



National Association of Social Workers

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To: Senate Judiciary Committee
Re: In Support of H - 7481

I am writing in support of H - 7481. I apologize to the Committee for not being here in person tonight to testifying for this very important hearing. I am an Adjunct Professor at Rhode Island School of Social Work and am teaching tonight.

In my long professional career, I have worked with many youth and adult individuals who had been currently or formerly incarcerated at the time of service. Most of these individuals also had significant substance abuse and/or mental health issues, which complicated successful integration in the community. However, most did succeed in meeting their individual living, employment, and/or family goals by utilizing a combination of clinical and rehabilitation services.

I. Professional Experience

During my work with theses individuals, many service approaches were utilized. However, there was one common denominator in regards to consequences that made sense to the controller, recipient and constituents in their controlled living environments. Each consequence had to have three affirmative factors whenever possible. Before a consequence was applied, three affirmative answers had to be committed to:

1. The consequence had to have a direct relationship to the infraction.
2. The consequence had to have a reasonable chance to positively impact on the behavior that was related to the infraction. The consequence had to be respectfully and safely applied. (The consequence could not be harmful to the individual.)
3. The consequence had to be able to be carried out by the system without breaking any rules or protocols of the institution.

In this manner, those involved: the recipient, the controller, advocates, fellow participants etc. could witness the benefits of the system.

II: Systems & Values

There is no doubt that there are circumstances in which Solitary Confinement is necessary to provide safety for an individual or other inmates. However, it is also true, in my opinion, that the method should not be applied when it is not effective or used as punitive punishment.

Any possible potential benefits in these situations, are far outweighed by the negative consequences on the individual in relation to their mental health and health conditions. We have learned a lot of the effects of solitary confinement and lack of human contact has on individuals who were prisoners of war, hostages, victims of domestic violence and victims of child abuse.

The Federal Bureau of Prisons (FBO) and the United States Department of Justice has been working diligently the past several years to reduce the use of Solitary Confinement as demonstrated the excerpt from the following recommendations:

(Please note, although in my opinion I agree with many of these recommendation, some of them I think can go even further and could use additional study to determine alterative effective strategies. I am certainly not an expert within the confines of prison walls and would not want to promote any ideas that would adversely affect the safety of correctional officers or inmates. However, but I am an expert regarding human behavior and motivational humane techniques for change, regardless of criminal background or personality composition, with just a few exceptions.)

FEDERAL BUREAU OF PRISONS (<https://www.justice.gov/restrictivehousing>)

The Report recommends that the Bureau:

End the practice of placing juveniles in restrictive housing, pursuant to the standards proposed in the Sentencing Reform and Corrections Act of 2015. [pp. 61-62 (b); 114 (p)]

Expand the Bureau's ability to divert inmates with serious mental illness to mental health treatment programs, by increasing the capacity of existing secure mental health units and requesting funding for substantial expansion in future years.[pp. 46-57 (b); 112-14 (p)]

Expand the Bureau's ability to divert "protective custody" inmates to less restrictive forms of housing, by building "Reintegration Housing Units" (RHU) at multiple Bureau locations.[pp. 23-25 (b); 110-11 (p)]

Significantly limit the use of restrictive housing as a form of punishment. Recommended changes include: across-the-board reductions of maximum penalties for disciplinary segregation (as noted in the chart below); an outright ban on the use of restrictive housing for low-level offenses; and limitations on the use of pre-adjudication "investigative" segregation,

including a new requirement that routine investigations be completed within 7 days and all other investigations be completed within 30 days, absent compelling circumstances.[pp. 18-23 (b); 107-110 (p)]

Establish policies to discourage the placement of inmates in restrictive housing during the final 180 days of their prison terms, and to provide targeted re-entry programming for inmates who require restrictive housing during that time.[pp. 106-07 (p)]

Offense Type	Current Maximum Penalties		Proposed Maximum Penalties	
	First Offense	Subsequent Offenses	First Offense	Subsequent Offenses
100-Level (Greatest)	365 days	545 days	60 days	90 days
200-Level (High)	180 days	365 days	30 days	60 days
300-Level (Moderate)	90 days	180 days	none	15 days
400-Level (Low)	none	30 days	none	none

Enhance transparency by publishing system-wide restrictive housing statistics on a monthly basis on the Bureau's public website, and finalize upgrades in data collection software to improve tracking of restrictive housing inmates.[pp. 31-33 (b); 116-17 (p)]

Codify in Bureau policy documents the presumption that inmates should be housed in the least restrictive setting necessary to ensure safety, and that inmates in restrictive housing should be returned to general population as soon as it is safe to do so.[pp. 105-06 (p)]

I do not know the scope of the use of Solitary Confinement in Rhode Island. I am not sure if there has been studies done on the use of Solitary Confinement in Rhode Island. If not, I would recommend an academic study to be done of this nature looking at:

1. Frequency
2. Duration
3. Cause
4. Reason
5. Effectiveness
6. Demographics of Inmates in Solitary Confinement

I would further recommend an analysis of data within the study.

III. Research

1. Nationally, there is a significant amount of data from several sources. Solitary Watch reports that juveniles placed in adult jails are **36** more times likely to commit suicide and **19** times more likely to kill themselves when placed in isolation.
2. The Bureau of Justice Studies indicate that there are significant persons who enter the prison systems with pre-existing mental illness.
3. A 2006 report entitled: *Psychiatric Effects of Solitary Confinement* concludes that restricting inmates from normal social interaction can produce conditions such as impairments in perception and cognition as well as disturbances in affect. There many other articles such as these articles available for review.
4. **Perhaps the most significant study done to date is the following 2014 study published in the American Journal of Public Health** entitled: *Solitary Alignment and Risk of Self Harm Among Jailed Inmates*. This study analyzed medical records of more than **134,000** prisoners with a combined total of **245,000** incarcerations. Among their findings was solitary confinement was strongly associated with increased risk of self-harm. Other significant findings include:
 - **Inmates who had been assigned to solitary confinement were 3.2 times more likely to commit an act of self-harm per 100,000 days during their incarceration as those never assigned to solitary confinement.**
 - **Inmates assigned to solitary confinement were 2.1 times more likely to commit acts of self-harm during the days that they were actually in solitary confinement and 6.6 times mores likely to commit acts of self-harm during the days that they were not in solitary confinement, relative to inmates never assigned to solitary confinement.**
 - **After controlling for length of jail stay; serious mental health issues; age and race, the researchers determined that prisoners punished by solitary confinement were approximately 6.9 times more likely to commit acts of self-harm.**

The above research mirrors my many years of professional experience. There is a lot more research out there that raises serious questions about the use of solitary confinement and should raise questions whether this is the best form of control to be used. I have just mentioned a few of my professional concerns. I would like to end by stressing to this Committee the need to closely examine why this bill is so important. Thank you.

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If you have any questions, please feel free to contact me by phone at 401-274-4940 or via e-mail at: rhodeislandnasw@gmail.com

Respectfully Submitted,

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