

THE SOLITARY CONFINEMENT OF KENTUCKIANS WITH MENTAL ILLNESS

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KENTUCKY PROTECTION & ADVOCACY

- **KENTUCKY'S DESIGNATED P&A SYSTEM**
- **LEGALLY-BASED ADVOCACY SERVICES TO KENTUCKIANS WITH DISABILITIES, INCLUDING INDIVIDUALS WITH MENTAL ILLNESS**
- **FEDERAL ACCESS AUTHORITY, WHICH INCLUDES MONITORING STATE PRISONS AND JAILS**

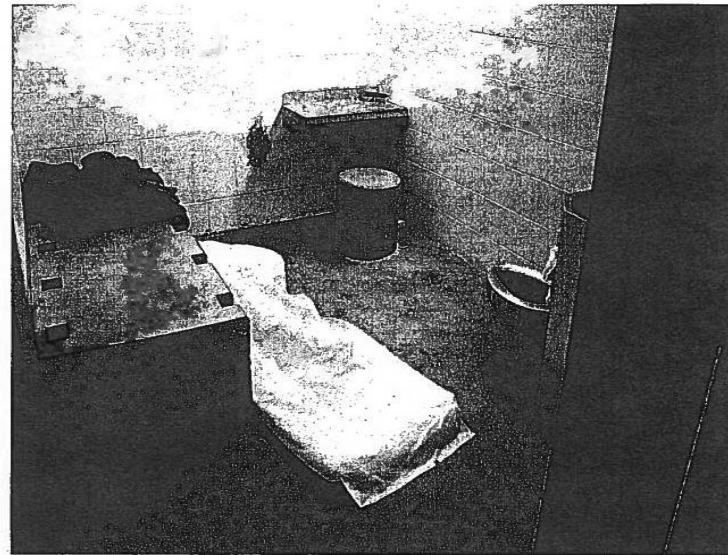
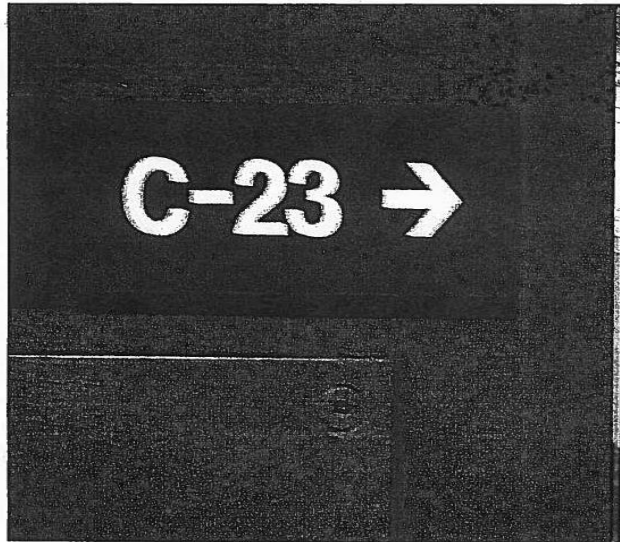
P&A'S WORK WITH THE DOC

- **CONSULTED WITH AN EXPERT ON PRISON SEGREGATION POLICIES**
- **CONDUCTED FIVE DEATH INVESTIGATIONS**
- **MONITORED AND TOURED SOLITARY CONFINEMENT UNITS AT EACH OF KENTUCKY'S STATE PRISONS**
- **INTERVIEWED MANY MENTALLY ILL INMATES HOUSED IN SOLITARY CONFINEMENT UNITS**
- **ONGOING CONVERSATIONS WITH THE DEPARTMENT OF CORRECTIONS**

WHAT IS SOLITARY CONFINEMENT?

