The Psychological Effects of Solitary Confinement

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Introduction

- Solitary confinement is placing an inmate in segregation from other inmates for up to 23 hours a day.
- The use of solitary confinement has increased substantially throughout the years (National Commission on Correctional Health Care, 2016).
- Inmates can potentially stay in isolation for part or all of their sentences due to medical reasons, punishment, suicidal or homicidal ideation, severe and/or persistent mental illness, and safety hazards (National Commission on Correctional Health Care, 2016).
- Many inmates who are chronically mentally ill are put in solitary confinement due to insufficient mental health staff and overcrowding (Kupers, 2008).
- Inmates can be released straight from solitary confinement after serving their prison sentence.
- Prisons lack a buffer between solitary confinement and the public; this is potentially dangerous because the inmate may have little human interaction for years and lose the social skills needed to survive outside prison (Arrigo & Bullock, 2008).
- Inmates who were released straight from solitary confinement were 69% more likely to commit an offense (see figure; Lovell, Clark, & Cane, 2007).

Psychological Effects

- Prisoners become very distressed and psychotic after spending extended amounts of time in solitary confinement (Grassian, 2006).
- Prisoners also reported that they experienced depression, suicidal and homicidal ideation, and were distant after being in long-term solitary confinement (Grassian, 2006).
- Inmates with a mental illness are especially prone to these effects and tend to have chronic psychological problems after being in long term solitary confinement (Haney, 2017).
- Inmates suffering from a psychotic disorder are more predisposed to deterioration (Haney, 2017).
- Inmates become disruptive and unable to cope with the emotional distress of their illness and isolation when kept in solitary confinement, which leads to an inmate lacking coping skills when released from prison (Kupers, 2008).
- Individuals were more prone to self-harm residing in and after release from solitary confinement when compared to inmates housed in other units (Kaba et al., 2014).

Possible Alternatives

- Enrolling inmates in an anger management program can help decrease violent offenses for inmates and assist them in managing stress levels (Dowden, Blanchette, & Serin, 2001).
- Prison yoga programs have also improved impulsiveness, addiction, distress, and self-worth for inmates (Auty, Cope, & Liebling, 2015).
- Implementing different housing units for Severely Mentally Ill (SMI) individuals reduces the need for isolating these inmates.
- Jails saw a decrease in the number of suicide attempts by the SMI housed in supermax units: Reviewing what we know and recommending what should change (Auty, Cope, & Liebling, 2015).
- It would also be beneficial for inmates with severe psychiatric illnesses to be housed in separate units with more care.

Conclusions

- Studies have shown a relationship between solitary confinement and harmful psychological effects of having an inmate in solitary confinement.
- Many prisons in the U.S. and around the world have incorporated rehabilitation programs and alternative housing units that could be a safer alternative to solitary confinement.
- After attending a rehabilitation program, inmates are less likely to commit an offense and have more coping skills to utilize when dealing with potentially stressful situations (Dowden, Blanchette, & Serin, 2001).
- It would also be beneficial for inmates with severe psychiatric illnesses to be housed in separate units with more care.

References


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