

BURIED ALIVE

THE REAL HORROR OF SANITARY CONVENIENCE

There is a dark place within us all. For some, though, that dark place is just a tad bit closer to the surface than it is for others. And for some others still, it is so intolerably close to the surface that it is no longer really within them at all, but without, where it all at once becomes the ultimate reality, their living nightmare, their own personal Dead Zone, and also yet another form of escape-riven tactics that they fearlessly attempt to employ — be it drugs, alcohol, sex, pain, or all of the above — they are an impotent against it as would be the little blue pill against the horrors of masturbation itself. It cannot be out-gunned; it cannot be out-maneuvered; and, most importantly, it cannot ever be out-disturbed. For the skull in your dark lens is akin to those such as Michael Myers and Jason Voorhees, wherein it is forever gazing onward, forever on the hunt, forever there.
Forever.

Only someone whom has had to live with such an overwhelming and oppressive weight bearing down upon their very soul could truly fathom the depths of darkness in which I speak. Personally, I can think of only four types of people of whom would fit such stringent criteria.

For most would probably be the Paranoid Schizophrenic, whom in his dark lens has indeed risen to the surface of their mind and become a dark reality composed of continuously shifting shapes and shadows of nothingness, full of

unknowable and conspiracies and only-God-Knows-what-else, and who's impenetrable darkness offers no available avenues of escape.

Those poor souls dull-witted-enough to find themselves descending slowly into the dark and inexpressible depths of depression, where they will forever be a stranger in the present, ignorant of the past, and sadly unable to fathom the future, let alone enough of what is happening to them to be both horror-stricken and deeply despairing, would also understand these truths well.

Those suffering from the deepest, darkest, most debilitating depression, that which not only incapacitates but eventually leads to one form of self-destruction or another, be it rock-bottom or intentional self-harm, are likewise well qualified to understand the depths of such impenetrable darkness.

As are the nearly millions of prisoners across this country, this so-called Land of the Free, that are continuously — and in some cases aberrantly — forced to endure, against their will, the torturous and inhumane conditions of solitary confinement.

And yet still, solitary confinement exists.

According to a report titled Solitary Confinement as Torture, compiled by the University of North Carolina School of Law (2014), solitary confinement first came into use in the United States as a result of a penal reformation movement in the early nineteenth century. Apparently, some community leaders in Pennsylvania somehow came to the conclusion that convicts weren't inherently evil, but victims of exposure to the evils of "modern" society, and that allowing "the absolute and total isolation of the offender from any evil and corrupting influences" would give the convict time to reflect on his crimes and become reformed. A sound idea, I

glooms, but forced isolation is never a good thing; it's torture, and its extremely dangerous side effects were soon made apparent.

I know that a year after 83 offenders were confined in "small cells with no exercise and no work",² five of the eightyt-three had died, one became an idiot, another, when his door opened for some chance purpose, dashed himself from the gallery into the fearful area below, and the rest, with haggard looks and despairing voices, begged pitifully to be taken back to the shops and set to work. This was suffering applied to both the body and mind.³

Shortly after, in 1890, the Supreme Court condemned the practice of solitary confinement by calling it a "punishment of the most important and painful character." Furthermore, the Court described the adverse effects of its use:

"A considerable number of prisoners fell, after even a short confinement, into a semi-fatigued condition, from which it was next to impossible to rouse them, and others became violently irascible; others still, committed suicide; while those who stood the ordeal better were not generally reformed, and in most cases did not recover sufficient mental activity to be of any subsequent service to the community."⁴

Even still, solitary confinement endures. In the 1960's, both psychologists and pathologists began to explore the potential brainwashing effects of solitary confinement; and so it transformed from a form of rehabilitation into a form of behavior modification.

Today, though, neither of those forms of solitary confinement exist. The goal of solitary confinement is now incapacitation. This [~~can~~ I confidently report as fact]

through not just extensive research but first hand experience.

Let me explain.

