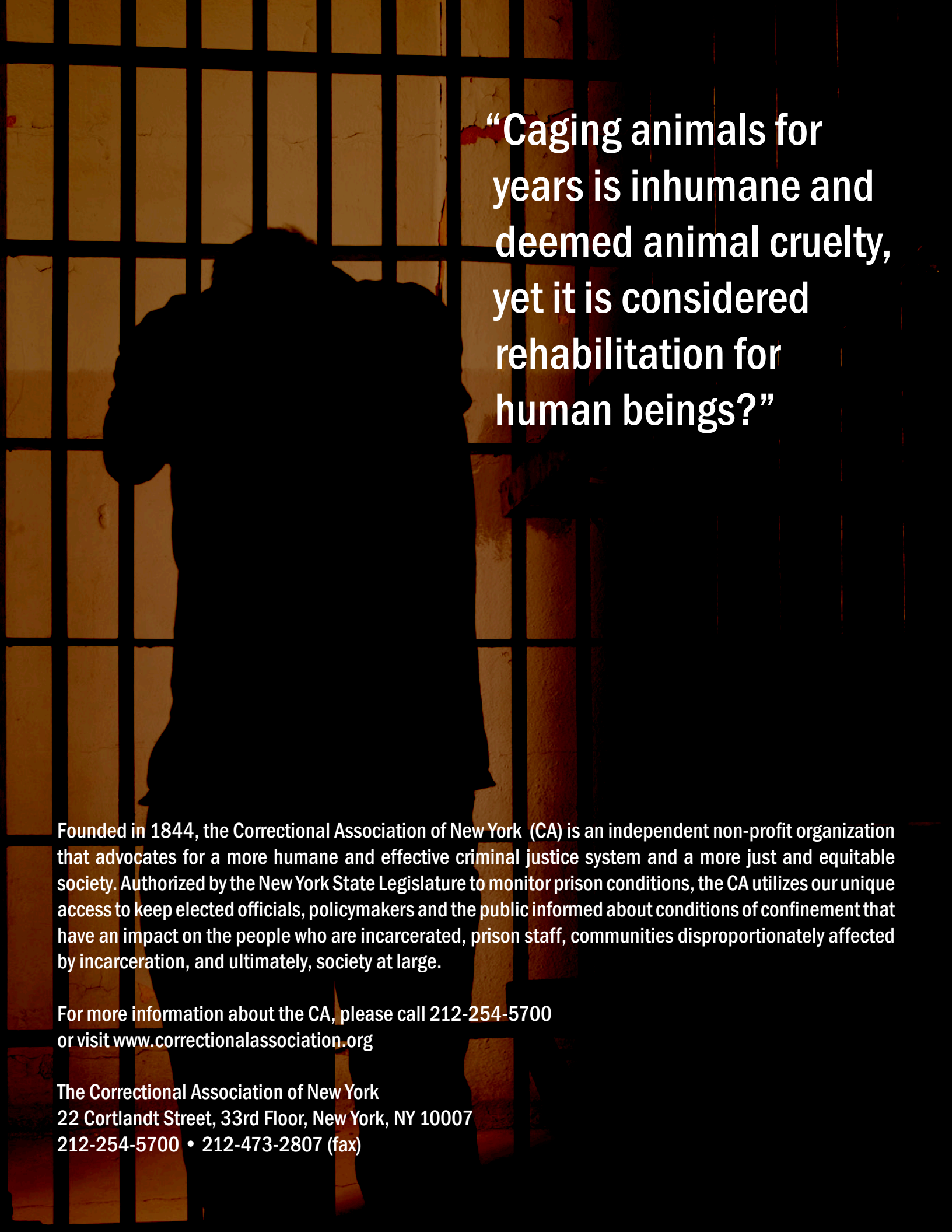




SOLITARY AT SOUTHPORT

A 2017 Report based upon the Correctional Association's Visits, Data Analysis, & First-Hand Accounts of the Torture of Solitary Confinement from One of New York's Supermax Prisons





“Caging animals for years is inhumane and deemed animal cruelty, yet it is considered rehabilitation for human beings?”

Founded in 1844, the Correctional Association of New York (CA) is an independent non-profit organization that advocates for a more humane and effective criminal justice system and a more just and equitable society. Authorized by the New York State Legislature to monitor prison conditions, the CA utilizes our unique access to keep elected officials, policymakers and the public informed about conditions of confinement that have an impact on the people who are incarcerated, prison staff, communities disproportionately affected by incarceration, and ultimately, society at large.

For more information about the CA, please call 212-254-5700
or visit www.correctionalassociation.org

The Correctional Association of New York
22 Cortlandt Street, 33rd Floor, New York, NY 10007
212-254-5700 • 212-473-2807 (fax)

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“Being in solitary confinement causes me to experience anxiety, depression, panic attacks, extreme weight loss. I barely achieve sleep and constantly wake up in cold sweats. I experience a feeling of death. I feel as though I stop breathing while I’m sleeping, I wake up gasping for air. I’ve become anti-social. I’m losing my mind.”

– Person incarcerated in solitary at Southport.

1

EXECUTIVE SUMMARY

Solitary confinement is torture. New York State (NYS) subjects people to solitary confinement and other forms of isolation at rates above the national average and in a racially disparate manner. On any given day, in NYS prisons alone roughly 2,900 people are held in Special Housing Units (SHU) and an additional estimated 1,000 or more people are held in keeplock (KL). In 2015 after limited SHU reforms, the number of people in SHU rose to over 4,100, the highest rate of solitary in the history of NYS prisons, more than a third higher than in the early 2000s and higher than its previous 2012 peak. Even with some reductions in 2016 and 2017, NYS’s rate of isolation – nearly 8% including KL and 5.8% if only SHU – is much higher than the national average of 4.4% and four or more times higher than some states – like Colorado, Washington, and Connecticut – that have less than 1% or 2% of incarcerated people in solitary.

In the SHU or KL, people are held alone in their cells 23-24 hours a day, without any meaningful human contact or out-of-cell programming, with limited or no access to phone calls, and often with limited, restricted, or no visits. The sensory deprivation, lack of normal human interaction, and extreme idleness have long been proven to cause intense suffering, devastating physical, mental, and emotional effects, and the increased likelihood of self-harm. Solitary – “the Box” – can cause deterioration in people’s behavior, while limits on solitary have had neutral or even positive effects on institutional safety. The Mandela Rules – recently adopted by the entire United Nations General Assembly, supported by a US

delegation consisting of corrections administrators, and voted for by the US government – prohibit solitary beyond 15 consecutive days. Yet, in New York people are regularly held in solitary for months, years, and even for decades.

Southport Correctional Facility is one of the two super-maximum security prisons in NYS with the primary purpose of holding people in solitary or isolated confinement. Southport was originally a regular maximum security prison, but became New York’s first prison dedicated entirely to solitary confinement in 1991. The budget to operate this supermax is almost \$39 million per year. Southport currently incarcerates about 400 people in solitary in the SHU. Beyond the already racially disproportionate infliction of solitary across prisons statewide, nearly 90% of people in the SHU at Southport are Black (62%) or Latino (27%), while only 2% of Correctional Officers (COs) at Southport are Black (1.4%) or Latino (0.7%). Even more extreme, and reflective of the deeply engrained racism of the prison system, of all people who were held at Southport for the entirety of 2015, 76% of all the people who were held at Southport in 2015 were Black.

The Correctional Association of New York (CA) conducted a full monitoring visit of Southport in February 2015 and further investigations of Southport in 2015 and 2016. During the 2015 visit, the CA spoke one-on-one with nearly every person in the SHU while we were there. The CA subsequently received over 190 written surveys from people in Southport’s SHU, had repeated correspondence

with numerous people incarcerated at Southport, conducted extensive interviews in 2015 and 2016 with nearly 50 people held in the SHU at Southport, and analyzed prison-specific and system-wide data. To even begin to have some understanding of the real experience of solitary at Southport requires learning directly from the people who are living in solitary the details of what they are enduring. The narratives in this publication provide representative examples of the experiences of the hundreds of people the CA communicated with at Southport. The combination of the in-depth lived experiences with the CA's overall investigations and analysis revealed the following key findings and recommendations:

KEY FINDINGS

1. Devastating conditions and impacts of solitary confinement: People in the SHU at Southport spend 23-24 hours a day in their cell, with the possibility of one hour a day of recreation alone in an outdoor cage, although between 70-85% of people in the SHU at Southport do not go to recreation on any given day. These conditions – as in solitary units across the state – have had devastating impacts on all people held in the prison, led people to suffer from mental health issues, and exacerbated people's pre-existing mental health needs.

2. Intersections between solitary, mental health, and self-harm: Southport is an OMH level 2 facility. Generally throughout 2015-16, over a quarter of the people in Southport's SHU were on the OMH caseload. As across the system, people with mental health needs at Southport do not receive any group therapy or programming and only have short periodic clinic contacts with staff. Of serious concern, a number of people in the SHU previously had diagnoses that should classify them as having a Serious Mental Illness in need of diversion from SHU. Relatedly, a large number of people reported repeated trips to the mental health Residential Crisis Treatment Program (RCTP) and back to the SHU, including after incidents of self-harm.

3. Pervasive staff brutality, racism, and abuse in the Box: Many people face staff brutality, racism, and abuse at Southport. Survey responses from Southport's SHU residents ranked the prison as one of the worst CA-visited SHUs across the state

on various indicators of staff brutality and feelings of being unsafe. Even with so few opportunities for physical interactions between Southport staff and residents because people are in their cells 23-24 hours a day, nearly half of survey respondents reported they had personally experienced a physical confrontation with Southport staff, while roughly 84% reported they frequently hear about staff physical confrontations. Moreover, Southport frequently imposes lengthy solitary sentences based on allegations of assault of staff after staff have actually brutalized an incarcerated person. Many people reported that staff and systemic racism infuse all other abuses taking place at Southport.



4. Minor conduct resulting in long-term solitary:

Solitary often comes in response to non-violent prison rule violations, such as disobeying an order, interfering with the count, drug use, or even retaliation for questioning authority or talking back to staff. Approximately 57% and 77% of the average annual population at Southport in 2015 and 2016, respectively, received at least one disciplinary ticket in Southport's SHU, and more than a third of those who received a ticket got at least two. Roughly 98% of all tickets in 2015-16 resulted in guilty findings. Half the people in 2015 and 2016 found guilty of a rule violation received 60 and 75 days or more in SHU, respectively. During 2015 and 2016, the percentage of persons receiving an additional six months or more in SHU was 21% and 32%, respectively; the number receiving an additional year or more was 22 and 46, respectively, and two 2015 residents and seven 2016 residents received three or more years of segregation time. Black people represented 64% of all people receiving a ticket in 2015 and 67% of people receiving six months or more additional time in solitary. The average length of stay in Southport's SHU is 7.6 months, and people have often spent more time in solitary before and/or after Southport. Some people the CA interviewed had spent over four years in SHU at Southport, and a total of over 10 years in SHU.

5. Young people growing up in prison and solitary:

There are many young people incarcerated at Southport, and many people who ended up at Southport after growing up in New York's adult and youth prisons. The median age in Southport's SHU is 32, substantially less than the median age of 37 across the system. Around 17% of people held in Southport's SHU were under the age of 25 and almost 6% were 21 or younger. Moreover, the median age of arrest on survey respondents' current sentences was 23-years-old, 41% were arrested at age 21 or younger and 12.5% were arrested under 18. Over half of all survey respondents in Southport's SHU reported they had been in a youth prison during their childhood.

6. People released directly from solitary to the outside community and people denied release:

More than 90 people per year are released directly from Southport's solitary to the outside community. These individuals are not provided any transitional support and instead continue to be held 23 to 24 hours a day without any meaningful human contact or programs until their release. People held in Southport's SHU almost always spend more total time incarcerated than other people. Only 3% of people in the Southport SHU who went to the Parole Board from 2012-14 were granted parole. Everyone else, although they had already completed at least their minimum prison sentence, was held in prison for one to two more years before being allowed another parole hearing.

What is taking place at Southport is deeply disturbing. The environment is problematic even for people in the work cadre, who are there solely to help the prison operate. Cadre members work to ensure the prison is able to function, including in the mess hall, commissary, medical, custodial jobs, or as porters for cleaning and food distribution. Many cadre residents reported the lack of program opportunities, as well as negative staff attitudes, harassment and abuses. Overall, Southport embodies some of the very worst aspects of incarceration in New York: the devastating conditions and impacts of solitary; the particularly challenging impacts for people with mental health needs and young people; the pervasive staff brutality and abuse; the frequent imposition of additional time in solitary and the months and years people spend in the box; the denial of people's early release from prison and the release of people directly from solitary to the outside community; and the systemic racism driving all of these injustices.

KEY RECOMMENDATIONS

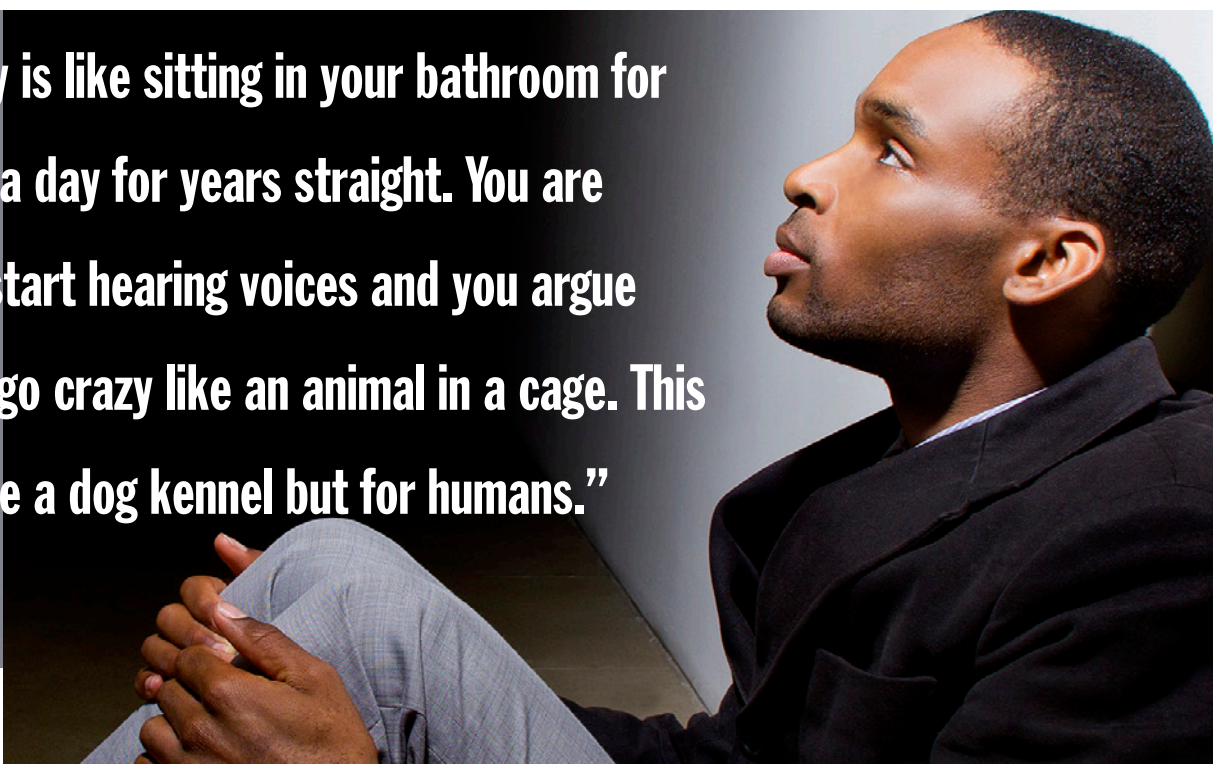
New York State must end the torture of solitary confinement for all people at Southport and across the prison system, and create more humane and effective alternatives. Policy-makers should pass and implement the **Humane Alternatives to Long Term (HALT) Solitary Confinement Act, A. 3080 / S. 4784**. Other legislation, such as A. 1905A / S. 5241 would also take important steps to reduce the use of solitary in New York. As the experiences of people in solitary at Southport reveal, however, ending or limiting solitary must be part of a broader package of policy changes to stop the abuses people are enduring in the state prison system. Some of the key recommendations to end the torture of solitary and other racist abuses include:

1. End the torture of solitary confinement for all people: HALT would ensure that *no* person is subjected to the torture of solitary confinement beyond 15 consecutive days and would create more humane and effective alternatives. HALT would also ensure that no person is held in solitary for more than 20 days total in any 60 day period.

2. Create more humane and effective alternatives: For any person who needs to be separated from the general prison population for more than 15 days, HALT would create separate, secure, rehabilitative and therapeutic units providing programs, therapy, and support to address underlying needs and causes of behavior, with at least seven hours out-of-cell time per day consisting of six hours of out-of-cell programming and one hour of out-of-cell recreation.

3. Further protect people from solitary or other separation: HALT would also restrict the criteria for placement in solitary or alternative units; ban the use of solitary for people particularly vulnerable to its damaging effects or additional abuse in solitary, such as young people and people with mental illness; expand staff training, procedural protections, transparency, and oversight; and ensure that no one is released from solitary to the outside community but instead receives additional transitional support before going home.

“Being in solitary is like sitting in your bathroom for almost 24 hours a day for years straight. You are stuck here. You start hearing voices and you argue more easily. You go crazy like an animal in a cage. This place really is like a dog kennel but for humans.”



4. Stop the brutality, end systemic racism, and transform the culture: At Southport and across the prisons, New York must implement a no-tolerance policy for improper or excessive use of force, including absolute prohibitions of certain types of force, such as blows to the head. New York must also end systemic racism, including by implementing racial impact statements on incarceration-related policies and practices; enhancing recruitment and staff incentives to hire a racially, culturally, and gender diverse staff; and reversing racial disparities at all stages of the incarceration process from arrests, prosecutions, and sentencing to treatment of people while incarcerated and imposing disciplinary tickets and solitary sentences. Further, New York must transform the punitive culture at Southport and all prisons into one based on communication and empowerment, including by shifting toward de-escalation, crisis intervention, and trauma-informed care; expanding existing and creating new treatment and educational program opportunities.

5. Expand transparency, oversight, investigations, and accountability: At Southport and across the prisons, New York must expand public oversight, media access, mandatory public reporting, and independent state oversight, including by creating a correctional Ombudsman, A. 1904. New York must also welcome independent investigations and accountability at Southport and across the DOCCS system, including through a system-wide investigation by the federal Department of Justice and access by the UN Special Rapporteur on Torture.

6. Raise the age, release parole-ready people, and reduce the number of all people in prison: New York must fully implement, adequately fund, and expand the raise the age law enacted in 2017, which will divert most 16- and 17-year-olds to Family Court, and ensure that no children are held in adult prisons or jails. Young people in New York State should not be growing up in youth and adult prisons, let alone in solitary confinement. At the same time, New York must release aging people and all people who have demonstrated their low risk to society, growth and transformation while

incarcerated, and/or readiness for return to the outside community, including by passing the SAFE Parole Act, A. 4353 / S. 3095A, as well as A. 1909 and A. 7546. Moreover, New York must take further steps to reduce the number of people at Southport and in all prisons, by, among other changes, ending life without parole, reducing sentence lengths, and promoting alternatives to incarceration and other effective interventions.

Southport intentionally exists to hold people in the torture of solitary confinement, and staff abuses cause the harm in solitary to be even worse and result in even longer time periods in solitary. New York must end the torture, brutality, racism, and abuse at Southport and across the state prisons at the same time that it transforms the purpose and practices of incarceration and reduces the number of people incarcerated. The CA is deeply grateful to the incredibly courageous people incarcerated at Southport who took substantial risks to share their experiences and insights, speak truth to power, expose the torture of solitary confinement, and help build a movement toward halting this torture, ending violence and abuse behind the walls, and challenging the racist system of incarceration.

People in the SHU at Southport spend

23-24 hours a day in their cell

- with the possibility of one hour a day of recreation alone in an outdoor cage
- between 70-85% of people in the SHU at Southport do not go to recreation on any given day.

2

DEVASTATING CONDITIONS AND IMPACT OF SOLITARY CONFINEMENT

As in SHU units across New York State, people in SHU at Southport spend 23 or 24 hours a day in their cell, without any meaningful human contact or programs. The extreme isolation and lack of normal human interaction and programs has been shown to have devastating impacts on all people. Southport exemplifies these impacts. People held in SHU at Southport described the harm caused to their physical, mental, psychological, and emotional well-being. Of all survey respondents, 90% reported that they suffered depression as a result of being in the SHU and 68% reported suffering from anxiety. As one person reported, “I do not feel like writing all that my mind, body, and soul are going through being in this cell 24/7. To make a long story short, it is a living h*ll for me. Bottom line!” Some people reported other forms of severe psychological harm, including 21% reporting that they had hallucinations as a result of being in the SHU and 40% suffered panic attacks. People described how they were “losing [their] mind” or how they felt that the “walls are closing in on [them].”

In addition, people reported how the box negatively impacted them socially and behaviorally. Over half of all survey respondents reported they suffered from paranoia as a result of being in the SHU. According to one person in Southport’s SHU, the “mental, emotional, and social [impact] has been extensive in so many ways I never wanna or will be able to interact positively with others ever again. My life is always threatened and feels in danger all the time. I’m paranoid and not sure sometimes what is real or an illusion.” In a potentially related manner, 56% of survey respondents reported they suffered from social withdrawal, the same percentage reported they had difficulty interacting with people, and over 42% of survey respondents reported that the SHU caused them to have outbursts. As one

person reported, “it makes it hard to open up to people. Even saying ‘good morning’ sometimes seems hard. I might have an outburst while having a regular conversation and then pass it off as being stressed out.”

People also reported various physical pains and medical problems they suffered as a result of being in solitary. Over a quarter of survey respondents reported that they suffered from muscle atrophy as a result of being in the SHU. People talked about suffering neck and back pain, heart conditions, high blood pressure and other conditions exacerbated by even simply the lack of movement or exercise while in the box. Over 64% reported that they had trouble sleeping.

Moreover, all of these various effects interact and compound each other. As one person related, “I’ve lost weight due to insufficient amount of food. I feel like everyone I come in contact with is trying to start a fight with me in some way. I feel worthless at times, feel extreme bouts of sadness. I find myself waking up like every half hour or so at night. I don’t want to speak to anyone about anything. I sometimes find myself panicking about my family’s well-being because their mail takes over seven days to reach me and the same for my mail to reach them.” Another person summarized that “being in SHU makes me feel like a caged animal; [it’s] inhumane.”

These impacts are caused by the extreme isolation of being in the SHU at Southport. The cells at Southport have inside them a toilet, a sink, a metal bed with a thin mattress, a slot in the door for a food tray, and some have a small book shelf. There are no out-of-cell programs at Southport. Southport does offer independent cell study where people can get materials and workbooks to work through

on their own in their cell. At the time of our visit, most people incarcerated at Southport were enrolled in academic cell study, and Southport had six full-time teachers who managed the academic cell study program for both people in the SHU and in the work cadre, with a plan to hire another part-time teacher, leaving one part time teacher position still vacant. According to staff, the program for each person in cell study is individualized – people can work on reading or vocabulary, or pre-High School Equivalence (HSE) or HSE, or other identified topics of interest like business plans, “Non-profits for Dummies,” languages, animals, countries, or politics. Mostly, the prison just provides reading materials for various subjects and the person in the SHU does their own independent study in their cell, with brief periodic check-ins from staff cellside with the cell door in between teacher and student. Staff indicated that there is no consistent schedule for when teachers go into the cell tiers, but teachers do periodically walk the tiers to check in with people about their program. DOCCS’ own policy regarding cell study indicates that participants will be seen by a teacher on average every two weeks and that participants are supposed to complete work given to them between each meeting.

Overall, 73% of survey respondents at Southport reported that they were not satisfied with the cell study program. This poor rating ranks Southport as about average for CA-visited SHUs, which is a much lower satisfaction rate than most general population survey respondents have for regular academic programs. Moreover, over 63% of survey respondents reported they were not satisfied with reading materials in the SHU and only 8% reported they were satisfied, ranking Southport in the worst quarter of CA-visited SHUs.

With respect to the Aggression Replacement Training (ART) cell study and Alcohol and Substance Abuse Treatment (ASAT) pre-treatment workbooks, there are few participants and poor ratings. In order to participate in these in-cell workbooks, a person in SHU must have ART or ASAT respectively as a

mandatory program and must be at the highest level of privileges: PIMS Level 3 (“Progressive Inmate Movement System”). At the time of our visit, there were only 13 people enrolled in an ART workbook and 25 people enrolled in an ASAT pre-treatment workbook. From 2012-2014, there were an average of 21 completions of the substance abuse pre-treatment workbook. For the SHU ART workbook program, the prison indicated it did not have figures for 2012 or 2013, and 14 people completed the workbook in 2014. Staff reported that there are three ART workbooks that people can progress through, that participants go at their own pace. If they turn one workbook in, the ART staff person will look it over and provide the person with the next workbook. Staff reported that completing the workbook in ART or ASAT does not satisfy the program requirement and does not help a person get into an actual ART program upon transfer from the SHU. Overall, over 92% of survey respondents reported that they are not satisfied with the ART or ASAT workbooks. When compared to people who are in regular general population substance abuse programs, Southport’s SHU has worse ratings than all CA-visited prisons (not surprisingly, given that it is just an in-cell workbook rather than an actual program).

Beyond these in-cell programs, people at Southport should have the possibility of one hour a day of recreation alone in an outdoor cage. According to DOCCS data, between 70-85% of people in the SHU at Southport do not go to recreation on any given day. Similarly, only 16% of survey respondents reported that they frequently go to recreation, while 53% reported they go once in a while and over 26% reported they never go to recreation. Many people described that they choose not to go to recreation because they do not want to be beaten or abused by staff. For example, one person reported “officers beat you up as soon as you come out for recreation,” while another person stated “I rarely come out of my cell for fear of getting beat up with my cuffs on.” The result is that often most people at Southport spend 24 hours a day in their cells.

Under the settlement in Peoples v. Annucci, by April 2019 Southport will implement a new step-down program that will allow for two hours of out-of-cell programming four days a week and two hours of recreation every day. The program will have a capacity of 252 people, and will be for people who have a minimum of a nine month SHU sentence, with placement in the program based on DOCCS' discretion. In addition, also by 2019, 84 people will be able to be in a Confinement Program Plan (CPP), which will allow for in-cell study and congregate recreation, and permit those who complete this in-cell ASAT or ART in CPP to get credit for 25% to 50% (ASAT) and 33% (ART) of program completion. In addition, it will allow for those who complete these in-cell programs to get expedited placement into the programs upon return to general population. While it is very positive there will be some out-of-cell programming at Southport, the limited amount of programming and the years of delay for implementation mean people will continue to be held in the torturous conditions described herein.

In addition to the lack of program and recreation opportunities, the general living conditions people experience and the lack of adequate services cause even more harm to people in solitary. In Southport's SHU, there is a lack of access to even the most

basic services and life necessities, including phone calls, commissary food items, sufficient food, and reading materials. These basic deprivations take an exacting toll. As one person succinctly described why the SHU was so harmful, "I cannot exercise, eat right, hear from my family, or work." The incentives people can earn if they progress through the different levels at Southport exemplify the draconian conditions people face in the SHU. For example, only if a person moves from PIMS Level 1 to Level 2 can the person have a winter coat in their cell or have restraints removed during exercise, visits, or when taking tests. Similarly, a person can only purchase candy if they progress to PIMS Level 3. They may only make one total phone call if they are PIMS Level 2, or only one phone call every 30 days if they are PIMS Level 3. People are only allowed at most three showers per week if they are Level 3, and at most two showers per week if they are Level 1 or 2.

