

Vera Institute of Justice

Criminal Justice Issues and Prisoners' Rights

<https://www.vera.org/blog/study-links-solitary-confinement-to-increased-risk-of-death-after-release>

Public Facing Advocacy Writing

The Journal of the American Medical Association (JAMA) recently published a [study](#) finding that people placed in restrictive housing (also known as solitary confinement) are more likely than their peers to die or be re-incarcerated in the first year after their release from prison.

This study perhaps the first of its kind to explore the detrimental impact of solitary confinement on mortality rates demonstrates the dire need for reform. The practice of solitary confinement is inhumane and [has failed to make jails and prisons safer](#), while creating further barriers for incarcerated people to overcome when they reenter their communities. Its use must be significantly reduced, and public health responses for those who have been confined in restrictive housing improved.

The JAMA study, co-authored by former Vera researcher David Cloud, advises corrections agencies and policymakers to develop alternatives to restrictive housing, expand reentry treatment and service programs for those who have experienced solitary confinement, and flag exposure to restrictive housing as a critical risk factor for public health systems during the process of reentry. It also urges compliance with the [Mandela Rules](#), United Nations guidelines that implore member countries to ban the use of restrictive housing for more than 14 days.

The use of restrictive housing in U.S. jails and prisons has [expanded](#) substantially over the past [40 years](#), and is too often seen as a one-size-fits-all solution for disorder and violence. At least [61,000 people](#) were held in restrictive housing units in the United States as of fall 2017. About [18 to 20 percent](#) of incarcerated people were confined in such housing at some point in 2011-12, according to the most recent Bureau of Justice Statistics survey on restrictive housing. Young men of color and people with [mental illness](#) are [disproportionately represented](#) in their ranks. Conditions of confinement differ by correctional facility, but the [most common practice](#) is physical and social isolation in a small cell for 22 to 24 hours a day. Scholarly research has [documented](#) the debilitating [consequences](#) of solitary confinement on a persons physical and mental health, including trouble with appetite and sleep, as well as anxiety, hallucinations, paranoia, and depression.

The JAMA study examined mortality outcomes for 229,274 people in North Carolina who were released from prison in the years 2000-2015. It found that people placed in restrictive housing were 24 percent more likely to die in the first year after their release from prison. The risk was particularly acute for certain causes of death; people exposed to solitary confinement were 54 percent more likely to die from homicide and 78 percent more likely to die by suicide. People who have been held in restrictive housing were 127 percent more likely to die of an opioid overdose in the first two weeks after their release.

The report found that the more time people spent in restrictive housing as a percentage of their total incarceration, the greater their risk of death in the first year after their release. Those who had been in solitary confinement two or more times during their incarceration were 41 percent and 74 percent more likely to die of homicide and suicide, respectively, as compared to those who had been held once in restrictive housing.

In recent years, advocates, legislators, and law enforcement officials have examined the practice of solitary confinement with greater scrutiny. In 2010, the American Bar Association advocated for the need to end the prolonged use of restrictive housing, and in 2016 the Department of Justice and the American Correctional Association published recommendations that would limit the use of restrictive housing in prisons, especially when someone does not present a grave safety risk.

Although [some evidence](#) shows that prison systems have begun to rely less on restrictive housing, progress has been halting. An October [report](#) from the New York Civil Liberties Union found that more people incarcerated in New York State prisons were placed in solitary confinement in 2018 than in previous years, despite a [2015 settlement](#) with the state to reduce the use of the practice.

These findings contribute to a growing body of research about the effects of restrictive housing on incarcerated people. Even though research has established an association between incarceration and not only [instability](#) but also mortality upon reentry, the role that restrictive housing plays in mortality post-release requires more inquiry. The JAMA study is a sobering reminder of the adverse effects of solitary confinement and its lingering consequences for people upon release.

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