



# TIME-IN-CELL 2019: A SNAPSHOT OF RESTRICTIVE HOUSING

Based on a Nationwide Survey of U.S. Prison Systems

CORRECTIONAL LEADERS ASSOCIATION

ARTHUR LIMAN CENTER
FOR PUBLIC INTEREST LAW
AT YALE LAW SCHOOL

# Time-In-Cell 2019: A Snapshot of Restrictive Housing based on a Nationwide Survey of U.S. Prison Systems

The Correctional Leaders Association & The Arthur Liman Center for Public Interest Law at Yale Law School

September 2020

## **Correctional Leaders Association (CLA)**

CLA, formerly the Association of State Correctional Administrators (ASCA), founded in the 1980s and is comprised of the directors of correction systems throughout the United States. CLA members lead over 400,000 correctional professionals and supervise approximately eight prisoners, million probationers, and parolees. CLA's mission is to "promote the profession of corrections, support CLA members, and influence policy and practices that affect public safety."

# The Arthur Liman Center for Public Interest Law at Yale Law School

The Liman Center was endowed in 1997 to honor one of Yale Law School's most accomplished graduates, Arthur Liman. Throughout his distinguished career, he demonstrated how dedicated lawyers, in both private practice and public life, can respond to the needs of individuals and causes that might otherwise go unrepresented. The Liman Center continues the commitments of Arthur Liman by supporting work, in and outside the academy, dedicated to public service in the furtherance of justice.

## Acknowledgements

This report is based on a survey co-authored by CLA and the Liman Center at Yale Law School. The research and report teams were led at CLA by Restrictive Housing Working Group members Leann Bertsch, Wayne Choinski, Kevin Kempf, John Baldwin, Harold Clarke, Bob Lampert, Rick Raemisch, Stephen Sinclair, and Dean Williams, and at Yale by Professor Judith Resnik; Anna VanCleave, Director of the Liman Center; and by Alexandra Harrington, Zal Shroff, Jonathan Petkun, and Brian Highsmith, all of whom are Senior Liman Fellows in Residence. Atticus Ballesteros, Jaster Francis, Eli Feasley, Molly Petchenik, Jaclyn Willner, and Arianna Zoghi, current and former students at Yale Law School, played major roles in the research, analysis, and drafting of this report.

Thanks are due to all the jurisdictions that responded to the survey and provided additional information, comments, and reviews thereafter. The authors appreciate the contributions of the Vera Institute of Justice for data collection about

people in jails and prisons, and for input on the issues relevant to this report. This research has been supported by Yale Law School, the Vital Projects Fund, and the Oscar M. Ruebhausen Fund at Yale Law School, and Professor Resnik's work on this project has also been enabled by the award of an Andrew Carnegie Fellowship. The analyses are not to be attributed to these institutions. Special thanks are due to to Elizabeth Keane, Program Coorinator of the Liman Center for assistance in gathering materials; and to Bonnie Posick of Yale Law School's staff for expert editorial advice.

The series of CLA-Liman reports began under the leadership of George and Camille Camp, and in this and other collaborative projects, we honor Camille Camp and mark George Camp's legacy.

To download copies of this Report, please visit the Liman Center website at <a href="https://law.yale.edu/liman/solitary2020">https://law.yale.edu/liman/solitary2020</a>, or the CLA website at <a href="https://cl.memberclicks.net/cla-liman-rh-report">https://cl.memberclicks.net/cla-liman-rh-report</a>. This Report may be reproduced free of charge and without the need for additional permission. All rights reserved, 2020.

## **Inquiries:**

Leann Bertsch Restrictive Housing Committee Chair, CLA Former Director, North Dakota DOCR Leann.Bertsch@mtctrains.com

Kevin Kempf Executive Director, CLA kkempfCLA@gmail.com

Wayne Choinski Project Manager, CLA wchoinskicla@gmail.com

Judith Resnik Arthur Liman Professor of Law Yale Law School judith.resnik@yale.edu

Anna VanCleave Liman Center Director Yale Law School anna.vancleave@yale.edu

# Time-In-Cell 2019: A Snapshot of Restrictive Housing based on a Nationwide Survey of U.S. Prison Systems

# **Table of Contents**

I.	THE BACKDROP: ONGOING RESEARCH ON RESTRICTIVE HOUSING	1
	Understanding Restrictive Housing Over Time and Across Jurisdictions	1
	The 2019–2020 Survey Design	3
	Research Challenges and Caveats	4
	Preview of the 2019 Survey Results	4
II.	DATA ON RESTRICTIVE HOUSING FROM	
	THE 2019 CLA-LIMAN SURVEY	6
	The Numbers and Percentages of Prisoners in Restrictive Housing:	
	Counting and Comparing General and Restrictive Populations	6
	Length of Time in Restrictive Housing	11
	The Demographics of Restrictive Housing	18
	Sex / Gender	18
	Race and Ethnicity	23
	Age	35
	Subpopulations	46
	Prisoners with Mental Health Issues	46
	Pregnant Prisoners	58
	Transgender Prisoners	58
III.	DIMENSIONS OF LIVING IN RESTRICTIVE HOUSING:	
	A 2019 SNAPSHOT	59
	Criteria for Placement in Restrictive Housing	59
	Authority to Make Initial Decisions to Place an Individual	
	in Restrictive Housing and to Review such Decisions	59
	Duration of Confinement and Recurring Review	62
	Policies for Subpopulations	63
	Age-Based Subpopulations	64
	Prisoners with Special Medical Needs	64
	Women in Prison	64
	LGBTI Prisoners	65
	Prisoners with Mental Health Needs	66

	Exiting Restrictive Housing: Step-Down Programming, Release	
	to General Population, and Leaving Prison for the Community	67
	Behavior as a Means of Reducing Time in Restrictive Housing	67
	Education on Handling Transitions	67
	Transitions Out of Restrictive Housing	68
	Living in Restrictive Housing: Activities, Programs, and Sociability	
	Outside and Inside Cells	69
	Aspiring for More Time Out-of-Cell	72
	Inside the Cells	72
	Sociability	73
	Prison Staff: Qualifications, Training, Schedules, and Paying	
	for Restrictive Housing Duty	74
	Implementing the 2016 ACA Restrictive Housing	
	Performance Based Standards	76
	Evaluating the Effects of Policy Changes	77
IV.	REDUCING RELIANCE ON RESTRICTIVE HOUSING: THE 2018-2020 LANDSCAPE	79
	THE 2016-2020 LANDSCAPE	19
	Legislative Regulation	80
	In the Courts	83
	Restrictive Housing as a Global Concern	85
V.	COMPARING THE NUMBERS OF PEOPLE IN RESTRICTIVE	
	HOUSING IN 2015, 2017, AND 2019	89
Endn	notes	103
Appe	endices	
	Appendix A: CLA-Liman 2019 Restrictive Housing Survey	
	Appendix B: Total Prison Populations for Responding	
	and Non-Responding Jurisdictions	

Appendix C: Definitions of "Serious Mental Illness" by Jurisdiction

Appendix D: How Prisoners are Identified as Transgender by Jurisdiction

# **Tables and Figures**

Ta	bles	

Table 1	Numbers and Percentages of Prisoners in Restrictive Housing (RH) by Jurisdiction	9
Table 2	Numbers of People/Length of Time in Restrictive Housing by Jurisdiction	12
Table 3	Distribution of Time Spent in Restrictive Housing by Jurisdiction	13
Table 4	Year When Regular Tracking of Length of Time in Restrictive Housing Began by Jurisdiction	14
Table 5	Male Prisoners Held in Conditions Short of Restrictive Housing by Jurisdiction	16
Table 6	Female Prisoners Held in Conditions Short of Restrictive Housing By Jurisdiction	17
Table 7	Numbers and Percentages of Male Custodial Population in Restrictive Housing	20
Table 8	Numbers and Percentages of Female Custodial Population in Restrictive Housing	22
Table 9	Numbers of Jurisdictions Reporting on Racial or Ethnic Groups	24
Table 10	Race/Ethnicity of Male Prisoners in Restrictive Housing	28
Table 11	Race/Ethnicity of Male Total Custodial and Restrictive Housing Populations	29
Table 12	Race/Ethnicity of Male Total Custodial and Restrictive Housing Population by Percentage	ns <b>30</b>
Table 13	Race/Ethnicity of Female Total Custodial and Restrictive Housing Populations	32
Table 14	Race/Ethnicity of Female Total Custodial and Restrictive Housing Populations by Percentage	33
Table 15	Race/Ethnicity of Female Prisoners in Restrictive Housing	35

Table 16	Male Total Custodial and Restrictive Housing Populations by Age	38
Table 17	Percentage of Male Total Custodial and Restrictive Housing Populations by Age	40
Table 18	Female Total Custodial and Restrictive Housing Populations by Age	42
Table 19	Percentage of Female Total Custodial and Restrictive Housing Populations by Age	44
Table 20	Male Prisoners with Serious Mental Illness (SMI, variously defined) in Restrictive Housing by Jurisdiction	48
Table 21	Female Prisoners with Serious Mental Illness (SMI, variously defined) in Restrictive Housing by Jurisdiction	49
Table 22	Male Prisoners with Serious Mental Illness by Race and Ethnicity in the Total Custodial and Restrictive Housing Populations	51
Table 23	Female Prisoners with Serious Mental Illness by Race and Ethnicity in the Total Custodial and Restrictive Housing Populations	53
Table 24	Male Prisoners with Serious Mental Illness by Age in the Total Custodial and Restrictive Housing Populations	55
Table 25	Female Prisoners with Serious Mental Illness by Age in the Total Custodial and Restrictive Housing Populations	57
Table 26	Jurisdiction-by-Jurisdiction Comparisons of Restrictive Housing (RH) Populations in 2015, 2017, and 2019	91
Table 27	Comparing the Numbers of Prisoners in Restrictive Housing by Length of Time in 2015, 2017, and 2019	100
Table 28	Comparing the Distribution of Prisoners in Restrictive Housing by Length of Time in 2015, 2017, and 2019	101
Table 29	Comparing Restrictive Housing Numbers from 2014 to 2020	102

T	, .	
$ \mu$	100111100	a
,	ıgures	٠
-	V C.	•

Figure 1	Percentage of Prisoners in Restrictive Housing Ordered by Jurisdiction	8
Figure 2	Percentage of Prisoners in Restrictive Housing Ordered by Percentage	9
Figure 3	Prisoners in Restrictive Housing by Length of Time	12
Figure 4	Prisoners in Restrictive Housing by Gender	18
Figure 5	Percentage of Male Prisoners in Restrictive Housing Ordered by Jurisdiction	19
Figure 6	Percentage of Male Prisoners in Restrictive Housing Ordered by Percentage	19
Figure 7	Percentage of Female Prisoners in Restrictive Housing Ordered by Jurisdiction	21
Figure 8	Percentage of Female Prisoners in Restrictive Housing Ordered by Percentage	22
Figure 9	Race/Ethnicity of Male Prisoners in Total Custodial Population and in Restrictive Housing Population	24
Figure 10	Race/Ethnicity of Female Prisoners in Total Custodial Population and in Restrictive Housing Population	25
Figure 11	Difference in Restrictive Housing and Total Male Custodial Population for Black Male Prisoners	27
Figure 12	Difference in Restrictive Housing and Total Male Custodial Population for Hispanic or Latino Prisoners	27
Figure 13	Male Prisoners in Restrictive Housing and Total Custodial Populations by Age	37
Figure 14	Female Prisoners in Restrictive Housing and Total Custodial Populations by Age	37
Figure 15	Dimensions of Living in Restrictive Housing	70
Figure 16	Jurisdiction-by-Jurisdiction Comparison of Prisoners in Restrictive Housing Populations in 2015 and 2017	93
Figure 17	Jurisdiction-by-Jurisdiction Comparison of Prisoners in Restrictive Housing Populations in 2017 and 2019	; 94

Figure 18	Jurisdiction-by-Jurisdiction Comparison of Prisoners in Restrictive Housing Populations in 2015 and 2019	95
Figure 19	Jurisdiction-by-Jurisdiction Comparison of the Rate of Change in Percentage of Prisoners in Restrictive Housing Populations from 2015 to 2017	96
Figure 20	Jurisdiction-by-Jurisdiction Comparison of the Rate of Change in Percentage of Prisoners in Restrictive Housing Populations from 2017 to 2019	97
Figure 21	Jurisdiction-by-Jurisdiction Comparison of the Rate of Change in Percentage of Prisoners in Restrictive Housing Populations from 2015 to 2019	98
Figure 22	Comparing the Distribution of Prisoners in Restrictive Housing by Length of Time in 2015, 2017, and 2019	02

# I. The Backdrop: Ongoing Research on Restrictive Housing

This report provides a picture based on 2019 data from thirty-nine jurisdictions about the use of restrictive housing. For this analysis, we defined restrictive housing as holding individuals in a cell for an average of twenty-two hours or more a day for fifteen days or more. Through a nation-wide survey, we have gathered data enabling an understanding of the number of individuals held in solitary confinement, their demographic makeup, the duration of time that they spent in solitary confinement, and aspects of the rules governing that confinement.

The collection of this information is a joint undertaking of the Liman Center at Yale Law School and the Correctional Leaders Association (CLA), formerly the Association of State Correctional Administrators (ASCA). Since 2012, the Liman Center and CLA have worked together on a variety of projects, several of which relate to restrictive housing.

Through a series of nation-wide surveys, we are able to provide longitudinal data since 2014 on the role restrictive housing plays in prison systems around the country. Once a regular tool of discipline, solitary confinement has become a matter of grave concern. As this volume details, four jurisdictions have reported that they were no longer placing people in cells twenty-two hours or more a day for fifteen days or more. Those decisions, along with the policy reforms of many other correctional departments, legislative regulation in more than two dozen states and the federal system, and judicial rulings all underscore the need to reduce or to end the practice of holding individuals inside small cells for almost all hours of a day for weeks, months, or years. As a result, in several jurisdictions, restrictive housing no longer looks as it did a few years ago.

This report was written in the spring and summer of 2020, as the world changed dramatically because of COVID-19. The data in this volume predates COVID-19, which has had a profound impact on congregate living spaces, prisons included. The call for social distancing has required radical reconfigurations of practices in all aspects of daily life. Given the special challenges faced by people in confinement, public health experts rapidly provided guidance on how and when to quarantine inside detention facilities in a manner that is humane, medically sound, and does not return people to conditions associated with restrictive housing, which is the focus of this report.<sup>1</sup>

## **Understanding Restrictive Housing Over Time and Across Jurisdictions**

During the past several years, CLA and the Liman Center at Yale Law School have collaborated on many projects aiming to gain insights into aspects of the interactions among prisoners, correctional agencies, communities, and courts. Together, we have hosted workshops, presented at conferences,<sup>2</sup> undertaken research, and produced widely-read reports. Our research has included surveys sent to correctional agencies across the fifty states. The topics of past studies include policies for visiting people who are incarcerated, rules governing administrative segregation, and the use of restrictive housing.<sup>3</sup>

Several CLA-Liman reports focus on the use of restrictive housing in prisons across the United States. The CLA-Liman national surveys have been conducted biennially since 2014. For these studies, CLA and the Liman Center reach out to each of the correctional agencies in the fifty

states, the Federal Bureau of Prisons, and in some years to a few jail systems; we ask for responses to questions about their policies and populations. Given the variety of situations and the varied nomenclature, we have defined the term "restrictive housing" (often called "solitary confinement") as the placement of an individual in a cell for an average of at least twenty-two hours per day for fifteen or more continuous days.

By conducting this survey every two years, we have been able to obtain a composite picture of the use of restrictive housing nationwide and to develop longitudinal assessments over time. These surveys provide a window into changing policies governing restrictive housing and the impact on prisoners, on staff working in correctional facilities, and on the public.

A brief recap of the research is in order. In 2013, the Liman Center and then-ASCA produced a first report, *Administrative Segregation, Degrees of Isolation, and Incarceration: A National Overview of State and Federal Correctional Policies.* The report was based on policies collected from forty-seven jurisdictions, including forty-six states and the Federal Bureau of Prisons. We learned that correctional officials had broad discretion when deciding to put prisoners into administrative segregation. Policies permitted placement in segregation when individuals were perceived to be a "threat" to institutional security. Few of the policies provided directions on limiting the duration and moving prisoners out of administrative segregation.

We then sought to learn about the impact of the policies by asking jurisdictions about the number of people held in restrictive housing and the conditions of their confinement. The 2014 ASCA-Liman survey included more than 130 questions on the demographics of people in restrictive housing, and some of the rules governing these populations. The result was the 2015 *Time-In-Cell* Report, which compiled data from thirty-four jurisdictions in which 74% of the prison population was housed. These jurisdictions counted more than 66,000 individuals held in some form of restrictive housing.<sup>8</sup> ASCA-Liman used this data to estimate that, as of the fall of 2014, approximately 80,000 to 100,000 prisoners were in restrictive housing in prison systems in the United States.<sup>9</sup> The U.S. Department of Justice relied on the research results when it revised rules for federal facilities.<sup>10</sup> The report was widely disseminated and discussed in many venues.<sup>11</sup>

In 2016, the ASCA-Liman Report, *Aiming to Reduce Time-in-Cell*, <sup>12</sup> provided data on restrictive housing as of the fall of 2015. The research identified 67,442 people held in restrictive housing across forty-eight jurisdictions that housed 96% of the prison population in the United States. <sup>13</sup> Of the jurisdictions that provided data on duration, we learned that almost 10,000 people or 18% of prisoners in reporting jurisdictions were held in restrictive housing for fifteen to thirty days. At the other end of the spectrum, almost 6,000 people or 11% were held for three years or more. <sup>14</sup> We identified changes underway in policies governing the criteria for placement in restrictive housing, the degree of oversight of those held, and guidelines for how people could leave restrictive housing. Like the 2014 volume, *Aiming to Reduce Time-in-Cell* was widely distributed and cited. <sup>15</sup>

The survey that was the basis for the 2018 report, *Reforming Restrictive Housing*, <sup>16</sup> was conducted in 2017-2018. Again, we sent questionnaires to the fifty states, the Federal Bureau of Prisons, the District of Columbia, and four jail systems in large metropolitan areas. <sup>17</sup> Responses came from forty-three prison systems, accounting for 80.6% of the U.S. prison population. <sup>18</sup> Of

these jurisdictions, a reported 49,197 people—or about 4.5% of those in custody—were held in restrictive housing.<sup>19</sup> Based on these numbers, we estimated that, as of the fall of 2017, approximately 61,000 individuals were in restrictive housing in U.S. prisons.<sup>20</sup>

The 2017-2018 survey also gathered information on gender, race, ethnicity, age, serious mental illness, pregnancy, and transgender individuals in solitary confinement.<sup>21</sup> Survey responses demonstrated that men were much more likely than women to be in isolation,<sup>22</sup> that Black prisoners comprised a greater percentage of the restrictive housing population than they did the total custodial population,<sup>23</sup> and that prisoners between the ages of eighteen and thirty-six were more likely to be placed in restrictive housing than were older individuals.<sup>24</sup> Based on jurisdictions' reporting on isolation of the "seriously mentally ill" (as each jurisdiction defined that category), we learned that more than 4,000 of such prisoners were then held in restrictive housing.<sup>25</sup> Once again, interest in the information was widespread both within correctional departments and beyond.

#### The 2019-2020 Survey Design

Starting in early 2019, the Restrictive Housing Committee of CLA joined with researchers at the Liman Center to draft, streamline, and clarify the questions for the 2019 CLA-Liman Survey. A few correctional agencies used the survey as a pilot, and the feedback from that testing of the questions was incorporated into a revised 81-question survey that was sent to all CLA members via Qualtrics on July 15, 2019. That questionnaire is reproduced in Appendix A.

Responses came thereafter from forty-one jurisdictions and, from December of 2019 through March of 2020, Liman Center researchers made follow-up inquiries, as needed, for clarification. Answers from such questions were, with layers of review to ensure accuracy, integrated into the data set.

For many questions in the 2019 survey, we used the wording of prior surveys to enable comparisons across the years. Much of the focus was on quantitative information and, in addition, we continued inquiries about current policies on restrictive housing as well as policy changes. As in past years, we also added a few questions. The 2019-2020 questionnaire sought to learn more about the criteria for initial and repeated placements in restrictive housing, and sought to gather information about individuals returning to prison (recidivism) and about violence in restrictive housing. As we detail, the variety of responses in some other areas made it difficult to make crossjurisdiction comparisons or aggregations. We aim here to provide an account that is as comprehensive as possible. To do so required making choices about how to categorize certain survey responses. Endnotes often add caveats to the textual information provided.

In the summer of 2020, after the results were compiled and analyzed, materials were circulated to CLA members for comments and corrections, and the report was finalized thereafter. We received many helpful comments and suggestions that enabled us to finalize this report. In a few instances, during the summer of 2020, jurisdictions provided different information than had been given while the survey data was collected. We relied on the original responses and added footnotes and endnotes with the additional information.

# **Research Challenges and Caveats**

As with our previous reports, the analyses in the 2020 CLA-Liman report draw on information that is reported by each of the responding jurisdictions. No site visits or other forms of information are used for analyses of the jurisdictions' responses. Thus, this compilation, like the prior surveys, relies on self-reported data. In addition, as we have in other reports, we provide context for the correctional policies and practices through an overview of recent studies, legislation, and court decisions addressing restrictive housing.

Sketching, as we do here, a national picture of restrictive housing in the United States is complex because of the variety of definitions, methods, and types of restrictive housing employed across the country. To standardize answers across jurisdictions, we provided definitions for some questions, including what length of time-in-cell constitutes restrictive housing. In some areas, such as questions addressing "serious mental illness," we did not provide a definition because, from prior surveys, we learned of the wide variation across jurisdictions of what falls within that category. We asked what definitions jurisdictions used and the numbers of people held under their own definitions of serious mental illness. The list can be found as Appendix C.

As noted, the 2019-2020 questionnaire sought to learn more about the criteria for initial and repeated placements in restrictive housing and about individuals who were once in restrictive housing and then returned to prison after their release. The information provided by the limited number of jurisdictions that responded to these questions and the format of the questions themselves did not lend itself to easy categorization across jurisdictions. More must be learned from further surveys to develop an accurate picture of the impact of restrictive housing on individual and institutional safety and on subsequent returns to prison.

As in past surveys, this account does not include all persons held in restrictive housing. The focus in this work is on prisons, which, as of the fall of 2019, held 1,435,509, individuals in state and federal custody. Many people are held in other forms of detention. For example, in 2018, about 738,400 people were held in county and city jails in the United States. In 2020, Vera Institute of Justice released a report, *Restrictive Housing in U.S. Jails: Results from a National Survey*. This study focused on jails and estimated that 6.6% of the people held in jail were in restrictive housing. Other people were held by immigration or military authorities, or in facilities for juveniles. Because our surveys were addressed to directors of correctional agencies and because very few prison systems in the United States include any of those other institutions, this report does not illuminate the forms of confinement in these settings. Simply put, we do not know what number of these detainees were held in conditions that meet the definition of restrictive housing.

#### **Preview of the 2019 Survey Results**

By way of a brief overview of the materials that follow, the thirty-nine responding jurisdictions identified a total of 31,542 individuals held in restrictive housing as of the summer of 2019. Using the Vera Institute of Justice's 2019 total population numbers that focused on people within the "legal responsibility" of systems, the thirty-nine jurisdictions house 65% of the total United States prison population.<sup>29</sup> This survey asked jurisdictions to supply information on people

under their "direct control" and about whom they had restrictive housing information. Based on that narrower definition, the thirty-nine jurisdictions confined 57.5% of the total prison population in the United States. In the subset of the total prison population accounted for in survey responses, 3.8% were in restrictive housing.

The jurisdictions identified nearly 3,000 individuals who had been held in restrictive housing for more than three years. Within the thirty-two jurisdictions that reported data on the race and ethnicity of individuals in restrictive housing, the percentage of both male and female prisoners who were Black, Native American, or Alaskan Native was higher than in the total custodial population, as was the percentage of male Hispanic prisoners. For both male and female prisoners, the percentage of individuals between the ages of eighteen and thirty-five was higher in the restrictive housing population than in the total custodial population. More than 3,000 people with serious mental illness, as defined by each jurisdiction, were in restrictive housing.

Using the 57.5% percent of the prison population about which we have information as the basis to estimate a national picture, we estimate that, as of the summer of 2019, between 55,000 and 62,500 prisoners were held in-cell for twenty-two hours or more per day on average for fifteen days or more. In the chapters that follow, we provide detailed accounts of the data gathered, the bases for estimations, and overviews of the policies of prison systems and the reform efforts underway within and beyond corrections.

In addition to aggregate data, this volume provides accounts of some of the dimensions of the decision-making about restrictive housing and of life in that form of confinement. We gathered information on the initial decision to put an individual into restrictive housing and the review processes for continued placement. We asked about access to natural light, to outdoor space, to mental health care professionals, and about other facets of the daily regime.

Along with the data based on self-reports from jurisdictions, we also provide the broader context. We sketch the policy changes in correctional agencies and the many efforts at reforms coming from legislatures and courts. We also offer a glimpse at experiences beyond the United States, as the use of restrictive housing is a global concern.

# II. Data on Restrictive Housing from the 2019 CLA-Liman Survey

As in past reports, we sought to learn the number of people and the percentage of people held in restrictive housing, as well as the duration of confinement for these individuals and their demographics. We supplied the same definition we had provided for the 2017-2018 ASCA-Liman Survey, 30 which is that restrictive housing means "separating prisoners from the general population and holding them in their cells for an average of twenty-two or more hours per day for fifteen or more continuous days." Forty-one jurisdictions responded, albeit not to all the questions, and most of the quantitative data comes from thirty-nine jurisdictions. Through the discussion, tables, and charts below, we provide a composite picture, based on these responses, of the use of restrictive housing in U.S. prisons around the country.

# The Numbers and Percentages of Prisoners in Restrictive Housing: Counting and Comparing General and Restrictive Populations

The 2019 CLA-Liman survey asked jurisdictions to report, as of **July 15, 2019**, both their total prison populations in facilities under their direct control and the number of prisoners held in restrictive housing in those facilities. The survey defined "direct control" as when a jurisdiction "hires and supervises staff and . . . provides the governing rules and policies" at the relevant facilities, including "facilities where certain services, such as health care or laundry, are performed by subcontractors." Almost half (eighteen) of the forty-one jurisdictions reported that at least some prisoners were housed in a facility that was not under their direct control. The survey defined these facilities as those "located in your jurisdiction that you do not operate or manage. For example, a local jail that houses state prisoners or a privately-operated prison." Some jurisdictions identified jails, juvenile facilities, mental health facilities, privately-operated facilities, and immigration detention facilities as outside their direct control.

Thirty-nine jurisdictions provided information on both their total prison population and their restrictive housing population under the survey definition.<sup>32</sup> These jurisdictions reported housing a total of 825,473 prisoners in facilities under their direct control for which they could report corresponding restrictive housing data.<sup>33</sup> Out of that total population number, 31,542 prisoners—or 3.8%—were in restrictive housing.<sup>34</sup>

Four of the thirty-nine jurisdictions responded that they no longer hold people in restrictive housing, as they had ended the practice of confining individuals for twenty-two or more hours on average and for fifteen consecutive days or more.<sup>35</sup> These four jurisdictions may segregate prisoners and impose degrees of isolation, but not for more than fifteen days, or they may provide more than two hours of out-of-cell time each day.

This survey asked for jurisdictions to report on the populations about which they had information on restrictive housing. In some instances, jurisdictions send individuals out of state or to facilities otherwise not under their direct control. Thus, the total number of people described by the thirty-nine jurisdictions is somewhat less than the total number of people incarcerated by that jurisdiction. Moreover, twelve jurisdictions did not provide any numbers on general or restrictive housing populations. As explained below, we therefore do not have information about 502,873 people held in the non-reporting jurisdictions and some 107,163 people who were under the legal

authority of reporting jurisdictions (per the Vera Institute numbers from December of 2019) but about which they did not have restrictive housing information.

We need to explain the sources for the general numbers on people in prison. The United States Bureau of Justice Statistics (BJS) has long provided information on people in prison. The most recent published data comes from December 2018.<sup>36</sup> More recent information has been made available by the Vera Institute of Justice, which reported that as of December 2019, the total state and federal prison population in the United States was 1,435,509.<sup>37</sup> This data relies on the definition established by the BJS, which includes the total number of people under the legal authority of a prison system—even if prisoners were housed elsewhere.<sup>38</sup> As discussed, because we sought to learn about the conditions of people under the direct control of a jurisdiction, we used a narrower definition. Comparing the thirty-nine responding jurisdictions' information on the 825,473 prisoners fitting that definition with the numbers collected by Vera, the thirty-nine responding jurisdictions had "legal responsibility" over 932,636 prisoners,<sup>39</sup> or an additional 107,163 people.<sup>40</sup>

Using the 2019 Vera total population numbers, the thirty-nine jurisdictions house 65% (932,636/1,435,509) of the total United States prison population. Based on a narrower definition predicated on direct control, the thirty-nine jurisdictions confined 57.5% (825,473/1,435,509) of the total prison population in the United States. In the subset of the total prison population accounted for in survey responses, 31,542 prisoners—or 3.8% (31,542/825,473)—were in restrictive housing.

By assuming that the same average percentage of prisoners (3.8%) were placed in restrictive housing in the jurisdictions for which we lack data as those for which we have data, and that the same number of people were held in late summer of 2019 (the time for which the survey sought information) as those held in December of 2019 (when Vera gathered information), we estimate that between 55,000 and 62,500 prisoners were in restrictive housing across the United States in the summer of 2019.

The lower number of 55,000 assumes that an average of 3.8% of all U.S. prisoners held by non-reporting jurisdictions (502,873),<sup>41</sup> as well as 3.8% of the prisoners Vera identified that were not counted by the reporting jurisdictions (107,163) were placed in restrictive housing. Combined with the 31,542 prisoners in restrictive housing actually counted by the responding jurisdictions, the result is an estimated 54,724 prisoners in restrictive housing in the United States. If this estimate reflects practices, then about 6,000 fewer people were in restrictive housing in the summer of 2019 than in the ASCA-Liman 2017 Survey, in which we estimated that 61,000 people were held in isolation.<sup>42</sup>

On the other hand, the thirty-nine jurisdictions that self-selected to reply to the 2019 CLA-Liman Survey may, in the aggregate, include more jurisdictions limiting the use of restrictive housing than the twelve jurisdictions that did not provide data and which have legal authority over 502,873 prisoners. To provide an estimate taking that concern into account, we turned to the 2017 survey, in which seven of those twelve jurisdictions provided information.<sup>43</sup> We used an average of the percentage of people held then in those jurisdictions in restrictive housing, which was 5.1%.<sup>44</sup> When 5.1% is applied to the 502,873 prisoners in all non-reporting jurisdictions and the

107,163 prisoners unaccounted for by the reporting jurisdictions, combined with the 31,542 prisoners actually counted by the responding jurisdictions, the total population in restrictive housing in the United States would be estimated at 62,654. This higher estimate of people in restrictive housing is consonant with Vera's estimate that 6.6% of jail populations in the United States were in restrictive housing in 2019.<sup>45</sup>

In Figures 1 and 2 and Table 1, below, we provide jurisdiction-specific data on the numbers of prisoners in restrictive housing. The numbers are taken from responses to two survey questions about the restrictive housing population and the total custodial population: "Please indicate the total population under your DIRECT CONTROL... for which you can provide restrictive housing data"; and "How many people total are in restrictive housing, defined as in cell for an average of 22 or more hours a day for 15 or more continuous days, in the facilities under your direct control?"

Within the reporting thirty-nine jurisdictions, the percentage of prisoners in restrictive housing—calculated as the number in restrictive housing divided by the total custodial population reported by each respective jurisdiction—ranged from  $0\%^{46}$  to  $11.0\%.^{47}$  Across the jurisdictions reporting on restrictive housing, the median percentage of the population held in restrictive housing was 3.4%; the average was 3.8%. Figure 1 presents the percentages of prisoners in restrictive housing ordered alphabetically by jurisdiction; Figure 2 presents the same information organized by percentage.

Figure 1 Percentage of Prisoners in Restrictive Housing Ordered by Jurisdiction (n = 39)

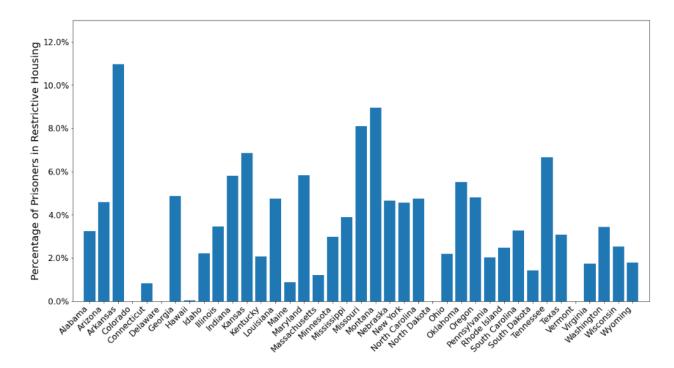


Figure 2 Percentage of Prisoners in Restrictive Housing Ordered by Percentage (n = 39)

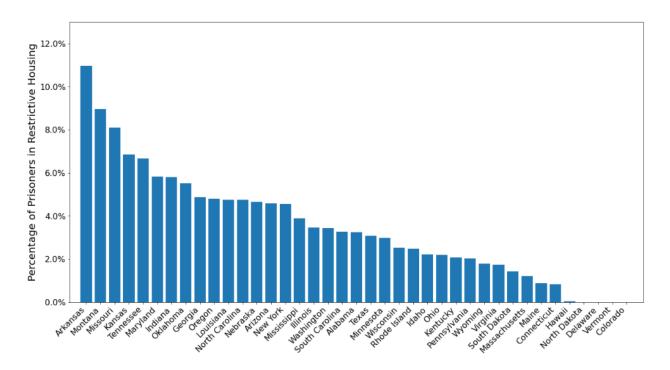


Table 1 Numbers and Percentages of Prisoners in Restrictive Housing (RH) by Jurisdiction  $(n = 39)^{\ddagger}$ 

Jurisdiction	Total Custodial Population for Facilities Reporting RH Data	Population in Restrictive Housing	Percentage in Restrictive Housing
Alabama	20,673	670	3.2%
Arizona	42,312	1,934	4.6%
Arkansas	15,618	1,712	11.0%
Colorado*	14,397	0	0.0%
Connecticut	12,942	106	0.8%
Delaware*	4,568	0	0.0%
Georgia	44,073	2,147	4.9%
Hawaii	3,561	1	0.0%
Idaho	9,196	203	2.2%
Illinois	38,425	1,327	3.5%
Indiana	27,182	1,574	5.8%
Kansas	10,005	686	6.9%
Kentucky	11,465	238	2.1%
Louisiana	14,269	679	4.8%

Maine	2,289	20	0.9%
Maryland	19,059	1,109	5.8%
Massachusetts	8,424	102	1.2%
Minnesota	8,565	255	3.0%
Mississippi	9,436	366	3.9%
Missouri	27,924	2,258	8.1%
Montana <sup>£</sup>	1,650	148	9.0%
Nebraska	5,499	256	4.7%
New York	46,066	2,096	4.5%
North Carolina	34,869	1,654	4.7%
North Dakota*	1,775	0	0.0%
Ohio	48,887	1,068	2.2%
Oklahoma	17,531	968	5.5%
Oregon	14,734	705	4.8%
Pennsylvania	45,174	918	2.0%
Rhode Island	2,663	66	2.5%
South Carolina <sup>¥</sup>	18,401	602	3.3%
South Dakota	3,858	55	1.4%
Tennessee	21,817	1,453	6.7%
Texas	143,473	4,407	3.1%
Vermont*	1,479	0	0.0%
Virginia	29,994	521	1.7%
Washington	17,668	605	3.4%
Wisconsin	23,539	597	2.5%
Wyoming	2,013	36	1.8%
Total	825,473	31,542	3.8%

<sup>‡</sup> New Hampshire, which provided data subsequent to the time frame for aggregate analysis in this report, stated that 53 of 2,263 (2.3%) of prisoners in that jurisdiction were in restrictive housing as of July 1, 2019.

<sup>\*</sup> These jurisdictions do not have prisoners in restrictive housing as defined by the survey.

<sup>&</sup>lt;sup>£</sup> Montana, which provided different data subsequent to the time frame for aggregate analysis in this report, stated that 101 of 1,975 (5.1%) of prisoners in that jurisdiction were in restrictive housing as of July 15, 2019. Montana reported that the original data provided and included in Table 1 was over-inclusive because it counted certain prisoners in conditions that were not restrictive housing as defined by the survey.

<sup>&</sup>lt;sup>¥</sup> South Carolina initially reported the numbers of all prisoners housed in restrictive housing units to be held in restrictive housing. South Carolina later re-counted its restrictive housing population by "housing bed type" and reported a total of 574 prisoners in restrictive housing. For purposes of analysis, we relied on South Carolina's initial count.

#### **Length of Time in Restrictive Housing**

The 2019 CLA-Liman survey asked whether jurisdictions "regularly collect information on how long each prisoner is in restrictive housing." Thirty-six jurisdictions answered this question, 48 and thirty reported regularly collecting data on length of time in restrictive housing, by individual, in aggregate, or grouped by the reason for at least some kinds of placement. 49 Two of the jurisdictions that answered that they collected this information regularly did not provide length of time data. 50 Five out of the six jurisdictions that reported not regularly collecting length of time information reported this data. 51

The data on length of time therefore come both from jurisdictions that reported tracking length of time regularly and from a few jurisdictions that did not do so regularly but answered the survey questions. Some jurisdictions began to track data on length of time more recently than others, which have been tracking this data for many years. Some jurisdictions included time spent in restrictive housing before they began formally tracking while other jurisdictions did not. In the jurisdictions that did not, the numbers reported may reflect the time period for which they gathered data, rather than the *actual* length of time that individuals were in restrictive housing.

The survey specified a series of time intervals that people could spend in restrictive housing. We asked jurisdictions about how many prisoners were held in-cell for lengths of time ranging from fifteen to thirty days to six years or more. Answers came from thirty-three jurisdictions that had data on restrictive housing as the survey defined it.<sup>54</sup> In total, these jurisdictions held 27,084 prisoners in restrictive housing, which means that we have length-of-time information for about 85.9% of the survey's total reported population of 31,542 prisoners in restrictive housing. We therefore estimate that we have time-interval information for between 43.3% and 49.2% of the total population in restrictive housing in the United States. (This range is based on the CLA-Liman approximation that anywhere from 55,000 to 62,500 prisoners were in restrictive housing in the United States in summer 2019.)

Almost a fifth (5,047 or 18.6% of the 27,084) of all prisoners in this subset of prisoners in restrictive housing were there for fifteen to thirty days. Over a quarter (7,458 people, or 27.5%) were in restrictive housing for thirty-one to ninety days. Roughly 16% (4,254 people or 15.7%) were in restrictive housing for ninety-one to 181 days. Almost 13% (3,432 people or 12.7%) were held between 181 and 365 days. About 14.5 % (3,930 people) were held for one to three years. Just under ten percent (2,963 people or 9.6%) were identified as having been held for more than three years, of which over half (1,555 people or 5.7% of the 27,085) were in restrictive housing for six years or more.

Figure 3 presents the number of people in restrictive housing by length-of-time intervals. Table 2 and Table 3 present the raw number and percentage of people in restrictive housing by length of time, ordered by jurisdiction. Table 4 details responses from the thirty-three jurisdictions that provided information on when they began to collect length-of-time data.

Figure 3 Prisoners in Restrictive Housing by Length of Time

(n = 33)

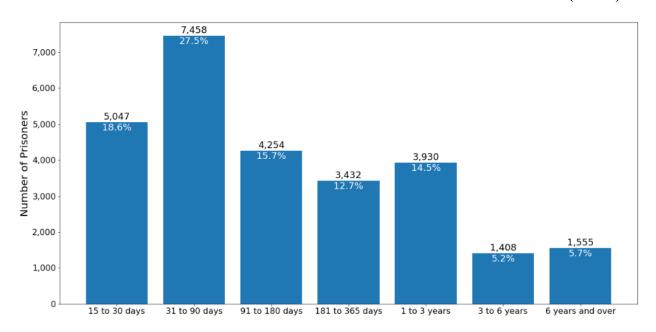


Table 2 Numbers of People/Length of Time in Restrictive Housing by Jurisdiction  $(n = 33)^{\ddagger £}$ 

							6 Years
	15-30	31-90	91-180	181-365	1-3	3-6	and
Jurisdiction	Days	Days	Days	Days	Years	Years	Over
Alabama	155	232	115	119	47	1	1
Arizona	177	412	338	379	454	144	30
Arkansas	162	299	299	294	445	101	112
Colorado*	0	0	0	0	0	0	0
Connecticut	8	19	27	23	24	5	0
Delaware*	0	0	0	0	0	0	0
Georgia	673	939	331	161	39	3	1
Indiana	250	548	331	279	125	33	8
Kansas	238	265	115	53	15	0	0
Kentucky	97	79	33	22	6	1	0
Louisiana	55	187	164	118	103	34	18
Maine	7	11	2	0	0	0	0
Maryland	326	408	219	107	46	3	0
Massachusetts	26	61	14	1	0	0	0
Minnesota	92	94	28	28	13	0	0
Mississippi	50	73	37	66	73	47	20
Nebraska	53	64	40	30	65	4	0

New York	653	1067	261	80	21	6	8
North Carolina	459	520	429	191	38	10	7
North Dakota*	0	0	0	0	0	0	0
Ohio	227	225	120	200	237	35	24
Oklahoma	192	264	178	141	165	17	11
Oregon	131	207	263	68	27	8	1
Pennsylvania	210	313	149	128	78	25	15
Rhode Island	24	10	12	11	9	0	0
South Carolina	150	204	57	88	92	11	0
South Dakota	7	15	9	14	7	1	2
Tennessee	70	73	158	218	485	287	162
Texas	183	375	380	498	1236	611	1,124
Vermont*	0	0	0	0	0	0	0
Washington	140	249	85	64	48	9	10
Wisconsin	218	229	55	51	32	12	0
Wyoming	14	16	5	0	0	0	1
Total	5,047	7,458	4,254	3,432	3,930	1,408	1,555

<sup>&</sup>lt;sup>‡</sup> Montana, which provided different data subsequent to the time frame for aggregate analysis in this report, stated that 11 individuals in restrictive housing were housed there for less than 30 days; 12 individuals were housed between 31 and 90 day; 22 individuals were housed between 91 and 180 days; 19 individuals were housed between 181 days and a year; 29 individuals were housed there between one and three years, one individual was housed there between three and six years; and two individuals were housed there for more than six years.