People do have the ability to obtain materials from the law library, although they are not allowed to go to the law library. Compared to other SHUs, Southport ranked near the top third, with 47% of respondents reporting being somewhat satisfied and 14% satisfied with the law library. More problematic, 71% reported they were not satisfied with the mail





and package system and only 5% reported being satisfied, ranking Southport as one of the worst CA-visited SHUs. People complained about delays in receiving their mail and about staff tampering with their mail. Similarly, 81% of survey respondents reported being dissatisfied with the food and only 3% reported being satisfied, ranking Southport in the worst quarter of CA-visited SHUs. Many people reported that there was not enough food, that COs tampered with their food or denied them meals, and that they had lost weight while in the SHU. Over three-quarters of survey respondents reported that they suffered weightloss as a result of being in SHU. People at Southport also complained about the medical care at the prison. Overall, survey respondents' ratings of medical care placed Southport about average or slightly below average for CA-visited SHUs. Still, given the actual ratings, the rankings also indicate the poor assessment of medical care in SHUs across the system. Specifically, overall only 6% of survey respondents rated medical care as good at Southport, 40% as fair, and 54% as poor. Survey respondents had slightly worse ratings of physician care at Southport, with only 5% of people rating physician care as good, 37% as fair, and 58% as poor, while there were slightly better ratings of sick call nursing care, with 11% rating it as good, 48% as fair, and 41% as poor. Moreover, medical was the most grieved issue at Southport in

2013 and 2014. Many people during our visit and in survey responses reported that medical staff had taken them off of necessary pain medications that they had been taking at previous facilities. Survey respondents complained that there was a lack of confidentiality in speaking to medical staff, that there are delays of a month or more to see a doctor in getting medical treatment, and that the care received was not adequate. People also reported that they faced harassment or physical abuse by staff on the way to and from medical care, or if they grieved medical care.

More generally, any movement that people have outside of their SHU cell – for medical, recreation, or any other reason – requires shackling in chains and interactions with staff, which many people described as leading to further abuse and harm. As one person described, “All SHUs breed a sense of oppression because [incarcerated people] are always at a minimum handcuffed when interacting with staff, and there is no backlash for abuse when staff can get away with saying that a shackled-up [person] assaulted them.”

The following narratives provide greater insight into the conditions people live under in Southport's SHU and the devastating impact they suffer as a result.

MY VOICE HAS NO SOUND WITHIN THIS PRISON SYSTEM

I have spent most of my life in youth facilities and adult prisons and jails, including many years in solitary confinement. My grandmother raised me because my mother was on drugs and my father was non-existent. I had a pretty normal early childhood and my grandmother gave me everything I could have wanted as a kid. Still, I became a street person when I was 12 or 13. Some guy raped someone I considered my sister when I was 13, so I tried to kill him and ended up in a youth facility. That's when I became a gang member as part of a Latino and Black race and culture war – at that time the conflict was about the seating placement for the TV. It was one side against the other, so I had to join one. From then on, I was in and out of youth facilities,

and ultimately was incarcerated in an adult jail and then prison when I was 18.

When I came upstate, I was scared. I was a child. At first, I didn't go anywhere. I stayed in my cell. I didn't go to the mess hall. But I couldn't just live in a cell. Then I started learning what this life is like in here – it is complicated. When I had my first altercation in prison while still a child, the other man who was in his thirties pulled out a weapon. That's when I decided I needed a weapon. The whole thing here in prison is who gets who first. So that became my tactic. No matter how hard you try to walk off, someone will still come after you.



“Solitary eats away at you. It is hard to remain the same as you came in. As a result of being in SHU, I have experienced anxiety, depression, weight loss, social withdrawal, and feeling disoriented. I sometimes talk to myself out loud. I am alone in my conversation. I never talked with myself until I came to SHU. They say you’re sane if you talk to yourself and no one responds. Well I hear all parts of the conversation. So I guess I have lost it. I know mentally I’m deteriorating.”

I have thus been in and out of the box multiple times, and have spent a total of around eight years in solitary confinement, including nearly all of the last five years. I spent three years in the box at Upstate, was out for just two weeks, and then was back in the box at Southport, where I have been for the last almost two years.

The isolation itself is torture. Mentally and emotionally, it breaks you down. Spiritually it strips you. The way it is built is to break you down as a person and push your family away. There’s no form of humanity among the people living and working here.

Solitary is not productive to anything they say the box is for. It leads to problems with my ability to communicate – we gotta yell to communicate with each other. The screaming and yelling is normal to all of us as a way to communicate. I have verbal

outbursts because of my human need for some type of communication. And outside of the box, I have difficulty interacting normally with other people, and I don’t communicate anymore. Naturally, when you are out of the box or are talking to your family, you yell or seem angry. The box is not conducive to helping us communicate with people. Solitary leads certain characteristics to come out that otherwise wouldn’t. Eye contact means a lot and I can’t keep it. Eye contact deteriorates in the box.

Solitary eats away at you. It is hard to remain the same as you came in. As a result of being in SHU, I have experienced anxiety, depression, weight loss, social withdrawal, and feeling disoriented. I sometimes talk to myself out loud. I am alone in my conversation. I never talked with myself until I came to SHU. They say you’re sane if you talk to yourself and no one responds. Well I hear all parts of the conversation. So I guess I have lost it. I know mentally I’m deteriorating.

I also sometimes start hallucinating. I hear things or I see things that I don’t actually hear or see. Sometimes, if I’m thinking about something, I’ll see it there in front of me. I think about my crime and I actually go through that whole situation and it feels like I am actually going through it even though it is not actually happening. When I snap out of it, I know I need mental health.

You either adapt to solitary, or you end up on mental health meds. I’ve adapted but it has broken me down to where I do seek out mental assistance for some of the thoughts that run through my head – often more violence. Not toward anyone in particular. But it is a built-up anger.

Two years ago, I requested mental health. But mental health here is only concerned with putting a person on medication. I don’t need medication. Medication here has people acting like zombies – just sitting there, sometimes drooling. I’m scared – I don’t want that medication or that I will end up like

that. Also, if I took the medication and then refuse it, I'm concerned that this could lead to a conflict with the staff and potentially a new charge. And I don't trust just anybody. Talking to the CA is therapy. I can't talk to mental health like this. I'd have to curb what I'm saying. Because they will tell a CO what I said. If I had a conflict with a CO and I was trying to figure out how to resolve it, they might write me up for that or tell the CO. So I don't deal with mental health anymore.

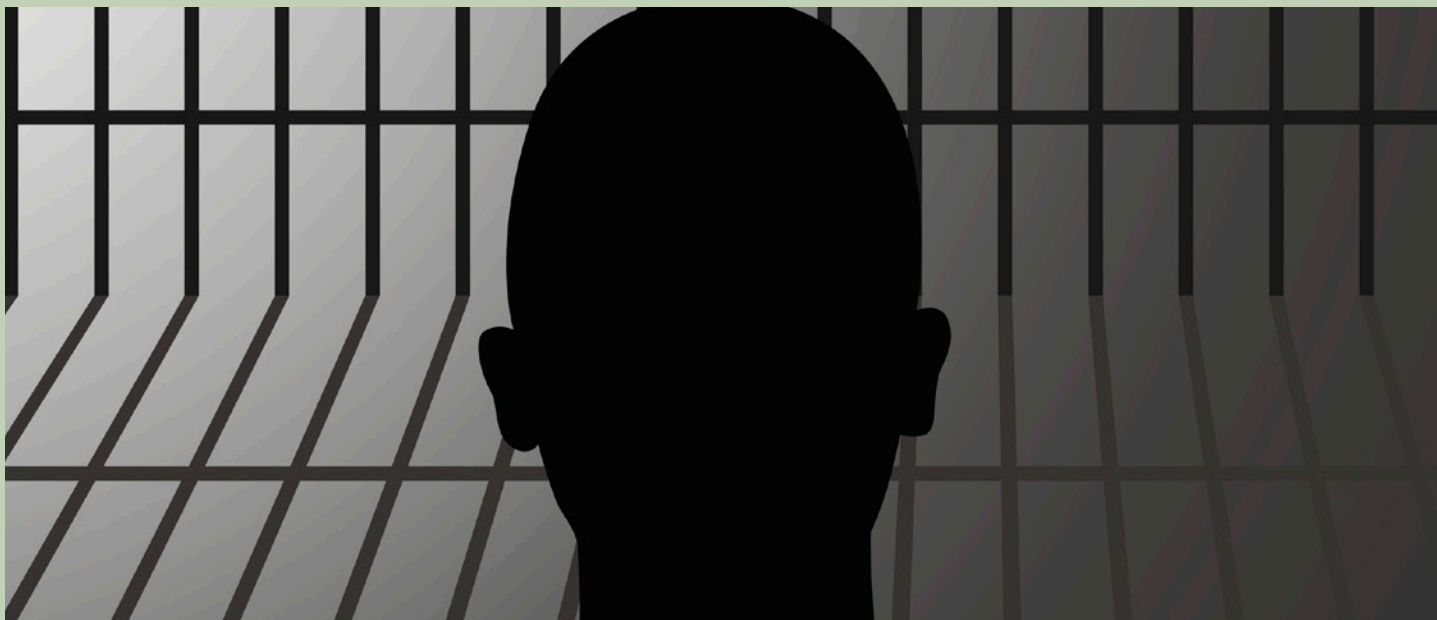
Being here makes you paranoid. Because you are here by yourself, when I am around people the first thought I have is that they're gonna hurt me. I know I have a paranoid reaction to a lot of things. But also staff are out to hurt us. I believe that. Instead of counseling us, they put us in cages and let everything build up. After it builds up, then the COs start antagonizing us: playing with our food, taking away commissary. And commissary is necessary just to have the essentials, like soap, toothpaste, and deodorant. It is agitating that they mess with these basic things. It makes us react violently. If you talk to staff in a civilized manner, they still mess with us. It is just aggravating. Now that I'm older, I can sometimes let it roll. But it still bothers me that they nitpick and harass incarcerated persons. I'm trying to hold on.

And this SHU at Southport is worse than many others. There are truly mentally ill people here. People who are spitting and throwing feces. Yet, the COs treat us all like animals. This place is like a zoo. I compare it to a dog getting abused – COs kick, curse, and throw things at us. They bring their personal problems from home and take it out on us. If we respond, we are wrong. If we don't respond, they'll keep going. We're the outlet for their anger. Although they are supposed to be responsible for care, custody, and control, they are only concerned about control. There is no care.

Just as one ridiculous example, when you move from one cell to another, they make you carry your bag with all of your property in it, even though you are shackled with handcuffs connected to a waist chain. The bag can weigh up to 50 pounds because it has all of your property, books, clothes, pillow, and such. One time, I fell while carrying my bag. I made it to the second landing of the stairs. I missed a step and fell backwards down a couple stairs. You're shackled so you can't grab anything to break your fall. One CO helped me up. The other laughed. Luckily, I didn't seriously hurt anything.

There is lots of staff brutality at Southport. Officers beat incarcerated people for nothing. D-block is the worst – there are lots of children there. Staff jumps on them and then will say that the kids jumped on them. When the kids ask to see medical or mental health, they are not allowed. The COs will say that they're fine. For one young person in D-block, the COs recently broke his nose.

I only go to recreation once in a while because I don't like being touched by the officers. They're provoking us to say or do things. I have been threatened with harm. I keep myself safer by staying in this cell. Some of the officers play and tamper with mail too. Also, the COs don't treat your family as human beings. They treat them as if they are incarcerated. Incarcerated people should be given someone to write or call that is above the superintendent that actually does something to address the abuses. I write to a lot of people but nothing has happened to improve my situation. I am afraid – not of the fight, but of receiving more jail time. I'm not scared of them, but I'm scared of the repercussions. If they jump me, I'm gonna get a new charge. That's scary because I'm getting so close to going before the Parole Board. My voice, just as many others, has no sound within this prison system.



I AM ENDURING

I came to Southport with a multiple year SHU sentence after being brutalized by staff at another prison. Although I was beaten so badly that I was hospitalized for multiple days, had a fractured bone, and continue to suffer medical effects, I was sent to the box for multiple years for allegedly assaulting staff and was prosecuted and sentenced to more prison time.

Solitary confinement has a devastating impact on people. People's mind and humanity changes while in isolation. Solitary makes people much more antisocial. I have seen many people at Southport deteriorate. Young people at Southport in particular have no sense of how to act, and there are no programs to help them grow or improve their behavior. No one is concerned about them in here, and there are no regular opportunities to have one-on-one interactions. The only one-on-one interactions are if someone wants to talk to mental health, which many people are not comfortable with. It makes most people feel as if they will be viewed as crazy. If a person in the SHU is even slightly mentally or emotionally fragile, the chances of

them breaking down are high. I witnessed a man kill himself while in a SHU at a previous prison before I was transferred to Southport.

Prison itself has had an impact on me physically, mentally, emotionally, and socially. Just being in a cage 23-24 hours a day is a difficulty in and of itself. Caging animals for years is inhumane and deemed animal cruelty, yet it is considered rehabilitation for human beings? According to whom? When and where did anyone fairly test this theory to assess its impact on people and how did we determine it was legal? Such are questions that shall find no answers. Because the fact is that solitary is punishment and nothing more. In here, it is punishment, punishment, punishment.

Despite the horrors of solitary, some people become better in hope that they will be given a second chance, but many accept the reality that there is no forgiveness and no second chance. I am able to do different things to help me cope – I read, write, and draw for instance. I can cope. But others can't, and they start talking, screaming, and yelling. Screaming, banging, and yelling in the SHU

is infectious and once it starts, it continues to build, particularly for people who have mental health needs. Talking to someone you know is difficult and at times impossible due to either distance or noise of everyone trying to be heard. Solitary drives people crazy.

The idea of caging people as a means of rehabilitation is like referring to child abuse as a proper means of discipline. Nothing that debilitates a person's morals and principles or conscience can be considered a good thing. And what of those who are struggling with their morals, principles, or conscience from the start? What will spending years in a cage do to them? A man or woman could go insane if left alone on a small island for years, so who could possibly conceive that being alone in a cage would have no damaging effects? Not only on the ones caged, but also on those locking the cages. To make things worse, Southport denies people contact visits without cause. To deny people the privilege to hold and kiss their children, embrace and kiss their family members, wives, or girlfriends without a disciplinary "loss of visit" sanction or a "non-contact" visit disposition, is a form of cruel and unusual punishment upon both the people incarcerated, and their loved ones. Yet, at Southport, with plexiglass barriers, this privilege has been revoked from hundreds of people who do not have "loss of visits" or "non-contact visits" dispositions. Human contact, especially with loved ones, is a primary normality of human nature. The system is claiming to rehabilitate by inhumane means. But what would be the result of protesting against such circumstances? More than likely even harsher penalties with each disciplinary infraction.

At Southport, I have seen other people get jumped and beaten up by correction officers. The COs are not trained at all on how to effectively relate to people. There are some security staff who take this job to feed their families, while others take it to exercise their hate or anger. Officers constantly goad men whom staff realize are outnumbered and in chains. Surely, this is a cowards' paradise, and

a man's cross to bear. Still, it is hard to feel safe in chains around those who hate you.

They also mess with our mail in here. I used to draw on envelopes for my daughter, but in here it is not permitted. Alone in a cage, they have a problem with normality. I have filed a lot of grievances to complain about various abuses. However, when you file a grievance you are basically writing to the same people you are writing a grievance about. It is always my word against DOCCS staff, and other DOCCS staff always side with their colleagues. For example, Southport's medical assistance is very poor. I've had to file numerous complaints and grievances several times before being given medical care, and I've had to file lawsuits because of this lack of care. Many other people have had similar problems getting medical assistance here at Southport.

On one occasion, I talked to mental health staff about my feelings, including how much anger I feel. But then the mental health staff talked to security, and I received a disciplinary ticket and more SHU time. Other times I tried to talk to a mental health staff person about my feelings, but she related to me in a judgmental and biased manner.

I rarely go out to recreation. I sometimes go just to be in the sun. But going from one square cage to another is not even recreation for a Chihuahua. Recreation in Southport consists of a one-man cage

"On one occasion, I talked to mental health staff about my feelings, including how much anger I feel. But then the mental health staff talked to security, and I received a disciplinary ticket and more SHU time."

“More money is spent on prisons that don’t work than on programs that do or could work. Prison is a form of torture, not rehabilitation. It does more to mentally handicap an individual than turn an individual into a productive human being . . . Environments that do further damage to the mind cannot be considered a remedy for crime prevention.”

outdoors about the size of a parking space. There’s no recreation equipment at all, not even a pull-up bar. All one can do is walk in circles. Who comes up with this type of treatment?

Making matters worse, sometimes it is even hard to breathe in our cells and they can become unbearably hot in the summer. There are no fans in the cells. There are only vents in each cell that pull in air to ventilate and remove dust. At times, certain COs cut the vents off as a tactic, especially during the summer when it is hot and muggy. There is no air conditioning on the galleries or in the cells. When it gets hot, all we can do is hope for a breeze through the small window opening in front of our cells. On days like these, all you can do is try to survive the stifling heat alone in your cell.

I suffered from severe migraines due to the injuries I received when I was beaten at another prison, and I was not able to get the treatment I needed. I have had to fight for every medical treatment I have gotten and I am still fighting. I had a growth on my tricep so I signed up for sick call, but they sent me to see OMH instead of a medical doctor. They told me that they didn’t believe that I had a medical problem, and even after all my advocacy eventually got me a biopsy ordered, medical staff stood over my shoulder while I was getting the biopsy and said, “I bet it’s just a zit.” But then eventually they cut out the growth. I have also lost several pounds at Southport due to certain medications I was forced to keep taking.

I am grateful that they provide some cell study programs at Southport. I appreciate the kindness and respect of the teachers – not everyone who works within the prisons sees it as an opportunity to mistreat us. I believe the teachers want to help people. On the other hand, cell study teachers only come by once a month, and I dislike that we’re not allowed to participate in any real correspondence courses. I also have not been allowed to get the substance abuse workbook or an Aggression Replacement Training workbook. If I was allowed to participate I would. I love reading, and the books I receive from outside prison book programs I have contacted, help me the most in here. It may take a while to get them, but they send me a few books at a time.

More money is spent on prisons that don’t work than on programs that do or could work. Prison is a form of torture, not rehabilitation. It does more to mentally handicap an individual than turn an individual into a productive human being. And for those organizations that do strive to do the job that true rehabilitation can do, their greatest opposing forces are DOCCS and politicians. The same people who claim to want to stop crime.

Environments that do further damage to the mind cannot be considered a remedy for crime prevention. I have been in solitary confinement for over two years now. In that time I witnessed a man kill himself. I witnessed men become so angry during caged arguments that they throw urine and feces at one another. I never witnessed such behavior in

general population. Those with family or friends on the outside are lucky enough to get a visit, but most people don't. It's easy to lash out in violence when one feels like he has nothing to live for, or that no one cares about him. Some are violent just to feel alive or a sense of purpose.

And that is what prison and solitary do to most men and women – they give them no sense of purpose or robs them of what little purpose they felt they once had. And if someone does have any hope, the Parole Board is extremely cruel and they kill the hope of freedom.

And then there's the loneliness. One may find it hard to fathom feeling alone while surrounded by hundreds of other people. But those who find that hard to fathom are blind to the fact that even those who are not in prison get lonely. Including a loneliness from not having an intimate mate. It is a fight because this madness chips away at all of us.

I am affected tremendously every passing day by being in prison, whether in general population or solitary, but I choose to do what I can to stay strong.

It is a battle, but it is a battle I don't wish to lose. My strength through it all has been my faith in God. Not in religion, but God alone. Not that I have anything against religion. But there are many without faith or who find it too hard to have faith under such circumstances of prison or solitary. I too have felt that way at times. Nor could I begin to tell you why I haven't given up. I don't have the answer to such a question. Even facing a new charge and more time incarcerated when I was the one assaulted by staff, I feel I will find purpose to go on.

Before we can truly change the conditions of prisons, we must be able to change the minds of the people in control of the prisons. But will they change if they are benefitting from how prison currently is? I doubt it very much. It is good to know there are people out there who still consider us human beings. Too often people tend to use incarcerated people as a stepping stone in considering themselves better or more righteous. It is easier for them to feel better about themselves when they have someone else to look down on.

I am enduring. What choice does one have? It is either endure or be broken: mentally, spiritually, physically, or otherwise. Though many will swiftly judge me due to the circumstances that brought me to prison, I am truly sorry for what happened. It is not who I am nor is it who I was. I was a young irresponsible kid who did something foolish over almost two decades ago. It is not an excuse, but it is the reality. If God should condemn us the way we do one another, what hope would there be for any of us?





**SOUTHPORT IS LIKE THE MATRIX:
IF YOU GO IN, YOU MAY NOT COME OUT**

Southport is like the matrix. People come in, and end up spending years here. I know people who came in initially with six month SHU sentences and ended up staying at Southport for as long as eight years because of receiving multiple tickets.

To make sure I didn't get stuck at Southport any longer than my original SHU sentence, I didn't take any showers because I didn't want to have contact with any COs. I didn't go to recreation because I didn't want to be fondled and then end up saying something slick and get a ticket for it. I didn't talk to anyone. I had to make sure I didn't upset the porter so he didn't starve me. The discipline I had to exact on myself just to get out of Southport was crazy.

I came into Southport with a six month SHU sentence for refusing to double bunk in the general population at another prison. One time, I had spent over a year double-bunked at Upstate. I had received two years of SHU time after I was assaulted by COs. They punched me, and when I tried to protect myself, they cracked

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my ribs and head. At first, they tried to give me six years in the box for assaulting staff, but luckily, I got some help from people on the outside to get it down to 24 months instead.

Solitary is bad enough, but when they put me in the box at another prison with somebody else, it was an even worse form of torture. Once, they even put a known enemy in my cell on purpose. It really messed with my head. After over a year of double bunking, I couldn't handle it anymore. I wanted to be alone so badly that I tried to hurt myself. When I was sent to an observation cell – the boom boom room – that was the most degrading experience of my whole life. So when they tried to make me double bunk in the general population this time, I refused and ended up with a new SHU sentence and was sent to Southport.

Solitary in Southport has its own psychological effects. You're in your cell all day, and you have nothing. No TVs, nothing. It's officially 23 hours locked in your cell at Southport, but really it's 24. You're supposed to get one hour out-of-cell time a day, but the whole process just to go outside is dehumanizing. You get fondled so many times. It's how the COs discourage you from going outside. It makes it easier for them if you stay in your cell.

The COs make up their own rules that create the least amount of work for themselves. They use incarcerated people to govern ourselves. They pick a random person to be a porter to give out our food and clean up afterwards. That person governs everything. He gets to make all the decisions about giving out food. He can decide not to give you anything or can mess with your food, and the COs don't notice a thing or do anything about it because they're way out front.

You can't even take a real shower. You're supposed to get a five minute shower twice a week, three times a week if you're PIMS Level 3. You're supposed to get five minutes, but really it's more like two and a half. You've got to figure out how to get yourself clean, shave, clip your toenails and anything else

in just two and a half minutes. Then you come out of the showers almost butt naked, in your boxers. That's it. It's not right.

Worse still, the COs can be physically abusive. On my second day at Southport, there was an incident with this other guy who didn't really speak any English. He was a little guy, maybe 110 pounds. He tried to ask about his property, but the COs said something slick back. The little guy bugged out and cursed back. The next day, they took him down to the bullpen with restraints and I could hear them beating him up. They lied and said he kicked and attacked them first, but that would have been impossible. How could he kick when he's in restraints? Next thing I hear is them bragging to the rest of us saying the little guy's going to need stitches. It's like they were trying to scare us. That's how they get in your head. They play games with you. The COs are bad, but the whole system is rogue. I once heard an administrator tell someone asking for a time cut that his whole career has been based on keeping guys in the box.

It takes a strong person to handle solitary. That's why you have people talking on the gate all day, because you get bored and there's nothing else to do. People are talking all day every day. Plus, everything is cheaply made, so you can hear everything that's going on. You're all alone, but you've got no privacy. You have to become numb to the noise. There's no quiet time, except maybe from 3 am to 5 am, but that's because you have to sleep some time. I don't like socializing and I got frustrated at Southport when I heard other people constantly talking. I always wanted to be alone and be left alone. I was always thinking that there was someone against me. I tried to keep myself obsessively busy in order to avoid the reality of being in solitary.

The damage of solitary has stayed with me after returning to general population. When I finally came out of the box at Southport, I was a loner. I'm not in the box anymore, but I'm still a loner now. I know a lot of people, but I just don't want to be around them – or anyone. Solitary made me this way. I don't like people any more. Certain places with a lot of

movement, like the visiting area, get me really anxious and cause me to be over-vigilant and concerned that something bad might happen.

I'm out of the box now, but I know I will be back in again. I have already been in the box a total of 42 months during this prison bid alone. The system is set up for us to go there. We keep their jobs. Their union is too strong. We keep Southport open. We keep Upstate open. We keep those SHU 200s open. If you go in, you may not come out.



3

INTERSECTIONS BETWEEN SOLITARY, MENTAL HEALTH, AND SELF-HARM

Solitary confinement at Southport can lead people to suffer from mental health issues, and can exacerbate people’s pre-existing mental health needs. Southport is a NYS Office of Mental Health (OMH) Level 2 prison and over a quarter of people in the SHU are on the OMH caseload. In addition to people on the caseload, over half of survey respondents reported that they were either currently on the OMH caseload or had been in the past, which is about average for CA-visited SHUs but more than 10% higher than the rest of the prison system. Despite the large number of people with mental health needs in the SHU, Southport does not provide any group therapy or programming for people with mental health needs, and OMH staff only have short periodic clinic contacts with patients. At the time of our visit, Southport employed five full time social workers, and had just hired a sixth. They had no psychologists, and they used videoconferencing for all psychiatry. Mental health staff reported that they conduct rounds weekly in the SHU. Of concern, mental health staff displayed a lack of recognition of the possible negative impacts of solitary confinement on patients’ mental health or well-being. Specifically, despite the vast amount of literature documenting the mental health deterioration caused by solitary confinement, mental health staff at Southport reported that they do not see the SHU causing any negative impact or deterioration on people’s mental health. Corrections staff also displayed their lack of understanding of the negative impact of solitary. Specifically, Union representatives claimed that Southport is “one of the best kept secrets in the state,” and that because the 23-hour lockdown does not take place down in the “ground” or in a “dungeon”, it is not right to say that people are being deprived. These staff also claimed that people want to be in Southport’s SHU because they can be protected 24 hours a day in their cell.



Not surprisingly given statements by staff, numerous people incarcerated at Southport reported that mental health staff denied any negative impact of solitary. As one person stated for example, “I was told being depressed is normal and that my SHU time is doable.” In turn, numerous people reported that they did not receive the mental health care they needed, including many survey respondents describing how they had asked for mental health

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support and were denied assistance or had delays in receiving assistance. Indeed, nearly two-thirds of all survey respondents reported that they had received, been recommended for, or attempted to use mental health services in prison – much higher than the number on the OMH caseload. For example, one person stated “Sometimes I’ve asked to see mental health and I was straight out denied.” Another person reported “I get depressed at times – rather a lot – and I cannot get on the mental health caseload, nor have I been given any medication, which I requested.” Another person wrote that “I’ve been emotional and had several outbursts . . . and wrote to mental health at Southport, [only] to be ignored.” Several people reported that they did not receive mental health care even after thoughts or attempts of self-harm or suicide.

Also of serious concern, some people at Southport reported that they previously had diagnoses that should classify them as having a Serious Mental Illness that would require them to be diverted from the SHU to an alternative Residential Mental

Health Treatment Unit under the SHU Exclusion Law. Instead, because their diagnosis had changed, they were still in SHU despite their significant mental health needs.

In addition to the lack of access to proper mental health services, people also had mixed to negative reviews about the quality of the mental health care received. Specifically, when asked about individual therapy, 13.5% assessed it as good and 44% as poor, about average for CA-visited SHUs. Many people reported that mental health staff essentially ignored their mental health concerns or told them that they were fine. As one patient stated, for example, “I’m receiving minimum, if any, treatment for my principle mental illness, which is being neglected.” Or another person stated “I told them that I was depressed and they told me to count backwards. Also, people expressed concerns about confidentiality. According to one person, “The CO stands there and hears all they are talking to you about, saying remarks like ‘he is alright’ or ‘he is faking.’” Overall, only nine percent of survey respondents rated mental health care as good at Southport, while 49% rated it as poor, ranking Southport in the bottom third of CA-visited SHUs.

