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KATEDRA PRAWA KARNEGO WYKONAWCZEGO

Introduction

- Most of prisoners will one day be released back into the community.
- Ensuring they can maintain contact with their families through visits, telephone calls and correspondence is a fundamental right that cannot be removed as a punishment.
- It can provide vital support to prisoners/detainees and assist with their reintegration on release.
- Limitations on this contact by authorities are permissible but restrictions should be necessary and proportionate.

Introduction

Key points:

- Keeping in touch with the outside world through television, radio, newspapers and magazines is also of great importance for prisoners' mental health, and contributes to their ability to successfully integrate with society upon release.
- Authorities should provide detainees with access to a range of material and mediums that cater to the needs and interests of different age, gender and language groups and differing physical and mental abilities.

Key points:

- Solitary confinement is used in prison systems across the world.
- ▶ Research demonstrates that solitary confinement has a negative impact on the health and well-being of those subjected to it, especially for a prolonged time.
- Those with pre-existing mental illness are particularly vulnerable to the effects of solitary confinement.
- Solitary confinement can affect rehabilitation efforts and former prisoners' chances of successful reintegration into society following their release.
- International human rights law requires that the use of solitary confinement must be kept to a minimum and reserved for the few cases where it is absolutely necessary, and that it should be used for as short a time as possible.

Short history

- Solitary confinement was first introduced in 1790 at the Walnut Street Jail in Philadelphia by the Society for Alleviating the Miseries of Public Prisons.
- It was seen as a humane alternative to overcrowded jails, whippings, and public humiliation.
- Prisons began to abandon solitary confinement in favor of the "Auburn System": daily hard labor in groups, where prisoners worked silently and march in lockstep.
- By the late 19th century, long-term solitary was rare.
- Rapid growth took place in the 1990s and early 2000s.
- Hundreds of other prisons and jails started to have solitary confinement units

What is solitary confinement?

- The term "solitary confinement" refers to the physical and social isolation of an individual in a single cell for 22.5 to 24 hours a day
- ▶ Different jurisdictions may use other terms to describe what is essentially a regime of solitary confinement as defined above, including segregation, isolation, closed confinement.
- ▶ The deprivation of human contact inherent in solitary confinement is usually accompanied by additional restrictions and controls applied to the prisoner.
- ▶ But in most, isolated prisoners will have very limited, if any, access to educational, vocational and recreational activities, all conducted in isolation from others. The number and type of personal belongings allowed in prisoners' small, sometimes windowless cells are highly restricted and closely regulated.
- ▶ Their cells and few belongings are closely monitored and regularly searched. Inside their cells, prisoners are monitored either by closed circuit television or directly by guards. Family visits, where allowed at all, may be held through a glass barrier, preventing any physical contact between the prisoner and others. On the few occasions prisoners leave their cells, they are typically escorted by a minimum of two guards and restrained with handcuffs and in some cases placed in additional body restraints, such as legirons and body-belts. Prior to being returned to their cells, they will be body-searched and, in some jurisdictions, subject to a full body-cavity search.

In short, isolated prisoners would typically spend a minimum of 22.5 hours a day locked up alone in a small cell with few personal belongings and little to do.

They are routinely subjected to body searches and the application of physical restraints, as well as limits on their communication with the outside world.

This regime can last for months or years, and can be of an indeterminate duration

(In Poland there is a time limit, but there is no limitation when it comes to dangerous prisoners - they also spend 22 hours per day locked up alone and it can last months or even years. Polish prisoners submit a lot complaints to the European Court about being held in cell for dangerous prisoners for many years)

In Poland solitary confinement is one of the disciplinary measures.

- It can be applied to the prisoners for up to 14 days (pre-trial detainees) or 28 days (prisoners)
- lt may be imposed on a prisoner who seriously violated prison orders or discipline.
- The cells for solitary confinement have to be placed in the part of the prison where the prisoner's movement is limited, and in an area adjacent to the supervision room. Cell furnishings are limited to only a bed, cabinet, stool and table. The furniture shall be firmly affixed to the floor.

