

Vera Institute of Justice

Criminal Justice Issues and Prisoners' Rights

<https://www.vera.org/rethinking-restrictive-housing>

Policy Issue Resources

Lessons from Five U.S. Jail and Prison Systems

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After decades of its overuse in prisons and jails, the tide appears to be turning on restrictive housing. One of the most troubling practices in U.S. prisons and jails, it is generally defined as holding someone in a cell, typically for 22 to 24 hours a day, with minimal human interaction or sensory stimuli. In recent years, this practice has been the subject of increased scrutiny from researchers, advocates, policymakers, media, and corrections agencies.

Since the 1980s, the increase in restrictive housing has mirrored the exponential rise of incarceration. Originally intended to manage people who committed violence within jails and prisons, restrictive housing has become a common tool for responding to all levels of rule violations, from minor to serious; managing challenging populations; and housing people considered vulnerable. Angela Browne, Alissa Cambier, and Suzanne Agha, *Prisons Within Prisons: The Use of Segregation in the United States*, *Federal Sentencing Reporter* 24, no. 1 (2011), 4649. In short, just as systems have come to rely too heavily on incarceration, departments of corrections now rely too much on restrictive housing. And, as in other parts of the justice system, restrictive housing often affects disproportionate numbers of young people, people living with mental illness, and people of color. Association of State Correctional Administrators (ASCA) and The Arthur Liman Public Interest Program, Yale Law School, *Time-In-Cell: The ASCA-Liman 2014 National Survey of Administrative Segregation in Prison* (New Haven, CT: Yale Law School, 2015), 4; and Allen J. Beck, *Use of Restrictive Housing in U.S. Prisons and Jails, 2011-2012* (Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, 2015, NCJ 249209).

But these problems can be solved. In light of growing evidence that restrictive housing may harm people without improving safety in facilities, a number of departments of corrections are taking steps to reduce their reliance on this type of housing.

See [updates on reforms](#) that five corrections departments have recently implemented and the effects these reforms are having on their use of restrictive housing.

For over a decade, Vera has been working to shed light on the use of restrictive housing in the United States, and to partner with corrections departments to address the issue head-on. Vera's work with local and state agencies has been part of a national movement to rethink the use of restrictive housing. Media outlets have shone light on the practice, and advocacy organizations have mounted high-profile campaigns against its use. To view recent work by such organizations, see <https://www.aclu.org/issues/prisoners-rights/solitary-confinement>, <http://solitarywatch.com/>, <http://www.nrcat.org/>, and <https://www.themarshallproject.org/>.

In recent years, corrections officials and policymakers have joined the call for change. National and international organizations, including the following, have taken significant steps to address the use of restrictive housing:

In August 2016, the Standards Committee of the American Correctional Association, a professional association and accrediting organization for corrections, voted to pass comprehensive standards regulating the use of restrictive housing.

American Correctional Association, [Restrictive Housing Performance Based Standards](#) (2016)

In 2012, the Association of State Correctional Administrators (ASCA) teamed up with the Arthur Liman Public Interest Program at Yale Law School to survey directors of state and federal correctional systems on their policies regarding administrative segregation. The results of that survey were published in the report *Administrative Segregation, Degrees of Isolation, and Incarceration: A National Overview of State and Federal Correctional Policies*. The study was updated in 2015 with *Time-in-Cell: The Liman-ASCA 2014 National Survey of Administrative Segregation in Prison* and followed by a 2016 report, *Aiming to Reduce Time-In-Cell: Reports from Correctional Systems on the Number of Prisoners in Restricted Housing and on the Potential of Policy Changes to Bring About Reforms*. Additionally, in 2013, ASCA issued Restrictive Housing Status Policy Guidelines.

In April 2016, the National Commission on Correctional Health Care adopted a strong position statement calling for, among other things, the elimination of restrictive housing longer than 15 consecutive days and the exclusion of juveniles, pregnant women, and people with mental illness from restrictive housing.

National Commission on Correctional Health Care, [Position Statement: Solitary Confinement \(Isolation\)](#)

The U.S. Department of Justice published a [comprehensive report](#) in 2016 that called for far-reaching revisions to the Federal Bureau of Prisons restrictive housing practices. It also outlined a number of principles to guide state and local jurisdictions seeking to make similar changes.

U.S. Department of Justice, [Report and Recommendations Concerning the Use of Restrictive Housing: Final Report](#) (Washington, DC: U.S. Department of Justice, 2016).

The National Institute of Justice issued a 2016 report that questions whether restrictive housing achieves the intended goals of maintaining safety and order.

Natasha Frost and Carlos E. Monteiro, *Administrative Segregation in U.S. Prisons* (Washington, DC: U.S. Department of Justice, National Institute of Justice, March 2016, NCJ 249749R.M), citing Ryan Labrecque, *The Effect of Solitary Confinement on Institutional Misconduct: A Longitudinal Evaluation* (PhD diss., University of Cincinnati, 2015), p. 23.

The United Nations General Assembly unanimously adopted the revised [Standard Minimum Rules for the Treatment of Prisoners](#) (known as the Nelson Mandela Rules) in 2015. The rules prohibit restrictive housing that is indefinite or prolonged (defined as the confinement of prisoners for 22 hours or more a day without meaningful human contact for a period longer than 15 consecutive days). They also support restrictions on its use for juveniles, pregnant women, and people with disabilities or mental illness. Although not legally-binding, the Mandela Rules represent widely accepted international principles on the treatment of incarcerated people.