Table 3 Distribution of Time Spent in Restrictive Housing by Jurisdiction  $(n = 33)^{\ddagger f}$ 

Jurisdiction	15-30 Days	31-90 Days	91-180 Days	181-365 Days	1-3 Years	3-6 Years	6 Years and Over
Alabama	23.1%	34.6%	17.2%	17.8%	7.0%	0.1%	0.1%
Arizona	9.2%	21.3%	17.5%	19.6%	23.5%	7.4%	1.6%
Arkansas	9.5%	17.5%	17.5%	17.2%	26.0%	5.9%	6.5%
Colorado*	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Connecticut	7.5%	17.9%	25.5%	21.7%	22.6%	4.7%	0.0%
Delaware*	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Georgia	31.3%	43.7%	15.4%	7.5%	1.8%	0.1%	0.0%
Indiana	15.9%	34.8%	21.0%	17.7%	7.9%	2.1%	0.5%
Kansas	34.7%	38.6%	16.8%	7.7%	2.2%	0.0%	0.0%

Let Mew Hampshire, which provided data subsequent to the time frame for analysis, stated that 17 individuals in restrictive housing were housed there for less than 90 days, 21 individuals were housed between 91 and 180 days; 12 individuals were housed between 181 days and a year; 3 individuals were housed there between one and three years, and none were housed there more than three years.

<sup>\*</sup> These jurisdictions do not have prisoners in restrictive housing under the survey's definition and reported on restrictive housing.

Vantualzy	40.8%	33.2%	13.9%	9.2%	2.5%	0.4%	0.0%
Kentucky	8.1%	27.5%	24.2%	17.4%	15.2%	5.0%	2.7%
Louisiana							
Maine	35.0%	55.0%	10.0%	0.0%	0.0%	0.0%	0.0%
Maryland	29.4%	36.8%	19.7%	9.6%	4.1%	0.3%	0.0%
Massachusetts	25.5%	59.8%	13.7%	1.0%	0.0%	0.0%	0.0%
Minnesota	36.1%	36.9%	11.0%	11.0%	5.1%	0.0%	0.0%
Mississippi	13.7%	19.9%	10.1%	18.0%	19.9%	12.8%	5.5%
Nebraska	20.7%	25.0%	15.6%	11.7%	25.4%	1.6%	0.0%
New York	31.2%	50.9%	12.5%	3.8%	1.0%	0.3%	0.4%
North Carolina	27.8%	31.4%	25.9%	11.5%	2.3%	0.6%	0.4%
North Dakota*	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ohio	21.3%	21.1%	11.2%	18.7%	22.2%	3.3%	2.2%
Oklahoma	19.8%	27.3%	18.4%	14.6%	17.0%	1.8%	1.1%
Oregon	18.6%	29.4%	37.3%	9.6%	3.8%	1.1%	0.1%
Pennsylvania	22.9%	34.1%	16.2%	13.9%	8.5%	2.7%	1.6%
Rhode Island	36.4%	15.2%	18.2%	16.7%	13.6%	0.0%	0.0%
South Carolina	24.9%	33.9%	9.5%	14.6%	15.3%	1.8%	0.0%
South Dakota	12.7%	27.3%	16.4%	25.5%	12.7%	1.8%	3.6%
Tennessee	4.8%	5.0%	10.9%	15.0%	33.4%	19.8%	11.1%
Texas	4.2%	8.5%	8.6%	11.3%	28.0%	13.9%	25.5%
Vermont*	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Washington	23.1%	41.2%	14.0%	10.6%	7.9%	1.5%	1.7%
Wisconsin	36.5%	38.4%	9.2%	8.5%	5.4%	2.0%	0.0%
Wyoming	38.9%	44.4%	13.9%	0.0%	0.0%	0.0%	2.8%
Total	18.6%	27.5%	15.7%	12.7%	14.5%	5.2%	5.7%

<sup>&</sup>lt;sup>‡</sup> Montana, which provided different data subsequent to the time frame for aggregate analysis in this report, stated that 11% (11/101) of individuals in restrictive housing were housed there for less than 30 days; 12% (12/101) were housed between 31 and 90 day; 22% (22/101) were housed between 91 and 180 days; 19% (19/101) were housed between 181 days and a year; 29% (29/101) were housed there between one and three years, 1% (1/101) were housed there between three and six years; and 2% (2/101) were housed there for more than six years.

Table 4 Year When Regular Tracking of Length of Time in Restrictive Housing Began by Jurisdiction<sup>55</sup>

Year that Jurisdiction	Includes Retrospective	
Began Tracking	Jurisdiction	Analysis
1950	Minnesota	Yes
1970	Connecticut	Yes

 $<sup>^{\</sup>mathbf{f}}$  New Hampshire, which provided data subsequent to the time frame for analysis, stated that 32% (17/53) of individuals in restrictive housing were housed there for less than 90 days, 39% (21/53) were housed between 91 and 180 days; 23% (12/53) were housed between 181 days and a year; 6% (3/53) were housed there between one and three years, and 0% (0/53) were housed there more than three years.

<sup>\*</sup> These jurisdictions do not have prisoners in restrictive housing under the survey's definition and reported on restrictive housing.

1974	North Carolina	Other <sup>56</sup>
1985	Colorado	Other <sup>57</sup>
1989	Indiana	No
1990	New York	No
2000	Kansas	No
	Oklahoma	Yes
2002	Massachusetts	No
2003	Mississippi	Other <sup>58</sup>
	Wyoming	Yes
2006	Vermont	No
2008	Georgia	No
2009	New Hampshire	No
2011	Louisiana	No
	Wisconsin	Other <sup>59</sup>
2014	South Dakota	Yes
2015	Hawaii	Other <sup>60</sup>
	Texas	Yes
	Washington	Yes
2016	Kentucky	Other <sup>61</sup>
	Nebraska	Yes
	Oregon	Yes
	Rhode Island	No
	South Carolina	Yes
2017	Arizona	No
	Delaware	Other <sup>62</sup>
	Maryland	Yes
	Pennsylvania	Yes <sup>63</sup>
2018	Maine	No
	North Dakota	No
2019	Arkansas	Yes
	Ohio	Yes

Given the changing parameters of segregated housing, the 2019 CLA-Liman survey asked jurisdictions about the number of prisoners who were held in-cell in restrictive conditions for less than twenty-two hours a day on average or for less than fifteen days. Twenty-five jurisdictions provided information about prisoners who were in-cell for twenty-two hours or more but held for less than fifteen days. These jurisdictions reported a total of 7,195 male prisoners and 397 female prisoners in cell twenty-two hours or more a day for between one and fourteen days. The percentage of male prisoners in cell for at least twenty-two hours a day and held for less than fifteen days ranged between 0% and 6.5% of reporting jurisdictions' total custodial populations, 65 with a median of 1.4%. For female prisoners, this number ranged from 0% to 4.5%, 66 with a median of 1.1%.

In addition, seventeen jurisdictions reported information about male and female prisoners in cell for nineteen to twenty-one hours a day for one to fourteen days.<sup>67</sup> The seventeen jurisdictions reported a total of 1,389 male prisoners and 366 female prisoners in cell for nineteen to twenty-one hours for fourteen or fewer days. These figures accounted for between 0% and 11.2% of jurisdictions' male prisoners,<sup>68</sup> with a median of 0.0%, and between 0% and 33.2% of jurisdictions' female prisoners,<sup>69</sup> with a median of 0%.

Eighteen jurisdictions provided figures for prisoners in cell for nineteen to twenty-one hours for more than fourteen days. These eighteen responding jurisdictions reported a total of 4,534 male prisoners and sixty female prisoners in-cell between nineteen and twenty-one hours a day for more than fourteen days. These numbers accounted for between 0% and 91.0% percent of jurisdictions' total male custodial populations, with a median of 0.6%, and between 0% and 1.6% of female prisoners, with a median of 0.2%.

This additional length of time information is displayed by jurisdiction in Table 5 for male prisoners and Table 6 for female prisoners.

Table 5 Male Prisoners Held in Conditions Short of Restrictive Housing by Jurisdiction (n = 26)

	Population			Percentage			
Jurisdiction	22 Hours, 1-14 Days	19-21 Hours, 1-14 Days	19-21 Hours, Over 14 Days	22 Hours, 1-14 Days	19-21 Hours, 1- 14 Days	19-21 Hours, Over 14 Days	
Arkansas	260			1.8%			
Colorado*	257	27	519	2.0%	0.2%	4.1%	
Connecticut			297			2.5%	
Idaho <sup>73</sup>	100	50	489	1.3%	0.6%	6.1%	
Indiana	377			1.5%			
Kansas	0	1,019	679	0.0%	11.2%	7.5%	
Kentucky	689	0	0	6.5%	0.0%	0.0%	
Maine	2	0	40	0.1%	0.0%	1.9%	
Maryland	396	0	0	2.2%	0.0%	0.0%	
Massachusetts	117			1.5%			
Minnesota	224			2.8%			
Montana	0	0	1,502	0.0%	0.0%	91.0%	
Nebraska	0	64	253	0.0%	1.3%	5.0%	
New York	857	20	17	2.0%	0.0%	0.0%	
North Carolina	791	28	231	2.5%	0.1%	0.7%	
North Dakota*	0	10	19	0.0%	0.6%	1.2%	
Oklahoma	410			2.7%			
Oregon	45			0.3%			

Total	7,195	1,389	4534	1.4% (median)	0.0% (median)	0.6% (median)
Wyoming	11	9	3	0.6%	0.5%	0.2%
Wisconsin	268	9	29	1.2%	0.0%	0.1%
Washington	0	0	0	0.0%	0.0%	0.0%
Texas	1,061	17	210	0.8%	0.0%	0.2%
South Dakota	93	1	13	2.8%	0.0%	0.4%
South Carolina	236			1.4%		
Rhode Island	25			1.0%		
Pennsylvania	976	135	233	2.3%	0.3%	0.5%

<sup>\*</sup> These jurisdictions do not have prisoners in restrictive housing as defined by the survey.

Table 6 Female Prisoners Held in Conditions Short of Restrictive Housing by Jurisdiction  $(n = 26)^{74}$ 

	Population			Percentage			
Jurisdiction	22 Hours, 1-14 Days	19-21 Hours, 1-14 Days	19-21 Hours, Over 14 Days	22 Hours, 1-14 Days	19-21 Hours, 1- 14 Days	19-21 Hours, Over 14 Days	
Arkansas	32			2.5%			
Colorado*	0	0	9	0.0%	0.0%	0.5%	
Connecticut			0				
Idaho		3	5		0.2%	0.4%	
Indiana	28			1.1%			
Kansas	0	344	7	0.0%	38.2%	0.8%	
Kentucky	41	0	0	4.5%	0.0%	0.0%	
Maine	1	0	0	0.5%	0.0%	0.0%	
Maryland	13	0	0	1.7%	0.0%	0.0%	
Massachusetts	24			4.5%			
Minnesota	16			2.7%			
Nebraska <sup>75</sup>	0	1	3	0.0%	0.2%	0.7%	
New York	41	0	1	1.9%	0.0%	0.1%	
North Carolina	38	0	14	1.3%	0.0%	0.5%	
North Dakota*	0	1	1	0.0%	0.4%	0.4%	
Oklahoma	25			1.0%			
Oregon	12			1.0%			
Pennsylvania	19	12	2	0.7%	0.5%	0.1%	
Rhode Island	5			3.5%			
South Carolina	24			1.8%			
South Dakota	9	2	1	1.7%	0.4%	0.2%	

1 0tai	391	300	OU	(median)	(median)	(median)
Total	397	366	60	1.1%	0.00%	0.2%
Wyoming	0	3	4	0.0%	1.2%	1.6%
Wisconsin	16	0	2	1.1%	0.0%	0.1%
Washington	0	0	0	0.0%	0.0%	0.0%
Texas	53	0	11	0.4%	0.0%	0.1%

<sup>\*</sup> These jurisdictions do not have prisoners in restrictive housing as defined by the survey.

#### The Demographics of Restrictive Housing

As in prior reports, we sought to learn about the people placed in restrictive housing in terms of their sex/gender, race, and age, and whether they were identified as having serious mental illness. Below, we provide a composite picture drawn from the jurisdictions that responded about the populations under their direct control.

Sex/Gender: Thirty-eight jurisdictions provided data on men and women in restrictive housing. As shown in Figure 4 below, 4.17% of the total male custodial population was in restrictive housing, and 0.85% of the total female custodial population was in restrictive housing in these jurisdictions. Four of the reporting jurisdictions did not have any prisoners in restrictive housing. Using only jurisdictions that had prisoners in restrictive housing as the survey defined it, 4.28% of the total male custodial population and 0.88% of the total female custodial population was in restrictive housing.

Figure 4 Prisoners in Restrictive Housing by Gender<sup>77</sup>



Figure 5, Figure 6, and Table 7 provide jurisdiction-by-jurisdiction information about the number of men in restrictive housing. Across the thirty-eight jurisdictions reporting this data, a total of 30,473 men were reported in restrictive housing. The median percentage of male prisoners in restrictive housing among all reporting jurisdictions was 3.42%.<sup>78</sup> The percentage held in restrictive housing, among jurisdictions that have restrictive housing under our definition, ranged

from 0% of the male custodial population<sup>79</sup> to 11.8% (1,684 out of 14,311 male prisoners).<sup>80</sup> To make the information readily accessible, Figure 5 and Figure 6 provide the same information, first arranged alphabetically by jurisdiction, and then in decreasing order of the percentage of the male custodial population in restrictive housing.

Figure 5 Percentage of Male Prisoners in Restrictive Housing Ordered by Jurisdiction (n = 38)

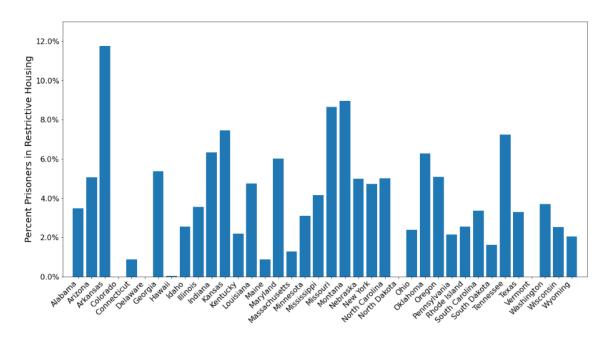


Figure 6 Percentage of Male Prisoners in Restrictive Housing Ordered by Percentage (n = 38)

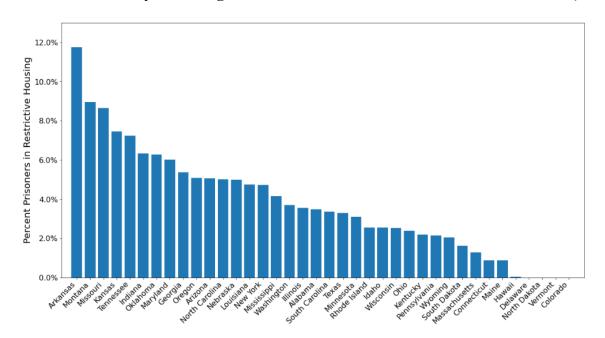


Table 7 Numbers and Percentages of Male Custodial Population in Restrictive Housing (n = 38)

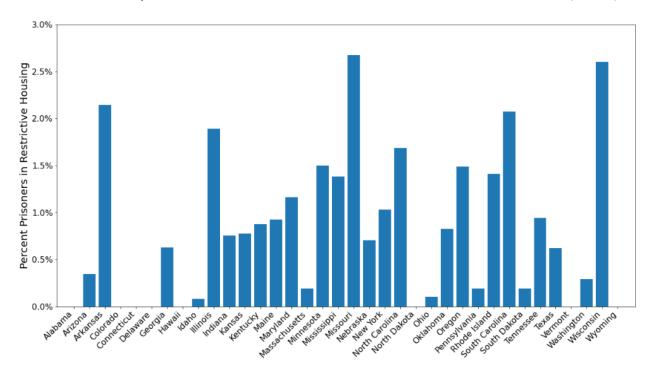
Jurisdiction	Total Custodial Population for Facilities Reporting RH Data	Population in Restrictive Housing	Percentage in Restrictive Housing
Alabama	19,216	670	3.5%
Arizona	37,986	1,919	5.1%
Arkansas	14,311	1,684	11.8%
Colorado*	12,726	0	0.0%
Connecticut	12,028	106	0.9%
Delaware*	4,222	0	0.0%
Georgia	39,447	2,118	5.4%
Hawaii	2,958	1	0.0%
Idaho	7,960	202	2.5%
Illinois	36,206	1,285	3.5%
Indiana	24,533	1,554	6.3%
Kansas	9,105	679	7.5%
Kentucky	10,551	230	2.2%
Louisiana	14,269	679	4.8%
Maine	2,073	18	0.9%
Maryland	18,283	1,100	6.0%
Massachusetts	7,895	101	1.3%
Minnesota	7,965	246	3.1%
Mississippi	8,496	353	4.2%
Missouri	25,271	2,187	8.7%
Montana**	1,650	148	9.0%
Nebraska	5,073	253	5.0%
New York	43,932	2,074	4.7%
North Carolina	32,027	1,606	5.0%
North Dakota*	1,550	0	0.0%
Ohio	44,896	1,064	2.4%
Oklahoma	15,110	948	6.3%
Oregon	13,522	687	5.1%
Pennsylvania	42,527	913	2.1%
Rhode Island	2,521	64	2.5%
South Carolina	17,097	575	3.4%
South Dakota	3,333	54	1.6%
Tennessee	19,803	1,434	7.2%
Texas***	131,430	4,326	3.3%
Vermont*	1,336	0	0.0%

Washington	16,297	601	3.7%
Wisconsin	22,039	558	2.5%
Wyoming	1,760	36	2.0%
Total (All jurisdictions)	731,404	30,473	3.4% (Median)
Total (Jurisdictions			
with RH under	711,570	30,473	3.6% (Median)
our definition)			

<sup>\*</sup> These jurisdictions do not have prisoners in restrictive housing as defined by the survey.

Among the thirty-six jurisdictions that provided data about the number of women in restrictive housing, and whose reported data included at least one female prisoner,<sup>81</sup> a total of 542 women were reported in isolation. The median percentage of female prisoners in restrictive housing among these thirty-six jurisdictions was 0.7%.<sup>82</sup> The percentage of women held in restrictive housing ranged from 0%<sup>83</sup> of the female custodial population to 2.68% (seventy-one out of 2,187 female prisoners).<sup>84</sup> Jurisdiction-by-jurisdiction information is provided in Figure 7 and Figure 8, arranged by jurisdiction and by percentages, and in Table 8.

Figure 7 Percentage of Female Prisoners in Restrictive Housing Ordered by Jurisdiction (n = 36)\*

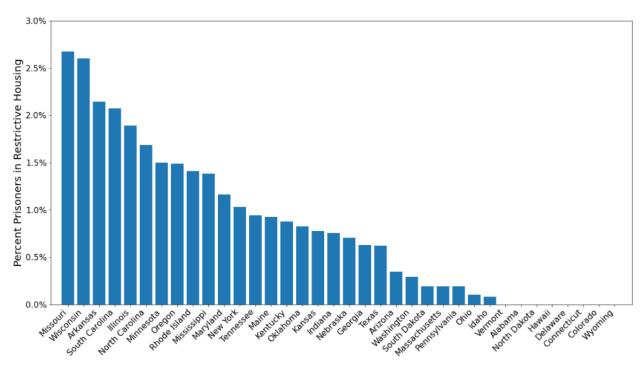


<sup>\*</sup> Figure includes jurisdictions that reported having at least one woman in their total custodial population.

<sup>\*\*</sup> Montana, which provided different data subsequent to the time frame for aggregate analysis in this report, stated that 96 male prisoners out of 1,736 (5.5%) in that jurisdiction were in restrictive housing as of July 15, 2019. Montana reported that the original data it sent reflected in Table 7 was over-inclusive because it counted certain prisoners in conditions that were not restrictive housing as defined by the survey.

<sup>\*\*\*</sup> Texas reported a total of 4,332 male prisoners in restrictive housing, but noted that six of these prisoners were not housed under the jurisdiction's direct control according to the survey definition. For comparison purposes, we included only those prisoners in restrictive housing that were under the jurisdiction's direct control (4,326).

Figure 8 Percentage of Female Prisoners in Restrictive Housing Ordered by Percentage (n = 36)\*



<sup>\*</sup> Figure includes jurisdictions that reported having at least one woman in their total custodial population.

Table 8 Numbers and Percentages of Female Custodial Population in Restrictive Housing  $(n = 36)^{\ddagger}$ 

Jurisdiction	Total Custodial Population for Facilities Reporting RH Data	Population in Restrictive Housing	Percentage in Restrictive Housing
Alabama	1,457	0	0.0%
Arizona	4,326	15	0.3%
Arkansas	1,307	28	2.1%
Colorado*	1,671	0	0.0%
Connecticut	914	0	0.0%
Delaware*	346	0	0.0%
Georgia	4,626	29	0.6%
Hawaii	603	0	0.0%
Idaho	1,236	1	0.1%
Illinois	2,219	42	1.9%
Indiana	2,649	20	0.8%
Kansas	900	7	0.8%
Kentucky	914	8	0.9%

Maine	216	2	0.9%
Maryland	776	9	1.2%
Massachusetts	529	1	0.2%
Minnesota	600	9	1.5%
Mississippi	940	13	1.4%
Missouri	2,653	71	2.7%
Nebraska	426	3	0.7%
New York	2,134	22	1.0%
North Carolina	2,842	48	1.7%
North Dakota*	225	0	0.0%
Ohio	3,991	4	0.1%
Oklahoma	2,421	20	0.8%
Oregon	1,212	18	1.5%
Pennsylvania	2,647	5	0.2%
Rhode Island	142	2	1.4%
South Carolina	1,304	27	2.1%
South Dakota	525	1	0.2%
Tennessee	2,014	19	0.9%
Texas	12,043	75	0.6%
Vermont*	143	0	0.0%
Washington	1,371	4	0.3%
Wisconsin	1,500	39	2.6%
Wyoming	253	0	0.0%
Total (All jurisdictions)	64,075	542	0.7% (Median)
<b>Total (Jurisdictions</b>			
with RH under our definition)	61,690	542	0.8% (Median)

<sup>\*</sup> Montana, which provided different data subsequent to the time frame for aggregate analysis in this report, stated that 5 female prisoners out of 239 (2.1%) in that jurisdiction were in restrictive housing as of July 15, 2019.

Race and Ethnicity: The 2019 CLA-Liman survey asked about race and ethnicity data by sex/gender for the total custodial and the restrictive housing populations. Thirty-two jurisdictions responded to questions about the racial and ethnic composition of male and female prisoners in restrictive housing.<sup>85</sup> The survey asked for data for the summer of 2019 and did not request annual admissions data by race. Figure 9 and Figure 10 describe the number of prisoners by sex/gender in each racial group in the total custodial population and in restrictive housing.<sup>86</sup>

We asked jurisdictions about the categories white, Black (African-American), Hispanic or Latino, Asian, Native American or Alaskan Native, Native Hawaiian or Pacific Islander, and Other. Table 9 details the number of jurisdictions that used and/or recorded data for each category.

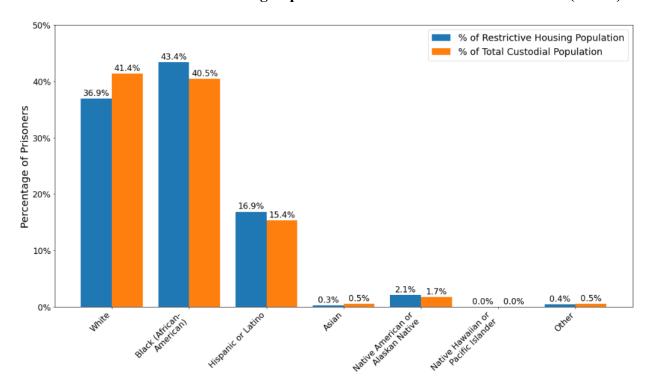
<sup>\*</sup> These jurisdictions do not have prisoners in restrictive housing under the survey's definition but reported on restrictive housing use.

In terms of how individuals were identified as falling within those categories, some jurisdictions relied on self-reports, and others relied on correctional records or on appearance.

**Table 9** Numbers of Jurisdictions Reporting on Racial or Ethnic Groups (n = 40)

	Number of Jurisdictions Reporting Race Data for Total	Number of Jurisdictions Reporting Race Data for
Category	Custodial Population	Restrictive Housing Populations
White	40	32
Black (African-	40	32
American)		
Hispanic or Latino	38	32
Asian	38	32
Native American or	39	32
Alaskan Native		
Native Hawaiian or	20	17
Pacific Islander		
Other	34	27

Figure 9 Race/Ethnicity of Male Prisoners in Total Custodial Population and in Restrictive Housing Population (n = 32)



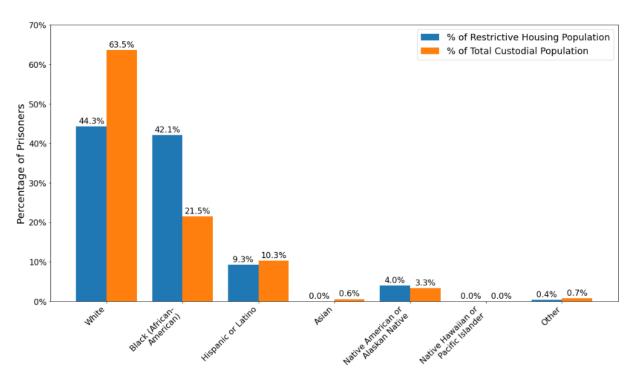


Figure 10 Race/Ethnicity of Female Prisoners in Total Custodial Population and in Restrictive Housing Population (n = 32)

In terms of the numbers of individuals for which we have demographic information, thirty-two jurisdictions reported on race and ethnicity for men in both total custodial population and in restrictive housing. <sup>87</sup> In total, these jurisdictions held 28,155 prisoners in restrictive housing, or 89.3% of the 31,542 prisoners in restrictive housing reported by all responding jurisdictions. We therefore estimate that the survey results present race and ethnicity data for between 45.0% and 51.2% of the total population in restrictive housing in the United States. <sup>88</sup>

Among the thirty-two jurisdictions that reported on race and ethnicity among male prisoners in the total custodial population and in restrictive housing, Black men comprised 43.4% of the total male restrictive housing population, as compared to 40.5% of the total male custodial population in those jurisdictions. In nineteen of these thirty-two jurisdictions, the male restrictive housing population had a greater percentage of Black prisoners than did the total male custodial population in each of those jurisdictions. In nine of the thirty-two jurisdictions, the male restrictive housing population had a lower percentage of Black prisoners than did the total male custodial population in each of those jurisdictions. The remaining four jurisdictions did not have any prisoners in restrictive housing under the 2019 CLA-Liman Survey definition. <sup>89</sup> This data is depicted in Table 10.

Across all jurisdictions, the difference between the percentage of the male restrictive housing population that was Black and the percentage of the total male custodial population that was Black ranged from +16.3 percentage points to -10.4 percentage points. Figure 11 maps those spreads in the twenty-eight jurisdictions that reported housing individuals in restrictive housing

conditions under the survey definition. The four responding jurisdictions that did not have any prisoners in restrictive housing were excluded from Figure 11.

Among the jurisdictions reporting race and ethnicity data on male prisoners, all but one reported having at least one Hispanic or Latino male prisoner in their total custodial population. Across all reporting jurisdictions, Hispanic or Latino prisoners comprised 16.9% of the male restrictive housing population, as compared to 15.4% of the total male custodial population. In fifteen of the twenty-seven reporting jurisdictions, the male restrictive housing population had a greater percentage of Hispanic or Latino prisoners than did the total male custodial population in each of those jurisdictions. In twelve of the twenty-seven jurisdictions, the male restrictive housing population had a lower percentage of Hispanic prisoners than did the total male custodial population in each of those jurisdictions. This data is also depicted in Table 10.

Across all jurisdictions, the difference between the percentage of the male restrictive housing population that was Hispanic or Latino and the percentage of the total male custodial population that was Hispanic or Latino ranged from +15.80 percentage points to -2.68 percentage points. Figure 12 maps those spreads in the jurisdictions that reported having Hispanic or Latino prisoners in restrictive housing according to the survey's definition.

In twenty-four of the reporting jurisdictions with restrictive housing as the survey defined it, the male restrictive housing population contained a smaller percentage of white prisoners than the total white male custodial population. As detailed below, jurisdictions reported a small percentage of Asian, Native American or Alaskan Native, and Native Hawaiian or Pacific Islander prisoners in their general prison populations and a similarly small percentage in their populations in restrictive housing. Those categorized as "Other" appeared to be comparable in percentages both in the general and in the restrictive housing populations. Given the small numbers of individuals, we do not provide details.

Table 11 lists by race/ethnicity the number of male prisoners in the general population and in restrictive housing for all of the thirty-two reporting jurisdictions. Table 12 compares the percentages by race and ethnicity of all male prisoners with those in restrictive housing.

Table 13 lists by race/ethnicity the number of women prisoners in the general population and in restrictive housing for all thirty-one reporting jurisdictions. Table 14 compares the percentages by race and ethnicity of all female prisoners with those in restrictive housing. Across reporting jurisdictions, Black prisoners comprised 42.1% of the female restrictive housing population, as compared to 21.5% of the total female custodial population. Hispanic or Latina prisoners comprised 9.3% of the female restrictive housing population, as compared to 10.3% of the total female custodial population. Table 15 depicts this data. Due to the smaller numerical sample size, this report does not provide jurisdiction-by-jurisdiction charts mapping the difference between total custodial populations and restrictive housing populations by race for female prisoners.

Figure 11 Difference in Restrictive Housing and Total Male Custodial Population for Black Male Prisoners (n = 28)

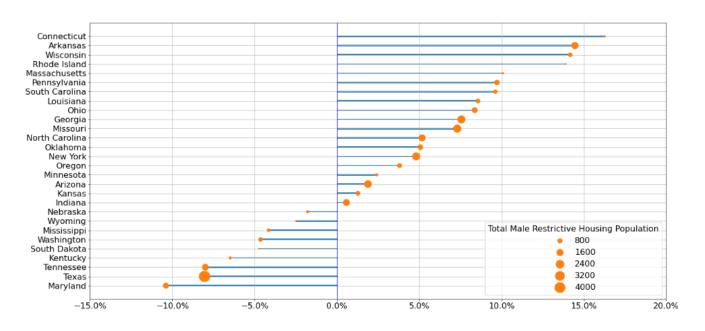


Figure 12 Difference in Restrictive Housing and Total Male Custodial Population for Hispanic or Latino Prisoners  $(n = 27)^{91}$ 

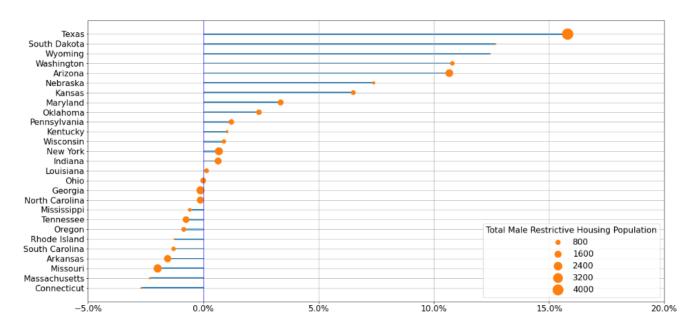


Table 10 Race/Ethnicity of Male Prisoners in Restrictive Housing

(n = 32)

	Black Prisoners	Hispanic Prisoners
% of Total Custodial	40.5%	15.4%
Population		
% of Restrictive Housing	43.4%	16.9%
# of jurisdictions with over- representation in segregated housing as compared to the general population.	19	15
# of jurisdictions with under- representation in segregated housing as compared to the general population.	9	12

Table 11 Race/Ethnicity of Male Total Custodial and Restrictive Housing Populations

 $(n = 32)^{\ddagger}$ 

			Total (	Custodial	Populat	tion					Restrict	ive Hous	sing Po	pulation		
Jurisdiction	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	Total	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	Total
Arizona	14,344	5,779	15,108	168	1,970		617	37,986	443	328	968	4	158		18	1,919
Arkansas	7,538	6,167	485	55	40	7	19	14,311	677	969	31	2	3	0	2	1,684
Colorado*	5,599	2,426	4,111	157	433		0	12,726	0	0	0	0	0		0	0
Connecticut	3,341	5,307	3,273	72	35			12,028	14	64	26	1	1			106
Delaware*	1,382	2,614	218	4	0		4	4,222	0	0	0	0	0		0	0
Georgia	13,648	24,175	1,427	125	18	1	53	39,447	583	1,458	74	2	0	0	1	2,118
Indiana	14,537	8,338	1,058	60	47	12	128	24,533	920	537	77	4	3	1	12	1,554
Kansas	5,025	2,620	1,191	80	194			9,105	326	204	133	6	10			679
Kentucky	7,359	2,795	213	0	8	0	176	10,551	175	46	7	0	0	0	2	230
Louisiana	4,032	10,169	43	13	13	0		14,269	134	542	3	0	0	0		679
Maryland	4,048	13,169	717	49	84	13	203	18,283	322	678	80	2	7	1	10	1,100
Massachusetts	3,280	2,253	2,137	110	49	0	66	7,895	34	39	25	1	0	0	2	101
Minnesota	3,993	3,078	0	224	659		11	7,965	81	101	0	5	57		2	246
Mississippi	2,979	5,407	74	26	9	0	1	8,496	142	210	1	0	0	0	0	353
Missouri	15,609	9,202	501	54	70		36	25,271	1,218	956	0	3	6		4	2,187
Nebraska	2,590	1,434	748	42	216	4	39	5,073	110	67	56	0	19	0	1	253
New York	10,393	21,781	10,210	257	397		894	43,932	396	1,128	496	4	17		33	2,074
North Carolina	12,174	17,211	699	99	1,701		143	32,027	548	946	33	2	73		4	1,606
North Dakota*	961	173	103	5	302	6		1,550	0	0	0	0	0	0		0
Ohio	22,237	20,887	1,311	57	84		320	44,896	443	584	31	0	0		6	1,064
Oklahoma	8,386	3,889	1,086	63	1,626	19	41	15,110	439	292	91	3	116	3	4	948
Oregon	9,622	1,336	1,906	190	424	41	3	13,522	462	94	91	8	30	2	0	687
Pennsylvania	17,466	20,556	4,188	109	31		177	42,527	278	530	101	1	0		3	913
Rhode Island	1,015	753	662	37	15		39	2,521	20	28	16	0	0		0	64
South Carolina	5,969	10,517	459	20	21	0	111	17,097	157	409	8	0	0	0	1	575

South Dakota	1,851	282	133	25	1,035	2	5	3,333	21	2	9	0	21	0	1	54
Tennessee	10,550	8,682	480	57	34	0		19,803	887	514	24	5	4	0		1,434
Texas	41,853	44,027	44,822	481	63	0	184	131,430	1,061	1,101	2,159	6	0	0	5	4,326
Vermont*	1,133	135	2	4	12		50	1,336	0	0	0	0	0		0	0
Washington	9,506	2,926	2,226	644	794		201	16,297	321	80	147	10	38		5	601
Wisconsin	9,771	9,399	1,778	254	825		12	22,039	166	317	50	4	21		0	558
Wyoming	1,307	93	221	6	122	8	0	1,760	18	1	9	0	8	0	0	36
Total	273,498	267,580	101,590	3,547	11,331	113	3,533	661,341	10,396	12,225	4,746	73	592	7	116	28,149

<sup>&</sup>lt;sup>‡</sup> Montana, which provided different data subsequent to the time frame for aggregate analysis in this report, stated that its total male custodial population (1,736) comprised 1,316 white males, 45 Black males, 27 Hispanic males, 369 Native American males, and 6 Asian males. Its male population in restrictive housing (96) comprised 67 white males, 3 Black males, one Hispanic male, 26 Native American males, and 0 Asian males.

Table 12 Race/Ethnicity of Male Total Custodial and Restrictive Housing Populations by Percentage 92

(n = 32)

			Total Cu	stodial Po <sub>l</sub>	pulation				R	estrictive	Housing P	opulatior	1	
Jurisdiction	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other
Arizona	37.8%	15.2%	39.8%	0.4%	5.2%		1.6%	23.1%	17.1%	50.4%	0.2%	8.2%		0.9%
Arkansas	52.7%	43.1%	3.4%	0.4%	0.3%	0.0%	0.1%	40.2%	57.5%	1.8%	0.1%	0.2%	0.0%	0.1%
Colorado*	44.0%	19.1%	32.3%	1.2%	3.4%		0.0%							
Connecticut	27.8%	44.1%	27.2%	0.6%	0.3%			13.2%	60.4%	24.5%	0.9%	0.9%		
Delaware*	32.7%	61.9%	5.2%	0.1%	0.0%		0.1%							
Georgia	34.6%	61.3%	3.6%	0.3%	0.0%	0.0%	0.1%	27.5%	68.8%	3.5%	0.1%	0.0%	0.0%	0.0%
Indiana	59.3%	34.0%	4.3%	0.2%	0.2%	0.0%	0.5%	59.2%	34.6%	5.0%	0.3%	0.2%	0.1%	0.8%
Kansas	55.2%	28.8%	13.1%	0.9%	2.1%			48.0%	30.0%	19.6%	0.9%	1.5%		
Kentucky	69.7%	26.5%	2.0%	0.0%	0.1%	0.0%	1.7%	76.1%	20.0%	3.0%	0.0%	0.0%	0.0%	0.9%
Louisiana	28.3%	71.3%	0.3%	0.1%	0.1%	0.0%		19.7%	79.8%	0.4%	0.0%	0.0%	0.0%	
Maryland	22.1%	72.0%	3.9%	0.3%	0.5%	0.1%	1.1%	29.3%	61.6%	7.3%	0.2%	0.6%	0.1%	0.9%

<sup>\*</sup> These jurisdictions do not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Massachusetts	41.5%	28.5%	27.1%	1.4%	0.6%	0.0%	0.8%	33.7%	38.6%	24.8%	1.0%	0.0%	0.0%	2.0%
Minnesota	50.1%	38.6%	0.0%	2.8%	8.3%		0.1%	32.9%	41.1%	0.0%	2.0%	23.2%		0.8%
Mississippi	35.1%	63.6%	0.9%	0.3%	0.1%	0.0%	0.0%	40.2%	59.5%	0.3%	0.0%	0.0%	0.0%	0.0%
Missouri	61.8%	36.4%	2.0%	0.2%	0.3%		0.1%	55.7%	43.7%	0.0%	0.1%	0.3%		0.2%
Nebraska	51.1%	28.3%	14.7%	0.8%	4.3%	0.1%	0.8%	43.5%	26.5%	22.1%	0.0%	7.5%	0.0%	0.4%
New York	23.7%	49.6%	23.2%	0.6%	0.9%		2.0%	19.1%	54.4%	23.9%	0.2%	0.8%		1.6%
North Carolina	38.0%	53.7%	2.2%	0.3%	5.3%		0.4%	34.1%	58.9%	2.1%	0.1%	4.5%		0.2%
North Dakota*	62.0%	11.2%	6.6%	0.3%	19.5%	0.4%								
Ohio	49.5%	46.5%	2.9%	0.1%	0.2%		0.7%	41.6%	54.9%	2.9%	0.0%	0.0%		0.6%
Oklahoma	55.5%	25.7%	7.2%	0.4%	10.8%	0.1%	0.3%	46.3%	30.8%	9.6%	0.3%	12.2%	0.3%	0.4%
Oregon	71.2%	9.9%	14.1%	1.4%	3.1%	0.3%	0.0%	67.2%	13.7%	13.2%	1.2%	4.4%	0.3%	0.0%
Pennsylvania	41.1%	48.3%	9.8%	0.3%	0.1%		0.4%	30.4%	58.1%	11.1%	0.1%	0.0%		0.3%
Rhode Island	40.3%	29.9%	26.3%	1.5%	0.6%		1.5%	31.2%	43.8%	25.0%	0.0%	0.0%		0.0%
South Carolina	34.9%	61.5%	2.7%	0.1%	0.1%	0.0%	0.6%	27.3%	71.1%	1.4%	0.0%	0.0%	0.0%	0.2%
South Dakota	55.5%	8.5%	4.0%	0.8%	31.1%	0.1%	0.2%	38.9%	3.7%	16.7%	0.0%	38.9%	0.0%	1.9%
Tennessee	53.3%	43.8%	2.4%	0.3%	0.2%	0.0%		61.9%	35.8%	1.7%	0.3%	0.3%	0.0%	
Texas	31.8%	33.5%	34.1%	0.4%	0.0%	0.0%	0.1%	24.5%	25.5%	49.9%	0.1%	0.0%	0.0%	0.1%
Vermont*	84.8%	10.1%	0.1%	0.3%	0.9%		3.7%							
Washington	58.3%	18.0%	13.7%	4.0%	4.9%		1.2%	53.4%	13.3%	24.5%	1.7%	6.3%		0.8%
Wisconsin	44.3%	42.6%	8.1%	1.2%	3.7%		0.1%	29.7%	56.8%	9.0%	0.7%	3.8%		0.0%
Wyoming	74.3%	5.3%	12.6%	0.3%	6.9%	0.5%	0.0%	50.0%	2.8%	25.0%	0.0%	22.2%	0.0%	0.0%
Median	46.9%	35.2%	5.9%	0.4%	0.6%	0.0%	0.4%	36.5%	42.4%	9.3%	0.1%	0.5%	0.0%	0.4%

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Table 13 Race/Ethnicity of Female Total Custodial and Restrictive Housing Populations

(n = 31);

			Total	Custodia	l Popul	ation					Restric	tive Hous	sing Po	pulation		
Jurisdiction	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	Total	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	Total
Arizona	2,245	352	1,216	36	351		126	4,326	4	4	7	0	0		0	15
Arkansas	949	315	28	6	9	0	0	1,307	8	17	2	0	1	0	0	28
Colorado*	860	172	534	19	86		0	1,671	0	0	0	0	0		0	0
Connecticut	493	235	174	9	3			914	0	0	0	0	0			0
Delaware*	188	143	14	1	0		0	346	0	0	0	0	0		0	0
Georgia	2,915	1,624	68	12	1	0	6	4,626	15	14	0	0	0	0	0	29
Indiana	2,135	379	53	5	10	2	24	2,649	13	7	0	0	0	0	0	20
Kansas	650	160	58	4	23			900	3	4	0	0	0			7
Kentucky	791	100	7	0	1	0	15	914	7	1	0	0	0	0	0	8
Maryland	381	361	12	1	3	2	16	776	3	5	0	0	1	0	0	9
Massachusetts	358	85	43	3	2	1	37	529	1	0	0	0	0	0	0	1
Minnesota	361	108	0	20	109		2	600	4	2	0	0	3		0	9
Mississippi	549	385	4	0	2	0	0	940	7	6	0	0	0	0	0	13
Missouri	2,196	389	85	8	22		0	2,653	43	26	0	0	1		1	71
Nebraska	282	55	43	1	38	1	6	426	0	0	0	0	3	0	0	3
New York	1,052	732	266	14	23		47	2,134	14	7	1	0	0		0	22
North Carolina	1,964	747	56	7	63		5	2,842	24	20	1	0	3		0	48
North Dakota*	133	9	7	0	74	2		225	0	0	0	0	0	0		0
Ohio	2,947	966	29	8	5		36	3,991	3	1	0	0	0		0	4
Oklahoma	1,391	394	156	6	462	6	6	2,421	7	11	1	0	1	0	0	20
Oregon	993	65	68	23	58	5	0	1,212	10	5	1	0	2	0	0	18
Pennsylvania	1,735	673	168	15	11		45	2,647	3	2	0	0	0		0	5
Rhode Island	96	19	17	1	4		5	142	2	0	0	0	0		0	2
South Carolina	913	353	20	0	7	0	11	1,304	14	8	2	0	2	0	1	27
South Dakota	212	11	8	1	291	2	0	525	1	0	0	0	0	0	0	1

Total	37,074	12,550	6,029	325	1,926	22	419	58,344	220	209	46	0	20	0	2	497
Wyoming	193	5	22	2	26	1	4	253	0	0	0	0	0	0	0	0
Wisconsin	980	333	49	14	123		1	1,500	14	22	1	0	2		0	39
Washington	917	127	155	60	98		14	1,371	2	0	1	0	1		0	4
Vermont*	131	9	0	0	0		3	143	0	0	0	0	0		0	0
Texas	6,499	2,832	2,645	43	14	0	10	12,043	8	38	29	0	0	0	0	75
Tennessee	1,565	412	24	6	7	0		2,014	10	9	0	0	0	0		19

<sup>&</sup>lt;sup>‡</sup> Montana, which provided different data subsequent to the time frame for aggregate analysis in this report, stated that its total female custodial population (239) comprised 139 white females, 3 Black females, 20 Hispanic females, 97 Native American females, and 4 Asian females. Its female population in restrictive housing (5) comprised one white female, 0 Black females, 0 Hispanic females, 4 Native American females, and 0 Asian females.

