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FY 2022 REPORT ON THE USE OF SOLITARY CONFINEMENT FOR THE COMMITTEE ON COMMERCE, JUSTICE, SCIENCE AND RELATED AGENCIES



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**U.S. Department of Justice
Office of Justice Programs
FY 2022 Report on the use of Solitary Confinement
for the Committee on Commerce, Justice, Science
and Related Agencies**

The Office of Justice Programs (OJP) provides this report required by the Joint Explanatory Statement accompanying the Consolidated Appropriations Act of 2022 (Public Law 117-103), which states:

The Committee directs the [National Institute of Justice (NIJ)] to collect data on solitary confinement practices, including frequency, conditions of solitary confinement, duration of solitary confinement, the impact of solitary confinement on an individual’s physical and social-emotional health, and the recidivism rate of individuals who have experienced solitary confinement. The Committee directs the [NIJ] to report back to the Committee annually on this topic, with the first report due not later than 180 days after the date of enactment of this Act.

Background

Within jails and prisons across the U.S., restrictive housing (RH) – sometimes referred to as solitary confinement – is utilized to separate individuals from the general incarcerated population, restricting their movements and behavior for various reasons, including disciplinary infractions or protection.¹

In practice, RH terminology and operations vary by jurisdiction and facility.² For example, RH may be called administrative segregation, disciplinary segregation, or solitary confinement, among other terms, and include short- or long-term stays in single or double cells for up to 23 hours per day.³ However, because of this variation, it has been difficult to estimate the use and evaluate the impact of the practice on a large scale, with research showing mixed results on its effectiveness. Additionally, some studies that do exist suffer from methodological limitations that make it difficult to determine consistent relationships.

Review of the Literature

Based on data from the most recent iteration of the National Inmate Survey (NIS; 2011-2012),⁴ the Bureau of Justice Statistics (BJS) reported that nearly one in five people in jail or prison had spent time in RH in the previous year, estimating that on average over 4% of the prison population and about 3% of the jail population was in RH per day.⁵ Ten percent of all people in prison and 5% of those in jail said they spent 30 days or more in RH.

The NIS is part of BJS’s National Prison Rape Statistics program, which gathers mandated data under the Prison Rape Elimination Act of 2003. BJS began conducting the fourth iteration of the NIS (NIS-4) in 2023 and, as of March 1, 2024, the data collection and analysis remains ongoing.⁶ For this project, BJS visited approximately 250 jails and 170 state and federal prisons, with a minimum of one facility in each state, to survey 100,000 incarcerated individuals. For NIS-4, BJS included questions to obtain information on incarcerated peoples’ self-reported experiences of RH, which will provide additional insight into these practices using a large, nationally-representative sample.

**U.S. Department of Justice
Office of Justice Programs
FY 2022 Report on the use of Solitary Confinement
for the Committee on Commerce, Justice, Science
and Related Agencies**

Additionally, BJS collected data on RH from the 2019 [Census of State and Federal Adult Correctional Facilities \(CCF\)](#).⁷ The CCF collects facility-level aggregate data from every federal and state prison facility every five to seven years including information on the operations of facilities and the conditions of confinement.

The 2019 CCF indicated that over 75,000 people were held in RH for at least 22 hours per day on June 30, 2019, representing roughly 7% of the population in reporting prisons. Based on the 57,734 cases where the reason for RH placement was also reported, administrative segregation accounted for the highest share (37%) followed by disciplinary segregation (27%). Another 12% were in RH for protective custody and 2% were on death row.⁸ The remaining 23% were in RH for various other reasons including prehearing detention, pending disciplinary action, mental health reasons, and medical reasons.

The next iteration of this census will be conducted in 2024.

NIJ-funded Research on RH

NIJ funded several studies under the Fiscal Year (FY) 2016 Research and Evaluation on Institutional Corrections solicitation to understand the use of RH in correctional institutions. Under this solicitation, NIJ awarded a total of \$3.2 million for four projects on the topic.⁹ Also in 2016, NIJ produced “[Restrictive Housing in the U.S.: Issues, Challenges, and Future Directions](#),” a report detailing the use of RH and related issues.¹⁰ This work and its results are synthesized below, collected from final reports and other associated publications.