[Standard Minimum Rules for the Treatment of Prisoners \(the Nelson Mandela Rules\)](#), General Assembly Resolution 70/175, U.N.Doc. A/Res/70/175 (2015), Rules 43-45.

Against this backdrop, a growing number of corrections leaders want to change their systems approach to restrictive housing, in order to improve the safety and well-being of those who live and work in their facilities; make better use of resources; respond to interest from external stakeholders; and ultimately enhance public safety in the communities to which incarcerated people will return. See U.S. Department of Justice, 2016, pages 74-78, for descriptions of states and counties that have actively sought to reform their restrictive housing practices, including Colorado, Washington, New Mexico, Virginia, and Hampden County, Massachusetts; see also ASCA and the Liman Program, *Time-In-Cell*, 2015, 58. In a 2014 survey, administrators from 40 state corrections departments reported that they had recently reviewed their restrictive housing policies; by 2016, many of those jurisdictions had begun reforms to reduce their reliance on this practice. Association of State Correctional Administrators and the Arthur Liman Public Interest Program, Yale Law School, *Aiming to Reduce Time-In-Cell: Reports from Correctional Systems on the Numbers of Prisoners in Restricted Housing and on the Potential of Policy Changes to Bring About Reforms* (New Haven, CT: Yale Law School, 2016).

But the task is a challenging one. Jails and prisons are complex environments, and many forces are at play in changing their policies, practices, and cultures. Correctional staff have become so reliant on restrictive housing that in many jails and prisons it has become a part of everyday life and institutional culture; any attempts to reduce its use must therefore be carefully and strategically implemented. What's more, to solve a problem one must first define and understand it yet in many jurisdictions, antiquated records systems and lack of data make it difficult to assess how restrictive housing is being used.

Why Reduce Restrictive Housing?

In 2015, Vera expanded its efforts to support departments of corrections in tackling the use of restrictive housing by launching the Safe Alternatives to Segregation Initiative, with funding from the U.S. Department of Justice Bureau of Justice Assistance. Through this initiative, Vera partnered with five local and state corrections agencies to assess their policies and practices, analyze related outcomes, and provide recommendations for safely reducing the use of restrictive housing in their jails or prisons.

While Vera tailored its recommendations to each agency's needs, many of these recommendations could be helpful in addressing the use of restrictive housing across the country.

Vera recommends that jails and prisons use restrictive housing only:

Vera used a competitive application process to select five corrections departments willing to address this difficult issue head-on. By reducing their use of restrictive housing, these partner sites hope to promote a culture of safety in their facilities and improve the well-being of people who live and work there. Vera Institute of Justice, [Vera Selects Five Corrections Departments for Initiative Aimed at Reducing the Use of Solitary Confinement](#), press release, March 24, 2015.

The five correctional agencies Vera partnered with are diverse geographically, operationally, and in terms of their size and use of restrictive housing. They include three state prison systems from around the country, one large metropolitan jail system, and one smaller local jail.

See the map below to learn about each site. The summaries describe the sites as they were when Vera encountered them at the start of the SAS Initiative in early 2015. Since this time, each agency has taken steps to address its use of restrictive housing, so the figures presented below should be considered as a baseline against which the impact of current and future efforts can be measured. See [site updates](#) for more information on each site's reforms.

Five Partner Sites Committed to Change

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Conducting this work in five very different jurisdictions has given Vera an unparalleled opportunity to describe how restrictive housing is used in a cross-section of U.S. prisons and jails. Vera found significant variations among these locations, but also many commonalities. This report provides highlights of Vera's findings about how the systems use restrictive housing, and summarizes Vera's common recommendations for changes in policy and practice to safely reduce that use.

This report offers a high-level overview of the project. Vera also produced detailed [technical reports](#) for each site, which interested readers should consult for further information about a specific jurisdiction.

Vera identified common themes in agencies' use of restrictive housing. This section presents key findings related to some or all of the partner sites though not all of the findings discussed here are relevant to all jurisdictions.

Various examples https://storage.googleapis.com/vera-web-assets/downloads/publications/rethinking-restrictive-housing/legacy_downloads/rethinking-restrictive-housing-report.pdf from the jurisdictions illustrate each point. A more detailed picture of each department can be found in the [technical reports](#) provided to each site. In particular, the use of protective custody varied widely among Veras partners and is addressed in each sites technical report.

It is important to note that the data presented below refer to the period before the SAS Initiative started and therefore do not reflect changes agencies have made to their policies and practices since then.

Although cell size, recreational areas, and other characteristics of restrictive housing units varied, incarcerated people in these units were typically held in stark, isolated environments with little sensory stimulation or social interaction. Many cells were small and sparsely furnished, and some had no windows or natural light. Opportunities for therapeutic programming or any form of productive activity were scarce.