Table 14 Race/Ethnicity of Female Total Custodial and Restrictive Housing Populations by Percentage<sup>93</sup>

(n = 31)

			Total Cu	stodial Po <sub>l</sub>	pulation				R	estrictive	Housing I	Population	1	
Jurisdiction	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other
Arizona	51.9%	8.1%	28.1%	0.8%	8.1%		2.9%	26.7%	26.7%	46.7%	0.0%	0.0%		0.0%
Arkansas	72.6%	24.1%	2.1%	0.5%	0.7%	0.0%	0.0%	28.6%	60.7%	7.1%	0.0%	3.6%	0.0%	0.0%
Colorado*	51.5%	10.3%	32.0%	1.1%	5.1%		0.0%							
Connecticut	53.9%	25.7%	19.0%	1.0%	0.3%									
Delaware*	54.3%	41.3%	4.0%	0.3%	0.0%		0.0%							
Georgia	63.0%	35.1%	1.5%	0.3%	0.0%	0.0%	0.1%	51.7%	48.3%	0.0%	0.0%	0.0%	0.0%	0.0%
Indiana	80.6%	14.3%	2.0%	0.2%	0.4%	0.1%	0.9%	65.0%	35.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Kansas	72.2%	17.8%	6.4%	0.4%	2.6%			42.9%	57.1%	0.0%	0.0%	0.0%		
Kentucky	86.5%	10.9%	0.8%	0.0%	0.1%	0.0%	1.6%	87.5%	12.5%	0.0%	0.0%	0.0%	0.0%	0.0%
Maryland	49.1%	46.5%	1.5%	0.1%	0.4%	0.3%	2.1%	33.3%	55.6%	0.0%	0.0%	11.1%	0.0%	0.0%
Massachusetts	67.7%	16.1%	8.1%	0.6%	0.4%	0.2%	7.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Median	66.2%	17.8%	3.3%	0.3%	0.8%	0.1%	0.8%	51.9%	35.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Wyoming	76.3%	2.0%	8.7%	0.8%	10.3%	0.4%	1.6%							
Wisconsin	65.3%	22.2%	3.3%	0.9%	8.2%		0.1%	35.9%	56.4%	2.6%	0.0%	5.1%		0.0%
Washington	66.9%	9.3%	11.3%	4.4%	7.1%		1.0%	50.0%	0.0%	25.0%	0.0%	25.0%		0.0%
Vermont*	91.6%	6.3%	0.0%	0.0%	0.0%		2.1%							
Texas	54.0%	23.5%	22.0%	0.4%	0.1%	0.0%	0.1%	10.7%	50.7%	38.7%	0.0%	0.0%	0.0%	0.0%
Tennessee	77.7%	20.5%	1.2%	0.3%	0.3%	0.0%		52.6%	47.4%	0.0%	0.0%	0.0%	0.0%	
South Dakota	40.4%	2.1%	1.5%	0.2%	55.4%	0.4%	0.0%	100.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
South Carolina	70.0%	27.1%	1.5%	0.0%	0.5%	0.0%	0.8%	51.9%	29.6%	7.4%	0.0%	7.4%	0.0%	3.7%
Rhode Island	67.6%	13.4%	12.0%	0.7%	2.8%		3.5%	100.0%	0.0%	0.0%	0.0%	0.0%		0.0%
Pennsylvania	65.5%	25.4%	6.3%	0.6%	0.4%		1.7%	60.0%	40.0%	0.0%	0.0%	0.0%		0.0%
Oregon	81.9%	5.4%	5.6%	1.9%	4.8%	0.4%	0.0%	55.6%	27.8%	5.6%	0.0%	11.1%	0.0%	0.0%
Oklahoma	57.5%	16.3%	6.4%	0.2%	19.1%	0.2%	0.2%	35.0%	55.0%	5.0%	0.0%	5.0%	0.0%	0.0%
Ohio	73.8%	24.2%	0.7%	0.2%	0.1%		0.9%	75.0%	25.0%	0.0%	0.0%	0.0%		0.0%
North Dakota*	59.1%	4.0%	3.1%	0.0%	32.9%	0.9%								
North Carolina	69.1%	26.3%	2.0%	0.2%	2.2%		0.2%	50.0%	41.7%	2.1%	0.0%	6.2%		0.0%
New York	49.3%	34.3%	12.5%	0.7%	1.1%		2.2%	63.6%	31.8%	4.5%	0.0%	0.0%		0.0%
Nebraska	66.2%	12.9%	10.1%	0.2%	8.9%	0.2%	1.4%	0.0%	0.0%	0.0%	0.0%	100.0%	0.0%	0.0%
Missouri	82.8%	14.7%	3.2%	0.3%	0.8%		0.0%	60.6%	36.6%	0.0%	0.0%	1.4%		1.4%
Mississippi	58.4%	41.0%	0.4%	0.0%	0.2%	0.0%	0.0%	53.8%	46.2%	0.0%	0.0%	0.0%	0.0%	0.0%
Minnesota	60.2%	18.0%	0.0%	3.3%	18.2%		0.3%	44.4%	22.2%	0.0%	0.0%	33.3%		0.0%

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

 Table 15
 Race/Ethnicity of Female Prisoners in Restrictive Housing

(n = 31)

	Black Prisoners	Hispanic Prisoners
% of Total Custodial Population % of Restrictive Housing	21.5% 42.1%	10.3% 9.3%
# of jurisdictions with over- representation in segregated housing as compared to the general population.	19	6
# of jurisdictions with under- representation in segregated housing as compared to the general population.	6	19

Age: Some correctional policies address age, including juvenile status, as a distinct consideration when individuals are considered for restrictive housing. The question of the placement of juveniles has come to the fore in a variety of contexts. For example, the American Correctional Association (ACA), the accrediting body for U.S. corrections departments, promulgated Restrictive Housing Performance Based Standards in 2016. The ACA stated that "Confinement of offenders under the age of eighteen in Extended Restrictive Housing is prohibited." The ACA defined "Extended Restrictive Housing" as holding prisoners in cell "for at least 22 hours per day and for more than 30 days." 95

Individuals over age sixty, now also in focus because of COVID-19, are another category of concern. Moreover, as discussed in a subsequent section, several states have limited or banned the placement of juveniles, sometimes defined to include people twenty-two or under, as well as regulated the placement of older adults in restrictive housing.

To understand the age distribution in restrictive housing, we asked jurisdictions to provide information about prisoners under the age of eighteen and then by age groups through fifty and older. Thirty-two jurisdictions responded with the numbers of male and female prisoners in the respective age cohorts. <sup>96</sup>

These thirty-two jurisdictions housed a total of 661,546 male prisoners in their total custodial populations,<sup>97</sup> delineated by age cohorts. Collecting their numbers, these jurisdictions identified 0.1% of total male prisoners in custody who were under the age of eighteen (866); 11.8% (77,925) who were reported to be between the ages eighteen and twenty-five; 31.8% (210,256) reported to be between the ages of twenty-six and thirty-five; 35.8% (237,072) reported to be between the ages of fifty.

Within these thirty-two jurisdictions, four jurisdictions reported holding a total of eight males under the age of eighteen in restrictive housing; <sup>98</sup> 5.9% (4,562) of male prisoners between the ages of eighteen and twenty-five in the total custodial population were in restrictive housing; 5.6% (11,717) of male prisoners between the ages of twenty-six and thirty-five were in restrictive

housing, 3.9% (9,117) of male prisoners between the ages of thirty-six to fifty were in restrictive housing, and 2.0% (2,752) of male prisoners over the age of fifty were in restrictive housing. As noted above, in the reporting jurisdictions, an average of 4.2% of all males were incarcerated in restrictive housing (see Figure 4). Thus younger males were in restrictive housing at higher than that average rate.

These 32 jurisdictions also provided information about 58,388 female prisoners in their total custodial populations, delineated by age cohorts.<sup>99</sup> Collecting their numbers, these jurisdictions reported that 0.1% (68) of the total female prisoners in custody were under the age of 18; 10.8% (6,305) were reported to be between the ages of eighteen and twenty-five; 38.3% (22,356) were between the ages of twenty-six to thirty-five; 37.7% (22,006) were reported to be between the ages of thirty-six and fifty; and 13.1% (7,653) were reported to be over the age of fifty.

No jurisdiction reported female prisoners under the age of eighteen in restrictive housing. Taking the numbers reported together, jurisdictions reported that 1.9% (120) of women between the ages of eighteen to twenty-five in the total custodial population were in restrictive housing; 1.0% (223) of women between the ages of twenty-six to thirty-five were in restrictive housing; 0.6% (121) of women between the ages of thirty-six to fifty were in restrictive housing; and 0.4% (33) of women over the age of fifty were in restrictive housing. As noted above, in the reporting jurisdictions, an average of 0.8% of all females were incarcerated in restrictive housing (see Figure 4). Thus, younger females were in restrictive housing at higher than that average rate.

Below in Figure 13 and Figure 14, we provide aggregate information about the proportions of the total custodial population and restrictive housing populations that these cohorts make up. We provide jurisdiction-by-jurisdiction data in Table 16, Table 17, Table 18, and Table 19.

Figure 13 Male Prisoners in Restrictive Housing and Total Custodial Populations by Age (n = 32)

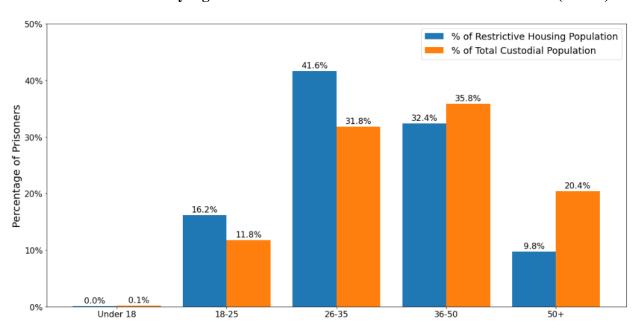


Figure 14 Female Prisoners in Restrictive Housing and Total Custodial Populations by Age (n = 32)

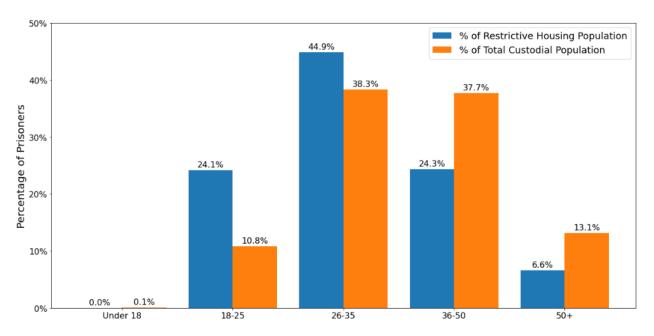


Table 16 Male Total Custodial and Restrictive Housing Populations by Age

 $(n = 32)^{\ddagger}$ 

		Total Cu	stodial Por	oulation		]	Restrictive	<b>Housing P</b>	opulation	
Jurisdiction	<18	18-25	26-35	36-50	50+	<18	18-25	26-35	36-50	50+
Arizona	43	4,222	12,876	14,050	6,795	0	271	874	633	141
Arkansas	10	1,861	4,471	5,289	2,680	0	277	687	568	152
Colorado*	8	1,330	4,137	4,751	2,500	0	0	0	0	0
Connecticut	44	1,861	4,075	3,956	2,092	0	42	45	16	3
Delaware*	31	618	1,369	1,342	862	0	0	0	0	0
Georgia	68	5,568	12,996	13,181	7,634	0	362	969	623	164
Indiana	353	3,027	7,743	9,273	4,137	0	203	616	565	170
Kansas	0	1,143	2,950	3,280	1,735	0	139	340	159	41
Kentucky	0	987	3,312	4,076	2,176	0	33	124	67	6
Louisiana	8	901	3,171	5,486	4,704	0	61	195	273	150
Maryland	41	2,352	6,446	5,666	3,778	0	205	540	284	71
Massachusetts	0	586	2,287	2,831	2,191	0	18	49	28	6
Minnesota	6	981	2,848	2,907	1,223	0	45	115	68	18
Mississippi	0	1,002	2,558	3,070	1,866	0	33	161	135	24
Missouri	2	2,879	8,147	9,120	5,324	1	398	880	656	252
Nebraska	9	833	1,675	1,718	838	0	79	111	55	8
New York	46	5,704	14,500	15,170	8,512	0	561	857	532	124
North Carolina	51	2,922	9,327	12,284	7,443	0	271	736	482	118
North Dakota*	0	186	599	533	232	0	0	0	0	0
Ohio	36	6,109	14,906	15,362	8,483	2	234	526	251	51
Oklahoma	34	1,413	4,302	5,718	3,643	1	105	330	380	132
Oregon	0	1,409	4,184	4,711	3,218	0	130	294	194	69
Pennsylvania	9	4,417	14,230	14,737	9,134	0	150	419	266	78
Rhode Island	2	436	835	808	440	0	19	24	15	6
South Carolina	16	2,154	5,496	6,110	3,321	0	126	273	142	34
South Dakota	0	551	1,149	1,084	549	0	18	21	13	2
Tennessee	8	1,981	6,323	7,867	3,624	4	132	579	542	177
Texas	26	15,312	39,918	48,181	27,993	0	392	1,448	1,833	659
Vermont*	1	172	500	436	227	0	0	0	0	0

Washington	0	1,704	5,471	5,891	3,231	0	117	258	177	49
Wisconsin	14	3,091	7,174	7,602	4,158	0	128	231	155	44
Wyoming	0	213	551	582	414	0	13	15	5	3
Total	866	77,925	210,526	237,072	135,157	8	4,562	11,717	9,117	2,752

<sup>&</sup>lt;sup>‡</sup> Montana, which provided different data subsequent to the time frame for aggregate analysis in this report, stated that its total male custodial population (1736) comprised 0 males under age 18, 170 between 18 and 25 years old, 510 between 26 and 35 years old, 616 between 36 and 50 years old, and 440 over 50 years old. Its male restrictive housing population (96) comprised 0 males under age 18, 13 between 18 and 25 years old, 43 between 26 and 35 years old, 26 between 36 and 50 years old, and 14 over 50 years old.

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Table 17 Percentage of Male Total Custodial and Restrictive Housing Populations by Age

(n = 32)

		Total Cu	stodial Por	oulation		<b>Restrictive Housing Population</b>							
Jurisdiction	<18	18-25	26-35	36-50	50+	<18	18-25	26-35	36-50	50+			
Arizona	0.1%	11.1%	33.9%	37.0%	17.9%	0.0%	14.1%	45.5%	33.0%	7.3%			
Arkansas	0.1%	13.0%	31.2%	37.0%	18.7%	0.0%	16.4%	40.8%	33.7%	9.0%			
Colorado*	0.1%	10.5%	32.5%	37.3%	19.6%								
Connecticut	0.4%	15.5%	33.9%	32.9%	17.4%	0.0%	39.6%	42.5%	15.1%	2.8%			
Delaware*	0.7%	14.6%	32.4%	31.8%	20.4%								
Georgia	0.2%	14.1%	32.9%	33.4%	19.4%	0.0%	17.1%	45.8%	29.4%	7.7%			
Indiana	1.4%	12.3%	31.6%	37.8%	16.9%	0.0%	13.1%	39.6%	36.4%	10.9%			
Kansas	0.0%	12.6%	32.4%	36.0%	19.1%	0.0%	20.5%	50.1%	23.4%	6.0%			
Kentucky	0.0%	9.4%	31.4%	38.6%	20.6%	0.0%	14.3%	53.9%	29.1%	2.6%			
Louisiana	0.1%	6.3%	22.2%	38.4%	33.0%	0.0%	9.0%	28.7%	40.2%	22.1%			
Maryland	0.2%	12.9%	35.3%	31.0%	20.7%	0.0%	18.6%	49.1%	25.8%	6.5%			
Massachusetts	0.0%	7.4%	29.0%	35.9%	27.8%	0.0%	17.8%	48.5%	27.7%	5.9%			
Minnesota	0.1%	12.3%	35.8%	36.5%	15.4%	0.0%	18.3%	46.7%	27.6%	7.3%			
Mississippi	0.0%	11.8%	30.1%	36.1%	22.0%	0.0%	9.3%	45.6%	38.2%	6.8%			
Missouri	0.0%	11.4%	32.2%	36.1%	21.1%	0.0%	18.2%	40.2%	30.0%	11.5%			
Nebraska	0.2%	16.4%	33.0%	33.9%	16.5%	0.0%	31.2%	43.9%	21.7%	3.2%			
New York	0.1%	13.0%	33.0%	34.5%	19.4%	0.0%	27.0%	41.3%	25.7%	6.0%			
North Carolina	0.2%	9.1%	29.1%	38.4%	23.2%	0.0%	16.9%	45.8%	30.0%	7.3%			
North Dakota*	0.0%	12.0%	38.6%	34.4%	15.0%								
Ohio	0.1%	13.6%	33.2%	34.2%	18.9%	0.2%	22.0%	49.4%	23.6%	4.8%			
Oklahoma	0.2%	9.4%	28.5%	37.8%	24.1%	0.1%	11.1%	34.8%	40.1%	13.9%			
Oregon	0.0%	10.4%	30.9%	34.8%	23.8%	0.0%	18.9%	42.8%	28.2%	10.0%			
Pennsylvania	0.0%	10.4%	33.5%	34.7%	21.5%	0.0%	16.4%	45.9%	29.1%	8.5%			
Rhode Island	0.1%	17.3%	33.1%	32.1%	17.5%	0.0%	29.7%	37.5%	23.4%	9.4%			
South Carolina	0.1%	12.6%	32.1%	35.7%	19.4%	0.0%	21.9%	47.5%	24.7%	5.9%			
South Dakota	0.0%	16.5%	34.5%	32.5%	16.5%	0.0%	33.3%	38.9%	24.1%	3.7%			
Tennessee	0.0%	10.0%	31.9%	39.7%	18.3%	0.3%	9.2%	40.4%	37.8%	12.3%			
Texas	0.0%	11.7%	30.4%	36.7%	21.3%	0.0%	9.1%	33.5%	42.4%	15.2%			
Vermont*	0.1%	12.9%	37.4%	32.6%	17.0%								

Washington	0.0%	10.5%	33.6%	36.1%	19.8%	0.0%	19.5%	42.9%	29.5%	8.2%
Wisconsin	0.1%	14.0%	32.6%	34.5%	18.9%	0.0%	22.9%	41.4%	27.8%	7.9%
Wyoming	0.0%	12.1%	31.3%	33.1%	23.5%	0.0%	36.1%	41.7%	13.9%	8.3%
Median	0.1%	12.2%	32.5%	35.8%	19.4%	0.0%	18.3%	42.9%	28.7%	7.5%

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Table 18 Female Total Custodial and Restrictive Housing Populations by Age

(n = 32)<sup>‡</sup>

		Total Cu	stodial Po	oulation	Restrictive Housing Population							
Jurisdiction	<18	18-25	26-35	36-50	50+	<18	18-25	26-35	36-50	50+		
Arizona	3	423	1,759	1,626	515	0	7	7	1	0		
Arkansas	0	140	513	484	170	0	9	15	4	0		
Colorado*	0	192	710	598	171	0	0	0	0	0		
Connecticut	2	114	344	336	118	0	0	0	0	0		
Delaware*	2	56	156	106	26	0	0	0	0	0		
Georgia	3	582	1,709	1,760	572	0	8	14	3	4		
Indiana	41	302	1,034	1,033	239	0	2	13	4	1		
Kansas	0	123	342	335	97	0	1	3	3	0		
Kentucky	0	64	348	377	125	0	0	5	3	0		
Louisiana	0	0	0	0	0	0	0	0	0	0		
Maryland	1	79	301	262	133	0	3	3	3	0		
Massachusetts	0	54	204	198	73	0	0	1	0	0		
Minnesota	0	70	240	230	60	0	2	5	2	0		
Mississippi	0	76	372	374	118	0	1	6	4	2		
Missouri	0	278	1,078	1,060	284	0	13	34	20	4		
Nebraska	0	55	173	156	42	0	1	2	0	0		
New York	3	292	780	735	324	0	5	9	7	1		
North Carolina	1	215	1,010	1,164	452	0	11	23	12	2		
North Dakota*	0	40	108	65	12	0	0	0	0	0		
Ohio	0	478	1,640	1,447	426	0	3	1	0	0		
Oklahoma	6	238	991	902	284	0	3	5	9	3		
Oregon	0	136	451	430	195	0	2	9	5	2		
Pennsylvania	0	273	1,011	937	426	0	4	1	0	0		
Rhode Island	0	25	53	50	14	0	0	1	1	0		
South Carolina	0	147	476	487	194	0	4	11	9	3		
South Dakota	0	99	238	168	20	0	0	0	1	0		
Tennessee	0	153	661	766	434	0	4	7	4	4		
Texas	6	1,241	4,326	4,776	1,694	0	24	29	17	5		
Vermont*	0	15	56	58	14	0	0	0	0	0		

Washington	0	128	576	475	192	0	2	2	0	0
Wisconsin	0	186	598	519	197	0	11	17	9	2
Wyoming	0	31	98	92	32	0	0	0	0	0
Total	68	6,305	22,356	22,006	7,653	0	120	223	121	33

<sup>&</sup>lt;sup>‡</sup> Montana, which provided different data subsequent to the time frame for aggregate analysis in this report, stated that its total female custodial population (239) comprised 0 females under age 18, 25 between 18 and 25 years old, 103 between 26 and 35 years old, 81 between 36 and 50 years old, and 30 over 50 years old. Its female restrictive housing population (5) comprised 0 females under age 18, 1 between 18 and 25 years old, one between 26 and 35 years old, 3 between 36 and 50 years old, and 0 over 50 years old.

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Table 19 Percentage of Female Total Custodial and Restrictive Housing Populations by Age

(n = 31)

	<b>Total Custodial Population</b>					<b>Restrictive Housing Population</b>							
Jurisdiction	<18	18-25	26-35	36-50	50+	<18	18-25	26-35	36-50	50+			
Arizona	0.1%	9.8%	40.7%	37.6%	11.9%	0.0%	46.7%	46.7%	6.7%	0.0%			
Arkansas	0.0%	10.7%	39.3%	37.0%	13.0%	0.0%	32.1%	53.6%	14.3%	0.0%			
Colorado*	0.0%	11.5%	42.5%	35.8%	10.2%								
Connecticut	0.2%	12.5%	37.6%	36.8%	12.9%								
Delaware*	0.6%	16.2%	45.1%	30.6%	7.5%								
Georgia	0.1%	12.6%	36.9%	38.0%	12.4%	0.0%	27.6%	48.3%	10.3%	13.8%			
Indiana	1.5%	11.4%	39.0%	39.0%	9.0%	0.0%	10.0%	65.0%	20.0%	5.0%			
Kansas	0.0%	13.7%	38.0%	37.2%	10.8%	0.0%	14.3%	42.9%	42.9%	0.0%			
Kentucky	0.0%	7.0%	38.1%	41.2%	13.7%	0.0%	0.0%	62.5%	37.5%	0.0%			
Maryland	0.1%	10.2%	38.8%	33.8%	17.1%	0.0%	33.3%	33.3%	33.3%	0.0%			
Massachusetts	0.0%	10.2%	38.6%	37.4%	13.8%	0.0%	0.0%	100.0%	0.0%	0.0%			
Minnesota	0.0%	11.7%	40.0%	38.3%	10.0%	0.0%	22.2%	55.6%	22.2%	0.0%			
Mississippi	0.0%	8.1%	39.6%	39.8%	12.6%	0.0%	7.7%	46.2%	30.8%	15.4%			
Missouri	0.0%	10.5%	40.6%	40.0%	10.7%	0.0%	18.3%	47.9%	28.2%	5.6%			
Nebraska	0.0%	12.9%	40.6%	36.6%	9.9%	0.0%	33.3%	66.7%	0.0%	0.0%			
New York	0.1%	13.7%	36.6%	34.4%	15.2%	0.0%	22.7%	40.9%	31.8%	4.5%			
North Carolina	0.0%	7.6%	35.5%	41.0%	15.9%	0.0%	22.9%	47.9%	25.0%	4.2%			
North Dakota*	0.0%	17.8%	48.0%	28.9%	5.3%					_			
Ohio	0.0%	12.0%	41.1%	36.3%	10.7%	0.0%	75.0%	25.0%	0.0%	0.0%			
Oklahoma	0.2%	9.8%	40.9%	37.3%	11.7%	0.0%	15.0%	25.0%	45.0%	15.0%			
Oregon	0.0%	11.2%	37.2%	35.5%	16.1%	0.0%	11.1%	50.0%	27.8%	11.1%			
Pennsylvania	0.0%	10.3%	38.2%	35.4%	16.1%	0.0%	80.0%	20.0%	0.0%	0.0%			
Rhode Island	0.0%	17.6%	37.3%	35.2%	9.9%	0.0%	0.0%	50.0%	50.0%	0.0%			
South Carolina	0.0%	11.3%	36.5%	37.3%	14.9%	0.0%	14.8%	40.7%	33.3%	11.1%			
South Dakota	0.0%	18.9%	45.3%	32.0%	3.8%	0.0%	0.0%	0.0%	100.0%	0.0%			
Tennessee	0.0%	7.6%	32.8%	38.0%	21.5%	0.0%	21.1%	36.8%	21.1%	21.1%			
Texas	0.0%	10.3%	35.9%	39.7%	14.1%	0.0%	32.0%	38.7%	22.7%	6.7%			
Vermont*	0.0%	10.5%	39.2%	40.6%	9.8%								
Washington	0.0%	9.3%	42.0%	34.6%	14.0%	0.0%	50.0%	50.0%	0.0%	0.0%			

Wisconsin	0.0%	12.4%	39.9%	34.6%	13.1%	0.0%	28.2%	43.6%	23.1%	5.1%
Wyoming	0.0%	12.3%	38.7%	36.4%	12.6%					
Median	0.0%	11.3%	39.0%	37.0%	12.6%	0.0%	22.2%	46.7%	23.1%	0.0%

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

#### **Subpopulations**

We have discussed some demographic distinctions. In addition, given the concerns about the harms of placement in restrictive housing, other specific subpopulations have garnered attention. Here, we provide an overview of data on incarcerated people identified as having a serious mental illness as well as data on the use of restrictive housing for pregnant women and transgender individuals.

Prisoners with Mental Health Issues: Reports identify a significant number of incarcerated people who have mental health issues, with a 2017 estimate as high as one-third of the prison population. <sup>100</sup> Even as debate exists as to what level of distress should create buffers to placement in restrictive housing, a consensus has emerged that individuals identified as having serious mental illness (SMI) should not be placed into restrictive housing.

Illustrative of these concerns are the ACA Restrictive Housing Performance Based Standards, which call for regular "behavioral health assessments" for individuals placed in restrictive housing. Standard 4-RH-0010 provides that corrections agencies should have written policies to ensure that "a mental health practitioner/provider" evaluates and files written reports on prisoners "placed in restrictive housing within 7 days of placement." If an individual is held "beyond 30 days, a behavioral health assessment by a mental health practitioner/provider" is to be completed "at least every 30 days" for individuals diagnosed with a "behavioral health disorder and more frequently if clinically indicated." If an assessment concludes that a person has no "behavioral health disorder," reassessments are to occur "every 90 days and more frequently if clinically indicated." Those evaluations are to take place in "a confidential area." 104

Further, the ACA Standards detail that, "at a minimum," the mental health provider is to inquire into whether a person has a present "suicide ideation" or a "history of suicidal behavior," is on "prescribed psychotropic medication," has a current "mental health complaint," is being treated for "mental health problems," has "a history of inpatient and outpatient psychiatric treatment," or has a history of "treatment for substance abuse." The mental health provider must also observe an individual's "general appearance and behavior" and look for "evidence of abuse and/or trauma" or "current symptoms of psychosis, depression, anxiety, and/or aggression." The provider is then to conclude whether a referral to mental health care is necessary and whether "emergency treatment" is needed. 106

The ACA Standards also provide that once a person is placed in restrictive housing, both written policies and practices should require that prisoners are "personally observed by a correctional officer twice per hour, but no more than 40 minutes apart, on an irregular schedule." Individuals who are "violent or mentally disordered or who demonstrate unusual or bizarre behavior or self-harm" are to be observed more often. Prisoners who are "suicidal" are to be under continuous observation, all of which is to be logged. The need for observation is a decision for a "qualified mental health professional." Unless "medical attention is needed more frequently," each person in restrictive housing is to be visited daily by health care personnel in an announced and recorded visit and weekly by a "mental health staff" member, unless more frequent visits are called for by health personnel.

The ACA Standards state that "the agency will not place a person with serious mental illness in Extended Restrictive Housing," defined as "housing that separates the offender from contact with the general population while restricting an offender/inmate to his/her cell for at least 22 hours per day and for more than 30 days for the safe and secure operation of the facility." The ACA defines serious mental illness as "Psychotic Disorders, Bipolar Disorders, and Major Depressive Disorder; any diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interferes with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a qualified mental health professional(s)." 114

To gather information about the use of restrictive housing for persons identified as facing mental health challenges, the 2019 CLA-Liman survey asked each jurisdiction about people whom it deemed to have "serious mental illness" (SMI), including the total number as well as the genders, races, and ages of the seriously mentally ill population both in the total custodial population and in restrictive housing. Thirty-three jurisdictions provided data on both the total custodial population with SMI and the population with SMI in restrictive housing for male prisoners, and thirty for female prisoners.

An additional word of explanation is needed about this aspect of the questionnaire. As noted in previous reports, and as again reflected in jurisdictions' responses to this survey, definitions of serious mental illness vary substantially across jurisdictions, as do the policies governing placement of individuals with mental health issues—classified as "serious" or otherwise—in restrictive housing. In addition to correctional agency rules, some legislatures provide statutory direction and, in some jurisdictions, litigation has resulted in specified definitions and constraints.<sup>117</sup>

Some jurisdictions have adopted ACA's definition of serious mental illness.<sup>118</sup> Some also limit their definition to certain diagnoses, though the scope of included diagnoses range;<sup>119</sup> other jurisdictions rely heavily on mental health professionals' individual assessments of how serious prisoners' diagnoses are.<sup>120</sup> Still other jurisdictions have more detailed descriptions, such as applying to anyone "[e]xhibiting impaired emotional, cognitive, or behavioral functioning that interferes seriously with an individual's ability to function adequately except with supportive treatment or services. The individual also must: a) currently have or have had within the past year a diagnosed mental disorder, and b) currently exhibit significant signs and symptoms of a mental disorder."<sup>121</sup> Some also have several paragraphs or pages of descriptions.<sup>122</sup>

Given this variation in scope and detail, a person could be classified as seriously mentally ill in one jurisdiction but not in another. We therefore have neither aggregated nor scaled the data but rather provide, in Table 20 and Table 21, the numbers of persons in the general population with serious mental illness and the numbers placed in restrictive housing, as provided by each jurisdiction's own account. We provide the definitions used in thirty-nine jurisdictions in Appendix C.

Table 20 Male Prisoners with Serious Mental Illness (SMI, variously defined) in Restrictive Housing by Jurisdiction (n = 33)

Jurisdiction	Total Male Custodial Population	Male Custodial Population with SMI	% Male Custodial Population with SMI	Male Population with SMI in RH	% Male Population with SMI in RH
Arizona	37,986	1,780	4.7%	71	4.0%
Arkansas	14,311	303	2.1%	22	7.3%
Colorado*	12,726	823	6.5%	0	0.0%
Connecticut	12,028	399	3.3%	3	0.8%
Delaware*	4,222	689	16.3%	0	0.0%
Georgia	39,447	2,050	5.2%	187	9.1%
Hawaii**	2,958	253	8.6%	12	4.7%
Indiana	24,533	39	0.2%	25	64.1%
Kansas	9,105	1,550	17.0%	209	13.5%
Kentucky	10,551	324	3.1%	9	2.8%
Louisiana	14,269	1,990	13.9%	145	7.3%
Maine	2,073	160	7.7%	0	0.0%
Maryland	18,283	1,934	10.6%	234	12.1%
Massachusetts	7,895	2,074	26.3%	40	1.9%
Minnesota	7,965	431	5.4%	14	3.2%
Mississippi	8,496	10	0.1%	1	10.0%
Missouri	25,271	5,196	20.6%	757	14.6%
Nebraska	5,073	1,380	27.2%	77	5.6%
New York	43,932	2,137	4.9%	15	0.7%
North Carolina	32,027	17,305	54.0%	39	0.2%
North Dakota*	1,550	363	23.4%	0	0.0%
Ohio	44,896	3,785	8.4%	81	2.1%
Oklahoma	15,110	5,249	34.7%	765	14.6%
Oregon	13,522	1,032	7.6%	56	5.4%
Pennsylvania	42,527	3,366	7.9%	0	0.0%
Rhode Island	2,521	138	5.5%	9	6.5%
South Dakota	3,333	117	3.5%	0	0.0%
Tennessee	19,803	423	2.1%	40	9.5%
Texas	131,430	1,304	1.0%	0	0.0%
Vermont*	1,336	47	3.5%	0	0.0%
Washington	16,297	1,750	10.7%	119	6.8%
Wisconsin	22,039	1,370	6.2%	80	5.8%
Wyoming	1,760	74	4.2%	0	0.0%
Total (All jurisdictions)	649,275	59,845	6.5% (median)	3,010	4.0% (median)

Total (Jurisdictions with RH under our definition)	629,411	57,923	6.2% (median)	3,010	5.4% (median)
our aciminon,					

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Table 21 Female Prisoners with Serious Mental Illness (SMI, variously defined) in Restrictive Housing by Jurisdiction (n = 30)

Jurisdiction	Total Female Custodial Population	Female Custodial Population with SMI	% Female Custodial Population with SMI	Female Population with SMI in RH	% Female Population with SMI in RH
Arizona	4,326	311	7.2%	5	1.6%
Arkansas	1,307	54	4.1%	1	1.9%
Colorado*	1,671	292	17.5%	0	0.0%
Connecticut	914	88	9.6%	0	0.0%
Delaware*	346	120	34.7%	0	0.0%
Georgia	4,626	53	1.1%	4	7.5%
Hawaii**	603	74	12.3%	5	6.8%
Indiana	2,649	3	0.1%	1	33.3%
Kansas	900	213	23.7%	3	1.4%
Kentucky	914	179	19.6%	3	1.7%
Maine	216	40	18.5%	1	2.5%
Maryland	776	69	8.9%	0	0.0%
Massachusetts	529	355	67.1%	1	0.3%
Minnesota	600	72	12.0%	1	1.4%
Missouri	2,653	953	35.9%	36	3.8%
Nebraska	426	148	34.7%	1	0.7%
New York	2,134	167	7.8%	0	0.0%
North Dakota*	225	76	33.8%	0	0.0%
Ohio	3,991	1,174	29.4%	2	0.2%
Oklahoma	2,421	1,640	67.7%	29	1.8%
Oregon	1,212	223	18.4%	8	3.6%
Pennsylvania	2,647	416	15.7%	0	0.0%
Rhode Island	142	13	9.2%	0	0.0%
South Dakota	525	42	8.0%	1	2.4%
Tennessee	2,014	48	2.4%	1	2.1%
Texas	12,043	87	0.7%	0	0.0%
Vermont*	143	5	3.5%	0	0.0%

<sup>\*\*</sup>Hawaii reported having one male prisoner in restrictive housing across its total custodial population, and reported that twelve (12) male prisoners with SMI were in restrictive housing. We were not able to reconcile the differences.

Washington	1,371	152	11.1%	1	0.7%
Wisconsin	1,500	448	29.9%	30	6.7%
Wyoming	253	22	8.7%	0	0.0%
Total (All Jurisdictions)	54,077	7,537	12.1% (Median)	134	1.0%
Total (All Jurisdictions With Restrictive Housing Populations)	51,692	7,044	11.5% (Median)	134	1.5%

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

We also sought to learn about the intersection of gender and mental illness with race and with age. Thirty jurisdictions provided information about male prisoners with serious mental illness by race and ethnicity, and twenty-eight jurisdictions provided information about female prisoners with serious mental illness by race and ethnicity. Tables 22 and 23 provide the information, jurisdiction-by-jurisdiction. In addition, thirty-one jurisdictions provided information by age about male prisoners with serious mental illness, and twenty-nine jurisdictions provided information by age about female prisoners with serious mental illness. This information is provided by jurisdiction in Tables 24 and 25. Jurisdictions that reported having no prisoners with serious mental illnesses in restrictive housing were included only if they also delineated the total prison population with a serious mental illness by race/ethnicity or age. Additionally, in terms of serious mental illness data by age, some jurisdictions reported data only for prisoners in restrictive housing. For these jurisdictions, total male or female prisoners populations are not distinguished by age group.

<sup>\*\*</sup>Hawaii reported having no female prisoners in restrictive housing across its total custodial population, and reported that five female prisoners with SMI were in restrictive housing. We were not able to reconcile the differences.

Table 22 Male Prisoners with Serious Mental Illness by Race and Ethnicity in the Total Custodial and Restrictive Housing Populations

(n = 30)

Total Custodial Population									Restrictive Housing Population							
Jurisdiction	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	Total <sup>†</sup>	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	Total <sup>†</sup>
Arizona	834	394	459	8	57		28	1,780	29	13	25	1	3		0	71
Arkansas	134	162	5	1	1	0	0	303	8	14	0	0	0	0	0	22
Colorado*	402	194	190	9	28		0	823	0	0	0	0	0		0	0
Connecticut	145	147	97	6	4			399	0	2	1	0	0			3
Delaware*	304	358	24	2	0		1	689	0	0	0	0	0		0	0
Georgia	731	1,267	40	10	1	0	1	2,050	49	136	2	0	0	0	0	187
Hawaii	66	21	5	56	2	88	15	253	0	0	0	0	1	0	0	12
Indiana	21	15	3	0	0	0	0	39	13	10	2	0	0	0	0	25
Kansas	971	492	39	9	39			1,550	116	60	28	1	4			209
Kentucky	234	82	3	0	0	0	5	324	8	1	0	0	0	0	0	9
Louisiana	609	1,375	3	1	2	0		1,990	33	111	1	0	0	0		145
Maryland	638	1,213	39	3	19	2	20	1,934	83	135	11	0	3	0	2	234
Massachusetts	1,046	521	456	0	0	0	51	2,074	21	9	10	0	0	0	0	40
Minnesota	251	138	0	8	34		0	431	4	5	0	0	5		0	14
Mississippi	4	6	0	0	0	0	0	10	0	1	0	0	0	0	0	1
Nebraska	840	324	134	7	63	1	11	1,380	41	21	11	0	3	0	1	77
New York	561	1,038	460	16	22		40	2,137	5	10	0	0	0		0	15
North Carolina	9,755	6,805	254	45	382		64	17,305	12	24	0	0	2		1	39
North Dakota*	251	37	15	2	57	1		363	0	0	0	0	0	0		0
Ohio	2,302	1,367	84	3	9		20	3,785	45	34	1	0	0		1	81
Oklahoma	3,234	1,212	232	12	541	4	14	5,249	284	165	33	1	51	2	3	539
Oregon	782	110	75	18	44	2	1	1,032	36	11	3	3	3	0	0	56
Pennsylvania	1,469	1,600	272	8	3		14	3,366	0	0	0	0	0		0	0
Rhode Island	69	38	29	2	0		0	138	3	3	3	0	0		0	9
South Dakota	75	10	3	1	28	0	0	117	0	0	0	0	0	0	0	0

Tennessee	268	146	8	0	0	1		423	17	22	1	0	0	0		40
Vermont*	42	3	0	0	1		1	47	0	0	0	0	0		0	0
Washington	1,097	352	151	56	70		24	1,750	70	25	12	1	9		2	119
Wisconsin	866	545	113	10	65		1	1,370	35	31	11	1	2		0	80
Wyoming	57	9	5	0	3	0	0	74	0	0	0	0	0	0	0	0
TOTAL	28,058	19,981	3,198	293	1,475	99	311	53,185	912	843	155	8	86	2	10	2,027

<sup>&</sup>lt;sup>†</sup> Totals include all prisoners reported to have SMI within a jurisdiction, whether or not the jurisdiction had race information for all prisoners with SMI.

