

# Solitary Watch

## Criminal Justice Issues and Prisoners' Rights

<https://solitarywatch.org/2014/09/22/reports-condemn-healthcare-and-solitary-confinement-in-arizona-state-prisons/>

## Campaign and Advocacy

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by [Lisa Dawson](#) | September 22, 2014

The American Civil Liberties Union (ACLU), along with California-based [Prison Law Office](#) and their co-counsel in federal class action lawsuit *Parsons v. Ryan*, has released a series of [26 reports](#) alleging extensive problems with the Arizona Department of Corrections (ADC) healthcare program and its use of solitary confinement.

Prison Law Office director Don Specter stated the groups requested the reports from national experts in prison healthcare as part of a lawsuit against the ADC. The reports, which were released ahead of next month's federal class action trial against the ADC, assert that medical, dental and mental healthcare in Arizona State prisons has declined to unsafe levels and that solitary confinement is excessive, with prisons placing people in isolation because prison beds elsewhere are full.

In 2012, the ACLU, the ACLU of Arizona and the Prison Law Office filed a lawsuit seeking competent medical, dental and mental healthcare for prisoners and challenging the use of solitary confinement in Arizona State prisons. The suit includes 33,000 people held in 10 Arizona State prisons. The federal class-action lawsuit is set to go to trial October 21, 2014.

A September 9, 2014, [press release](#) issued by the ACLU states:

To show the dangerous inadequacies of health care and other conditions in Arizona's state prisons, the American Civil Liberties Union, the Prison Law Office, and their co-counsel in *Parsons v. Ryan* filed reports yesterday with the U.S. District Court from seven experts in medicine, psychiatry, dentistry, and related fields. These experts toured the prisons on multiple occasions. They found incidents of illnesses and injuries so neglected by prison staff that they caused extreme suffering, permanent damage, and even death. The reports also detail significant harm caused by the Arizona Department of Corrections use of solitary confinement.

According to a recent [press release](#) by the Prison Law Office:

[T]he chronic shortage of mental health staff, delays in providing or outright failure to provide mental health treatment, the gross inadequacies in the provision of psychiatric medications, and the other deficiencies identified in this report are statewide systemic problems, and prisoners who need mental health care have already experienced, and will experience, a serious risk of injury to their health if these problems are not addressed, wrote Dr. Pablo Stewart, another expert hired by plaintiffs counsel to tour ADC's prisons and review prisoners' medical records ([11/8/13 report](#), page 10).

Dr. [Pablo] Stewart, a psychiatry professor with expertise in prison mental health care, uncovered numerous preventable suicides by prisoners, lengthy and serious delays in care, insufficient and unlicensed staff and inadequate medication protocols. One prisoner hanged himself after ADC neglected to give him his prescribed mood stabilizing drugs for more than three weeks, Dr. Stewart found ([11/8/13 report](#), pages 21-23).

The release also touches on significant, dangerous problems with the ADC's use of solitary confinement, stating that people are placed in solitary simply because other beds are full and that people with mental illness are often placed in isolation because the ADC does not have treatment alternatives.

According to the [Arizona Public Media](#):

The reports, Come to the unanimous conclusion that the Arizona healthcare system is an abysmal failure, [Specter] said.

Arizona's correctional system puts prisoners at serious risk of sickness and death because of a lack of access to adequate healthcare, he added.

Specter said the use of solitary confinement is also a large problem in state prisons.

The reports pointed out that mentally ill prisoners are often put into isolation units, where limited human contact can cause their mental condition to significantly worsen.

Of the ACLUs 26 [expert reports](#), eight focus on the ADCs use of solitary confinement.

One expert commissioned by the ACLU, Mr. Eldon Vail, is a former corrections administrator with nearly thirty-five years experience working in and administering adult institutions whose experience included responsibility for the mentally ill population and their custody, housing, and treatment. Vail spent five days inspecting three Arizona State prisons, during which time he interviewed over 100 people held in solitary confinement. According to his [expert opinion](#):

In the name of safety and security, the ADC engages in multiple practices that are counterproductive to its states aims and harmful to the prisoners in its custody. Overreliance on isolation as a primary means of control results in a harmful environment for all inmates, and especially those with mental illness. Moreover, the actual operations of those unit extreme levels of isolation and idleness, frequent use of pepper spray, and unstable, infrequent, and incoherent programming results in a correctional environment that exacerbates the already grave risks presented by ADCs over-use of isolation. A predictable and stable custody environment that would help mentally ill prisoners feel safe is essential to prepare inmates to be ready to engage in treatment. That environment does not currently exist within ADC.