Use and Placement of Restrictive Housing

As detailed in the 2016 NIJ report, Yale Law School’s Liman Program and the Association of State Correctional Administrators (ASCA) collected survey data in 2014 from 32 states, the District of Columbia, and the federal prison system related to the use of segregated housing. These data showed that nearly 7% of the incarcerated population from included agencies was held in some form of segregation, although the share of the custodial population held in RH varied greatly between states.¹¹ This is consistent with findings from the 2019 CCF data.¹²

Using data from 24 jurisdictions that reported RH lengths of stay, 11 indicated that most individuals were held less than 90 days at a time, although some noted they had people in segregation for over three years. In a 2013 report, the U.S. Government Accounting Office (GAO) similarly estimated that 7% of people in the Federal Bureau of Prisons (FBOP) facilities were held in RH.¹³

NIJ-funded research from the University of Cincinnati (UC) determined that the use of RH in Ohio prisons was relatively common, with 36% of people experiencing at least one placement in short-term RH during their incarceration between 2008 and 2016.¹⁴ People spent roughly 11 days in short-term RH on average, with about 6% of the population held in short-term RH per month.

**U.S. Department of Justice
Office of Justice Programs
FY 2022 Report on the use of Solitary Confinement
for the Committee on Commerce, Justice, Science
and Related Agencies**

Similarly, research from Florida State University (FSU) determined that 6% of the Florida prison population was in short-term RH on any given day based on a snapshot from June 30, 2011.¹⁵ Like the UC study, they also found that almost half (48%) of all prison stays included some form of RH. Most of these placements were for less than 60 days.

The above research from FSU, UC, and the NIJ report, as well as other NIJ-funded studies completed by Arizona State University (ASU) and Vera Institute of Justice (Vera), have also shown disparities in *who* is placed in RH, notably that those with mental illnesses were significantly more likely to experience segregation.¹⁶ These results collectively show that individuals who had a mental health issue had higher odds of being placed in various forms of RH when compared to their counterparts without mental health issues.

Notably, FSU, NIJ, UC, and Vera reported demographic disproportions in the RH population, with each indicating the overrepresentation of Black individuals in segregation.¹⁷ Vera's findings also show that transgender individuals were overrepresented in RH compared to the general incarcerated population.

Collectively, these studies demonstrate that just under 10% of the incarcerated population is likely housed in segregation on any given day and that RH stays are generally fewer than 90 days. However, as shown in the studies conducted by UC and FSU, a notable share of people will experience RH at least once during their incarceration.

Impact on mental health

The body of research described here consistently demonstrates the relationship between mental illness and placement in RH, and how RH negatively impacts incarcerated people's mental health, especially those that previously suffered from mental health issues.

In terms of NIJ-funded research, although ASU found no statistically significant evidence of worsening mental health when comparing initial and post-RH indicators, UC and Vera determined that RH contributed to negative mental health outcomes.¹⁸ Additionally, FSU reported an increased need for mental health services after long-term RH, which stayed consistently heightened over the 12 weeks following release from RH.¹⁹

The 2016 NIJ report detailed other research on the psychological impact of RH, however the results were mixed and at times conflicting as study methodologies, populations, and environments varied.²⁰ For short-term RH placement (less than 90 days), most research has not found an association with worsening mental health. For long-term placement (90 days or more), past studies have demonstrated that some individuals will experience deterioration in mental health, but it is unclear whether that is due to RH alone.

However, it appears that RH is particularly harmful for those with pre-existing mental health conditions and is associated with an increased risk of suicide in prison. Although there is not a clear-cut body of empirical evidence showing a relationship between RH and mental health impacts, several healthcare professional organizations — including the American Psychiatric

**U.S. Department of Justice
Office of Justice Programs
FY 2022 Report on the use of Solitary Confinement
for the Committee on Commerce, Justice, Science
and Related Agencies**

Association, American College of Correctional Physicians, American Public Health Association, and the National Commission on Correctional Health Care — have released position statements which discourage placing people with mental illnesses in prolonged RH.

