



Lisa Monet Wayne
President

June 18, 2012

The Honorable Dick Durbin
711 Hart Senate Bldg.
Washington, DC 20510

Dear Senator Durbin:

On behalf of the National Association of Criminal Defense Lawyers (NACDL), I write to thank you for scheduling a hearing for the purpose of **“Reassessing Solitary Confinement: The Human Rights, Fiscal and Public Safety Consequences.”** The National Association of Criminal Defense Lawyers (NACDL) is the preeminent organization in the United States advancing the mission of the nation’s criminal defense lawyers to ensure justice and due process for persons accused of crime or other misconduct. NACDL believes that safe and humane prisons must be the highest priority of any correctional system.

The NACDL opposes the use of long-term solitary confinement in our prison systems for the following reasons:

- (1) Solitary confinement results in greater prison violence.
 - Solitary confinement increases the risk of torture, excessive force and other forms of physical abuse, because there is an absence of witnesses and many detainees have been held in solitary confinement for years.
 - Long-term segregation has been shown to increase prisoner-on-staff and prisoner-on-prisoner assaults.
- (2) Solitary confinement endangers the psychological health of inmates.
 - Research shows that people who experience long periods of isolation in prison often experience serious and sometimes lasting deterioration in mental and physical health.
 - Prisoners with mental illness are significantly overrepresented in supermax prisons and similar solitary confinement facilities, and once subjected to the extreme social and sensory deprivations of solitary confinement, many mentally ill prisoners deteriorate dramatically.
 - Direct studies of the effects of prison isolation have documented a wide range of harmful physiological and psychological effects including increases in negative attitudes and affect, insomnia, anxiety, panic, withdrawal, hypersensitivity to external stimuli, ruminations, cognitive dysfunction, perceptual distortions and hallucinations, loss of control, aggression, rage, paranoia, hopelessness, lethargy, depression, emotional breakdowns, self-mutilation, suicidal impulses, heart palpitations, appetite loss and weight loss, and lower levels of brain function, including a decline in EEG activity.

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(3) Solitary confinement undermines prisoner reentry and public safety.

- Studies show that prisoners who are released from segregation directly to the community reoffend at higher rates than general-population prisoners.
- Although there is no compelling evidence that solitary confinement “works,” in general or for any particular type of inmate, alternative approaches to handling violent prisoners are proven to both reduce levels of institutional aggression and decrease recidivism among such prisoners upon release.

Aside from the overwhelming weight of research demonstrating the dangers and ineffectiveness of solitary confinement, there is the issue of fiscal responsibility. The cost of confining prisoners in segregation is astronomical. Supermax cells cost on average 50% more than general population cells. In Illinois, it costs \$92,000 per year to hold an inmate in solitary confinement at Illinois’s Tamms Correctional Center. That figure is two to three times higher than the cost of keeping an inmate at the state’s other maximum-security prisons.

The solitary confinement practices of the US detention system are far below the basic minimum standards for treatment of prisoners under international law. Adopted by the United Nations, the Standard Minimum Rules for the Treatment of Prisoners (“Standard Rules”), recognize solitary confinement and prolonged segregation as appropriate only in exceptional circumstances, to be used sparingly. In an October 2011 report by the UN’s special rapporteur on torture and other cruel, inhuman or degrading treatment or punishment, Juan E. Méndez urged all countries to ban the solitary confinement of prisoners except in very exceptional circumstances. UN rapporteur Méndez also called on the international community to agree to impose an absolute prohibition on solitary confinement exceeding 15 consecutive days because 15 days is the point at which solitary confinement becomes prolonged, as a practical matter and as a conservative assessment of when, based on his survey of medical research, the harm suffered by individuals held in solitary confinement constitutes torture or cruel, inhuman, or degrading treatment or punishment.

Once again, the NACDL would like to thank you for presiding over a much needed hearing on solitary confinement. After hearing from the witnesses, NACDL strongly encourages you to consider Congress’ potential role in limiting the use of solitary confinement in state, local and federal detention facilities.¹ We look forward to working with you on this important issue.

Sincerely,



Lisa Monet Wayne
President

cc: Members of the Senate Judiciary Committee

¹ It is our understanding that at the federal level, the use of pure solitary confinement (one man, one cell) is less common than placement in Special Housing Units (SHUs), defined by the BOP as “housing units in Bureau institutions where inmates are securely separated from the general inmate population, and may be housed either alone *or with other inmates*.” SHU conditions raise many (if not all) of the same concerns as pure solitary confinement, and the BOP’s reliance on these units warrants scrutiny during the hearing.