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Table 23 Female Prisoners with Serious Mental Illness by Race and Ethnicity in the Total Custodial and Restrictive Housing Populations

(n = 28)

	<b>Total Custodial Population</b>										<b>Restrictive Housing Population</b>								
Jurisdiction	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	Total <sup>†</sup>	White	Black	Hisp.	Asian	Am. Ind.	NHPI	Other	Total <sup>†</sup>			
Arizona	160	58	57	3	22		11	311	1	2	2	0	0		0	5			
Arkansas	34	17	2	0	1	0	0	54	1	0	0	0	0	0	0	1_			
Colorado*	154	38	82	5	13		0	292	0	0	0	0	0		0	0			
Connecticut	38	29	20	0	1			88	0	0	0	0	0			0			
Delaware*	69	46	5	0	0		0	120	0	0	0	0	0		0	0			
Georgia	23	27	2	1	0	0	0	53	2	2	0	0	0	0	0	4			
Hawaii	26	5	3	10	0	26	4	74	1	0	0	0	0	3	0	5			
Indiana	0	3	0	0	0	0	0	3	0	1	0	0	0	0	0	1			
Kansas	138	41	24	2	8			213	0	3	0	0	0			3			
Kentucky	148	25	2	0	0	0	4	179	3	0	0	0	0	0	0	3			
Maryland	37	30	1	0	0	0	1	69	0	0	0	0	0	0	0	0			
Massachusetts	249	52	28	0	0	0	26	355	1	0	0	0	0	0	0	1			
Minnesota	39	19	0	3	11		0	72	0	1	0	0	0		0	1_			
Nebraska	99	22	16	0	11	0	0	148	0	0	0	0	1	0	0	1			
New York	53	87	22	0	2		3	167	0	0	0	0	0		0	0			
North Carolina	4,147	2,839	168	11	76		7	7,248	1	0	0	0	0		0	1			
North Dakota*	47	2	2	0	25	0		76	0	0	0	0	0	0		0			
Ohio	859	293	6	4	2		10	1,174	1	1	0	0	0		0	2			
Oklahoma	977	257	79	3	317	3	4	1,640	3	7	1	0	0	0	0	11			
Oregon	188	13	8	3	10	1	0	223	5	2	0	0	1	0	0	8			
Pennsylvania	246	131	25	2	3		9	416	0	0	0	0	0		0	0			
Rhode Island	10	3	0	0	0		0	13	0	0	0	0	0		0	0			
South Dakota	23	0	1	0	18	0	0	42	1	0	0	0	0	0	0	1			
Tennessee	32	16	0	0	0	0		48	1	0	0	0	0	0		1			

Vermont*	4	0	0	0	0		1	5	0	0	0	0	0		0	0
Washington	107	14	16	6	6		3	152	1	0	0	0	0		0	1
Wisconsin	311	103	19	6	35		0	448	14	13	0	0	3		0	30
Wyoming	17	1	2	0	1	0	1	22	0	0	0	0	0	0	0	0
Total	8,236	4,171	590	59	562	30	84	13,705	36	32	3	0	5	3	0	79

<sup>†</sup>Totals include all prisoners reported to have SMI within a jurisdiction whether or not the jurisdiction had race information for all prisoners with SMI.

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Table 24 Male Prisoners with Serious Mental Illness by Age in the Total Custodial and Restrictive Housing Populations

(n = 31)

		<b>Total Cu</b>	stodial Po	pulation			<b>Restrictive Housing Population</b>								
Jurisdiction	<18	18-25	26-35	36-50	50+	Total <sup>†</sup>	<18	18-25	26-35	36-50	50+	Total <sup>†</sup>			
Arizona	1	85	513	702	479	1,780	0	3	29	30	9	71			
Arkansas	0	8	81	142	72	303	0	1	10	9	2	22			
Colorado*	0	61	237	327	198	823	0	0	0	0	0	0			
Connecticut	1	75	132	114	77	399	0	0	3	0	0	3			
Delaware*	0	84	193	256	156	689	0	0	0	0	0	0			
Georgia	0	200	652	720	478	2,050	0	16	89	63	19	187			
Hawaii	0	21	63	96	73	253	0	0	1	5	0	6			
Indiana						39	0	1	13	8	3	25			
Kansas	0	170	525	604	342	1,641	0	36	93	66	14	209			
Kentucky	0	16	71	126	111	324	0	1	1	7	0	9			
Louisiana	0	67	352	805	766	1,990	0	11	24	62	48	145			
Maryland	0	164	726	659	385	1,934	0	27	125	66	16	234			
Massachusetts	0	144	582	815	533	2,074	0	5	21	11	3	40			
Minnesota	0	32	134	175	90	431	0	0	7	7	0	14			
Mississippi	0	2	3	2	3	10	0	0	0	1	0	1			
Missouri						5,196	0	118	314	232	93	757			
Nebraska	1	177	472	514	216	1,380	0	16	35	23	3	77			
New York	1	151	554	811	620	2,137	0	0	6	6	3	15			
North Carolina	0	0	775	7,377	9,153	17,305	0	0	4	24	11	39			
North Dakota*	0	37	137	121	68	363	0	0	0	0	0	0			
Ohio	0	300	1,063	1,447	975	3,785	0	10	41	27	3	81			
Oklahoma	16	441	1,557	2,130	1,105	5,249	0	54	171	235	79	765			
Oregon	0	62	266	409	295	1,032	0	6	20	20	10	56			
Pennsylvania	1	181	818	1,265	1,101	3,366	0	0	0	0	0	0			
Rhode Island	0	16	51	50	21	138	0	0	3	5	1	9			
South Dakota	0	8	36	46	27	117	0	0	0	0	0	0			
Tennessee	0	44	98	158	123	423	0	5	14	13	8	40			
Vermont*	0	5	11	14	17	47	0	0	0	0	0	0			
Washington	0	111	504	677	458	1,750	0	14	51	38	16	119			

Wisconsin	0	98	380	638	484	1,370	0	9	31	29	11	80
Wyoming	0	2	22	25	25	74	0	0	0	0	0	0
Total	21	2,762	11,008	21,225	18,451	58,472	0	333	1,106	987	352	3,004

<sup>&</sup>lt;sup>†</sup> Totals include all prisoners reported to have SMI within a jurisdiction whether or not the jurisdiction had age information for all prisoners with SMI.

<sup>\*</sup> These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twenty-two hours per day for fifteen consecutive days or more.

Table 25 Female Prisoners with Serious Mental Illness by Age in the Total Custodial and Restrictive Housing Populations

(n = 29)

		Total Cu	stodial Po	pulation		Restrictive Housing Population								
Jurisdiction	<18	18-25	26-35	36-50	50+	Total <sup>†</sup>	<18	18-25	26-35	36-50	50+	Total <sup>†</sup>		
Arizona	0	24	87	138	62	311	0	1	3	1	0	5		
Arkansas	0	3	18	19	14	54	0	0	1	0	0	1		
Colorado*	0	22	112	135	23	292	0	0	0	0	0	0		
Connecticut	0	14	31	29	14	88	0	0	0	0	0	0		
Delaware*	0	12	49	46	13	120	0	0	0	0	0	0		
Georgia	0	3	12	22	16	53	0	1	2	0	1	4		
Hawaii	0	5	25	27	17	74	0	1	3	0	0	4		
Indiana						3	0	0	1	0	0	1		
Kansas	0	22	90	61	16	213	0	0	2	1	0	3		
Kentucky	0	13	79	66	21	179	0	0	2	1	0	3		
Maryland	0	2	30	24	13	69	0	0	0	0	0	0		
Massachusetts	0	40	135	136	44	355	0	0	1	0	0	1		
Minnesota	0	5	19	36	12	72	0	0	0	1	0	1		
Missouri						953	0	6	17	12	1	36		
Nebraska	0	12	59	59	18	148	0	0	1	0	0	1		
New York	0	7	40	69	51	167	0	0	0	0	0	0		
North Carolina	0	0	162	2,931	4,155	7,248	0	0	0	1	0	1		
North Dakota*	0	9	40	24	3	76	0	0	0	0	0	0		
Ohio	0	116	451	466	141	1,174	0	2	0	0	0	2		
Oklahoma	3	157	658	640	182	1,640	0	2	2	5	2	29		
Oregon	0	14	75	88	46	223	0	0	6	1	1	8		
Pennsylvania	0	34	127	169	86	416	0	0	0	0	0	0		
Rhode Island	0	3	4	4	2	13	0	0	0	0	0	0		
South Dakota	0	5	21	14	2	42	0	0	0	1	0	1		
Tennessee	0	3	6	28	11	48	0	0	1	0	0	1		
Vermont*	0	1	0	3	1	5	0	0	0	0	0	0		
Washington	0	6	51	65	30	152	0	1	0	0	0	1		
Wisconsin	0	44	182	179	69	448	0	8	11	8	3	30		
Wyoming	0	2	5	14	1	22	0	0	0	0	0	0		
Total	3	578	2,568	5,492	5,063	14,658	0	22	53	32	8	133		

<sup>†</sup> Totals include all prisoners reported to have SMI within a jurisdiction whether or not the jurisdiction had age information for all prisoners with SMI.

\* These jurisdictions did not have prisoners in restrictive housing as defined by the survey, which defined restrictive housing as being confined to a cell for an average of twentytwo hours per day for fifteen consecutive days or more.

*Pregnant Prisoners:* Restrictive housing has sometimes been used as a placement for prisoners identified as "different" or in need of protection on various metrics, including being pregnant. Current ACA Standards provide that "female inmates determined to be pregnant" should not be housed in extended restrictive housing. <sup>126</sup> We sought to learn how many pregnant prisoners were in the custodial population as a whole and how many were placed in restrictive housing.

Thirty-one jurisdictions reported information on the total number of pregnant prisoners both in their general custodial and in their restrictive housing populations. <sup>127</sup> In addition, two jurisdictions provided the number of pregnant prisoners among one of these populations. <sup>128</sup> Of the thirty-one jurisdictions that provided information on both populations, two reported that, as of the summer of 2019, <sup>129</sup> they housed no pregnant prisoners in their total custodial populations. <sup>130</sup> The other twenty-nine jurisdictions reported that they counted a cumulative total of 361 pregnant women prisoners in their total custodial populations. <sup>131</sup> One jurisdiction reported having one pregnant prisoner held in restrictive housing; <sup>132</sup> the rest reported having none.

Transgender Prisoners: As with pregnancy, "protection" has been a basis for putting other persons with specific needs in restrictive housing. Concerns about the misuse of restrictive housing as a placement for transgender individuals prompted the ACA in 2016 to promulgate a Standard that prisoners not be "placed in Restrictive Housing on the basis of Gender Identity alone." The 2019 survey sought to learn about transgender prisoners in the total custodial population and in restrictive housing.

Thirty-five jurisdictions responded about how they identify transgender prisoners, of which one indicated that it did not track transgender prisoners. <sup>134</sup> For the majority of jurisdictions, a prisoner is identified as transgender by self-report; other avenues may also be available for identifying transgender prisoners. <sup>135</sup> A few jurisdictions require a gender dysphoria diagnosis for prisoners to be identified as transgender after the individual has self-identified. <sup>136</sup> Three jurisdictions identified medical determinations or procedures that were not explicitly initiated by a prisoner's self-identification as means of identifying transgender prisoners. <sup>137</sup> In Appendix D, we detail the methods of identification.

Twenty-seven jurisdictions provided information about the number of transgender prisoners in total custodial population and restrictive housing, <sup>138</sup> an additional four jurisdictions reported the number of transgender prisoners only within total custodial population, <sup>139</sup> and one was able to report the number only within restrictive housing. <sup>140</sup> Among the twenty-seven jurisdictions that provided information on their total custodial populations, one jurisdiction reported having no transgender prisoners in its total custodial population. <sup>141</sup> The remaining jurisdictions, which include three that do not have restrictive housing using this survey's definition, reported a total of 2,371 transgender prisoners in their total custodial populations and 112 transgender prisoners in restrictive housing. <sup>142</sup> The percentage of transgender prisoners in restrictive housing within these jurisdictions ranged from 0% <sup>143</sup> to 14.3% <sup>144</sup> of transgender prisoners.

# III. Dimensions of Living in Restrictive Housing: A 2019 Snapshot

As we have recounted in prior reports in this series, dozens of departments of corrections have revised their policies to reduce or eliminate the practice of holding people in cells an average of twenty-two hours or more per day for fifteen days or more. For the 2019 data collection, we again asked about policies and reforms. In addition to questions focused on entry, oversight, programs, release, and the impact of the 2016 ACA Performance Based Standards, we included new questions about time out-of-cell, mental health care, and subpopulations. The survey also asked jurisdictions about what they would like to do, if resources were available, in terms of time out-of-cell.

Four jurisdictions reported that they did not have any individuals in restrictive housing as we defined it.<sup>145</sup> These four were part of the thirty-nine jurisdictions that responded to some questions on policies.<sup>146</sup> Several jurisdictions provided copies of their restrictive housing regulations, policies, or additional materials. Because not all jurisdictions responded to every question, the total number of responding jurisdictions differs for many of the questions discussed in this section.

### Criteria for Placement in Restrictive Housing

The survey asked jurisdictions to specify the criteria for placement in restrictive housing. Thirty-four jurisdictions provided data. All thirty-four jurisdictions reported that they put prisoners in restrictive housing if they pose a threat to others, if they engage in "physical violence against staff," or if they engage in "physical violence against another prisoner."

The survey also asked whether prisoners were placed in restrictive housing on the basis of "drug or alcohol use," "self-harm," "attempted escape," "escape," a prisoner's "underlying offense of conviction or sentence," and other criteria. Of the criteria listed in the survey, some of the bases for placement in restrictive housing that spanned the jurisdictions were posing "a threat to the security or orderly operation of the institution" (thirty-three jurisdictions), <sup>148</sup> escape<sup>149</sup> and attempted escape<sup>150</sup> (thirty-three jurisdictions each) and possession of a weapon (thirty-one jurisdictions). <sup>151</sup>

The survey also sought information about the numbers of individuals placed in restrictive housing for each of the criteria used by the jurisdictions. Because individuals could be placed in restrictive housing on multiple grounds, as well as for reasons that did not fit the categories listed in the survey, this question did not yield information beyond the appreciation of the difficulties of obtaining cross-jurisdictional, clear comparisons on the drivers of individual decisions to use restrictive housing.

# Authority to Make Initial Decisions to Place an Individual in Restrictive Housing and to Review Such Decisions

Who has authority to make an initial decision about the placement of a person in segregation? We sought to learn about whether that decision was made by individuals or groups

and whether levels of review existed. Thirty-three jurisdictions responded to a question that asked which staff members or administrators were authorized to place a prisoner in some form of restrictive housing and what levels of review were involved.<sup>152</sup> Twenty jurisdictions reported that a shift supervisor, shift captain, watch commander, or lieutenant was authorized to place a prisoner in immediate restrictive housing.<sup>153</sup> Two of those jurisdictions added that the decision to put a prisoner with serious mental illness into restrictive housing required approval of a qualified mental health staff member<sup>154</sup> or a physician.<sup>155</sup>

Four jurisdictions described multi-member teams authorized to make an initial placement in restrictive housing.<sup>156</sup> Three jurisdictions wrote that a captain, unit administrator, or unit manager was authorized to place a prisoner in restrictive housing,<sup>157</sup> sometimes in consultation with mental health practitioners prior to making a placement.<sup>158</sup> A few jurisdictions did not permit line staff but instead reported that the decision required a deputy or assistant warden, the warden, or the superintendent.<sup>159</sup>

In one jurisdiction, the authority to place individuals in restrictive housing intersected with the duration of time a person could be put into restrictive housing. That jurisdiction explained that "[a]ll staff can place someone into temporary restrictive housing. Within four hours of placement, the shift supervisor is required to review and agree with all placements into restrictive housing or disagree and release the inmate from restrictive housing." Another jurisdiction described the levels of review built-in and that the person authorized to oversee the decision varied based on the reason for segregation. As that jurisdiction explained, "[a]ny correctional supervisor can approve placement into a detention unit pending investigation," and "[f]or immediate placement based on a violent act, the Warden can request placement through the Regional Operations Directors who will then approve or deny the request." <sup>161</sup>

Moreover, all thirty-eight of the jurisdictions that discussed this question explained that review of immediate placement in restrictive housing was mandatory. We sought to learn which staff were involved in the review process and received responses from twenty-eight jurisdictions. Thirteen responded that a facility warden, chief of security, superintendent, administrative head, or warden designee may alone review the initial placement decision. Seven jurisdictions reported that a multidisciplinary team, comprised of staff of the facility, were charged with review of the initial placement decision. For example, one jurisdiction reported that "the shift commander, deputy warden, warden, and if mental health related, the behavioral staff" reviewed the initial placement decision. As another example, one jurisdiction described an "Institutional Segregation Review board" comprised of the warden, a classification supervisor, chaplain, and department psychologist or psychological associate or contract mental health professional, which was "responsible for reviewing the status of every inmate confined to the restrictive housing unit."

Many jurisdictions had an individual conduct the review. In one, a watch commander was charged with determining "if the misbehavior supports the charges, and . . . if restrictive housing placement is appropriate." Two jurisdictions responded that a unit manager or captain reviews a prisoner's initial placement into restrictive housing. <sup>169</sup> One jurisdiction stated that the "Warden, Facilities Director, and Tier Manager review" initial placement decisions together. <sup>170</sup> Another

jurisdiction reported that a facility warden reviews the initial placement and then "contact[s] the appropriate Deputy Director or the Duty Director, requesting final authorization." <sup>171</sup>

In addition to asking about layers of decision-making, we also asked about the timing of the reviews of the initial placement decision. Thirty-three jurisdictions responded, and thirty-two reported that review must take place within a certain time period, generally twenty-four hours to thirty days. Eleven jurisdictions reported that the initial review must occur within twenty-four hours of initial placement. One jurisdictions aid that review must occur within forty-eight hours of initial placement. Two jurisdictions reported that review must occur within seventy-two hours of initial placement. Two jurisdictions indicated that review must occur within five days, and three jurisdictions reported that review must occur within seven days. One jurisdiction reported that review should occur within thirty days of initial placement.

Three jurisdictions reported that the timeline for mandatory initial review depends on the type of restrictive housing.<sup>179</sup> For example, one jurisdiction reported that initial placement in administrative custody must be reviewed within a week while initial placement within disciplinary custody must be reviewed within seventy-two hours.<sup>180</sup> One jurisdiction responded that it provided no time within which review must take place.<sup>181</sup>

Turning from the institutional perspective to learn something about an individual's experience, we asked about what information jurisdictions provided to people when they were placed into restrictive housing. Thirty-five jurisdictions answered.<sup>182</sup> Thirty-two jurisdictions stated that, whether verbally during an orientation or in written form, prisoners were provided with rules and expectations about their behavior during the time when they were placed in restrictive housing.<sup>183</sup> Three jurisdictions did not report providing rules or expectations at the time prisoners were placed in restrictive housing.<sup>184</sup>

Eight of these jurisdictions specified telling prisoners the expected length of placement in restrictive housing.<sup>185</sup> An additional seven jurisdictions reported providing prisoners with a behavior modification plan, case management plan, or information on how to reduce time in restrictive housing, in addition to any other rules, expectations, or expected duration of placement.<sup>186</sup> For example, one jurisdiction explained that prisoners

are advised of the reason for placement and the duration of placement. Restrictive housing rules are reviewed with them, including time out-of-cell, phone usage, mail, etc. They are advised of their ability to reduce their time in restrictive housing based on their behavior and compliance with their individualized case plan. Case managers . . . respond[] to any questions or safety concerns the inmate may have. 187

Five jurisdictions also explained that prisoners were informed of the timeline for review of their placement, or the process by which the prisoner can appeal their placement. One jurisdiction reported that prisoners were not provided with any materials or rules upon entry into restrictive housing, but that "agency policy is made available for review." One jurisdiction responded that information about restrictive housing came during the hearing on placement and that, in 2019, it had initiated a pilot project

to better train staff on the purposes of administrative segregation, meaningful hearings while assigned to segregation, and increased use of program plans. During these meaningful hearings, the reason an offender was placed in segregation and what steps the offender can take to be released from segregation are discussed. 190

## **Duration of Confinement and Recurring Review**

Few jurisdictions reported time-limited placements. In contrast, many jurisdictions indicated that they periodically reviewed whether continued restrictive housing confinement was appropriate.

Thirty-eight jurisdictions responded to the query of whether the decision to keep or place a prisoner in restrictive housing was for a predetermined or indeterminate amount of time. <sup>191</sup> Six jurisdictions responded that placements were determinate, <sup>192</sup> and twelve stated that duration was indeterminate. <sup>193</sup>

In terms of an absolute cap on the amount of time that an individual may serve in restrictive housing, four of thirty-eight responding jurisdiction stated that the time was limited. <sup>194</sup> The range was from fifteen days <sup>195</sup> to twenty-three months. <sup>196</sup> In between, a jurisdiction stated that its caps depended on prisoner classification, and ranged from thirty days to one year. <sup>197</sup>

Seventeen jurisdictions reported that they have no absolute cap on the amount of time a prisoner can spend in restrictive housing, whether consecutively, concurrently, or successively, <sup>198</sup> but that a cap existed under certain circumstances. <sup>199</sup> In one jurisdiction for example, "No inmate shall remain in a restrictive housing [unit] for more than one year unless the Warden has personally interviewed him/her at the end of the year and approves the assignment." <sup>200</sup> Another jurisdiction set a cap only for those placed on administrative segregation status; that cap was forty-seven days, after which point "the individual must be released to general population or assigned to maximum custody." <sup>201</sup> A new policy implemented in the jurisdiction as of March 6, 2020 reduced that cap to thirty days. <sup>202</sup> Some jurisdictions indicated that placement in restrictive housing could continue beyond a set period due to factors such as prisoner behavior. For example, one jurisdiction wrote that "other factors such as continued assaultive behavior may extend that time" indefinitely. <sup>203</sup>

In addition to caps, we asked about determinate as contrasted with indeterminate placements. Twenty jurisdictions (overlapping with the jurisdictions imposing caps) responded that setting a duration depended on certain factors.<sup>204</sup> Within these twenty, fifteen reported that whether the placement was indeterminate or predetermined was based on the type of restrictive housing classification or the reason a prisoner was placed in restrictive housing.<sup>205</sup> For example, one jurisdiction reported that the duration of disciplinary custody (DC) depended "on the sanction imposed by the hearing examiner based upon the severity of the misconduct charge. AC [administrative custody] is indeterminate based upon the needs/case."<sup>206</sup>

The survey also asked about recurring reviews of status for prisoners in restrictive housing. Thirty-three jurisdictions responded to queries about which individuals or groups were responsible for conducting such reviews.<sup>207</sup> Twenty-six described a review by a multi-disciplinary team within the facility and explained that the review could include members from classification or security

staff, or staff involved in treatment, mental health, or social work.<sup>208</sup> Nine jurisdictions mentioned that mental health staff participated in the recurring review process.<sup>209</sup>

Other jurisdictions described various processes. For example, one jurisdiction reported that reviews were conducted by the "Corrections Program Supervisor or Security Supervisor assigned to [the restrictive housing unit], [a] Health Service Manager or Health Service staff member, [a] Psychology staff member, Social worker, Unit staff, other staff as designated by the Warden such as [a] Psychiatrist, [a] Program Escort Officer or Security Staff, [and] Administrators and/or Central Office staff for specific cases."<sup>210</sup> Another jurisdiction stated that its recurring reviews were conducted by a facility team comprised of a "case manager, unit sergeant, deputy warden" and warden, which makes recommendations to a central office team consisting of the "Deputy Chief of Prisons and Chief Psychologist."<sup>211</sup>

We also sought to learn the frequency of placement reviews, and thirty-five jurisdictions responded. Again, we learned of a variety of decisions about that timing, from as often as three times a week to intervals of a few months. The most common response came from seven jurisdictions that reported weekly reviews. One of these jurisdictions explained: "By policy an offender's placement in restrictive housing is reviewed once every 7 days for the first 60 days and once every 30 days thereafter. In practice, every offender is reviewed every 7 days by a multidisciplinary team." 15

Six jurisdictions reported that placement in restrictive housing is reviewed monthly.<sup>216</sup> Four jurisdictions responded that placement is reviewed every three months.<sup>217</sup> Four jurisdictions reported that review occurs once every seven days for the first sixty days and once every thirty days thereafter.<sup>218</sup> Twelve other jurisdictions reported that the frequency of review depends on the type of classification and/or the amount of time spent in segregation.<sup>219</sup> In one jurisdiction, for example, "disciplinary confinement" prisoners are reviewed "every 45 days" while "administrative confinement" prisoners are reviewed "every 90 days."<sup>220</sup> One jurisdiction reported that the frequency of review depends on whether the facility is ACA accredited: "Facilities with ACA accreditation review[] every 7 days for the first two months, then every 30 days thereafter. Non-accredited facilities review every 30 days."<sup>221</sup>

### **Policies for Subpopulations**

Thus far, we have discussed policies that governed entire systems. We also sought to learn whether jurisdictions had developed policies, or changed existing policies, for certain subpopulations, including juveniles, older prisoners, women, pregnant prisoners, transgender prisoners, prisoners with serious mental illness, and prisoners with special medical needs. Responses to questions about at least one of the subpopulations came from 29 jurisdictions.<sup>222</sup>

We learned that some jurisdictions treated subpopulations, such as individuals with special medical needs, distinctly at some points in time, such as when making initial placement decisions. Some jurisdictions reported that they had gender-responsive policies related to programs available to people in restrictive housing. In addition to reporting on the substance of these policies, ten jurisdictions stated that they had changed their restrictive housing policies in regard to at least one of these groups since January 1, 2018. <sup>223</sup>

Age-Based Subpopulations: Nineteen jurisdictions had specific restrictive housing policies for juveniles.<sup>224</sup> The majority defined juveniles as anyone under the age of eighteen.<sup>225</sup> Eight jurisdictions reported that they did not place juveniles in restrictive housing.<sup>226</sup> One jurisdiction reported measuring restrictive housing time for juveniles in hours rather than days.<sup>227</sup> Another responded that, in the facility designated to accept juveniles, prisoners were not ordinarily placed in restrictive housing:

[Juveniles are placed] in a general population environment. However, there are instances where a juvenile may be a risk to others or have had a disciplinary issue and placed in a restrictive housing status. [The department] does not routinely place them in restrictive housing but behavior may cause this to occur as with any other offender.<sup>228</sup>

Six jurisdictions had policies that modifed restrictive housing practices specifically for older prisoners, <sup>229</sup> but five did not provide how. One jurisdiction explained that it placed older prisoners in an "Aged and Infirmed ward" instead of in restrictive housing. <sup>230</sup>

*Prisoners with Special Medical Needs:* Twelve jurisdictions reported policies on restrictive housing specific to prisoners with special medical needs.<sup>231</sup> Several jurisdictions indicated that, if clinically necessary, prisoners would be placed in an infirmary unit rather than in restrictive housing.<sup>232</sup> One jurisdiction explained,

Screening by medical staff shall include a determination of any medical contraindications to Restrictive Housing, including the existence of a permanent physical disability that precludes placement in Restrictive Housing, in which the inmate shall not be placed in Restrictive Housing. This screening shall be documented and placed in the inmate's medical record.<sup>233</sup>

Others jurisdictions reported having policies to accommodate prisoners with disabilities.<sup>234</sup> One jurisdiction specified,

Screening by medical staff shall include a determination of any medical contraindications to Restrictive Housing, including the existence of a permanent physical disability that precludes placement in Restrictive Housing, in which the inmate shall not be placed in Restrictive Housing. This screening shall be documented and placed in the inmate's medical record.<sup>235</sup>

One jurisdiction stated it had a policy for "Intellectually and Developmentally Disabled: IQ 70 or below with functional impairment or physical disability with functional impairment." <sup>236</sup> but offered no details on its provisions.

Women in Prison: Policies specific to women touched on placement decisions, such as limitations on restrictive housing for pregnant prisoners or a reduced usage of restrictive housing for women "due to past abuse and victimization." One jurisdiction reported that there was no restrictive housing for women. In addition, thirteen jurisdictions stated that policies related to programming and conditions varied for women and men in restrictive housing.

Twelve of thirty-three responding jurisdictions reported having gender responsive policies for women in restrictive housing.<sup>239</sup> For example, one jurisdiction noted that "[g]ender responsive programming focused on trauma, communication, co-dependency, and relationships is offered."<sup>240</sup> Another jurisdiction described that in its restrictive housing unit, "gender specific programming based on criminogenic needs is offered to inmates. Topic areas include: Cognitive Restructuring, Healthy Lifestyles, Relationship Management, Pro-Social Activities, and Mental Health."<sup>241</sup> One jurisdiction reported a higher ratio of mental health staff to prisoners for women than for men.<sup>242</sup> Another noted it had "[e]nhanced out-of-cell programming opportunities for women in RH who are on the mental health caseload."<sup>243</sup>

The survey also sought to learn about responsiveness to women's physical needs. Among thirty-three responding jurisdictions with restrictive housing as the survey defined it, all jurisdictions reported providing sanitary supplies for women in restrictive housing.<sup>244</sup> One jurisdiction explained,

For women in restrictive housing, sanitary supplies are provided with supplies upon the cell set up. The inmate can request and receive supplies at any time, however twice a day during tray pick up on the day shift, the inmates would be afforded the opportunity to request sanitary tampons, panty liners, and toilet paper from a cart which the officer makes rounds with. During the afternoon shift this would also be offered during security rounds.<sup>245</sup>

Eighteen jurisdictions reported having specific policies for pregnant prisoners.<sup>246</sup> Of these, six stated that they did not place pregnant women in restrictive housing.<sup>247</sup> Five jurisdictions reported that pregnant prisoners could only be placed in restrictive housing in limited security-related circumstances.<sup>248</sup> One jurisdiction explained,

The staff at Women's do all things possible to avoid putting pregnant inmates in Restrictive Housing (RH): however there are instances where pregnant inmates do pose a threat to themselves or others and have had to be placed in RH. Except for RH, our only alternative housing is dormitory housing where the inmates use a common bathroom. Cells are not self-contained (sink and toilet). We do so only when the threat to safety is imminent and immediately consult with medical/mental health as appropriate.<sup>249</sup>

Three jurisdictions specified that they limit use of restraints on pregnant prisoners.<sup>250</sup>

LGBTI Prisoners: Ten jurisdictions reported having restrictive housing policies specifically for transgender prisoners.<sup>251</sup> Among these, six jurisdictions reported policies stating that gender identity alone could not be the basis for placement in restrictive housing.<sup>252</sup> One jurisdiction explained that, "search preference is followed" and that transgender prisoners "will not be placed in RH if they haven't been seen by the initial Transgender Review Board."<sup>253</sup> One jurisdiction reported a distinct restrictive housing policy for LGBTI and gender non-conforming prisoners, reporting, "Inmates who are LGBTI or whose appearance or manner does not conform to traditional gender expectations shall not be placed in restrictive housing solely on the basis of identification or status."<sup>254</sup>

Prisoners with Mental Health Needs: We asked jurisdictions about their screening, monitoring, and treatment of the mental health of prisoners in restrictive housing. One set of questions concerned mental health evaluation prior to placement in restrictive housing. Another set of questions addressed mental health monitoring and services after individuals had been placed in restrictive housing. Additional questions addressed policies for prisoners designated as having severe mental illness. Thirty-four jurisdictions responded to at least one of these questions.<sup>255</sup>

The survey asked about the role of mental health in evaluating individuals for placement in restrictive housing and thereafter. Sixteen jurisdictions reported that mental health professionals screened prisoners in all cases before individuals were placed in restrictive housing.<sup>256</sup> An additional five jurisdictions reported that they screen prisoners before placement in restrictive housing in some cases,<sup>257</sup> such as when the prisoner has been identified as having some sort of mental health issue.<sup>258</sup> In total, twenty-six jurisdictions reported that they conducted mental health screenings of prisoners in restrictive housing within forty-eight hours of placement at least some of the time.<sup>259</sup>

Another set of questions addressed the policies for monitoring mental health of prisoners once they were placed in restrictive housing. All thirty-four jurisdictions responding to these questions reported that prisoners in restrictive housing were monitored by mental health professionals. Within this group, the median ratio of reported mental health professionals to restrictive housing prisoners was one mental health professional for every nineteen prisoners, and the range was from 1:1<sup>260</sup> to 2:149.<sup>261</sup> Jurisdictions reported on mental health visits, which ranged from daily<sup>262</sup> to once every thirty days,<sup>263</sup> and the median was once per week.<sup>264</sup>

What does a mental health visit look like when a person is in restrictive housing? Twenty-one reported that at least some visits took place with the prisoner and the mental health professional in an area other than the person's restrictive housing cell.<sup>265</sup> Twenty-eight jurisdictions stated that some mental health visits took place with the prisoner inside the cell and the mental health professional outside.<sup>266</sup> Three jurisdictions described mental health visits as sometimes occurring with the mental health professional joining the prisoner in the restrictive housing cell.<sup>267</sup>

Nineteen jurisdictions reported that they had some specific policies in place for prisoners who were designated as having serious mental illness.<sup>268</sup> A number of these jurisdictions stated that their policies required that medical and mental health staff review placements of such people when placed in restrictive housing.<sup>269</sup> Four jurisdictions also indicated having separate units in which prisoners with serious mental illness would be placed.<sup>270</sup> Two jurisdictions reported that they limited the amount of time a prisoner with serious mental illness could spend in restrictive housing.<sup>271</sup> One wrote that keeping prisoners with serious mental illnesses in restrictive housing "for [an] extended period of time" was discouraged.<sup>272</sup> Another jurisdiction wrote that restrictive housing for prisoners with serious mental illnesses "is capped at 29 days."<sup>273</sup>

# **Exiting Restrictive Housing: Step-Down Programming, Release to General Population, and Leaving Prison for the Community**

A major concern is how people who have lived under restrictive housing conditions are able to function when released either to general population or to the community. The survey therefore asked about how prisoners exit restrictive housing. One inquiry was whether good behavior could result in earlier release, and another set of questions focused on programs in place (often called "step-down programs") to create a transition from restrictive housing into the prison's general population. Such programs may take many forms; the ACA describes such programs as "includ[ing] a system of review and establish[ing] criteria to prepare an [incarcerated person] for transition to general population or the community." From the thirty-eight jurisdictions that responded to these questions, we learned that most had policies that allowed for earlier release based on good behavior, and most had some step-down program in place or had a pilot project from which to develop such a program.

Behavior as a Means of Reducing Time in Restrictive Housing: Thirty-one responding jurisdictions reported that a prisoner's behavior could reduce the amount of time spent in restrictive housing, 276 which some termed "maximum custody." For example, one jurisdiction wrote that "the primary factor" was behavior; prisoners were "advised at time of placement and during regular placement reviews that behavior is acceptable or unacceptable and how that will affect length of time in maximum custody." Another jurisdiction reported that "staff can recommend reduction anytime." Another wrote that "nearly all inmates are eligible for a 1-day credit for each day of good behavior in [restrictive housing]. Thus, many inmates serve only half of their disposition." Another jurisdiction described a program that is designed to help prisoners seek release from restrictive housing based on behavior:

When individuals are assigned to Maximum (MAX) custody (long term segregation) they receive a Behavior and Programming Plan (BPP) within 10 days of assignment. The BPP is developed by a multi-disciplinary team (MDT) and the individual is encouraged to attend, they are involved in the development of the plan. Expectations for release are identified and documented in the BPP. . . . When expectations are met staff are encouraged to request the individual be promoted to a lower custody. <sup>280</sup>

Seven jurisdictions reported that good behavior could not reduce the amount of time a prisoner spent in restrictive housing.<sup>281</sup>

Education on Handling Transitions: The survey asked about programs for transition to general population and for release into the community. Thirty jurisdictions responded. Six jurisdictions<sup>282</sup> reported that they did not have policies in place providing for transition/step-down programming from restrictive housing; one of these reported that such a "policy has been submitted and [is] under review."<sup>283</sup> Five other jurisdictions responded that they were currently doing pilot step-down/transition programs.<sup>284</sup> One of these jurisdictions wrote:

In December 2018 . . . [we] began a pilot step-down program for maximum custody inmates. This program began at one facility and in April 2019 was expanded to

include two other facilities. Maximum custody inmates are required to complete this step-down program before release from restrictive housing. The step-down program is a 4-phase program over a 36-week period that includes both in cell and out-of-cell programming.<sup>285</sup>

Seventeen jurisdictions reported that they have step-down/transition programs in place for prisoners moving from restrictive housing to the general population.<sup>286</sup> One of these jurisdictions described their "step down unit" as permitting "a gradual increase in the time out-of-cell, reduction in restraint requirements while out-of-cell, increased socialization and time out-of-cell with other prisoners, access to programs in and out-of-cell (including tablets), and on-unit work opportunities."<sup>287</sup> Another jurisdiction described its transition unit as,

a step-down program to help prepare people who have been living in the behavior intervention unit for general population. A person may be eligible for transition based on their placing behavior, assessment of risk, and participation and progress in the behavior modification wing. Individuals residing in the transition unit have access to general population activities and the opportunity to attend a regular treatment group and receive support from unit staff. . . . Opportunities for structured enrichment activities, development and implementation of success plans . . . exist while being housed in the transition unit. <sup>288</sup>

Nineteen jurisdictions reported that they have transition programs or policies in place for prisoners being released from restrictive housing to the community.<sup>289</sup> Some jurisdictions described general policies against release from restrictive housing into the community. For example, one jurisdiction said its policy is to "discourage release directly from restrictive housing" to the community and to require "efforts" to be "made by staff to get the inmate out of restrictive housing" at some point "prior to discharge." Other jurisdictions reported policies that mandate release into the general population at some point prior to discharge to avoid release directly to the community.<sup>291</sup> One jurisdiction stated that its prisoners who were to be released "directly back into the community without first returning to general population" were, while in restrictive housing, "enrolled into a program that includes pre-release activities." One jurisdiction responded, "We emphasize step-down programs and try not to release to the street from restrictive housing, but occasionally it occurs."293 Another jurisdiction reported that its "Step-down to the Community Program provides out-of-cell re-entry programming for inmates being released to the community after restrictive housing confinement in excess of 60 days. The program assists inmates with the development of [a] comprehensive release plan, incorporating social skills practice, relapse prevention, family reintegration and employment readiness."294

Transitions Out of Restrictive Housing: Twenty-nine jurisdictions responded to a question about the number of prisoners who, without participating in a step-down or transition program, were returned from restrictive housing to the prison's general population in 2018.<sup>295</sup> Eight jurisdictions reported that in 2018, they moved some prisoners from restrictive housing into the prison's general population without those prisoners participating in a step-down/transition program.<sup>296</sup> Four jurisdictions did not provide numbers, but specified that all or nearly all of their restrictive housing prisoners who returned to the general population in 2018 did so without participating in a step-down or transition program.<sup>297</sup> Five jurisdictions reported that, in 2018, no

prisoners who were released from restrictive housing to the general population took part in a transition program.<sup>298</sup> Fourteen jurisdictions either provided information about transition processes but did not provide the number of individuals released without transition, or indicated that they did not track these numbers.<sup>299</sup>

Thirty jurisdictions responded to a question asking how many prisoners in the year 2018 participated in a step-down or transition program before being returned from restrictive housing to the general population. For simplicity, we refer to this array of programs as transition programs. Three jurisdictions reported that every prisoner who was released from restrictive housing into the general population in 2018 participated in a transition program. Eleven jurisdictions reported that some prisoners took part in a transition program in 2018 before being moved from restrictive housing to the prison's general population. Thirteen jurisdictions either provided some information about their transition processes but did not provide the number of individuals released to general population with a transition program, or they reported that they did not track these numbers. On the prison of the prison of the provided that they did not track these numbers.

Thirty-one jurisdictions replied to an inquiry about how many prisoners in 2018 were released, without participating in a step-down/transition program, from restrictive housing directly to the community.<sup>304</sup> Twenty jurisdictions reported releasing people who did not take part in transitional programs before they went from restrictive housing to the community.<sup>305</sup> The number across those jurisdictions ranged from one person to 702.<sup>306</sup> Three jurisdictions reported that they did not release anyone directly from restrictive housing into the community in 2018.<sup>307</sup> Eight jurisdictions did not provide data or responded that they did not track these numbers.<sup>308</sup>

While some individuals are released directly from restrictive housing to the community, others are released to the community after only a short period of time between their release from restrictive housing and their release to the community. We asked about whether, in 2018, individuals had been released to the community within thirty days of their having been in restrictive housing. We also sought to learn whether jurisdictions provided some transitions for that group. Thirty jurisdictions replied.<sup>309</sup>

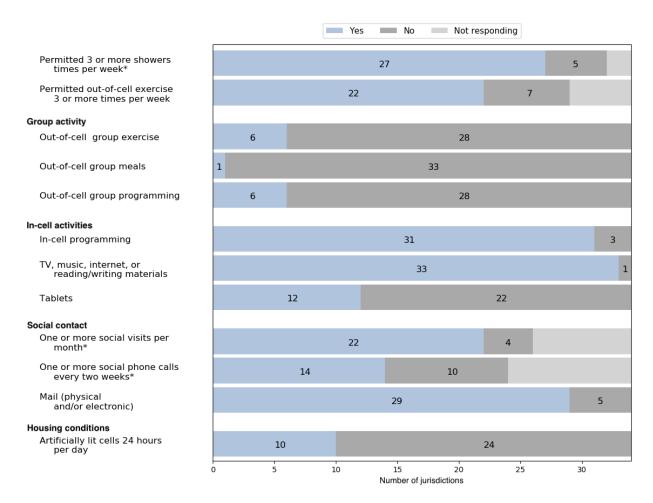
Twelve jurisdictions reported that in 2018 they released some prisoners to the community within thirty days of removal from restrictive housing without a transition program.<sup>310</sup> Three jurisdictions reported that no prisoners were released to the community in 2018 within thirty days of removal from restrictive housing without first participating in a transition program.<sup>311</sup> Fifteen jurisdictions did not provide data or responded that they did not track these numbers.<sup>312</sup>

## Living in Restrictive Housing: Activities, Programs, and Sociability Outside and Inside Cells

What can people do when held in restrictive housing? What kinds of activities (from showers to "programming") were provided, such that out-of-cell options exist? The survey sought to learn about such opportunities, if any, as well as what jurisdictions would like to provide, if they could, in out-of-cell time.