Another expert called on by the ACLU to provide his opinion of the ADCs use of solitary confinement was Dr. Craig Haney, Ph.D, J.D., Professor of Psychology at the University of California at Santa Cruz. The following are excerpts from [Haney's report](#):

My inspections of the ADC isolation units, my substantial cell front and on-on-one confidential interviews, and the extensive documents that I have reviewed pertaining to the policies, procedures, and conditions that are in operation in ADCs isolation units confirm that they do indeed impose solitary confinement on Arizona prisoners. These are precisely the kinds of isolated and isolating conditions that have been identified and described in the scientific literature as producing adverse effects. Indeed, in my experience, they represent an extremely harsh version of the kind of isolation that has been studied by researchers and condemned my human rights and professional organizations. . .

Based on my experience studying these kinds of environments and their psychological effects for nearly four decades. . . I can offer the strongly held opinion that the range of egregious conditions, practices, and policies and practices that I have described . . . can be remedied through system-wide relief that is ordered by the courts.

The ACLU commissioned yet another expert, Dr. Brie Williams, a licensed and practicing physician in the state of California who is board certified in Internal Medicine, Hospice and Palliative Medicine, and Geriatrics, to prepare an [expert report](#) on conditions of confinement in isolation units at three ADC prisons. Williams interviewed prisoners, inspected housing units and other areas to which prisoners have access and reviewed medical files. The following have been excerpted from Williams report:

Prisoners of older age, with chronic medical conditions, and/or with physical disabilities are at high risk of immediate and future harm from isolated confinement as practiced in ADC. In addition, some of these prisoners are receiving dangerously inadequate medical care. . .

Loneliness, both actual and perceived social isolation, is an important risk factor for the development and/or worsening of many serious medical conditions. . . [S]tudies show that social isolation has a significant adverse effect on physical and mental health, immune responses, functional ability, and important health behaviors capable of hastening the onset and course of medical illness. . .

Williams goes on to cite other health problems that can be brought on by or exacerbated by isolated confinement as practiced by the ADC, including memory impairment, osteoarthritis, hypertension, and hearing impairment, insomnia and type 2 diabetes mellitus. After detailing her visits at the prisons, Williams concludes:

For all of the reasons set forth in this report, it is my opinion that isolated confinement as practiced in ADC poses a substantial risk of serious harm, including increased morbidity and mortality, to prisoners of older age, with chronic medical conditions and/or physical disabilities.

Corrections officials have disputed the reports, which were made public earlier this month after the ACLU won a federal court hearing to have them unsealed. The [Arizona Daily Star](#) reports:

State prison officials declined to comment in detail on the case and the recent release of the ACLU reports because the matter remains in the courts. But a spokesman did provide a brief statement disputing the ACLUs claims.

While the plaintiffs have sought to try their case in the media, the ADC will present its evidence and arguments in Court, where it will offer its own expert opinions that paint an accurate and realistic picture of inmate health care and conditions of confinement, ADC spokesman Doug Nick said.

Lisa Dawson served as an assistant editor, social media manager, and contributor at Solitary Watch. She continues to support prisoners and their family members who need help navigating re-entry. She is on Twitter [@endsolitary](#).

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

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Im sure that the AZ prison system is not alone in the lack of healthcare for inmates. Prisons are so overcrowded and underfunded that they are forced to operate on a warehousing model in which inmates are not regarded as fully human. Rather than healthcare they operate on a no care basis.

Finally. I have been waiting and praying for justice. Even a sentence has limits.  
From 1999 till 2014. Is that justice?  
No, innocent included: too much work.  
God is watching ..and HE will judge.

This report is indeed disturbing in its description of serious lack of mental health services and staffing. What goals will ADOC set up to remedy these dramatic shortcomings? AZ would do well to spend resources on inmate care rather than more buildings. Is it not time to revisit alternatives to incarceration for non violent offenders?  
What are the benefits of all the millions now being spent? What is the purpose of prisons? Some serious and prolonged discussion is needed.

This desperately needed to happen. Having the records unsealed will shed a light onto over isolation that would not have been seen otherwise. Lets just hope that while this investigation is ongoing, the Arizona DoC doesn't falsify present forward records.

Really looking forward to a step in prison reform and a decrease in abuse of any human being within the DoC system especially the mentally ill who are left to rot.

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