



END THE OVERUSE OF SOLITARY CONFINEMENT



What is solitary confinement? Solitary or “supermax” confinement is the practice of placing a prisoner alone in a cell for 22-24 hours a day with little human contact or interaction; reduced or no natural light; restriction or denial of reading material, television, radios and other property; severe limits on visitation; and the inability to participate in group activities. Almost all human contact occurs while the prisoner is in restraints and behind some sort of barrier.ⁱ

Who is in solitary confinement? There is a popular misconception that solitary is used only for the most violent and dangerous prisoners.ⁱⁱ Forty-four states and the federal government have supermax prisons, housing at least 25,000 people nationwide.ⁱⁱⁱ But this figure does not reflect the total number of prisoners held in solitary confinement in the United States on any given day. Using data from a census of state and federal prisoners conducted by the federal Bureau of Justice Statistics, researchers estimate that over 80,000 prisoners are held in “restricted housing,” including prisoners held in administrative segregation, disciplinary segregation and protective custody – all forms of housing involving substantial social isolation.^{iv} The majority of individuals housed in isolated confinement are severely mentally ill or cognitively disabled.^v Low-risk “nuisance prisoners” are also housed in solitary because they have broken minor rules or filed grievances or lawsuits.^{vi} Children held in adult prisons are also held in solitary “for their own safety.”^{vii} If the use of solitary confinement were restricted solely to the dangerous and the predatory, most supermax prisons would stand virtually empty.

What happens to people in solitary confinement? People placed in solitary exhibit a variety of negative psychological reactions, including severe and chronic depression;^{viii} self-mutilation;^{ix} decreased brain function;^x hallucinations;^{xi} and revenge fantasies.^{xii}

THE TRUTH ABOUT SOLITARY CONFINEMENT:

JEOPARDIZES PUBLIC SAFETY

Prisoners deprived of normal human contact cannot properly reintegrate into society, resulting in higher recidivism rates.^{xiii}

In California and Colorado, data show that nearly 40% of the supermax population is released directly from isolation into the community.^{xiv} Most states follow similar practices.

WASTES TAXPAYER DOLLARS

Building solitary confinement units costs two to three times more than conventional prisons.^{xv}

A 2007 estimate in Arizona put the annual cost of placing someone in supermax at \$50,000 compared to only \$20,000 for the average prisoner. In Texas it costs 45% more to house prisoners in solitary than in conventional prison.^{xvi}

INHUMANE AND HARMFUL

Solitary confinement causes and exacerbates mental illness, leading prisoners in solitary to attempt suicide at significantly higher rates than those in the general prison population.^{xvii}

The mentally ill often deteriorate catastrophically in solitary, leading courts to consistently find that subjecting the mentally ill to solitary is cruel and unusual punishment.^{xviii}

BETTER, MORE COST-EFFECTIVE ALTERNATIVES:

Since the vast majority of prisoners in solitary confinement are eventually released back into the community, it is imperative that we invest our limited public dollars in proven alternatives that lead to greater rehabilitation and pave the way for successful reentry and reintegration.

STATES SHOULD LIMIT THE USE OF SOLITARY CONFINEMENT IN PRISONS

Minimum Standards: The *American Bar Association Standards for Criminal Justice, Treatment of Prisoners* call for appropriate procedures prior to placing a prisoner in solitary; limiting the duration of solitary; decreasing extreme isolation; close mental health monitoring for people in solitary; and ending the solitary confinement of the mentally ill.^{xix}

Better Alternatives: The State of Mississippi diverted the mentally ill out of solitary confinement and reduced its supermax prison population by almost 90%, from 1,000 to 150 men, and eventually closed the unit entirely. As a result, violence rates dropped 70% and the state saves \$8 million annually.^{xx}

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ⁱ Eric Lanes, *The Association of Administrative Segregation Placement and Other Risk Factors with the Self-Injury-Free Time of Male Prisoners*, 48 J. OF OFFENDER REHABILITATION 529, 532 (2009).

ⁱⁱ Leena Kurki & Norval Morris, *The Purposes, Practices, and Problems of Supermax Prisons*, 28 CRIME & JUST. 385, 391 (2001).

ⁱⁱⁱ DANIEL P. MEARS, URBAN INST., EVALUATING THE EFFECTIVENESS OF SUPERMAX PRISONS 4 (2006).