**From 2000 through 2016,
NINE people – including one
person in 2015 and 2016 – committed
suicide at Southport, an average of
one person every other year.**

Self-harm is one of the most disturbing results of the combination of the negative mental health impacts of SHU and the limited mental health services provided at Southport. Staff indicated that typically if someone goes into mental health crisis, they would be transferred to Residential Crisis Treatment Program (RCTP) observation cells at Elmira, though they could go to an RCTP at another prison. Staff reported that it almost never happens

that a person from Southport ends up at Central New York Psychiatric Center (CNYPC) after going to an RCTP. Instead of providing people with the psychiatric support that they need, people are returned to the very SHU conditions that led them to engage in self-harm or go into crisis. A large number of people reported that they had been sent to an RCTP and many people reported repeated trips between the RCTP and the SHU, including after incidents of self-harm. Over 57% of survey respondents reported that they had been to an RCTP at some point since they had been incarcerated. Over 18% of all survey respondents reported they had been to an RCTP after being in Southport's SHU, 5.7% had been to an RCTP multiple times, and some people reported many trips to the RCTP from Southport.

In a related manner, Southport has one of the highest rates of suicide and suicide attempts/ self-harm in New York prisons. From 2000 through 2016, nine people committed suicide at Southport, including one suicide each year in 2015 and 2016, which is the second highest rate for all DOCCS facilities for this two-year period. In addition, there were 78 incidents of suicide attempts or self-harm at the prison during 2015-16, the highest rate of such incidents for all DOCCS prisons. Survey respondents also reported a high incidence of self-harm incidents at Southport. Specifically, 54% of survey respondents reported that self-harm frequently occurs at Southport, placing the supermax in the bottom third of CA-visited prisons, and 27% of survey respondents said that they themselves had attempted self-harm at least once at Southport, about average for CA-visited SHUs, indicating the disturbingly high level of self-harm in SHU across the system.

People discussed the direct connection between the torturous conditions in the SHU and their resultant self-harm. As one person described, for instance, "I [have] been in the box/KL [for multiple years]; now all my letters stop. I have no contact to my son and my mother. I have no money for stamps, deodorant. No visits. I am becoming more and more depressed. I feel the staff is together and they want me to stay in the box. I've tried to kill myself three times. I can't take it no more. I just want out."



The following narratives highlight the negative impact of solitary on people’s mental health, the particularly negative harm for people who have pre-existing mental health needs, the failure to divert people who have significant mental health needs – including those who engage in self-harm – from the SHU at Southport, and the devastating consequences.

ATROCITIES BEHIND THE WALLS

I have a long history of mental health needs. I repeatedly have received mental health treatment since I was a young child. I have been diagnosed with a serious mental illness – bipolar, manic depressive disorder and a list of others. I had countless hospitalizations and one long-term residential treatment stay prior to being incarcerated. My case that led me to be incarcerated was in the Mental Health court, which is only for people who have a “serious mental illness.” I didn’t comply with a condition of the mental health court and so was sentenced to prison time a couple of years ago.

My life was ruined and it has been horrible ever since then. It has been a constant nightmare. I was physically abused in county jail and then at Rikers by staff. After I came into the prison system, I continued to face abuse. A lot of atrocities take place here behind the walls. I was first in a medium security prison. They found unauthorized medications in my cell and they punished me with two months in solitary confinement. I was assaulted at that other prison while being called [the n-word] and a slew of other epithets. I had swelling to the head from the beating, but I was then denied medical treatment. While I was in the box, I hung myself and an officer cut me down. I was taken to an outside medical hospital, then sent to a mental health crisis observation unit at another prison, and then sent right back to solitary where I received more tickets.

That started a more than six month cycle between solitary, self-harm, observation cells, more disciplinary tickets, and solitary. I spent a number of those months in the box at Great Meadow and a number of months in Southport’s SHU. I also received more disciplinary tickets while in the SHU, for having pills that were given to me for my sciatica nerve or having law library materials or because I was still eating my breakfast after I was asked to complete it.

Although I had a long history of serious mental illness, the Office of Mental Health (OMH) has me

“Although I had a long history of serious mental illness, the Office of Mental Health (OMH) has me listed as having an adjustment disorder and so I was able to be held in the SHU. . . . I attempted suicide at least five times during this time period. I didn’t want to live. The SHU really brings out the worst in me.”

listed as having an adjustment disorder and so I was able to be held in the SHU. I even initially was given an OMH Level 3 despite the fact that my case was in mental health court. My OMH level has changed numerous times; I have been a Level 3, a 2, a 6, and a 1. But I have never been given an S-designation. So I spent those more than six months straight in the SHU.

I attempted suicide at least five times during this time period. I didn't want to live. The SHU really brings out the worst in me. I hung myself innumerable times. Each time I hung myself with sheets, someone alerted staff to cut me down. Even while in a preventive suicide unit, I hung myself by a towel. Other times, I swallowed my inhaler, paperclips, and zippers. I have been sent to the mental health crisis observation units numerous times, including multiple times at Great Meadow and from the Southport SHU.

Solitary is terrible. And Great Meadow and Southport are the worst of the SHUs. Staff treat you real bad. There are severe obstacles we encounter when we try to go to recreation, including that you are still locked down and that staff are always looking to beat you. So I decided it is not worth going. As a result, I am locked down all of the time. And officers are always looking to beat you. They'll take you to the blind spots and beat you. I've been called [the n-word] more times on this bid than I have in my entire life. By people who work for the government. COs called me a no good [n-word] slave. It has been a constant struggle, with a large fear of retaliation, not knowing what's coming and how it's coming. I have written many people about these problems, but there is still no hope. There is a stigma associated with incarceration that allows it to be completely acceptable to beat incarcerated people within an inch of their lives and to continue to have a job. They can call you monkey [n-word] on a constant basis, and attack anyone at any given moment they feel warranted without reason or justified cause. Someone who has a comfortable pension shouldn't call you [n-word] and beat you.

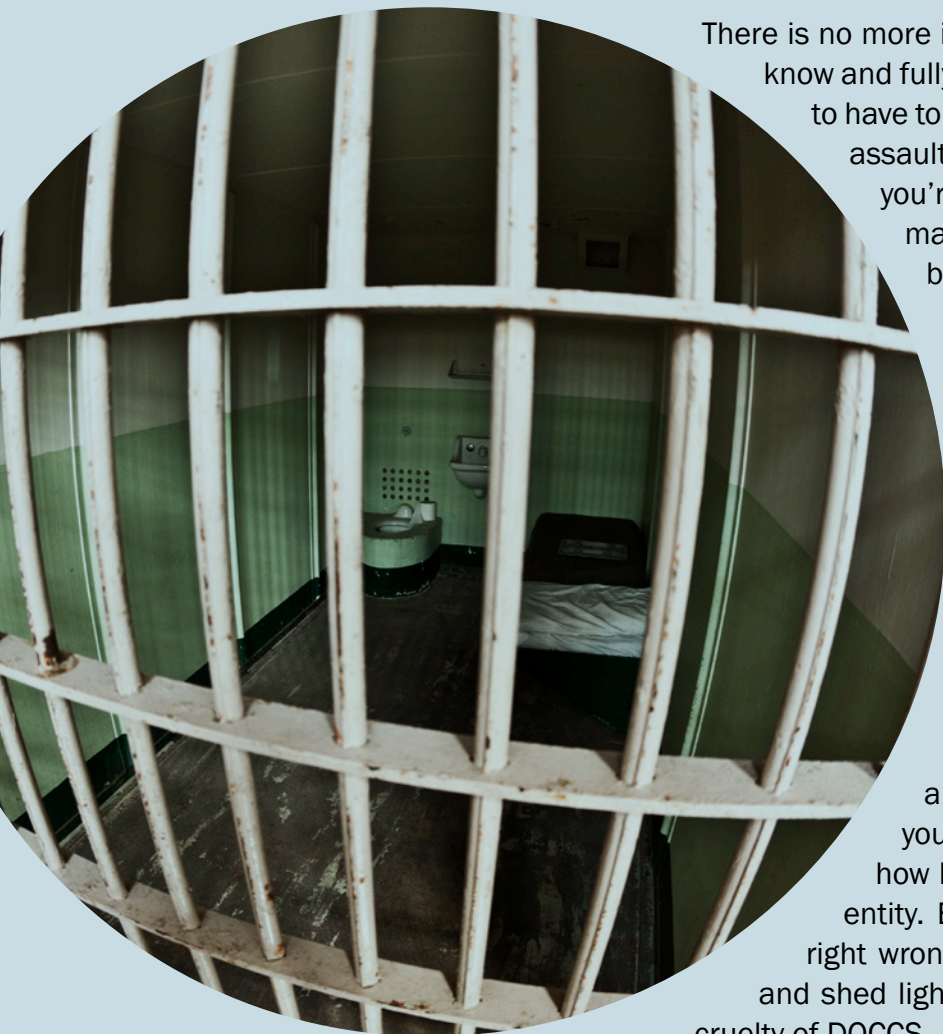
Attacks by staff happen throughout the Department. When I was in the observation cell at Great Meadow, there was a patient from the Behavioral Health Unit (BHU) who was assaulted to the point that he suffered a fractured leg and lacerations that required over 20 stitches. He had a mental illness so he kept trying to cut himself to get proper medical attention but was denied going to an outside hospital. Similarly, another person brought to the observation cell from the Great Meadow BHU, who had autism, was beaten by COs while I was there.

Southport is not much different and is also very depressing. The COs are always trying to beat someone. I really constantly tried to avoid all contact with security staff. Southport takes your manhood away. I didn't receive any educational programs or materials. You are handcuffed to go to the shower, and only go twice a week for five minutes. Also at Southport, the medical staff have extremely poor attitudes. Where in this country can medical staff talk to a patient in an abusive way or ignore patients like they do here? It is next to a miracle to be able to see a doctor. Moreover, staff were not even permitting me to maintain basic human hygiene at Southport. Plus, I lost contact with my family. They tampered with my mail, and only a limited number of family were attempting to write to me because some of my family are unable to write.



As a result of being in the box at Southport and other prisons, I couldn't sleep. I was nervous all the time. I had involuntary muscle twitching. My hope was transformed to despair by the SHU. I had a lack of interest in everything. I talked to myself. I had nightmares and ill feelings. I felt constant stress and suicidality. I frequently had thoughts of hurting myself and often acted on them. Also, because of the lack of exercise in the SHU, my body ached. I suffered from severe headaches and had spine pain. I had trouble coping with activities of daily living. I often felt restlessness, distraught, and isolated.

Luckily, I was transferred from Southport SHU, but I am still being held in keeplock at my new facility. I still remain under a lot of stress. And it doesn't help not being able to be in touch with the people you love. It is a constant struggle not receiving my proper mental health services and having my mental health needs untreated. Too many times I have been interrupted from taking my life when they cut me down from my cell. I am facing all of this abuse in maximum security prisons and solitary confinement for allegedly stealing five cologne bottles with a retail value of \$276.




There is no more in life to be lost in the world than freedom. I know and fully understand the 13th Amendment. But now, to have to put up with racial slurs, beatings, unjustified assaults, violating searches, and harassment. If you're treated like an animal, that's what you may become. Some people will become tired of being beaten and have nothing to lose.

Here I am David without a slingshot. I am trying to get the help to acquire the justice that is needed. But sometimes, I feel it is in vain. I feel powerless and overwhelmed. I am suffering in fear, not knowing what next evil they will concoct.

Staff tries to silence our voices with threats of retaliation by planting weapons. For grievances I filed, I have received disciplinary tickets or been denied recreation and showers. There is really no way to protect yourself against the system. I need to know how I can defend myself against such a powerful entity. But my voice is not to be muted. I exist to right wrongs. I feel I have a chosen duty to advocate and shed light and go against the very abomination and cruelty of DOCCS.

I am a political activist and I believe no injustices should be overlooked. I believe being a Black youth in America, my justice has been stolen and the current prison system is just a continuation of the rape, murder, and genocide of my ancestors from the slave ships, replaced now by slave bricks made to keep you captured like working mules. I believe in true freedom, justice and equality to all the human families of the planet earth.



“I thought only weak people would lose their minds and attempt suicide, but getting sent back [to solitary] pushed me over the edge.”

THE WALLS ARE CLOSING IN ON ME

I tried to kill myself twice last year within a short time. I had just finished a more than four year SHU sentence, and I was being brought back to Elmira prison. Somebody asked me to pass over a wick (a piece of string used to light cigarettes) to the next guy. I tossed it over and a guard saw me throw something. We both got searched, they found nothing on me, but they discovered a marijuana cigarette on the guy I was passing the wick to. They believed that I was the one who passed him the pot, and I got sent back to the SHU for another eight months. I also lost a year of visitation and a year of good time. So I never made it back to general population and now, I have done almost five straight years in the box.

I was just about to leave solitary, and instead I was immediately sent right back over a piece of string. I am in my early thirties right now. I consider myself a strong individual. Not a quitter. I thought only weak people would lose their minds and attempt suicide, but getting sent back so quickly pushed me over the edge.

Being in solitary is like sitting in your bathroom for almost 24 hours a day for years straight. You are stuck here. You start hearing voices and you argue more easily. You go crazy like an animal in a cage. This place really is like a dog kennel but for humans. Some people lose it and start throwing feces. We say ‘they’re boxed out,’ meaning they lost their mind. It’s torture.

I often feel extremely enclosed, as if the walls are closing in on me, suffocating me. I am constantly

depressed. I am paranoid most of the time because of my long stints in the box. I don’t like to be around people. I now find it hard to sleep. My body aches most of the day from sitting in one spot. I can’t speak to my family – the COs have even taken away my visits. All because I have a drug problem. And they don’t try to help me with this problem. They just punish and torture me.

When I first started experiencing adverse mental health effects, I was panicked and didn’t know what to do. People just want out of solitary and for good reason. I respond to the dark phases I go through sometimes by keeping to myself and sometimes by trying to connect with other incarcerated people. I am a mental health Level 3 patient. I am medicated for my depression. But, OMH is not helpful. They don’t really care. When I get called out for a mental health one-on-one session, the mental health staff person just asks me: do you feel suicidal? Are you taking your meds? How are you responding to them? And that is it. It typically last 10 minutes. Then when I need to meet with the psychiatrist, it is through a teleconference. I have a real problem with this psychiatrist; everyone does. I was recently taken off my meds because I missed four sessions with him. I didn’t go because he asks me questions like, “what’s suboxone going for in there? What was your arrest for? Was it drug related?” I am a recovering addict; I don’t want to hear about this.

I also messed up my arm recently. They did an X-ray but not an MRI and I was just given ibuprofen rather than any real treatment. I have back pain that stems from bad arthritis. The doctor told me, “oh, we all have

a little arthritis,” and did not treat me. The nurses even told me that it wasn’t worth getting treatment in DOCCS because it is not effective. They said, “just wait until you get out for treatment, because the treatment here just makes it worse.”

The COs can do anything they want to anyone. They have access to your food, your mail, and have total control over your life. When they found me after my suicide attempt, a group of COs came in to my cell and beat me up. They slapped and kicked me like they do with almost anyone who attempts suicide because there are no cameras in our cells and if anyone tries to report them, they retaliate.

Even coming down to the visiting room to talk with the Correctional Association, the officer who was escorting us started harassing an old timer because he wanted to talk to your organization. The CO threatened to confiscate the old man’s shoes, claiming they were contraband. The old guy had been wearing those shoes for around a decade. After making a big show of running them through the metal detector, the CO finally gave them back. But he made sure to call us all snitches before we left.

I am a porter and I hand out food. In some ways that is lucky for me because if I wasn’t a porter, I would be in my cell almost 24 hours a day every day; I rarely go out to recreation particularly when it is cold. On the other hand, sometimes some trays of food are missing items and do not have the proper food for people who have dietary restrictions and needs. I will tell the CO and the CO will say, “well deal with it.” This leaves me with a choice: who do I give the trays with missing food? This automatically creates tensions between me and the other incarcerated people. I get threats from this. My solution is just to give myself the worst tray.

I grew up in a good family. I just started hanging with the wrong crowd and got badly addicted to drugs. I

was sent to my first youth facility at age 13. I ended up doing robberies to pay for my addiction. That’s what led me to prison, my drug addiction.

If you think being sent to the SHU helps people with drug addiction, you couldn’t be more wrong. Being constantly locked in a tiny room with nothing to do just makes me want to take drugs even more. In the SHU, there are no rehabilitation programs, which you need to one day receive a conditional release. Twice since my attempted suicide, my urine came back dirty because of pot. I received another 16 months SHU time, another 12 months loss of visits, and another 12 months loss of good time. After all I have been through, when someone offered me pot, is it really a wonder that I broke down and said “yes”? I am a recovering addict, who just attempted suicide, couldn’t see or talk to my family, and was locked in a tiny room with nothing to do and no access to any type of treatment programs for many years. Anything would have seemed like a welcome escape.

There are no benefits to punitive segregation. It is damaging to all who are subjected to it. It damages us all slowly. DOCCS knows but they don’t care. They don’t want these prisons to close down or jobs to be lost. You have people like myself who have a drug addiction problem and need drug therapy, yet all they continue to do is give punishment in the SHU. I have served years and years in the SHU – all for drug tickets, and I have yet to get into any DOCCS substance abuse treatment program. Why? Because they keep placing me on the waiting list. Then they force me to double bunk with whomever they want, forcing us into altercations, and when fights ensue, they penalize us heavily with large amounts of SHU time. It is all a big scam. But nobody would believe us because no one gives us in here an ear or hears the voices of the ones who are truly being oppressed in manners some out there would not even begin to comprehend.

STAFF NEED TO RESPECT US AS PEOPLE

I have spent almost ten years in solitary confinement during my incarceration, including three years straight the last time. I have been denied parole release from prison while in solitary. Most of my misbehavior reports are non-violent so I don't feel I deserved to be in the box for all these years for things so small. I did not hurt or assault anyone.

Even with so few opportunities for physical interactions between staff and incarcerated people at Southport because people are in their cells 23-24 hours a day, roughly 84% of survey respondents reported they frequently hear about staff physical confrontations, and nearly half reported they had personally experienced a physical confrontation with staff at Southport.

Solitary is very stressful. I suffer from depression and anxiety. I've also become very paranoid in solitary, and I have hallucinations while I'm here. Sometimes, I even hear voices. In addition, I suffer from claustrophobia and have suicidal thoughts, all of which are made worse by solitary. I have received mental health treatment since I was in my early teens. I spent several months in Bellevue Hospital as an early teenager because I was hearing voices telling me to kill someone. Since I have been in prison, I have been on the Office of Mental Health (OMH) caseload for several years. At one time, I was an OMH Level 1 patient for a couple of years, though now I am a Level 3 patient. I am not sure what my diagnosis is. I have attempted to harm myself multiple times and have been sent to the observation cells around 10 times.

The mental health services in solitary are not very good. They do not really help you. I had problems with mental health staff at Southport. When I first came to Southport, a physician took me off of my mental health medications and mental health staff would not discuss it with me at all, even though I wanted to remain on my medications. One time I told my social worker that I was having problems with the security staff and that they were abusing me. The social worker told the COs what I had said, and they

made fun of me. I wrote to the OMH unit chief and people in the central office of OMH, but nothing was done. Another time, I wrote up a different mental health provider because she was being disrespectful, wouldn't answer my questions, and would order me to leave the room whenever she felt she was done with a session with me.

I also suffer from a chronic medical condition that causes problems with my lungs, skin, and eyes. The medications I take keep the condition stable. I did participate in cell study at Southport, though I often wouldn't see any staff for long periods of time. In the month before I took a test to get my high school equivalency, I didn't see any staff.



The worst part of being in solitary is that it plays with your manhood. Solitary also makes me argumentative because I am stressed out, and I end up taking it out on my family members – who are not responsible for me being in solitary. Fortunately, for a while anyway, I was able to write to my family and received letters back from them. But I haven't seen my family in years and wish that I could because I think that the visits would help me.

The staff at Southport only make things worse. COs took my property on multiple occasions and several irreplaceable photographs were lost. Staff threw away books that I and others had in our cells. Also, while in solitary at Southport, I didn't come out of my cell for fear of being assaulted by staff. In my first few months at the prison, three people on my block were beaten by staff. I was afraid to go to recreation. Every time you come out of your cell – for recreation, visits, legal visits, or a call out – you are always cuffed and your cuffs are attached to a waist chain. Probably only about a quarter of people in my block at Southport went to recreation regularly. Everyone else was also afraid to go to recreation for fear of being assaulted by staff.

I actually did well when I first got to Southport – in about three weeks I got to Level 3 privileges and received a 60-day time cut. It wasn't enough for the many years of solitary remaining, but it was something. But after a while, I began having more problems at Southport. Specifically, my personal mail wasn't going out to my family. I can't honestly say that these problems were because of my contact with outside groups, but I have been locked up 18 years and been in a lot of prisons and never had problems with my mail going out to my family before. Also, COs kept coming into my cell and throwing my stuff away, and didn't even leave a search sheet. Plus, there were ants all over my cell and staff wouldn't come to spray. I just stayed in my cell as much as possible to avoid contact with the COs because they were still beating people up and doing anything they want. I was afraid they would set me up with a weapon.

Staff personalize problems with the population and abuse them. New COs who come to the facility frequently become out of control and disrespectful.

Eventually I couldn't take being at Southport anymore and I tried to kill myself once again in the

fall of 2015. I took over 60 pills of all kinds – I don't even know the names of them. I was taken to the hospital and had my stomach pumped. I was sent to an OMH unit at another prison. Once I got there, I refused to eat for a week. I was told that if I ate, they would get me out of Southport, which is how I ended up at Great Meadow. I also was made an OMH Level 1 patient again. However, I'm still in SHU – just at another prison.

The way to reduce staff abuses is for people to simply respect one another inside. If the staff could simply respect the people who are incarcerated as people, the whole situation could be much improved. I have no problem being of assistance to support change. Even if I die in the process, at least I can help the other brothers and sisters in the struggle so they won't have to go through all of the pain and suffering I had to over the last two decades of my imprisonment.

SOLITARY DESTROYS PEOPLE

My safety, security, and life are in danger here at Southport. I have been in solitary confinement for the last three and a half years since I was a teenager, and now I am in my early twenties. I still have years of additional SHU time. I have substantially deteriorated mentally and emotionally. I have lost contact with family and friends. I have developed a mental illness. And I have lost weight.

And now, I have been assaulted twice, threatened, deprived medical care, food, property, toilet paper, and mental health services, all in less than 60 days. I have filed grievances, spoken to the captain, deputy superintendent for security, and the superintendent about being assaulted, but I have gotten no help.

Most recently, I have been assaulted again by staff here at Southport for filing a grievance about the first assault. I was having a mental health crisis. I asked the sergeant to contact mental health staff as soon as possible. The sergeant stated, "I am not calling mental health staff unless you say that you want to kill yourself." I then said "I want to kill myself." The sergeant made a call for mental health staff. Meanwhile, officers conducting showers at the time stopped to see what was going on. Then the sergeant and an officer came to my cell and the sergeant said, "I heard you filed a complaint on one of my COs." When I asked what that had to do with



my mental health, the CO said they were about to show me why I shouldn't file complaints. The sergeant then said "we are going in his cell." I moved to the back of my cell, the gate opened, and the sergeant and multiple COs entered the cell. One CO grabbed me by my neck and pushed me to the ground. Another officer began kicking me in my lower back area several times. While I was laying down, an officer bent down and started to squeeze me around my neck with his hands. I tried to say "I can't breathe." The other officers were kicking me in my back at the time. As he was choking me, I passed out for lack of oxygen. When I regained consciousness, I was being carried out of my cell. I was ordered by the sergeant to walk on the gallery. The sergeant then smacked me on my face and said, "now you can see mental health, b*tch." I spoke to mental health staff, then asked for medical treatment. They took pictures of my injuries, but though I complained that my neck and back were in pain to the nurse, I got no medical treatment. The motive behind this malicious and brutal assault was because I filed a grievance on a friend of the sergeant's for an assault the previous month.

The initial misbehavior report that placed me in SHU was for refusing to give a urine sample for a drug test. I was very young at that time. SHU is supposed to be correcting people that break prison rules, but at the same time it breaks human beings down in the process. I have long ago corrected my wrongful behavior. I do not wish to break any more facility rules. I am not a threat to the safety or security of the facility. I would like to return back to general population, so I can complete my needed programs, get back in contact with my family, and hopefully make my conditional release date. I'm sure you know the effects of solitary confinement. It destroys people.

"One CO grabbed me by my neck and pushed me to the ground. Another officer began kicking me in my lower back area several times. While I was laying down, an officer bent down and started to squeeze me around my neck with his hands. I tried to say "I can't breathe." The other officers were kicking me in my back at the time. As he was choking me, I passed out for lack of oxygen."



4

PERVASIVE STAFF BRUTALITY, RACISM, AND ABUSE IN THE BOX

People incarcerated at Southport reported that the facility is a “hands on” prison, where individuals face widespread and horrific staff brutality, racism, and abuse. Numerous people reported specific incidents in which they had been physically beaten by staff. As one person – representative of many others – described, “I have been punched, smacked, and struck by officers.” Another reported that a “correctional officer . . . punched me in my face and he and his coworker threw me down the stairs. They wrote me up and went out on workers’ compensation.”

Survey responses from people incarcerated in Southport’s SHU ranked the prison as one of the worst CA-visited SHU units across New York State on various indicators of staff brutality. Roughly 84% of survey respondents reported that they frequently hear about staff physical confrontations with people incarcerated at Southport, and nearly half of all survey respondents reported that they had personally experienced a physical confrontation with staff at Southport, ranking Southport in the worst 10% of all CA-visited SHU units. As one person reported “while I was handcuffed, shackled, and in a waistchain, I was punched in my face and mouth numerous times, and picked up and slammed into the ground face first.” Multiple people reported that COs often beat people in the showers.

People also reported sexual abuse by staff. The most common form of sexual abuse residents reported was abusive pat frisks. Roughly 63% of survey respondents reported that abusive pat frisks occur frequently at Southport, and over 72% reported that they had personally experienced abusive pat frisks, both ranking Southport in the worst sixth of CA-visited SHUs. People described “extreme” and “overaggressive” pat frisks. For example, one person reported that “when getting searched, they tend to

squeeze balls.” Another reported that “going to recreation here means having my private parts hit, pushed against the wall, and buttocks swiped down the middle.” In addition people reported sexual harassment. For example, one person reported that “the urinalysis officer here at this facility makes sexual comments to us, comments on the size of sexual organs and things of that nature . . . It’s uncomfortable.” Some people also reported specific sexual assaults by staff, including staff touching people’s private parts and forcing their own onto incarcerated individuals. For example, one person wrote that he has experienced, “tight handcuffs, extreme pat frisks [and] putting my hands through the cell slot backwards to be cuffed and an officer putting his private parts there.” Roughly 23% of survey respondents reported that sexual abuse other than pat frisks occurs frequently at Southport, and an additional 33% reported it occurs once in a while, ranking Southport in the worst sixth of CA-visited SHUs.

In light of the physical brutality and other abuses people described, 73% of survey respondents reported that they frequently feel unsafe at Southport, ranking Southport as the worst CA-visited SHU. When asked how unsafe they feel, 64% reported that they feel very unsafe and an additional 29% reported feeling somewhat unsafe, ranking Southport in the worst seventh of CA-visited SHUs. Over 78% reported that there were bad relations between staff and incarcerated people (57.6% said relations were very bad and 20.7% said they were somewhat bad).

Looking at DOCCS’ own data: despite the infrequent opportunities for interaction between staff and incarcerated people at Southport because people are locked in their cell all day, Southport had high rates of staff use-of-force Unusual Incident

73% of survey respondents reported that they frequently feel unsafe at Southport, ranking Southport as the worst CA-visited SHU.

Nearly 90% of people in the SHU at Southport are Black (62%) or Latino (27%).

Only 2% of Correctional Officers (COs) at Southport are Black (1.4%) or Latino (0.7%).

Of all people who were held at Southport for the entirety of 2015, 76% were Black people.

Over 86% of survey respondents reported that racial tension contributes to other staff abuse at Southport.

