctional Association of New York (CA) is an independent, non-profit criminal justice advocacy organization founded by concerned citizens in 1844. In 1846, the CA was granted unique authority by the New York State Legislature to inspect prisons and to report its findings and recommendations to the legislature and public. For nearly 175 years, the CA has worked to create a more fair and humane criminal justice system in New York and a safer and just society for all. Through its Women in Prison Project (WIPP), the CA works to reduce the overuse of incarceration for women, ensure that prison conditions for women are as humane and just as possible, and create a criminal justice system that treats all people and their families with fairness, dignity and justice. WIPP engages in prison monitoring, policy advocacy, coordination of the Coalition for Women Prisoners (a statewide body that fights for the rights of women impacted by incarceration) and women’s leadership and advocacy training for women recently home from incarceration through a program called ReConnect.

For more information about the Correctional Association of New York, please visit:

www.correctionalassociation.org
www.facebook.com/CorrectionalAssociation
www.twitter.com/CANY_1844
www.instagram.com/CANY_1844

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THE PROJECT

Prison Within Prison, Voices of Women Held In Isolated Confinement in New York is a collection of oral and visual observations from 20 women about their experiences being held in isolated confinement in New York’s women’s prisons and Rikers Island. They are advocates and leaders on a range of issues in the movement to end the negative impact of mass incarceration and mass criminalization on women. All, except for one, are graduates of ReConnect, the Correctional Association of New York’s leadership development program for formerly incarcerated women. All are members of the Coalition for Women Prisoners, a statewide body coordinated by the Correctional Association that fights for the rights of women impacted by incarceration. Through coalition-based

advocacy, the women interviewed for this project have advocated to reduce mandatory-minimum prison sentences for drug possession; increase protections for incarcerated parents and parents in residential drug treatment with children in foster care; prohibit the shackling of incarcerated pregnant women; secure state health department oversight of HIV and Hepatitis C care in New York prisons; and continue to fight for alternative sentencing for domestic violence survivors who commit crimes directly related to their abuse. All desire to lend their voice and action to ending the overuse of isolated confinement in New York prisons and jails by educating the public about the impact that isolation has on women.

ACKNOWLEDGEMENTS

The power of this project is a direct result of 20 courageous women who generously shared their lived experiences with isolated confinement and their ideas for alternatives to this practice. Revisiting and recounting these experiences were not easy and we are grateful to them for their generosity. Four of the 20 interviewees worked with the graphic designer Troy A. Lambert/AfroBlu Designs to create the images herein. They considered what the public needs to understand about women and isolated confinement and how this could best be achieved through imagery and words. They explored colors, shapes, textures, sounds and other attributes that had personal significance to them as women who had been held in isolated confinement. From this exploration, they identified design concepts and created collages and drawings that were used by the graphic designer to create the images, each of which contains elements from the women's conceptual ideas and art. Thank you for your collective creativity and work in crafting such compelling images.

Additional thanks to: Claire Deroche, Victor Pate, Gisele Ribeiro and Regina Smith from the #HALTsolitary campaign and Tamar Kraft-Stolar, Co-Director of the Women & Justice Project, all of whom offered critical conversations in the early stages of this project; and to Jack Beck, Scott Paltrowitz, Lynn Roberts, Mikyel Robinson, Anisah Sabur, Eric Santiago, Jennifer Scaife, Gail T. Smith, Nikki Tourgny, and Judy Yu who read the pre-design drafts and offered feedback and helpful suggestions for improvements.

Finally, much appreciation to the collaborative team on this project: Troy A. Lambert/AfroBlu Design (Graphic Design Consultant), Annette Warren Dickerson (CA Communications Director), and Andrea B. Williams (CA ReConnect Program Director).

May our collective work take us one step further toward ending the brutality of isolated confinement for all people inside New York's correctional facilities and correctional and detention facilities everywhere.