I would like to acknowledge the invitation and work of the Southern Africa Litigation Centre (SALC) in bringing us altogether to advance human rights and protect the rule of law in Southern Africa. I found the topic of this training workshop intriguing from an intellectual perspective and provoking from my activist roots. How really does one act to REMOVE legal barriers to prison health and human rights when prison officers tell you to leave your human rights outside the door as you enter a prison cell?

I presume that this invitation was sent to me not because I am a lawyer or an intellect but rather because I’m an activist who has been arrested more than 68 times, including being sent to prison on 3 occasions and denied bail. I suppose that my combined cumulated time in custody of over 10 months drew some experiences that require sharing so as to be able to identify the unique challenges and vulnerability during detention.

Firstly it is important to talk of ‘places of detention’ rather than ‘prisons’ I speak from the point of view that whilst conditions in prisons were inhumane in most instances the conditions in police cells are far worse. Harare Central Police Station was Lice infested, sleeping where sewerage was dripping, we had no access to water for 7 days. The conditions are so atrocious and pose an increased health hazard to anyone with health problems. Additionally, the cells are badly ventilated with small windows which cut off light and air, often smelly, filthy, too cold or too hot. It is my sincere request to SALC to share our successful Supreme Court ruling taken by myself and 3 colleagues courtesy of Zimbabwe Lawyers for Human Rights to be shared to outline conditions and the subject of the ruling which unfortunately remains ignored by the Commissioner of Police in Zimbabwe. I make this point as it seems not enough advocacy is being done to ensure access to police cells as well as prison cells.

Back to vulnerability during detention. A point to make at the onset is that I have suffered racist insults on many occasions all from prison guards and there is no recourse as it becomes your word against the more powerful holder of the keys.

During my time in prison on pretrial detention I lost completely the following rights

- My right to my liberty, I was denied bail for a charge that would attract a small fine if convicted. I spend over 6 weeks in remand prison
- The right to know the time of day
- The right to visitors was often unilaterally taken away
- I was forced to wear prison garb as if I had already been convicted
- The right to read newspapers and know political events
- The right to keep my own property like pads, tablets, food
- The right to privacy and hygiene
- The right to water was limited
- The right to shoes is denied in police cells and in prison is often limited. For a woman to walk barefoot in the cold and dirty cells is a recipe for ill-health
• I was made to sleep next to those facing murder charges and my colleague was separated from us and put with mental convicted murderers as a punishment for her allowing me to assist massage a heat rub as she had a back problem, even though the nurse had advised me to help her.
• I was not taken to remand hearings due to apparent fuel problems
• I was not provided with warm clothing and blankets
• I was forced to shower in a room where male prison guards could easily observe us naked
• I was exposed to inhumane and degrading treatment forced to clean the courtyard with a rubber slipper
• Access to my glasses was often limited

Some details to share of challenges to health and human rights

1. There is hardly any food never mind nutritious to speak of – the staple is maize porridge or sadza – often a huge clump and very few bits of cabbage or other green vegetable floating in a pool of plain water. I say plain water as it seems that the real vegetable soup could have gone elsewhere leaving the cook to simply add water to vegetable. Sometimes there are beans cooked and served but this higher level of protein is not frequent enough. Strangely enough I was witness to food deliveries, donations of more nutritious food which seemed not to make it to our plates.

2. In Chikurubi in 2008, there was such malnourishment that many of fellow inmates could not take anti-retroviral medication on a meal of cabbage and a spoon or two full of sadza.

3. Overcrowding of cells and dirty blankets were a burden to all in our cells. On one occasion I managed to wash my blankets but lock up was at 4pm, they did not dry so a night was spent in an overcrowded cell on wet blankets on a cold cement floor.

4. Access to medical attention was problematic. In 2008 with very heavy flu I was denied bail and sent to Chikurubi. I was unable to obtain any medication from the clinic and when I was fortunate to have visitors bring me some medication and vicks vapor rub for my infected chest I could only get access if the nurse was in the clinic thereby causing some hardship.

5. Menstruation is an added sentence for women in prison both in terms of access to a pad and being able to access one when you need it. Again the clinic nurse seemed to have to keep these items only allowing you a limited amount at a time. In 2008 for some of the menstruation days I had in custody there were no pads in stock for any woman prisoner.

6. Toilet facilities instead of being a space to relieve oneself become a source of indignity. In Chikurubi one had to have a container to use during the confinement times. Both prisons rarely provided cleaning material for the toilets so the prisoners were left to find a way to keep this space clean. Both of my times in Chikurubi prison there was very little water available for flushing the toilets, one had to find containers and keep them filled with water so as to flush manually.

7. When I was granted bail prison inmates asked me to leave my panties behind as they had absolutely non to wear and the prison had none to offer. It is sad to have to share a pair of panties but sadder still for a woman to be put in that position of severe indignity.

8. A note to NGOs coming into prisons to do work around HIV – prisoners do have rights. I had the unfortunate experience of being compelled to take an HIV/ Aids test and it is only through insistence that it was not compulsory that I was let off. NGOs must sensitise workers on prisoner’s rights to choice.
9. There is also a challenge with the Zimbabweans government with regard to misinterpretation of access to medical treatment. The interpretation seems to be that prisoners can only be seen or treated by a prison doctor so no private doctors are allowed to access their patients. This was so badly misinterpreted on one occasion in 2012 that a magistrate in Bulawayo unilaterally revoked my bail and sent me back to prison so as to be seen by a prison doctor. I was unwell and unable to stand trial on the day in question so the Magistrate ordered me back to Mlondolozi prison. I spent a night and day there before my lawyer managed to secure my release to be seen by a private doctor. Coincidentally in both women’s prisons there was no doctor just senior nurses. A woman requiring a doctor’s attention normally had to be taken to the male prison to be seen.

In closing I could share that having been exposed to such conditions, I now have a weak lung and chest and have to be very careful of my health. Please excuse me if I do not share the mental anguish and vulnerabilities as these may become emotionally charged.

Thank you