Reports (UIR) and assault-on-staff UIRs, an indicator of physical confrontations between staff and incarcerated people and often an indicator of staff assaulting incarcerated people and reporting it as an assault-on-staff. During 2015 and 2016, Southport had the second highest rate of assault-on-staff Unusual Incidents of all DOCCS prisons. Similarly, during the same two-year period, Southport had the fifth highest rate of staff uses-of-force against a resident during an Unusual Incident of all DOCCS prisons. Unsurprisingly, Southport had one of the lowest rates of assaults between incarcerated people of all DOCCS prisons

In addition to physical brutality, many incarcerated people reported other forms of staff abuse at Southport. Numerous people reported that racial harassment and racism are pervasive at Southport and infuse all of the other abuses taking place. Nearly 90% of people held in the SHU at Southport are Black (62%) or Latino (27%), while only 2% of Correctional Officers at Southport are Black (1.4%) or Latino (0.7%). The percentage of Black people in Southport's SHU is extremely disproportionate, given that Black people represent only 13% of all people in New York State, and already represent a vastly disproportionate 50% of people in prison and over 60% of people in long term solitary units across the state. Even worse, looking at all people who spent the entire year of 2015 in Southport's

SHU (indicating they are people being subjected to the longest periods of solitary confinement at the prison), 76% were Black people. That means that Black people are being held in long-term solitary confinement at Southport at a rate nearly six times their proportion of the state population, leaving no question as to the racially driven infliction of solitary confinement.

*These racial disparities unsurprisingly translate into severe racial tension and staff abuse. Roughly 70% of survey respondents reported that racial tension was at least fairly common at Southport which, compared to the general prison population surveys across CA-visited prisons, ranks Southport as one of the worst few prisons. Moreover, over 86% of survey respondents reported that racial tension contributes to other staff abuse at Southport, again ranking Southport among the worst CA-visited prisons. Numerous people reported that COs repeatedly used racial slurs, particularly against Black people, though also Muslim and Latino people, including calling people the n-word, sp*c, "Trayvon Martin," "monkeys," and other racially bigoted names. As one person reported, "going to recreation, the CO makes racist remarks. He calls Black [people] monkeys and [the n-word] in a cage. The Superintendent laughs at the remarks made." Another person stated that "an officer asked me if I have sex with a camel by myself or does my wife*

participate . . . I guess he asked because my wife and I are both Muslim and in her photos she was wearing an hijab.”

*More generally, nearly 90% of survey respondents reported that verbal harassment frequently occurs at Southport, and nearly 90% reported that they personally had been verbally harassed at Southport, ranking the prison in the worst fifth of CA-visited prisons. People reported that staff called them names, used expletives, made sexually explicit comments, and issued threats. For example, one person reported that “I was told to shut the f*ck up or I will get beaten again like last time” and another said, “I asked an officer what time it was, and his reply was ‘it’s time to go f*ck’ yourself.” Someone else reported that staff “start calling people ‘ret*rded’ and say ‘where’s your husband?’, which I can deal with. But when they start saying how they had sex with my wife and that I am too ‘ret*rded’ to have a wife, [that is too much].” Ultimately, people described how the verbal harassment was reflective of staff’s dehumanizing attitude toward incarcerated people. For example, one person lamented that “we were called ‘untamed animals.’ I don’t feel like a mammal anymore or a human. I feel like a thing.”*

In addition, many people reported that officers would tamper with their food or deny them meals, denied people recreation and showers, issued false disciplinary tickets, stole their property, and carried out other abuses. For example, over 48% of survey respondents reported that staff had stolen or destroyed their property at Southport, ranking the prison among the worst few CA-visited SHUs. Moreover, people reported that if a CO or COs have targeted you for whatever reason, they may inflict a variety of forms of abuse. For example, one person reported that if someone is dropped from a higher level to Level 1 privileges because of some alleged misbehavior, “COs often will not feed him. They will often place him in a cell with no bedding, no linen, no clothes, or personal property. They can turn off the water and lights, and sometimes won’t even let

the person speak with medical staff. They could even batter and assault this [person].”

Moreover, for all of the abuses people at Southport – as across the system – reported, it is quite disturbing that there is a lack of meaningful accountability or oversight of the staff repeatedly accused of misconduct by Southport residents. Many people reported that if they raise complaints through the grievance system or otherwise, nothing positive happens and often they face retaliation. According to DOCCS’ data from 2013 and 2014, after medical, staff conduct was by far the next most grieved area, with internal block affairs (including issues such as escorts, cell searches, showers, books, etc.), correspondence, and property the next most grieved areas. Roughly 84% of survey respondents reported that the grievance system is poor and nearly 70% reported that they personally had faced retaliation for filing a grievance, ranking Southport in the bottom half of CA-visited SHUs. People reported that they had experienced forms of retaliation such as physical abuse, verbal harassment, stolen property, false tickets, cell searches, threats, and denial of recreation, showers, meals, medical care, mail, and/or other essential services. As one person reported, for example, staff “come to your cell and tell you to sign off [on your grievance] or they will beat you up.” Another person reported that “I was called into a room and told to stop complaining before I got something to complain about.” People also described instances in which they filed a grievance, and as a result, staff encouraged them to harm themselves. As one person stated, “I was told to tie a sheet around my neck and kill myself after [raising a complaint] to the Superintendent.”

Further compounding the lack of accountability for abuse, over 68% of respondents reported that the Southport administration does not prevent staff abuse at all, and an additional 23% reported that the administration does very little to prevent abuse. Many people reported that the administration condones staff abuse. As one person stated, “the [administration] encourages this type of behavior

and allows employees to file false misbehavior reports.” Also, 70% of survey respondents reported that having additional cameras at Southport would help address abuse, indicating a further lack of oversight over abuse at the prison. People described how all of the retaliation and lack of accountability leads to feelings of hopelessness in the face of abuse to themselves or others. As one person described, two officers “were beating on another [incarcerated person] and I was at my cell gate. Both COs told me to go sit down and mind my business or I would be next.”

Ultimately, people feel that there is nothing that can be done to protect them. As one person wrote, “you are subjected to so much mental, emotional, and physical abuse by the staff at Southport that it can drive the strongest minded person crazy and make them hurt themselves or someone else. And there is no one here to help because most people don’t know or care enough about an [incarcerated person] as a person to help no matter how bad we are assaulted. Nothing ever happens to the officers that assault us.”



The following narratives detail horrific accounts of the devastating staff brutality and abuse people have faced and continue to face at Southport.



I GOTTA STAY STRONG

I have been incarcerated on this sentence since I was a teenager, and I am serving a sentence of life without parole.

My Mother had me when she was 14, and I am the oldest of nine kids. I'm from the streets. My Mother started smoking crack when I was young, and I had to hustle to make sure I could eat. I was in a group home by the age of 16 and I had my son when I was that age, and three daughters after that. I had to do what I had to do to support my family and selling drugs became my method. I got caught up in a bad situation, and I killed someone. I had an ego. I didn't think of the consequences, and I threw everyone's life away: the man who died, my own and my family's.

I have now spent the last 15 years in prison, and unless something changes, I will spend the rest of my life in prison. For the first several years of my sentence, I remained in general population, never had any disciplinary tickets, was participating in family reunion program visits, and didn't have any difficulties. Then, I got a dirty urine ticket for weed

and received one year in the box. Since that time, I have been back and forth to Southport over a half dozen times, all for smoking weed. I have spent over five years total in solitary confinement, including the last year. The last time I left Southport, I was in general population for a few months, then caught another dirty urine ticket and was sent back to Southport. I don't think anyone should be in the box for smoking weed.

Solitary is definitely taking its toll. I do a lot of reading and I work out to try to stay strong. I gotta stay strong. I still got my family. I like reading autobiographies. Mostly of guys who've been locked up. Like Nelson Mandela. I also write to my daughters and sisters. I write a lot to my family to keep myself relevant. Otherwise, people tend to leave you behind. My family has stayed with me; they haven't left me behind. My youngest daughter – now a teenager – makes sure that her mother brings her here to visit me now. I tell my children that I live vicariously through them. I try not to let the situation break me. I remain strong.

“For the first several years of my sentence, I remained in general population, never had any disciplinary tickets, was participating in family reunion program visits, and didn’t have any difficulties. Then, I got a dirty urine ticket for weed and received one year in the box. Since that time, I have been back and forth to Southport over a half dozen times, all for smoking weed. I have spent over five years total in solitary confinement, including the last year.”

But I see solitary having effects. Whenever I go to general population, I don’t want to be around nobody. I want to be in my cell, by myself, with the lights off. I just want to be isolated now. I used to be very talkative, going outside everyday when in general population. Now even in general population, I sit in my cell for months. The SHU makes me anti-social. It makes me have a real messed up attitude – I can’t tolerate a lot of stuff. Any little thing sets me off. A little while back, my daughter said to me: “what’s wrong with you?” It looks like I’m mad at something. It takes its toll.

I also suffer from panic attacks. It makes me feel like I can’t breathe. I start dripping with sweat even though I am outside in the winter. Sometimes I start talking to myself. I don’t know why I do it. A couple months ago I experienced it again and it happens to me every couple of months. Sometimes, I talk to myself like I’m back in the streets. Sometimes, I talk to my Dad. He’s telling me to stay strong. I last saw my Dad in 2010. My Dad did a lot of time – he was in Attica at the time of the rebellion – and he didn’t like to come to the prisons to visit because he had spent so much time inside.

Last summer, my Dad passed away. I was able to attend his funeral and got to see my sisters, one of my daughters who I hadn’t seen in many years, my Mother, and many other relatives. As we were leaving, the COs were saying things that were inappropriate and harassing to me and my family, and I said to them that they were being disrespectful. I don’t know if that is the reason, but when we returned to Southport, there were COs standing there with guns pointed at the van. When we pulled up to the

draft room, there were six COs there with riot gear on – black suits, helmets, and gloves. Meanwhile, I am shackled at the legs, waist, and hands, and have a black box over the shackles. One of the COs gets into the van in front of me and tells me to get out. As I turn, he punches me in the mouth. A different CO then drags my shirt and another grabs my shackles and they take me out of the van and put me on the ground, lying face down with my mouth bleeding from the punch. One CO gets on my back, places his arm on the back of my neck, and starts punching me in the side of my face. He says “stop resisting” while I am not moving at all.

The COs then pick me up into a standing position and bring me into the draft room and then to a holding cage. One CO takes my head and rams my face into the wall. He tells me to stop trying to turn my head. And he rams my face into the wall again, even though I am not saying or doing anything. Another CO then starts twisting the waist chain around my ribs – trying to bruise or break them. He tells me to breathe – so that my ribs will break – but I don’t. A CO comes and cuts off all of my clothes. I am standing there buck naked. I just have the chains around me. They put a black mesh spit bag over my face. I wasn’t spitting, but my face was bleeding. Again a CO smashes my face into the corner of the wall. He grabs my neck and starts grinding my face into the wall. He tells me to stop trying to turn, and he grinds my face into the wall again. Someone says I am trying to kick him, even though my legs are still shackled together. So several COs pick me up so that my feet are off the floor and they try to slam me to the ground. While I’m on my stomach on the

ground, a CO takes my left ankle and twists it and another CO kicks me in the balls.

There were two nurses there the entire time this is happening. They don't do anything to stop it, but they do give me an examination and document that my lip was messed up, I had a missing tooth, bruises on my face, bruises and cuts on my knee, ankle, and wrists, and a swollen ankle. The officers drag me to a cell and threaten that if I spit they will knock all my teeth out. When I am in my cell, I tell the COs that I am going to kill myself and that I want to see a mental health counselor. When the counselor came, I told her what had happened, how I had just come from a funeral and they had beaten me up, and that I wanted to kill myself. I decided to go on a hunger strike and didn't eat anything for several days, refusing all food. I did not feel safe and needed to get out of there. These people don't respect anything – sometimes you gotta do things to get people's attention. I had to get people to see me outside of solitary. They put me on suicide watch there at Southport and then sent me out to an observation cell. After only two days, I was back to Southport solitary confinement. I remained on the OMH caseload for several weeks because I continued to have panic attacks. But I refused to take medication, so they took me off of the caseload.

The DOCCS Inspector General (IG) did come to see me several months later about the assault and he had pictures of my injuries, but I have never heard anything more from the IG. I filed a grievance about the assault and it was denied, but in Albany they granted it in part and said the incident was being investigated by the Office of Special Investigation. But it has now been several months and I have not heard anything more since then.

Meanwhile, they gave me three tickets for this incident, claiming assault on staff, attempted assault on staff, refusing a direct order, creating a disturbance, unhygienic act, violent conduct, and threats for things I allegedly said at the funeral. I was found guilty of all charges except threats and violent conduct and received an additional one year

in the box. I had come to Southport with six months of SHU time and I was supposed to be getting out of Southport many months ago, but then I got this additional year.

The officers beat up people and call it use of force and then they cover up the misconduct by giving us false prison violations. The medical staff are in on the cover up. It's crazy how these people get away with this because a lot of us do not have people to help us litigate or hold these people accountable for their actions. I was beaten while I was bound by chains and I did not cause this to happen, and yet there is no accountability.

“The only thing that could help to stop these abuses is to shut this place down. But people are having their rights violated throughout the prison system, not just at Southport.”

I remain afraid for my life because I continue to see the same officers involved in the assault. I have trouble sleeping at night because of the nightmares I am having where I keep seeing officers dressed in black. Though no matter what, I'm never gonna be broken. I'm too strong. I am trying to be safe here and do my time. Although I see the officers involved in the assault, I don't say anything. It is a lose-lose situation for me. Nothing good could come out of raising anything with them. I haven't had any other incidents since the assault, and I've been able to continue to have non-contact visits with my family.

Meanwhile, I hope that people reading this account take it seriously. The only thing that could help to stop these abuses is to shut this place down. But people are having their rights violated throughout the prison system, not just at Southport. People in prison need an outside voice to stop the abuse by staff and the false reports they write to justify their misconduct. People who are active in the protests related to Eric Garner's death and all of the other incidents of police brutality need to become active in the campaigns to stop the same brutality happening in here.

LIKE A SLAVE

Within the first couple of months at Southport, I had already been beaten by COs, set up with false tickets, and given more SHU time on top of the time I already had.

One day, the officers did a gallery search and got in my cell. A sergeant stopped me and asked if I had anything on me while a CO searched me with a metal detector wand. They told me I was smiling and ordered me to open my mouth. The sergeant said he saw something and then multiple COs started beating me down. They hit me with a baton on my back and my spinal cord. I was cuffed in the back the whole time and was unable to assault anyone, like they later claimed. I was beat down for several minutes. My wrists, arms, and ankles were so swollen I couldn't feel my arms. The sergeant was there the whole time and didn't do anything to stop it. They then put me into ankle shackles that were so excessively tight I couldn't move or walk. They threw me into the shower for what felt like 30-45 minutes. A sergeant came with a camera to escort me from the shower. I could barely stand up. I asked the Sergeant to loosen my restraints, but he said, "No, why should I have sympathy when you just used force against staff?" I struggled to get up, so they dragged me like I was a slave. I screamed continuously for help, cuffed in the back with one officer on both sides, cuffs ripping the skin on my wrists. I never endured that kind of pain before. The nurses saw my swollen body, bruises, and exposed flesh but didn't give me treatment. I put in for sick call every day and finally got an exam. The COs had tried to paralyze me with a baton, but the nurses didn't even stitch my wounds. They didn't treat me or give me anything for swelling. They just put me in a cell with no light switch – in D block they keep the bright lights on in the cell all day.

I overheard the sergeant telling staff how to put the ticket together. I read it and it said I was found with a piece of mirror in my mouth and diabetic pill I supposedly spit out. I told the Captain I didn't have anything, and he said I was not guilty of the diabetic pill but guilty of the mirror. How could I be guilty of one and not another? That's how I know this whole place is corrupt.

I asked for x-rays for my spinal cord and ribs, but the nurse put me down for chest and ribs. When I went down they only x-rayed my chest. The staff here look out for each other.

“I struggled to get up, so they dragged me like I was a slave. I screamed continuously for help, cuffed in the back with one officer on both sides, cuffs ripping the skin on my wrists. I never endured that kind of pain before.”



I ultimately received tickets for violent conduct, contraband, and smuggling, and received an additional six months in the SHU.

Since the time I was beaten up, I've frequently seen people beaten in D-block at Southport. I see COs provoke people all day. They play

games. That's what they do. On shower day, we have to be on the gate with a towel around our necks, and if we are not in that position, they can say we refused. They did that to an old man on the company, saying he refused to shower twice in one week. So he became stressed and started yelling to speak to mental health. It's messed up all around. I pray to God every night that things will be better. This place is terrible. Racist. They play with your mail and your food. When I went to my hearing, the officer escorting me made noises like I made when I was in pain as a way to make fun of me. Plus they give you more time in the box for silly stuff. I stay quiet and don't mess with anybody. I believe that because Southport has empty cells, they try to set people up with tickets. Like the way they set me up. And there is abusive, excessive use of force – at Southport and also other prisons across the state. I've been jumped four to five times since I've been incarcerated.

“The CO I had grieved punched me in the face, and then he and other COs started beating me. I was covering up as best I could. But I ended up with a busted lip, a cut on my thumb, and marks on my wrist.”

The box weighs on you. You have to control it. I have been in the SHU for over a year this time. When I start stressing out, I start working out. I try to clear my mind and organize my thoughts to stay focused. I go to sleep, meditate, and work out. Movement is limited, so I try to get out to recreation two to three times a week. I write letters to home. Certain people don't do anything in their cells and become mentally unbalanced. I'm at a place for people who have really lost their mind. That's why people do stupid stuff, like taking a bunch of pills. That's the tactic staff use to keep people victims in these conditions. I do my best in the circumstances. They provoke you, but I remain firm and strong and hold it down.

HARD FOR ME TO SMILE

I spent over two years in the Southport SHU the last time. I came to Southport then because of a dirty urine but early on in my time here I got beaten badly twice and ended up with assault on staff charges and ended up being here for years.

The first assault happened because I wrote a grievance about a CO. One day after I wrote the grievance, I was coming out for recreation, and the CO tells me, “Yo, your name is familiar.” I turned and the CO grabbed my head and said he owed me one. He let me go to rec but during the pat frisk before I went out to rec, the COs claimed they found a small piece of mirror and sent me back to my cell. When I got back to the cell, a few COs followed me into the cell. The CO I had grieved punched me in the face, and then he and other COs started beating me. I was covering up as best I could. But I ended up with a busted lip, a cut on my thumb, and marks on my wrist. The sergeant came and they brought me to the nurse, but then made me walk barefoot and in just my boxers in a waist chain, shackles, and cuffs from C-block to A-block. I had major headaches from the assault, but I never got to see the doctor, and the nurse just gave me ibuprofen. Medical in general is poor

at Southport because by the time they get around to really doing something, a person with a serious medical condition could have died by then.

Almost two weeks later when I went to the hearing for assault on staff charges, the hearing officer kept cutting me off and not letting me say things on the record. Eventually he cut the tape off and said to me, "Listen you little f*ck. I run this hearing, not you." An escort CO then came over and grabbed my neck. He punched me in the face and then grabbed me by the arm and removed me from the hearing room. Then another officer grabbed me and brought me to a corner away from any cameras. A CO punched me in the face. They brought me back to my cell and told me they would be back. Some officers came back and told me to stand against the back wall before they came in. I tried to cover up as best as I could. But they slammed me on the ground and started beating me. They brought me to the shower and a CO started slamming my face against the walls of the shower. I was already bleeding from my face at the time, and they still kicked me in the face. They finally stopped and I was lying in a pool of my own blood in the shower. When they came back, my knees kept buckling as they cut my clothes and finally they gave out. The nurse there said that I was about to pass out. They brought a gurney to bring me to the clinic. After the nurse examined me, I was taken to an outside hospital. I got stitches in my

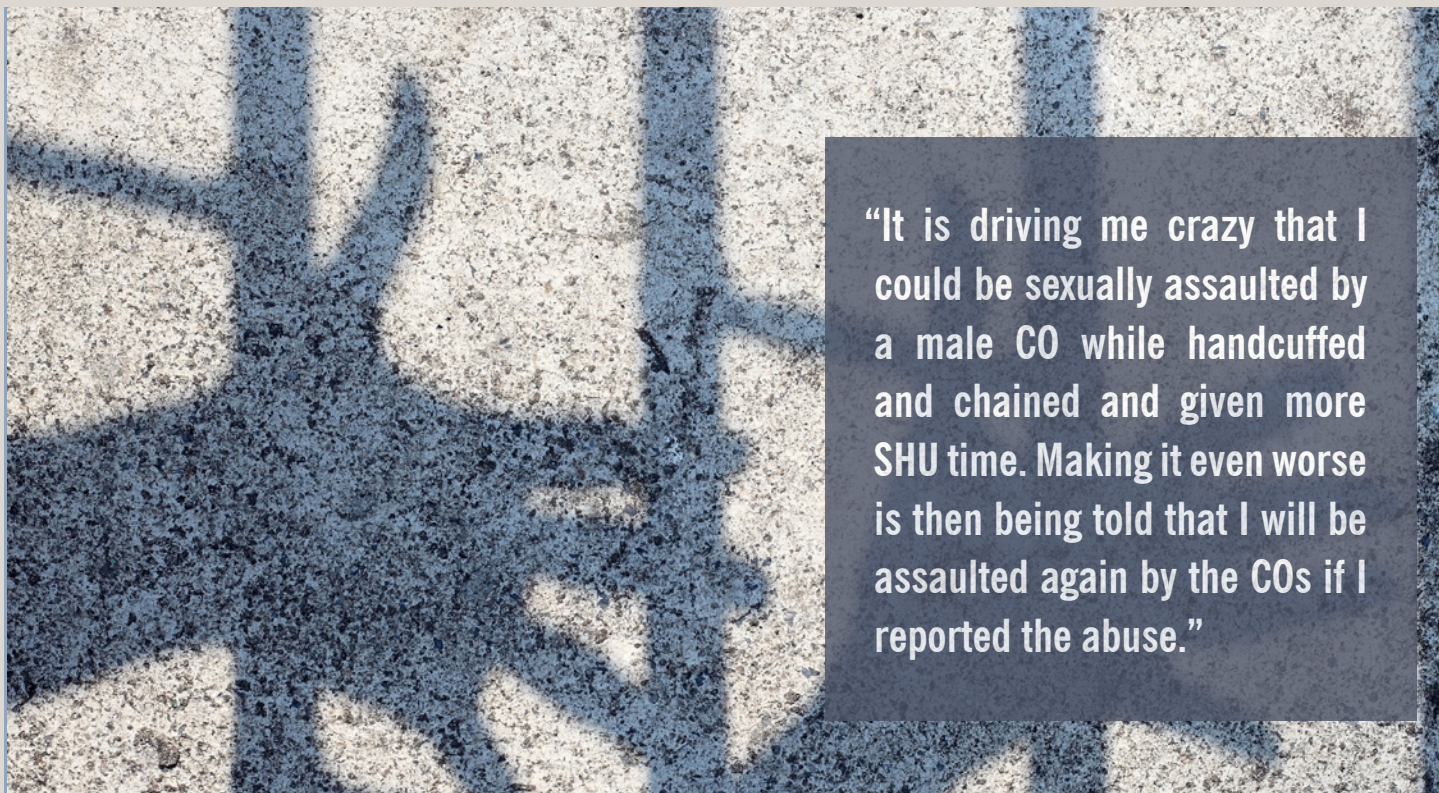
chin and my eyebrow. I tried to grieve this incident and took it all the way to Albany, but it was denied.

And that's how I ended up staying at Southport for so long. I stayed in my cell 24 hours a day the majority of the time and didn't go out to rec. I was trying to avoid being harassed in any way possible. The cell study was a joke – they just come to the cell, bring you materials, and then it's on you to understand. A teacher will spend 15 minutes doing 21 cells.

I have mood swings randomly and find myself acting out in ways I never did before, like arguing with other incarcerated people for little things that under different circumstances would not bother me. It's like we take our frustration out on each other because there's no other way around it.

My main thing, though, was that every time I heard COs with chains at Southport, I thought they were coming for me. I felt a lot of stress and depression. I wasn't hearing from my family. They said they were writing me but I wasn't getting the mail. I wrote to mental health requesting services at Southport numerous times. But I was denied services. They just told me to meditate and exercise. I eventually got out of Southport, but in 2016 I ended up back here again. In the end, I usually keep a smile on my face. But it's hard for me to smile under these types of abusive conditions.





NO ONE TO TURN TO

I have spent over four straight years in the SHU and a total of over six years in the SHU since I was incarcerated – about half of my imprisonment. I have also been to Southport multiple times during my incarceration, and this time I have now been here well over a year. From being in solitary, I have suffered anxiety, and depression. I've lost 20 pounds and have difficulties sleeping. Unfortunately, I have received multiple additional tickets and more SHU time since being in solitary at Southport. Shortly after I arrived at the prison this time in 2015, an officer came to my cell during the Sabbath and ordered me to provide a urine sample. Because I am Jewish and very observant of my religious tenants, I refused the urine test at that time. For the refusal, they gave me nine more months in the SHU. Another time they sent me to the hospital because they thought I was under the influence of drugs, but the urine analysis was negative for all substances. They were so angered by this that when I returned from the hospital, they had searched my cell while I was gone and "found" marijuana, which had been planted there. I received a ticket for these drugs and they lowered me from a SHU Level 3 to Level 1, which resulted in me losing privileges.

The worst abuse I have faced here at Southport, though, was in 2015 when a CO sexually and physically assaulted me while I was handcuffed. That day, COs brought me out for a urine analysis. While I was handcuffed, one CO grabbed me and a second CO touched my testicles and tried to masturbate me. When I didn't get an erection, the CO hit me in the face and told me that the next time he tells me to get it up for him I better do so. The CO who tried to sexually assault me had previously come to my cell on multiple occasions and asked me to expose myself.

I filed a grievance about the incident and filed a complaint with the Inspector General's office (IG). As retaliation, a CO came to my cell and called me a "b*tch" and told me that my grievance was going to go

nowhere but that I was going to get “f*cked.” The next day, I received a fabricated misbehavior report for allegedly threatening to throw feces at staff and was sentenced to an additional three months in SHU. They also then placed a plexiglass cell-shield over my cell, which caused my cell to get very hot and prevented any meaningful air circulation.

Staff continued to threaten me afterward. I did not shower or go to recreation for months because I was concerned that COs would assault me. I simply refused to come out of my cell to avoid giving them an opportunity to fake a physical confrontation with me. Beat-ups happen at Southport weekly. There are no video cameras in most of Southport to record the assaults and abuse by the COs, allowing staff to cover up for one another’s actions.

The IG and grievance systems do not work, and there is no accountability for staff abuse. I’ve written to everyone about these problems: DOCCS, Albany, even the state supreme court. But staff have repeatedly interfered with my ability to raise complaints. For example, I learned that staff sent the letter that the state court wrote to me, back to the court. I discovered this when I later received a large envelope from the court and inside was the original letter from the court stamped “Return to Sender”. The staff have also been messing with my mail to my daughter. I received a Christmas letter from her and based on what she was saying in the letter, it was clear to me that she had written me previous letters that I did not receive

When the IG did come to interview me about the sexual assault, I refused to come out of my cell because the COs were going to jump me if I went to the interview. One CO had told me ahead of time that other COs were going to jump me if I spoke to the IG, and afterward, a CO came by and told me I did the right thing by not coming out. I wrote to the IG explaining why I did not come for the interview and told the IG I would speak to him if he came to my cell. I never received any further response from the IG.

It is driving me crazy that I could be sexually assaulted by a male CO while handcuffed and chained and given more SHU time. Making it even worse is then being told that I will be assaulted again

“The mental health staff cannot be trusted to protect a patient’s confidentiality. Several people have been assaulted and/or disciplined by COs for what they have said in private to mental health staff. And many people who have been sent to a mental health crisis observation cell have been assaulted by staff.”

by the COs if I reported the abuse. This abuse and threats have caused me real emotional problems and severe anxiety. There is no one to turn to for help. I have not been able to get any assistance from the Office of Mental health (OMH). OMH staff are so unresponsive and uncaring of people in SHU that when someone in SHU is in a real bad place, other people will throw feces on that person’s window to force OMH staff to attend to the person they have been ignoring. I was on the OMH caseload several years ago but have not been on it for some time. The mental health staff cannot be trusted to protect a patient’s confidentiality. Several people have been assaulted and/or disciplined by COs for what they have said in private to mental health staff. And many people who have been sent to a mental health crisis observation cell have been assaulted by staff. As a result, those patients are scared and refuse to complain, out of fear of retaliation. Mental health staff are also coercing people into signing off that they received treatment when they had not been fully provided the services. For example, the OMH staff threaten people that they will not get time cuts unless they acknowledge that they have received mental health services. Similarly, OMH staff threaten people in SHU with stopping their mental health medications if they do not sign off on other OMH services they did not receive.