I am right now, at this very moment, seated on the floor of a cell that is roughly the size of a bathroom or a walk-in closet. Bedding is the plastic (fire retardant) mattress that I sleep on at night; it is only about 2½ or 3 inches thick and not much better than bare carpet. I am sitting on the floor because I am being forced to use the steel bed frame as a "desk" to write on; one is not provided otherwise. I am allowed nothing on the walls or even the floor. If the wrong guard (correctional officer) sees my matress on the floor I could receive an infraction and be forced to spend another 90-180 days in solitary confinement. At the moment, I have already been in solitary confinement for 163 days.

This time.

Since my initial incarceration in August 2008, I have spent approximately ten years in solitary confinement.

In approximately ten out of the past twelve years that I've been incarcerated, I have been forced to remain in cells just like the one where I now sit, day after day for a minimum of 23 hours per day, several days a week, monthly after agonizing month — and sometimes, year after painful year — with only the intracacies of my own mind for entertainment.

And despite concurrent evidence from countless experts showing that long-term solitary confinement has damaging mental health effects and is particularly inappropriate — and dangerous — for prisoners with pre-existing mental illnesses,

such as myself and countless others.

Like the guy in the cell beside me, who spends every working hour beating

and shouting, breaking and beating, so obviously lost in his own fantastical delusions of grandeur that he doesn't notice the people around him who are bothered by the endless idiocy. That is, until one of these prisoners tired of the noise and tricked the guards into thinking the guy was kicking on the door so that they pepper sprayed him. Now he says nothing. He rarely eats. He no longer takes showers or changes his linens.

His inner darkness has become a reality.

Then there's the guy downstairs on suicide watch. He was just transferred here from supermax. He was okay, at first; then they sent him to regular population. Within about four or five days he was back on a suicide watch. Now he stands in the middle of his bare cell, completely nude, screaming at the top of his lungs that satanic worshippers are trying to kill him and that there are prisoners using secret passages in the walls to try to get at him. Last night he visited all the floors of his cell and laid in it until the guards make him move. Do they care? No. They tell him to "shut up" and call him vulgar and demeaning names, and while the prisoners around him do the same because he won't stop screaming.

His reality is darkness, as well.

Sadly, though, these examples are not only minor, they're normal. I've seen prisoners nail themselves from the air vent with their pants; try to overdose with various medications, die, be resuscitated, and die again; cut their wrists and bathe in their own blood; slice open their stomach and play in their own intestines; swallow toothbrushes, buttons, razor blades, nailclippers, and a myriad other items; eat feces. Leave a man alone with himself long enough and, under the right circumstances, we all break at some point.

Even those of us who are considered "strong-minded".

A lot of people falsely believe that because I have an above-average I.Q. and because I can take care of myself in most situations that this cell doesn't effect me as well. Well, they're wrong.

Entirely so.

Over these past 12 years my inherent darkness has become a pervasive unreality constructed upon pillars of irrational paranoia and blind aggression, sunk deep into free-standing pools of frustration and excessive anxiety, and percolating with nearly intolerable levels of rage and disorientation, and there is nothing that I can possibly do to change it.

I know that these things are happening; it is the deterioration of a mental state that has been developing precariously since an unstable childhood. I am painfully aware of it, but can do nothing to stop it. For my complaints and cries for help go unheeded. In the meantime, I am continuously faced with longer and longer bouts of punitive isolation for the very behavior that solitary confinement is exacerbating to begin with.

And so every single day the darkness grows thicker.

The future grows thicker.

My heart grows colder.

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1. Stuart Grassian, Psychiatric Effects of Solitary Confinement, 22 WASH U.J.L. & POL'y 325, 333-340 (2006).
2. Robert Rogers, Solitary Confinement, 37 J. OFFENDER THERAPY & CORR. CRIMIOLOGY 33A, 339 (1993).
3. Henry Hall, THE HISTORY OF AUBURN (1869).
4. Nic McAlley, 134 JS 160, 170 (1890).

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