

Case 7: Humane Conditions in Prisons

Anders Behring Breivik, a Norwegian far-right terrorist, killed eight people by detonating a van bomb in Oslo and then shot dead sixty-nine participants in a youth summer camp on the island of Utøya in 2011. A year later, he was sentenced to the maximum penalty in Norway, which was twenty-one years preventive detention, including at least a minimum of ten years of incarceration.

In 2016, he sued the Norwegian Correctional Service over his solitary confinement and conditions of confinement. He claimed that the restriction of access to other people, including fellow inmates, healthcare workers, chaplains, and family members, is a form of torture. While he has an electric typewriter and an X-box, he claims the cold temperature requires layers of clothing to stay warm and that guards interfere with his daily routine. He demands easier communication with the outside world, a PlayStation3 with “more suitable games,” a room with better decoration and a view, as well as “access to a sofa and a bigger gym.”

The court found in his favor that his conditions violated Article 3 of the European Convention on Human Rights. Article 3 reads, “No one shall be subjected to torture or to inhuman or degrading treatment or punishment.”

Study questions:

1. How comfortable should prison conditions be?
2. What does the word “inhumane” mean, and who gets to decide?
3. Does this issue matter according to the offense; that is, should “humane” conditions be required regardless of whether the reason for imprisonment was marijuana sale, theft, child abuse, murder, or embezzlement?
4. Should society imprison anyone? If so, why? What are the costs and benefits of incarceration?

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British Journal of Urology. He has held offices in 26 professional societies, among them as president of the American Association of Genitourinary Surgeons.

Before coming to Michigan, Dr. Bloom was a staff urologist at the [Walter Reed Army Medical Center](#) in Washington, DC. In 1983, at the time of his discharge from the U.S. Army and upon leaving Walter Reed, he had been promoted to Lt. Colonel and had been appointed chief of pediatric urology. He earned his medical degree from the State University of New York at Buffalo; served dual residencies in surgery and urology at UCLA; and completed a fellowship in pediatric urology at the [Institute of Urology of the University College, London](#).