Medical staff is not much better than the OMH staff. The Southport doctor took me off of medications without even seeing me. I have some structural back and leg issues and I haven't been able to see a doctor. Medical staff have refused to do any follow-up care from my last prison, and they refuse to address my serious medical needs, disregarding MRI and other findings. All the results from the tests that they have given me – an MRI, a Bone Density Test, and an EMG – were not accurately reported to me, so they could deny me medication and care. Plus, sick call is conducted cell side in the presence of COs, so there is no confidentiality and everyone hears and knows everyone's medical conditions. The medical staff also tell COs everything about our conditions. Most upsetting, medical staff will cover up the assaults and injuries caused by COs.

We need to bring these abuses to the public's attention because they should not be happening. I wish for everyone on the outside to take good care of yourselves and others, now and always.

PLEASE, WE NEED HELP

I have been at Southport for almost three years and have more than a year to go before I will be released from solitary. I have received numerous tickets since being at Southport and accumulated additional years of SHU time while here. I try to survive by not focusing on how long I will be here and by reading and keeping in contact with family and friends by mail.

I have a history of a heart-related illness and was having chest pains in the spring of 2015. I always get nervous when I have a medical problem because making the choice to ask for help from the nurse puts me in danger of being assaulted by a CO. That's exactly what happened this time. When the nurse came to take my blood pressure, the CO told her to take me to the infirmary, which was unusual. She could have taken my blood pressure while I was still on the unit, but the CO would not let her. The nurses are intimidated by the COs and will do what they are told by security staff. On the way to the infirmary, in the main corridor, another CO and a sergeant met up with us. The sergeant does not like me because I had filed a grievance against him. He had been involved in an incident at another prison when I was assaulted by staff and broke my rib.

This time, once in the corridor, the COs and sergeant pushed me against the wall and told me to put my hands on the wall. Then one of the COs began to choke me. This CO is known for this type of stuff. He loves to fight with people who are incarcerated and give them an opportunity to fight him one-on-



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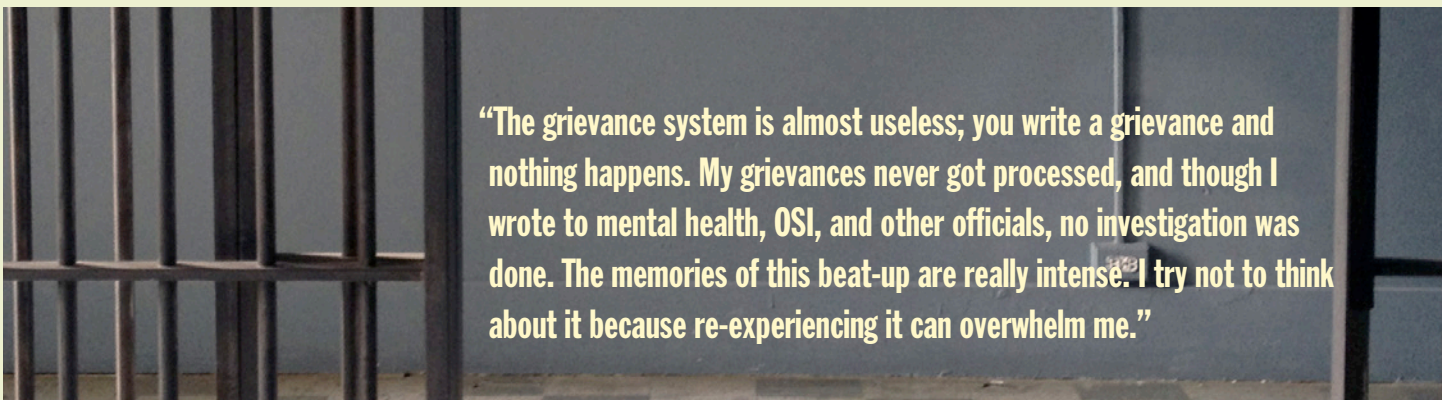
one, but if he is not winning, other COs will jump in because they are usually watching the fight. I fell to the ground while this CO was choking me and they put me in full restraints, cuffing my hands behind my back and shackling my legs. When they put us in full shackles, they order us to do stuff like turn around or move in a certain way, which is sometimes difficult to do, and when we can't precisely follow their orders, they use it as an excuse to assault us. This is what happened to me. They said they felt threatened by my movements, but if I am in full restraints, how could I be threatening toward them? One of the COs that was choking me, pulled my cuffed hands up behind my back, and while doing this, he stepped on the leg shackles. This hurt so much that I screamed in pain. The sergeant then shoved me against the wall, and I fell down again. They all started laughing at me and mocking me. They picked me up off the ground and started beating me again. I fell to the ground again and blacked out. When I came to, they were dragging me across the ground commenting on how I was too heavy to be pulled by my leg shackles to the infirmary. They then put me on a push cart used for transporting food and took me to the infirmary.

When I got to the infirmary, the nurse attached me to an EKG to assess my heart condition. I told the nurse that my neck was really hurting me. One of the COs then grabbed my neck and started shaking me. The nurse just stood there and showed no concern for my wellbeing. My heart was beating out of control, and I could feel that my blood pressure was off. The nurse looked at the EKG records and told me that my heart was fine. I told the nurse that there is no way my heart was OK. Then she told me that I wouldn't be able to see a doctor until at least the next day. I wanted to leave the infirmary right then because I was scared of being assaulted again, but the nurse would not let me go. I was in the infirmary for the next two days fully shackled and still never saw a doctor. After the nurse completed her examination, I was taken by the COs to a room in the infirmary. I was still fully shackled at this time, and they lifted the chains up over my head and violently pushed my arms and legs up while

they threw me on the infirmary bed. I blacked out again because of the pain. When I woke up four COs and a sergeant were in my room yelling at me to get up because they were going to take pictures of my injuries. I couldn't get up because I was sore all over. I told them that I was hurting everywhere and that I couldn't get out of the bed. They said that if I can't get up, they would report that I had nothing to report. They turned around and walked out of the room. On the third day after the incident, I saw a doctor, who took a video and pictures of my injuries. Although I tried to request these medical records, I was told the video does not exist, and I am still waiting for copies of the pictures.

After I recovered somewhat from the assault, I ordered the video of events on my housing unit and in the facility from that day but have experienced several difficulties in getting the tape from the facility FOIL office. I asked for a video for 6:00 to 9:00 pm, but though the incident happened in the evening they gave me a video for 6:00 to 9:00 am. I renewed the request, but they said the tape I want is no longer available. They tried to charge me more than \$150 for the tape, when the cost should only be less than two dollars for every hour requested. I contacted the DOCCS Office of Special Investigations (formerly the IG), and they came to visit me. I gave them a statement and filled out another FOIL request for the OSI report, but was informed that the documents could not be produced because the investigation was not completed. My grievances and statements have been disregarded and nothing has come of my efforts to bring this event to light, except for me being at more of a risk to further retaliation. The grievance system is almost useless; you write a grievance and nothing happens. My grievances never got processed, and though I wrote to mental health, OSI, and other officials, no investigation was done. The memories of this beat-up are really intense. I try not to think about it because re-experiencing it can overwhelm me.

I'm not the only one they beat up. I saw staff jump on somebody and beat that person in their cell for no reason. I was banging on the gate to get the person



some medical attention. The person was saying that his arm was broken, but no one was helping him even though the nurses and COs were outside of his cell laughing. Despite his pleas, the medical and security staff went in the bubble on the unit where staff sit. I then started banging louder and calling for help. In response to my efforts, I received a ticket and was given 6 months SHU time. The man's shoulder and fingers were fractured in the incident.

Southport is a very hands-on environment. There is a lot of staff abuse, especially in the 3:00 pm to 11:00 pm shift. COs constantly harass people and make racist comments. They have denied me showers, destroyed my medications, carried out abusive cell searches, destroyed pictures and letters and other property of mine, and of course, carried out physical assaults against me and others. The COs are able to do anything. Even for the COs who aren't bad, they stay silent or turn a blind eye on the abuses. The staff have no ability to resolve conflicts in any manner other than being abusive, especially when dealing with people who have some mental health issues. There are some guys in here who are really messed up. They are loud and screaming all the time because the box is driving them crazy. When this happens, it becomes contagious and others on the unit start making noise. In response, housing staff turn on all the fans on the unit, even in the winter, to drown out the sound. The unit becomes freezing and all of us are made to suffer even if only a few people are being disruptive. Staff make no efforts to speak with the persons yelling, attempt to address their

concerns or complaints, or ask mental health staff to intervene. It doesn't make any sense because their actions just lead to further frustration and anger for all of us. It is clear we are not people to them, and they feel no obligation to treat us fairly or address any of our needs except to abuse us when they are frustrated or angry.

For me, the majority of the time my emotional state is good, but sometimes I get very stressed and depressed. I have to constantly worry about being jumped by COs and that creates general anxiety. Even when the physical abuse by staff is being done to other people, it is traumatic to bear witness to. I get nervous when I am around other people and staff, especially when there are no cameras. My symptoms have become more intense since I've been in solitary. I only go to recreation once in a while, and I only had one visit in the last year, though I don't like visits. I used to be on the Office of Mental Health (OMH) caseload, and in the past I went to the mental health crisis units numerous times. But the mental health staff are very condescending and disrespectful, and so I decided to stop taking my medications in order to get off the caseload. Also, there is no confidentiality, and COs will make fun of people with mental illness and make sick jokes about people.

I remain concerned about being abused by staff and so I only want to stay on a unit with video cameras. But no one is safe here, and things must drastically change to end the abuse by staff. I and others need help. Please.

5

MINOR CONDUCT RESULTING IN LONG-TERM SOLITARY

People spend months and years in solitary at Southport. Overall, although international standards state that more than 15 consecutive days in solitary amounts to torture, DOCCS reports that the average length of stay in Southport's SHU is 7.6 months. People come in to Southport with already long SHU sentences, and many people receive additional disciplinary tickets and SHU time while they are at Southport, prolonging the amount of time they have to spend in solitary. Numerous people interviewed reported that Southport was a place that you can get trapped in because you continue to accumulate additional SHU time resulting from staff-issued misbehavior reports. Southport officials estimated that between 40% and 50% of all people in the SHU at Southport receive additional tickets while there.

Analyzing DOCCS disciplinary data from 2015 and 2016 reveals that most residents are given additional SHU time and that during the last two years there has been a significant increase in disciplinary actions. In 2015 approximately 57% (315 residents) of the average annual population at Southport received at least one disciplinary ticket; that rate increased to 77% (379 persons) in 2016. For Black people, 64% of the 2015 residents had received at least one disciplinary ticket at Southport (no racial data is available for 2016), a rate much higher than for other persons in the SHU and another indicator of the racist infliction of solitary. Particularly given that people in the SHU at Southport do not have any interaction with other incarcerated people and very little interaction with staff, the high number of tickets issued is disturbing, especially considering the racial disparity.

Southport consistently issues a large number of tickets and imposes excessively long SHU sentences. Particularly disturbing is the increase in punishment during the last two years. In 2016 there were more hearings than 2015 (814 versus 643), and more individuals had multiple hearings and higher aggregate sentences, particularly for those receiving six month to multiple-year sentences. In 2016, 41% of the individuals receiving a ticket had two or more hearings, compared to 33% in 2015. In 2016, seven persons had more than 10 hearings, with one individual receiving 23 hearings during the year; in contrast, in 2015, no one had more than 10 hearings. In 2016, 24 persons had six or more hearings, while only 12 residents in 2015 had six or more hearings.

Moreover, in 2015 and 2016 more than 98% of all tickets resulted in guilty findings at Southport (through the internal DOCCS disciplinary system), even higher rates than the extremely high rates in the rest of the state prison system. In turn, people receive a large amount of additional SHU time while at Southport. Fifty percent of all people found guilty of a rule violation at Southport received an additional 60 days or more in solitary in 2015, and that increased to 75 days or more in 2016. The percentage of persons receiving an additional six months or more was 21% in 2015 and increased to 32% in 2016. The number of longer SHU sentences also expanded in 2016. Forty-six persons received a year or more of solitary time in 2016 compared to 22 in 2015. Fourteen 2016 residents were sentenced to an additional two or more years in solitary compared to six in 2015. Seven 2016 residents received three or more years of solitary time compared to two 2015 residents. Again racially disproportionate, Black people represented 67% of all people at Southport in 2015 who received

an additional 60 days or more in solitary. These extreme additional months and years of solitary time added on to people's sentences while they are already in solitary at Southport is unconscionable.

Among survey respondents, the median length of time people had already been in the SHU at Southport at the time of the survey was six months, and some people reported they had been at Southport for many years. Similarly, several people we interviewed reported that they had spent years in the SHU at Southport. Looking at people's time in solitary beyond just how long they had been held in Southport, the median length of time already in SHU at the time of the survey was 11 months, with some people again having spent years in the SHU and upwards of over a decade. In addition, people reported extreme lengths of additional time received at Southport. The median length of additional SHU time survey respondents had received while at Southport was five and a half months, and some people had received years of additional SHU time, upwards of over three additional years.

Moreover, many people reported much of the additional SHU time was for false or frivolous tickets. People reported receiving additional tickets for such reasons as having postage stamps they shouldn't have, innocuous letters or photos that are deemed gang material, or being beaten by staff and given an assault-on-staff ticket as a means of cover-up. As one person reported for example, "I was assaulted again in the staircase while fully restrained. Every week in Southport, there is at least someone getting assaulted and getting more SHU time for it." Similarly, another person documented that "staff constantly assault [incarcerated people] and say that [incarcerated people] assault them, in order to keep individuals in here. They falsify misbehavior reports to keep individuals here as well, and should be investigated."

People described how the box does nothing to help address the underlying reasons that lead them to receive the tickets and causes people to spend not only more time in solitary, but also in

Discipline has increased in Southport - 57% of the average annual population in 2015 received a disciplinary ticket and that expanded to 77% for 2016 annual residents, with 41% of 2016 persons who received a ticket getting at least two. In 2015, 64% of Black people received one ticket, a rate much higher than the rest of the SHU population.

Roughly 98% of all tier II and tier III tickets result in guilty findings at Southport.

Although international standards state that no person should be held in solitary for more than 15 consecutive days, the average length of stay in Southport's SHU is 7.6 months, and people often have spent more time in solitary before and/or after Southport.

Some people the CA interviewed had spent over four years in SHU at Southport, and a total of over 10 years in SHU.

prison altogether. Additional tickets and additional time in solitary, as well as the inability to participate in mandatory programs, make it more likely that someone will be denied release by the Parole Board. Only 3% of people in the SHU at Southport who went to the Parole Board from 2012-2014 were granted parole, much lower than the already very low rates of release across the prison system. Everyone else, although they had already completed at least their minimum prison sentence, were held in prison for at least one to two more years before being allowed another hearing. Among the 31% of survey respondents at Southport who had already been denied parole, nearly half had been denied multiple times. One person, for instance, had already been to the Board five times when he had a clean disciplinary record and was very discouraged that the outcome would unlikely be different his next time since he was now in Southport. A few people had been denied parole seven or eight times when they completed the survey.

As one person who received numerous tickets for using marijuana stated, “ASAT teaches that addiction is a disease. But DOCCS punishes us for a disease and now I’m gonna get hit by the Board. I’m not in for a violent crime and I have never had any violent tickets since I have been incarcerated. Instead of giving us programs that will help us, they leave us in the box. I have a drug problem. I smoke weed. When I’m dealing with family issues or other issues, I don’t act out or hurt anyone; I just smoke weed. I have 10 drug tickets and was never allowed a drug program.”

In contrast to all of the additional SHU time people receive at Southport, people reported that there were very limited time cuts given at Southport to reduce the amount of time they had in solitary. The median total time survey respondents had taken away from their SHU sentence at the time of the survey was 14 days. Some people had received longer time cuts, with 13 survey respondents receiving a total of more than 30 days, including seven who reported they received a total amount of time cuts of more than 100 days. However, the vast majority of people received little to no time cuts, and even for these individuals who received somewhat longer time cuts, 30 days or 100 days cut from SHU sentences is small compared to the additional several months and years that people receive from new disciplinary tickets.



The following narratives detail the frequency of false or frivolous tickets at Southport, the resultant additional SHU time, the failure of the box to provide any rehabilitative or therapeutic support, and the harm caused by all of the additional longer periods of time in solitary.

I WOULDN'T WISH SOLITARY ON MY WORST ENEMY

I wouldn't wish solitary confinement on my worst enemy. You can't walk more than ten steps. I recently spent several months in solitary. It lives up to its name – solitary confinement. You can talk to your neighbor every now and then, but then you'll get into an argument. Nights are hard to sleep. Your family doesn't know too much. You're cut off from everything.

Nobody knows what it's like. They tell you when to lock in, when to go to sleep, when to eat, when to shut up. One time, I went a whole week and a half without getting a shower. You have to eat what they give you and they starve you. I call it scraps. I lost 20 pounds at Southport. There were times when I would starve myself the whole day so that I could save the food from breakfast and lunch just to have a nice meal at night. For recreation, all you see are cages. I don't remember the last time I saw a tree, or a bird. You're supposed to put down for recreation and then get to go out. I put down every day, but they let me out only three or four times a week. Plus most issues with COs happen when we're going out for recreation.

In 2015, when I was in the SHU at Southport, COs gave me a false ticket because I had raised complaints. One day, in the middle of winter, I went out to recreation and while shackled, I slipped and fell because the ground hadn't been salted. After deciding not to come out for recreation for two weeks after that, I came out again and the ground

still wasn't salted. When I raised a complaint about it, staff told me to "take a sheet and hang myself." I filed a grievance about the situation, and the sergeant tried to get me to withdraw the grievance. I didn't withdraw the grievance, and soon after that, I was given a ticket for allegedly having two pair of pants and having braids in my hair. They gave me 150 days in the box that time. That was similar to another time at a different facility when a CO tried to dissuade me from testifying against another CO and then gave me a ticket for 90 days in the box after I testified.

At Southport, they are always giving out tickets. Right after I first came to Southport, I got 30 days of keeplock time for having three postage stamps that I had bought at my previous prison. Someone I knew went to the box for six months for a letter from his brother. They said it was gang material but then they didn't produce any material. It makes me want to rip up my letters because who knows what they'll say, which is bad because letters are like fresh air in a place where you always feel suffocated. Especially a letter from my mother.

My mother came to see me when I was in the box elsewhere and at Southport. She was crying because I was like a test animal. It's a cage. All we could touch were hands. I saw my daughter too, which was the first time since my father's funeral. I couldn't embrace her. I couldn't touch her. I could only touch her little hand.

And the security staff just make it all worse – even more than the tickets. At another prison, one time after I was restrained for a fight, an officer stomped on my head and chipped my tooth. At Southport, one time one of the sergeants became verbally abusive and started pushing me. I responded back to him that he was just doing this to me because I was shackled and the sergeant went for his baton. Luckily another CO stopped him. But you hear all the time about security staff beating people up at Southport – in your cell or after they drag you to the showers. It makes your spine tingle.

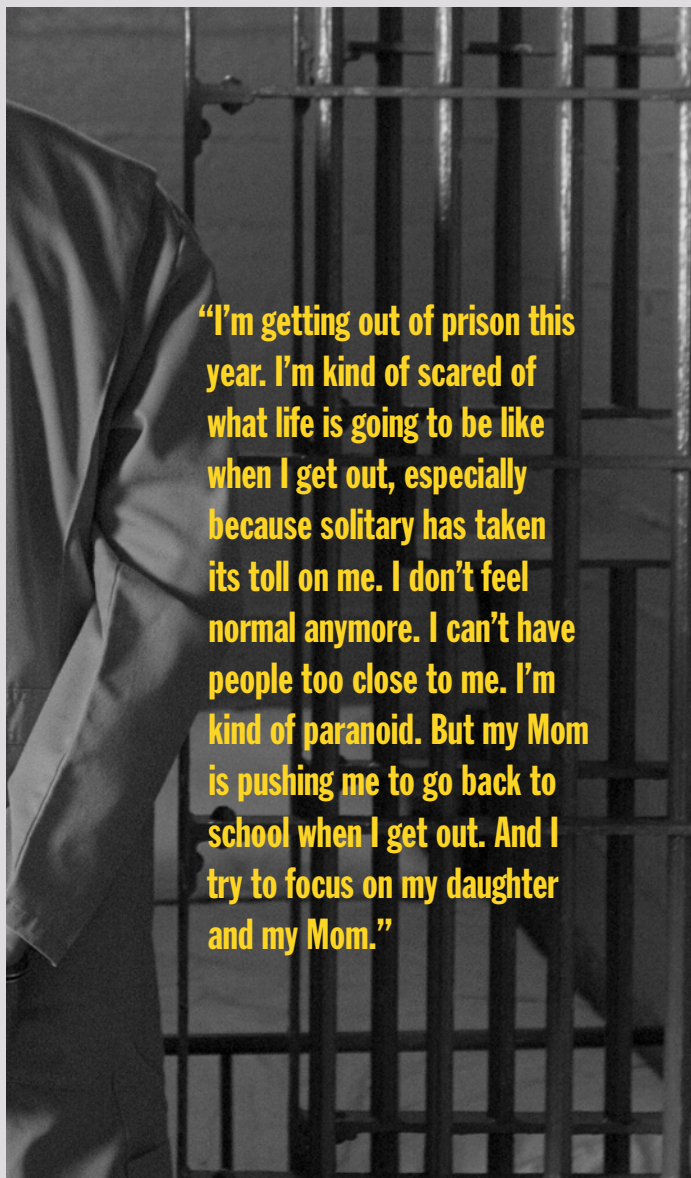
I was constantly harassed by the officers at Southport and made fun of because of my mental disability. I am currently on the mental health caseload. I have been a mental health Level 1 patient before and even an S-designated patient in the past. Currently, I am a Level 3 patient. My diagnosis includes PTSD, depression, and a mood disorder. I was on the mental health caseload before I came to solitary. I also have been sent to the observation cells on multiple occasions after harming myself. I have been on all types of medications. Sometimes they help, but they don't really work all the time. I try to exercise to get myself together. At Southport, the mental health social worker was pretty good but the doctor wasn't helpful.

Despite my mental health needs, I was held for several months in solitary. When I was in solitary, I often would wake up questioning my purpose, crying at night, and missing my daughter and mother.

Luckily, I was able to get out of Southport and back into the general population at another prison. I can't believe I made it. There are times when I didn't think I would. But I have a daughter. And so I had to get through it for her.

I'm getting out of prison this year. I'm kind of scared of what life is going to be like when I get out, especially because solitary has taken its toll on me. I don't feel normal anymore. I can't have people too close to me. I'm kind of paranoid. But my Mom is pushing me to go back to school when I get out. And I try to focus on my daughter and my Mom.

But just because I am going home is not going to stop me from speaking out. The harassment and abuse I've gone through has to stop. No one should have as much power over a person as the COs do at Southport and other prisons. I want to speak up without any more repercussions or consequences. I'm tired of living in fear in DOCCS' prisons.





POLICE ABUSE IN THE STREETS? JUST IMAGINE IN HERE.

I generally feel like life ain't worth living. I'm no longer as ambitious as I once was. I don't talk as much. I absolutely hate some COs now more than ever. I lost all contact with 99% of my family and more. Solitary confinement and staff brutality does all of that to you.

I have been incarcerated since the late 1990s when I was 18-years-old (I was arrested on my 18th birthday), and I first went to the box in the early 2000s. Since then, I constantly have been in and out of the box. Once since that time I was in general population for 11 months, and other than that, the longest I've been in general population has never been more than six months. I have been in nearly every box in the state, sometimes for stretches of more than three years at a time. Every year I have been in the box at some point, and I have spent a total of at least over 10 years in solitary. I have now been at Southport for over two years and have at least another several months left. None of my tickets are for violent acts, and yet I keep getting more SHU time.

Many of the tickets that have landed me in the box have been alleged gang related tickets. Once you are labeled a gang member, everything you do becomes "gang related." You say "what's up? Or what's happening?" and they say it is gang related. The gang tickets are BS – the COs don't understand our culture and take things out of context. One of my tickets at Southport, for example, was for a photograph I received where the woman who sent the photo signed off on it as "Pink Barbie Guerilla." That is the name she called herself but because the word guerilla was on the photograph, I received six months of SHU time. Another ticket I received at Southport was for a letter I sent to a person of Cuban descent who was anti-Castro. In my letter, I explained the good things that Castro and Che Gueverra had tried to do, and I also

Only 3% of people in the SHU at Southport who went to the Parole Board from 2012-2014 were granted parole.

“In 2015, COs assaulted me while being escorted from a meeting for a lawsuit I had filed against some COs at another facility. I was handcuffed and shackled to the waist. They waited until I got out of view of any camera. I was standing outside my cell, waiting for them to take the lock off the chains to then go into my cell. Instead, they pushed me into the cell and started assaulting me. One CO held me up and another CO started punching me in the ribs. Then one yelled “get him down” and one CO punched me and then another squeezed my testicles to take me down to the floor.”

said something about a range rover. For using the terms “Che Gueverra” and “range rover” I received an additional six months SHU time.

I came into Southport with a nine month SHU sentence, but because of new tickets, I have already been here for about two years and have another year to go. In addition to the gang related tickets mentioned above, I have received a number of other tickets. In 2015, I was in the visiting area eating potato chips and talking to my visitor. I started choking on one of the chips and another incarcerated person came over and gave me the Heimlich maneuver and the chip popped out. The CO there at the time congratulated the other guy for saving me, saying if it wasn't for him I might not have made it. Yet, 45 minutes later, COs came and got both of us and said I was trying to smuggle drugs. In their view, the other guy couldn't have been trying to help me – we must have been passing drugs. They cancelled my visit and searched my visitor, and they searched me. They didn't find any drugs. They took me to an isolation room and held me there for nine days, with the lights on 24 hours a day. I had a gown on and when I had to defecate, I had to squat over a basin with a plastic bag over it with the CO watching. Then I had to pass the stool to the CO and they searched it. They say that you have to give them “two significant stools” but they determine if it is “significant.” I defecated seven times in nine days. They continued to just say “insignificant, insignificant.” They found nothing in any of my samples. But after the nine days, they searched my isolation cell and falsely claimed they found two empty balloons. I received 150 days of new box time.

I always like to say that solitary has no impact on me. That I am strong and can handle it. But if I really am honest, it does have an impact on me. I have started having hallucinations since I've been in the box. Out of nowhere I will hear: the pop, pop, pop sound of gunshots, or all of a sudden I feel like I am actually in a car crash. It has happened at least 15 or 20 times. For a split second, it all feels very real.

I have seen mental health staff on and off since being in solitary, but I am not on the caseload. Their way of dealing with everything is medication. I see what it does to people and I don't want to take it. I do sometimes meet with them, though, to express what I am thinking and feeling, but then everything I tell the mental health staff, they tell security staff. All the employees here are afraid of security staff and are forced or pressured by COs to act the way they do.

I also am definitely depressed a lot. I used to be the most optimistic person in the world. Now I just don't care anymore. I'm withdrawn. I don't find life exciting. I don't care what happens. I don't care what food we're gonna get. I don't care. And I can't hold my attention any more. I used to read books all the time. I can't remember the last time I finished reading a book. I just jump from one to another. I can't complete a task. I must have nine books I've started right now. I also used to write books. I just can't do it anymore. I haven't written in years. They are keeping me trapped inside these boxes for years for little things here and there.

In 2015, COs assaulted me while being escorted from a meeting for a lawsuit I had filed against some COs at another facility. I was handcuffed and shackled to the waist. They waited until I got out of view of any camera. I was standing outside my cell, waiting for them to take the lock off the chains to then go into my cell. Instead, they pushed me into the cell and started assaulting me. One CO held me up and another CO started punching me in the ribs. Then one yelled "get him down" and one CO punched me and then another squeezed my testicles to take me down to the floor. Once I was flat on the floor, they stomped on me and were kicking me. Then I heard, "get his pants down." They started pulling down my pants and tried to pull down my boxers. I rolled over onto my side. They were stomping and kicking me in the back. One CO then pushed the baton against my boxers into my rectum. The COs started laughing. A number of other COs then rushed to the cell, shackled my feet and pulled me to the shower. When they came to take me out of the shower, I refused until there was a camera or a supervisor. They finally came with a camera and a nurse, who said to me "you don't look like you're injured; they should have done a better job." The pictures later showed that my face was real huge and swollen, but the nurse wrote down that I had no injuries.