We asked about the amount of time provided and the activities available when people were out-of-cell<sup>313</sup> These questions inquired about showering, exercising, eating with other prisoners, and participating in programming. Thirty-four jurisdictions responded to at least one of the questions about time spent out-of-cell.<sup>314</sup> A summary of aggregate responses to key questions about in-cell and out-of-cell time is recorded below in Figure 15.

Figure 15 Dimensions of Living in Restrictive Housing



Twenty-eight jurisdictions reported that time out-of-cell varied based on a prisoner's status, the prisoner's needs, the facility in which the prisoner was incarcerated, general availability of resources of the facility, and other factors.<sup>315</sup> Nonetheless, thirty-two jurisdictions provided some estimate of out-of-cell time.<sup>316</sup> Fourteen jurisdictions that had restrictive housing responded to the survey's question regarding the total number of times prisoners in restrictive housing were out-of-cell per week.<sup>317</sup> Jurisdictions reported between one<sup>318</sup> and fourteen times out-of-cell per week;<sup>319</sup> the median number of times out-of-cell per week was seven.<sup>320</sup> Fifteen jurisdictions that had restrictive housing responded to the survey's question regarding the total number of hours prisoners in restrictive housing were out-of-cell each week.<sup>321</sup> Jurisdictions reported allowing prisoners out-of-cell for between 1.5 hours<sup>322</sup> and 22 hours<sup>323</sup> per week; the median reported time out-of-cell was 3.33 hours per week.<sup>324</sup>

Thirty-two jurisdictions with restrictive housing responded to the survey's questions about time out-of-cell for showering.<sup>325</sup> These jurisdictions reported policies that permitted prisoners to shower once per week on the lower end<sup>326</sup> and seven times per week on the higher end;<sup>327</sup> the median was three times per week.<sup>328</sup> Of the twenty-four jurisdictions with restrictive housing to answer the survey's question regarding how long people have to take showers,<sup>329</sup> jurisdictions reported providing between ten minutes<sup>330</sup> and one hour for time out-of-cell to use showers;<sup>331</sup>the median time out-of-cell to use the shower was approximately 19 minutes.<sup>332</sup> These reports likely reflect time out-of-cell for the purpose of showering, including transit time, as opposed to time prisoners in restrictive housing can spend in the shower itself.

Twenty-five jurisdictions reported that prisoners' time out-of-cell for exercise varied either by facility,<sup>333</sup> the prisoners' status, behavior, or needs,<sup>334</sup> or by the prisoner's length of time in restrictive housing.<sup>335</sup> Two jurisdictions reported having no hours out-of-cell specifically for exercise.<sup>336</sup> Twenty-nine jurisdictions with restrictive housing gave estimates on the number of times per week prisoners had time out-of-cell to exercise.<sup>337</sup> Jurisdictions reported allowing restrictive housing prisoners between once per week<sup>338</sup> and seven times per week<sup>339</sup> for out-of-cell exercise; the median was five time per week.<sup>340</sup> Of the twenty-four jurisdictions with restrictive housing that answered the survey's question about exercise duration,<sup>341</sup> jurisdictions reported allowing between 40 minutes of exercise<sup>342</sup> and 2 hours and 15 minutes of exercise<sup>343</sup> at a time; the median was one hour of exercise.<sup>344</sup>

Thirty-four jurisdictions responded to aspects of questions about whether people in restrictive housing were inside or outside during exercise and about the space allotted for exercise. Nineteen jurisdictions reported both indoor and outdoor exercise areas, fourteen reported only outdoor exercise areas, and one reported only an indoor exercise area. Of the nineteen jurisdictions with restrictive housing that answered the survey's question about an outdoor exercise area, in an outdoor exercise area between 17.5 square feet, and 625 square feet; the median outdoor exercise area was 180 square feet. Of the nine jurisdictions with restrictive housing that answered the survey's question about indoor exercise area, in an indoor area between 80 square feet, and 900 square feet; the median indoor exercise area was 160 square feet. An additional two jurisdictions stated that the dimensions of their exercise areas "meet the [American Correctional Association's] minimum standards," which vary based on the number of prisoners using the area.

Eleven of the twenty jurisdictions (55%) that had indoor exercise areas for prisoners in restrictive housing stated that the exercise areas had natural light,<sup>358</sup> and one of the twenty jurisdictions stated that those areas did not have natural light.<sup>359</sup> The remaining eight jurisdictions (45%) reported that natural light in the indoor exercise areas varied by facility.<sup>360</sup>

Of the thirty-four jurisdictions that responded to at least one of the questions about time spent out-of-cell,<sup>361</sup> fifteen reported that prisoners in restrictive housing were not allowed any group out-of-cell time each week.<sup>362</sup> Fourteen jurisdictions stated that they permit group time out-of-cell for at least some subset of restrictive housing prisoners.<sup>363</sup> What do people do during such group times? Six jurisdictions reported that prisoners have group exercise time;<sup>364</sup> seven jurisdictions reported that prisoners have group out-of-cell programming,<sup>365</sup> one jurisdiction said

that prisoners can eat meals together,<sup>366</sup> and four jurisdictions reported that prisoners had other group out-of-cell time, such as mental health programming or GED instruction.<sup>367</sup>

Aspiring for More Time Out-of-Cell: The survey also sought information on the number of hours out-of-cell that jurisdictions believed was desirable for prisoners in an "ideal situation"—i.e., with sufficient resources.<sup>368</sup> Thirty-two prison jurisdictions provided answers to this question,<sup>369</sup> and twenty-nine specified a desirable number of hours out-of-cell.<sup>370</sup>

Most of the jurisdictions responding referenced a certain number of hours per day or per week. The responses that were given in hours per day ranged from one hour<sup>371</sup> to 12 hours per day<sup>372</sup> out-of-cell. The responses given in hours per week ranged from five hours<sup>373</sup> to 60-70 hours per week out-of-cell.<sup>374</sup>

Three jurisdictions stated that they could not provide a concrete number of ideal hours out-of-cell because time out-of-cell depends on a variety of factors.<sup>375</sup> One of those jurisdictions explained:

With adequate resources and staffing, our agency would like to maximize out-of-cell time to [prisoners] while offering meaningful programs and activities. In an ideal situation out-of-cell time would be balanced with maintaining safety and security while offering rehabilitative services.<sup>376</sup>

Other jurisdictions also underscored that time spent out-of-cell should be meaningful. One jurisdiction explained: "I believe a minimum of 3 hours a day with meaningful out-of-cell time. I would be good with more as long as it was quality time." Another jurisdiction specified that daily time out-of-cell should be separated into morning and afternoon time, with additional time allocated for exercise. One jurisdiction responded that time out-of-cell should vary by institution, and two stated that time should depend on the reason the person was placed in restrictive housing. 380

*Inside the Cells:* We asked about the lighting in cells, the types of programs that are offered for prisoners in restrictive housing to participate in while in their cells, what items were supplied, and whether access existed to purchase items from the commissary. Thirty-four jurisdictions responded to these questions.<sup>381</sup>

Thirty-one of those jurisdictions reported that cells had natural light;<sup>382</sup> three reported having restrictive housing cells without natural light.<sup>383</sup> Ten jurisdictions reported that artificial lights were on twenty-four hours per day<sup>384</sup> and seven reported that artificial light was on sixteen hours per day.<sup>385</sup> The other seventeen jurisdictions reported that the number of hours that artificial light is turned on per day varied, either by facility or by a prisoner's status.<sup>386</sup> Five jurisdictions reported that prisoners had at least some control over the light in their cell.<sup>387</sup>

Another set of questions asked about access to programming in-cell. Thirty-one out of thirty-four jurisdictions responded that activities in-cell exist.<sup>388</sup> The reported programs included religious studies,<sup>389</sup> mental health classes, <sup>390</sup> substance abuse programs,<sup>391</sup> anger management courses,<sup>392</sup> cognitive behavioral classes,<sup>393</sup> parenting classes,<sup>394</sup> vocational classes,<sup>395</sup> and step-

down education.<sup>396</sup> Twenty-nine jurisdictions stated that some prisoners had access to a GED or another diploma program in restrictive housing.<sup>397</sup> The modes of programming included a virtual classroom set-up,<sup>398</sup> videos,<sup>399</sup> workbooks and handouts,<sup>400</sup> one-on-one programming,<sup>401</sup> tablets,<sup>402</sup> educational packets,<sup>403</sup> and self-help journals.<sup>404</sup> All but one of thirty-nine responding jurisdictions reported that prisoners in restrictive housing had access to television, books, music, or internet in their cells.<sup>405</sup> Twelve jurisdictions reported that prisoners had access to tablets.<sup>406</sup>

All responding jurisdictions stated that prisoners in restrictive housing had some access to the commissary. Five jurisdictions reported that they have full access. 407 The other twenty-nine jurisdictions reported that they have limited access. 408 These limitations varied greatly. Some jurisdictions reported that prisoners in restrictive housing cannot buy certain items. For example, in one jurisdiction, they are reportedly barred from purchasing "razors, pencil sharpeners . . . nail clippers and spicy liquids." Other jurisdictions reported that purchases are limited to a small number of items. For example, one jurisdiction reported limiting their purchases to "basic necessities." here

Thirty jurisdictions reported that they provided general sanitary supplies to prisoners in restrictive housing,<sup>411</sup> and none reported that they did not. As explained elsewhere above, thirty-three responding jurisdictions with restrictive housing as the survey defined it said that they provided women's sanitary supplies.<sup>412</sup>

Sociability: We also sought to learn about prisoners' access to visits, phone calls, and mail. The survey asked jurisdictions about the availability of non-legal, social or professional visits and phone calls. We learned that most jurisdictions reported providing prisoners in restrictive housing with social visits and phone calls. Further, of the thirty-four jurisdictions that responded to this set of questions, most said that they did not put limits on mail correspondence. These rules provide the parameters for sociability, but we did not, for example, collect data on how many visitors, if any, people in restrictive housing had.

Thirty-three of the thirty-four jurisdictions<sup>413</sup> that responded to these questions reported that prisoners in restrictive housing were allowed social visits.<sup>414</sup> These jurisdictions reported policies allowing between two visits per year<sup>415</sup> on the lower end and two visits per week on the higher end;<sup>416</sup> jurisdictions reported allowing social visits a median of once per week.<sup>417</sup> Seven jurisdictions reported permitting visits more than once per week,<sup>418</sup> including one jurisdiction that reported having no limits on the frequency or length of social visits<sup>419</sup> and another jurisdiction that said it permitted visits daily.<sup>420</sup> Two jurisdictions reported permitting visits less than once every two months.<sup>421</sup> Sixteen jurisdictions reported that the number and length of social visits allowed varied by the prisoner's status<sup>422</sup> or by the facility.<sup>423</sup> Two jurisdictions reported restricting the frequency of visitation by visitor (e.g., a certain visitor can visit the prisoner once per month).<sup>424</sup> In nineteen jurisdictions, the visits were restricted to non-contact only.<sup>425</sup>

Thirty-one of the thirty-three jurisdictions<sup>426</sup> that responded to the survey's questions about social phone calls reported that prisoners in restrictive housing were permitted social phone calls.<sup>427</sup> Three jurisdictions reported having no limit on the frequency and duration of social phone calls,<sup>428</sup> and two other jurisdictions reported limiting them only by requiring that they be made during designated hours.<sup>429</sup>

Of the fifteen jurisdictions that were able to provide estimates of their limitations on the frequency of phone calls,<sup>430</sup> jurisdiction-specific policies allowed between one call every ninety days on the lower end<sup>431</sup> and an unlimited number of daily calls on the higher end.<sup>432</sup> Two jurisdictions said that they allowed phone calls a minimum of more than once per week.<sup>433</sup> The median reported frequency allowed was once every two weeks.

Of the fourteen jurisdictions that provided estimates of their restrictions on the duration of prisoners' phone calls, <sup>434</sup> jurisdiction-specific policies allowed between five minutes per call <sup>435</sup> and an unlimited call duration; <sup>436</sup> the median duration was fifteen minutes long. Fourteen jurisdictions reported that the frequency and duration of phone calls allowed varied by the prisoner's status. <sup>437</sup> Nine jurisdictions also reported having other restrictions on phone calls, such as only allowing prisoners to call individuals on an approved list, <sup>438</sup> not allowing prisoners to call victims or people who have non-contact orders, <sup>439</sup> and not allowing conference or three-way calling. <sup>440</sup> Two jurisdictions reported that phone use can be suspended as part of a disciplinary sanction. <sup>441</sup>

The survey also asked jurisdictions about access to mail, including social correspondence. Twenty-nine of the thirty-four jurisdictions<sup>442</sup> that responded reported that prisoners in restrictive housing were allowed to send and receive physical mail, electronic mail, or both.<sup>443</sup> Twenty-one jurisdictions reported having no restrictions on the sending and receiving of physical mail.<sup>444</sup> Of those that did report restrictions, the restrictions included prohibitions on the sending/receiving of all magazines,<sup>445</sup> all newspapers,<sup>446</sup> and on corresponding with other prisoners.<sup>447</sup> Nine jurisdictions reported that prisoners in restrictive housing were prohibited under their regulations to send or receive electronic mail.<sup>448</sup>

# Prison Staff: Qualifications, Training, Schedules, and Pay for Duty on Restrictive Housing Units

Prisoners and staff are inter-dependent, and working in prisons presents many challenges. 449 In some jurisdictions, assignment to restrictive housing units comes with specific obligations and resources. We therefore asked about the qualifications required of staff, their training, compensation, and work schedules.

Thirteen out of thirty-three jurisdictions reported that staff working in a restrictive housing unit had to meet special qualifications.<sup>450</sup> Most of those thirteen jurisdictions said that staff in restrictive housing units needed to be more experienced than staff in other units. For example, one jurisdiction reported that restrictive housing staff needed to have "tenure, maturity, attendance" and demonstrate a certain "performance level"<sup>451</sup> Another responded that restrictive housing staff needed to display "accountability/organizational commitment, job knowledge, communication skills, [and] interpersonal skills."<sup>452</sup> Three of the thirteen jurisdictions wrote that they required at least one year of working experience as a correctional officer in order to work in restrictive housing.<sup>453</sup> In contrast, twenty jurisdictions reported that no special qualifications were necessary to work in a restrictive housing unit.<sup>454</sup>

Twenty-six of thirty-five answering jurisdictions reported that staff working in a restrictive housing unit were provided additional training or educational opportunities, 455 albeit what was

entailed varied across jurisdictions. One response stated that new staff on the restrictive housing unit "get a few 'buddy ride' shifts where information OJT is conducted. No formal training [is provided] beyond that." Another jurisdiction reported that it had "a . . . 3-day mental health training that is required for some types of restrictive status housing." Eight jurisdictions reported that new staff working in restrictive housing were offered crisis intervention or de-escalation training. One jurisdiction described its training program:

Training should include, but not be limited to, suicide prevention, trauma informed care, crisis intervention, de-escalation, signs and symptoms of mental illness, co-occurring disorders, emergency response, code 99, fire exits, restraints, IMS entries, counts, showers, medication, recreation, phones, rounds, pyramid of force, unit structure/operations, post orders, and interpersonal communications.<sup>459</sup>

Another jurisdiction's report of its training focused on use of force and team structure: that response stated that training included "[c]ell extraction team training, the process and job responsibilities of each team member, team leader and OIC's, Stun Shield, shield, types of OC used, barricades and devices."<sup>460</sup> Another jurisdiction reported that its "department is currently identifying appropriate additional training and a Field Training Officer program was recently implemented."<sup>461</sup> Eight jurisdictions told us that no special training or educational opportunities were afforded new staff assigned to a restrictive housing unit. <sup>462</sup>

The working hours of staff assigned to restrictive housing units was another inquiry. Most jurisdictions—thirty-one out of thirty-four answering the question—reported that staff assigned to restrictive housing units do not work different schedules or hours as compared to other facility staff. One jurisdiction reported that staff in restrictive housing had a different schedule from other custody staff. Another reported that schedules varied by the type of restrictive housing and one other jurisdiction stated that it depends on the facility.

Fourteen out of thirty-five answering jurisdictions responded that staff in restrictive housing units were rotated out of restrictive housing on a specified timetable. 467 Most of those jurisdictions described an annual rotation process, or a system of rotations by request. One jurisdiction wrote:

RHU personnel will normally serve 12 months in the RHU. At the end of 12 months a review will be held to determine if the staff member needs to be rotated out. If he/she desires to stay another six (6) months, they will be re-assessed at the end of 18 months. If he/she decides they want to stay longer, approval must be obtained in writing by the Warden and the Deputy Director of Operations. Each Warden will be required to maintain an automated roster of RHU employees showing their length of service in RHU and documentation of these reviews at 12 and 18 months. 468

Eighteen responding jurisdictions reported that they did not have a specified timetable for rotating staff out of restrictive housing. 469 Four jurisdictions cited employment or union contract restrictions that prevent them from implementing rotation timetables. 470

Seven out of thirty-five answering jurisdictions described having policies that limit the amount of overtime hours staff in a restrictive housing unit could work. Twenty-four jurisdictions said they do not. One jurisdiction reported, we are unionized and cannot do this. Another said that hours and selection for overtime are in accordance with union contracts.

Thirty-two out of thirty-five answering jurisdictions told us that staff assigned to restrictive housing units did not receive extra pay or an additional bonus.<sup>475</sup> Three jurisdictions reported that at least some restrictive housing staff received additional pay.<sup>476</sup>

## **Implementing the 2016 ACA Restrictive Housing Performance Based Standards**

The ACA, an accrediting body for corrections, probation, parole, and detention centers, <sup>477</sup> assesses compliance with its Performance Based Standards by reviewing accredited systems every three years. <sup>478</sup> In 2016, the ACA adopted new Standards on restrictive housing. <sup>479</sup> The 2019 CLA-Liman survey asked whether jurisdictions had reviewed their internal restrictive housing policies since the ACA revisions and whether jurisdictions relied on the ACA Standards when developing policies. <sup>480</sup> As in the 2018 survey, we focused on four ACA Standards related to release to the community, mental health, juveniles, and pregnancy, and asked whether jurisdictions had implemented each policy; "substantially implemented this policy with exceptions;" already had the policy in place prior to the 2016 ACA revisions; or had not implemented the policy.

Of thirty-seven jurisdictions responding to the questions, thirty reported that they relied on the ACA Standards when making jurisdiction-specific policies.<sup>481</sup> This response was an increase over the twenty-five of thirty-six responding jurisdictions who reported such efforts in response to the 2018 survey.<sup>482</sup> Thirty-four jurisdictions reported that they had reviewed their restrictive housing policies since the release of the 2016 ACA Standards.<sup>483</sup>

A number of jurisdictions elaborated on their use of the ACA Standards. <sup>484</sup> For example, one responded, "Our jurisdiction strives to meet or exceed ACA standards. We have a team member that reviews policies before they are written or updated to make sure they comply or exceed current ACA standards." <sup>485</sup> Others explained that they "use ACA policies as one guideline among several," <sup>486</sup> "take them into consideration along with NIC and ASCA guidelines," <sup>487</sup> or "use ACA to guide our policies, but they are the minimum standards." <sup>488</sup> Others stated that they "insert the ACA RH standards into policy verbatim," <sup>489</sup> "adopt ACA standards as best practice," <sup>490</sup> or "incorporate ACA standards into all applicable policies and SOPs." <sup>491</sup>

Seven jurisdictions reported that they did not rely on ACA Standards in their policy-making. Yet, of these, one jurisdiction indicated that "[m]any ACA standards have been included in policies relating to restrictive housing" and another explained that it "rel[ied] on surrounding states' policies and advice from the [state] Department of Justice."

Under 2016 ACA Standard 4-RH-0030, a jurisdiction's "written policy, procedure and practice require that the agency will attempt to ensure offenders are not released directly into the community from Restrictive Housing." Thirty-two jurisdictions responded to the survey

question about this Standard. Nineteen of these jurisdictions reported that they had implemented this policy. 496 Four of the nineteen jurisdictions indicated it had been their policy before the 2016 ACA Standard. 497 An additional four jurisdictions reported that they had "substantially implemented this policy, with exceptions." 498 Six of the jurisdictions that said they adopted the Standard clarified that they followed the policy to the greatest extent possible given other considerations, or were in the process of implementing it. 499

With regard to mental health, the 2016 ACA Standards defined "serious mental illness" as:

Psychotic Disorders, Bipolar Disorders, and Major Depressive Disorder; any diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interferes with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a qualified mental health professional(s).<sup>500</sup>

ACA Standard 4-RH-0031 states that a jurisdiction's correctional "agency will not place a person with serious mental illness in Extended Restrictive Housing." The ACA defines Extended Restrictive Housing as "[h]ousing that separates the offender from contact with general population while restricting an offender/inmate to his/her cell for at least 22 hours per day and for more than 30 days for the safe and secure operation of the facility." Eighteen jurisdictions told us that they had implemented this Standard. Four jurisdictions reported that they had "substantially implemented this policy, with exceptions."

The 2016 ACA Standard 4-RH-0034 stated that confining individuals "under the age of 18 years of age in Extended Restrictive Housing is prohibited." Of the thirty-six jurisdictions responding to this inquiry, twenty-three reported that they had implemented the Standard, and five jurisdictions reported that they had "substantially implemented this policy, with exceptions." For example, one jurisdiction indicated that it rarely housed individuals under age eighteen for more than a short amount of time." Those individuals are "managed by a different agency." 508

With regard to pregnancy, ACA Standard 4-RH-0033 stated that prisoners "determined to be pregnant will not be housed in Extended Restrictive Housing." Twenty-two of the thirty jurisdictions that responded to this question said that they had implemented it. Two jurisdictions reported that they had "substantially implemented this policy, with exceptions."

We also asked jurisdictions to describe any other changes to their restrictive housing policies in light of the revised ACA Standards. Twelve of fifteen jurisdictions that responded to the question indicated that they had or were in the process of making revisions based on the ACA standards.<sup>512</sup>

## **Evaluating the Effects of Policy Changes**

The survey asked whether jurisdictions had studied the impact of restrictive housing policy changes in terms of incidents of prisoner self-harm, incidents of use of force, prisoner and staff

morale, staff well-being and/or safety, success of prisoners on release to the general population or in programs and activities, and when prisoners return to their communities.

Of the eleven jurisdictions responding to this question, eight reported that they had completed or were undertaking studies, <sup>513</sup> and several reported studies in more than one area. In 2017, fourteen jurisdictions reported studies underway. <sup>514</sup> Responding to the 2019 survey, three jurisdictions said that they had studied the effects on prisoner self-harm, <sup>515</sup> three on use of force, <sup>516</sup> two on prisoner morale, <sup>517</sup> three on staff morale, <sup>518</sup> three on staff well-being and/or safety, <sup>519</sup> two on success of prisoners on release to the general population or in programs and activities, <sup>520</sup> and four on returns by prisoners to communities. <sup>521</sup>

Several jurisdictions indicated some efforts at analyses through other means. For example, one jurisdiction explained, "We have looked at overall incidents, grievances and disciplinaries in the designated housing units over a three year period: Pre-changes (restrictive housing), implementation period, post implementation." Another jurisdiction noted that it had "a restrictive housing oversight committee studying these issues currently." One jurisdiction stated that it was "too soon to measure any impact."

The survey also asked about plans for future studies. Of the eighteen jurisdictions responding, fourteen reported plans of varying levels of specificity to undertake studies. <sup>525</sup> Seven responded that they had plans in place for studies on the effects on prisoner self-harm, <sup>526</sup> seven on use of force, <sup>527</sup> six on prisoner morale, <sup>528</sup> six on staff morale, <sup>529</sup> ten on staff well-being and/or safety, <sup>530</sup> seven on success of prisoners on release to the general population or programs and activities, <sup>531</sup> and seven on success of prisoners in returning to communities. <sup>532</sup> Several jurisdictions also provided information about their plans for future studies. <sup>533</sup>

## IV. Reducing Reliance on Restrictive Housing: The 2018-2020 Landscape

In this section, as in prior reports, we provide a brief overview of national and global initiatives that address the use of isolation in prisons.<sup>534</sup> Animating many of these efforts is documentation of the harms that flow from the deprivations that isolation entails. Social scientists, joined by correctional and health professionals, continue to analyze the impact of prison conditions on the people who live and work in prison. One focus is on individuals subjected to isolation,<sup>535</sup> some of whom have eloquently chronicled its impact.<sup>536</sup> Another is on the staff who work in such settings.<sup>537</sup>

Doing research on restrictive housing is complex,<sup>538</sup> as the variables include different degrees and durations of isolation, the level of staffing and the skills of correctional officers, health resources, activities made available and used, budgets, the opportunities and conditions for those not in solitary confinement, cell design, the facility itself, and the density and kinds of individuals housed within both segregated and general populations. Given the range of people and of situations, a few commentators argue that the "purported negative physiological and psychological effects" have been overstated.<sup>539</sup> In the main, however, most experts in this arena agree that profound deprivations that radically restrict physical movements and human sociability have disabling effects.<sup>540</sup>

In addition to social scientists, recent scholarship has tracked the history of the use of solitary confinement over the centuries, including eras when solitary confinement was praised for its redemptive utilities.<sup>541</sup> Atop new analyses of a more complex account of the eighteenth and nineteenth century deployment of solitary confinement comes more research on its rise during the twentieth century. Ryan Sakoda and Jessica Simes used an extensive data set that detailed patterns of incarceration in Kansas during three decades.<sup>542</sup> They learned that the proportion of prisoners held in isolation grew significantly with rising numbers of people put in prison. Before that state expanded its prisons in the 1970s, 13% of its prisoners spent thirty days or more in solitary.<sup>543</sup> Between 1987 and 1992, more than 40% of prisoners had spent that amount of time in solitary confinement. The percentages of people of color were higher, as they were held for longer periods of time in isolation.<sup>544</sup>

This research intersects with community mobilizations that have prompted dozens of legislative initiatives and several lawsuits—all aiming to limit the use of solitary confinement. Some of these efforts target constraints across the population of people in prison, while others focus on subpopulations, such as youth under a certain age, pregnant prisoners, individuals with serious mental illness, and the placement in solitary confinement of people serving capital sentences.

One question for future research is how COVID-19, which has affected all aspects of management of congruent housing facilities, impacts these initiatives. As social distancing has become so important, health care professionals caution against conflating the use of restrictive housing with medical quarantines.<sup>545</sup> Indeed, the concerns of prisoners and staff in light of COVID-19 makes all the more urgent the need to repurpose and reconfigure spaces formerly used for isolation to enable more de-densification within facilities.

## Legislative Regulation of the Use of Restrictive Housing

Since the publication of *Reforming Restrictive Housing* in October 2018, legislation to limit the use of isolation in prison has been introduced in the legislatures of more than half the states and in the U.S. Congress. <sup>546</sup> These proposals have sought to curtail restrictive housing, especially for pregnant prisoners, youth, and those with serious mental illness, as well as to improve data collection and reporting on when restrictive housing may be imposed. From October of 2018 to June of 2020, we tallied twenty-nine jurisdictions in which such bills have been introduced and, as of the spring of 2020, enactments in fifteen states and in the federal government. <sup>547</sup> In addition, as of the summer of 2020, bills were pending in eight states and in the U.S. Congress. <sup>548</sup> Statutory revisions to limit the use of restrictive housing before October 2018 (the time in focus here) were discussed in *Reforming Restrictive Housing: The 2018 ASCA-Liman Nationwide Survey of Time-in-Cell*. For example, extensive regulations were put in place in Massachusetts. <sup>549</sup>

Examples of the kind of reforms underway come from 2019 New Jersey legislation, effective August 1, 2020, that seeks comprehensive changes to the use of solitary confinement. This law restricts "isolated confinement" for "vulnerable populations" and defines those populations to include prisoners under age twenty-two; over age sixty-four; with mental illness, developmental disabilities, or a serious medical condition; who are pregnant or postpartum; who have a "significant auditory or visual impairment"; or who are "perceived to be" LGBTI. The legislation requires that, except under certain enumerated circumstances, individuals who are members of these subpopulations be removed from isolated confinement. The legislation also prohibits placement for "non-disciplinary reasons" unless there is a "substantial risk of serious harm" to the prisoner or to others. In addition, isolation may not be used under conditions or for periods of time that "foster psychological trauma," psychiatric disorders, or "serious, long-term damage" to the prisoner's brain. Serious large also provides that a prisoner may not be placed in restrictive housing for more than twenty consecutive days or for more than thirty days in a sixty-day period.

New Mexico also enacted legislation that limits the use of restrictive housing across multiple populations; in addition, the new law creates mechanisms for oversight and transparency in both private and state-run facilities. The New Mexico Corrections Restricted Housing Act of 2019 defines "restricted housing" as "confinement of an inmate locked in a cell . . . for twenty-two hours each day without daily, meaningful and sustained human interaction." <sup>553</sup> The law, effective July 1, 2019, prohibits, without exception, the use of restrictive housing for children (defined to be people under the age of eighteen) or prisoners who are "known to be pregnant." For people who have a "serious mental disability," explained as any "serious mental illness . . . [or] significant functional impairment . . . or intellectual disability," restricted housing is prohibited except to prevent an imminent threat of harm, in which case placement is capped at forty-eight hours. <sup>555</sup> The law also requires that correctional facilities produce quarterly reports on the use of restrictive housing, which must include the "age, gender, and ethnicity" of all prisoners placed in restrictive housing that quarter. <sup>556</sup> Private correctional facilities must also regularly report all monetary settlements paid as a result of lawsuits filed by inmates, former inmates, or inmates' estates against the private correctional facility or its employees. <sup>557</sup>

Montana's 2019 legislation, effective January 1, 2020, restricts the use of isolation and also sets minimum requirements for the conditions in restrictive housing. The law requires that restrictive housing be used only "as a response to the most serious and threatening behavior," "for the shortest time possible," and with the "least restrictive conditions possible." The legislation bans solitary confinement, absent extenuating circumstances, for pregnant prisoners, <sup>559</sup> in youth facilities if placement is twenty-four hours or more, <sup>560</sup> and for prisoners with a serious mental disorder if placement is for more than fourteen days. Placement in solitary may not exceed twenty-two hours a day, and facilities must provide access to certain resources and activities, like showers, exercise, educational programs, and commissary. <sup>561</sup>

Minnesota's law requires that living conditions in restrictive housing "are approximate to those offenders in general population, including reduced lighting during nighttime hours." <sup>562</sup> The legislation directs the commissioner of corrections to receive reports of all prisoners who are in restrictive housing for more than thirty consecutive days as well as reports about all those held for more than 120 days, which must include a reason for the placement and a "behavior management plan." <sup>563</sup> The new law requires mental health screening and services, <sup>564</sup> instructs the commissioner to develop a system of behavioral incentives, <sup>565</sup> and prohibits the direct release to the community "from a stay in restrictive housing for 60 or more days absent a compelling reason." <sup>566</sup>

Among jurisdictions enacting reforms between October 2018 and June 2020, certain trends have emerged. We identified fifteen enacted statutes that limit or prohibit the use of restrictive housing for youth, pregnant prisoners, or those with serious mental illness. Such provisions were enacted at the federal level<sup>567</sup> and in fourteen states, including those mentioned above. Those jurisdictions are Arkansas,<sup>568</sup> Colorado,<sup>569</sup> Florida,<sup>570</sup> Georgia,<sup>571</sup> Louisiana,<sup>572</sup> Maryland,<sup>573</sup> Montana,<sup>574</sup> Nebraska,<sup>575</sup> New Jersey,<sup>576</sup> New Mexico,<sup>577</sup> South Carolina,<sup>578</sup> Texas,<sup>579</sup> Virginia,<sup>580</sup> and Washington.<sup>581</sup>

Of these states, nine laws enacted between October 2018 and June 2020 limit (with some variation in language) the use of restrictive housing for prisoners who are pregnant, and in some cases, for prisoners who are postpartum. Specifically and with certain exceptions, Louisiana prohibits placement in solitary confinement of a prisoner who "is pregnant, or is less than eight weeks post medical release following a pregnancy, or is caring for a child in a penal or correctional institution," and, with exceptions, Texas, Virginia, and South Carolina prohibit the use of restrictive housing for pregnant inmates or inmates who had given birth in the past thirty days unless there is a reasonable belief of flight risk or that the prisoner will harm themselves, the fetus, or another person. Other states that limit the use of restrictive housing for pregnant prisoners include: Georgia, Maryland, Montana, Montana

New laws enacted by the federal government and by six states limit the placement of youth in restrictive housing. The federal First Step Act of 2018 prohibits "the involuntary placement" of a juvenile "alone in a cell, room, or area for any reason" other than as a response to "a serious and immediate risk of physical harm to any individual." New Mexico bans, without exceptions, restricted housing for youth under the age of eighteen. Washington prohibits the use of "room confinement" for youth under the age of eighteen except to prevent imminent harm, in which case confinement must be limited at four total hours in a twenty-four hour period. Nebraska's law prohibits the placement of youth under the age of eighteen in "room confinement" as punishment,

retaliation, or due to staff shortage, and discourages placement in room confinement beyond one hour in a twenty-four hour period. Second Seco

Four enactments address the use of restrictive housing for prisoners with serious mental illness, a disability, or a substance use disorder. Montana prohibits placement in restrictive housing for "behavior that is the product of [an] inmate's disability or mental disorder unless the placement is after prompt and appropriate evaluation by a qualified mental health professional" and restrictive housing must be "for the shortest time possible, and with the least restrictive conditions possible." New Jersey bans placement of prisoners with a mental illness, developmental disability, auditory or visual impairment, or serious medical condition in isolated confinement unless there is a "substantial risk of serious harm" to the prisoner or others, in which case mental and physical evaluations are required daily. New Mexico's law describes that individuals with "serious mental disability" can be placed in restrictive housing only if they meet certain criteria. Serious mental disability when it is necessary to "prevent an imminent threat of physical harm to the inmate or another person"; if so, restrictive housing is limited to forty-eight consecutive hours. Colorado Senate Bill 20-007, signed by the governor on July 13, 2020, prohibits the use of solitary confinement for individuals receiving evaluation, care, or treatment for substance use.

In addition to these constraints, seven jurisdictions require data collection and reporting on the use of restrictive housing. That group includes the federal government, 602 Maryland, 603 Michigan, 604 Minnesota, 605 Nebraska, 606 New Mexico, 607 and Virginia. 608 These reporting requirements seek to document the scope of restrictive housing and the populations placed in restrictive housing. Minnesota's law, for example, requires the commissioner of corrections to file an annual report with the legislature providing "(1) the number of inmates in each institution placed in segregation during the past year; (2) the ages of inmates placed in segregation during the past year; (3) the number of inmates transferred from segregation to the mental health treatment unit; (4) disciplinary sanctions by infraction; (5) the lengths of terms served in segregation, including terms served consecutively; and (6) the number of inmates by race in restrictive housing." The first report to the Minnesota legislature under this new statute was due January 15, 2020.

As we write, more legislation is pending or is on the horizon. Some bills aim for comprehensive reform, and others target particular issues. For example, a bill has been introduced in the U.S. House of Representatives which would give preference to states applying for certain federal grants if a state has restricted the use of juvenile solitary confinement.<sup>611</sup>

Several other bills have proposed a variety of formulations to limit the use of restrictive housing. For example, a bill before the Hawaii Senate would, among other reforms, limit administrative segregation to a maximum of fourteen consecutive days within a thirty-day period. A set of bills before the New York State Senate and Assembly, known as the HALT Act, aiming at comprehensive reforms, would cap the use of isolation for all prisoners at fifteen consecutive days and prohibit solitary confinement for people who are pregnant and individuals under age twenty-one. In Pennsylvania, a proposed bill would also cap the use of restrictive housing at fifteen consecutive days, and would prohibit solitary confinement for pregnant prisoners, people under age twenty-one, over age seventy, and LGBTQ individuals. A 2019 draft bill in Connecticut calls for the end of solitary confinement and would abolish it by mandating that "the department [of corrections] shall not hold any person on administrative segregation status or restrictive housing status."

#### In the Courts

As in years past, courts continue to hear both individual and systemic challenges to the use of restrictive housing. Several cases address the use of prolonged segregation generally and others focus on the isolation of individuals with mental illness, juveniles, and people serving capital sentences.

Federal and state courts have recently approved or extended settlement agreements in class actions that challenged the constitutionality of long-term placement in isolation. For example, in May 2019, the U.S. District Court for the Middle District of Georgia approved a settlement in a case on behalf of "all prisoners who are or will be assigned to the Special Management Unit (SMU) at Georgia Diagnostic & Classification Prison" in that state's Jackson prison. 616 The complaint alleged that the prison failed to provide meaningful assessments of placement in the SMU in violation of the Fourteenth Amendment, and that the conditions of confinement, including isolation and inadequate food, violated the Eighth Amendment. 617 On May 7, 2019, the federal court approved a settlement that required at least four hours out-of-cell each weekday, and that limited a prisoner's time in the restrictive housing unit to no longer than two years with exceptions. The categories excepted included voluntary placement or placement for murder committed while incarcerated, escape "outside the secure fencing of a GDC facility," causing "serious bodily injury to another inmate or a GDC employee, contractor or volunteer," taking another inmate or employee, contractor, or volunteer hostage, the crime being "so egregious the person was placed in the Tier III Program immediately, or for posing "such an exceptional, credible, and articulable risk to the safe operation of the prison system or to the public that no other placement is sufficient to contain the risk." The settlement also required quarterly reviews by a panel of senior security, legal, and mental health professionals and that isolated prisoners were to be given access to educational programming and materials.

Another consent agreement, *Reid v. Wetzel*, finalized in April of 2020, responded to claims on behalf of individuals with capital sentences, whom Pennsylvania had held in solitary confinement. <sup>618</sup> In November of 2019, the state agreed to provide at least 42.5 hours of out-of-cell time per week<sup>619</sup> and to accord these prisoners the same "rights and privileges" for phone calls and contact visits that were available in general population. <sup>620</sup>

In some cases, litigants have returned to court after settlements were entered. For example, in January of 2019, a magistrate judge in the Northern District of California ordered a twelvemonth extension of the Settlement Agreement in Ashker v. Newsom. 621 That litigation, addressing Pelican Bay isolation facility in California, had alleged Eighth Amendment violations based on placement in prolonged solitary confinement with no contact with other prisoners, no phone calls or visits, no programming, and no good time credits. In 2015, in Ashker v. Governor of California, the federal court approved a class-wide settlement that required the reduction by hundreds of the number of people held in isolation and changes in the conditions of those who remained. 622 Instead of relying on the perception that a person was a member of a "security threat group" or gang, the settlement provided that officials were to evaluate individuals based on their behavior in prison. As a result, about 2,000 individuals were to be moved to general population, as were individuals who had spent more than ten years in solitary confinement. 623 Furthermore, placements were not to be indefinite, and the state was to provide step-down programs and social contact.<sup>624</sup> In 2018. the class returned to court and sought an extension of the duration of the settlement, and in 2019, the magistrate judge agreed based in part on evidence of ongoing due process violations such as the use of "unreliable gang validations to deny class members a fair opportunity to seek parole." 625

In addition, a few courts have decided the merits of a claim that profound isolation violates the cruel and unusual punishments clause of the Eighth Amendment. For example, in 2019 the Fourth Circuit affirmed the District Court's holding in Porter v. Clarke that the conditions of confinement on death row violated the Eighth Amendment. 626 The complaint, filed in 2014, alleged that the "permanent, unmitigated segregation" of death row prisoners "subjects them to an inhumane existence unrelated to any legitimate penological goal, amounting to the imposition of cruel and unusual punishment violating the Eighth Amendment."627 The circuit court relied on the facts that individuals on death row spent years "alone, in a small . . . cell" with "no access to congregate religious, educational, or social programming" and that such conditions presented "an objective risk of serious psychological and emotional harm . . . ".628 The court explained, "The challenged conditions on Virginia's death row deprived inmates of the basic human need for meaningful social interaction and positive environmental stimulation. The undisputed evidence established that that deprivation posed a substantial risk of serious psychological and emotional harm and that State Defendants were deliberately indifferent to that risk."629 To remedy the constitutional violation, the district court prohibited solitary confinement for twenty-three hours a day and required the creation of policies "relating to cell time, visitation, and recreation that defendants, in their professional expertise, believe satisfy both the Eighth Amendment and the prison's need for security."630

In 2019, a federal court in Connecticut found unconstitutional the detention of a prisoner, deemed by statute to be a "special circumstances high security" individual, in "permanent solitary confinement without any review of the severity of, or the security justifications for, conditions of extreme social isolation and sensory deprivation." As the court explained, aside from "two daily hours of recreation and two fifteen-minute breaks to eat lunch and dinner,", the prisoner was "effectively condemned to spend the rest of his life in a cell roughly the size of a parking space." The court held that the conditions violated the Eighth Amendment, and in addition concluded that the lack of procedure violated the Fourteenth Amendment, and that the statute requiring this form of confinement was an unconstitutional bill of attainder. The injunction, stayed pending appeal, required the state to stop holding the prisoner in isolation for more than twenty-one hours per day and to provide an individualized review of the need for isolation.

