

Correctional Association of New York



Imagine living in a space the size of a bathroom, for months or years, without the ability to leave, go outside, or engage in any meaningful human contact or activity for 23 or 24 hours a day. Even your one hour of recreation takes place in a cage. Whether called special housing units (“SHU”), supermaxes, or the box, isolated confinement is common across the country. In New York, thousands of people struggle in isolated confinement each day, resulting in great harm to them and the communities to which they will return.

What is the human impact of isolated confinement?

Though people in isolation are only 8% of the prison population, nearly 30% of suicides in New York prisons occur in isolated confinement. The sensory deprivation, lack of normal human interaction, and extreme idleness can lead to intense suffering and severe psychological damage, even in healthy, well-functioning adults. Young people or people with mental illness fare even worse. The imposition of SHU sentences also increases the amount of time people remain in prison by generally causing people to lose merit time, and to get denied by the Parole Board.

Who is in isolated confinement?

Contrary to popular myth, isolation is not used primarily to address chronically violent behavior or serious safety or security concerns. It more often is used in response to non-violent prison rule violations, or even retaliation for questioning authority, talking back to staff, or filing grievances. Indeed, roughly 84% of all disciplinary SHU sentences imposed are for non-violent behavior. Isolation may also be used to administratively segregate people deemed to pose a threat to safety, or as a place of protection for the isolated person. DOCCS* staff has wide discretion in imposing SHU sentences, resulting in a disproportionate number of African Americans in the SHU.

Where are people in isolated confinement held?

SHU units are segregated cellblocks used for isolated confinement in most maximum and some medium-security prisons. Keeplock refers to 23 hours-a-day confinement in one’s own cell or a separate cellblock. S-blocks are freestanding high-tech lockdown units where two people live, bathe, and recreate in one cell. Southport and Upstate are entire prisons made up of high security lockdown units. New York has 5,000 total isolated confinement beds spread throughout the state.

How often is isolated confinement used in New York?

Each day, about 4,300 people, and more than 400 children under 21, are held in NY SHUs (not including keeplock, administrative segregation, or protective custody), which is nearly 8% of all people in prison. This over-reliance on the SHU is at a rate 46% higher than in 2003-2005 and 37% higher than the national average. More than 13,000 SHU sentences are imposed every year.

*Department of Corrections and Community Supervision, which operates the NYS prison system.

Why do so many people end up in the SHU and how long do they stay there?

Each year, DOCCS prosecutes approximately 150,000 alleged prison rule violations, and finds 95% guilty. SHU confinement is the punishment for some of those violations. The majority of SHU sentences are 90 days or more, and most people receive much longer sentences. SHU sentences often create vicious Catch-22 scenarios in which people accumulate additional tickets and time while in the SHU, leaving people to languish there for months, years, and even decades.

What other restrictions are placed on people in the SHU in addition to the isolation itself?

People in isolated confinement may not participate in any meaningful programs, jobs, or human interactions. They are denied such basic “privileges” as making phone calls or commissary buys, are allowed a maximum of five books, letter writing supplies, and religious materials, and must eat meals in their cells. They often receive increasingly harsh restrictions on such basic amenities as food, showers, recreation, and haircuts, or have “cell shields” that limit their ability to hear or see out.

What is the impact of isolated confinement on prison safety and security?

Isolation *decreases* safety by causing psychological and social deterioration, leading to more problematic behavior. Even if there are people who must be temporarily separated from the general population for their own safety or that of others (i.e., suicide attempts, multiple violent acts), segregation should be the *last* resort, not the first, and conditions of segregation should not be the *counterproductive* and *abusive* conditions of New York’s isolation. Several jurisdictions have enhanced safety by dramatically decreasing isolation. Mississippi prisons, for example, reduced isolation by 75% and had a 50% *decrease* in violence.

What is New York’s SHU Exclusion Law, what is its impact, and what are its limitations?

The SHU Exclusion Law mandates that people with a “serious mental illness” (SMI) who face disciplinary confinement that could exceed 30 days be diverted to a Residential Mental Health Treatment Unit (RMHTU). RMHTUs provide structured out-of-cell therapeutic programming and/or mental health treatment two or four hours a day, five days a week. The SHU Exclusion Law does not cover the vast majority of SHU residents, including people in general keeplock, those with significant mental illnesses not designated SMI, or those without any mental illness. A diagnostic hard line cut-off also creates incentives for officials to classify people below the line, and recent data raises concerns about potential under-diagnosis. Diverted patients are in isolation 20-22 hours a day, and some engage in therapy while in cages and live in a punitive, non-therapeutic, environment replete with disciplinary tickets, verbal harassment, and physical abuse.

What does the Correctional Association do to challenge isolated confinement?

The CA reports on the use and conditions of isolated confinement, and advocates for more humane alternatives. We believe that rather than using ineffective and abusive punitive responses to rule violations or status, facilities should provide treatment, programs, and targeted interventions that address underlying causes of behavior. We helped advocate for the passage of the SHU Exclusion Law, and continue to monitor conditions in isolation units. We also collaborate with others to push for drastic reductions in the use and length of isolation for all people, improved conditions of confinement, and alternative interventions, treatment, and programs. For more information about this work, please visit: <http://www.correctionalassociation.org/issue/solitary-confinement>.

The Correctional Association is an independent, non-profit with unique legislative authority to inspect prisons and report findings and recommendations to the legislature, public and press. Through monitoring, research, public education and policy advocacy, the CA strives to make the administration of justice more fair, efficient and humane.