

wonder: of 196 countries, only the United States has yet to ratify the UN's Convention on the Rights of the Child.)

As a U.S. political prisoner, Simón Trinidad harks back to the Scottsboro Boys, who in Alabama faced death penalties in the 1930s; to Communist Party [and Socialist Workers Party] members jailed under the Smith Act; to Black Panther Party members caught up in the U.S. government's COINTELPRO project.

Simón Trinidad is also representative of prisoners gathered up in U.S. wars and other interventions abroad. They include Ricardo Flores Magón, Mexican revolutionary who died in Leavenworth Federal Prison in 1922; the "Cuban Five" prisoners who resisted U.S. hostilities against Cuba; and the unfortunates ending up in the U.S. prison in Guantanamo during and after the Iraq War.

Despite the Peace Agreement, paramilitaries or other thugs have since killed almost 400 former FARC fight-

ers; 300 FARC prisoners of war are still in prison almost seven years later.

Violence in the countryside persists. Colombia's military is unable or unwilling to suppress a new breed of paramilitaries. One report highlights the paramilitaries' "symbiotic relationship with Colombian state actors." Declassified State Department and CIA documents from George Washington University's National Security Archives say the same.

The plot thickens: the tight relationship between the U.S. and Colombian militaries and the U.S. alliance with Colombia's government together suggest U.S. complicity with a violence that Colombia's Army and state are unable or unwilling to control.

The bad news for Simón Trinidad is that the U.S. government is betting not on peace in Colombia, but on continuing war. For that reason, Simón Trinidad confronts formidable barriers in satisfying his need to join Colombia's peace process.

Mark Burton's words end this report:

"Simón Trinidad is a man with a clear vision for a new Colombia, a Colombia in peace and with social justice. Colombia needs to listen to his voice, his vision, his proposals for peace. His continued imprisonment in the United States on false charges is an insult to Colombia, its history, and its people."¹

W.T. Whitney Jr. is a retired pediatrician and political journalist living in Maine.

—CounterPunch, August 3, 2023

<https://www.counterpunch.org/2023/08/03/a-plea-for-simon-trinidad/>

1 Burton's comments appear in a remarkable new eBook, accessible here: <https://abpnoticias.org/images/pdf/cartas-insurgentes-simon.pdf>. It contains commentary, in Spanish, from activists, writers, and intellectuals seeking Trinidad's repatriation. The announcement of this book offers a video presentation, here:

<https://www.resumenlatinoamericano.org/2023/07/27/cultura-libro-cartas-insurgentes-para-simon-trinidad/> of reflections and documentary material.

X It's Time to End Solitary Confinement Behind Bars

BY TERRY A KUPERS

As a forensic psychiatrist, I have studied and testified in court for over four decades about the harms of solitary confinement.

Research indicates it does not reduce violence behind bars, and in U.S. states where the population in solitary confinement has been reduced, the result has actually been a reduction in the rate of prison violence.

The harm stems from social isolation and forced idleness. Human beings are social creatures who need human engagement and meaningful productive activities to sustain mental stability, healthy relationships, and productive pro-social pursuits.

Forced isolation leads to a decimation of life skills, including the capacity to resolve differences peacefully, and

that explains why there is less violence in the prisons when the use of solitary confinement declines.

The well-known psychological effects of being alone in a cell nearly 24-hours-per-day with no meaningful activities include severe anxiety, panic, paranoia, problems with memory and concentration that make reading and studying nearly impossible, despair, depression, self-mutilation, the exacerbation of mental illness and an extraordinarily high rate of suicide. Solitary confinement also worsens medical conditions such as heart disease, hypertension, and diabetes.

It's no surprise that individuals who have spent significant time in solitary are at a much-heightened risk of substance abuse and crime, subsequent to their release from prison. They also have

an increased mortality rate from all causes in the year following their release. Solitary confinement is disproportionately inflicted on Black, Latino, Native American and other people of color.

Solitary confinement equals torture

The United Nations Special Rapporteur on Torture declared solitary confinement for more than 15 days to be torture, and the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Mandela Rules) prohibit more than 15 days of solitary confinement.

Yet, in the U.S., more than 120,000 prisoners are consigned to solitary confinement, many for years and even decades.

Dennis Wayne Hope spent 27 years in solitary confinement in the Texas Department of Criminal Justice. *The Box: 27 Years in Solitary Confinement*, a recent 30-minute documentary on Al Jazeera Fault Lines tells his story.