- **SOLITARY CONFINEMENT IS THE PRACTICE OF ISOLATING PEOPLE IN CLOSED CELLS FOR 22-24 HOURS A DAY, VIRTUALLY FREE OF HUMAN CONTACT, FOR PERIODS OF TIME RANGING FROM DAYS TO DECADES.**
- **AKA ISOLATION, SPECIAL MANAGEMENT, RESTRICTIVE HOUSING, SEGREGATION, THE BOX, THE HOLE.**

RESTRICTIVE HOUSING UNIT AT KSR



CONDITIONS OF SOLITARY CONFINEMENT

- **HUMAN INTERACTIONS ARE LIMITED**
- **MOST INTERACTIONS OCCUR WITH STAFF THROUGH THE SMALL GLASS WINDOW ON THE STEEL DOOR OR THROUGH THE TRAY SLOT**
- **INMATES RARELY LEAVE THEIR CELL TO MEET WITH CASE WORKERS, PSYCHIATRISTS, OR NURSES**
- **INMATES RECEIVE ONE HOUR OF RECREATION A DAY IF NOT ON WATCH**
- **RECREATION IS ONLY MONDAY-FRIDAY, NO REC ON SATURDAYS, SUNDAYS, OR HOLIDAYS**

REASONS INMATES ARE HELD IN SOLITARY

CORRECTIONS POLICIES AND PROCEDURES

10.2

- **ADMINISTRATIVE SEGREGATION**
- **TEMPORARY HOLDING**
- **DISCIPLINARY SEGREGATION**
- **PROTECTIVE CUSTODY**
- **ADMINISTRATIVE CONTROL**
- **DEATH ROW**

- **TODAY THERE ARE OVER 100,000 INDIVIDUALS NATIONWIDE IN SOLITARY CONFINEMENT.**
- **ON AVERAGE, RESEARCHERS SAY THAT AT LEAST 30% OF PRISONERS HELD IN SOLITARY CONFINEMENT SUFFER FROM MENTAL ILLNESS.**
- **IN A 2016 SURVEY CONDUCTED BY YALE LAW SCHOOL, KENTUCKY PRISON OFFICIALS REPORTED THAT OF THE 362 MALE INMATES IN SOLITARY CONFINEMENT, 98 WERE SERIOUSLY MENTALLY ILL.**

FARMER V. BRENNAN 511 U.S. 825

- **UNDER 8TH AMENDMENT, PRISON OFFICIALS MAY NOT USE EXCESSIVE PHYSICAL FORCE AGAINST PRISONERS AND ARE REQUIRED TO PROVIDE HUMANE CONDITIONS OF CONFINEMENT.**
- **OFFICIALS MUST NOT ACT WITH DELIBERATE INDIFFERENCE TO A SUBSTANTIAL RISK OF SERIOUS HARM.**

TYPICAL EFFECTS OF SOLITARY CONFINEMENT “SHU” SYNDROME

- **VISUAL AND AUDITORY HALLUCINATIONS**
- **HYPERSENSITIVITY TO NOISE AND TOUCH**
- **INSOMNIA AND PARANOIA**
- **UNCONTROLLABLE FEELINGS OF RAGE AND FEAR**
- **DISTORTIONS OF TIME AND PERCEPTION**
- **INCREASED RISK OF SUICIDE**
- **POST-TRAUMATIC STRESS DISORDER (PTSD)**

DECOMPENSATION

- **DECOMPENSATION IS A TERM USED BY PSYCHIATRIST AND PSYCHOLOGISTS TO DESCRIBE THE INABILITY OF A PERSON WITH MENTAL ILLNESS TO MAINTAIN NORMAL OR APPROPRIATE PSYCHOLOGICAL DEFENSES WHEN FACED WITH STRESS.**
- **THIS SOMETIMES RESULTS IN DEPRESSION, ANXIETY OR DELUSIONS.**
- **CAN CAUSE WORSENING OF SYMPTOMS.**

SUICIDE

- **HALF OF SUCCESSFUL SUICIDES IN PRISON HAPPEN IN SOLITARY DESPITE ONLY 3 TO 6 PERCENT OF ALL PRISONERS BEING HELD IN ISOLATION.**

SELF-MUTILATION

- **SELF-MUTILATION, A FORM OF CUTTING, IS COMMON PRACTICE IN SOLITARY CONFINEMENT**
- **PRISONERS IN SOLITARY HAVE BEEN KNOWN TO BITE INTO THEIR OWN VEINS AND CUT OFF THEIR FINGERS AND TESTICLES.**

ESTELLE V. GAMBLE, 429 U.S. 97 (1976)

- **THE DUTY TO PROVIDE HUMANE CONDITIONS OF CONFINEMENT INCLUDES THE OBLIGATION TO ENSURE THAT INMATES RECEIVE ADEQUATE MEDICAL CARE.**