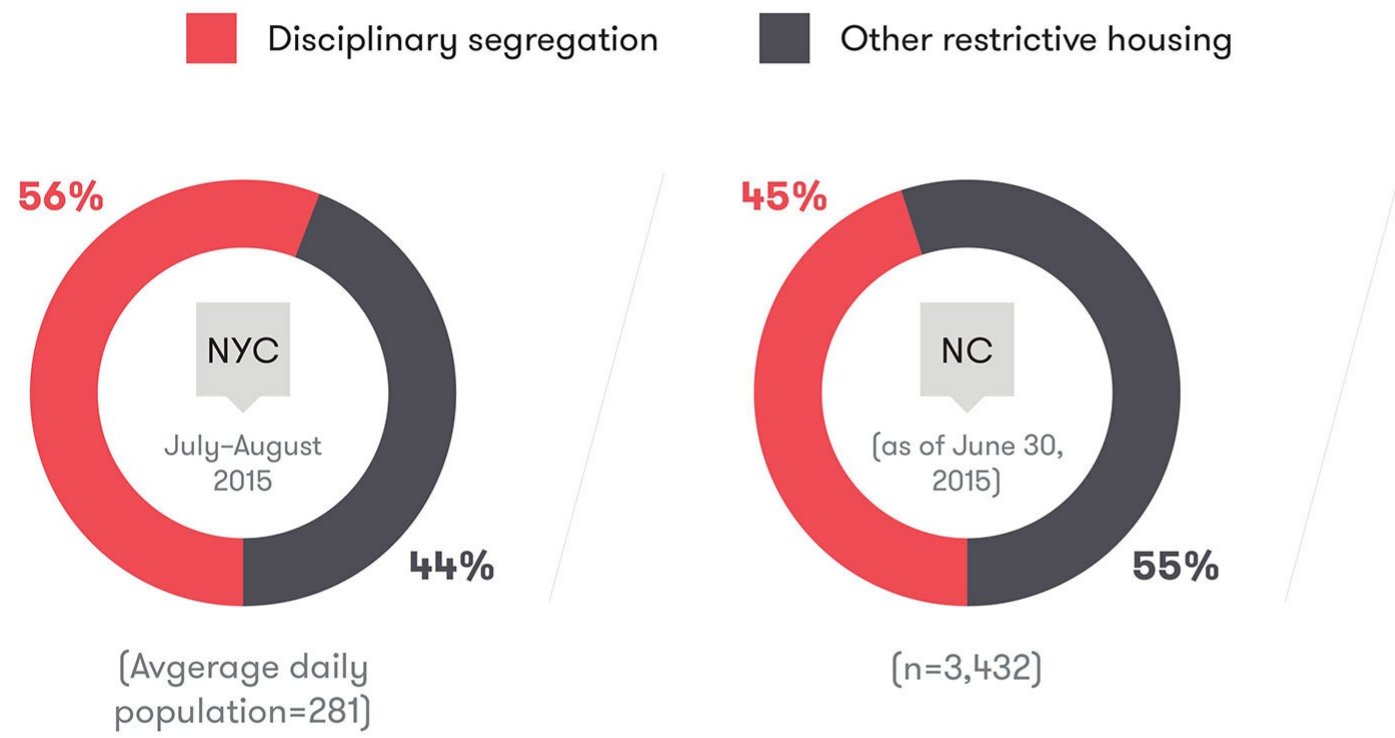
In the most-restrictive housing, people were held in their cells for around 23 hours a day. They received up to one hour of out-of-cell recreation, often held in a small caged area or a bare concrete space, sometimes with limited access to fresh air and direct sunlight. In some systems, barred indoor enclosures were used for recreation at times.

All sites frequently used restrictive housing to respond to nonviolent infractions (see Table 1, below):

Segregation sentences ranged from a couple of days to several months though in some jurisdictions, a person charged with multiple rule violations may have been required to serve multiple sentences back-to-back. Some people were released to the general population at the end of their assigned sentence and some were released earlier, but others were transferred to other forms of restrictive housing upon completing the sanction, thus extending their stay in restrictive conditions.

It should be noted that since Vera conducted these analyses, the North Carolina Department of Public Safety has significantly altered its policies governing disciplinary practices and the Nebraska Department of Correctional Services has ended its use of disciplinary segregation altogether.

Percentage of population in restrictive housing held in disciplinary segregation



Source: Vera Institute of Justice analysis of data from the New York City Department of Correction, New York City Department of Public Safety, and the Oregon Department of Corrections. Note that in New York, the data includes people held in the Central Punitive Segregation Unit, Punitive Segregation Unit II, and other units. Units range from 17 hours in a cell per day to 23 hours. This data includes people who are present for disciplinary segregation, as well as those charged and sent to disciplinary segregation.

Punishment of misbehavior was a substantial driver of the restrictive housing populations at Veras partner sites. The charts below show the percentages of people in restrictive housing for disciplinary reasons in three jurisdictions, either serving time in these units in response to an infraction or awaiting a disciplinary hearing.

Many people who end up in restrictive housing enter through disciplinary segregation before being transferred to administrative segregation or another form of restrictive housing. For example, approximately 90 percent of incarcerated people in Oregon who spent time in any type of restrictive housing first entered through the disciplinary unit.

Overall, the number of people who serve time in disciplinary segregation can be high: in Nebraska, for example, 44 percent of all incarcerated people had, at some point during their time in prison, been placed in restrictive housing for disciplinary reasons (as punishment for an infraction or pending an investigation).