In addition to NIJ-funded research, NIJ reviewed contemporary research findings from other research institutions and found similar patterns of results. Most recent research indicates an association with RH and psychological distress, which appears to be the strongest for those who have a history of mental illness.²¹ Additionally, two recent meta-analyses, which considered up to 15 studies each, found small but significant negative impacts on mental health, most notably in terms of anxiety and depression.²² However, subsequent studies either found no causal relationship between RH and mental health deterioration, or they found a relationship, but were not able to attribute the deterioration to the RH experience, as opposed to the general prison experience.²³

Some studies also explore the staff experience of working on these units. The 2016 NIJ report detailed research that showed correctional officers (COs) working in RH units reported lower levels of job commitment and satisfaction and higher levels of work stress and fear of victimization than those who worked in the general population.²⁴ Additionally, physical assaults were more likely against COs working in RH.

Vera found that although COs commonly reported mental and physical health issues such as burnout and post-traumatic stress disorder, these were more likely when a CO had worked in RH.²⁵ More exposure to RH was associated with more severe burnout and physical symptoms when compared to those with low or no RH experience. ASU reported that seven in ten staff members working in RH indicated they had been assaulted in the unit, significantly higher than for other custody levels. However, ASU did not find significant differences in mental health outcomes for COs of different units; rather, mental health challenges were fairly prevalent overall.²⁶

Despite largely mixed results on the impact of living and working in RH on mental health, more recent rigorous studies indicate a relationship between segregation and mental health issues, with particularly damaging effects for some people.

Impact on post-RH behavior

NIJ-funded research has also explored the impact of RH on subsequent behavior, specifically focusing on misconduct during incarceration and reoffending after release from incarceration. In other words, these studies try to determine whether RH has a deterrent effect on future misconduct and criminal behavior.

In terms of disciplinary infractions, results are mixed. Vera found that those in RH were more likely to be written up for misconduct in the future.²⁷ Conversely, FSU reported that infractions were reduced in the 12 weeks following release from long-term RH; however, there was an increased need for mental health services.²⁸ Additionally, the length of stay in long-term RH was

**U.S. Department of Justice
Office of Justice Programs
FY 2022 Report on the use of Solitary Confinement
for the Committee on Commerce, Justice, Science
and Related Agencies**

important: stays under 6 months were associated with increased infractions after release from RH but longer stays led to lower odds of infractions. UC found, contrary to FSU, that shorter stays in RH were associated with lower odds of misconduct following release from RH, but longer stays were associated with a higher likelihood of misconduct.²⁹ Here, placement in RH was also predictive of programming withdrawal and failure.

In terms of reoffending, both FSU and UC found evidence of an increased likelihood of recidivism after release from an incarceration that involved RH, higher than those who did not experience RH.³⁰

As described in the 2016 NIJ report, additional research also suggests that RH is overall not an effective deterrent, as past studies have found largely mixed results on its impact on misconduct and recidivism.³¹ Notably, more rigorous research indicates that RH does not have a significant impact on misconduct or reoffending (i.e., it does not lower or raise the likelihood of either), challenging the idea that segregation can deter future criminal behavior. Research outlined in the report also shows that it does not work to reduce institutional-level misconduct or violence.

Further, the 2013 GAO report found housing people in RH cost \$87 million in FY13, whereas housing those same individuals in nonsegregated or general population housing would have cost \$42 million or \$50 million depending on the security level.³² However, the report also notes that keeping some individuals in the general population can lead to serious incidents that may result in disturbances and lockdowns, which cost the FBOP \$23 million between FY07 and FY11.

Overall, these findings indicate that in at least some cases RH may not effectively enhance safety and security in addition to being costly and potentially harmful to those housed and working in correctional facilities.