Other courts have considered challenges to restrictive housing for certain categories of individuals such as those with serious mental illness. For example, in 2019, a federal judge in Alabama issued a supplemental opinion in *Braggs v. Dunn*, a class action that began against the Alabama Department of Corrections (ADOC) in 2014.<sup>635</sup> The court held in a 2017 decision that ADOC violated prisoners' Eighth Amendment rights in its provision of mental health care,<sup>636</sup> including in its treatment of seriously mentally ill prisoners held in segregated housing.<sup>637</sup> On February 11, 2019, the court issued a supplemental opinion, holding that ADOC had not conducted adequate periodic mental health evaluations of prisoners in segregation.<sup>638</sup> The court found that the condition of the cells in the segregation unit contributed to a "heightened risk of decompensation and development of mental illness" making it "more difficult for staff to detect decompensation."<sup>639</sup> In a subsequent order, the court called for thirty-minute security checks for prisoners in segregation units; prompt implementation of more protective measures for prisoners in segregation; and not placing prisoners released from suicide watch into segregation units. <sup>640</sup>

In Montana, litigation continues in federal court regarding placement in restrictive housing of individuals with serious mental illness. A March 2014 complaint alleged Eighth Amendment violations, including "routinely keeping prisoners with serious mental illness locked in solitary confinement 22 to 24-hours a day for months, and in some cases years . . ." .<sup>641</sup> On July 19, 2019, the Ninth Circuit reversed the district court's grant of defendant's motion to dismiss and remanded to a different judge. The appellate court discussed allegations of a "distressing pattern of placing mentally ill prisoners in solitary confinement" for long periods of time, and "the frequent, improper use of this punishment for behavior arising from mental illness." <sup>642</sup>

Other decisions addressed the particular challenges and harms that solitary confinement poses to young people. For example, in 2018, a federal judge in the Southern District of Florida entered a final order approving settlement in a class action filed on behalf of juveniles held or previously held in solitary confinement at Palm Beach County Jail. The settlement required the Sheriff's Office to "bring all juveniles out of segregated housing during the regular school day in order for the School Board to facilitate educational services and programming" and the School Board to "provide appropriate educational services and programming to juveniles . . . ." In New York, juveniles held in solitary confinement in Broome County reached a settlement in 2018 with the jail and school district. The settlement proscribes placement of juveniles in solitary confinement "for disciplinary purposes unless the juvenile poses an imminent threat to the safety and security of the facility and less restrictive measures will not adequately address the threat."

### **Restrictive Housing as a Global Concern**

In 2015, the General Assembly of the United Nations adopted the revised Standard Minimum Rules for the Treatment of Prisoners, also known as the "Nelson Mandela Rules," 647 which were drafted with input from CLA members. The 2018 ASCA-Liman Report, *Reforming Restrictive Housing*, discussed the growth in concerns worldwide about the use of isolation, as it sketched some of the many countries addressing the harms of isolating confinement. This section provides a brief overview of global developments since then.

We begin at the transnational level, where calls for reform continue. In March 2020, the United Nations Special Rapporteur on Torture and Other Cruel, Inhuman or Degrading Treatment

or Punishment published the *Report on Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.* That monograph noted that the definition of torture excludes "pain or suffering arising only from, inherent in or incidental to lawful sanctions," but that certain practices—"indefinite solitary confinement," placing prisoners "in a dark or constantly lit cell," and cutting off "family contacts"—could not be considered "a lawful domestic sanction." According to the Special Rapporteur, subjecting prisoners to solitary confinement for more than fifteen days is regarded as a form of "psychological torture" in violation of the Nelson Mandela Rules and the Convention Against Torture. The Special Rapporteur's press release stated that these "dehumanizing conditions of detention, sometimes euphemistically referred to as segregation, . . . are routinely used by US correctional facilities" and "voiced alarm at the excessive use of solitary confinement by correctional facilities in the United States."

In October 2019, the World Medical Association (WMA) issued its conclusion that solitary confinement as defined by the Nelson Mandela Rules "can constitute a form of torture or ill-treatment" if it is used "in excess of 15 days." The WMA outlined the harm to health from solitary confinement, and the particular problems for children and people with mental and physical disabilities. For these groups, the WMA wrote, "solitary confinement has been documented to cause serious psychological, psychiatric, and sometimes physiological" harms, the effects of which can be long-term or permanent. The WMA recommended prohibiting solitary confinement beyond fifteen days, as well as prohibiting any use of solitary confinement for children, young people, those with physical or mental conditions that would be exacerbated by isolated confinement, pregnant prisoners, and prisoners up to six months postpartum. In all other cases, the WMA recommended that solitary confinement "be imposed [only] . . . as a last resort and subject to independent review, and for the shortest period of time possible."

Recent litigation and legislation in various international for have also addressed restrictive housing. Illustrative are a sequence of events in Canada and in India, two countires that have, during the last two years, made structural and legal changes in their approaches to restrictive housing. In Canada, the Court of Appeal for Ontario ruled in March 2019 that placement in federal administrative segregation for more than fifteen consecutive days violated Section 12 of the Canadian Charter of Rights and Freedoms, which prohibits "cruel and unusual treatment or punishment."656 In June 2019, the Court of Appeal for British Columbia ruled that administrative segregation in federal facilities violated Section 7 of the Canadian Charter of Rights and Freedoms, which encompasses the right to "life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice."657 The Attorney General of Canada initially pursued appeals of these decisions, but in April 2020 the government withdrew its appeals to the Canadian Supreme Court. 658 The government's response to the litigation came after the Canadian Parliament had, in June of 2019, ended placing federal prisoners in administrative segregation for more than twenty-two hours a day for more than fifteen consecutive days. The legislation, entitled An Act to amend the Corrections and Conditional Release Act and another act, replaces the use of administrative segregation in federal correctional facilities with "structured intervention units," which must provide at least four hours of out-of-cell programming per day and at least two hours of meaningful human contact. <sup>659</sup> In implementing this provision, the Commissioner of Canada's federal Correctional Service has limited placement in structured intervention units to five consecutive days maximum, or fifteen days cumulative in a thirty-day period.660

In India, two state courts have restricted the use of solitary confinement. In April 2018, the Uttarakhand High Court declared that prisoners who have more potential routes to contest their death sentences could not be placed in solitary confinement.<sup>661</sup> The court invoked the provision in the Nelson Mandela Rules that solitary confinement should be used "only in exceptional cases as a last resort." <sup>662</sup> In December of 2018, the High Court of Punjab and Haryana also prohibited the use of solitary confinement for people with capital sentences until such time as "the sentence of death has become final, conclusive and indefeasible which cannot be annulled or voided by any judicial process."<sup>663</sup>

In addition, a series of reports from Europe, North Africa and the Middle East discuss the harms of isolation. In Ireland, the Irish Prison Service has implemented a series of reforms to bring the country into compliance with the Nelson Mandela Rules.<sup>664</sup> This initiative initially resulted in a significant reduction in the number of prisoners in solitary confinement,.<sup>665</sup> In 2019, however, the Irish Penal Reform Trust reported that "this momentum appears to have deteriorated,"<sup>666</sup> that data from that year showed "a rise in the use of solitary confinement, and that ["u]rgent action is required. Necessary steps include the consistent monitoring and publication of data, in particular on the number of people held in prolonged solitary confinement (more than fifteen days), given its severely psychological effects on an individual."<sup>667</sup>

Concerns about Norway come from a 2019 report by the Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment of the Council of Europe (CPT). That committee criticized Norway for its overuse of solitary confinement.<sup>668</sup> The CPT found that prisoners who "did not pose a security risk" were confined alone "in their cells for twenty-two to twenty-three hours per day (with only one hour of outdoor exercise), without being offered any purposeful activities."<sup>669</sup> Some prisoners had been "held for several years in a *de facto* solitary-confinement-type regime."<sup>670</sup> The CPT concluded that this "state of affairs is not acceptable," as it also noted that "initial steps" had been taken to improve the situation of the prisoners concerned."<sup>671</sup>

In Egypt, Amnesty International released a report on the prevalence of solitary confinement. Amnesty discussed Egypt's Prison Law and related regulations that authorize prison wardens to order up to thirty days of solitary confinement, while more senior administration officials are authorized to order six months of solitary confinement "against any category of prisoner." To learn about conditions in fourteen facilities there, researchers conducted more than 100 interviews with prisoners, lawyers, and family members of prisoners. The 2018 report concluded that solitary confinement was being used to target political prisoners. The cells in which prisoners were held "were small, had poor lighting and ventilation, and lacked beds and mattresses." In 14 cases . . . prisoners had no toilet facilities. . . forcing them to urinate and defecate in plastic or metal containers."

In addition to these accounts related to isolation across detention populations, several jurisdictions outside the United States have addressed the particular harms faced by youth and disabled individuals in restrictive housing. For example, in January of 2020, the Chief Inspector of Prisons for England and Wales reported that some children were being held in cells continually and permitted not more than fifteen minutes out-of-cell per day.<sup>678</sup> The Chief Inspector called for a "major overhaul" to the segregation policies of "young offender institutions."<sup>679</sup> Needed was "an

entirely new approach" to "use separation to protect children from harm," and that would not have such children be "subjected to impoverished [daily] regimes." <sup>680</sup>

In Australia in March of 2020, the Human Rights Law Centre (HRLC) called on the government to curtail its use of solitary confinement (as defined by the Nelson Mandela Rules) for youth and those with disabilities. The report noted that "broad laws in each jurisdiction" in Australia lacked consistency and "resulted in a broadening of circumstances in which people [can] be isolated in a cell without meaningful human contact." Finding that solitary confinement can cause severe and permanent harms to mental and physical health, HRLC proposed a prohibition on solitary confinement for youth and disabled individuals, and in all other cases to use isolation only as a "practice of last resort." Given that the report overlapped with the spread of COVID-19, the HRLC warned that "the use of solitary confinement as a means to prevent the spread of COVID-19 is both inappropriate and ineffective."

And, as citations in the footnotes reflect, an effort to provide a world-wide look at solitary confinement was published in 2019. Jules Lobel and Peter Scharff Smith's edited volume, *Solitary Confinement: Effects, Practices, and Pathways toward Reform*, provides an international comparative and interdisciplinary lens to analyze the use and consequences of long-term isolation, as well as to examine the range of efforts aimed at reform and elimination.<sup>685</sup>

In sum, the many shifts in the United States stemming from decisions by correctional officials are part of a transnational reevaluation of restrictive housing. Four of the jurisdictions that responded to this survey reported they no longer use the practice of holding people for twenty-two hours or more in cells for fifteen days or more, and many others are imposing new constraints.

# V. Comparing the Numbers of People in Restrictive Housing in 2015, 2017, and 2019

As we noted, we have data about total custodial populations and restrictive housing populations from thirty-nine jurisdictions that, when their reported numbers are aggregated, house about 57.5% of the U.S. prison population. These jurisdictions reported 31,542 people in restrictive housing. We therefore estimated that between 55,000 and 62,500 people were in restrictive housing in the summer of 2019.<sup>686</sup>

In this concluding section, we put together materials from the 2015, 2017, and 2019 CLA-Liman surveys by analyzing some of the data provided by the jurisdictions that responded with information on restrictive housing populations.<sup>687</sup> To be constant in comparisons, we have identified thirty-three jurisdictions that provided restrictive housing data across all three time periods. That comparison permits insights into if and how the use of restrictive housing changed in those jurisdictions during the intervals between the surveys. As detailed below, the numbers of prisoners in restrictive housing decreased in some jurisdictions and increased in others.<sup>688</sup>

Table 26 displays the number and percentage of prisoners in restrictive housing across these jurisdictions for 2015, 2017, and 2019. Among the thirty-three jurisdictions, the aggregate number of prisoners reported to be in restrictive housing decreased from 2015 to 2017 by 6,642 prisoners, from 42,512 in 2015 to 35,870 in 2019. Between 2017 and 2019, the aggregate number of prisoners reported to be in restrictive housing decreased by 6,902 prisoners, from 35,870 in 2017 to 28,968 in 2019. Across both time periods the aggregate number of prisoners decreased by 13,544.

In twenty-three of these thirty-three jurisdictions, the number of prisoners reported in restrictive housing decreased across both timespans.<sup>689</sup> Three jurisdictions saw an overall decrease in their restrictive housing populations in the four years between 2015 and 2019, with an increase between 2017 and 2019.<sup>690</sup> Five jurisdictions saw an overall increase between 2015 and 2019, with a decrease from 2015 to 2017 or from 2017 to 2019.<sup>691</sup> In the last two jurisdictions, the number of prisoners reported in restrictive housing increased across both time periods.<sup>692</sup>

Five jurisdictions that had the largest decreases in numbers of prisoners in restrictive housing between 2015 and 2019 accounted for nearly 63% of the aggregate reduction across jurisdictions for that time period. These same jurisdictions accounted for less than half of the reduction in 2017 to 2019, as two jurisdictions reflected increases in their restrictive housing populations during that time span.<sup>693</sup>

Across these thirty-three jurisdictions, the aggregate percentage of prisoners in restrictive housing decreased from 5.0% in 2015 to 4.4% in 2017 and 3.8% in 2019. The largest reduction in the percentage of prisoners in restrictive housing in a single jurisdiction was from 14.5% in 2015 and 19.0% in 2017 to 4.8% in 2019.<sup>694</sup> The largest increase in the percentage of prisoners in restrictive housing in a single jurisdiction was from 3.5% in 2015 and 6.4% in 2017 to 9.0% in 2019.<sup>695</sup> Figures 16-21 detail the percentage of prisoners in restrictive housing by jurisdiction in two ways: Figures 16, 17, and 18 display the percentages from 2015-2017, 2017-2019, and, finally, from 2015-2019; and Figures 19, 20, and 21 provide change in percentages across the same time spans.

A number of factors may influence the variable changes in these numbers. Among these are changes in policies and practices on restrictive housing, in facilities and budgets, litigation, statutes, and in the overall numbers of people living in and working in prison systems. In addition, changes in total prison population and restrictive housing population do not always move in the same direction. 696

Table 26 Jurisdiction-by-Jurisdiction Comparisons of Restrictive Housing (RH)
Populations in 2015, 2017, and 2019

(n = 33)

Jurisdiction	2015 Total Custodial Population for Facilities Reporting RH Data	2015 Population in Restrictive Housing	2015 Percentage in Restrictive Housing	2017 Total Custodial Population for Facilities Reporting RH Data	2017 Population in Restrictive Housing	2017 Percentage in Restrictive Housing	2019 Total Custodial Population for Facilities Reporting RH Data	2019 Population in Restrictive Housing	2019 Percentage in Restrictive Housing
Alabama*	24,549	1,402	5.7%	21,592	855	4.0%	20,673	670	3.2%
Arizona	42,736	2,544	6.0%	42,146	2,723	6.5%	42,312	1,934	4.6%
Colorado	18,231	217	1.2%	18,297	10	0.1%	14,397	0	0.0%
Connecticut	16,056	128	0.8%	14,137	328	2.3%	12,942	106	0.8%
Delaware*	4,342	381	8.8%	4,333	43	1.0%	4,568	0	0.0%
Georgia	56,656	3,880	6.8%	54,723	3,200	5.8%	44,073	2,147	4.9%
Hawaii	4,200	23	0.5%	3,713	13	0.4%	3,561	1	0.0%
Idaho	8,013	404	5.0%	7,161	310	4.3%	9,196	203	2.2%
Illinois	46,609	2,255	4.8%	42,177	921	2.2%	38,425	1,327	3.5%
Indiana	27,508	1,621	5.9%	26,317	1,741	6.6%	27,182	1,574	5.8%
Kansas	9,952	589	5.9%	9,886	459	4.6%	10,005	686	6.9%
Kentucky	11,669	487	4.2%	12,000	408	3.4%	11,465	238	2.1%
Louisiana*	18,515	2,689	14.5%	14,291	2,709	19.0%	14,269	679	4.8%
Maryland	19,687	1,485	7.5%	21,785	1,417	6.5%	19,059	1,109	5.8%
Massachusetts**	10,004	235	2.3%	9,047	443	4.9%	8,424	102	1.2%
Mississippi	18,866	185	1.0%	12,940	529	4.1%	9,436	366	3.9%
Missouri	32,266	2,028	6.3%	33,204	2,990	9.0%	27,924	2,258	8.1%
Montana	2,554	90	3.5%	1,769	113	6.4%	1,650	148	9.0%
Nebraska	5,456	598	11.0%	5,178	328	6.3%	5,499	256	4.7%
New York	52,621	4,498	8.5%	50,764	2,666	5.3%	46,066	2,096	4.5%
North Carolina	38,039	1,517	4.0%	37,259	1,109	3.0%	34,869	1,654	4.7%
North Dakota	1,800	54	3.0%	1,830	8	0.4%	1,775	0	0.0%
Ohio	50,248	1,374	2.7%	49,954	1,282	2.6%	48,887	1,068	2.2%
Oklahoma	27,650	1,552	5.6%	26,895	1,368	5.1%	17,531	968	5.5%
Oregon	14,724	630	4.3%	14,574	938	6.4%	14,734	705	4.8%

Totals	845,235	42,512	5.0%	816,115	35,870	4.4%	764,865	28,968	3.8%
Wyoming	2,128	131	6.2%	2,154	81	3.8%	2,013	36	1.8%
Wisconsin*	20,535	751	3.7%	22,589	713	3.2%	23,539	597	2.5%
Washington	16,308	274	1.7%	17,046	387	2.3%	17,668	605	3.4%
Texas	148,365	5,832	3.9%	145,409	4,272	2.9%	143,473	4,407	3.1%
Tennessee	20,095	1,768	8.8%	22,160	1,181	5.3%	21,817	1,453	6.7%
South Dakota	3,526	106	3.0%	3,927	90	2.3%	3,858	55	1.4%
South Carolina	20,978	1,068	5.1%	19,938	737	3.7%	18,401	602	3.3%
Pennsylvania	50,349	1,716	3.4%	46,920	1,498	3.2%	45,174	918	2.0%

<sup>\*</sup> In 2015, the number used for total custodial population was the number of prisoners for which the jurisdiction had restrictive housing data. For the 2017 survey and the current survey, we used the total custodial population for which the jurisdiction had restrictive housing data and that was under the direct control of the jurisdiction. In 2015, some jurisdictions had restrictive housing data for facilities that were not under their direct control and included those prisoners in their 2015 survey response. Those jurisdictions are marked with an asterisk. Differences between the 2015 and 2017 total custodial population for these jurisdictions may therefore result from changes in the calculation of the total custodial population rather than changes in the jurisdictions' numbers of prisoners. In addition, the 2015 survey defined restrictive housing as being in-cell for twenty-two or more hours for fifteen or more continuous days; in 2017 and 2019, the survey defined restrictive housing as being in cell for *an average of* twenty-two or more hours a day for fifteen or more continuous days.

<sup>\*\*</sup> Massachusetts raised concerns that its 2015 and 2017 restrictive housing data was not able to be replicated in 2020. Comparison data presented here and in Figures 16-21 should be read with this caveat.

Figure 16 Jurisdiction-by-Jurisdiction Comparison of Prisoners in
Restrictive Housing Populations in 2015 and 2017 (n = 33)

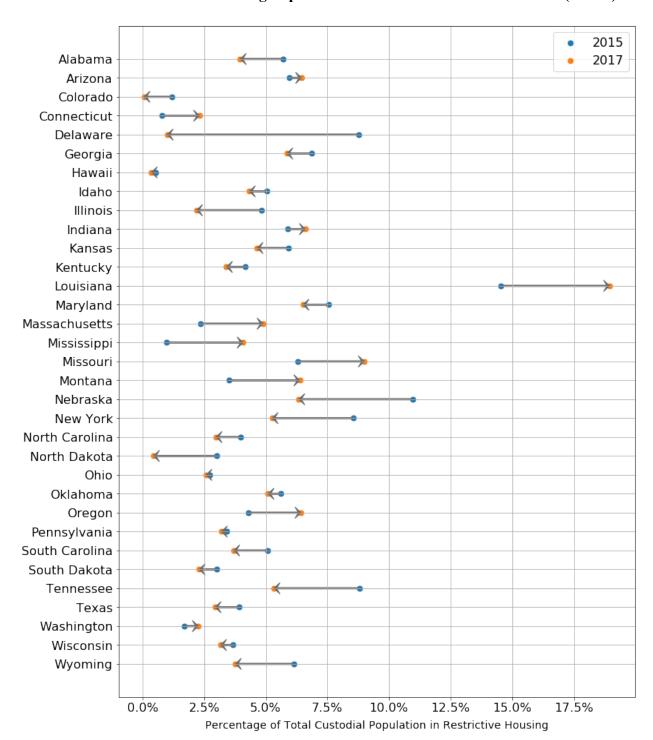


Figure 17 Jurisdiction-by-Jurisdiction Comparison of Prisoners in Restrictive Housing Populations in 2017 and 2019 (n = 33)

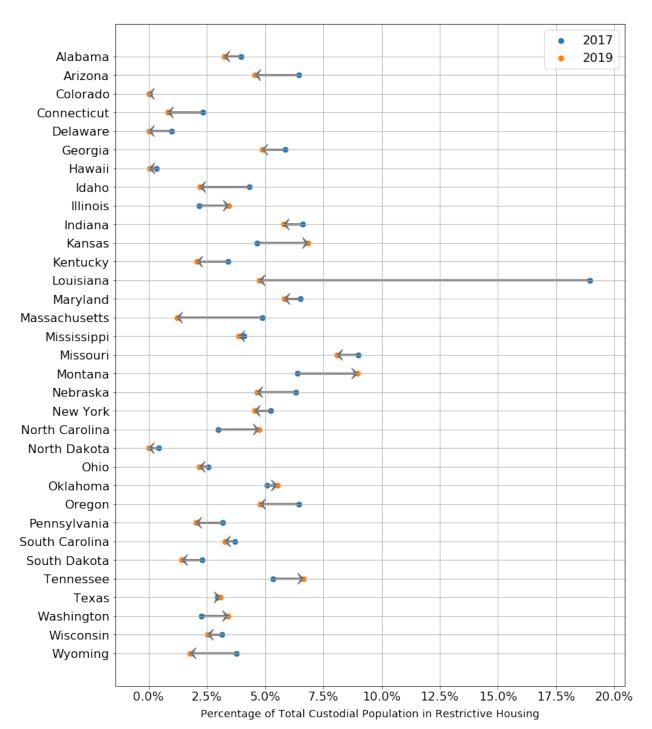


Figure 18 Jurisdiction-by-Jurisdiction Comparison of Prisoners in Restrictive Housing Populations in 2015 and 2019 (n = 33)

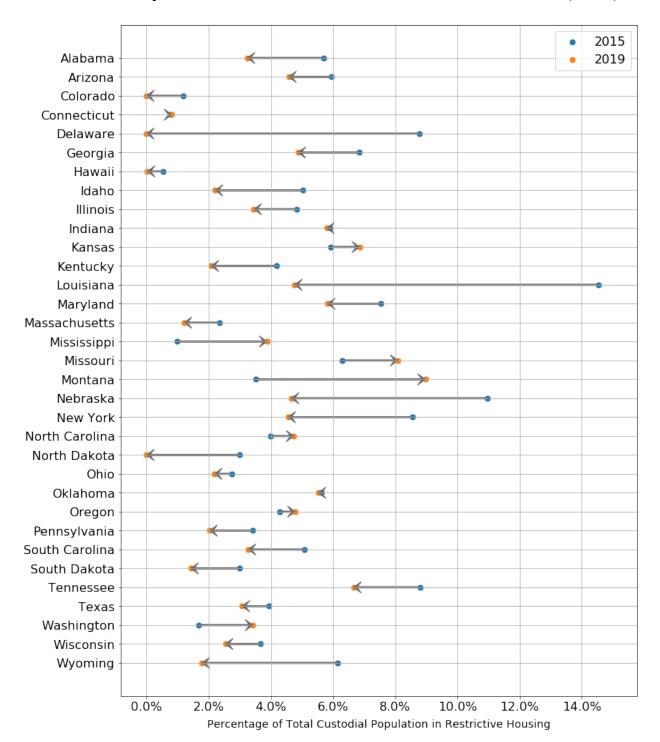


Figure 19 Jurisdiction-by-Jurisdiction Comparison of the Rate of Change in Percentage of Prisoners in Restrictive Housing Populations from 2015 to 2017 (n = 33)

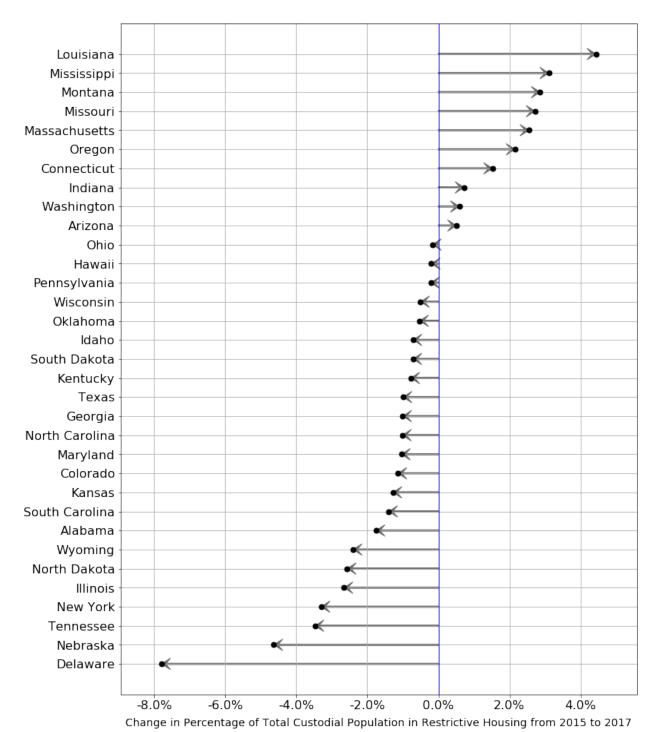


Figure 20 Jurisdiction-by-Jurisdiction Comparison of the Rate of Change in Percentage of Prisoners in Restrictive Housing Populations from 2017 to 2019 (n = 33)

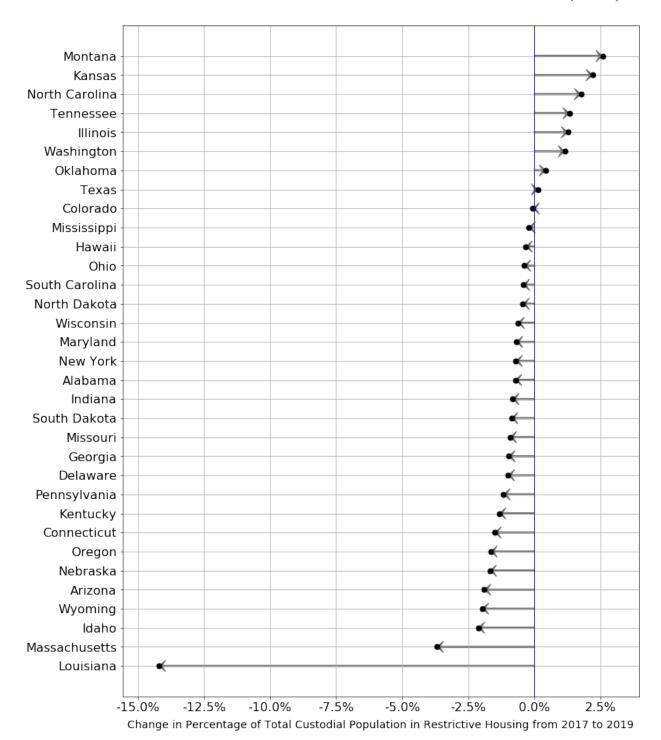
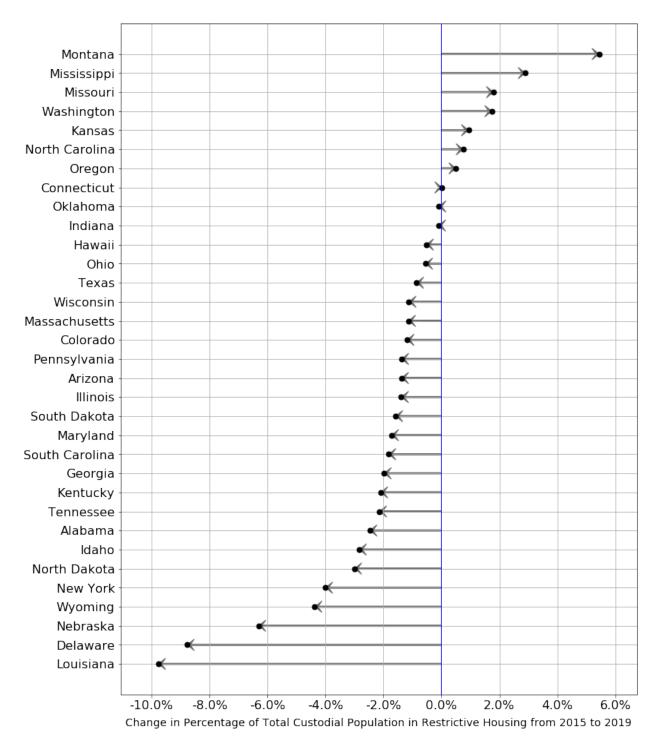


Figure 21 Jurisdiction-by-Jurisdiction Comparison of the Rate of Change in Percentage of Prisoners in Restrictive Housing Populations from 2015 to 2019 (n = 33)



Another window into changes over time comes from the numbers on length of time in restrictive housing provided by the twenty-four jurisdictions responding to those questions in 2015, 2017, and 2019.<sup>697</sup> Table 27 shows that, overall, the numbers of individuals in restrictive housing across almost all time periods decreased across 2015, 2017, and 2019.<sup>698</sup> As shown in Table 27, the number of prisoners in restrictive housing for all lengths of time decreased in more jurisdictions than it increased across 2015-2017-2019.

We also calculated the distribution across time intervals—i.e., what percentage of individuals in restrictive housing were held for each time interval—as Table 28 reflects. From 2015 to 2019, the percentage of prisoners in restrictive housing for fifteen to thirty days and thirty-one to ninety days increased in more jurisdictions than it decreased, while the percentage of prisoners in restrictive housing for all intervals of time over ninety days decreased in more jurisdictions than it increased. From 2017 to 2019, the percentage of prisoners in restrictive housing across all time periods increased in roughly as many jurisdictions as it decreased.

To conclude, Figure 22 provides a summary of the comparison of the lengths of time that individuals spent in restrictive housing. This graph is one way to capture that the many efforts to limit the use and duration of restrictive housing are having effects on people's lives.

Table 27 Comparing the Numbers of Prisoners in Restrictive Housing by Length of Time in 2015, 2017, and 2019\*

(n = 24)

Jurisdiction	15	5-30 Da	ys	31	1-90 Da	ys	91	-180 Da	ıys	181	-365 D	ays	1	-3 Year	s	3	-6 Year	s	6 Yea	rs and	Over
Arizona	140	428	177	472	831	412	530	433	338	809	462	379	488	489	454	34	72	144	71	8	30
Colorado	64	10	0	65	0	0	64	0	0	23	0	0	1	0	0	0	0	0	0	0	0
Delaware	25	5	0	99	25	0	84	6	0	76	7	0	67	0	0	12	0	0	18	0	0
Indiana	212	131	250	224	348	548	388	281	331	496	354	279	175	391	125	80	121	33	46	115	8
Kansas	125	176	238	146	207	265	87	61	115	105	15	53	94	0	15	22	0	0	10	0	0
Kentucky	139	671	97	222	130	79	52	45	33	41	14	22	28	1	6	4	0	1	1	0	0
Louisiana	327	332	55	551	630	187	334	449	164	302	445	118	450	517	103	221	346	34	0	0	18
Massachusetts	2	76	26	3	118	61	12	50	14	65	28	1	71	31	0	24	5	0	43	4	0
Mississippi	3	399	50	21	69	73	29	40	37	41	12	66	69	7	73	17	1	47	5	1	20
Nebraska	48	19	53	121	94	64	158	102	40	87	81	30	106	32	65	48	1	4	30	3	0
New York	1,615	757	653	1,454	1,218	1,067	671	416	261	257	182	80	101	73	21	32	13	6	0	7	8
North Carolina	461	6	459	579	113	520	460	132	429	12	214	191	4	500	38	1	317	10	0	384	7
North Dakota	8	3	0	13	4	0	12	2	0	17	0	0	4	0	0	0	0	0	0	0	0
Ohio	119	226	227	360	228	225	181	243	120	253	271	200	162	183	237	43	49	35	22	22	24
Oklahoma	169	384	192	270	481	264	206	224	178	270	156	141	490	106	165	77	17	17	70	0	11
Oregon	90	126	131	152	291	207	277	152	263	81	41	68	26	30	27	4	7	8	0	1	1
Pennsylvania	349	305	210	524	517	313	288	252	149	156	126	128	157	106	78	52	41	25	190	151	15
South Carolina	238	138	150	370	207	204	128	105	57	114	131	88	151	102	92	67	12	11	0	42	0
South Dakota	18	18	7	16	6	15	10	10	9	15	16	14	27	21	7	12	12	1	8	7	2
Tennessee	89	110	70	239	276	73	222	237	158	353	280	218	500	244	485	166	31	287	205	3	162
Texas	109	141	183	204	263	375	277	326	380	537	474	498	1,840	931	1,236	1,278	811	611	1,587	1,326	1,124
Washington	16	5	140	55	82	249	68	107	85	70	106	64	37	64	48	16	11	9	12	12	10
Wisconsin**	278	221	218	285	345	229	88	91	55	60	41	51	36	13	32	4	2	12	0	0	0
Wyoming	8	21	14	30	31	16	24	25	5	59	2	0	9	1	0	0	1	0	1	0	1
Totals	4,652	4,708	3,600	6,475	6,514	5,446	4,650	3,789	3,221	4,299	3,458	2,689	5,093	3,842	3,307	2,214	1,870	1,295	2,319	2,086	1,441

<sup>\*</sup> Dark grey cells contain values from the 2015 survey. Light grey cells contain values from the 2017 survey. Unshaded cells contain values from the 2019 survey.

<sup>\*\*</sup> Wisconsin noted that in both 2015 and 2017 it did not count prisoners in administrative segregation as placed in restrictive housing. By contrast, Wisconsin's 2019 restrictive housing totals include those in administrative segregation. Thus, increases in restrictive housing populations for Wisconsin noted in Table 27 may reflect a change in counting methodology.

Table 28 Comparing the Distribution of Prisoners in Restrictive Housing by Length of Time in 2015, 2017, and 2019\*

(n = 24)

Jurisdiction	15	5-30 Day	'S	31	1-90 Da	ys	91	-180 Da	ıys	181	-365 Da	nys	1	-3 Year	S	3-	-6 Year	s	6 Yea	rs and (	Over
Arizona	5.5%	15.7%	9.2%	18.6%	30.5%	21.3%	20.8%	15.9%	17.5%	31.8%	17.0%	19.6%	19.2%	18.0%	23.5%	1.3%	2.6%	7.4%	2.8%	0.3%	1.6%
Colorado	29.5%	100.0%	0.0%	30.0%	0.0%	0.0%	29.5%	0.0%	0.0%	10.6%	0.0%	0.0%	0.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Delaware	6.6%	11.6%	0.0%	26.0%	58.1%	0.0%	22.0%	14.0%	0.0%	19.9%	16.3%	0.0%	17.6%	0.0%	0.0%	3.1%	0.0%	0.0%	4.7%	0.0%	0.0%
Indiana	13.1%	7.5%	15.9%	13.8%	20.0%	34.8%	23.9%	16.1%	21.0%	30.6%	20.3%	17.7%	10.8%	22.5%	7.9%	4.9%	7.0%	2.1%	2.8%	6.6%	0.5%
Kansas	21.2%	38.3%	34.7%	24.8%	45.1%	38.6%	14.8%	13.3%	16.8%	17.8%	3.3%	7.7%	16.0%	0.0%	2.2%	3.7%	0.0%	0.0%	1.7%	0.0%	0.0%
Kentucky	28.5%	77.9%	40.8%	45.6%	15.1%	33.2%	10.7%	5.2%	13.9%	8.4%	1.6%	9.2%	5.7%	0.1%	2.5%	0.8%	0.0%	0.4%	0.2%	0.0%	0.0%
Louisiana	15.0%	12.2%	8.1%	25.2%	23.2%	27.5%	15.3%	16.5%	24.2%	13.8%	16.4%	17.4%	20.6%	19.0%	15.2%	10.1%	12.7%	5.0%	0.0%	0.0%	2.7%
Massachusetts	0.9%	24.4%	25.5%	1.4%	37.8%	59.8%	5.5%	16.0%	13.7%	29.5%	9.0%	1.0%	32.3%	9.9%	0.0%	10.9%	1.6%	0.0%	19.5%	1.3%	0.0%
Mississippi	1.6%	75.4%	13.7%	11.4%	13.0%	19.9%	15.7%	7.6%	10.1%	22.2%	2.3%	18.0%	37.3%	1.3%	19.9%	9.2%	0.2%	12.8%	2.7%	0.2%	5.5%
Nebraska	8.0%	5.7%	20.7%	20.2%	28.3%	25.0%	26.4%	30.7%	15.6%	14.5%	24.4%	11.7%	17.7%	9.6%	25.4%	8.0%	0.3%	1.6%	5.0%	0.9%	0.0%
New York	39.1%	28.4%	31.2%	35.2%	45.7%	50.9%	16.2%	15.6%	12.5%	6.2%	6.8%	3.8%	2.4%	2.7%	1.0%	0.8%	0.5%	0.3%	0.0%	0.3%	0.4%
North Carolina	30.4%	0.4%	27.8%	38.2%	6.8%	31.4%	30.3%	7.9%	25.9%	0.8%	12.8%	11.5%	0.3%	30.0%	2.3%	0.1%	19.0%	0.6%	0.0%	23.0%	0.4%
North Dakota	14.8%	33.3%	0.0%	24.1%	44.4%	0.0%	22.2%	22.2%	0.0%	31.5%	0.0%	0.0%	7.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Ohio	10.4%	18.5%	21.3%	31.6%	18.7%	21.1%	15.9%	19.9%	11.2%	22.2%	22.2%	18.7%	14.2%	15.0%	22.2%	3.8%	4.0%	3.3%	1.9%	1.8%	2.2%
Oklahoma	10.9%	28.1%	19.8%	17.4%	35.2%	27.3%	13.3%	16.4%	18.4%	17.4%	11.4%	14.6%	31.6%	7.7%	17.0%	5.0%	1.2%	1.8%	4.5%	0.0%	1.1%
Oregon	14.3%	19.4%	18.6%	24.1%	44.9%	29.4%	44.0%	23.5%	37.3%	12.9%	6.3%	9.6%	4.1%	4.6%	3.8%	0.6%	1.1%	1.1%	0.0%	0.2%	0.1%
Pennsylvania	20.3%	20.4%	22.9%	30.5%	34.5%	34.1%	16.8%	16.8%	16.2%	9.1%	8.4%	13.9%	9.1%	7.1%	8.5%	3.0%	2.7%	2.7%	11.1%	10.1%	1.6%
South Carolina	22.3%	18.7%	24.9%	34.6%	28.1%	33.9%	12.0%	14.2%	9.5%	10.7%	17.8%	14.6%	14.1%	13.8%	15.3%	6.3%	1.6%	1.8%	0.0%	5.7%	0.0%
South Dakota	17.0%	20.0%	12.7%	15.1%	6.7%	27.3%	9.4%	11.1%	16.4%	14.2%	17.8%	25.5%	25.5%	23.3%	12.7%	11.3%	13.3%	1.8%	7.5%	7.8%	3.6%
Tennessee	5.0%	9.3%	4.8%	13.5%	23.4%	5.0%	12.5%	20.1%	10.9%	19.9%	23.7%	15.0%	28.2%	20.7%	33.4%	9.4%	2.6%	19.8%	11.6%	0.3%	11.1%
Texas	1.9%	3.3%	4.2%	3.5%	6.2%	8.5%	4.7%	7.6%	8.6%	9.2%	11.1%	11.3%	31.6%	21.8%	28.0%	21.9%	19.0%	13.9%	27.2%	31.0%	25.5%
Washington	5.8%	1.3%	23.1%	20.1%	21.2%	41.2%	24.8%	27.6%	14.0%	25.5%	27.4%	10.6%	13.5%	16.5%	7.9%	5.8%	2.8%	1.5%	4.4%	3.1%	1.7%
Wisconsin	37.0%	31.0%	36.5%	37.9%	48.4%	38.4%	11.7%	12.8%	9.2%	8.0%	5.8%	8.5%	4.8%	1.8%	5.4%	0.5%	0.3%	2.0%	0.0%	0.0%	0.0%
Wyoming	6.1%	25.9%	38.9%	22.9%	38.3%	44.4%	18.3%	30.9%	13.9%	45.0%	2.5%	0.0%	6.9%	1.2%	0.0%	0.0%	1.2%	0.0%	0.8%	0.0%	2.8%
Totals	15.7%	17.9%	17.1%	21.8%	24.8%	25.9%	15.7%	14.4%	15.3%	14.5%	13.2%	12.8%	17.1%	14.6%	15.7%	7.5%	7.1%	6.2%	7.8%	7.9%	6.9%

<sup>\*</sup> Dark grey cells contain values from the 2015 survey. Light grey cells contain values from the 2017 survey. Unshaded cells contain values from the 2019 survey.

