

Solitary Watch

Criminal Justice Issues and Prisoners' Rights

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by [Joshua Manson](#) | September 9, 2016

A new report released yesterday highlights the disturbing use of solitary confinement on incarcerated individuals with mental illness. [Locked Up and Locked Down: Segregation of Inmates with Mental Illness](#), released by Disability Rights Washington, details the widespread practice of housing men, women, and children with mental illness in solitary confinement. The report shows that prisons and jails routinely subject people with mental illness to conditions that dramatically exacerbate their condition, often to the point of suicide.

The report builds on a growing body of literature, including a report released this summer by the Center for American Progress, [Disabled Behind Bars: The Mass Incarceration of People with Disabilities in Americas Jails and Prisons](#), which highlights the tragic intersection of two policy shifts toward mass incarceration on the one hand, and toward an underfunded deinstitutionalization, or removing people with disabilities from mental hospitals without making simultaneous public investments in community-based alternatives, on the other. Together, these two policies have resulted in the criminal justice system assuming the responsibilities of the mental health care system, and thus a dramatic over-representation of people with disabilities in our prison and jails.

Disabled Behind Bars notes the especially disturbing effect of solitary confinement on people with mental illness, as well as other types of disabilities. It notes, for example, that deaf individuals are among those most likely to be held in solitary, often in place of treatment or necessary accommodations. It also notes the tragic story of Kalief Browder, a teenager who was arrested for allegedly stealing a backpack and was subject to two years in solitary confinement, a punishment condemned by the UN torture expert as torture and under which Browder made numerous suicide attempts. Ultimately, he committed suicide six months after his case was dismissed and he was released from Rikers Island.

Suffering and Suicide in Solitary

The new report, *Locked Up and Locked Down*, written by Anna Guy, highlights the dangerous and often tragic consequences of using solitary confinement on people with mental illness, and gives an overview of the state of the prison mental health care system today and advocacy efforts across states seeking to improve it.

As the report details, and has been widely proven, solitary confinement is especially devastating for people with mental illness. As traumatic as the experience is for individuals without unique mental healthcare needs, solitary confinement compounds and exacerbates the effects of mental illness. In solitary housing, treatment and other forms of much-needed mental health interventions such as therapy and structured activities are routinely denied to individuals, who have limited time outside their confined space, if any, and have only psychotropic medication available to them. The report cites the vast and growing body of scientific evidence that highlights the dangers of housing people with mental illness in solitary confinement, including reports from those held in isolation of sensory and sleep deprivation, psychiatric decompensations, hallucinations, and behaviors relating to self-harm. Many others have committed suicide.

Unfortunately, those who are most at risk of committing suicide are placed under the most restrictive conditions. Rather than being provided extra therapy, care, or other forms of mental health intervention, individuals on suicide watch are further confined, stripped of their personal belongings, clothed in a suicide smock, and forced to urinate and defecate through a grate in the floor.

The report features the voices and perspectives of the incarcerated, including powerful artwork. One man, Eldorado Brown, eloquently describes his traumatic experience in solitary: They don't understand that placing me in the hole exacerbates my mental illness to a whole different degree. He details the devastating effects of solitary confinement on his own diagnosed mental illness, non-suicidal self-injury. Being isolated from his loved ones, he explains, created a sense of severe depression that led [him] to find a release in bodily self-harm. Brown explains that, for him, the trauma of being separated from loved ones was compounded by the harm of being removed from the mental health care professionals who work with the general population.

The Power of the Protection & Advocacy System

In addition to detailing the dangers of housing people with mental illness in solitary confinement, the report provides background into the Protection & Advocacy (P&A) systems in place across the country to serve as a safeguard against them. Created in the 1970s, amidst growing public awareness of the egregious housing and institutional conditions of people with developmental disabilities in all kinds of

state institutions, the P&A system was the product of federal legislation that sought to create a network of state agencies to advocate for people with disabilities. P&As have the authority and mandate to monitor and investigate in even the most segregated settings, and to generally advocate for the rights of people with disabilities. As the number of incarcerated individuals with mental illness has increased, so has the involvement of state P&As in advocating and monitoring the well-being of people with disabilities in prisons.

Locked Up and Locked Down highlights the advocacy and hard-fought success of P&As, both in litigation and non-litigation efforts:

P&As efforts include providing guidance and assistance to the incarcerated, developing partnerships and working relationships with corrections officers and prison officials, and forming coalitions, workgroups, and taskforces with community organizations and families and friends of people in prison with disabilities.

In North Carolina, after one man died of dehydration while in segregation, the state P&A conducted an investigation and issued a report that resulted in the convening of a taskforce by the North Carolina Department of Corrections that then issued 90 of their own far-reaching recommendations.

In Washington state, after being made aware that individuals in the custody of the Washington State Department of Corrections were being punished for self-harm and attempted suicide, Washington's P&A sent a letter to the Department of Corrections, which formed a work group and agreed to end the practice and restore credit toward release to those who were punished because of it.

In addition, P&As have engaged in and supported valuable litigation efforts, many of which are pending and others of which have already changed state law and prison policies. Typically, P&As bring claims under the Americans with Disabilities Act, the Rehab Act, or the Eighth Amendment against Departments of Corrections for inadequate care for, or often abuse of, people with mental illness in solitary confinement.

In Arizona, Connecticut, Illinois, Indiana, Maryland, Massachusetts, New York, and South Carolina, P&As have reached settlement agreements with Departments of Corrections to improve conditions. In Colorado, Florida, Montana, and Vermont, there is pending litigation bringing similar claims against state Departments of Corrections.

Recommendations for Change

The report concludes with a number of national and state recommendations to empower P&As, correctional systems, and lawmakers to reform the use of solitary confinement on people with mental illness.

Nationally, the report calls on federal agencies, including the U.S. Department of Justice, the Bureau of Prisons, and Congress, to take meaningful action where possible. It calls on the Department of Justice to enforce existing laws, to track statistics on the rate of mental illness in prisons and jails, and to issue guidance on the needs of incarcerated individuals with disabilities. This would involve creating institutional positions such as ADA Coordinator and Corrections Ombuds Programs to coordinate accommodations for people with mental illness and serve as independent investigators of complaints. It calls on Congress to allocate more funding within the P&A budget and program for people with disabilities in correctional settings, and to divert low-level non-violent offenders with mental health needs out of incarcerated settings.

At the state level, the report calls on P&As to continue their advocacy work and innovate where possible. Specifically, it calls on state P&As to consider increasing their monitoring activity within the prisons in their state, to work with and develop productive relationships with state prison systems, and to partner with law firms and other advocacy groups in mounting litigation.

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October 25, 2022

by [Solitary Watch Guest Author](#)

October 13, 2022

by [Vaidya Gullapalli](#)

September 29, 2022

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