This finding is difficult to quantify using administrative data. Still, at many of the facilities Vera visited, staff and incarcerated people reported that they believed people sometimes violated rules with the express purpose of being placed in restrictive housing because they feared for their safety in the general population. The reasons cited for these concerns included belonging to a vulnerable group (such as young people), being targeted by gang members, and a general fear of violence. Perceptions of threat and insecurity therefore appear to increase the number of infractions committed and the number of people in restrictive housing.

The type of restrictive housing commonly referred to as administrative segregation can be used for multiple purposes, including managing someone who is considered a threat to safety and security or holding someone temporarily while certain administrative processes are completed. This report focuses on one use of this housing that Vera found contributed substantially to the population in restrictive housing across partner sites:

indefinite administrative segregation to manage people staff considered dangerous or disruptive.

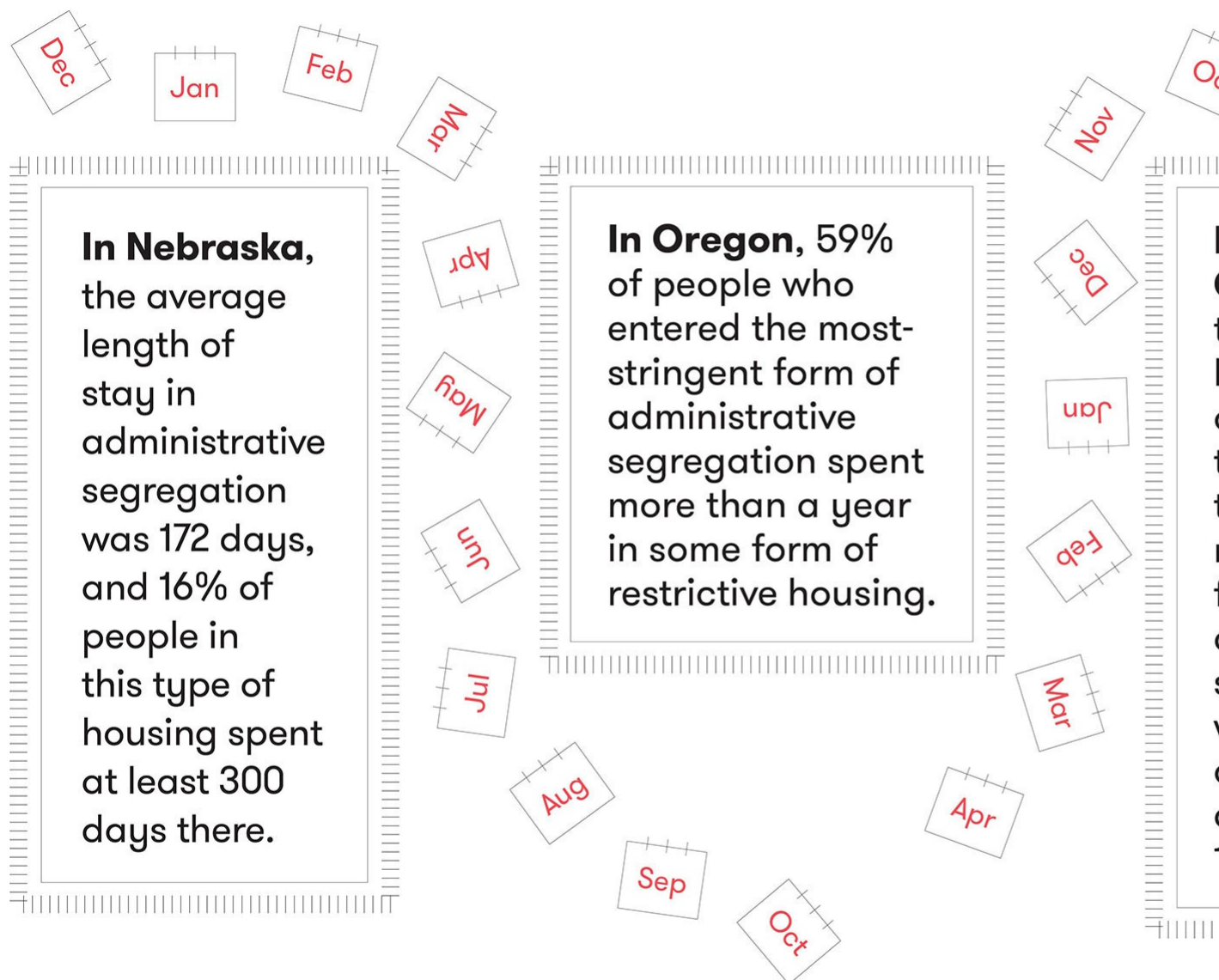
In North Carolina, for example, **more than 1,200 people** were being held in indefinite administrative segregation at the time of Veras initial assessment. For these individuals, as in other jurisdictions, release from restrictive housing was granted only when their cases were reviewed by a staff member or committee and they were judged ready to return to the general population.

Vera found that such reviews were conducted infrequently. In Oregon, for example, people who were incarcerated typically spent **between 60 and 150 days** (approximately five months) in the Intensive Management Unit form of administrative segregation before their first review.

