Solitary Watch

Criminal Justice Issues and Prisoners' Rights

https://solitarywatch.org/2014/03/12/private-prison-giant-ccaweighs-solitary-confinement/

Campaign and Advocacy

close
Search
close
close
by Jean Casella March 12, 2014

Presumably spurred by the growing attention to solitary confinement, Corrections Corporation of America has produced a promotional piece on how it is strategically serving those it places in solitary. The article, which appeared recently in the companies online publication InsideCCA, claims that the company is <u>Thinking Outside the Box</u> when it comes to the use of isolation in its prisons and detention centers.

CCA is the nations largest private prison contractor (or, as the companys website <u>puts it</u>, Americas leader in partnership corrections) with nearly 100,000 beds in more than 60 facilities. No figures are available on how many individuals CCA holds in solitary confinement, but the company claims it employs segregation only as a last resort.

The article quotes Harley Lappin, the former head of the federal Bureau of Prisons who resigned following a DUI and quickly resurfaced as chief corrections officer at CCA. During my time at both the Federal Bureau of Prisons (BOP) and at CCA, we advocated using segregation only for situations that warrant the need to separate someone from the general populationTheres been a concerted effort on the part of corrections administrators across the country at CCA and elsewhere to implement better practices and policies and reduce the number of inmates in segregation. In fact, the number of individuals in solitary and other forms of isolated confinement grew during Lappins tenure at the BOP, to at least 12,000.

John Baxter, CCAs vice president for health services, calls solitary the last in a series of tools we have available to help [inmates] regain control of their escalating negative behavior. The article acknowledges that CCA holds individuals with mental illness in solitary confinement, but claims it provides all the services they need. At Winn Correctional Center in Louisiana, for example:

While in segregation, offenders who have mental illnesses continue receiving special care; Mental Health staff check in with them on a weekly, monthly or quarterly basis, depending on the level of attention they need.

The unit teams know inmates very well, and if an inmate misses his medication or if hes asleep and supposed to be taking his medication, they remind him or wake him up, [Assistant Warden Nicola] Walker explains.

And to make sure no needs go unnoticed, the facility holds weekly review hearings in which the entire classification team, the unit manager, chiefs and assistant wardens meet with each inmate in segregation and give them a chance to express any concerns they may have. Then the Mental Health team meets individually with those who express concerns.

The article includes a particularly disturbing photo, of an incarcerated man standing before a Disciplinary Court where five employees of a private, for-profit company decide whether to place him in solitary confinement, in conditions that federal courts have acknowledged as a significant deprivation of the liberty guaranteed by the U.S. Constitution.

Jean Casella is the director of Solitary Watch. She has also published work in The Guardian, The Nation, and Mother Jones, and is coeditor of the book Hell Is a Very Small Place: Voices from Solitary Confinement. She has received a Soros Justice Media Fellowship and an Alicia Patterson Fellowship. She tweets @solitarywatch.

Accurate information and authentic storytelling can serve as powerful antidotes to ignorance and injustice. We have helped generate public awareness, mainstream media attention, and informed policymaking on what was once an invisible domestic human rights crisis.

Only with your support can we continue this groundbreaking work, shining light into the darkest corners of the U.S. criminal punishment system.

by Juan Moreno Haines

October 25, 2022

by Solitary Watch Guest Author

October 13, 2022

by Vaidya Gullapalli

September 29, 2022

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SMOKE & MIRRORS This propaganda by CCA is most misleading. It makes you believe that they are actually taking a proactive approach in reducing the use of administrative segregation commonly called solitary confinement without making you aware of other options available to this private prison contractor that other publicly owned prisons dont have. Let me explain in detail and hope you will see how the facts have been skewed to give another perception rather than facts.

Whenever CCA has a problematic inmate they have a number of remedies available to them that state or federal prisons dont have. When it comes to health services and treatment of the mentally ill, CCA and many other major private prison contractors wont take anyone over a medical or mental health score of 3. They will accept those that score 3 if they have no chronic or acute individual treatment care plan in existence. This saves them money and at the same time keeps those that are unable to conform to rules and regulations at a minimum sparing the use of administrative segregation for such a purpose.

Because CCA and others dont accept per their own contract provisions anyone over a score of 3 there is less likelihood that there are inmates out of control and exhibiting escalating negative behaviors. It may be cause for concern for Solitary Watch to understand that there may be inmates placed in administrative segregation pending a transport back to the parent agency that sent them to that private facility. CCA and other prison providers do not tolerate repeated disciplinary infractions and those that violate will be returned to the state where they came from.

They are spouting off a treatment routine that is rarely used on those seriously mentally ill or severely impaired thus what they are saying is non-applicable to the cause of solitary confinement in their own administrative segregation under the same terms or conditions as public or federal prisons or detention units. It is most misleading because what they are describing are minor psychological problems that are experienced by the most common prisoners not seriously mentally ill.

Although I praise their efforts to provide treatment and continued care for those incarcerated inside their private jails and prisons it is hardly a fair comparison to what solitary confinement is otherwise in the BOP, state facilities and detention units nationwide. Even those problematic in privately owned jails or detention units are transferred to a higher custody facility pending new charges for the behaviors or housing at their original site of intake and conviction.

The article acknowledges that CCA holds individuals with mental illness in solitary confinement, but claims it provides all the services they need. The difference amongst mental illness inmates in CCA is the mental health score of 4 or 5 that requires frequent staff interactions, medications, treatment plans, compliance monitoring of medication, behavioral and therapeutic seclusion processes. In addition mental health 4 and 5 prisoners require regular detailed treatment plans and examinations by staff that CCA wont hire as that will cut into their profit margin and we all know that CCA, GEO, MTC and others are for profit organizations and stockholders mandate that the profit margins be maintained.

All it would take to end this cruelty would be an executive order form the President stipulating that all inmates, regardless of security classification be granted a minimum of three uninterrupted hours of recreational time every day in a setting where they could interact with others.

Stop solitary please

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