Figure 22 Comparing the Distribution of Prisoners in Restrictive Housing by
Length Of Time in 2015, 2017, and 2019 (n = 24)

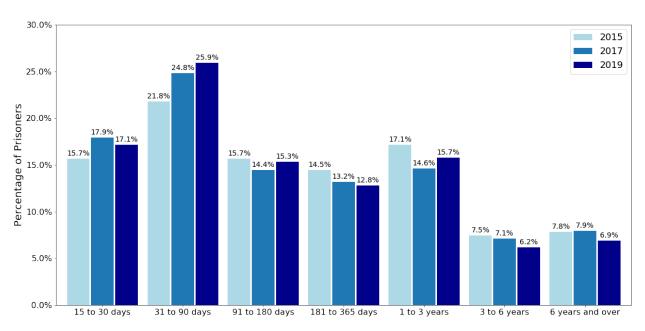


Table 29 Comparing Restrictive Housing Numbers from 2014 to 2020

	2014-2015 ASCA-Liman Survey	2015-2016 ASCA-Liman Survey	2017-2018 ASCA-Liman Survey	2019-2020 CLA- Liman Survey
Number of Jurisdictions Responding	34 jurisdictions, or 73% of prison population of 1.6 million people	48 jurisdictions or 96.4% of prison population of 1.5 million people	43 jurisdictions or 80.5% of prison population of 1.5 million people	39 jurisdictions or 58% of prison population of 1.4 million people
# Prisoners Reported in Restrictive Housing	66,000+	67,442	50,422	31,542
Estimated Total Prisoners in Restrictive Housing in all U.S. Jurisdictions	80,000-100,000	not estimated given substantial reporting	61,000	55,000-62,000

http://digitalcommons.law.yale.edu/cgi/viewcontent.cgi?article=1654&context=ylpr; Giovanna Shay, Visiting Room: A Response to Prison Visitation Policies: A Fifty-State Survey, 32 YALE LAW & POLICY REVIEW 191 (2013), available at http://digitalcommons.law.yale.edu/ylpr/vol32/iss1/6/; Ashbel T. Wall II, Why Do They Do It That Way?: A Response to Prison Visitation Policies: A Fifty-State Survey, 32 YALE LAW & POLICY REVIEW 199 (2013), available at http://digitalcommons.law.yale.edu/ylpr/vol32/iss1/7/; David Fathi, An Endangered Necessity: A Response to Prison Visitation Policies: A Fifty-State Survey, 32 YALE LAW & POLICY REVIEW 205 (2013), available at http://digitalcommons.law.yale.edu/ylpr/vol32/iss1/8/; Philip M. Genty, Taking Stock and Moving Forward to Improve Prison Visitation Practices: A Response to Prison Visitation Policies: A Fifty-State Survey, 32 YALE LAW & POLICY REVIEW 211 (2013), available at http://digitalcommons.law.yale.edu/ylpr/vol32/iss1/9/.

https://law.yale.edu/sites/default/files/area/center/liman/document/Liman\_overview\_segregation\_June\_25\_2013\_TO\_P OST\_FINAL(1).pdf [hereinafter ASCA-LIMAN ADMINISTRATIVE SEGREGATION NATIONAL OVERVIEW 2013].

https://law.yale.edu/system/files/documents/pdf/asca-liman\_administrative\_ segregation\_report\_sep\_2\_2015.pdf [hereinafter ASCA-LIMAN ADMINISTRATIVE SEGREGATION 2014].

<sup>&</sup>lt;sup>1</sup> As David Cloud, Cyrus Ahalt, Dallas Augustine, David Sears, and Brie Williams explained in their article, medical isolation should be structured in a manner that does not rely on the constraints commonplace in restrictive housing. *See Medical Isolation and Solitary Confinement: Balancing Health and Humanity in US Jails and Prisons During COVID-19*. J. GEN. INTERN MED. (2020). https://doi.org/10.1007/s11606-020-05968-y.

<sup>&</sup>lt;sup>2</sup> See, e.g., The Ninth Circuit Corrections Summit, Sacramento, California, November 4-6, 2015; The Ninth Circuit Corrections Summit, Santa Ana, California, April 25-27, 2018; Racial Disparities in Prisons: A Seminar, Yale Law School, 2017.

<sup>&</sup>lt;sup>3</sup> See, e.g., Chesa Boudin, Trevor Stutz & Aaron Littman, Prison Visitation Policies: A Fifty State Survey, 32 YALE LAW & POLICY REVIEW: 149 (2013), available at

<sup>&</sup>lt;sup>4</sup> Hope Metcalf, Jamelia Morgan, Samuel Oliker-Friedland, Judith Resnik, Julia Spiegel, Haran Tae, Alyssa Work, & Brian Holbrook, *Administrative Segregation, Degrees of Isolation, and Incarceration: A National Overview of State and Federal Correctional Policies* (June 2013), *available at* 

<sup>&</sup>lt;sup>5</sup> *Id.* at 2.

<sup>&</sup>lt;sup>6</sup> *Id.* at 4.

<sup>&</sup>lt;sup>7</sup> *Id.* at 5.

<sup>&</sup>lt;sup>8</sup> ASSOCIATION OF STATE CORRECTIONAL ADMINISTRATORS & ARTHUR LIMAN PUBLIC INTEREST PROGRAM AT YALE LAW SCHOOL, *Time-in-Cell: The ASCA-Liman 2014 National Survey of Administrative Segregation in Prison* (Aug. 2015), available at

<sup>&</sup>lt;sup>9</sup> *Id.* at 3.

<sup>&</sup>lt;sup>10</sup> U.S. DEPARTMENT OF JUSTICE, *Report and Recommendations Concerning the Use of Restrictive Housing* (Jan. 2016), *available at* https://www.justice.gov/archives/dag/report-and-recommendations-concerning-use-restrictive-housing.

<sup>&</sup>lt;sup>11</sup> See, e.g., Jess Bravin, Large Number of Inmates in Solitary Poses Problem for Justice System, Study Says, THE WALL STREET JOURNAL, Sept. 2, 2015, available at https://www.wsj.com/articles/large-number-of-inmates-in-solitary-posesproblem-for-justice-system-study-says-1441209772; Timothy Williams, Prison Officials Join Movement to Curb Solitary Confinement, THE NEW YORK TIMES, Sept. 2, 2015, available at https://www.nytimes.com/2015/09/03/us/prisondirectors-group-calls-for-limiting-solitary-confinement.html.: Timothy Williams, Prison Officials Join Movement to Curb Solitary Confinement, THE NEW York TIMES, Sept. 2, 2015, available https://www.nytimes.com/2015/09/03/us/prison-directors-group-calls-for-limiting-solitary-confinement.html. www.nytimes.com/2015/09/03/us/prison-directors-group-calls-for-limiting-solitary- confinement.html.; Kevin Johnson, More than a Decade after Release, They All Come Back, USA TODAY, Nov. 4, 2015, available at https://www.usatoday.com/story/news/nation/2015/11/04/solitary-confinement-prisoners-impact/73830286/.

<sup>&</sup>lt;sup>12</sup> ASSOCIATION OF STATE CORRECTIONAL ADMINISTRATORS & ARTHUR LIMAN PUBLIC INTEREST PROGRAM AT YALE LAW SCHOOL, Aiming to Reduce Time-in-Cell: Reports from Correctional Systems on the Numbers of Prisoners in Restricted Housing and on the Potential of Policy Changes to Bring About Reforms (Nov. 2016), available at

https://law.yale.edu/system/files/area/center/liman/document/aimingtoreducetic.pdf [hereinafter ASCA-LIMAN AIMING TO REDUCE TIME-IN-CELL 2016].

https://law.yale.edu/sites/default/files/area/center/liman/document/asca\_liman\_2018\_restrictive\_housing\_released\_oct\_2018.pdf [hereinafter ASCA-LIMAN REFORMING RESTRICTIVE HOUSING 2018].

<sup>13</sup> Id. at 20

<sup>&</sup>lt;sup>14</sup> Id. at 27-28.

<sup>&</sup>lt;sup>15</sup> See, e.g., Anna Flag, Alex Tatusian, & Christie Thompson, Who's in Solitary Confinement, THE MARSHALL PROJECT, Nov. 2016, available at https://www.themarshallproject.org/2016/11/30/a-new-report-gives-the-mostdetailed-breakdown-yet-of-how-isolation-is-used-in-u-s-prisons; Daniel Teehan, What Chris Christie Got Wrong About Solitary Confinement, THE Marshall PROJECT, 2016, available https://www.themarshallproject.org/2016/12/14/what-chris-christie-got-wrong-about-solitary-confinement; Julevka Lantigua-Williams, More Prisons Are Phasing Out the 'Box,' THE ATLANTIC, Dec. 2016, available at https://www.theatlantic.com/politics/archive/2016/12/more-prisons-are-phasing-out-the-box/509225/; Juleyka Lantigua-Williams, The Link Between Race and Solitary Confinement, THE ATLANTIC, Dec. 2016, available at https://www.theatlantic.com/politics/archive/2016/12/race-solitary-confinement/509456/; Cassandra Basler, Yale Report Tries to Count People Held in Solitary Confinement, WSHU, Dec. 2016, available at http://wshu.org/post/yale-reporttries-count-people-held-solitary-confinement#stream/0.

<sup>&</sup>lt;sup>16</sup> ASSOCIATION OF STATE CORRECTIONAL ADMINISTRATORS & ARTHUR LIMAN PUBLIC INTEREST PROGRAM AT YALE LAW SCHOOL, *Reforming Restrictive Housing: The 2018 ASCA-Liman Nationwide Survey of Time-in-Cell* (Oct. 2018), available at

<sup>&</sup>lt;sup>17</sup> *Id*. at 4.

<sup>&</sup>lt;sup>18</sup> *Id*.

<sup>&</sup>lt;sup>19</sup> *Id*.

<sup>&</sup>lt;sup>20</sup> *Id*.

<sup>&</sup>lt;sup>21</sup> *Id*. at 5.

<sup>&</sup>lt;sup>22</sup> *Id.* at 17.

<sup>&</sup>lt;sup>23</sup> *Id.* at 24.

<sup>&</sup>lt;sup>24</sup> *Id.* at 36.

<sup>&</sup>lt;sup>25</sup> *Id*. at 5.

<sup>&</sup>lt;sup>26</sup> Jacob Kang-Brown, Chase Montagnet, Eital Schattner-Elmaleh, & Olivia Hinds, *People in Prison in 2019* at 2, Vera Institute of Justice (May 2020), https://www.vera.org/downloads/publications/people-in-prison-in-2019.pdf [hereinafter *People in Prison in 2019*]. As of March 2020, the number of individuals in custody had declined slightly to 1,287,416. *Id.* 

<sup>&</sup>lt;sup>27</sup> Zhen Zeng, *Jail Inmates in 2018*, BUREAU OF JUSTICE STATISTICS 1 (March. 2020), https://www.bjs.gov/content/pub/pdf/ji18.pdf.

<sup>&</sup>lt;sup>28</sup> Restrictive Housing in U.S. Jails: Results from a National Survey, by Chase Montagnet, Jennifer Peirce, and David Pitts, Vera Institute of Justice (2020).

<sup>&</sup>lt;sup>29</sup> People in Prison in 2019 at 5.

<sup>&</sup>lt;sup>30</sup> ASCA-LIMAN REFORMING RESTRICTIVE HOUSING 2018, at 8.

- <sup>31</sup> The full survey is set forth in Appendix A. As noted in Table 1, a few jurisdictions state that their information was based on a definition of restrictive housing different than that provided in the survey.
- <sup>32</sup> Of the 41 jurisdictions that responded to the survey, one state (West Virginia) did not provide data on the number of prisoners in restrictive housing. Another state (New Hampshire) provided information subsequent to the timeframe to be included for the aggregate analysis of this report. When possible, we have added information from that jurisdiction in text or endnotes. The remaining 39 jurisdictions that responded to the survey were Alabama, Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Virginia, Washington, Wisconsin, and Wyoming.
- <sup>33</sup> Within the 39 jurisdictions, Maryland, Minnesota, Montana, and Oklahoma reported an aggregate of 8,190 people that were included within the total populations but were not individuals about which the jurisdictions had restrictive housing data. These 8,190 individuals are not counted in the 825,473 figure cited above.
- <sup>34</sup> Because not all jurisdictions track restrictive housing in accordance with the survey definition, we included some reported numbers that varied somewhat but were close enough to the survey definition to warrant inclusion. For example, Nebraska reported that populations in both Immediate Segregation and Long-Term Restrictive Housing units "have 24 or fewer hours out of cell per week (around 3.4 hours out of cell per day, or 20.6 hours in-cell per day)," but reported that "[s]ome may be in cell an average of 22 hours a day or more . . . ." Virginia reported restrictive housing information from its 2019 Fiscal Report for individuals in restrictive housing "22 hours or more a day." These counts included people who may have been in restrictive housing for fewer than 14 days, but may have excluded people who were in isolation for *an average* of 22 hours a day. Therefore, the numbers may be over- or under-inclusive of prisoners in restrictive housing under the CLA-Liman Survey's definition.
- <sup>35</sup> These jurisdictions were Colorado, Delaware, North Dakota, and Vermont.
- <sup>36</sup> See E. Ann Carson, DEP'T of JUSTICE, PRISONERS IN 2018, at 5 (2020) [hereinafter *Prisoners in 2018*]. The Bureau of Justice Statistic's 2019 data is anticipated in early 2021. See People in Prison in 2019 at 1.
- <sup>37</sup> *People in Prison in 2019*, at 3. Vera collected prison population numbers directly from each state's department of corrections and from the Federal Bureau of Prisons either by obtaining materials online or through direct outreach. *Id.* at 5.
- <sup>38</sup> See People in Prison in 2019 at 3 ("All prison population counts in this report are estimates of the number of people under the *jurisdiction* of the correctional authority, not the number of people in *custody*"). The Bureau of Justice Statistics likewise "include[s] all prisoners under the authority of state or federal correctional officers, regardless of where the prisoner is held." *Prisoners in 2018*, at 5.
- <sup>39</sup> The total December 2019 prison populations for each responding jurisdiction are as follows: Alabama (28,266), Arizona (42,441), Arkansas (17,759), Colorado (19,714), Connecticut (12,293), Delaware (5,692), Georgia (55,556), Hawaii (5,179), Idaho (9,437), Illinois (38,259), Indiana (27,268), Kansas (10,177), Kentucky (23,436), Louisiana (31,609), Maine (2,205), Maryland (18,686), Massachusetts (8,205), Minnesota (9,982), Mississippi (19,469), Missouri (26,0440), Montana (3,811), Nebraska (5,651), New York (44,284), North Carolina (34,510), North Dakota (1,794), Ohio (49,762), Oklahoma (25,712), Oregon (15,755), Pennsylvania (45,875), Rhode Island (2,740), South Carolina (18,608), South Dakota (3,804), Tennessee (26,539), Texas (158,820), Vermont (1,608), Virginia (36,091), Washington (19,160), Wisconsin (23,956), and Wyoming (2,479). See People in Prison in 2019, at 4.
- <sup>40</sup> See People in Prison at 5. In light of the relatively small numbers and large amount of bookkeeping to identify prisoners beyond a jurisdiction's direct control, including prisoners sent out-of-jurisdiction, we did not ask jurisdictions to account for any prisoners not within their custody. As such, the disparity between Vera's total population numbers for each jurisdiction and their reported population numbers in response to the 2019 CLA-Liman survey are set forth in Appendix B.
- <sup>41</sup> The total December 2019 prison populations for each non-responding jurisdiction are as follows: Alaska (4,475), California (125,507), Florida (96,009), Iowa (9,282), Michigan (38,053), Nevada (12,942), New Hampshire (2,622), New Jersey (18,613), New Mexico (6,723), Utah (6,731), West Virginia (6,800), Federal Bureau of Prisons (175,116). See People in Prison in 2019 at 4. New Hampshire, which provided data subsequent to the time frame for aggregate analysis

in this report, self-reported having 2,263 prisoners under its direct control in the jursidiction's correctional facilities.

- <sup>43</sup> These seven jurisdictions were Alaska, Iowa, Nevada, New Jersey, New Mexico, Utah, and the federal Bureau of Prisons. The remaining five jurisdictions that did not respond to the survey in 2017 and 2019 were California, Florida, Michigan, New Hampshire, and West Virginia.
- <sup>44</sup> The reported percentage of the population in restrictive housing for these seven jurisdictions according to their responses to the 2017 ASCA-Liman survey were as follows: Alaska (8.6%), Iowa (2.0%), Nevada (5.9%), New Jersey (5.2%), New Mexico (4.2%), Utah (4.7%), and the federal Bureau of Prisons (5.2%).
- <sup>45</sup> See Chase Montagnet, Jennifer Peirce, and David Pitts. Restrictive Housing in U.S. Jails: Results from a National Survey, Vera Institute of Justice (2020).
- <sup>46</sup> These jurisdictions were Colorado, Delaware, North Dakota, and Vermont, which do not have any prisoners in restrictive housing under our definition. Among jurisdictions that have restrictive housing under our definition, Hawaii had the smallest percentage of prisoners in restrictive housing (0.0%).
- <sup>47</sup> This jurisdiction was Arkansas.
- <sup>48</sup> Of the 41 total responding jurisdictions, Idaho, Montana, North Dakota (which did not have restrictive housing by the survey's definition), Virginia, and West Virginia (which did not have restrictive housing data) did not answer this question. Elsewhere in the survey, Idaho indicated that it could not provide length of time data because its data system did not allow it to provide that information, and West Virginia indicated that it could not provide length of time data because it does not collect it.
- <sup>49</sup> Eighteen jurisdictions answered that they track the information; twelve indicated that they track the information with some caveats.
- <sup>50</sup> Illinois answered affirmatively to regularly tracking length of time data with a caveat, but did not report length of time data, explaining that "[i]nformation is collected regularly, at the facility level, on how long each offender is in restrictive housing" but "[i]ndividual specific offender information is not readily available when talking about the department and specific time frames as a whole." New Hampshire answered affirmatively to regularly tracking this information, but did not report length of time data, because it was not able to aggregate the data in time for the survey submission.
- <sup>51</sup> One of these six jurisdictions, Delaware did not have restrictive housing under this survey's definition, but reported tracking length of time in its designated housing areas. Hawaii, which was the only jurisdiction to answer both that it did not regularly track length of time and that it could not provide any length of time data, reported that it "collects weekly information on when an inmate enters restrictive housing and when an inmate is released from restrictive housing." The remaining four jurisdictions (Arkansas, Minnesota, Tennessee, an Wisconsin) reported length of time, which is reflected in Figure 3. Caveats are in order. For example, Arkansas reported that "Information can be approximately calculated but data entry errors in historical data make accuracy difficult" and that "[r]egular tracking is not conducted beyond checking if an assignment exceeds 30 days." Minnesota reported that "data is available, [but] it is not regularly collected on each offender." Tennessee reported that it "does not regularly track this information[;] however, the information can be requested and compiled if a need arises." Wisconsin reported that, while "[d]ata is collected in an automatic fashion that tracks placement status[,] [r]eporting is ad-hoc."
- <sup>52</sup> Table 4 identifies when specific jurisdictions began regularly tracking length of time in restrictive housing.
- <sup>53</sup> Maine, North Dakota, and Arizona reported that they began regularly collecting length of time data in 2017 or 2018, and that their reported numbers do not include time spent in restrictive housing prior to that date. Even so, Arizona's reported numbers for prisoners' length of time in restrictive housing include reports for all time ranges. North Dakota reported that it does not have restrictive housing under our definition and did not report length of time numbers. Additionally, Arkansas and Ohio began tracking restrictive housing data in 2019, but reported that these numbers include time spent in restrictive housing before that date.
- <sup>54</sup> Those 33 jurisdictions are identified in Table 2. Four of these states reported having no individuals housed in restrictive housing under the survey definition. New Hampshire, which subsequent to the time frame for analyses provided data,

<sup>&</sup>lt;sup>42</sup> ASCA-LIMAN REFORMING RESTRICTIVE HOUSING 2018, at 4.

stated that 32% (17/53) of individuals in restrictive housing were housed there for less than 90 days, 39% (21/53) were housed between 91 and 180 days; 23% (12/53) were housed between 181 days and a year; 6% (3/53) were housed there between one and three years; and 0% (0/53) were housed there more than three years.

- <sup>55</sup> The 2017 ASCA-Liman survey asked jurisdictions in what year their jurisdiction "beg[a]n to track length-of-stay data," while the 2019 CLA-Liman survey asked jurisdictions in what year they "beg[an] to regularly track length of time." For this reason, some jurisdictions' responses from the 2017 survey do not match the responses from this survey.
- <sup>56</sup> "No one has remained in restrictive housing since we began collecting data."
- <sup>57</sup> "There are no offenders recorded for Q7 [number of prisoners held in restrictive housing]."
- <sup>58</sup> "The ability to record 'alerts' that identify a transaction associated with placing the offender under restrictive housing in a comprehensive database begin in December 2003. Operationally and per individual, staff can determine length in restrictive housing and can review other portions of the database system to draw conclusions; however, the data does not lend itself to programmatically extracting this information and including in aggregate reports."
- <sup>59</sup> "No, as no one is still on an episode that far back."
- 60 "Hawaii PSD does not break down the numbers by gender."
- <sup>61</sup> "If the offender was in restrictive housing when we began tracking we added start date."
- <sup>62</sup> "Delaware began tracking cell time and time spent in Restrictive Housing in 2017. We were able to increase out of cell time through policy and practice, and tracked the changes in order to eliminate Restrictive Housing by definition in Delaware prisons."
- <sup>63</sup> "The answer to this is yes. Although we just started regularly tracking this in 2017, the numbers are based upon data in the bed management system (BMS) which goes back to 1998, which is the year the BMS was first used. For inmates who were active at the time of the first use of the BMS, there were historical bed/cell histories entered for them."
- <sup>64</sup> These jurisdictions were Arkansas, Colorado, Idaho, Indiana, Kansas, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Montana, Nebraska, New York, North Carolina, North Dakota, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Texas, Washington, Wisconsin, and Wyoming. Although Idaho left this portion of the survey blank, it provided a narrative description sufficient to be included, as explained in the notes to Table 5.
- <sup>65</sup> Montana, North Dakota, and Washington reported that they had 0% of their total male custodial populations in cell for at least 22 hours a day for fewer than 15 days. Kansas responded that it had 6.53% of its total male custodial population in cell for this amount of time.
- <sup>66</sup> Nebraska and Washington responded that they had 0% of their total female custodial populations in cell for at least 22 hours a day for fewer than 15 days. Massachusetts reported that 4.54% of its total female custodial population was in cell for this amount of time.
- <sup>67</sup> These jurisdictions were Colorado, Idaho, Kansas, Kentucky, Maine, Maryland, Montana, Nebraska, New York, North Carolina, North Dakota, Pennsylvania, South Dakota, Texas, Washington, Wisconsin, and Wyoming. Montana reported no information about female prisoners in its total custodial population.
- <sup>68</sup> Kentucky, Maine, Maryland, Montana, and Washington reported having zero male prisoners in cell between 19 and 21 hours for 14 or fewer days. Kansas reported having 11.19% of its total male custodial population in cell during this time.
- <sup>69</sup> Colorado, Kentucky, Maine, Maryland, New York, North Carolina, Texas, Washington, and Wisconsin reported having zero female prisoners in cell for 19 to 21 hours for 14 or fewer days. Kansas reported having 38.22% of its female prisoners in cell during this time. Montana reported no information about female prisoners in its total custodial population.
- <sup>70</sup> These jurisdictions were Colorado, Connecticut, Idaho, Kansas, Kentucky, Maine, Maryland, Montana, Nebraska, New York, North Carolina, North Dakota, Pennsylvania, South Dakota, Texas, Washington, Wisconsin, and Wyoming. Montana reported no information about female prisoners in its total custodial population.

- <sup>71</sup> Kentucky, Maryland, and Washington reported having zero male prisoners in cell between 19 and 21 hours for over 14 days. Montana reported having 91.03% of its male prisoners in cell during this time, which accounts for all of their male prisoners not in restrictive housing.
- <sup>72</sup> Kentucky, Maine, Maryland, and Washington reported having zero female prisoners in cell between 19 and 21 hours for over 14 days. Wyoming reported having 1.58% of its female prisoners in cell during this time. Montana reported no information about female prisoners in its total custodial population.
- <sup>73</sup> Although Idaho left blank in the survey the number of individuals housed for an average of 22 hours per day for one to 14 days, it reported: "there are 148 beds designated for 22 hours/day 1-14 days throughout the state. Approximately 100-110 of those are filled at any one time." As such, the results include the smaller reported number.
- <sup>74</sup> Montana was not included in this table, as it reported no information about female prisoners in its total custodial population.
- <sup>75</sup> Nebraska reported, "Per our definition, inmates in restrictive housing have 24 or fewer hours out of cell per week (around 3.4 hours out of cell per day, or 20.6 hours in-cell per day). Some may be in cell an average of 22 hours a day or more, but some may be in cell for fewer hours. So we are using the working average of 20.6 hours in-cell per day." Accordingly, the number of prisoners that Nebraska reported as in cell between 19 and 21 hours for over 14 days equals the number of prisoners that they reported as in restrictive housing.
- <sup>76</sup> These jurisdictions were Colorado, Delaware, North Dakota, and Vermont.
- <sup>77</sup> This figure includes two jurisdictions, Louisiana and Montana, which did not report data on any female prisoners.
- <sup>78</sup> Among only the 34 reporting jurisdictions that have restrictive housing under the survey's definition, the median was 3.62%.
- <sup>79</sup> These jurisdictions were Colorado, Delaware, North Dakota, and Vermont, which do not have any prisoners in restrictive housing under our definition. Among jurisdictions that have restrictive housing under our definition, Hawaii had the smallest percentage of male prisoners in restrictive housing (1 out of 2,958 male prisoners, or 0.0%).
- <sup>80</sup> This jurisdiction was Arkansas.
- <sup>81</sup> Louisiana and Montana reported having zero women in facilities under their direct control.
- <sup>82</sup> Among only the 32 reporting jurisdictions that have restrictive housing under our definition and reported data on female prisoners, the median percentage of female prisoners in restrictive housing was 0.8%.
- <sup>83</sup> Alabama, Colorado, Connecticut, Delaware, Hawaii, North Dakota, Vermont, and Wyoming reported having no women in restrictive housing. Colorado, Delaware, North Dakota, and Vermont reported not having any restrictive housing under our definition.
- <sup>84</sup> This jurisdiction was Missouri.
- <sup>85</sup> These jurisdictions were Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, Indiana, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming.
- <sup>86</sup> These figures are informed by the total custodial population and total restrictive housing population numbers identified in Table 12 and Table 14.
- <sup>87</sup> These jurisdictions were Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, Indiana, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming.

- <sup>88</sup> This range is based on the CLA-Liman approximation that from 55,000 to 62,500 prisoners were in restrictive housing in the United States in the summer of 2019.
- <sup>89</sup> These jurisdictions were Colorado, Delaware, North Dakota, and Vermont.
- <sup>90</sup> Minnesota reported having zero Hispanic or Latino male prisoners among their total custodial population.
- <sup>91</sup> Minnesota is not included in this figure, since it reported having no Hispanic or Latino male prisoners in its total custodial population.
- <sup>92</sup> Percentages were calculated out of the reported total male custodial and total male restrictive housing populations. These figures differed slightly from the total of the racial breakdowns reported in Table 12 for certain jurisdictions. Totals for male custodial population differed for Indiana, Kansas, Louisiana, Missouri, and Wyoming. Totals for male restrictive housing population differed for Texas. As a result, total percentages range from 98.6% (Indiana) to 100.8% (Missouri).
- <sup>93</sup> Percentages were calculated out of the reported total female custodial and total female restrictive housing populations. These figures differed slightly from the total of the racial breakdowns reported in Table 14 for certain jurisdictions. Totals for female custodial population differed for Indiana, Kansas, Louisiana, and Missouri. As a result, total percentages range from 98.5% (Indiana) to 101.8% (Missouri).
- <sup>94</sup> AMERICAN CORRECTIONAL ASSOCIATION, *Restrictive Housing Performance Based Standards* (2016), at 39, ACA Standard 4-RH-0034 [hereinafter ACA 2016 RESTRICTIVE HOUSING STANDARDS].
- <sup>95</sup> ACA 2016 RESTRICTIVE HOUSING STANDARDS 3.
- <sup>96</sup> The 32 responding jurisdictions reporting age data are identified in Table 16.
- <sup>97</sup> This figure is based on the total number of male prisoners that jurisdictions reported within their total custodial and restrictive housing populations. The number of prisoners on which jurisdictions reported differed slightly from this figure, totaling 641,712. Kansas, Louisiana, and Missouri each reported on more prisoners in the general custodial population by age range than overall, differing by 3, 1, and 201 prisoners, respectively. North Carolina and Texas also reported on more prisoners in restrictive housing by age than overall, differing by one and six prisoners, respectively.
- <sup>98</sup> These jurisdictions were Missouri (one prisoner), Ohio (two prisoners), Oklahoma (one prisoner), and Tennessee (four prisoners).
- <sup>99</sup> This figure is based on the total number of female prisoners that jurisdictions reported within their total custodial and restrictive housing populations. The number of prisoners on which jurisdictions reported differed slightly from this figure, totaling 55,750. Kansas reported on 3 fewer female prisoners in the general custodial population by age range than overall, and Missouri reported on 47 more female prisoners by age range.
- <sup>100</sup> A 2017 report from the Bureau of Justice Statistics, analyzing data from 2011 to 2012, found that approximately fourteen percent of federal prisoners and 26% of jail inmates "reported experiences that met the threshold for serious psychological distress (SPD) in the 30 days prior to a survey." Additionally, 37% of prisoners and 44% percent of jail inmates "had been told in the past by a mental health professional that they had a mental disorder." According to the report, only half of prisoners and a third of jail inmates had no indication of a mental health problem. Jennifer Bronson & Marcus Berzofsky, BUREAU OF JUSTICE STATISTICS, U.S. DEP'T OF JUSTICE, *Indicators of Mental Health Problems Reported by Prisoners and Jail Inmates, 2011-12* (2017), available at https://www.bjs.gov/content/pub/pdf/imhprpji1112.pdf.
- <sup>101</sup> ACA Standard 4-RH-0010, ACA 2016 RESTRICTIVE HOUSING STANDARDS 15.
- <sup>102</sup> *Id*.
- <sup>103</sup> *Id*.
- <sup>104</sup> *Id*.
- <sup>105</sup> *Id*.

```
    106 Id.
    107 ACA Standard 4-RH-0011, ACA 2016 RESTRICTIVE HOUSING STANDARDS 16.
    108 Id.
    109 Id.
    110 Id.
    111 ACA Standard 4-RH-0012, ACA 2016 RESTRICTIVE HOUSING STANDARDS 17.
    112 Id.
    113 Id.
    114 Id.
```

- 115 ACA Standard 4-RH-0029, ACA 2016 RESTRICTIVE HOUSING STANDARDS 34
- These jurisdictions were Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, Hawaii, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming. Alabama also provided a response to this question but provided a number of male prisoners with SMI in restrictive housing (897) that exceeds Alabama's report of the total number of male prisoners in restrictive housing total (670). Montana indicated that there were zero male prisoners in restrictive housing with SMI, but upon review it appears that Montana did not report this data. Neither Alabama nor Montana's data was included in Table 20. North Carolina provided a number of female prisoners with SMI (7,248) that exceeds North Carolina's report of the total number of female prisoners in custody (2,842). North Carolina's data was not included in Table 21.
- <sup>117</sup> ACA Standard 4-RH-0029, ACA 2016 RESTRICTIVE HOUSING STANDARDS 34; *see*, *e.g.*, *Braggs v. Dunn*, 257 F. Supp. 3d 1171, 1246, 1268 (M.D. Ala. 2017) (preventing the placement of seriously mentally ill prisoners in restrictive housing and identifying the medical conditions that were considered serious mental illnesses).
- <sup>118</sup> For example, Alabama, Hawaii, Minnesota, North Carolina, and Texas adopted the ACA's definition for serious mental illness.
- <sup>119</sup> For example, Mississippi's definition of serious mental illness stated that it included individuals with "disorder[s] of thought, mood or anxiety included under Axis I of the DSM IV (i.e. schizophrenia, major depression, bipolar disorder)," while North Dakota's definition applies to those who have significant functional impairment as a result of "Delusional Disorder, Psychotic Disorders of all types including Schizophrenia, Major Depressive Disorders, Bipolar I and II Disorders, Obsessive Compulsive Disorder (OCD), Panic Disorder, Post Traumatic Stress Disorder (PTSD) or Borderline Personality."
- <sup>120</sup> For example, Kansas had a mental health professional diagnose prisoners using the DSM-IV and then determine "a number to categorize them from 1 to 6" with numbers 4 and above being considered serious mental health disorders. Pennsylvania allows their Psychiatric Review Team to determine which prisoners have serious mental illness, and prisoners must "have a current diagnosis or a recent significant history of any of the DSM5 diagnosis."
- <sup>121</sup> These words were drawn from Montana's definition for serious mental illness.
- <sup>122</sup> For example, the definition in New York is "An inmate has a serious mental illness when he or she has been determined by a mental health clinician to meet at least one of the following criteria: (i) he or she has a current diagnosis of, or is diagnosed at the initial or any subsequent assessment conducted during the inmate's segregated confinement with, one or more of the following types of Axis I diagnoses, as described in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders, and such diagnoses shall be made based upon all relevant clinical factors, including but not limited to symptoms related to such diagnoses:(A) schizophrenia (all sub-types), (B) delusional disorder, (C)

schizophreniform disorder, (D) schizoaffective disorder, (E) brief psychotic disorder, (F) substance-induced psychotic disorder (excluding intoxication and withdrawal), (G) psychotic disorder not otherwise specified, (H) major depressive disorders, or (I) bipolar disorder I and II; (ii) he or she is actively suicidal or has engaged in a recent, serious suicide attempt; (iii) he or she has been diagnosed with a mental condition that is frequently characterized by breaks with reality, or perceptions of reality, that lead the individual to experience significant functional impairment involving acts of self-harm or other behavior that have a seriously adverse effect on life or on mental or physical health; (iv) he or she has been diagnosed with an organic brain syndrome that results in a significant functional impairment involving acts of self-harm or other behavior that have a seriously adverse effect on life or on mental or physical health; (v) he or she has been diagnosed with a severe personality disorder that is manifested by frequent episodes of psychosis or depression, and results in a significant functional impairment involving acts of self-harm or other behavior that have a seriously adverse effect on life or on mental or physical health; or (vi) he or she has been determined by a mental health clinician to have otherwise substantially deteriorated mentally or emotionally while confined in segregated confinement and is experiencing significant functional impairment indicating a diagnosis of serious mental illness and involving acts of self-harm or other behavior that have a serious adverse effect on life or on mental or physical health."

- <sup>123</sup> Maine only had race information for one female prisoner with SMI, but was unable to provide SMI data by race for its total female prisoner population. As such, Maine was not included in this analysis.
- <sup>124</sup> As a result, Texas was not included in Tables 22-25.
- <sup>125</sup> These jurisdictions were Indiana and Missouri.
- <sup>126</sup> ACA Standard 4-RH-0033, ACA 2016 RESTRICTIVE HOUSING STANDARDS 38.
- <sup>127</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Delaware, Hawaii, Illinois, Indiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming.
- <sup>128</sup> Idaho was only able to provide data on the number of pregnant prisoners in restrictive housing (0), and West Virginia was only able to provide data on the number of pregnant prisoners in the total custodial population (24).
- <sup>129</sup> Certain jurisdictions provided data from a different time period. Massachusetts provided information as of July 1, 2019. Rhode Island provided information as of June 30, 2019. Lastly, Wisconsin provided approximate data based on "the past 12 months."
- <sup>130</sup> These jurisdictions were Hawaii and Rhode Island.
- <sup>131</sup> The other 29 jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Delaware, Illinois, Indiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming.
- <sup>132</sup> This jurisdiction was Wisconsin.
- <sup>133</sup> ACA Standard 4-RH-0035, ACA 2016 RESTRICTIVE HOUSING STANDARDS 40. The National Standards under the Prison Rape Elimination Act (PREA) also call for careful attention to the needs and safety of transgender individuals, defined as "a person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth." NATIONAL STANARDS TO PREVENT, DETECT, AND RESPOND TO PRISON RAPE UNDER THE PRISON RAPE ELIMINATION ACT (PREA) 28 C.F.R. § 115.5 (2012); see generally 28 C.F.R. §§ 115.15, 115.31, 115.41, 115.42, 115.86.
- 134 This jurisdiction was Kansas. The other responding jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, Hawaii, Idaho, Indiana, Louisiana, Maine, Maryland, Massachusetts, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming. Minnesota and Maryland identified transgender individuals, but did not report how they identified transgender individuals.

<sup>135</sup> For example, Connecticut identified that some avenues "include self-reporting, mental health input, review of medical records (including community records and other agency documentation)."

<sup>136</sup> For example, Nebraska requires transgender inmates to self-identify as transgender and "have a current mental health diagnosis for Gender Dysphoria." Idaho "only track[s] Gender Dysphoria," which is "identified by self-identification [and] medical considerations." Mississippi reported that "[t]transgender offenders self identify and medical confirms."

Other jurisdictions noted that self-identified transgender prisoners would be referred to medical and/or mental health departments, but it was unclear whether a medical diagnosis was necessary for classification. For example, Colorado reported that, after self-identifying as transgender, a prisoner must "submit a 'kite' to mental health or the psychiatrist for treatment." Texas reported that "Once an identification is made, they are identified by a code in the Institutional Adjustment Record Data System and they referred to the medical and mental health departments for an evaluation." Missouri reported that after a prisoner self-identifies as transgender, "[t]he information is forwarded to the Site PREA Coordinator who sets up a meeting which includes the following staff: Chief of Mental Health Services, Medical Services Administrator and PREA Staff. They interview the offender and initiate the process."

<sup>137</sup> Arkansas reported that "[t]he Intake Staff will refer any inmate presenting with symptoms of Gender Dysphoria to the Gender Dysphoria Management and Treatment Committee for determining the appropriate treatment referrals for identified Gender Dysphoria and Intersex Inmates." Hawaii reported that it identifies transgender prisoners using "[m]edical records and birth certificates." North Dakota reported:

"The diagnosis of Gender Dysphoria will be based on the current diagnostic and statistical manual of mental disorders criteria and must be recommended by a licensed psychiatrist or psychologist. The committee may choose to accept the diagnosis or ask for a second opinion from another Department of Corrections and Rehabilitation psychiatrist or psychologist or a contract provider. If the providers do not reach agreement, the committee may choose to engage a third provider and will support the decision of the majority.

"A committee-approved Gender Dysphoria diagnosis must be in a place for consideration of specific medical services associated with treating Gender Dysphoria; however, access to routine and emergency medical and mental health services will not be withheld in the absence of an approved diagnosis.

"Adults in custody who identify as gender non-conforming or transgender, but who do not meet criteria for a Gender D[ys]phoria dia[g]nosis, may be given special property or housing accommodations based on their individual needs and safety considerations. These may be done through the committee's development of an individualized plan without creating an individual treatment plan."

<sup>138</sup> These jurisdictions were Alabama, Arizona, Colorado, Connecticut, Delaware, Georgia, Hawaii, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, New York, North Carolina, North Dakota, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Texas, Vermont, and Washington.

<sup>139</sup> These jurisdictions were Ohio, Tennessee, West Virginia, and Wisconsin.

<sup>&</sup>lt;sup>140</sup> This jurisdiction was Missouri.

<sup>&</sup>lt;sup>141</sup> This jurisdiction was Hawaii.

<sup>&</sup>lt;sup>142</sup> The four jurisdictions that only provided information on transgender prisoners in their total custodial populations—Ohio, Tennessee, West Virginia, and Wisconsin—housed a total of 361 transgender prisoners. Additionally, Idaho reported having 39 prisoners with gender dysphoria in their total custodial population, though it classifies these prisoners separately from transgender prisoners. The one jurisdiction that only provided information on transgender prisoners in restrictive housing, Missouri, reported 21 transgender prisoners in restrictive housing.

<sup>&</sup>lt;sup>143</sup> Alabama, Colorado, Connecticut, Delaware, Minnesota, Mississippi, Montana, Nebraska, North Dakota, Oklahoma, Rhode Island, South Carolina, South Dakota, Tennessee, and Vermont all reported having no transgender prisoners in restrictive housing.

- <sup>146</sup> In addition to those listed above, the responding jurisdictions were Alabama, Arkansas, Arizona, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>147</sup> Those jurisdictions were Alabama, Arkansas, Arizona, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. Because Colorado, Delaware, Hawaii, North Dakota, and Vermont said they had no restrictive housing that met the definition in the CLA-Liman survey, they did not respond to this question.
- <sup>148</sup> Those jurisdictions were Alabama, Arkansas, Arizona, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>149</sup> Those jurisdictions were Alabama, Arkansas, Arizona, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>150</sup> Those jurisdictions were Alabama, Arkansas, Arizona, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>151</sup> Those jurisdictions were Alabama, Arkansas, Arizona, Connecticut, Georgia, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, New York, North Carolina, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming.
- These jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Hawaii, Idaho, Illinois, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Montana, Nebraska, New York, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Wisconsin, Washington, West Virginia, and Wyoming. In addition to these 33 jurisdictions, three other jurisdictions—Colorado, Mississippi, and Missouri—responded. These three jurisdictions did not specify which staff members are authorized to make an initial placement in restrictive housing but specified that initial placements are reviewed by higher officials.
- <sup>153</sup> These jurisdictions were Arkansas, Hawaii, Illinois, Kansas, Kentucky, Maine, Maryland, Minnesota, Nebraska, New York, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, Texas, Vermont, Washington, and Wisconsin.

<sup>&</sup>lt;sup>144</sup> This jurisdiction was Maine.

<sup>&</sup>lt;sup>145</sup> Those jurisdictions were Colorado, Delaware, North Dakota, and Vermont.

<sup>&</sup>lt;sup>154</sup> This jurisdiction was Minnesota.

<sup>&</sup>lt;sup>155</sup> This jurisdiction was Vermont.

<sup>156</sup> Idaho wrote, "Inmate is referred to Restrictive Housing Placement Committee for consideration in placement to Ad-Seg (generally by Investigations Office). RHPC (group) consists of three-person panel (Case Manager, Unit Sergeant, Deputy Warden). They make a recommendation for placement in Ad-Seg or not. Warden makes their recommendation. Forwards to Central Office. Headquarters Administrative Review Committee (HARC) makes final decision. Group consists of Deputy Chief of Prisons and Chief Psychologist." Louisiana described a "disciplinary board," comprised of "2 trained members, Security and Classification/Administrative" and a "classification board," comprised of a "security officer (Captain or above) and [a] mental health professional or classification." South Dakota wrote that a "[h]earing is held with inmate. Board members include two Unit Managers and either a Major or Captain. Recommendation is made

to Deputy Warden. He approves or denies placement in RH. If board recommendation and DW decision does not match then the Warden has final say whether inmate is placed or not." Tennessee wrote, "Disciplinary hearing boards can place inmates in restrictive housing of 30 or less duration. These hearing boards can also recommend inmates for administrative segregation. If a recommendation is made the Warden then reviews and approves or disapproves. The Warden may initiate placement in administrative segregation for the safe and secure operation of the facility. This placement is brought before a disciplinary hearing board for due process purposes. Protective custody placements are determined by a hearing committee and approved/disapproved by the Warden."