In many jurisdictions, the criteria used to make release decisions were unclear. People were often required to demonstrate that they did not pose a threat to the safety of others in order to be granted release from segregation for example, by participating in programming or interacting with other incarcerated people and staff. But such opportunities were rare; most agencies offered little in the way of meaningful programming or congregative activity in which the incarcerated person could demonstrate positive behavior. Further, the harmful effects that isolation can have on a person's mental well-being and behavior may have made it increasingly difficult for people to earn their release from administrative segregation through good behavior. Grassian, 2006, 325. Opportunities to engage in therapeutic programming were often limited to in-cell workbooks or absent entirely.

These factors contributed to long stays in administrative segregation. In addition, people were sometimes transferred directly to administrative segregation from disciplinary segregation or other types of restrictive housing, leading to even longer continuous periods in such settings.

Stuck in segregation



Note: Data refers to 2015. Since then, NCDPS has restructured its “control” status housing a process designed to provide programming and cognitive behavioral therapy while progress housing conditions to people in long-term restrictive housing.

In addition to understanding the reasons people are placed in restrictive housing, it is also important to look at who is placed there. Doing so helps identify groups that are disproportionately affected by a systems policies and practices, as well as populations that may have unmet needs. More research is needed about groups of people who are likelier to be held in restrictive housing and why. Benjamin Steiner and Calli M. Cain, [The Relationship Between Inmate Misconduct, Institutional Violence, and Administrative Segregation: A Systematic Review of the Evidence](#), in *Restrictive Housing in the U.S.: Issues, Challenges, and Directions* (Washington, DC: U.S. Department of Justice, National Institute of Justice, 2016, NCJ 250315).

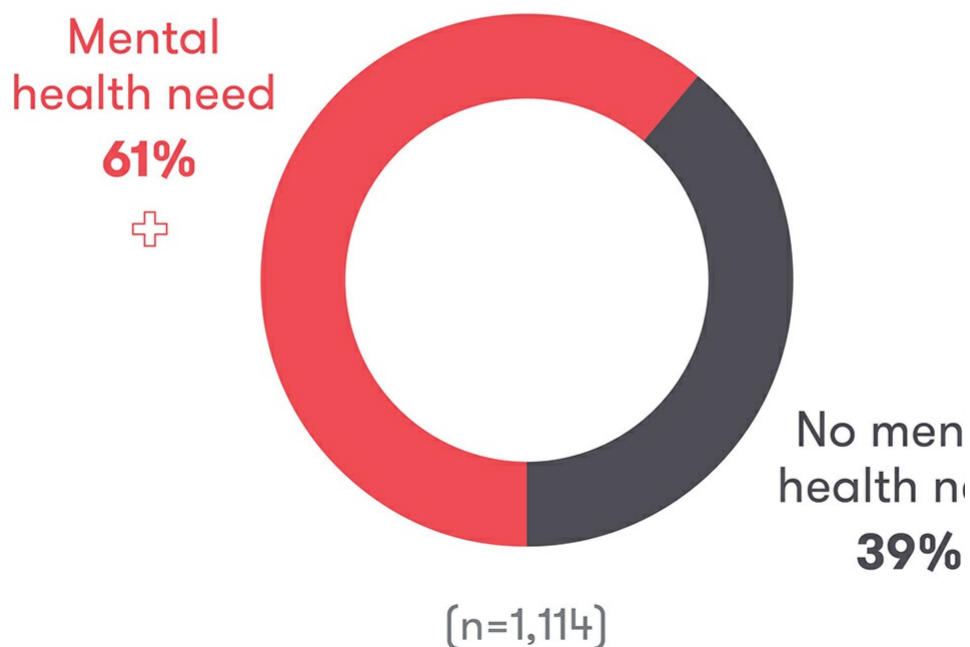
Echoing disparities seen throughout the criminal justice system, Veras analysis found that people with mental health needs, young men, and people of color were more likely to be held in restrictive housing than other incarcerated people.

Identifying how frequently people with mental illness are sent to restrictive housing can be difficult; some data systems do not record incarcerated people's mental health status, and systems that do may include only limited information. During the initiative, data on mental health needs of people in Nebraska prisons or the Middlesex County Adult Correction Center were unavailable. This lack of clear, precise data makes assessment of a system difficult. It also presents challenges for the unit officers who are responsible for people who are incarcerated, and for the disciplinary hearing officers who try to appropriately respond to or adjudicate their behavior. Still, Veras assessment suggests that people with mental health needs were often placed in restrictive housing.

In Oregon, for example, the majority (61 percent) of people in disciplinary segregation units were identified as having mental health needs ranging from mild to severe. By administrative rule in Oregon, people with severe mental health needs are not sanctioned to stays in disciplinary segregation units beyond 30 days. Facilities are required to divert people with severe mental health needs to other environments at or before the 30-day mark.