Future projects

The research detailed above shows largely mixed results, and there is still a need to understand the current use of RH in correctional institutions, especially after COVID-19 related changes in the number of people entering and exiting prison. Although other research on prison experiences can provide auxiliary knowledge about RH — for example, a recent study on women in prison found that some do not report sexual assault because they do not want to be placed in segregation for protection³³ — there is a need for studies that explicitly evaluate RH.

Recently, the FBOP, which oversees 122 prisons housing roughly 158,000 people, has attempted to reduce the use of RH and instituted a task force focused on reducing RH populations in response to administrative priorities. Despite these initiatives, the population in RH has increased. To develop short- and long-term recommendations to reduce the use of and time spent in RH, NIJ solicited proposals for a procurement contract to conduct a comprehensive review of RH practices throughout the FBOP in 2023.³⁴ The selected research institution, RTI International, will conduct data analyses for all 122 FBOP facilities and select a sample of 12-15

**U.S. Department of Justice
Office of Justice Programs
FY 2022 Report on the use of Solitary Confinement
for the Committee on Commerce, Justice, Science
and Related Agencies**

locations for additional analysis through site visits, staff interviews, and policy examinations, with final reporting due roughly 3 years from the start date of July 2023.

Recommendations for data collection on restrictive housing

With this request, the Committees on Appropriations requested the collection of data on and the annual reporting of “solitary confinement practices, including frequency, conditions of solitary confinement, duration of solitary confinement, the impact of solitary confinement on an individual’s physical and social-emotional health, and the recidivism rate of individuals who have experienced solitary confinement.” Although this requirement is assigned to NIJ, the research, evaluation, and development agency of the U.S. Department of Justice, NIJ does not engage in activities that include the collection of statistics related to crime and justice issues. NIJ has supported research on RH in past projects and can continue to do so with additional funding. NIJ is currently working with the FBOP and RTI International to review RH practices; while the results of this work do not necessarily speak to frequencies, durations, or the impact of RH on individuals at a national level, they may help inform not only federal practices but also those at the state and local level.

NIJ recommends reassigning the requirement for the collection of data on RH to BJS. BJS is “the primary statistical agency of the Department of Justice ... [and] is one of the thirteen principal federal statistical agencies throughout the Executive Branch, agencies whose activities are predominantly focused on the collection, compilation, processing, or analysis of information for statistical purposes.”³⁵ Further, the most comprehensive collection of RH data to date is the 2015 BJS Report. As stated previously, in FY 2024, BJS will collect data on the number of people in RH through the Census of Correctional Facilities. Through these data collections, BJS also has advanced access to non-publicly available data.

However, there are several challenges with the Committee’s data collection requirements. The definition of RH varies across jurisdictions and even between facilities within a single jurisdiction. Additionally, there are multiple reasons to house people apart from others including punitive, protective, medical, sentence-based, and facility-space constraints, and each reason likely has its own characteristics and requirements that would be difficult to capture through a standardized data collection sent to state departments of corrections and the FBOP.

Although data on RH practices — including frequency and conditions of RH — can be collected on each facility from state departments of corrections and the FBOP, data on duration of RH, the impact of RH on an individual’s physical and social-emotional health, and the recidivism rate of individuals who have experienced RH would have to be collected through an interview with each individual exposed to the practice. This presents several logistical and potentially costly challenges for statistical data collection, including recruiting a sufficient sample of persons who have experienced RH to measure the quantities of interest, and designing the interview to maintain safety and security standards across a range of facilities that will govern when, how, and with which individuals currently in RH researchers can speak. Finally, BJS must adhere to the Office of Management and Budget clearance process when adding questions to existing

**U.S. Department of Justice
Office of Justice Programs
FY 2022 Report on the use of Solitary Confinement
for the Committee on Commerce, Justice, Science
and Related Agencies**

collections or developing new collections, and above all, protect the privacy of individual respondents and the confidentiality of their data.

Despite these challenges, BJS is prepared to conduct the most rigorous statistical RH data collection process possible.

¹ National Institute of Justice. 2016. "NIJ FY16 Research and Evaluation on Institutional Corrections." Grant Solicitation, Washington, DC. <https://nij.ojp.gov/sites/g/files/xyckuh171/files/media/document/NIJ-2016-9086.pdf>.