As they were escorting me out, I was shackled at the hands and ankles, and with a waist chain. They put the cuffs on my ankles really tight, so that they were cutting my skin and making it hard to walk. After unsuccessfully asking multiple times for them to loosen the ankle shackles, I finally just stopped and tried to drop to the floor. Two COs on both sides of me were holding me up, and the nurse came from behind, said he was going to look at my ankles, and then grabbed my neck, so I started yelling at him. They never ended up bringing me to the infirmary, and I had pain in my ribs for several weeks. They

"Well, society?"

"Society must no longer aid and abet these corrupt and unscrupulous officers and repressive department by remaining silent and/or ignorant to what is taking place within the confines of New York's prison system."





were clearly bruised at least, and maybe broken. Worse still, I was emotionally destroyed after the sexual assault, but the mental health staff didn't do anything to help me.

In the end, DOCCS never issued a use-of-force report for the COs beating me up, and I received three tickets: attempted assault on staff, refusal of a direct order to come out of the shower, and threats on the nurse. It is almost impossible for incarcerated persons to physically assault COs at Southport because we are always shackled – so they just say “attempted assault.” Perhaps one of the most absurd aspects, the nurse claimed he was holding my neck so I would not hit my head on the floor or the wall. I got six months more SHU time. I filed a grievance and a PREA complaint, but my complaints were determined to be unfounded.

Because I filed these and other complaints, the COs have just gone after me more. Some COs still harass me about the sexual assault itself saying

things like “I've got a new baton you might want to check out.” One CO, after I filed a grievance against him, came into my cell and dumped all my legal papers all over the place. Thousands of pages were just thrown everywhere. He also dumped my photos all over, including in the toilet. Including pictures of my mother. I showed the sergeant and the captain and the captain said, well what did you do? This is not a proper cell search, but these higher ups did nothing.

In the middle and end of 2015, I did go on a good stretch at Southport where I did not receive any tickets for over six months. I made it to Level 3 privileges and stayed there for five months. Yet, they didn't give me any time cuts for all of that time. And as my lawsuit has progressed, the COs have been messing with me again, with many unnecessary cell searches and ultimately another recent series of incidents. First, a CO gave me a frivolous ticket for having water drop off of my bars. It was a tier II ticket and they gave me 15 days of keeplock and

moved me to Level 1. The same gang intelligence CO who has given me almost all of my tickets at Southport searched my cell and destroyed a bunch of my property, including a book I had written, an envelope of poems I had written, an address book, another envelope with addresses in it, and business plans I had developed over years of time.

I filed a grievance and a complaint to the Superintendent, but the sergeant who investigated lied and said my property was found and placed inside the property bin. I never received the property. I wrote a complaint about that investigation. Then COs did a cell search in my new cell and again over twenty envelopes with legal work – involving around 1,000 pages for several different legal actions – were all dumped out and scrambled around. One day the executive team was walking the tier, and I complained that the cell search was in retaliation for me filing complaints. The Superintendent asked me what I wanted him to do, and the Deputy Superintendent of Security then gave an order to send me to D-block.

D-block is the torture chamber at Southport. The bright lights are on all day. The cells are filthy. Typically, you are sent there for discipline. Though I didn't do anything wrong or get any ticket, they still sent me to D-block for no good reason. I really can't take it anymore. It is painful to be in D-block, and I have to get out of here. COs tell me that if I stop raising complaints, then I'll be able to move.

But it is not just me. The abuse and corruption that goes on here is systemic. The COs have carte blanche to do as they will. It is like what happened in the Stanford Prison Experiment but only worse. The COs are empowered to oppress us and do whatever they want. They operate like a gang here.

When COs assault incarcerated persons, guess who does the investigations? Their friends – the sergeants, lieutenants, and captains. The supervisors will never penalize a CO for violating an incarcerated person because they do not want to be

looked upon as “inmate lovers.” These people are not going to reprimand each other. The COs will tell you to grieve them because they know that nothing will come of it. It is impossible to have a fair and impartial investigation in that context.

You see what police are doing to unarmed minorities in the street and getting away with? Just imagine what they are doing and getting away with here behind closed walls. Who will believe a person convicted of a violent felony who accuses a CO of brutally beating him for no reason? We are on our own, and we are being victimized time after time with absolutely no outside help. The IG's office is not in the business of helping assault victims of COs. They show up, write a statement, and you'll never hear from them again.

“The abuse and corruption that goes on here is systemic. The COs have carte blanche to do as they will. It is like what happened in the Stanford Prison Experiment, but only worse. The COs are empowered to oppress us and do whatever they want.”

I have recently overheard some COs talking about the lawsuit settlement regarding solitary confinement. They were talking about how they thought it meant the system was becoming so weak and would be treating incarcerated people like babies. They dislike that there would be programs, a step-down system, and reductions in some SHU sentences. Solitary confinement is internationally recognized as torture. Plus, everyone who leaves the SHU comes back, so clearly people aren't learning anything by being put in solitary.

I have a few more years before I go to my first Parole Board. But I have life on the back end of my sentence. The Board will see all of these tickets and won't take the time to look under them. They'll just see a lot of

box time. I am not innocent of all of the tickets, but most of them are either completely false or exaggerated. A lot of these COs are not “fit for society” but the Board is going to say that I am not fit for society because of these tickets.

My mother recently passed away. Now I have nobody left, except for two little nieces and nephews. I want to get out there in the world and prove something to them, to others, and to myself. I want to make something of my life. I don’t want to allow this place to take my mind from me. I want to do something in society that is beneficial to society. I don’t want my story to end here.

I came into prison without being able to read or write. I made it to 9th grade in the street, but I really only had a 3rd grade reading level. After I was incarcerated, I studied and passed my GED in the late 1990s. I have also been forced to learn the law in here. Now, I always teach others what I have learned. I am a Sagittarius so I am always teaching.

You all out in society can do one thing for me: don’t forget. Expose this abuse and all that is going on. People on the outside need to take a look at the prisons. We who are incarcerated may have committed crimes, but we still have human rights. You see what’s going on in the streets with police? Just imagine here. COs will often say to me: “no one gives a f*ck about you. You can write all the complaints you want, but society doesn’t care. It doesn’t matter.”

Society must no longer aid and abet these corrupt and unscrupulous officers and repressive department by remaining silent and/or ignorant to what is taking place within the confines of New York’s prison system. The citizens of society must not be so naïve to believe that those who put on the uniform of an officer will not use that uniform to abuse the authority given to them by using it as a means to carry out nefarious and/or racist agendas. For that reason, officers must not be exempt from being scrutinized and held accountable whenever there is evidence that they abused the authority given to them. Their uniform should not be mistaken for a shield. Injustice anywhere is injustice everywhere.



WHEN WILL I FINALLY GET THE HELP I NEED?

I have a drug addiction and mental health needs, and being in the SHU is not helping either one. I am from Puerto Rico and I did three bids in juvenile, youth, and adult facilities there. I came to New York to be with family and to seek drug treatment. Instead, I have gone in and out of the prison system for a little over a decade. I am currently on a short bid and will go home in a few months. But I have spent most of my time in the box – all for drug-related issues.

They never put me in substance abuse treatment (ASAT) when I was in general population, even when I had less than six months to my conditional release date. I was denied parole two times during this bid, in large part because of my failure to complete ASAT. I came to jail because of drugs and can't even do ASAT, especially because they have given me so much time in the box.

On this bid, I first got 90 days in the SHU and loss of all visits for a drug ticket a couple years ago. While in the SHU, I got another four months box time. When I came out of the SHU that time in 2014, I spent three months in general population before getting another six month SHU sentence for drug use, and that's when I was sent to Southport at the end of 2014. I have been here ever since and got several more tickets while inside Southport. First, I received several tickets related to drug use that led to another two years of SHU time. From these drug tickets, I ended up with more SHU time remaining than my maximum release date from prison, and none of these sanctions were for violent offenses. They all were drug use or drug possession related, and yet DOCCS will max me out of the box and release me directly from solitary to the street because of them. Making matters worse, I again just recently got additional bogus disciplinary tickets at the end of 2015. I had been here over six months without any tickets or problems. I had moved up to Level 3 privileges and had remained there for all of those months. Yet, I hadn't received any time cuts or

had my visits restored. And then, one of the COs at Southport started harassing me. This CO has it out for me. Shortly before receiving these tickets, my Mom sent me sneakers, which I was allowed because I was on Level 3. Instead of giving them to me, the CO improperly put them in the property bin. When I asked for the sneakers, he refused to give them to me and we ended up getting into a verbal confrontation about it. Ultimately, I said: fine, just give them to your kids. A couple days later, I was on a call-out to see the mental health psychiatrist. When I came back, instead of going to my cell I was taken to the shower and then sent to D-Block. When I asked why, they just said I would find out. Someone from the Inspector General's office then came to ask me about a torn sheet I had in my cell and asked if I was trying to escape from the prison. The IG also asked me about a book I had called "Camouflage." He then threatened that I could get a new charge for all of this. Following this threat he then asked me if I knew about weapons or drugs that other people on the gallery had. They were trying to give me a false ticket, threaten me with a new charge, and then they wanted me to give them information?

Apparently, the CO who had been harassing me had searched my cell when I was at the mental health teleconference. I did have a ripped sheet in my cell; I used it as a clothesline to dry my clothes. I had this sheet up for several months, had my cell searched multiple times since it had been up, and COs never said anything about it. There are many incarcerated people who have sheets up like that. Yet, now they were claiming that I was using this sheet as a rope and trying to escape. They gave me disciplinary tickets for weapons, escape paraphernalia, and other issues I can't remember. I am supposed to go home in a few months; why would I try to escape? This CO was just out to get me. I am currently awaiting the hearing and don't know what will happen.

“I have been diagnosed with schizophrenia, depression, bipolar disorder, and ADD. From being in the SHU, I also suffer an anxiety disorder and paranoia. I have had panic attacks and have difficulty sleeping. I sometimes hear voices or echoes in my head. I sweat a lot and get cold while I’m sweating too. Plus the SHU has made me antisocial and afraid of officers. I used to be an OMH Level 1 patient and was diagnosed with schizophrenia at the time. I was even in a residential mental health unit (ICP) in a prison several years ago on a previous bid. But OMH dropped me to a Level 3 because I stopped taking my medications.”

Southport is horrible. There is no accountability. The COs do and say whatever they want. Then it is your word against theirs, and who are the hearing officers going to believe? Many people who come to Southport get stuck here, because they just get more tickets and many of the staff lie. So, I am most likely going to get hit with more box time, even though I already have more time in SHU than my maximum release date from prison. These tickets are hard to beat.

A lot of us in the SHU are strong minded. I don’t know how some people do it. People who have life sentences, for instance, and might seem to have nothing to live for, but are still going strong. Even for me, all the time in the box has certainly impacted my mental health. I have been diagnosed with schizophrenia, depression, bipolar disorder, and ADD. From being in the SHU, I also suffer an anxiety disorder and paranoia. I have had panic attacks and have difficulty sleeping. I sometimes hear voices or echoes in my head. I sweat a lot and get cold while I’m sweating too. Plus the SHU has made me antisocial and afraid of officers. I used to be an OMH Level 1 patient and was diagnosed with schizophrenia at the time. I was even in a residential mental health unit (ICP) in a prison several years ago on a previous bid. But OMH dropped me to a Level 3 because I stopped taking my medications. Currently I am a Level 2 patient. The mental health treatment I receive is that I see a mental health staff person about once every two months, and when I do, I see staff through a screen and they don’t pay attention. When I go to the teleconference with the psychiatrists, they ask me strange questions about why I am in the box and how much it costs to pay for suboxone. Why are they asking that? Then they ask if I hear voices and when I say no, then the interview is over.

All that I am facing sometimes leads me to attempt self-harm. In 2015, I took a bunch of pills because they took away my visits for over a year and I wouldn’t be able to see my family. I got real messed up in my cell for several days, but I didn’t say anything to the COs about it. In part because the year before at another prison, the COs there found a pill on me and pounded me and messed me up badly. Then they told me to shut up or face consequences. I have tried to cut myself other times too. A few years ago, when I was close to going home on a previous bid, I tried to kill myself and was sent to the hospital. I had no programs, nothing going on, and I was scared of going home. I got high, and I tried to kill myself. Self-harm happens regularly at Southport. Everyone wants to get out of here, however they can. When people attempt suicide, the COs make jokes about people “hanging up.”

I also have serious chronic medical issues. When I first came to Southport, they took me off medications I take for nerve damage for over a month for no reason, but eventually gave them back to me. I grieved the doctor, and he made me wait longer to get my medications as retaliation. Also, there is no confidentiality when we have a medical encounter. Medical staff talk about your case and COs are right there and can hear everything.

A lot of abuse takes place at Southport. And here everyone is afraid to grieve any issues because they know the COs will then beat them up. The worst place of all the prisons is Attica. I spent nearly a year in keeplock at Attica. There are lots of abusive pat frisks there. You put your hands on the wall, and they often beat you up. “Assault on staff” means they beat you up. I was beat up twice at Attica. I also ended up in the mental health observation unit at Attica.



“Southport is horrible. There is no accountability. The COs do and say whatever they want. Then it is your word against theirs, and who are the hearing officers going to believe? “

Though not as bad as Attica, the COs are still abusive at Southport. My neighbor got beat up recently because a CO claimed he saw a letter on his desk saying he was in a gang called the Crips. Like anyone’s going to have a letter saying he’s a Crip. Some of the same COs gave me some of my tickets and have been messing with my mail.

I have problems with the COs at Southport, especially because of my anxiety disorder. Officers often make fun of me and deny me recreation and even showers. Recently, some COs kept making fun of me when I put my hands out to get cuffed for recreation. My hands were shaking, and they called me “crackhead” and didn’t let me go to recreation. Most of the time, I don’t go to recreation– it’s better not to go because you can get set up.

So I generally spend 24 hours a day in my cell with nothing to do. I waited almost a year to even get any kind of cell study program. Even for the ASAT workbook, you have to wait until you are on Level 3 privileges before you can even request the program, and then you have to wait longer to actually get the workbook. I made it onto Level 3 in the summer of 2015, requested the ASAT workbook at that time, and then waited approximately another three months to get the workbook. Then, all that happened was they gave me some papers and told me to fill them in. It was pointless – there was no value in it. It deflated my hopes for actually getting treatment. I clearly have problems with drugs, and I’m worried because I won’t be able to complete ASAT before my max out date. My life and my freedom are in jeopardy. I thought that prison is supposed to include rehabilitation. When you are sick with an addiction, then you are going to use drugs even though you know that you are going to lose visits or be sent to the box. They need realistic programs that will actually impact people and help them to overcome their addictions.

I will be going home very soon, again directly from solitary to the outside community. On the positive side, someone from mental health did talk to me about trying to connect me to recovery and mental health programs in the community. But I haven’t gotten any programming or treatment for my drug addiction while I have been incarcerated all these years. I also haven’t gotten proper medical or mental health care. I have just been in a box. I came to New York and hoped I would receive substance abuse treatment here that would help me. Over a decade later, I still haven’t gotten the help I need.

6

YOUNG PEOPLE GROWING UP IN PRISON AND SOLITARY

There are many young people incarcerated at Southport, and many people who ended up at Southport after growing up in New York adult and youth prisons.

In January 2016, looking at DOCCS data for Southport (not including “Youthful Offenders (YOs)” and thus undercounting the number of young people), the median age of people incarcerated in Southport’s SHU was 32 years old, substantially less than the median age of 37 years old across the system. Around 17% of people held in Southport’s SHU were under the age of 25 and almost 6% were 21 or younger (again not including YOs and thus undercounting). There were people who were still teenagers, as well as people as old as their mid-60s (7% of people were age 50 or over).

Many people in Southport’s SHU described the difficulties they faced during their childhood in the outside community and inside the adult and youth prison systems. Many young people also described growing up in the prison system and the challenges associated with being away from their family, as well as those associated with trying to survive as a young person in adult prisons, both of which are compounded by being in solitary. As one person described, “I lost touch with how to interact with people. I feel angry a lot. I feel abandoned, isolated, and alone in life. I feel cut off from the friends and family that support positive change and don’t want anyone to come on this very depressing visit room floor.” Another person lamented, “I tend to wake up questioning my purpose and crying at night, as well as missing my daughter and mother.”

Indicating how many young people had grown up in prison and in solitary: among survey respondents, the median age of arrest on their current prison sentence was 23-years-old, with 12.5% of people arrested when they were under 18 and 41% arrested at age 21 or younger. Similarly, the median age of survey respondents being admitted to DOCCS on their current prison sentence was 24-years-old, with 5% entering DOCCS when they were under age 18 and 39% at age 21 or younger. Also showing the linkages between the difficulties people faced as children and their resultant time in prison and in solitary confinement, roughly 53% of all survey respondents reported that they had been in a youth prison during their childhood.

Moreover, 30 survey respondents were still 25 years old or younger at the time of the survey. Even more disproportionate than the racist imposition of solitary as a whole, over 90% of these young people were Black or Latino. Thirteen were under 19 when they were arrested and 73% were under 21 when they came into DOCCS, further showing how many children are growing up in prison and ending up in solitary. Also of serious concern, a much higher percentage of these young people had mental health needs than the overall population: 72% sought, received or were recommended for mental health care in DOCCS, 58% had been or currently were on the OMH caseload, 20% had engaged in self-harm while at Southport, and a third had been to the RCTP in DOCCS. Also worse than the horrible findings regarding the population as a whole, 72% of these young people said their relationships with staff was very bad, 54% had been in some physical confrontation with staff, 78% frequently felt unsafe in Southport and 54% said they feel very unsafe in the prison. The harm to young people growing up in prison and in solitary, including at Southport, can not be overstated and is devastating.

The following narratives describe people's experiences growing up in New York's prison system and growing up in solitary confinement, including at Southport.

I AM TIRED OF BEING BEATEN DOWN

I came into prison a year and a half ago when I was still a teenager. At the time I was arrested, I was going to school and getting ready to go to college for engineering. I was working doing janitorial work at a YMCA, but I needed money to go to school. So I tried to steal some money to help pay for school and wound up in prison.

Right away, I had problems with COs. After only a couple of months while still in the reception facility, one day I asked a CO a question about why he was taking chairs away from the day room and that set him off. That CO and a number of other COs beat me up. When I spat blood out at a sergeant after being beaten, other COs beat me up even more. They gave me tickets for assault on staff, disobeying direct orders, and inciting a riot, and I've been in the SHU ever since.

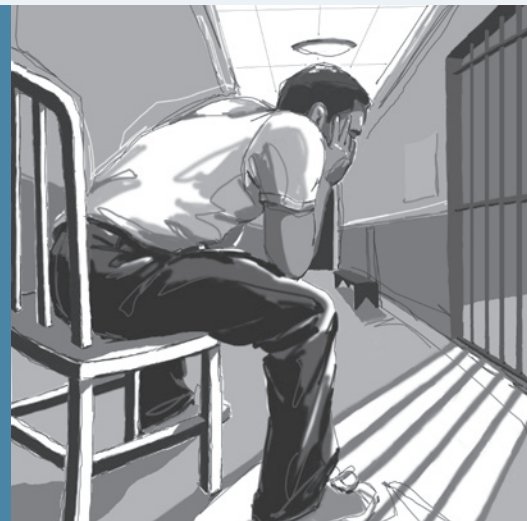
It didn't get any better for me when they sent me to Southport over a year ago. The COs in Southport are very disrespectful and aggressive. They antagonize us. They talk to you any kind of way. I understand I'm an incarcerated person but still treat me like a man. Talk to me like a man. I talk to you like a man. I try to keep my cool. It's just not fair. They think we're nothing; we're below them. They think they can do anything they want to us. When we break a rule they jump on us, write us up, or refuse our showers. But when they do wrong, nothing happens to them and we are made to suffer.

I have been assaulted by COs two times since I have been in Southport, and I have been harassed by a sergeant and two COs. Last year, I was on my way back from the showers with my hands cuffed behind my back. Another incarcerated person said something to me so I turned my head. A CO who was escorting me immediately punched me in the head for no reason. I hit the wall and fell to the ground. Then additional officers came and started beating me further. I ended up with swollen eyes, a gash in my eyebrow, and all bruised up.

Over half of all survey respondents in Southport's SHU reported they had been in a youth prison during their childhood.

Then just a few months ago, there was a CO who was harassing me and threatening me and I didn't know why. I wrote a grievance because of his threats. One day when I returned from the shower, the CO was there searching my cell. The CO pushed me against the wall and slapped me. It was definitely retaliation for the grievance I wrote. After the incident, I refused to eat for five days. The only way I could get away from the CO was to threaten to harm myself. They put me on a suicide watch in a different unit at Southport.

“When we break a rule they jump on us, write us up, or refuse our showers. But when they do wrong, nothing happens to them and we are made to suffer.”



I am on the mental health caseload as an OMH Level 2 patient. I came to DOCCS with a mental health disorder of anxiety and mood disorder. Being in prison and in the box has led me to have more paranoia, especially because COs assaulted me three times since I have been in prison. I think COs are always out to get me. I am constantly scared of retaliation.

The SHU is very stressful. You always have to be in cuffs when you leave your cell. COs jump on people even though they are in restraints. They jumped on someone a couple of days ago for no reason. You're in cuffs when they attack you so what can you do? I try to avoid dealing with COs because I know there are consequences for saying or doing the wrong thing, but they still mess with you.

Sometimes the mail gets delayed. That stresses me out more. I want to know what's going on with my family. It also makes me more paranoid that they are messing with me. Earlier this year, they denied me the opportunity to go to my father's funeral. My mother called the facility to let them know my father had passed away, but they didn't tell me until a week later, and I wasn't able to attend the funeral. I grew up with both of my parents and that was very hard to have to miss my father's funeral.

Being in the SHU has changed my attitude. It has made me more violent. I usually am a calm person who doesn't cause problems. But the SHU has made me more angry, causing me to flip out on people.

My earliest release date is this year and I max out the following year. I came in to DOCCS as a teenager and will go out in my mid-twenties, having spent most of my time in the box. I try to do what I can while inside. I am enrolled in cell study in a pre-High School Equivalency class. But I only see a teacher for about 15 minutes once a week, and I don't like that they don't let me test when I'm supposed to. Also, I try to go to recreation to work out. But it is just an empty cage outside. And I don't like to interact with the COs so I don't always go.

Overall, I'm tired of getting beaten up and cuffed. Since I've been in DOCCs I have had all these problems. They need to change the use of force policies – COs should not be allowed to ever use any unnecessary or excessive force because they take advantage of every opportunity to beat us down. I've been beaten up three times. I am tired of it.

RAISED IN THE BOX

Like so many Black kids from my neighborhood, I came from a broken family and abusive home. I was the youngest boy. Before I turned two-years-old, children's services came and took me away for abuse and neglect because my Mom was said to be smoking crack. First I went to foster care and then to my father's aunt because my father didn't want to take me. My father's aunt raised me as a single Mom. It was an abusive situation with my extended family. I saw some messed up things, and we were poor. By the time I was seven, I decided I wanted to gang bang. I was first sent to a youth facility at age 11, and between age 11 and 16, I was in and out of different youth facilities – for scratching a car, robbery, assault, and other related charges.

I was first sent to an adult jail when I was 17-years-old and incarcerated again on my current sentence at age 18. After going to a DOCCS prison, when I was 19 an older person incarcerated in the prison cut me in the face with a scalpel. I have no idea why the person did it. It was someone I didn't even know. But I knew from then on, I wasn't going to be caught without protection again. There is nothing safe about prison. There is nothing about rehabilitation. I have been in the box on and off since then over the past six years – all for weapons or fights. That's my habit. You are caught with a weapon (ticket and box time) or without it (being hurt by others), so I have been caught with it and sent to the box.

After spending my childhood in youth facilities, I have spent my late teens and early twenties in maximum security prisons and solitary confinement. I got tickets for fights and weapons at Clinton, Elmira, Upstate, and Five Points.

I have now spent the last nearly three years in the box at Southport. Solitary is detrimental to a person's mental state. It eats at a person's mind. The walls can talk. The corner of the cell can take on different personalities of you. It dissects different parts of who you are and then these thoughts run over and over in your mind. It is like different parts of you are talking to yourself through the walls. All the things that have led to you being there are played over and over in your mind like a movie reel. Your own voice calling you a punk, a wuss.

Sometimes I feel short of breath and/or like the walls are closing in. This happens off and on. During the last panic attack I had, I couldn't breathe. My whole body was dripping sweat. I got a headache and felt dizzy.



“Sometimes I feel short of breath and/or like the walls are closing in. This happens off and on. During the last panic attack I had, I couldn't breathe. My whole body was dripping sweat. I got a headache and felt dizzy. While at Southport, I also had a break-down.”

While at Southport, I also had a break-down. I cried a lot at night because I'm left alone to deal with the traumas and problems from my childhood. I suffer from depression. I have trouble sleeping. I get only two to three hours a night. And I just started crying. I got to the point with everything going on, the stress, the inability to get to anybody beyond the gate, that all I could do was cry. I suffered some real traumatic things as a kid – the results of which are what led me here and are also what make solitary so hard.

I have long had mental health issues that are only exacerbated by being in the box. Ever since I was seven years old, I was diagnosed with bipolar disorder, as well as chronic depression and ADHD. When I was at Rikers Island and when I first came into state DOCCS, I had those same diagnoses and was given a "1S" mental health designation – meaning I had the most serious mental illness. However, they changed my diagnosis to anti-social disorder, borderline personality disorder, and chronic depression. First they took away my S-designation, and then they took me off of the OMH caseload completely.

While I was at Southport, I got back on the mental health caseload. I reached a point where I said I was going to kill myself and was taken to an observation cell. I just couldn't take it anymore. I missed being home. I missed my family. They put me back on the OMH caseload as a Level 2 patient, but they didn't give me an S-designation, saying I had a diagnosis of adjustment disorder and anti-social personality disorder. I went back and forth to observation cells multiple times while I was at Southport. If you don't end up being sent out to a mental health crisis unit from Southport, then something must be really wrong with you. Just recently, someone committed suicide at Southport.

I also suffer from paranoia and feel that people are always conspiring against me. It comes partially from being in the box. But it also comes because the threats and abuses are real. Southport is terrible. The people who are sworn to protect you mistreat you. They whoop you and take your property. I didn't

go to recreation at Southport because when you leave your cell, the correction officers set people up to get new tickets or outside charges so we will have to stay in SHU or keeplock or prison longer. The administration allows the COs to jump on people and cause physical injuries. The COs do it just for their own fun and enjoyment. I have been beat up; threatened; had my water and lights turned off; been denied showers, food, and medical care; and had my property destroyed and degraded.

I finally was able to leave Southport recently after almost three years, and for now I am in general population. The transition has been really hard. I still talk to myself. I still don't talk to people. Luckily, I have not had a panic attack since being out of the box. But it still sucks. It is like being a fish out of water. I thought I would max out from that box at Southport. I am still trying to get used to free movement. In the mess hall, there are hundreds of guys moving at the same time, and at yard and rec, I am surrounded by people. I am not used to dealing with that. Even now that I am in general population, because of past tickets I still don't get phone calls, packages, or commissary until later in 2016. I haven't had a phone call in years – I did not have one phone call during all my time at Southport.

I have just a few years left before I max out and go home. I'll have spent my teens and the entirety of my twenties inside. I did get my GED while incarcerated, though I haven't been able to take other programs like ART or ASAT because I have spent so much time in the box, and they won't let me into a college program. They don't really offer things to help us. I don't know what will happen next to me, but I know something has got to change in here for me and for others.



“Starting at eight years old I was prescribed a bunch of psychotropic meds . . . I first went into a juvenile facility when I was a young teenager. Then, as a late teenager, I was arrested and sent into the adult prison system. . . . Despite my long history of taking mental health medications, the majority of my time in prison has been in the box.”

FLOATING AROUND THE SYSTEM

When I was young, my siblings and I got taken away from my Mom. They split the four of us up into pairs. After a while, we were split up individually. Everybody eventually got their acts together, except for me. I just couldn't get right and I floated around the system.