OBSERVATIONS

- **REGULARLY ASSIGN PRISONERS WITH SMI TO SEGREGATION FOR CONDUCT THAT MAY BE CAUSED BY MENTAL ILLNESS.**
- **SOME MI INMATES HAVE SPENT YEARS IN SEGREGATED HOUSING BECAUSE THEY ACT OUT ONCE PLACED THERE.**
- **NO BOOKS OR TELEVISION, LITTLE OUTSIDE CELL TIME.**
- **INADEQUATE MEDICAL TREATMENT- TYPICALLY MEET WITH PSYCHOLOGIST A COUPLE OF TIMES A WEEK FOR A FEW MINUTES PER WEEK THROUGH THE FOOD SLOT. INMATES MEET WITH PSYCHIATRIST ONCE A MONTH VIA TELEVISION MONITOR. INMATES ARE NOT ALLOWED GROUP THERAPY SESSIONS. INMATES TYPICALLY RUN OUT OF PSYCHOTROPIC MEDICATIONS**
- **MANY INMATES RESORT TO SELF-MUTILATION AND SUICIDE ATTEMPTS. SWALLOW DANGEROUS OBJECTS. HAVE DELUSIONAL CONVERSATIONS WITH VOICES IN THEIR HEADS. SPREAD FECES AND HUMAN WASTE.**
- **SOME GUARDS WE HAVE SPOKEN TO ADMIT THEY ARE INADEQUATELY TRAINED TO DEAL WITH PERSONS WITH SMI**

PROFESSIONAL ORGANIZATIONS

- **ORGANIZATIONS INCLUDING THE AMERICAN PSYCHIATRIC ASSOCIATION, MENTAL HEALTH AMERICA, THE AMERICAN PUBLIC HEALTH ASSOCIATION, THE NATIONAL ALLIANCE ON MENTAL ILLNESS, AND THE SOCIETY OF CORRECTIONAL PHYSICIANS HAVE ALL ISSUED FORMAL POLICY STATEMENTS OPPOSING SOLITARY CONFINEMENT FOR PRISONERS WITH MENTAL ILLNESS.**

FEDERAL COURTS

- **TO DATE, FEDERAL COURTS HAVE MOSTLY REJECTED THE ARGUMENT THAT PLACEMENT IN SOLITARY CONFINEMENT AS A PUNITIVE SANCTION IS UNCONSTITUTIONAL, BUT THEY HAVE CONSISTENTLY RULED THAT PLACING PEOPLE WITH SMI IN SOLITARY CONFINEMENT IS CRUEL AND UNUSUAL PUNISHMENT, A CONSTITUTIONAL VIOLATION.**

REFORMS

ARIZONA

- **SETTLEMENT AGREEMENT WITH ACLU PROVIDES MENTALLY ILL PRISONERS WITH MORE ACCESS TO MENTAL HEALTH TREATMENT AND MORE TIME OUTSIDE THEIR CELLS.**

ALABAMA

- **FEDERAL COURT HELD THAT CARE PROVIDED TO MENTALLY ILL VIOLATED CONST. OBLIGATION NOT TO BE DELIBERATELY INDIFFERENT TO THE “SERIOUS MEDICAL NEEDS OF PRISONERS”.**
- **ALSO HELD THAT PRACTICE OF PLACING PRISONERS WITH SMI IN SEG. W/O EXTENUATING CIRCUMSTANCES AND FOR A PROLONGED PERIOD OF TIME VIOLATES THE 8TH AMENDMENT.**

COLORADO

- **LEGISLATION BANS THE SOLITARY CONFINEMENT OF THE MENTALLY ILL.**

INDIANA

- **FEDERAL COURT FOUND THAT PLACING MENTALLY ILL INMATES IN ISOLATION VIOLATES 8TH AMENDMENT. (INDIANA PROTECTION AND ADVOCACY SERVICES COM'N V. COMMISSIONER, INDIANA DEPT. OF CORRECTION, 2012 WL 6738517.)**

MASSACHUSETTS

- **RESPONDING TO LITIGATION THAT WAS SETTLED IN 2012, THE MASSACHUSETTS DEPARTMENT OF CORRECTION REWROTE ITS MENTAL HEALTH CARE POLICIES TO EXCLUDE PRISONERS WITH MENTAL ILLNESS FROM LONG-TERM SEGREGATION AND DESIGNED TWO MAXIMUM SECURITY MENTAL HEALTH TREATMENT UNITS TO DIVERT PEOPLE OUT OF SEGREGATED HOUSING.**