^{iv} Angela Browne, Alissa Cambier, Suzanne Agha, *Prisons Within Prisons: The Use of Segregation in the United States*, 24 FED'L SENTENCING REPORTER 46 (2011).

^v See, e.g., James Ridgeway & Jean Casella, *Locking Down the Mentally Ill: Solitary Confinement Cells Have Become America's New Asylums*, The Crime Rep., Feb. 2, 2010 available at http://mostlywater.org/locking_down_mentally_ill_solitary_confinement_cells_have_become_america%E2%80%99s_new_asylums; MARY BETH PFEIFFER, CRAZY IN AMERICA: THE HIDDEN TRAGEDY OF OUR CRIMINALIZED MENTALLY ILL (2007).

^{vi} Kurki & Morris, *supra* note ii, at 411-12.

^{vii} WASH. COAL. FOR THE JUST TREATMENT OF YOUTH, A REEXAMINATION OF YOUTH INVOLVEMENT IN THE ADULT CRIMINAL JUSTICE SYSTEM IN WASHINGTON: IMPLICATIONS OF NEW FINDINGS ABOUT JUVENILE RECIDIVISM AND ADOLESCENT BRAIN DEVELOPMENT 8 (2009), available at http://www.columbialegal.org/files/JLWOP_cls.pdf.

^{viii} Stuart Grassian, *Psychopathological Effects of Solitary Confinement*, 140 AM J. OF PSYCHIATRY 1450 (1983); Craig Haney, *Mental Health Issues in Long-Term Solitary and "Supermax" Confinement*, 49 CRIME & DELINQUENCY 124, 131 (2003).

^{ix} Grassian, *supra* note vii; Haney, *supra* note vii; Lanes, *supra* note i.

^x Paul Gendreau et al., *Changes in EEG Alpha Frequency and Evoked Response Latency During Solitary Confinement*, 79 J. ABNORMAL PSYCH. 54, 57-58 (1972).

^{xi} Grassian, *supra* note vii; Lanes, *supra* note i.

^{xii} Grassian, *supra* note vii.

^{xiii} See, e.g., KERAMET REITER, PAROLE, SNITCH, OR DIE: CALIFORNIA'S SUPERMAX PRISONS & PRISONERS 50 (2006).

^{xiv} *Id.*; MAUREEN O'KEEFE, CO. DEPT. OF CORRECTIONS, ANALYSIS OF COLORADO'S ADMINISTRATIVE SEGREGATION 25 (2005).

^{xv} Mears, *supra* note iii, at 2.

^{xvi} CAROLINE ISAACS & MATTHEW LOWEN, AM. FRIENDS SERV. COMM., BURIED ALIVE: SOLITARY CONFINEMENT IN ARIZONA'S PRISONS & JAILS 4 (2007); Mears, *supra* note iii at 20, 26, 33.

^{xvii} See, e.g., Expert Report of Professor Craig Haney at 45-46, n.119, *Coleman v. Schwarzenegger/Plata v. Schwarzenegger*, No.: Civ. S 90-0520 LKK-JFM P, CO1-1351 TEH (E.D. Cal./N.D. Cal. Aug. 15, 2008).

^{xviii} See, e.g. HUMAN RIGHTS WATCH, ILL-EQUIPPED: U.S. PRISONS & OFFENDERS WITH MENTAL ILLNESS 149-53(2003); *MADRID V. GOMEZ*, 889 F. SUPP. 1146, 1265-66 (N.D. CAL. 1995).

^{xix} The full text of the Standards is available at

http://www.americanbar.org/publications/criminal_justice_section_archive/crimjust_standards_treatmentprisoners.html.

^{xx} Terry Kupers et al., *Beyond Supermax Administrative Segregation: Mississippi's Experience Rethinking Prison Classification and Creating Alternative Mental Health Programs*, 36 CRIM. JUST. & BEHAV. 1037, 1041, 1043 (2009); John Buntin, *Exodus: How America's Reddest State --- And its Most Notorious Prison --- Became a Model of Corrections Reform*, 23 GOVERNING 20, 27 (2010); Transcript of Proceedings at 8, *Presley v. Epps*, No. 4:05-CV-00148-JAD (N.D. Miss. Aug. 2, 2010).