As a child I was in and out of psychiatric hospitals. Starting at eight years old I was prescribed a bunch of psychotropic meds: from Seroquel, to Abilify, to Thorazine. I am well aware of how serious these medications are. I'm surprised I'm not mentally gone. I'm a little gone, just not all the way though. I first went into a juvenile facility when I was a young teenager and spent time in three different youth facilities. Then, as a late teenager, I was arrested and sent into the adult prison system. I am now in my early twenties and have been incarcerated for about five years.

Despite my long history of taking mental health medications, the majority of my time in prison has been in the box. I am at Southport this time because I was beaten up by staff at my last prison. At the time, I was in keeplock and had been there for about a month. One day, I asked a CO about shower time that I was not given on a Wednesday. That Friday came around and I was again not offered a shower that I was scheduled to have. I was mad that I did not get the showers that I had a right to and got into a verbal altercation with the CO. The next time I was permitted to take a shower the CO came into the shower within two minutes. He started yelling at me and shoved me against the wall. Soon after multiple COs came in and beat me up while I was handcuffed. They kicked, shoved and punched me.

As a result of being beaten up, they gave me disciplinary tickets for violent conduct, assault on staff, and disobeying a direct order, gave me two years in the Box, and transferred me to Southport. This is my second time at Southport.

When I first came into the box, I thought I was going to lose it. I felt caged in. It was really, really difficult. In the box I am locked in my cell 24 hours per day every day, with the exception of an occasional shower. I get three showers per week, 2-5 minutes each to bathe and shave. I usually don't go to recreation. Either because of the harsh weather or to avoid contact with the COs. Even if you want to go, often they'll find any little reason to

not let you out for rec. And the food, don't let the official DOCCS menu fool you. The food is terrible and has only gotten worse over time.

Solitary has caused me to have mood swings and suffer from depression. Some days I try and am able to hang in there. But other days are really tough. I have no social interaction. I try not to think too much. I am not currently taking any medication. Mental health here is terrible. They think that everyone is faking it. They say, "you're good, you just don't want to be here." I don't trust any prison employees. A couple years ago, I had a staph infection and medical told me that it was a spider bite. As a result, I filed a grievance and finally saw the doctor three weeks later. The doctor told me that the infection could have killed me.

I have also encountered a lot of racism and verbal abuse in the system. One day, at a former prison, I was on the catwalk and the CO threw me against the wall and called me a "f*cking sp*c." At Southport I have heard COs call someone a "[n-word] rapist." Another CO screamed at me once saying, "shut the f*ck up," and asked, "you think you're a tough guy?" after I got into a disagreement with another incarcerated person. I just keep a low profile and try to keep my distance.

I am really trying hard to create boundaries and control my rage and anger. I am currently enrolled in cell study. Two times per week someone comes around with different magazines and books. I get "How to Write a Business Plan" and materials on Puerto Rican History. I also like listening to music. I no longer communicate with my Mom or Dad, and my sister does not write me that much. My brother just returned home from prison. I have nowhere to go when I get out. I want to be a barber when I go home. I have less than a year before I am released. I have grown up in the system; in youth facilities, in prisons, and in solitary confinement. Now I'll be sent back out into the world after facing all this abuse and neglect, without having had any rehabilitation.

POSSIBLE CHOCOLATE OR CO ABUSE

The worst part of life in solitary at Southport is the COs, but the best part is the chocolate. Starting with the worst part: the COs. They are always trying to get you to say or do the wrong thing. Soon after I first got here, I was told to backup out of my cell. I didn't know that you're not allowed to turn your head while you walk backwards out of the cell. So the COs choked me. Once, my shirt was untucked, so they choked me. If asked what happened, they will always say that you assaulted an officer.

I saw the COs tell this one guy to go to the shower. The guy knew it wasn't his shower time, but you're not allowed to ignore an order from a CO. When he went to the shower, the COs used it as their excuse to beat him up. A CO turned toward the people in their cells (including me) and told us to stop watching and that we didn't see anything. I also saw a CO push a guy who had his hands and feet bound down the stairs. If I said something, I would lose my visitation privileges for months, receive deprivation orders, and would probably get a beat down in my cell as well.

I once brought a cup to my cell, and when they found it, the CO said that next time they're going to teach me a lesson – not a write-up – another way. Even saying the wrong joke or not giving the correct response to a CO's joke can lead to a beat down. You learn to completely avoid talking at all to certain COs.

In addition to the beat downs, the prison doesn't care about our health. Once I saw a guy having a seizure in the SHU. We all started screaming for a CO. No one came for over a half hour. We finally were able to send a message to a person imprisoned on the floor below us, and he was able to get the attention of his CO. Forty minutes after he started seizing an unkempt looking CO showed up with his shirt un-tucked to see what was going on. If we walked around looking the way that CO did, we would get a beat down. Eventually he got

the nurse, which took another ten minutes, and finally the man received some care. The whole time though, the guy kept having seizure after seizure. Everyone who wrote grievances about that incident was threatened and not allowed to shower.

Another time, they brought a guy into our wing who was leaking this really foul smelling liquid out of his head. The COs kept trying to have him clean it because it was stinking up the place, but the smell wouldn't go away because the guy had MRSA – a contagious disease. They didn't move him out until we all filed grievances. If you don't get into trouble, you can make it to PIMS Level 3. At Level 3, once a month, you get a chocolate bar. Now for the best part: chocolate. Originally, I would eat the candy bar straight, but now I make it into a pie. How can you make a pie without an oven or even a microwave? I wondered the same thing when I got here. You'll need to be able to make a purchase from the commissary (which you can do only at PIMS Level 3) to buy candy bars. Then you need some sugar, milk, water, peanut butter, and little cakes, which you can take from your lunch and dinner trays and save them. You crumble the bread and mix it with the sugar, milk, and water. Then you flatten it. You make pie filling by mixing chocolate and peanut butter. Wrap it up and let it dry. Then you got yourself a pie.

I came to prison and to Southport while I was still a teenager. When I was younger, I got pulled into a bad crowd when my Mom died. I was sent to multiple youth facilities starting when I was 14-years-old. I was sent to prison while I was still a teenager. Then after going to a different prison, this guy who was

“I have grown up in prison and in solitary. Before I came here, I was interested in things like basketball, landscaping, origami, and shopping. I like reading books about psychology, as well as about stocks and political science. In solitary, all I can do is read, write, sleep, eat, and maybe make prison pies.”

also imprisoned there started messing with me; I tried to defend myself, we fought, and I got sent to the SHU for nine months and lost all phone calls, packages, and commissary. I was an OMH Level 2 patient in the past. I voluntarily closed my case, but I want it reopened. I have seen people try to hang themselves in solitary, and could use someone to talk to.

I have grown up in prison and in solitary. Before I came here, I was interested in things like basketball, landscaping, origami, and shopping. I like reading books about psychology, as well as about stocks and political science. In solitary, all I can do is read, write, sleep, eat, and maybe make prison pies.



GROWING UP IN PRISON

I was arrested at 18 years old and sent to Rikers and then to the state prison system. I've been to eleven different prisons over the past 20 years, working my way closer to home with each transfer. I had been doing a lot to improve myself and help other incarcerated persons. I've been the president and previously the vice president of an NAACP group, a teacher's aide, a nurse's aide for patients in the mental health unit, a general and law library clerk, and an Alternatives to Violence Project (AVP) trainer, and I worked the lawns and grounds. I have an HIV/AIDS Education certificate and a barber vocational certificate. I was doing well before the incident that sent me back to Southport.

When I first got to prison, the COs were older than me. Now, they're my age or younger. I am more mature than my younger self. When I first got in, I was fortunate because some older incarcerated guys helped me out and didn't take advantage of me. That's what I'm trying to do for the younger guys I see coming in now. I feel sorry for the younger guys because this – living in prison – is shaping their mindsets. Growing up in an inner city makes these guys feel like they have to prove themselves. They

join gangs or try to impress a young woman, and that's what gets them in trouble and sent to prison in the first place. There's a survival mechanism that kicks in when you're between a rock and a hard place. These young guys get pressured by a perception, and sometimes the reality, that they have to act a certain way to survive, and consequently, they end up getting in trouble while inside. I try to give back and be a mentor to the younger guys. I follow Eddie Ellis's philosophy of Each One, Teach One. That's what I'm trying to do with these young guys. In fact, two days before the incident that got me sent back to solitary, I even spoke at an anti-violence seminar, "Justice by the Pen."

It had been 14 years since the last and only other time that I was in solitary. I did 9 months in solitary that time. I am currently serving a seven year SHU sentence at Southport. I have already been in the SHU for about a year and a half so far. I feel really badly about the incident that got me sent here. It started on the visit floor at another prison at the end of 2014. I hadn't seen my family in several years, so I was already feeling anxious. This was the

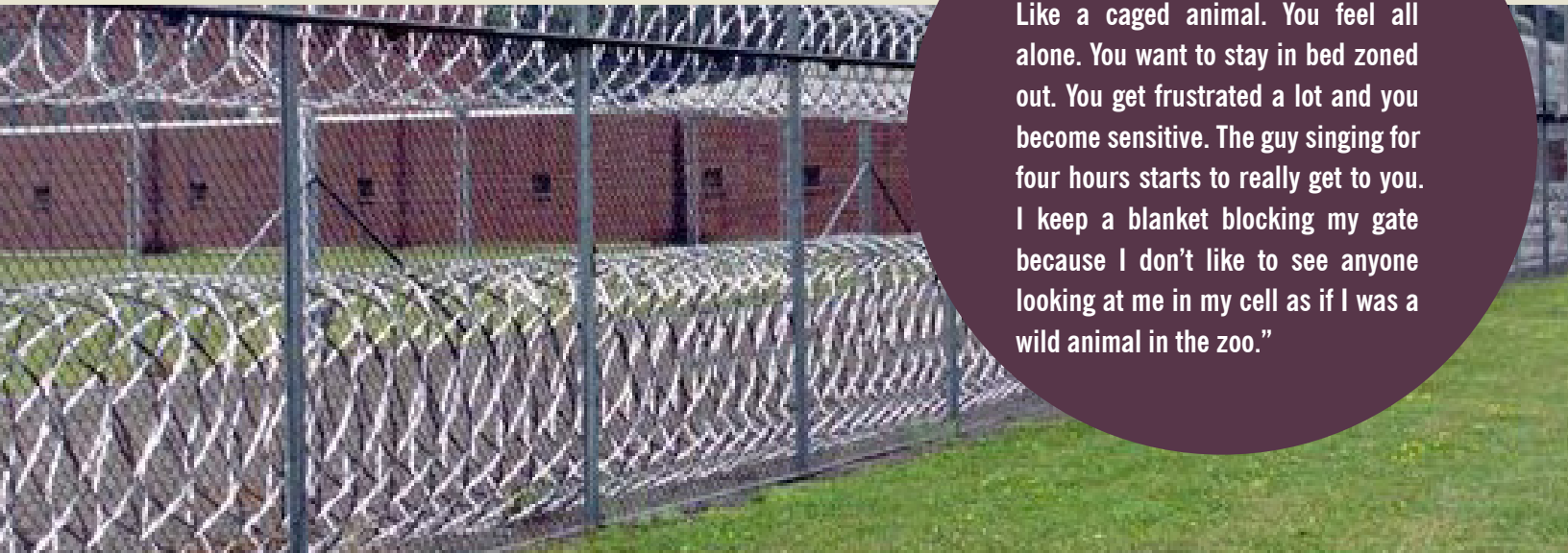
first time I had been on the visit floor in a long time, and it was a lot quieter than I remembered. My sister, aunt and niece and nephew came to visit me. This was the first time I was meeting my niece and nephew. I only got to spend 1-2 hours with them because my family was late coming to visit, which made me a little frustrated. But I made the most of it, still enjoyed my time with them, and had a good visit overall. During our visit, another incarcerated person acted in an inappropriate manner with my family and made my family very uncomfortable. I wanted to confront him peacefully about it, and tried not to worry about it too much. I still had a good visit, and we even took pictures.

The next morning at recreation, I found out this guy was in prison for serial rape. I needed to calm down, so I went for early go-back to my cell, but ran into him on my way back. He acted very aggressively when he saw me and put his fists up. I felt that I had no choice but to defend myself. He suffered injuries requiring surgery, which is why I got such a long solitary sentence, but I don't know what happened to him after that. I feel really bad about what happened. I'm losing sleep because I don't know what happened to him – I don't know if he's okay or not. I heard a rumor that he was better, but I don't know exactly how he is doing. Months later, I learned that he has mental health issues. If I knew that then, I would have handled the situation differently. I'm proud of myself for having stayed out of the box for 14 years before this incident. I wish I could take this back.

In solitary, I generally spend 24 hours a day in the box. I never go out to recreation because I don't want the COs touching me. I always analyze myself. I'm critical of my behavior. And I've always been anxious. My Mom took me to a psychiatrist when I was a teenager because I couldn't deal with loud noises. I use headphones to block out loud noise, and I used ear plugs when I was in general population. But it is so noisy in here. Solitude doesn't bother me as long as I can read, but I can't read when it's loud. So instead, when I get stressed out in here, I go to

sleep. I don't know if that's a sign of depression, and I'm not on the mental health caseload. I also don't know if I ever experienced panic attacks. I'm not sure if it's adrenaline or nervousness, but I need to be in an open area and walk around sometimes. It's hard to do that in solitary. There is also not much for me to do in solitary. I have been in the Southport SHU for almost a year and a half but am still on the Aggression Replacement Training (ART) waitlist. I already got my GED at another prison. So instead, I read a lot of self-help books. I'm looking at books that will help me with things that I can do in society. I also like historical novels. I also work out five days a week in my cell.

I can do the box time, but I wonder sometimes. There are still a lot of negative impacts of being in the SHU. Before this incident that landed me in the SHU, I was doing really good. I volunteered and had a lot of jobs. I'm remorseful for what I did, but I accept my sentence. If anything, the culture in here needs to change, but I understand it. Years ago, there was a more professional attitude in interactions between staff and incarcerated people. It was less personal; officers had a job to do and people incarcerated had time to do. I don't want to get my hopes up too high, but I just keep a positive attitude. I won't get to my first parole board until I'm over 50 years old, but I don't think I'll have any trouble transitioning to society once I do get out, because I have support from my family. My uncle was a principal for the NY Board of Education and my Mom has been a school teacher for many years. When I get out, I want to be a prison advocate. I want to spread Eddie Ellis's philosophy. I think prison advocacy is coming back. There are many heroes out there trying to make positive change.



“Being in the SHU is mentally exhausting. Just in a cell all day long. Like a caged animal. You feel all alone. You want to stay in bed zoned out. You get frustrated a lot and you become sensitive. The guy singing for four hours starts to really get to you. I keep a blanket blocking my gate because I don’t like to see anyone looking at me in my cell as if I was a wild animal in the zoo.”

LIKE A GERBIL IN A WHEEL

I have almost no contact with my old community because I’ve been in prison in upstate New York for so long. I was sent up here for a crime I committed 10 years ago, when I was 16.

Since then, I have grown up in prison. I learned how to behave by observing others in prison and imitating the strategies that seem to work. You force a laugh whenever the COs make a joke even though you are depressed on the inside.

I have spent over seven years of that time in solitary confinement. I got sent to the SHU this time because someone else who I was in prison with told a CO I wanted to assault someone. They also found a weapon in my cell which anybody had access to. That’s all it takes in prison to get sent to the SHU: someone else’s word and barely any investigation.

Being in the SHU is mentally exhausting. Just in a cell all day long. Like a caged animal. You feel all alone. You want to stay in bed zoned out. You get

frustrated a lot and you become sensitive. The guy singing for four hours starts to really get to you. I keep a blanket blocking my gate because I don’t like to see anyone looking at me in my cell as if I was a wild animal in the zoo. The blanket keeps my cell dark and thus I become sensitive to the light. You have to squint when you leave because it’s hard to see in the light when you spend all your time in the dark.

My emotions are a roller coaster. I can’t always control them. I don’t like interacting with people. I can’t trust anyone because they might be trying to manipulate me. Prison hasn’t broken me, but I do have many dents in my armor. I used to be on the mental health caseload, but they took me off and stopped seeing me.

So many people are warehoused in prison, and there are so few slots available in good programs that you need a completely pristine record to get into one of those programs. You are lucky if you get

a full hour a day for “rec,” which is just being brought outside to another cage next to a whole lot of other cages. I feel like a gerbil in a wheel, except I don’t even have a wheel, just a tiny cage. It’s that feeling that makes me skip rec all together on many days.

Most of the time we have a forced cordiality between us and the guards, but every so often the guards will do something just to remind you how much they hate you. They like to push you down while you’re taking off shoes. I’ve seen people in handcuffs beat up by guards in the shower or beat up when coming back from rec. They will threaten you with how they are “going to f*ck you up.” Then they won’t do anything until a few weeks later when the officers will push you down in your cell and start hitting you. Even the decent ones will kick your butt.

If you try to file a grievance against a CO, it always comes back unsubstantiated, and they retaliate. They write you a BS ticket, take away your privileges, deprive you of food for a week, and deprive you of showers and rec for a month. Of course your grievance will come back unsubstantiated because there are no cameras in here. This place needs cameras in the gallery, and every CO should have a body camera.

On really bad days I like to look at pictures of Israel in this book I have. Before I got to prison, I once had a Jewish girlfriend and she used to take me to temple with her on Saturday mornings. I felt something there that I never really felt before. Here in prison, you have a lot of time to read. Reading the Jewish bible has given me a lot of comfort. When I get out of prison, I plan on seeing a Rabbi to officially convert to Judaism, and move to Israel. When things are terrible here, I like to imagine that I’m far away in Israel.

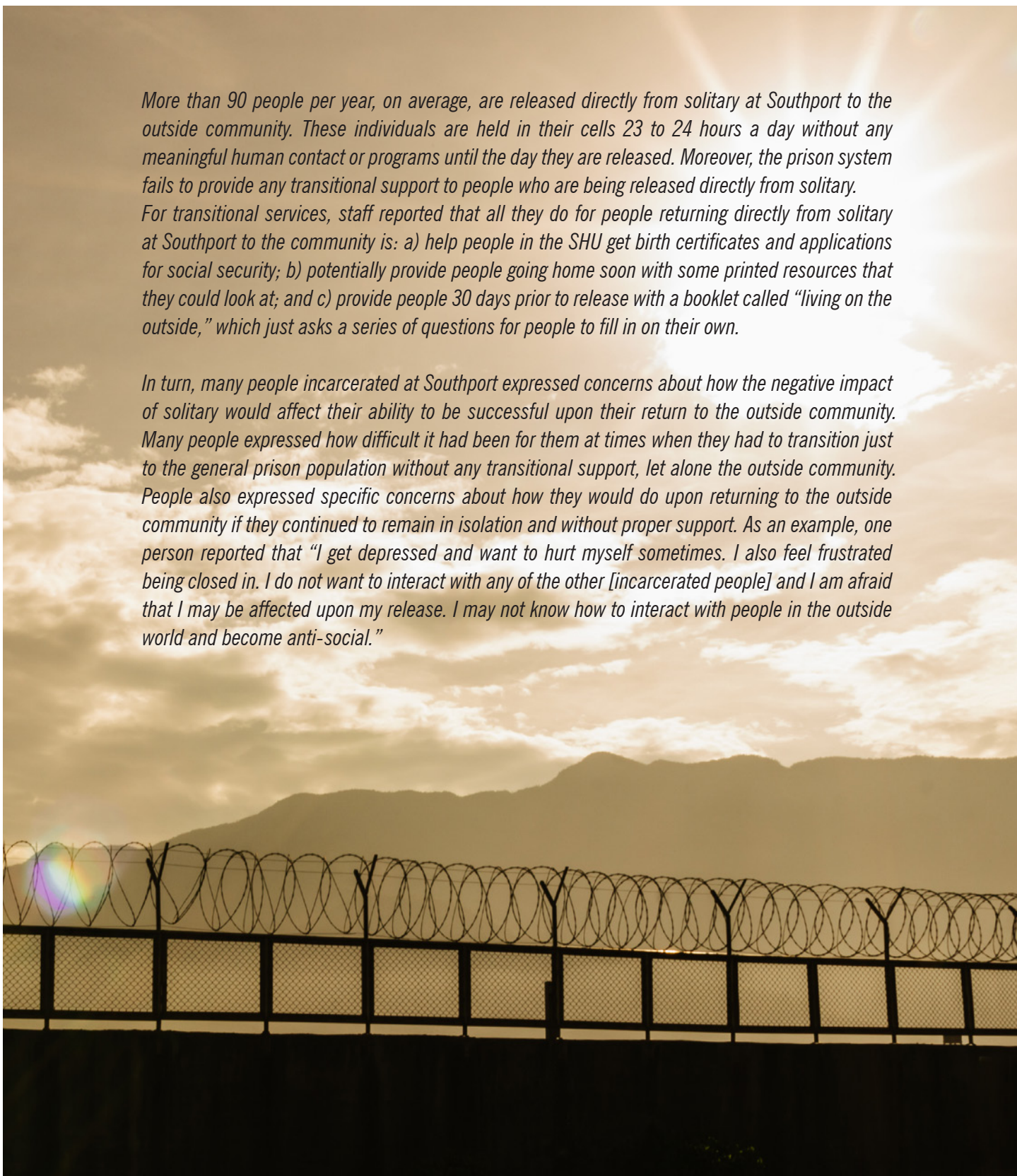


7

PEOPLE RELEASED DIRECTLY FROM SOLITARY TO THE OUTSIDE COMMUNITY

More than 90 people per year, on average, are released directly from solitary at Southport to the outside community. These individuals are held in their cells 23 to 24 hours a day without any meaningful human contact or programs until the day they are released. Moreover, the prison system fails to provide any transitional support to people who are being released directly from solitary. For transitional services, staff reported that all they do for people returning directly from solitary at Southport to the community is: a) help people in the SHU get birth certificates and applications for social security; b) potentially provide people going home soon with some printed resources that they could look at; and c) provide people 30 days prior to release with a booklet called "living on the outside," which just asks a series of questions for people to fill in on their own.

In turn, many people incarcerated at Southport expressed concerns about how the negative impact of solitary would affect their ability to be successful upon their return to the outside community. Many people expressed how difficult it had been for them at times when they had to transition just to the general prison population without any transitional support, let alone the outside community. People also expressed specific concerns about how they would do upon returning to the outside community if they continued to remain in isolation and without proper support. As an example, one person reported that "I get depressed and want to hurt myself sometimes. I also feel frustrated being closed in. I do not want to interact with any of the other [incarcerated people] and I am afraid that I may be affected upon my release. I may not know how to interact with people in the outside world and become anti-social."



The following narratives describe the difficulties people face in preparation for leaving the prison system directly from solitary at Southport and the additional challenges upon returning to the outside community directly from solitary.

FROM SOLITARY DIRECTLY TO THE COMMUNITY

I was recently released directly from the Southport SHU to the outside community after doing almost a year and a half straight in solitary confinement and a total of around six years in the box – about two-thirds of my time in prison.

The worst part about the SHU is the mental stress of being in solitary. Solitary made me become more aggressive and sometimes overwhelmed. I generally was doing okay, but I realized I was easily getting angry and upset, and stopped talking to others. These feelings sometimes caused me, and others, to act out. I was on the mental health caseload a few years ago, and spent some time in the mental health crisis observation cells and the Central New York Psychiatric Center (CNYPC). But I have been doing okay more recently.

Typically when I was at Southport, I went to recreation one or two times per week. I did not like to go when I was on the lowest privilege Level 1 because I would have to be handcuffed during recreation. I also didn't go to recreation much in the winter because it was too cold and the jackets we had were not sufficient to withstand the cold. So I was very often in my cell 24 hours a day. The last couple of months at Southport I just tried to keep my head down. I only left my cell for sick call and showers twice a week.

I did participate in the cell study program while at Southport – where I could read about African culture,

not-for-profits, business, and Spanish. The teachers were okay, but the information was outdated. And the library services were terrible – the books were in bad shape and outdated.

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The SHU is extreme isolation and people mentally defeat themselves while inside. I kept myself busy by reading and trying to exercise, and that helped me to make it through.

But Southport is a whole different animal. During the last couple months I spent at Southport, I became aware of a young man on my unit in his early twenties who had mental health needs. One day, I overheard COs telling him that he couldn't go to the yard. The kid reacted by throwing a tantrum. The next day the COs took him out of his cell and jumped him. Several days later, the kid asked for mental health help but instead the COs jumped him again.

Before I came home, I barely received any discharge planning. There are no transitional services at Southport. I brought it up with my counselor numerous times but basically nothing happened. The reply from my counselor and my teachers were that they were not obligated to assist me with discharge planning.

More specifically, I asked my counselor on multiple occasions for information about agencies and their addresses so that I could write to them to see if they would be suitable discharge locations for me. But the counselor refused to provide any information. The counselor also failed to do the basics of his job to help me obtain a social security number, a birth certificate, and other basic things.

When I then criticized the counselor, I was retaliated against. A correction officer confided in me that he was facing a lot of pressure to give me a disciplinary ticket. The officer said he had to give me some ticket, and so he searched my cell and gave me the minimal ticket of excessive property. The officer acknowledged that I get along with everyone and was not a problem for the staff, and that he felt bad about giving me the ticket. I understood and appreciated that the CO was being straight with me about why things were happening. But I still got the ticket and 30 days keeplock. And I still didn't get the reentry resources I needed.

I spent almost a decade in prison and that is a long time to be on the inside. I no longer know the world now. And I knew I needed help to prepare for coming back to the outside community. But I didn't get any significant help with my release planning. Luckily, I switched housing areas toward the end of my time at Southport and got a new counselor, who did provide me a little bit of information about housing, a food pantry, and resume writing and interviewing. But I left prison without a social security card or a birth certificate, let alone Medicaid or a place to live. It was stressful that I didn't receive any help securing healthcare while I was at Southport.

But I did make it out, and I am doing whatever I can to succeed out here. I am currently living in a three-quarters house, with four guys sharing one room. I am in the process of looking for other housing and securing a job. Right now, though, I have to focus on getting my life together. But I do want to speak out about the torture of solitary and other abuses inside the prisons because people need to know.

I WANT TO BE A GOOD FATHER

It is hard being a father, especially when you are in prison. I was first incarcerated almost ten years ago when I was 19 years old. Now I am almost 30; I have spent every second of my 20s inside. I want to be a good father; I have been locked up for most of my daughter's life. My dad wasn't around while I was growing up either. It was my step-father who taught me everything I know, and I'm close with my sister who says that I am a softie for reading "Twilight." My visits from my family are the most important moments in prison for me. It was what happened during one of these visits that first landed me in the SHU.

During one of these visits from my family, there was this CO standing guard, who treated everyone like an adolescent. My very young daughter was a little hyperactive due to the excitement of the visit. That CO began angrily screaming at her. I confronted the CO and told him not to scream at her. She's my daughter; if she

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was misbehaving, please tell me, and I can handle it. Well, he didn’t like that response.

As I was leaving the visit, the same CO who I confronted claimed that he saw my wife slip something to me and that I had stuck it up my anus. After already making me humiliate myself by showing him my behind, he began to claim that he needed to reach deep into my behind to find it. I tried to protect myself and stop him from sexually assaulting me, but that was just the excuse he was looking for to call in his buddies, the other COs, and they all beat me up. They dragged me butt naked through the prison to the SHU. They then searched my cell, and claimed to find weapons there, which in reality they planted.

That was over eight years and countless tickets ago. I have been in solitary confinement or alternative mental health isolated confinement units ever since. I have been here in the box at Southport for over three years. The only thing that has changed in all these years is now we are given headphones as soon as we enter and there has been a little more cell study. Besides that, the COs still get away with physical and verbal abuse and there is still no human interaction. And the racism has never stopped. The COs will still say things to me like, “F you [n-word].” They don’t get in trouble for it, so why would they stop?

The one thing that kept me going, my family, I see even less. I have no interaction with the outside world. Inside, the conditions are horrible. Many of the COs see us as the scum of the earth. The COs are constantly attacking people in full body restraints for no reason. They grab your private parts while making sexual comments. It feels like they would kill us if they had the chance.

People are constantly setup here at Southport. Most recently, a CO asked me “If given the chance, would you have sex with Katy Perry?” “Yeah,” I responded. He shot back, “she wouldn’t f*ck a [n-word] like you.” Yeah, you’re probably right, I thought to myself. “Why aren’t you responding?” he pressed. “I wouldn’t respond to a sh*t bag like you,” I answered him.