Hope speaks frankly on camera about the devastating effects of solitary confinement, including an impulse to self-harm, massive despair and frighteningly altered thoughts and perceptions. It is notable that he was convicted for non-violent robberies, so he is hardly “the worst of the worst,” the label prison authorities use to stigmatize individuals they put in solitary confinement.

He escaped prison twice in the 1990s, resulting in his being sent to solitary confinement for 27 years. His journey is remarkable in the ways he figured out how to maintain his emotional stability as well as his quest for freedom under extraordinarily harsh conditions. This must-see documentary provides rich and inspiring lessons in resilience as well as ingenuity in devising ways to remain sane in a psychosis-inducing torture-chamber.

Hope exhibited remarkable emotional stability against all odds while in “The

Box” for 27 years. But individuals who suffer from serious mental illness are condemned to experience even worse mental illness in solitary confinement.

There are currently far more people with serious mental illness in jails and prisons than there are in psychiatric hospitals.

Still, in many departments of correction, people with serious mental illness are selectively consigned to solitary confinement and left there for years, usually in the context of very substandard correctional mental health services. An explosive growth in the number of prisoners with serious mental illness occurred subsequent to de-institutionalization and the incremental defunding of public mental health services.

A geometric growth of serious mental illness

The neoliberal agenda since the mid-1970s has been to dismantle social

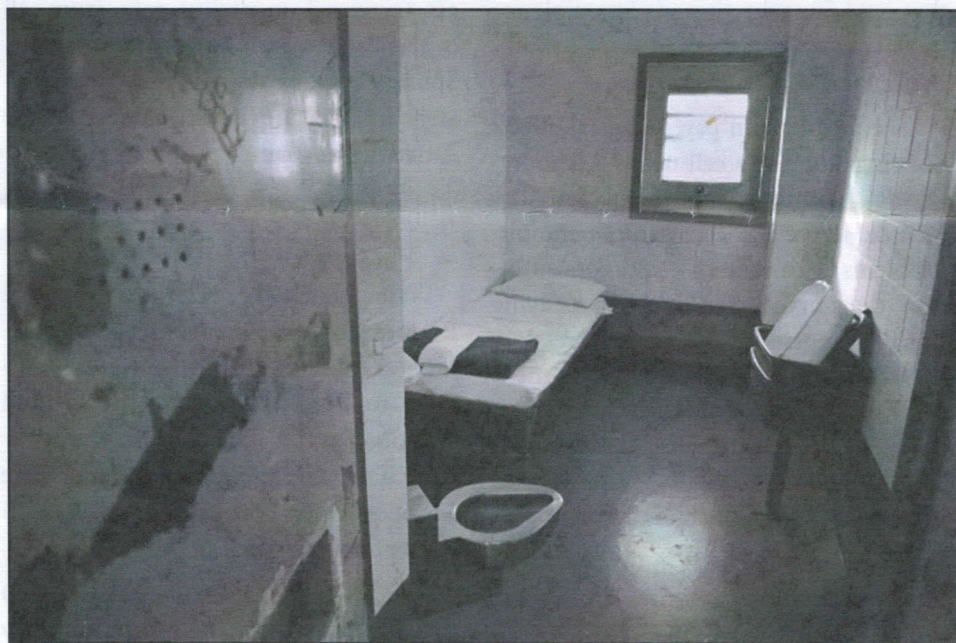
welfare safety net programs, including public mental health, vocational support and affordable housing. As a result, the population in psychiatric hospitals has dramatically shrunk while the number of people with serious mental illness in jail and prison has grown geometrically. There are currently far more people with serious mental illness in jails and prisons than there are in psychiatric hospitals.

It is as if the people whose needs are ignored on account of cruel social priorities are disappeared into jails and prisons so more affluent people will not have to see them unhoused and floundering on the streets. Then, once behind bars, they are disappeared again, into solitary confinement where, out of public view, their mental illness is exacerbated, or they die by suicide.

There is a growing momentum across the United States to restrict or eliminate solitary confinement in jails, prisons, and immigration detention facilities. New York State, New Jersey, Colorado, and Nevada have enacted laws to end long-term solitary confinement in their prisons.

