

Solitary Watch

Criminal Justice Issues and Prisoners' Rights

<https://solitarywatch.org/2015/02/12/new-report-documents-the-waste-cost-and-harm-of-solitary-confinement-in-texas/>

Campaign and Advocacy

close

Search

close

close

by [Lakshmi Gopal](#) | February 12, 2015



The American Civil Liberties Union (ACLU) of Texas and the Texas Civil Rights Project (TCRP) have released a report arguing that solitary confinement is dangerous, expensive and makes Texas less safe. In [A Solitary Failure: The Waste, Cost and Harm of Solitary Confinement](#), through surveys, in-person interviews, and corroborative research conducted over an eight-month period, the ACLU and TCRP found that the Texas Department of Criminal Justice (TDCJ) is trapped in the outdated and expensive mindset of using solitary confinement as a routine correctional practice, leading to inhumane, inefficient, and archaic conditions that permanently damage people held in prison and threaten public safety at the taxpayers expense.

While some states are moving towards limiting the use of solitary confinement, Texas continues to make liberal use of the practice. It houses 4.4 percent of its prisoners in solitary confinement, for an average of three and a half years of isolation. And these figures actually reflect a 34 percent reduction in the states solitary population since 2006.

According to the report, TDCJ spends \$46 million dollars a year to house individuals in solitary confinement. Additional costs are generated by the particular administrative burdens of segregation which have been known to cause heightened levels of stress for prison administrators, as well as recidivism that occurs as a result of solitary confinement exacerbating an individuals anti-social behaviors and mental illnesses. The report predicts that Texas stands to save at least \$31 million dollars a year, if the states use of solitary confinement drops to Mississippis rate of 1.4 percent.

While the financial burden of solitary confinement is considerable, the cost of the measure, in real terms, transcends its monetary impact. For instance, people in solitary confinement are five times more likely to commit suicide than those in the general prison population. In 1999, a federal judge described Texas solitary-confinement cells as virtual incubators of psychosis seeding illness in otherwise healthy inmates, with people entering solitary confinement in good health only to leave permanently damaged. Alex, an inmate confined to segregation, describes his experience:

Everyday from dusk to dawn theres noise, banging, clanking, yelling, screaming. Everyday someone is getting hurt or hurting themselves. Everyday theres fire and floods and complete chaos & hate. Everyday theres loneliness. I woke up last night to someone screaming Let Me Out of Here (again) over and over with so much anguish there was no doubt he was screaming from his very soul. But he was just screaming what we are all thinking. Everyday is a challenge here. A challenge against insanity.

Alex is one of 147 people in isolation who responded to a survey sent out by the ACLU and TCRP on the experience of solitary confinement. According to the report, ninety-five percent of survey respondents said they had developed some sort of psychiatric symptom as a result of segregation. Thirty percent reported having oral or physical outbursts. Fifty percent reported suffering from anxiety or panic attacks. Fifteen percent reported hallucinations.

Anna, a survey respondent, wrote, Felt isolated, withdrew from people socially; clean, organize, obsessively, hand wash, felt despair, felt disoriented/confused, panic, couldnt sleep until exhausted. Bad dreams, see something on walls moving but nothing there. These responses substantiate well-established understandings of the psychological impact of solitary confinement on the average person..

For those who enter solitary confinement with previous mental illness, the challenge against insanity is far steeper. According to the report, TDCJ places at least 2,012 people with mental illnesses in solitary. These individuals are met with inadequate mental health

services and monitoring, as the department provides only cursory checks that are unlikely to identify serious issues. Of those survey respondents who met with a mental health worker, 65 percent said their meetings were less than two minutes long. The report indicates that TDCJ does not provide adequate reviews of the mental-health needs of people in solitary confinement, even those with a history of serious mental illness and, as a result, remains unable to identify and address people's mental-health needs.

In the report, Corrections Officer Steve Martin remarks that TDCJ's failure to track people with serious mental illness is an alarming flaw from a correctional management standpoint on its face it calls into question TDCJ's management. To illustrate the current state of affairs, the report narrates that TDCJ diagnosed a man named Henry with bipolar I disorder, with psychotic features. Despite a prior suicide attempt in general population, Henry was placed in solitary confinement in 2005, where he remains to this day. Henry attempted suicide a second time while in solitary. Although TDCJ documented Henry's symptoms, (mental illness, visual and auditory hallucinations, and suicide attempts) in his medical chart, it failed to take him out of solitary confinement.

When mental-health reviews are conducted, they are not confidential. Seventy-five percent of respondents said their mental-health review was merely conducted by speaking through their cell door. Many reported that officers overhear all of their confidential medical conversations and repeat confidential medical information to other officers or prisoners. The relationship between mental health and solitary confinement is at the core of the intangible and irrecoverable costs of the controversial punitive practice. The ACLU and TCRP report that in 2013, almost eighty percent of the 499 instances of prisoners exposing officers to bodily fluids occurred in Texas solitary-confinement units; none occurred in general-population units.

In addition, according to the report, after years in solitary confinement, people are unprepared to resume the roles society expects of them: as parents, spouses, employees, and neighbors. In addition to physical isolation, spiritual and emotional isolation are imposed upon individuals in solitary who remain cut off from their families and communities of worship. Many spend years without so much as a human touch. The report indicates that by isolating an individual from meaningful human contact, solitary confinement chips away at his or her support-network, increasing the possibility for recidivism.

People released directly from solitary confinement are rearrested at a 25 percent higher rate than prisoners released from the overall prison system. TDCJ has a few programs aimed at helping those released directly from solitary confinement. However, these programs serve only a small number of the total population in solitary and do not always adequately respond to the particular challenge that those in solitary confinement confront upon reentry to society after years of solitude. With their personal support network compromised, and with little assistance from prison administration, those who leave prison from segregation units face the usual challenges of re-entry, in addition to a varying bundle of extreme and unusual psychological challenges that can result from extreme forms of isolation. This leaves those in solitary at a considerable disadvantage upon release a disadvantage that can cause many to return to prison, and perhaps even to further solitary confinement.

From this extended study, ACLU and TCRP make four recommendations:

Lakshmi Gopal is a former Solitary Watch intern, now in legal practice in New York and Washington, DC. She is Sole Practitioner at Muciri Law PLLC.

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

Solitary Watch encourages comments and welcomes a range of ideas, opinions, debates, and respectful disagreement. We do not allow name-calling, bullying, cursing, or personal attacks of any kind. Any embedded links should be to information relevant to the conversation. Comments that violate these guidelines will be removed, and repeat offenders will be blocked. Thank you for your cooperation.

I think state, and fed. run prisons ought to be charged for the mental health problems caused by the solitary confinements of inmates, like people in wars, and severe incidents in their lives, that merits counseling, gets treatment, so should inmates, maybe prisons getting hit in the pocket book would lessen solitary confinement. there are people on the outside and inside trying to make (justice) systems see the wrong, solitary confinement does. support these clubs. carol kobus

P.O. Box 11374
Washington, DC 20008

info@solitarywatch.org

Solitary Watch

Copyright 2022, Solitary Watch

Read about [rights and permissions](#).



Solitary Watch News