NEW YORK

- **IN 2007, A NEW YORK STATE SOLITARY CONFINEMENT LAW WAS PASSED; THE LAW EXCLUDES PRISONERS WITH MENTAL ILLNESS FROM SOLITARY CONFINEMENT IN STATE PRISON, REQUIRES MENTAL HEALTH MONITORING OF ALL PRISONERS IN DISCIPLINARY SEGREGATION, AND CREATES A NON-DISCIPLINARY UNITY FOR PRISONERS WITH PSYCHIATRIC DISABILITIES WHERE A THERAPEUTIC MILIEU IS MAINTAINED AND PRISONERS ARE SUBJECT TO THE LEAST RESTRICTIVE ENVIRONMENT CONSISTENT WITH THEIR NEEDS AND MENTAL STATUS**

SOUTH CAROLINA

- **DOC RECENTLY AGREED TO SETTLEMENT AGREEMENT WHICH INCLUDES DEVELOPING A COMPREHENSIVE MENTAL HEALTH TREATMENT PROGRAM THAT PROHIBITS THE INAPPROPRIATE SEGREGATION OF INMATES WITH SMI**

RECENT REFORMS IN KY

CPP 10.2 II. A. 1.

AN INMATE DIAGNOSED WITH A SERIOUS MENTAL ILLNESS, AS DEFINED IN CPP 13.13, SHALL NOT BE PLACED IN SPECIAL MANAGEMENT HOUSING, A RESTRICTIVE HOUSING UNIT, OR AN EXTENDED RESTRICTIVE HOUSING UNIT, UNLESS THE MULTIDISCIPLINARY SERVICE TEAM FOR THE INSTITUTION DETERMINES THERE IS AN IMMEDIATE AND PRESENT DANGER TO OTHERS OR THE SAFETY OF THE INSTITUTION

DISCIPLINARY SEGREGATION

- **INTERFERING WITH AN EMPLOYEE IN THE PERFORMANCE OF HIS DUTIES. REFUSING TO OBEY AN ORDER. CUTTING LINE. LYING.**

ADMINISTRATIVE CONTROL

- **A DEMONSTRATED INABILITY OR UNWILLINGNESS TO ADJUST TO HOUSING OR WORK ASSIGNMENT. POSSESSION OF CONTRABAND. REPEATED VIOLATIONS OF INSTITUTIONAL RULES OR POLICIES AND PROCEDURES. REPEATED SUBSTANCE ABUSE.**

PROPOSED REFORMS

- **PRISONERS WITH MENTAL ILLNESS OR ID/DD SHOULD BE CATEGORICALLY EXCLUDED FROM SOLITARY CONFINEMENT.**
- **PRISONERS WITH MENTAL ILLNESS MAY BE SEPARATED FROM OTHER PRISONERS IF THEY POSE AN IMMEDIATE THREAT TO THE PHYSICAL SAFETY OF THEMSELVES OR OTHERS, BUT SHALL BE IMMEDIATELY RELEASED FROM ISOLATED CONDITIONS WHEN THE THREAT ABATES.**
- **IF THE IMMEDIATE THREAT RESULTS IN PROLONGED ISOLATION, THE INMATE SHALL BE MOVED TO A MENTAL HEALTH UNIT WITHIN THE PRISON OR, IF THE PRISON DOES NOT HAVE A MENTAL HEALTH UNIT, THE PRISONER SHALL BE TRANSFERRED TO A PRISON WITH A MENTAL HEALTH UNIT.**
- **GATHER AND MAINTAIN ACCURATE DATA REGARDING THE NUMBER PRISONERS WITH SERIOUS MENTAL ILLNESS HOUSED IN SOLITARY UNITS**
- **GATHER AND MAINTAIN ACCURATE DATA REGARDING THE NUMBER OF INMATES IN SOLITARY UNITS WHO COMMIT ACTS OF SUICIDE AND SELF-HARM**

ALTERNATIVES TO SOLITARY CONFINEMENT

- **DE-ESCALATION ROOMS**
- **LOSS OF PRIVILEGES**
- **LOSS OF GOOD TIME**
- **RESTRICTED PRIVILEGES DORM**
- **EXTRA DUTY**
- **FORFEIT “GOOD TIME”**

KENTUCKY PROTECTION & ADVOCACY

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