Chicago, New York City, Pennsylvania’s Allegheny County, and the State of Colorado have announced an end to solitary confinement in their jails. In California, the Mandela Act, a bill that would restrict solitary confinement in prison and jail to 15 days in accordance with the UN’s Mandela Rules and the standards of the U.S. National Commission on Correctional Health Care, has been passed in both houses of the legislature only to be vetoed by Governor Gavin Newsom.

The argument the governor and many law enforcement officials give for supporting continuing solitary confinement is that it keeps the prisons safe. That is an incorrect assumption, since solitary confinement makes the problem of violence in prison worse and results in a higher recidivism rate for those who have spent time in solitary confinement.



A solitary confinement cell at New York City's Rikers Island jail, seen on January 28, 2016.

The Mandela Act is about to be returned to Newsom's desk. With new research further evidencing the very destructive effects of solitary confinement as well as the lack of effect on public safety when solitary confinement is vastly reduced, it is time for the governor to sign this important legislation.

In a 2021 national survey, five out of six respondents—cutting across Democrats and Republicans—supported limits on the use of solitary confinement.

Yet as the movement to end solitary confinement grows, some states and localities are devising devious ways to continue the destructive practice while appearing to be complying with voter sentiments. Correctional authorities cynically get around the law by continuing to practice solitary confinement by another name.

In some facilities, prisoners are confined to their cells for 21.5 hours-per-day to defeat the legal prohibition against confinement in a cell for 22 or more hours-per-day.

Other facilities use alternatives to solitary confinement such as a cage-like structure a little larger than a cell with

no furniture and no athletic equipment where reading and writing materials are not permitted. The “cages” are placed in the “day room” or common space between solitary cells.

...solitary confinement makes the problem of violence in prison worse and results in a higher recidivism rate for those who have spent time in solitary confinement...

Unsurprisingly, I've found that in facility after facility that offers this kind of “alternative,” prisoners reject it, choosing to remain in their cells rather than spend hours in a separate cage with nothing to do and nowhere to sit, and these cage-like structures remain mostly empty.

The alternatives to solitary confinement must include meaningful programs that educate and rehabilitate individuals who land in prison. We

know how to run such rehabilitation programs. We as a society simply lack the will to treat folks in prison with respect and compassion.

Given all the momentum and public support for restricting and eventually eliminating solitary confinement, we have a real opportunity to actually eliminate the practice and replace it with evidence-based alternatives that foster mental health and rehabilitation and make possible eventual successful reintegration into the community.

For the sake of public safety, as well as our humanity and morality, our local, state, and federal governments need to embrace a true end to solitary confinement in all its forms and by all its names.

Terry A. Kupers, is a forensic psychiatrist, Professor at the Wright Institute, and author of Prison Madness: The Mental Health Crisis Behind Bars and What We Must Do About It, and Solitary: The Inside Story of Supermax Isolation and How We Can Abolish It.

—Aljazeera, August 2, 2023

<https://www.aljazeera.com/opinions/2023/8/2/its-time-to-end-solitary-confinement-behind-bars>

Abortion Denied: Reproductive Injustice Behind Bars

BY VICTORIA LAW

K. Winston didn't know she was pregnant when she entered the Cuyahoga County Jail. The intake process required a test for tuberculosis, one that typically involves injecting a fluid beneath the skin. Winston is allergic to that fluid, so jail staff planned to X-ray her instead.

First, they gave her a pregnancy test. Then, they told her, “We can't do the test because you're pregnant. You can go back to your [housing unit],” she said.

Winston was shocked. She felt belittled by the way staff had told her. She returned to her pod where, she told *The Nation*, “I cried and cried and

cried and cried.” The 19-year-old didn't want to continue the pregnancy. She was a full-time college student and her studies had already been interrupted by a 90-day jail sentence.

Shortly after, she was moved to the jail's medical unit, which housed pregnant people. Winston was already involved in reproductive justice work with Patients to Advocates, an Ohio group for people who have had abortions, and knew that she had the right to the procedure.

During her first visit with the jail's doctor, she attempted to assert that right. “I do not want to continue this

pregnancy,” Winston recalled saying to the doctor. “How can I get an abortion?”

The doctor said that because Winston had only been sentenced to 90 days, the jail would not provide that option. “She told me if I choose to move forward with that procedure, I can get it once I got released,” Winston said. By then, however, she would be in her second trimester and past the state's gestational limit for abortion care.

The jail had previously settled a lawsuit by another woman who had been unable to obtain an abortion. The 2002 settlement agreement stipulated that the jail provide information about the avail-