During solitary confinement the prisoner is deprived of the possibility to:

- 1. contact other prisoners and his or her family
- 2. participate with other prisoners in religious events
- 3. take part in cultural and educational activities
- 4. work
- 5. purchase food or tobacco products
- 6. receive food parcels
- 7. use his own clothing or footwear.

The physical conditions in solitary cells range from reasonably sized cells with windows and natural light, self-contained with a toilet and a shower screened-off from the rest of the cell to protect the prisoner's privacy, to small, windowless, filthy cells where prisoners have to use a bucket to relieve themselves.

Three main factors are inherent in all solitary confinement regimes: social isolation, reduced activity and environmental input, and loss of autonomy and control over almost all aspects of daily life. Each of these factors is potentially distressing.

- Similarly, in some prisons, isolated prisoners may have access to books, television and a radio inside their cells, whereas in others prisoners may only be allowed a copy of a religious text, if any books at all.
- Finally, the degree and quality of human contact prisoners enjoy varies greatly, from no human contact other than with silent prison staff who deliver food and medication to the prisoner inside his cell, to regular contact with family, lawyers, religious personnel and so on.

The effects on health of solitary confinement include physiological signs and symptoms, such as:

- gastro-intestinal and genito-urinary problems
- diaphoresis
- insomnia
- deterioration of eyesight
- weakness
- feeling cold
- heart palpitations
- migraine headaches
- back and other joint pains
- poor appetite, weight loss, diarrhoea
- tremulousness
- aggravation of pre-existing

Psychological symptoms occur in the following areas and range from acute to chronic:

- anxiety, ranging from feelings of tension to full-blown panic attacks
- depression, varying from low mood to clinical depression
- anger, ranging from irritability to rage:
- cognitive disturbances, ranging from lack of concentration to confused state weakness
- > perceptual distortions, ranging from hypersensitivity to hallucinations heart palpitations
- paranoia and psychosis, ranging from obsessional thoughts to full-blown psychosis
- self-harm and suicide.
- Particularly vulnerable groups: while the effects of solitary confinement vary from one individual to another and depend on the factors listed above, some individuals are particularly vulnerable to the negative effects of isolation, including those with pre-existing mental and learning disabilities, children and young people and pre-trial detainees.

Prisoners with mental problems:

- Experts largely agree that individuals with pre-existing mental illness are at a particularly high risk of worsening psychiatric problems as a result of their isolation.
- They may also behave in ways that, in the context of high-security confinement, are interpreted as violations of rules rather than a manifestation of their mental problems.
- Nhere prisoners' progression through the system depends on their behaviour and perceived adherence to prison rules, this can "turn a minor incident into a serious situation" and lead to a vicious cycle which results in a prolonged stay in isolation, where these very conditions make them worse and less able to abide by the rules and regulations.

Children and young adults:

▶ Children and young adults are still developing physically, mentally and socially. This makes them particularly vulnerable to the negative effects of solitary confinement which, as psychologists claim, is the equivalent of placing them in a deep-freeze.

Pre-trial detainees:

▶ Detainees held on remand are another particularly vulnerable group, and research shows that their vulnerability is made worse in solitary confinement.

Long-term effects:

- The transition from life in solitary confinement to coexistence with others, whether in general prisons or in free society, can be sharp and unsettling.
- Some of the very survival skills adopted in reaction to the pains of isolation, such as withdrawal and going mute, render the individual dysfunctional upon release.
- Some become so dependent on the structure and routines of the prison for controlling their behaviour that they find it difficult to function without them.
- This problem of becoming institutionalized is experienced by many prisoners on their release, but it takes on a much more acute form when the transition is from years of social isolation

How do international law and human rights bodies view solitary confinement?