I was then beat up and ticketed again. I then threatened to kill myself and was taken to the observation cells. Reporting misconduct leads only to more BS tickets in retaliation. The COs brag to you about beating up your buddies like it is some sort of accomplishment beating someone up when you outnumber them and they are in full body restraints. It’s part of their strategy to provoke and agitate you, so they can give you more tickets. Every time you get a ticket, your time in the SHU is extended and basic necessities like food, showers, and cleaning supplies are withheld from you, often for weeks.

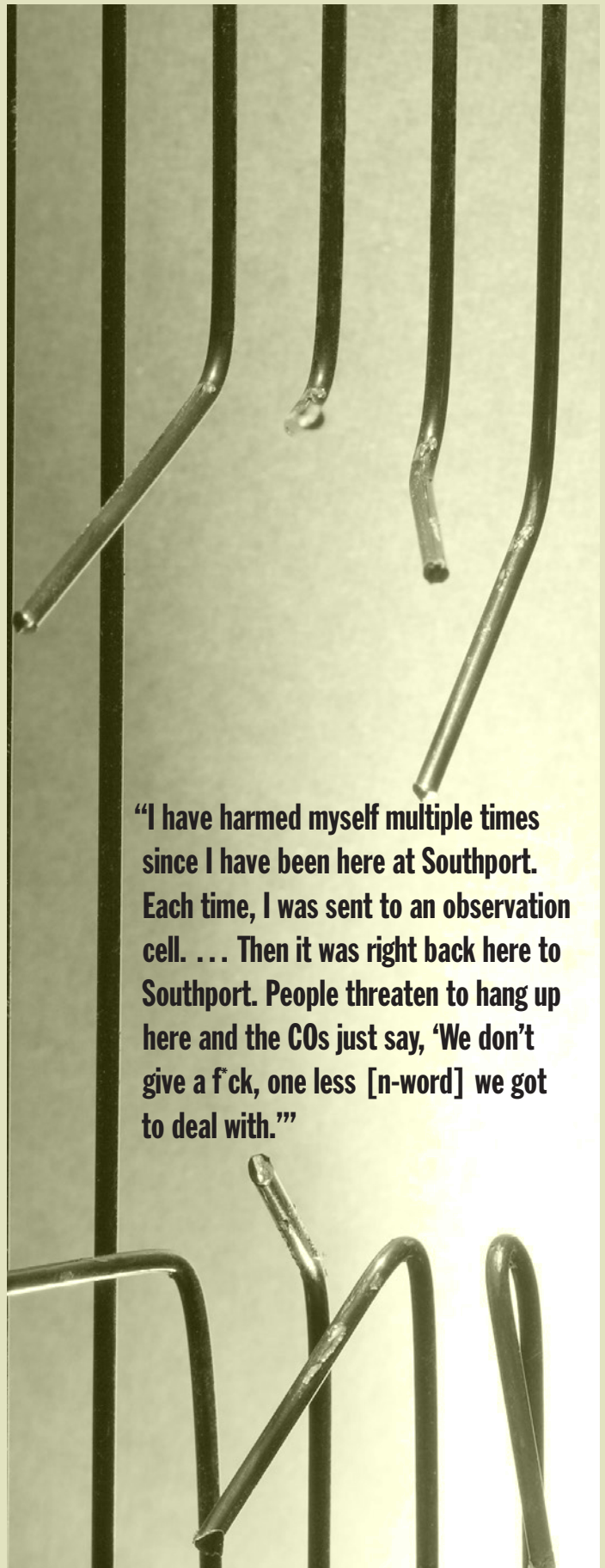
The worst part of being in the SHU is being in this cage, closed in, 23 or 24 hours a day with no interactions with other people or society. It is horrible – it has been so long that I have been in here with no meaningful contact with the world. In the SHU, you are broken down every way: physically, emotionally, and mentally - there is no stimulation. The SHU is not a place for human beings. You are surrounded by mentally ill people, some who are constantly screaming and throwing urine and feces.

I myself am on the mental health caseload, currently as a Level 3 patient. I used to be considered to have serious mental illness, and I spent years in the Behavioral Health Unit (BHU) at Great Meadow and the Residential Mental Health Unit (RMHU) at Marcy – only for people who have an S-designation and have to be removed from the SHU because of their serious mental illness. I was last in the RMHU in 2011. But then they changed my mental health level, and then they took me entirely off the caseload. I was put back on the caseload just recently after my latest trip to the observation cells.

I hurt myself so that the guards don't hurt me. I have harmed myself multiple times since I have been here at Southport. Each time, I was sent to an observation cell. It was an empty cell, except for the bed, in a different facility. I would only be there for a couple days each time, but it felt like a vacation because I was away from those guards and away from the SHU. Then it was right back here to Southport. People threaten to hang up here and the COs just say, "We don't give a f*ck, one less n-word we got to deal with."

Right now, I feel emotionally depressed. I try to work through my issues, but it is not easy in this environment. Mental health staff don't care. I see someone from mental health once a month for about five minutes. I receive better therapy from other guys on my gallery than from the professionals. I try to read, listen to music, and write.

My maximum release date from prison is 2016. I am worried, excited and anxious about getting out.



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I just want to touch an iPhone. I'd like to get connected to the Fortune Society. And I don't want to be another statistic who recidivates. The prison has done nothing to prepare me for my release. Because of my tickets, I have no access to any of the programs. I was a teenager when I got here. I spent almost a decade in solitary confinement. Soon, I'll need to know how to really be a father and provide for my family. Right now though, I just want to be far away from the prison guards, and to try to help my community, even if I don't have any success.

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GOING HOME FROM SOLITARY WITH MY MENTAL HEALTH DETERIORATED

I never really had a steady home life. My father died when I was very young, and I ended up losing contact with my mother and step-father. I eventually found myself in foster care. I never expected it to happen, but I got adopted when I was in my teens and for a time that turned my whole life around. I graduated high school and found a good job. But then I hit a rough patch. My adoptive parents got divorced, one of my best friends died, I went off my medication, and I ended up losing my job. I picked up my last paycheck and got on a bus to get away from it all, but I ran out of money and had to hitchhike back. I ended up burgling a house, and the homeowner got back while I was still there. I forgot my wallet with my driver's license and social security card in the house – I'm not much of a criminal. I'm really not a bad a person; I was just going through a rough time and made a mistake.

This was the only time I have been incarcerated and I was initially sent to a Shock program. I stayed there for a little while and then was transferred to a different Shock facility. It was an okay program, but I was having a really hard time with it, so I requested a mental health discharge partway through. I am a mental health patient with a diagnosis of PTSD and ADHD.

I was sent to another prison and things were okay for almost a year until staff assaulted me, but gave me a ticket for assault on staff. I saw some COs picking on another incarcerated person and making inappropriate sexual remarks. It wasn't right, so I spoke up on that man's behalf. I also got into an argument because COs told me I couldn't take food back even though it is allowed. One of the COs punched me and several COs jumped me. I only weighed around 140 pounds at the time. I ended up with a broken nose, two ribs I believe

were cracked, and a visible shoe print on my arm from when one of the COs stomped on me. Yet, I didn't get any medical treatment other than ibuprofen. When I did have an X-ray done, I could see on the screen what looked like two cracks in my ribs. I could not breathe without it hurting. Although staff assaulted me and broke my nose and ribs, they gave me a disciplinary ticket for "assault on staff" from this incident and sent me to SHU. I got a year in the box, which was beyond my maximum release date.

A couple of days after I was beaten, I was in a bad state and cut myself. As a result, I was put in the RCTP. It was the second time I had been placed in an RCTP, and it was frigidly cold. After spending a few days in the RCTP, I was sent back to the SHU and eventually sent to Southport.

The SHU was pretty horrible. The living conditions were bad, and the COs treated you badly. I got to listen to the radio, but there were no selections. Our mail would usually be tampered with and delivered almost a week late. I could shower only twice a week, and the shower facilities weren't even clean. There would be food missing from my meal tray half the time. There was nothing to do, so I slept a lot of the time. I was on cell study, but I am already a high school graduate, so the material was inadequate for me. They said I might be able to do an Aggression Replacement Training (ART) workbook by myself in my cell if I wanted to, but it was almost impossible to get access to the program. I could get one hour of recreation, but it was just like being walked from one cage to another. There was nothing to do except stand around in a cage under brutal conditions. I also received various deprivation orders for multiple weeks while in the SHU. They took away my showers, recreation time, haircuts, and cell cleaning – meaning I was denied all cleaning supplies, including a toilet brush and germicide spray.

The COs didn't make it any easier, as they were constantly disrespectful. They made fun of my body weight, facial hair, skin tone, and the way I talk. You can't do anything because the COs will set you up or beat you up in the stairwell – that's the number one thing they'll do. When I first got to Southport, the COs were messing with the food of a guy I came in with. Once, I saw them pull him out of his cell and could hear them hitting him. Sometimes, the COs would also go on the intercom and say things about the people in SHU, calling them "rape-o" or "snitch." I even remember hearing about a CO from another facility who basically watched someone kill himself and did nothing to stop him. Some guys filed grievances or lawsuits, but a lot of guys were scared to raise complaints.

Taken all together, the SHU caused my mental health to deteriorate. My weight was down and I suffered from anxiety and depression. When I first got to SHU, I already had a PTSD diagnosis, and I just got more PTSD in the SHU. At one point, I had been an OMH Level 3 patient. Isolation and the way the COs treated us just made my condition worse. I left Southport as an OMH Level 1 patient. The SHU worsened my mental health condition.

Fortunately, I was recently released from prison and able to go home. I went directly from solitary to the street. I hope to open my own company. And since I have never had a steady home life, my main hope is to settle down and start a family. I also am really interested in educating people about what goes on in prison. Lots of people in prison aren't bad people; just people who made mistakes. That's one of the misunderstandings about people in prison. COs make commercials that make incarcerated people out to be bad people. It's false advertising, and it – plus all of the abuses and isolation we experience inside – makes it harder for us when we get out.

8

CONCLUSION AND RECOMMENDATIONS

The powerful narratives from people incarcerated in Southport's SHU, coupled with the CA's data analysis and assessments, highlight the urgent need for New York State to: A) end the torture of solitary confinement for all people; B) stop staff brutality, racism, and abuse; and C) reduce the number of people incarcerated at Southport and across the prison system.

A) END THE TORTURE OF SOLITARY CONFINEMENT

There is a growing trend and consensus around the country and internationally toward ending the torture of solitary confinement that is taking place at Southport and across the New York prison system. President Obama, Supreme Court Justice Kennedy, and the Pope have all strongly denounced the use of solitary confinement. The Mandela Rules – recently adopted by the entire United Nations General Assembly, supported by a US delegation consisting of corrections administrators, and voted for by the US government – place a prohibition on solitary confinement beyond 15 consecutive days. The rules reflect and indicate the growing international consensus that solitary confinement beyond 15 consecutive days amounts to torture and should be banned for all people. Yet, in New York State, thousands of people continue to spend months and years in solitary, and some people have even spent decades, including upwards of 30 years. New York State must end this torturous practice at Southport and across the prison system. Policy-makers should pass and implement the Humane Alternatives to Long Term (HALT) Solitary Confinement Act, A. 3080 / S. 4784. Other legislation, such as A. 1905A / S. 5241 would also take important steps to reduce the use of solitary in New York. Legislators, the Governor, the DOCCS Commissioner, and other state policy-makers must:

Recommendation 1:

End the torture of solitary confinement for all people. HALT would ensure that no person is subjected to the torture of solitary confinement beyond 15 days. HALT would also ensure that no person is held in solitary for more than 20 days total in any 60 day period to prevent cycling in and out of solitary. Moreover, even in those shorter periods of solitary, HALT would require that people have at least four hours per day out-of-cell time, including at least one hour of congregate recreation.

Recommendation 2:

Create more humane and effective alternatives. For any person that needs to be separated from the general prison population for more than 15 days, HALT would create separate, secure, rehabilitative and therapeutic units providing programs, therapy, and support to address underlying needs and causes of problematic behavior. These alternative units would have at least seven hours out-of-cell time per day consisting of six hours of out-of-cell programming and one hour of out-of-cell recreation.

Recommendation 3:

Further protect people from solitary or other forms of separation. HALT would also restrict the criteria for placement in solitary or alternative units to the most egregious conduct to ensure separation happens only for true safety reasons and for people who are in need of an intensive rehabilitative and therapeutic intervention. HALT would also ban the use of solitary for people particularly vulnerable to its damaging effects or additional abuse in solitary, such as young or elderly people, people with mental illness or disabilities, pregnant women, and new mothers. Moreover, HALT expands staff training, procedural protections, transparency, and oversight.

The use of solitary confinement traumatizes the person being isolated and the corrections staff assigned to solitary units. It negatively impacts prison and community safety and has led our state into an urgent human rights crisis. The Governor and legislature must HALT solitary confinement in New York State and end this torture for people incarcerated at Southport and across the prison system.

B) STOP STAFF BRUTALITY, RACISM, AND ABUSE

In addition to ending the torture of solitary confinement, New York must end staff brutality, racism, and abuse at Southport and across the prison system. So long as New York continues to confine people at Southport, as well as at other prisons, the State must create mechanisms to end staff violence and abuse, including through a broad package aimed at transforming the entrenched racist and punitive culture of the prison system. Legislators, the Governor, the DOCCS Commissioner, and other state policy-makers must:

Recommendation 4:

Stop staff brutality, end systemic racism, and transform the culture. New York must replace a culture and environment of brutality, violence, excessive punishment, dehumanization, intimidation, fear, and abuse with a culture that prioritizes mutual respect and communication between staff and incarcerated persons; conflict resolution, transformation, and de-escalation; and individual autonomy, support, programs, empowerment, and personal growth for incarcerated persons. Specifically New York must, among other changes:

- Effectively implement a no tolerance policy for improper or excessive use of force, including absolute prohibitions of certain types of force (such as blows to the head) and strengthened prohibitions against any use of force other than in exceptional circumstances in response to imminent violence or harm.

- Implement racial and ethnic impact statements on incarceration-related policies and practices (including imposition of disciplinary tickets and solitary confinement time), and prohibit any and all policies that exacerbate racial disparities.
- Reverse racial disparities at all stages of the incarceration process from arrests, prosecutions, and sentencing to treatment of people while incarcerated and imposing disciplinary tickets and solitary confinement.
- Enhance staff recruitment, incentives for hiring, qualifications, and training in order to recruit a more qualified and racially, culturally, gender, and gender identity diverse staff.
- Adopt staff recruitment, training, and approaches focused on communication, crisis intervention, trauma-informed care, de-escalation, empathy, and anti-oppression/racism.
- Expand programs aimed at transformation, growth, autonomy, self-expression, peer support, and exploring trauma, including substance abuse treatment, anti-violence training, programs for people convicted of sex offences, general and higher education programs (including passing A. 3995 / S. 3735 to restore Tuition Assistance Program eligibility), and vocational and reentry services at Southport and all NYS prisons.

Recommendation 5:

Expand transparency, oversight, investigations, and accountability. The longstanding and ongoing brutality, torture, and abuse at Southport and across New York State prisons demands that DOCCS can no longer police itself and that the legislature and Governor must make bold fundamental changes to greatly expand transparency, oversight, and accountability at Southport and all prisons. Specifically New York must, among other changes:

- Expand public oversight and transparency, by expanding media and community access, augmenting the CA's authority, and enhance

mandatory periodic public reporting by DOCCS, OMH, and other state agencies.

- Create independent State oversight and investigations of Southport and all NY prisons, including by creating a correctional Ombudsman, A. 1904.
- Overhaul the disciplinary systems for both incarcerated people and staff.
- Welcome investigations and accountability – at Southport and all prisons – independent of NY State, including through a system-wide investigation by the federal Department of Justice, as well as granting access to the UN Special Rapporteur on Torture.

C) REDUCE THE NUMBER OF PEOPLE INCARCERATED

As seen through the narratives shared in this report, incarceration itself is inherently violent, counterproductive, and fueled by systemic racism. New York continues to incarcerate far too many people for far too long. Legislators, the Governor, the DOCCS Commissioner, and other state policy-makers must:

Recommendation 6:

Fully implement Raise the Age, release parole-ready people, and reduce the number of all people in prison. New York must undertake substantial efforts to reduce the number of people incarcerated, including by reducing the number of people arrested and prosecuted, reducing the lengths of sentences people receive, better prepare people to return home while they are incarcerated, and release people who have demonstrated their readiness for release. As an initial start most relevant to the narratives in this report, New York must, among other changes:

- Fully implement and adequately fund the Raise the Age law enacted in 2017, which will divert most 16- and 17-year olds to Family Court, and

ensure that no children are held in adult prisons and jails. Young people in New York State should not be growing up in youth and adult prisons, let alone in solitary confinement.

- Release aging people and all people who have demonstrated their low risk to society, growth and transformation while incarcerated, and/or readiness for return to the outside community, including by passing the SAFE Parole Act, A. 4353 / S. 3095A, as well as presumptive parole, bill, A. 7546, A. 1909 and A. 2619A.
- End life without parole, overall reduce sentence lengths for people currently incarcerated and facing incarceration, and promote alternatives to incarceration and other more effective interventions aimed at addressing people's underlying needs and behaviors.

Overall as seen throughout the above narratives and report, solitary confinement is torture and must end in New York State. At the same time, the use of solitary is interconnected with other abuses of incarcerated people taking place inside of NY's prisons, including not only physical brutality, but also repeated denials of parole release, incarcerating children in adult prisons and jails, and inadequate access to medical care, mental health services, and program and rehabilitative opportunities. Solitary confinement is but one severe component of a broader abusive system of incarceration, racial injustice, and a paradigm of punishment over rehabilitation and treatment.

The fundamental transformation necessary for ending the torture of solitary confinement should be applied to a myriad of other policies and practices. In the same way that New York must take action to reduce the use of solitary and create more humane and effective alternatives, New York must also act at Southport and across the prison system to, for example, end staff brutality, promote the release of more people on parole who have demonstrated their rehabilitation and low risk to

society, reduce incarceration sentence lengths, foster alternatives to incarceration and the use of restorative and transformative justice, and restore access to higher education to people who are incarcerated and who come home. Ultimately, New York must begin a process of decarceration, racial justice through healing and community empowerment, and a paradigm shift from punishment, warehousing, and the infliction of harm toward rehabilitation, treatment, and empowerment. It can start by ending brutality and the torture of solitary confinement at Southport and across New York prisons.

9

DEFINITION OF TERMS

Aggression Replacement Training (ART) – an 8 to 16 week class (32 sessions) facilitated by Transitional Services that teaches alternative ways of managing thoughts and behaviors through skits, role plays, and demonstrations.

Alcohol and Substance Abuse Treatment (ASAT) – a 6-month or longer program designed as a therapeutic community model to aid participants in recovery from addiction.

Behavioral Health Unit (BHU) – a disciplinary residential mental health treatment unit at Great Meadow that is recognized as an alternative to SHU under the SHU Exclusion Law for individuals diagnosed with serious mental illness who have received disciplinary infractions leading to SHU time. Unlike other alternative units under the SHU Exclusion Law, BHUs require participants to receive only two hours a day, five days a week, of programming outside of their cells.

Bid – a prison sentence.

Bill A. 1905A / S. 5241 – proposed legislation in the New York Legislature that would, among other things, prohibit solitary confinement for all people with mental illness, people with a permanent physical disability, and any person under the age of 21, as well as requiring public reporting and that solitary be used for the minimum period necessary for the maintenance of order or discipline.

Bill A. 2619A / S. 4518 – proposed legislation in the New York Legislature that would, among other things, mandate that the commissioners on the Parole Board reflect the prison population in terms of race, ethnicity, age, and geographic area of residence, and that at least one-third of commissioners have at least five years of experience in social work or reentry work.

Bill A. 1909 – proposed legislation in the New York Legislature that would, among other things, clarify that the Parole Board must base its decisions on risk and needs principles measuring people's rehabilitation.

Bill A. 7546 – proposed legislation in the New York Legislature that would, among other things, require the state board of parole to find that an incarcerated person presents an unreasonable current public safety risk to deny discretionary release to parole and provide that if parole is denied that release shall be presumed at subsequent hearings absent a preponderance of evidence that the person presents an unreasonable public safety risk.

Cell Shield – A thick transparent cell cover issued to people in solitary confinement at the discretion of security staff for alleged infractions such as throwing or spitting fluids out of the cell, disrupting the general order of the unit, or refusing to keep arms and hands inside the cell.

Central New York Psychiatric Center (CNYPC) – psychiatric hospital in Marcy, NY with a limited number of available beds for incarcerated persons to provide inpatient psychiatric care and treatment.

Commissary – location in the prison where people in the general prison population may generally purchase food, toiletries, tobacco products, electronics, and other personal items. People in solitary confinement are limited in commissary purchases to writing and mail materials, hygiene products, one deck of playing cards, and possibly batteries.

Count – A practice to account for each person in a prison conducted by Correctional Officers multiple times every day.

Department of Corrections and Community Supervision (DOCCS) – the New York State public prison agency that operates all New York prisons and “is responsible for the confinement and habilitation” of all people who are incarcerated in the New York State prison system.

Deprivation Order – order issued to people in solitary at the discretion of security staff limiting access to even the most basic services, such as limitation on food, showers, recreation, haircuts, water, lighting or bedding

Disciplinary Ticket / Misbehavior Report – a notice issued to incarcerated people by any DOCCS staff for an alleged violation of a prison rule. There are three tiers of tickets I, II, and III, and tier II or III tickets can result in sentences to solitary confinement as well as a mandatory \$5 surcharge and other losses of “privileges.”

Disciplinary Hearing – internal DOCCS process overseen by a DOCCS employee to resolve disciplinary tickets issued to incarcerated people. Incarcerated people are not allowed to be represented at the hearings, but may testify and call certain witnesses.

Double Bunking – the practice of placing two incarcerated people in one single cell.

Freedom of Information Law (FOIL) – legislation that guarantees the rights of people in New York to obtain records of public agencies in the state.

Grievance – a complaint filed by a person who is incarcerated about “the substance or application of any written or unwritten policy, directive, procedure, or rule of DOCCS or any of its program units...”

HALT Solitary Confinement Act, A. 3080 / S. 4784 – proposed legislation in the New York Legislature that would, among other things, prohibit more than 15 consecutive days in solitary confinement for any person, create rehabilitative and therapeutic alternatives to solitary, restrict the criteria that can result in solitary or alternative units, ban even one day of solitary for certain categories of people, and require training, public reporting, and outside oversight.

Keeplock (KL) – a form of solitary confinement during which incarcerated persons are either kept in their own cell or moved to a separate cellblock, and held on 23 to 24-hour a day lock down, generally with access to their property.

Loaf – a particularly harsh deprivation order in which people were placed on a restricted diet where all meals consisted of what is known as “the loaf,” a dense, binding, tasteless, one pound loaf of mixed ingredients with a side of raw cabbage. Under the Peoples settlement, DOCCS was required by July 1, 2016 to replace the Loaf with a new special management meal composed of “a nutritious, calorie-sufficient, and palatable meal composed of regular food items.”

Office of Mental Health (OMH) – the Department responsible for providing mental health care for incarcerated people throughout the state prison system. Upon entering the prison system, individuals are assessed on a scale of one to six for severity of mental illness by OMH and subsequently designated to a facility capable of providing for their needs, with people who are Level 1 requiring the most intense mental health services and people who are Level 6 do not require mental health care.

Office of Special Investigations (OSI) – internal DOCCS investigative body, formerly known as the DOCCS’ Inspector General (IG), with a mandate to “investigate allegations of criminal activity related to DOCCS or any other wrongdoing within DOCCS.”

Ombudsman Bill, A. 1904 – proposed legislation in the New York Legislature that would, among other things, create an independent public oversight agency to monitor New York prisons, investigate complaints, and bring transparency and accountability.

Peoples v. Annucci – lawsuit that was settled in 2016 that placed some limitations on the use of disciplinary solitary confinement in New York prisons including by, among other things, providing sentencing guidelines for the use of solitary, mandating the future creation of a limited number of alternative-to-SHU units, and expanding some of the most basic minimal protections for people in solitary.

Progressive Inmate Movement System (PIMS) – a system for individuals who are in solitary confinement to have certain restrictions removed or basic “privileges” earned, such as an additional shower or less restraints, if they progress from PIMS Level 1 to Level 3.

Raise the Age – a law that raised the age of criminal responsibility in New York State from 16 to 18 as of 2019 for certain crimes and will require 16- and 17-year-olds who are incarcerated to be held in facilities that are only for people in this age group and do not hold adults.

Residential Crisis Treatment Program (RCTP) – an inpatient emergency assessment and evaluation unit operated by OMH for incarcerated persons exhibiting suicidal tendencies, or who are otherwise in psychiatric crisis.

Residential Mental Health Unit (RMHU) – a disciplinary residential mental health treatment unit at Marcy, Five Points, and Attica that is recognized as an alternative to SHU under the SHU Exclusion Law for individuals diagnosed with serious mental illness who have received disciplinary infractions leading to SHU time. RMHUs require participants to receive four hours a day, five days a week, of programming outside of their cells.

Residential Mental Health Treatment Units – mental health units within DOCCS prisons that include the disciplinary alternative-to-SHU (RMHUs, BHU, and a Therapeutic Behavioral Unit (TBU) for women at Bedford Hills), as well as non-disciplinary residential mental health units called Intermediate Care Programs (ICP) and one Intensive Intermediate Care Program (IICP).

SAFE Parole Act, A. 4353 / S. 3095A – proposed legislation in the New York Legislature that would, among other things, require the Parole Board to base its decisions on applicants’ readiness for reentry, specify what an applicant who has been denied can do to be released, and grant release to those who complete the requirements and demonstrate their readiness to safely return to their communities.

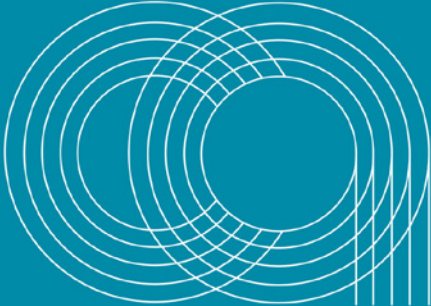
S-Designation – a designation statutorily defined by the SHU Exclusion Law meaning that a person has a serious mental illness and has to be diverted from SHU or a separate keeplock unit to a residential mental health treatment unit.

Shock Program – an intensive boot camp style treatment program that emphasizes substance abuse treatment, military style discipline, fitness, life skills, and education in a therapeutic community setting.


Special Housing Unit (SHU) – often referred to as “solitary confinement” or “the box.” The SHU is a disciplinary unit where individuals spend 23 to 24 hours a day in the cells with the possibility of one hour of optional recreation. People in SHU are allowed the bare minimum of personal property including medical devices, a maximum of five books, letter writing supplies, and religious materials. The cell typically consists of a steel framed bed, sink, and toilet.


Special Housing Unit (SHU) Exclusion Law – law passed in 2008 and into full effect in 2011 that requires that any individual who suffers from a serious mental illness (with a so-called “S-designation”) and faces a period of disciplinary confinement that could exceed 30 days must be diverted from a SHU or separate keeplock unit to a Residential Mental Health Treatment Unit (RMHTU), except in “exceptional circumstances.”


Tuition Assistance Program (TAP) restoration, A. 3995 / S. 3735 – proposed legislation in the New York Legislature that would, among other things, restore the eligibility of people who are incarcerated to receive financial aid to attend college.




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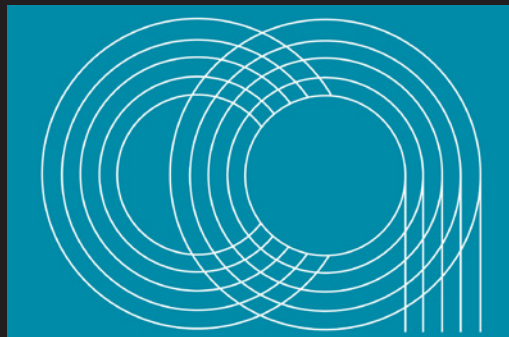
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Correctional Association of New York
22 Cortlandt Street, 33rd Floor
New York, NY 10007
t: 212-254-5700
f: 212-473-2807
www.correctionalassociation.org