OR

Disciplinary segregation population by identified mental health needs in Oregon



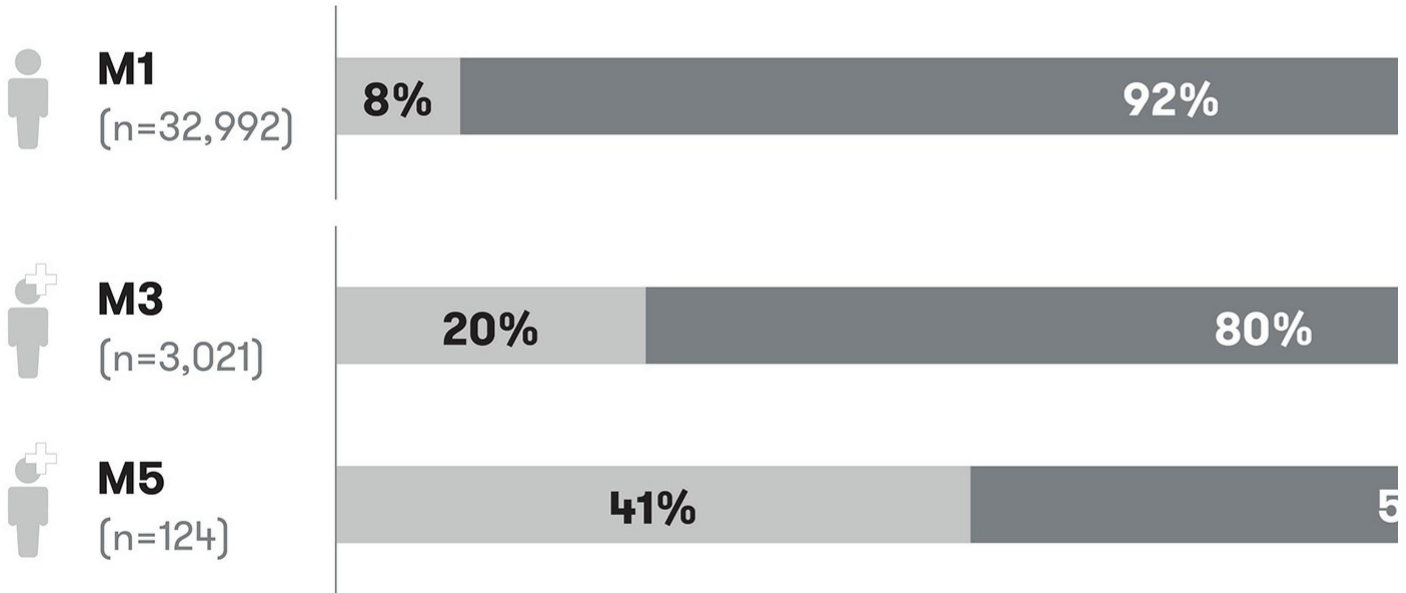
Source: Vera Institute of Justice analysis of data from the Oregon Department of Correction

In North Carolina, incarcerated people are classified using a mental health scale from 1 (no mental health needs) to 5 (most-significant mental health needs). As Figure 4 shows, 41 percent of people with the most serious health needs (designated M5) were in segregation in June 2015.

NC

People with each mental health code in restrictive housing in North Carolina

Restrictive housing General population



Source: Vera Institute of Justice analysis of data from the North Carolina Department of Public Safety. Note that M1 indicates no mental health treatment needs; M3 means that treatment is being provided by a mental health staff; and M5 reflects a level of need equivalent to inpatient psychiatric treatment.

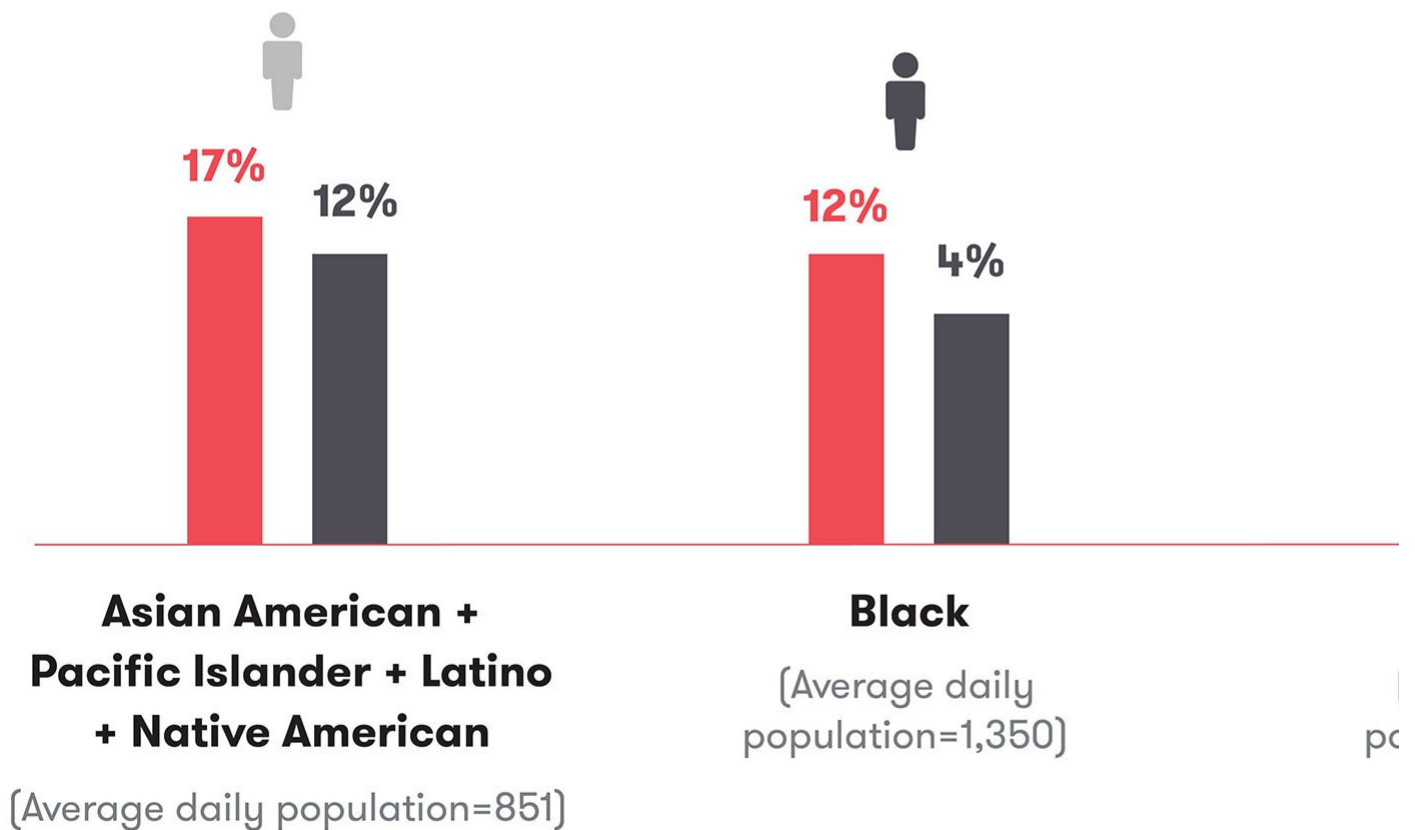
Overall, people of color at Vera's partner sites had higher rates of contact with restrictive housing than white people, especially with the most severe types of this housing, and were underrepresented in more treatment-oriented forms of restrictive housing and other less-stringent alternatives. Pathways to restrictive housing are complex and many factors and decision points contribute to someone being placed there. Vera's analysis describes the outcomes of the use of restrictive housing; it does not assess the determinants for those outcomes or make inferences about causality.