² Garcia, Marie, ed. 2016. *Restrictive Housing in the U.S.: Issues, Challenges, and Future Directions*. Washington, DC: National Institute of Justice. <https://www.ojp.gov/pdffiles1/nij/250315.pdf>.

³ For the purposes of this report, the term 'restrictive housing' will be used in lieu of solitary confinement.

⁴ See <https://bjs.ojp.gov/data-collection/national-inmate-survey-nis> for more information on the National Inmate Survey.

⁵ Beck, Allen J. 2015. *Use of Restrictive Housing in U.S. Prisons and Jails, 2011–12*. Special Report, Washington, DC: Bureau of Justice Statistics. <https://bjs.ojp.gov/content/pub/pdf/urhuspj1112.pdf>.

⁶ See <https://bjs.ojp.gov/funding/opportunities/o-bjs-2023-171763>, https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202307-1121-001, and https://www.reginfo.gov/public/do/PRAViewICR?ref_nbr=202307-1121-002 for more information on the NIS-4.

⁷ Bureau of Justice Statistics. 2023. *Census of State and Federal Adult Correctional Facilities (CCF, Formerly CSFACF)*. Washington, DC. <https://bjs.ojp.gov/data-collection/census-state-and-federal-adult-correctional-facilities-ccf-formerly-csfacf>

⁸ Death rows often operate as RH units with individual cells and restricted movements.

⁹ National Institute of Justice. 2016. Research and Evaluation on Institutional Corrections. February 17. Accessed April 18, 2023. <https://nij.ojp.gov/funding/opportunities/nij-2016-9086>.

¹⁰ Garcia, Marie, ed. 2016. *Restrictive Housing in the U.S.: Issues, Challenges, and Future Directions*. Washington, DC: National Institute of Justice. <https://www.ojp.gov/pdffiles1/nij/250315.pdf>.

¹¹ Garcia, Marie, ed. 2016. *Restrictive Housing in the U.S.: Issues, Challenges, and Future Directions*. Washington, DC: National Institute of Justice. <https://www.ojp.gov/pdffiles1/nij/250315.pdf>.

¹² Bureau of Justice Statistics. 2023. *Census of State and Federal Adult Correctional Facilities (CCF, Formerly CSFACF)*. Washington, DC. <https://bjs.ojp.gov/data-collection/census-state-and-federal-adult-correctional-facilities-ccf-formerly-csfacf>

¹³ United States Government Accountability Office. (2013). *Improvements Needed in Bureau of Prisons' Monitoring and Evaluation of Impact of Segregated Housing*. Washington, DC: United States Government Accountability Office. <https://www.gao.gov/products/gao-13-429>

¹⁴ Cochran, Joshua C., John D. Wooldredge, Claudia N. Anderson, and Joshua Long. 2022. *Examining the Use and Impacts of Restrictive Housing*. Grant Research Report, Washington, DC: National Criminal Justice Reference Service. <https://www.ojp.gov/pdffiles1/nij/grants/304977.pdf>.

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¹⁶ Cochran, Joshua C., John D. Wooldredge, Claudia N. Anderson, and Joshua Long. 2022. *Examining the Use and Impacts of Restrictive Housing*. Grant Research Report, Washington, DC: National Criminal Justice Reference Service. <https://www.ojp.gov/pdffiles1/nij/grants/304977.pdf>; Garcia, Marie, ed. 2016. *Restrictive Housing in the U.S.: Issues, Challenges, and Future Directions*. Washington, DC: National Institute of Justice. <https://www.ojp.gov/pdffiles1/nij/250315.pdf>; Mears, Daniel P., George B. Pesta, Vivian Aranda-Hughes, Jennifer

**U.S. Department of Justice
Office of Justice Programs
FY 2022 Report on the use of Solitary Confinement
for the Committee on Commerce, Justice, Science
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**U.S. Department of Justice
Office of Justice Programs
FY 2022 Report on the use of Solitary Confinement
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and Related Agencies**

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