Vera Institute of Justice

Criminal Justice Issues and Prisoners' Rights

https://www.vera.org/blog/addressing-the-overuse-of-segregation-in-u-s-prisons-and-jails/how-the-movement-to-end-solitary-confinement-may-shed-light-on-how-to-address-mass-incarceration

Public Facing Advocacy Writing

In the United States, there are between 80,000 and 100,000 people confined to prison cells the size of parking spots and exposed to extreme conditions of social isolation, sensory deprivation, and idleness for days, months, years, and even decades at a timea tally that does not include thousands of others living in similar conditions in jails, juvenile facilities, and immigration detention centers.

This is a human rights crisis and it is not making our communities safer.

Fortunately, momentum is mounting to end this psychologically traumatizing and costly practice. Civil rights litigation, federal congressional hearings, prisoner-led hunger strikes, increased media coverage, criticism from international human rights groups, growing financial pressures, and leadership from some progressive criminal justice leaders are some of the factors prompting correctional systems to reduce their use of solitary confinement. Vera is partnering with government leaders in Nebraska, Oregon, North Carolina, New York City, and New Jersey to identify and implement safe and humane alternatives to administrative and punitive segregation.

The progress of this movement may very well show us the path to scaling down our entire carceral state.

There are obviously legal and technocratic fixes that need to take place, but lets put the wonky details aside and look at the bigger picture. The pervasive use of solitary confinement epitomizes the abandonment of rehabilitation in favor of extreme punishment as the prevailing principle of correctional policy in the age of mass incarceration. The U.S. criminal justice system is overly preoccupied with meting out punishments and managing risks inside facilities on a daily basis, while losing sight of more fundamental responsibilitiesenhancing the health and safety of communities for the long haul and fostering rehabilitative environments that protect the health and safety of incarcerated people and the people who work in these settings. We must root out excessive retribution and rethink what it means to advance public safety. This means revitalizing rehabilitation and elevating human dignity as the core values of justice systems.

The movement to end solitary confinement is teaching us that our society cannot continue subjecting people who enter correctional facilities to dehumanizing living conditions and miserable lives. Incarcerated people who have meaningful opportunities to engage in human interaction, clinical treatment, job training, and educational experiences adjust better and can even thrive when reentering society. Moreover, policymakers would do well to recognize that it is also unjust to continue punishing people after they have served their time by unreasonably denying them fair access to housing, education, voting, and employment simply due to a criminal record. This is a recipe for despair, disadvantage, and disorder.

Curbing solitary confinement and ending mass incarceration will inevitably demand that we focus our attention on all parties entangled in the system. For example, many past efforts to curb the use of solitary confinement have been tailored to restricting its use for vulnerable groups, such as youth, people with serious psychiatric illnesses, and pregnant women. Enacting such laws and policies is imperative for curtailing the misuse of segregation. However, as Tyler Pendergrass of the New York Civil Liberties Union (NYCLU)writes, While there is much low-hanging fruit, the ultimate success of both movementscurbing the use of solitary confinement and seriously reducing prison populationswill come down to the same question: can we respond to violence differently? We cannot cut prison populations or address inhumane living conditions unless we start to look at the causes and solutions to violence through a public health lens. This requires responding to violence in our communities and institutions with tools other than the hammer of a lengthy prison sentence or placement in restrictive housing.

In other words, we cant keep fighting fire with fire. Political scientist Dr. Marie Gottschalk cogentlyargues that shrinking the carceral state demands bolder measures that target more than just the non-serious, non-violent, and non-sex offenders in the criminal justice system. New sentencing regimes that send fewer people who commit violent crimes to prison for shorter periods of time are obviously needed. For those who must be confinedeven those who commit acts of violencetheir chances of recidivism are reduced if they are given earlier and easier access to educational, vocational, and healthcare programming. These are the best weapons to ensure public safety. Depriving people who commit all types of crimes of meaningful opportunities to restore their lives will only perpetuate intergenerational inequalities that breed violence and siphon the social and political capital from their communities.

One of the barriers to transforming the culture of criminal justice agencies is the fundamental lack of transparency. People in prison, especially those in solitary confinement, are invisible or hidden from public conscience. The exclusion of incarcerated people from national education, labor, and health statistics paints a distorted picture of American society that conceals the magnitude of socioeconomic inequalities and alters how government responds to these issues. We can learn something from our European allies, who have established independent, nonprofit agencies to monitor the health and safety of incarcerated people. Such monitoring can foster much

needed accountability for how living conditions in correctional settings impact the health and safety of all parties. The major organs of public health in the United States, such as the National Institute of Health and the Centers for Disease Control and Prevention, as well as state and local health departments, should also play a larger role in monitoring how incarceration practices shape population health outcomes.

To shrink correctional populations, we can no longer abdicate the responsibilities of community health and social welfare systems to police, jails, and prisons, while at the same time training our criminal justice workforce to police, punish, and control peoplerather than cure, repair, and uplift them. We must nurture a culture that is significantly more humane and accountable.

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