Figure 5 shows, for example, that in Nebraska prisons, a combined group of Asian Americans, Pacific Islanders, Latinos, and Native Americans had the highest rates of contact with restrictive housing, with 17 percent in the most-restrictive settings as compared to 9 percent of white people. Vera used the racial and ethnic categories that existed in the administrative data provided by each site. In addition, only 4 percent of black people were in the less-stringent forms of restrictive housing (the majority of which was considered protective custody), as compared to 9 percent of white people.

NE

Percentages of people in each racial and ethnic group in Nebraska prisons who spent time in restrictive housing in an average month

Very restrictive Less restrictive



Source: Vera Institute of Justice analysis of data from the Nebraska Department of Corrections, June 30, 2015.

Similarly, in New York City, black people were admitted to punitive segregation at 5.7 times the rate that white people were; however, they were less likely to be admitted to units designed as alternatives to restrictive housing for people with severe mental illnesses who had committed infractions, entering those units at 0.6 times the rate that white people did.

Youth and younger adults were more likely than older people to be placed in restrictive housing.

NC

Percentage of each age group in restrictive housing in North Carolina



Age 26 and older

(n=31,203) (2,384 in RH)

8%



Ages 18 to 25

(n=5,931) (1,024 in RH)

17%



Age 17 and younger

(n=75) (24 in RH)

32%

Source: Vera Institute of Justice analysis of data from the North Carolina Department of Public Safety

NE

Percentage of each age group in highly restrictive housing in Nebraska



Age 25 and older

(Average daily population=3,880)

6%



Age 24 and younger

(Average daily population=846)

13%

Source: Vera Institute of Justice analysis of data from the Nebraska Department of Correctional Services population from July 2014 through June 2015.

In all five jurisdictions, women were placed in restrictive housing at a lower rate and for shorter periods, on average, than men were. But in Oregon and North Carolina, where mental health information about women in the prison systems was available, the level of mental health needs among these women was high.

This practice moves people from an environment of extreme isolation and sensory deprivation into one requiring autonomy and complex social interactions, which likely increases the difficulty of an already-challenging transition.

Reentering the community from prison or jail is often a difficult processpsychologically, emotionally, and in practical terms, especially in regards to securing housing, health care, and employment. Nevertheless, this is a practice that Vera regularly observed, often without adequate re-entry programming and preparation for release:

Veras recommendations are based on the assessment of each corrections system, as well as on many years of experience working to reduce restrictive housing and on emerging best practices identified in other U.S. jurisdictions.Vera also drew on the guiding principles on restrictive housing established by the U.S. Department of Justice in 2016, and policy statements from associations of corrections, medical, and health professionals. Some changes are relatively easy to make, while others are more challenging and may require additional resources, especially in staffing.

Veras recommendations varied in response to the specific needs and challenges of each jurisdiction.There were, however, a number of common recommendations, discussed below.

The overall aim of these recommendations is to do the following:

Although sometimes correctional agencies need to be able to separate people temporarily from the general jail or prison population, that should not entail excessively restrictive and isolating conditions.

