

Emerging Population: Individuals with a History of Solitary Confinement and Prolonged Isolation

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Introduction

Incarceration is known to present special challenges to an individual's overall well-being and mental health. This is further supported by the establishment and growing presence of transitional and re-entry programs for the previously incarcerated and their families. Within this population of the incarcerated lies a unique subset of individuals who have been placed in solitary confinement and/or have experienced prolonged isolation. Recent findings have shown declines in total prison populations but significant and steady increases in solitary confinement. As criminal justice reform takes precedence throughout the country, and more prisoners are released to general populations and to their families and their respective communities, it will be important to identify individuals with a history of confinement and provide them with tailored care. This presentation seeks to highlight and recognize these individuals.

Background: Revisiting Solitary Confinement

- The use of solitary confinement as an administrative and disciplinary solution to control prison and jail inmates dates back to the early 1800s.
- Solitary confinement, specifically, is the segregated housing of an adult or juvenile inmate with minimal to rare meaningful contact with others and is referred to by various jurisdictions utilizing terms such as isolation, secured or restricted housing, maximum security, supermax, permanent lockdown, disciplinary segregation, special housing, and intensive management (Position, 2016).
- The first supermax prison, Pelican Bay, purposed to solely house prisoners in segregation was built in 1989 and by 2004, 40 states across the US built similar supermax prisons while hundreds more created segregation units within their existing facilities (Cloud, Drucker, Browne & Parsons, 2015).
- According to researchers Cloud, Drucker, Browne, and Parsons (2015), of the over two million imprisoned inmates in United States correctional facilities and establishments, approximately 84,000 individuals endure the extreme conditions of isolation, sensory deprivation, and idleness.
- Prisoners placed in confinement are typically assigned to control units for indefinite periods of time, which typically last for days to months, or years.

Solitary Confinement & Mental Health

- Arrigo and Bullock (2008) report that social isolation and prolonged solitary confinement have been correlated with symptoms of clinical depression, long-term impulse control disorder, psychosis, self-mutilation, and suicidal behavior.
- Although individuals with mental illness are especially vulnerable to the harmful conditions associated with segregated confinement, those without a previous history of mental illness may experience a deterioration in mental health, as well as a range of other symptoms including anger, visual and auditory hallucinations, cognitive disturbances, obsessive thoughts, and post-traumatic stress disorder. These effects can persist and last well after being confined (Position, 2016).
- Juveniles, in particular, experience anxiety, paranoia, and depression even after short periods of isolation. Youth who are confined for longer periods of time are among the most likely to attempt or commit suicide (Position, 2016).
- Cloud and colleagues (2015) report that more than 60 percent of the suicides that are committed by youth in correctional institutions take place in solitary confinement.
- One study found that among the suicides in juvenile correctional facilities, 62 percent of victims had a previous record of being confined (Position, 2016).
- Self-harm, injuries inflicted on correctional staff, and suicide among prisoners is significantly higher in segregation units than in the general prison or jail population. In the state of New York, rates of suicide are 5 times higher for inmates in solitary confinement than prisoners in general population (Cloud, Drucker, Browne & Parsons, 2015).
- Inmates who are released from segregated units directly back to their communities are more likely to reoffend and tend to offend more quickly.
- Prisoners released from segregation to their communities are likely to reoffend at a higher rate than inmates who spend at least 3 months in general population before being released to the community (Cloud, Drucker, Browne & Parsons, 2015).

Recent Findings and Research

- Today, solitary confinement is commonly used to punish prisoners for violating rules (known as disciplinary segregation), remove prisoners from general population who are perceived as a safety risk (referred to as administrative segregation), or protect vulnerable inmates who are thought to be at risk in the general population.
- Data from 1995 to 2005 indicated that the number of people held in solitary confinement increased by 40 percent, from 57,591 to 81,622 inmates placed in isolation and segregated lockdown.
- In some jurisdictions, numbers of individuals incarcerated have declined, while those exposed to solitary confinement have increased.
- From 2008 through 2013, the number of people held in solitary confinement in federal prisons grew by 17 percent, from 10,659 to 12,460 prisoners, which was almost triple the 6 percent rise in the total prison population for that same period (Cloud, Drucker, Browne & Parsons, 2015).
- One of the most recent studies examined 119 newly released inmates seeking post-incarceration medical care and discovered that 43 percent of the sample participants had a history of solitary confinement. Of the 119 participants, 28 percent were found to have PTSD symptoms. Individuals with a history of solitary confinement were more likely to report PTSD related symptoms than those individuals without a history of solitary confinement. A history of solitary confinement and chronic mental health conditions were significantly associated with PTSD (Hagan et al., 2018).
- A study comparing prisoners in general population to those prisoners in segregated placements, found higher levels of distress in segregated inmates. Interestingly, the researchers' results demonstrated improvement in functioning for general population prisoners compared to confined inmates who largely remained the same. Chadick, Batastini, Levulis and Morgan (2018) supported that a history of confinement may present a barrier to opportunities for continued growth.

Recommendations

- Post release monitoring of individuals with a history of solitary confinement (SC)
- Segregated isolation inquiry included in all transitional related questionnaires and assessments
- Therapeutic techniques developed and validated to address SC related history
- Future longitudinal research examining outcomes of individuals released to community with SC history

References

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