- The United Nations has gone as far as calling for abolition solitary confinement as punishment.
- ▶ Rule 60.5 of the European Prison Rules states: "Solitary confinement shall be imposed as a punishment only in exceptional cases and for a specified period of time, which shall be as short as possible"

The courts and international monitoring bodies also pay particular attention to the practice and, in the light of its severity, have asserted that solitary confinement in some circumstances constitutes a form of torture, inhuman or degrading treatment



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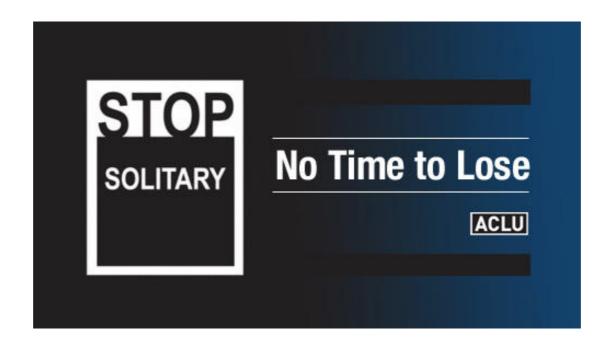
More recently, in a case involving the isolation for more than three years of a polish prisoner labelled as dangerous (*Piechowicz vs. Poland*) European Court states that:

"solitary confinement without appropriate mental and physical stimulation is likely, in the long term, to have damaging effects, resulting in deterioration of mental faculties and social abilities"



How do international law and human rights bodies view solitary confinement?

- While solitary confinement has always been viewed by international human rights law and bodies as an undesirable, if legitimate, prison practice, it is only in the last few years that a more concentrated and targeted campaign against its use especially for prolonged periods, has begun.
- In 2008, the then United Nations Special Rapporteur on Torture, Manfred Nowak, endorsed these recommendations and added that: "Regardless of the specific circumstances of its use, effort is required to raise the level of social contacts for prisoners: prisoner-prison staff contact, allowing access to social activities with other prisoners, allowing more visits and providing access to mental health services"



National Organizations with Campaigns Against Solitary Confinement

National Organizations with Campaigns Against Solitary Confinement:

- Amnesty International
- Human Rights Watch
- Physicians for Human Rights

International Agreements Limiting Solitary Confinement:

- International Covenant on Civil and Political Rights (ICCPR)
- UN Convention Against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (CAT)
- UN Standard Minimum Rules for the Treatment of Prisoners (SMR)

UN Special Rapporteur on Torture Juan Mendez Condemns Solitary Confinement

- Mendez reports to the UN Commission on Human Rights
- In October 2011, he called for a total ban on solitary for juveniles, mentally ill, pre-trial detainees.
- Solitary should be limited to 15 days for everyone else, and used only for safety purposes.



Conclusion

- Solitary confinement is a prison practice whose harmful effects on health and well-being are well documented. The existing literature demonstrates that solitary confinement has psychological effects, including psychosis and depression. The extent of psychological damage varies and will depend on individual factors (such as personal background and preexisting health problems), environmental factors (physical conditions and provisions), regime (time out of cell, degree of human contact).
- Prisoners in solitary confinement suffer, hallucinate, they deliberately injure themselves, and they lose the ability to relate to other human beings. When these prisoners are eventually released from solitary confinement (after very long time), they have difficulties integrating into the general prison population or (especially when they are released directly onto the streets) into life on the outside.
- The best way to avoid such damage to health and wellbeing is not to isolate prisoners. Where this is absolutely necessary, it should only be done as a last resort and for as short a time as possible.
- The decision to place a prisoner in solitary confinement must always be made by a competent body, transparently and in accordance with due process requirements, and be subject to regular, independent and substantive review.

Conclusion

More so,

- The prisoner should be kept in decent physical conditions and have regular access to fresh air and exercise.
- Educational, recreational and vocational programmes should be provided to prisoners, ideally in association with others, and prisoners should be allowed to keep books, magazines, hobbies and craft materials in their cells.
- Prisoners must be afforded regular, meaningful human contact, ideally also with people from outside the prison, but prison staff should also be encouraged to communicate informally with prisoners who are held in solitary confinement.
- Finally, isolated prisoners should be allowed, and encouraged, to maintain contact with their friends and family, through open (contact) visits, letters and telephone communications.
- Crucially, prisoners must always be treated with respect for their inherent dignity as human beings.

In addition, there is definite need to find alternative incarceration methods to effectively manage the behaviors of inmates without causing harm to their physical and mental health. Developing new incarceration methods is particularly important to ensure the well-being of confined inmates who are mentally ill prior to incarceration