In particular, Vera recommended that agencies do the following:

Vera recommended that the sites introduce or expand policies, programs, and activities to promote well-being, safety, and positive behavior in the general population:

Certain groups of peoplesuch as youth, women, people with mental illness, and people of colormay have different pathways into restrictive housing, be likelier to end up there, or be more vulnerable to its negative effects than others are. It is important to develop targeted strategies to address peoples underlying needs and reduce the use of restrictive housing for these populations.

To this end, Vera recommended that agencies adopt the following strategies:

The overuse of restrictive housing in U.S. jails and prisons cannot be seen as an isolated problem. It reflects systemic challenges facing corrections departments relating to the well-being of people who are incarcerated and of staff, and to the resources available to meet their needs. Agencies cannot address restrictive housing solely by examining their use of these types of units. They will also need to improve conditions of confinement for the general population to improve the well-being, safety, and conduct of incarcerated people broadly, thereby reducing the demand for typical restrictive housing options.

At the start of the Safe Alternatives to Segregation Initiative, Vera encountered five vastly different corrections systems at various stages in the process of reducing their use of restrictive housing. Many were already planning and implementing alternative strategies to ensure safety and security and promote pro-social behavior. Through a careful analysis of data and policies and in-depth conversations with incarcerated people and corrections staff, Vera was able to create a detailed picture of how such housing was being used and recommend strategies to safely reduce its use. This would not have been possible without the commitment, transparency, and critical and innovative thinking that Veras partners demonstrated.

For too long, restrictive housing has been a deeply hidden issue. The five partner sites are commended for opening their doors to Vera and for welcoming assistance as they tackle this urgent issue.

These agencies are now embarking on the critical work of implementing recommendations and have all actively made changes to their systems. For example, they have taken steps to limit or end the use of restrictive housing for certain populations or in specific situations, and introduced changes to shorten the time people spend in restrictive housing. **See the section below for details on each jurisdictions reforms.**

In enacting substantial changes to their policies and practices, these corrections agencies are affirming their dedication to providing accountable, safe, and secure administration of jails and prisons, while respecting the dignity and worth of those in their care and the staff who are responsible for providing it. As these sites continue to build on the progress they have made, their examples will provide motivation and practical ideas for other jurisdictions willing to rethink their use of restrictive housing.

Updates from Veras Partner Sites

Updates from Veras Partner Sites

Since the Safe Alternatives to Segregation Initiative assessment process concluded, the five partner sites have continued the significant task of implementing strategies to reduce their use of restrictive housing, many of which stem from the recommendations of the Vera Institute of Justice. Here are highlights of the changes each agency reports it has made in recent years. Vera looks forward to seeing these agencies go even further in the coming years and achieve even greater reductions.

The Middlesex County Adult Correction Center (MCACC) reports enacting numerous reforms to reduce its reliance on restrictive housing while managing the constantly changing incarcerated population and addressing peoples diverse needs. These reforms include the following:

MCACC has already seen positive outcomes from these changes:

Since 2015, the Nebraska Department of Correctional Services (NDCS) has dramatically changed how it uses restrictive housing:

In addition to these policy changes, NDCS reports that it has continued to make reforms:

Nebraska has begun seeing the positive results of its reforms:

Over the past few years, the New York City Department of Correction (NYC DOC) has substantially reduced its use of punitive (disciplinary) segregation, using strategies such as the following:

The department is creating a more diverse portfolio of responses to negative behavior and units that integrate programmatic behavioral modification as well as units with more clinical approaches.NYC DOC, March 28, 2018, e-mail correspondence.

New York City reports that its reforms have already shown promising, measurable results:NYC DOC, March 28, 2018, e-mail correspondence.For example, ESH units are enhanced through evidence-based programming including dialectical behavior therapy, interactive journaling, tablet-assisted programming, anger management, and programming led by credible messenger[s]. Peoples cases are reviewed every 30 days for progression to the next level or the jails general population.

In 2016, the North Carolina Department of Public Safety (DPS) eliminated the use of highly restrictive housing (where people are confined to their cells for 22-24 hours per day) for anyone younger than 18. This is a population that Vera found was in this type of housing at a higher rate than people age 18 or above. DPS used multiple strategies to effect this change:

North Carolina created Therapeutic Diversion Units (TDUs), a program to remove people with serious mental illness from long-term, highly restrictive housing and to divert them from being sent to such housing in the first place. TDUs are intended to serve as a therapeutic alternative to highly restrictive housing, using strategies including the following:

In addition, DPS has created a step-down program, the Rehabilitative Diversion Unit (RDU). It aims to help people safely transition out of restrictive housing and back into the general population using the following approach:

North Carolinas RDU and TDUs have already served hundreds of incarcerated people:

In addition, between May 2015 and April 2018, DPS reports the number of people in restrictive housing decreased by 27 percent, from 3,412 to 2,480:

The Oregon Department of Corrections (ODOC) reports that in 2017 it took numerous steps to improve conditions of confinement and provide group programming in restrictive housing. These reforms include the following:

Oregon is working to improve the Behavioral Health Unit (BHU), an intensive behavioral management unit for people with serious mental illness. The director of ODOC has reported that the department has taken the following steps, among others:

The department is also pursuing systemwide strategies to decrease the number of people who enter restrictive housing, particularly for disciplinary reasons, and to shorten the time they spend there:

ODOC is seeing the results of its reform efforts. The department reports the following:

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