- <sup>157</sup> These jurisdictions were Alabama, Connecticut, and Oregon.
- <sup>158</sup> This jurisdiction was Alabama.
- <sup>159</sup> These jurisdictions were Georgia, Massachusetts, Montana, and West Virginia.
- <sup>160</sup> This jurisdiction was Wyoming.
- <sup>161</sup> This jurisdiction was Arizona.
- <sup>162</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>163</sup> These jurisdictions were Alabama, Arkansas, Connecticut, Georgia, Hawaii, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Nebraska, New York, North Dakota, Ohio, Oklahoma, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>164</sup> These jurisdictions were Hawaii, Indiana, Kentucky, Massachusetts, Nebraska, Ohio, South Carolina, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming.
- <sup>165</sup> These jurisdictions were Alabama, Kansas, Louisiana, Maryland, Rhode Island, South Dakota, and West Virginia.
- <sup>166</sup> This jurisdiction was Rhode Island.
- <sup>167</sup> This jurisdiction was Alabama. In addition to the 25 jurisdictions whose responses are described here, three other jurisdictions answered this question: "The Unit administrator makes an initial recommendation and it is reviewed by the director of Offender Classification and Population Management. Inmates have hearings and the ability to present their case. They are also able to appeal classification decisions" (Connecticut); "a staff [member] not involved in the original placement and of higher authority must review within 24 hours of placement" (Minnesota); "The Unit Case Manager conducts a classification hearing requesting restrictive housing [then] all pertinent documents are forwarded to the Director of Classification for review and approval or disapproval" (Mississippi).
- <sup>168</sup> This jurisdiction was New York.
- <sup>169</sup> These jurisdictions were Maine and North Dakota.
- <sup>170</sup> This jurisdiction was Georgia.
- <sup>171</sup> This jurisdiction was Arkansas.
- <sup>172</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Georgia, Hawaii, Kansas, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Missouri, Montana, Nebraska, New York, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming. Indiana and Mississippi responded affirmatively but did not specify a timeframe. Kentucky and South Carolina added that their policy to review initial placement within 72 hours is being reconsidered.
- <sup>173</sup> These jurisdictions were Colorado, Hawaii, Massachusetts, Minnesota, Nebraska, New York, North Dakota, Ohio, Rhode Island, Texas, and Vermont.

- <sup>174</sup> This jurisdiction was Wisconsin.
- <sup>175</sup> These jurisdictions were Alabama, Kansas, Kentucky, Maine, Montana, Oregon, South Carolina Washington, and Wyoming.
- <sup>176</sup> These jurisdictions were Maryland and South Dakota.
- <sup>177</sup> These jurisdictions were Arkansas, Tennessee, and Texas.
- <sup>178</sup> This jurisdiction was Missouri.
- <sup>179</sup> These jurisdictions were Georgia, Oklahoma, and Pennsylvania.
- <sup>180</sup> This jurisdiction was Pennsylvania.
- <sup>181</sup> This jurisdiction was Arizona.
- <sup>182</sup> These jurisdictions were Arizona, Arkansas, Colorado, Connecticut, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>183</sup> These jurisdictions were Arizona, Arkansas, Colorado, Connecticut, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oregon, Pennsylvania, South Dakota, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>184</sup> These jurisdictions were Missouri, Oklahoma, and Rhode Island.
- <sup>185</sup> These jurisdictions were Georgia, Kansas, Louisiana, New York, Ohio, Oregon, South Dakota, and Vermont.
- <sup>186</sup> These jurisdictions were Arkansas, Idaho, Indiana, Maine, Nebraska, Rhode Island, and Wyoming. Nebraska provides Behavior and Programming plans specifically for those prisoners housed in "Longer-Term Restrictive Housing."
- <sup>187</sup> This jurisdiction was Wyoming.
- <sup>188</sup> These jurisdictions were Georgia, Massachusetts, Nebraska, Rhode Island, and Washington.
- <sup>189</sup> This jurisdiction was Oklahoma.
- <sup>190</sup> This jurisdiction was Missouri.
- <sup>191</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>192</sup> These jurisdictions were Alabama, Colorado, Georgia, Massachusetts, Montana, and Rhode Island.
- <sup>193</sup> These jurisdictions were Arizona, Idaho, Illinois, Maine, Maryland, Mississippi, North Dakota, South Dakota, Tennessee, Texas, Washington, and West Virginia.
- <sup>194</sup> These jurisdictions were Colorado, Georgia, Montana, and Vermont. Both Colorado and Vermont noted that their definitions of restrictive housing do not conform with the definition used in the CLA-Liman survey. Of the four jurisdictions, Colorado reported that consecutive placements—that is, "placement in restrictive housing for two or more time periods with no time out of restrictive housing in between" counted toward the cap. None of the jurisdictions reported that "repeated" placements—"placement in restrictive housing for two or more time periods with 48 hours or less outside of restrictive housing in between placement" counted toward the cap.

- <sup>195</sup> This jurisdiction was Colorado.
- <sup>196</sup> This jurisdiction was Montana.
- <sup>197</sup> This jurisdiction was Georgia.
- <sup>198</sup> These jurisdictions were Arizona, Connecticut, Hawaii, Idaho, Illinois, Indiana, Massachusetts, Mississippi, Missouri, New York, North Dakota, Oklahoma, South Dakota, Tennessee, Texas, West Virginia, and Wyoming.
- <sup>199</sup> These jurisdictions were Alabama, Arkansas, Kansas, Kentucky, Louisiana, Maine, Maryland, Minnesota, Nebraska, North Carolina, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, Washington, and Wisconsin.
- <sup>200</sup> This jurisdiction was Arkansas.
- $^{201}$  This jurisdiction was Washington.
- <sup>202</sup> Washington's new administrative segregation policy was implemented on March 6, 2020, reducing the cap to 30 days. *See* DOC 320.200(G)(2).
- <sup>203</sup> This jurisdiction was Minnesota.
- <sup>204</sup> These jurisdictions were Arkansas, Connecticut, Hawaii, Indiana, Kansas, Kentucky, Louisiana, Minnesota, Missouri, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Vermont, Wisconsin, and Wyoming.
- <sup>205</sup> These jurisdictions were Indiana, Kansas, Kentucky, Louisiana, Minnesota, Missouri, Nebraska, New York, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Vermont, and Wisconsin.
- <sup>206</sup> This jurisdiction was Pennsylvania.
- <sup>207</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Georgia, Hawaii, Idaho, Indiana, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, Wisconsin, Wyoming, and West Virginia. West Virginia responded that the "Segregation Commander" conducts recurring reviews of placement. Connecticut reported the "Unit administrator or designees in the facility" conduct recurring reviews of placement. Maryland responded, "Case Management." Hawaii reported that the "Warden or designee" conducts recurring review of placement.
- <sup>208</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Georgia, Indiana, Kentucky, Louisiana, Maine, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, North Dakota, Ohio, Oregon, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Washington, Wisconsin, and Wyoming.
- <sup>209</sup> These jurisdictions were Arizona, Idaho, Minnesota, Missouri, Vermont, Washington, Wisconsin, and Wyoming.
- <sup>210</sup> This jurisdiction was Wisconsin.
- <sup>211</sup> This jurisdiction was Idaho.
- <sup>212</sup> These jurisdictions were Alabama, Arizona, Arizona, Arkansas, Colorado, Connecticut, Georgia, Hawaii, Idaho, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>213</sup> This jurisdiction was Massachusetts.
- <sup>214</sup> These iurisdictions were Alabama, Colorado, Kentucky, Minnesota, North Dakota, Ohio, and Wyoming.
- <sup>215</sup> This jurisdiction was Minnesota.

- <sup>216</sup> These jurisdictions were Arizona, Indiana, Montana, South Dakota, West Virginia, and Wisconsin.
- <sup>217</sup> These jurisdictions were Idaho, Louisiana, Mississippi, and Missouri.
- <sup>218</sup> These jurisdictions were Arkansas, Oklahoma, Tennessee, and Texas.
- <sup>219</sup> These jurisdictions were Arizona, Connecticut, Georgia, Hawaii, Kansas, Maine, Maryland, Nebraska, Oregon, Pennsylvania, Rhode Island, and Vermont.
- <sup>220</sup> This jurisdiction was Rhode Island.
- <sup>221</sup> This jurisdiction was Georgia.
- <sup>222</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, Idaho, Illinois, Indiana, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Nebraska, New York, North Carolina, Ohio, Oregon, Pennsylvania, Rhode Island, Tennessee, Texas, Vermont, Wisconsin, and Wyoming.
- <sup>223</sup> Those jurisdictions were Alabama, Arkansas, Connecticut, Idaho, Louisiana, Massachusetts, Minnesota, Montana, Nebraska, and Rhode Island.
- Those jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Delaware, Georgia, Louisiana, Maryland, Minnesota, Mississippi, Nebraska, New York, Ohio, Pennsylvania, Rhode Island, Tennessee, Wisconsin, and Wyoming. Arkansas and Montana indicated a change in their policies since January 1, 2019, for use of restrictive housing based on age of prisoner. Arkansas stated that it implemented a policy for Youthful Inmates placed in restrictive housing in order to comply with state law (Ark. Code 12-29-117). In addition to its policies on juveniles, Wyoming reported a policy for young adults: "For young adults ages 18-24, facility staff shall limit the use of restrictive housing as much as possible; limit the length of stay in restrictive housing as much as possible; and identify enhanced opportunities for unstructured out-of-cell time and in-cell or out-of-cell services, including group, educational and therapeutic services, that they can safely participate in while in restrictive housing."
- <sup>225</sup> Those jurisdictions were Arizona, Colorado, Connecticut, Delaware, Georgia, New York, Ohio, Pennsylvania, Rhode Island, Wisconsin, and Wyoming. Nebraska defines juveniles as "individuals under the age of 19, who have been tried and found guilty in an adult court and sentenced to reside in a Nebraska state prison." Ohio explained that juveniles "cannot be placed in Extended Restrictive Housing." Tennessee defined juveniles as those "age 16-18 convicted as adults."
- Those jurisdictions were Alabama, Colorado, Connecticut, Georgia, Maryland, Pennsylvania, Rhode Island, and Wisconsin. Arizona stated that "there is no maximum custody for juveniles." Pennsylvania elaborated, "Inmates under the age of 18 (juveniles) when receiving disciplinary confinement, serve time in a Diversionary Treatment Unit (DTU). They are given 20 hours of out-of-cell activities (10 hours structured/10 hours unstructured). This is found in the 13.8.1 Section 4 policy (attached)." New York reported that juveniles were "[p]recluded from Special Housing (23 hours)." Ohio noted that juveniles "[c]annot be in ERH." Nebraska reported that its policies required review by the warden or designee within eight hours of placement, and that "[s]ight and sound separation, as required in general population still applies during restrictive housing assignment."
- <sup>227</sup> That jurisdiction was Minnesota. Minnesota did not specify a limit on hours in restrictive housing.
- <sup>228</sup> That jurisdiction was Tennessee. Similarly, Wyoming reported that it does not place juveniles in extended restrictive housing, but that,
  - 1. In rare situations juveniles may be separated from others as a temporary response to behavior that poses a serious and immediate risk of physical harm to any person.
  - 2. In such cases the placement should be brief, designed as a cool down period and done only in consultation with a mental health professional.
  - 3. These placements shall be reviewed at a minimum of once every twenty-four (24) hours.
- <sup>229</sup> Those jurisdictions were Alabama, Arizona, Colorado, Delaware, Pennsylvania, and Wyoming. Of these, Colorado and Wyoming defined older prisoners as over 55, and Pennsylvania defined older prisoners as over 50.

- <sup>230</sup> That jurisdiction was Alabama.
- <sup>231</sup> Those jurisdictions were Alabama, Arizona, Connecticut, Delaware, Idaho, Kentucky, Massachusetts, Minnesota, Mississippi, Oregon, Rhode Island, and Wyoming.
- <sup>232</sup> Those jurisdictions were Alabama, Arizona, and Massachusetts. Oregon reported that it has a restrictive housing cell within its infirmary for these individuals.
- <sup>233</sup> That jurisdiction was Massachusetts. Two other jurisdictions, Arizona and Rhode Island, explained that the designation of special medical need was determined by medical staff. Oregon and Wyoming noted that special medical needs were identified on a case-by-case basis.
- <sup>234</sup> Those jurisdictions were Massachusetts and Rhode Island.
- <sup>235</sup> That jurisdiction was Massachusetts.
- <sup>236</sup> That jurisdiction was North Carolina. For these individuals, "IDD are offered staff assistance during DHO process." Delaware also reported policies for prisoners with intellectual disabilities.
- <sup>237</sup> That jurisdiction was Alabama.
- <sup>238</sup> That jurisdiction was Colorado. In addition, Georgia reported that "[w]e do not put them in restrictive housing that meets the definition for this study.
- <sup>239</sup> Those jurisdictions were Alabama, Connecticut, Kentucky, Maine, Maryland, Minnesota, Nebraska, Oregon, Texas, Washington, Wisconsin, and Wyoming. Alabama and Wyoming stated that all of their programs were gender responsive.
- <sup>240</sup> That jurisdiction was Maine.
- <sup>241</sup> That jurisdiction was Wisconsin.
- <sup>242</sup> This jurisdiction was Alabama.
- <sup>243</sup> This jurisdiction was Wisconson.
- <sup>244</sup> These jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming. Colorado, which no longer has restrictive housing as defined by the survey, reported that it did not provide sanitary supplies to females in restrictive housing.
- <sup>245</sup> That jurisdiction was New York.
- <sup>246</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Delaware, Georgia, Idaho, Louisiana, Maryland, Massachusetts, Minnesota, Nebraska, New York, Ohio, Oregon, Rhode Island, Tennessee, and Wyoming. In addition to these restrictive housing policies, Idaho added, "Pregnant offenders are not to be in leg restraints and only waist restraints when either transporting or escorting." Three jurisdictions—Massachusetts, Minnesota, and Montana—reported changing their policies since January 1, 2019. Minnesota noted that it changed its policy in response to ACA standards and state legislation.
- <sup>247</sup> Those jurisdictions were Alabama, Arkansas, Georgia, Maryland, Massachusetts, and Tennessee. In addition, New York reported that pregnant prisoners are "[p]recluded from Special Housing (23 hours)" and Ohio reported that pregnant prisoners cannot be placed in extended restrictive housing.
- <sup>248</sup> These jurisdictions were Minnesota, Nebraska, Oregon, Rhode Island, and Wyoming. Minnesota specified that prisoners who were pregnant or postpartum, or had recently miscarried or terminated a pregnancy, "should not be placed in RH unless pose a serious and immediate risk of harm to others." Nebraska reported that "placement on immediate segregation status must be reviewed by the Warden or designee within 8 hours" and that it restricted use of restraints on

prisoners in their second and third trimester except "in the event of an immediate and serious security risk and only with the approval of" the warden or assistant warden. Oregon reported that it limits restrictive housing for pregnant prisoners to situations involving immediate threats to themselves or others, and caps restrictive housing placements at 30 days per incident. Wyoming noted that it only places pregnant prisoners in restrictive housing if "all other alternatives have been exhausted or are inappropriate based on the behavior of the inmate[,]" as "a temporary response to behavior that poses a serious and immediate risk of physical harm to any person." These placements require approval every 24 hours by the warden, senior medical or mental health staff, and other prison administrators, and are to be "as brief as possible."

- <sup>249</sup> That jurisdiction was Rhode Island.
- <sup>250</sup> Those jurisdictions were Arizona ("The difference for pregnant prisoners and inmates with medical needs is restraint requirements for movement") and Idaho ("Pregnant offenders are not to be in leg restraints and only waist restraints when either transporting or escorting"); and Nebraska ("A facility shall not use restraints on an inmate pregnant, including during labor, delivery, or postpartum recovery, during transport to a medical facility or birthing center or for use inside the facility, unless the Director of the NDCS or his designee makes an individualized determination that there are extraordinary circumstances (substantial flight risk or extraordinary security circumstances...").
- <sup>251</sup> Those jurisdictions were Alabama, Arkansas, Connecticut, Delaware, Louisiana, Massachusetts, Minnesota, Nebraska, Rhode Island, and Wyoming.
- <sup>252</sup> Those jurisdictions were Arkansas, Connecticut, Massachusetts, Minnesota, Nebraska, and Wyoming. Connecticut was the only jurisdiction to report a change in its policy since January 1, 2018. As of February 13, 2018, its policy states that "no inmate shall be subjected to the provisions of [the Administrative Directives, Restrictive Status, Code of Penal Discipline, and Protective Management] directives based solely on being diagnosed as having Gender Dysphoria, identifying as gender non-conforming or having an intersex condition." Alabama reported having different shower accommodations for transgender prisoners in restrictive housing, although it did not specify its policies. Delaware states that it imposes "the least restrictive levels of security and custody needed to promote the health and safety" of transgender prioners. Louisiana noted a differing policy for transgender individuals in restrictive housing but did not specify its policy.
- <sup>253</sup> That jurisdiction was Rhode Island.
- <sup>254</sup> That jurisdiction was Wyoming.
- Those jurisdictions were Alabama, Arkansas, Arizona, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. (This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey).
- <sup>256</sup> Those jurisdictions were Alabama, Arkansas, Arizona, Connecticut, Georgia, Idaho, Illinois, Kansas, Louisiana, Massachusetts, Mississippi, Montana, Nebraska, New York, South Dakota, and Texas.
- <sup>257</sup> Those jurisdictions were Maine (sometimes), Ohio (sometimes), Oklahoma (for disciplinary segregation and for those being placed on suicide watch), Pennsylvania (for their mental health roster), and Wyoming (only for prisoners with a diagnosed serious mental illness).
- <sup>258</sup> For example, Oklahoma screens people being placed on suicide watch, Pennsylvania screens those on their mental health roster, and Wyoming screens those with a diagnosed serious mental illness.
- <sup>259</sup> Those jurisdictions were Arizona, Arkansas, Colorado, Connecticut, Georgia, Hawaii, Idaho, Indiana, Kansas, Maine, Massachusetts, Mississippi, Missouri, Montana, Nebraska, New York, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Dakota, Vermont, Washington, Wisconsin, and Wyoming.
- <sup>260</sup> That jurisdiction was Wyoming ("As little as 1:1 up to 3:1 depending on the number on inmates in restrictive housing").
- <sup>261</sup> That jurisdiction was Montana.
- <sup>262</sup> Those jurisdictions were New York ("At facilities with mental health staff, rounds of restrictive housing are completed daily"), Vermont, and Wyoming.

- <sup>263</sup> Those jurisdictions were North Carolina ("Mental health staff round on all offenders in restrictive housing every 30 days. Some facilities have behavioral specialists who round at least weekly"), Rhode Island, and Tennessee.
- <sup>264</sup> Those jurisdictions that indicated that mental health visits were typically weekly or at least once a week were Colorado, Idaho, Illinois, Kansas, Kentucky, Louisiana, Maine, Minnesota, Missouri, Mississippi, Montana, Maryland, New Hampshire, Ohio, Oregon, South Carolina, Pennsylvania, Texas, Washington, West Virginia, and Wisconsin.
- <sup>265</sup> Those jurisdictions were Connecticut, Idaho, Indiana, Louisiana, Maryland, Massachusetts, Minnesota, Missouri, Nebraska, New York, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>266</sup> Those jurisdictions were Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, South Dakota, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>267</sup> Those jurisdictions were Massachusetts, Montana, and Pennsylvania.
- Those jurisdictions were Alabama, Connecticut, Delaware, Illinois, Indiana, Louisiana, Maine, Massachusetts, Minnesota, New Hampshire, New York, North Carolina, Ohio, Oregon, Pennsylvania, Rhode Island, Vermont, Wisconsin, and Wyoming. Arkansas reported that prisoners with serious mental illness could not be placed in "extended restrictive housing." Six jurisdictions—Alabama, Idaho, Louisiana, Montana, Nebraska, and Rhode Island—reported changes in their restrictive policies for people with serious mental illness since January 1, 2018. Idaho stated that it "established a definition and criteria for seriously mentally ill." Its change was motivated by new treatment practices and the need for "more humane treatment of this population." Further, it reported that its changes "[s]tarted in 2016 with our agency looking at Suicide Prevention, PREA compliance, Transgendered Offenders, and Gender Dysphoria. We were able to bring on a Chief Psychologist that had been vacant for quite a while and he brought new ideas and insights into our system." Rhode Island established a Residential Treatment Unit for this population. New Hampshire has a policy in place to monitor and review restrictive housing placement for those who are prescribed psychotropic medications.

<sup>269</sup> Illinois responded: "A MHP shall review any mentally ill offender promptly after initial placement in Restrictive Housing. At least once every seven calendar days, a MHP shall visit restrictive housing units and conduct mental health rounds on all disciplinary segregation offenders."

Massachusetts stated: "Before placement in Restrictive Housing, an inmate shall be screened by a Qualified Mental Health Professional to determine if the inmate has a serious mental illness (SMI) or to determine if Restrictive Housing is otherwise clinically contraindicated based on clinical standards adopted by the Department of Correction, with said standards adopted in consultation with the Department of Mental Health, and the Qualified Mental Health Professional's clinical judgment."

North Carolina specified: "[O]ffenders with mental illness housed in residential or inpatient treatment are provided staff representation during DHO process. Also, all offenders diagnosed with mental illness are assessed each 30 days, or more frequently if needed, while placed in restrictive housing. The multidisciplinary team meets weekly to determine if restrictive housing is causing detrimental effects for offenders with mental illness. If so, alternative housing is considered."

Rhode Island explained that prisoners with mental illness were "seen by mental health per policy. [R]eviewed by social worker, behavioral health, input as to behavior and reduction of RH time. [S]een by behavioral health staff who assess the offender to determine if the conduct was related to mental illness. [I]f so, the BH staff advises the hearing officer of this. Where misconduct is based on the person's mental illness they are not placed in disciplinary confinement. [I]f the conduct was not based on MH then the discipline process will continue. [I]f placed in Disciplinary Confinement the BH staff will evaluate the offender periodically to ensure the person does not decompensate during DC. [I]f decompensation is seen, the individual is removed from DC."

Vermont stated, "Prisoners with serious mental illness must be screened by mental health professional before (to approve segregation) and within 24 hours of being placed in segregation; seen by mental health services regularly (either qualified mental health professional or qualified health care provider); cannot be in segregation for 15 continuous days for disciplinary segregation."

Wisconsin responded, "There is a psychology evaluation within 1 working day of placement, written psychology input to the disciplinary process to identify mitigating factors after any major conduct report, psychology rounds at least once per week, and a written Behavior Management Plan for any RH disposition over 60 days."

- <sup>270</sup> Those jurisdictions were Alabama, Maine, Oregon, and Pennsylvania.
- <sup>271</sup> Alabama wrote: serious mental illness inmates "are not to remain in restrictive housing for an extended period of time." Ohio wrote: "For SMI and juvenile inmates it is capped at 29 continuous days."
- <sup>272</sup> This jurisdiction was Alabama.
- <sup>273</sup> This jurisdiction was Ohio.
- <sup>274</sup> Elena Vanko, *Step-Down Programs and Transitional Units: A Strategy to End Long-Term Restrictive Housing*, VERA INSTITUTE OF JUSTICE, at 2 (June 2019), at https://www.vera.org/downloads/publications/step-down-programs-and-transitional-units-strategy-to-end-long-term-restrictive-housing-policy-brief.pdf (citing AMERICAN CORRECTIONAL ASSOCIATION (ACA), *Restrictive Housing Expected Practices* (Alexandria, VA: ACA, 2018), 4, http://www.aca.org/ACA\_Prod\_IMIS/ACA\_Member/Standards\_\_Accreditation/Standards/Restrictive\_Housing\_Committee/ACA\_Member/Standards\_and\_Accreditation/Restrictive\_Housing\_Committee.aspx?hkey=458418a3-8c6c-48bb-93e2-b1fcbca482a2).
- <sup>275</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Georgia, Hawaii, Idaho, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Missouri, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>276</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Hawaii, Idaho, Indiana, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Missouri, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>277</sup> This jurisdiction was Tennesssee.
- <sup>278</sup> This jurisdiction was Rhode Island.
- <sup>279</sup> This jurisdiction was Wisconsin.
- <sup>280</sup> This jurisdiction was Washington.
- <sup>281</sup> These jurisdictions were Georgia, Kansas, Minnesota, Mississippi, Oklahoma, South Carolina, and South Dakota. Oklahoma specified that time in restrictive housing "cannot be reduced for disciplinary . . . or protective custody" based on good behavior; however, time spent in medical/psychiatric segregation can be reduced as determined by "medication adherence."
- <sup>282</sup> These jurisdictions were Alabama, Arizona, Colorado, Hawaii, Idaho, and Kentucky. Colorado highlighted that it has a 15-day cap on continuous placement in restrictive housing. Idaho reported, "We do not have a policy that prevents release from Ad-seg to the community. However, we do all we can to avoid it."
- <sup>283</sup> This was Kentucky.
- <sup>284</sup> These jurisdictions were Missouri, Oregon, Pennsylvania, Tennessee, and Washington.
- <sup>285</sup> This was Tennessee.
- <sup>286</sup> These jurisdictions were Arkansas, Connecticut, Georgia, Indiana, Louisiana, Maine, Minnesota, Mississippi, Montana, New York, North Dakota, Ohio, South Dakota, Texas, Vermont, Wisconsin, and Wyoming.
- <sup>287</sup> This was Maine.

- <sup>288</sup> This jurisdiction was North Dakota.
- <sup>289</sup> These jurisdictions were Arkansas, Connecticut, Indiana, Kansas, Louisiana, Maine, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, New York, North Dakota, Ohio, South Dakota, Texas, Vermont, Wisconsin, and Wyoming. South Carolina reported that a forthcoming, revised RHU policy "will include this concern."
- <sup>290</sup> This jurisdiction was Wyoming.
- <sup>291</sup> Kansas is one example: "They are released to general population prior to release to community."
- <sup>292</sup> This jurisdiction was Texas.
- <sup>293</sup> This jurisdiction was Indiana.
- <sup>294</sup> This jurisdiction was New York.
- <sup>295</sup> These jurisdictions were Alabama, Arizona, Colorado, Connecticut, Hawaii, Indiana, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Nebraska, New York, North Carolina, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Rhode Island, South Dakota, Tennessee, Texas, Vermont, Wisconsin, and Wyoming.
- <sup>296</sup> From the jurisdictions that were able to provide the number of individuals released from restrictive housing to general population without a transition program in 2018, we received the following responses: 47 by Nebraska, 230 by Texas, 428 by South Dakota, 1,597 by North Carolina, 2,578 by Oregon, 4,652 by Alabama, 5,319 by Oklahoma, and 18,084 by New York.
- <sup>297</sup> These jurisdictions were Maine, Maryland, Massachusetts, and North Carolina. North Carolina wrote: "All are released to general population unless going to RDU/TDU." Maine wrote that "95%" are returned without participating in a step-down or transition program. Massachusetts wrote: "The DOC did not have a step down or transition unit in 2018."
- <sup>298</sup> These jurisdictions were Alabama, Maryland, Massachusetts, North Dakota, and Oregon.
- <sup>299</sup> These jurisdictions were Arizona, Colorado, Hawaii, Idaho, Indiana, Louisiana, Minnesota, Mississippi, Ohio, Pennsylvania, Rhode Island, Tennessee, Vermont, and Wisconsin. Idaho specified: "[We] don't track this. However, beginning in 2020, the vast majority will be released from the step-up program. The rare exception will be those who can't do the programming as it will be at a sixth grade reading level."
- <sup>300</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Hawaii, Indiana, Louisiana, Maryland, Massachusetts, Minnesota, Mississippi, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Wisconsin, and Wyoming.
- <sup>301</sup> These jurisdictions were Connecticut, North Dakota, and Wyoming.
- <sup>302</sup> From the jurisdictions that were able to provide absolute numbers of individuals released from restrictive housing to general population after participating in a transition program in 2018, we received the following responses: 5 from Oklahoma, 7 from Arkansas, 16 from Wyoming, 24 from South Carolina, 29 from Minnesota, 37 from South Dakota, 41 from Nebraska, 100 from Connecticut, 325 from New York, 378 from North Carolina, and 954 from Texas.
- <sup>303</sup> These jurisdictions were Arizona, Colorado, Hawaii, Idaho, Indiana, Maine, Mississippi, Ohio, Pennsylvania, Rhode Island, Tennessee, Vermont, and Wisconsin. Maine specified that "5%" of its restrictive housing prisoners were returned to the general population after participating in a step-down or transition program in 2018. Idaho noted: "Our step-up program started as a pilot program in the summer of 2019 and we had about 12 graduate to general population."
- These jurisdictions were Arizona, Arkansas, Colorado, Connecticut, Hawaii, Idaho, Indiana, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming.
- <sup>305</sup> From the jurisdictions that were able to provide absolute numbers of individuals released from restrictive housing to the community without a transition program in 2018, we received the following responses: 1 from Maine, 6 from North

Dakota, 9 from South Dakota, 16 from Texas, 16 from Idaho, 45 from Tennessee, 46 from Washington, 48 from Louisiana, 54 from Connecticut, 63 from Nebraska, 124 from Arkansas, 148 from South Carolina, 287 from Maryland, 288 from Oregon, 334 from Pennsylvania, 390 from Oklahoma, 402 from Wisconsin, 431 from Minnesota, 492 from New York, and 702 from North Carolina.

- <sup>306</sup> These jurisdictions were Maine (1) and North Carolina (702).
- <sup>307</sup> These jurisdictions were Colorado, Vermont, and Wyoming.
- <sup>308</sup> These jurisdictions were Arizona, Hawaii, Indiana, Massachusetts, Mississippi, Montana, Ohio, and Rhode Island.
- <sup>309</sup> These jurisdictions were Arizona, Arkansas, Colorado, Connecticut, Hawaii, Idaho, Indiana, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South, Dakota, Tennessee, Texas, Vermont, Wisconsin, and Wyoming.
- <sup>310</sup> From the jurisdictions that were able to provide absolute numbers of individuals released from restrictive housing to the community within 30 days of their release from restrictive housing, we received the following responses: Arkansas (87), Connecticut (5), Louisiana (32), Maine (2), Maryland (351), Minnesota (284), Nebraska (75), North Carolina (5,477), Oklahoma (51), Oregon (630), South Carolina (86), and South Dakota (30).
- <sup>311</sup> These jurisdictions were North Dakota, Vermont, and Wyoming.
- <sup>312</sup> These jurisdictions were Arizona, Colorado, Hawaii, Idaho, Indiana, Massachusetts, Mississippi, Montana, New York, Ohio, Pennsylvania, Rhode Island, Tennessee, Texas, and Wisconsin. Pennsylvania specifically noted that "[t]his data is not centrally maintained but will be in the future."
- <sup>313</sup> Questions 47-47g asked about this topic.
- <sup>314</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey. Arizona, Delaware, New Hampshire, and Virginia did not respond to this series of questions.
- <sup>315</sup> These jurisdictions included Arizona, Arkansas, Connecticut, Georgia, Indiana, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>316</sup> Those jurisdictions were Alabama, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey.
- <sup>317</sup> Those jurisdictions were Connecticut, Idaho, Illinois, Louisiana, Maine, Montana, Nebraska, Oklahoma, Rhode Island, South Carolina, Tennessee, Texas, West Virginia, and Wyoming. This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey.
- 318 That jurisdiction was Montana.
- <sup>319</sup> That jurisdiction was Louisiana.
- <sup>320</sup> The jurisdictions allowing the median number of seven times out-of-cell per week were Idaho, Illinois, and Wyoming. The following jurisdictions allowed more than seven times per week out-of-cell: Louisiana, Maine, Nebraska, Oklahoma, South Carolina, Tennessee, and West Virginia. The following jurisdictions allowed fewer than seven times per week out-of-cell: Connecticut, Montana, Rhode Island, and Texas.

- <sup>321</sup> Those jurisdictions were Connecticut, Idaho, Illinois, Kentucky, Louisiana, Maine, Nebraska, New York, Oklahoma, Rhode Island, South Carolina, Tennessee, Texas, West Virginia, and Wyoming. This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey.
- <sup>322</sup> That jurisdiction was Rhode Island.
- 323 That jurisdiction was Idaho.
- <sup>324</sup> The jurisdiction allowing the median of 3.33 hours out-of-cell per week was West Virginia. The following jurisdictions allowed more than 3.33 hours per week out-of-cell: Connecticut, Idaho, Illinois, Kentucky, Nebraska, New York, Oklahoma. The following jurisdictions allowed fewer than 3.33 hours per week out-of-cell: Louisiana, Maine, Rhode Island, South Carolina, Tennessee, Texas, and Wyoming. New York identified that it permitted between one and two hours out of cell each day. For purposes of the median calculation, New York was therefore identified as permitting a minimum of one hour out of cell per day, or seven hours per week.
- <sup>325</sup> Those jurisdictions were Alabama, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey.
- <sup>326</sup> That jurisdiction was Pennsylvania.
- 327 These jurisdictions were Louisiana, Texas, and Wyoming.
- <sup>328</sup> Those jurisdictions that allowed showering at the median of three times per week were Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, Oklahoma, Rhode Island, South Carolina, Tennessee, Washington, West Virginia, and Wisconsin. Missouri allowed showers twice per week; Alabama allowed showers four times per week; Ohio allowed showers five times per week. South Dakota identified that showering was available during weekdays (5 days per week) for individuals in disciplinary restrictive housing. Both New York and Oregon identified a range in their response. New York reported allowing between three and four showers per week. For purposes of the median calculation, both New York and Oregon were therefore identified as permitting a minimum of three showers per week.
- Those jurisdictions were Alabama, Connecticut, Georgia, Idaho, Illinois, Indiana, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Missouri, Nebraska, New York, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Washington, West Virginia, Wisconsin, and Wyoming. This excludes Colorado, Hawaii, North Dakota, Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey.
- <sup>330</sup> That jurisdiction was New York.
- <sup>331</sup> Those jurisdictions were Alabama, Connecticut, Georgia, Illinois, Maryland, and Oklahoma.
- <sup>332</sup> Those jurisdictions adjacent to the median were Massachusetts and West Virginia (20 minutes) and Idaho (18 minutes). The following jurisdictions permitted 30 minutes of time out-of-cell for showers: Indiana, Maine, Rhode Island, and South Carolina. The following jurisdictions allowed 15-minute showers: Kentucky, Louisiana. Minnesota, Missouri, Nebraska, Pennsylvania, Washington, Wisconsin, and Wyoming. Oregon identified a range of 10 minutes to one hour for time out-of-cell to use the shower. For purposes of the median, calculation, Oregon was identified as permitting a minimum shower time of 10 minutes.
- <sup>333</sup> The jurisdictions that reported that time out-of-cell to exercise varied according to this factor were Arkansas, Indiana, Louisiana, Massachusetts, Missouri, New York, Ohio, Pennsylvania, Rhode Island, Texas, and Wisconsin.
- <sup>334</sup> The jurisdictions that reported that time out-of-cell to exercise varied according to this factor were Alabama, Arizona, Georgia, Maine, Maryland, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Rhode Island, South Dakota, Tennessee, Texas, and West Virginia.

- 335 The jurisdiction that reported that time out-of-cell to exercise varied according to this factor was Wyoming.
- <sup>336</sup> Those jurisdictions were Maryland and Minnesota.
- <sup>337</sup> Those jurisdictions were Alabama, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Massachusetts, Mississippi, Missouri, Montana, Nebraska, New York, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. (This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey).
- <sup>338</sup> That jurisdiction was Georgia.
- 339 Those jurisdictions were Idaho, Maine, New York, Pennsylvania, and Wyoming.
- <sup>340</sup> Those jurisdictions allowing exercise at the median of five times per week were Alabama, Arkansas, Indiana, Kansas, Kentucky, Louisiana, Massachusetts, Mississippi, Nebraska, Oklahoma, Oregon, Rhode Island, South Carolina, Tennessee, Texas, Washington, and West Virginia. Illinois allowed exercise four times per week; Connecticut, Missouri, Montana, and Wisconsin allowed exercise three times per week. Both Oregon and Wisconsin identified a range in their response. Oregon reported providing time out-of-cell for exercise five to seven times per week. Wisconsin reported providing time out-of-cell for exercise three to four times per week. For purposes of the median calculation, both Oregon and Wisconsin were therefore identified as providing the lower number of hours identified.
- Those jurisdictions were Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Massachusetts, Missouri, Nebraska, New York, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Washington, West Virginia, and Wyoming. (This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey).
- <sup>342</sup> That jurisdiction was Oregon.
- <sup>343</sup> That jurisdiction was Kentucky.
- <sup>344</sup> Those jurisdictions that allowed exercise at the median of one hour at a time were Connecticut, Georgia, Indiana, Kansas, Louisiana, Maine, Massachusetts, Missouri, Nebraska, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, Tennessee, Washington, and West Virginia. Those jurisdictions that allowed exercise for two hours at a time were Illinois, Texas, and Wyoming. Idaho permitted 1.5 hours of exercise at a time. New York indicated a range between one and two hours of exercise at a time depending on a prisoner's custodial status. For purposes of the median calculation, New York was identified as permitting a minimum of one hour of exercise at a time.
- <sup>345</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. (This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey).
- <sup>346</sup> Those jurisdictions are Arizona, Connecticut, Georgia, Indiana, Kansas, Kentucky, Louisiana, Maryland, Minnesota, Mississippi, North Carolina, Ohio, Oregon, Rhode Island, South Dakota, Texas, Washington, Wisconsin, and Wyoming.
- <sup>347</sup> Those jurisdictions were Alabama, Arkansas, Idaho, Illinois, Maine, Massachusetts, Missouri, Montana, Nebraska, New York, Oklahoma, Pennsylvania, South Carolina, and Tennessee.
- <sup>348</sup> That jurisdiction is West Virginia.
- <sup>349</sup> Those jurisdictions were Alabama, Arizona, Connecticut, Georgia, Idaho, Indiana, Kansas, Kentucky, Louisiana, Maryland, Montana, North Carolina, Oklahoma, South Carolina, South Dakota, Tennessee, Washington, Wisconsin, and Wyoming. For those jurisdictions that identified multiple sizes for outdoor exercise spaces, the smallest area was selected for comparison across jurisdictions. We excluded Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey. We likewise excluded all jurisdictions that responded that the size of outdoor exercise space varied, but did not provide more specific information.

- <sup>350</sup> That jurisdiction was Alabama. However, Alabama noted that outdoor exercise area in restrictive housing varies from site to site and can be as large as 121 square feet.
- <sup>351</sup> That jurisdiction was Montana.
- <sup>352</sup> Those jurisdictions that allowed outdoor exercise in the median area of 180 square feet were Indiana, Kentucky, Louisiana, Maryland, and South Carolina. The jurisdictions that permitted outdoor exercise in an area less than 180 square feet were Alabama, Arizona, Georgia, Idaho, North Carolina, Washington, Wisconsin, and Wyoming. The jurisdictions that allowed outdoor exercise in an area greater than 180 square feet were Connecticut, Kansas, Oklahoma, Tennessee, South Dakota, and Montana.
- <sup>353</sup> Those jurisdictions were Arizona, Indiana, Kansas, Louisiana, North Carolina, South Dakota, Washington, West Virginia, and Wyoming. For those jurisdictions that identified multiple sizes for indoor exercise spaces, the smallest area was selected for comparison across jurisdictions. We excluded Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey. We likewise excluded all jurisdictions responding that the size of indoor exercise space varied, but did not provide more specific information.
- <sup>354</sup> Those jurisdictions were Kansas and North Carolina.
- <sup>355</sup> That jurisdiction was Louisiana.
- <sup>356</sup> The jurisdiction that allowed indoor exercise in the median area of 160 square feet was South Dakota. The jurisdictions that allowed indoor exercise in an area less than 160 square feet were Kansas, North Carolina, Washington, and West Virginia. The jurisdictions that allowed indoor exercise in an area greater than 160 square feet were Arizona, Indiana, Wyoming, and Louisiana.
- <sup>357</sup> Those jurisdictions were Massachusetts and Ohio.
- <sup>358</sup> The jurisdictions in which the indoor exercise areas do have natural light are Arizona, Connecticut, Kansas, Louisiana, Mississippi, Oregon, Rhode Island, South Dakota, Washington, West Virginia, and Wisconsin.
- <sup>359</sup> The jurisdiction in which the indoor exercise areas do not have natural light is Wyoming.
- <sup>360</sup> The natural light in indoor exercise areas varies in Georgia, Indiana, Kentucky, Maryland, Minnesota, North Carolina, and Ohio, and Texas.
- <sup>361</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. (This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey).
- <sup>362</sup> Jurisdictions that reported providing no group out-of-cell time were Arkansas, Georgia, Idaho, Illinois, Kansas, Kentucky, Mains, Maryland, Mississippi, Missouri, Montana, Pennsylvania, Rhode Island, Washington, and Wyoming. The following jurisdictions provided answers that did not make clear whether group activity out-of-cell was available: Minnesota, Ohio, Texas, and Wisconsin.
- <sup>363</sup> These jurisdictions were Alabama, Connecticut, Indiana, Louisiana, Massachusetts, Nebraska, New York, North Carolina, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, and West Virginia.
- <sup>364</sup> Those jurisdictions were Alabama, Connecticut, Massachusetts, New York, North Carolina, and Oregon.
- <sup>365</sup> Those jurisdictions were Indiana, Louisiana, Massachusetts, Nebraska, Rhode Island, Tennessee, and West Virginia.
- <sup>366</sup> That jurisdiction was Rhode Island.
- <sup>367</sup> Those jurisdictions were Massachusetts, South Carolina, South Dakota, and Tennessee.

- <sup>368</sup> The question asked, "In an ideal situation, if your jurisdiction had the necessary resources, what number of hours per day or week do you believe prisoners should be out-of-cell?" It directed jurisdictions to answer for both hours per day and hours per week. Some jurisdictions provided answers for one or the other, some provided answers to both, and others provided narrative answers without specifying numbers of hours.
- <sup>369</sup> The jurisdictions that responded to this question were Alabama, Arkansas, Colorado, Connecticut, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Maine, Massachusetts, Mississippi, Missouri, Montana, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, West Virginia, Wisconsin, and Wyoming.
- <sup>370</sup> The jurisdictions that specified a certain number of hours were Alabama, Arkansas, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Maine, Massachusetts, Mississippi, Missouri, Montana, New York, North Carolina, North Dakota, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Vermont, West Virginia, Wisconsin, and Wyoming.
- <sup>371</sup> Those jurisdictions were Indiana and Texas. Indiana responded that one hour per day would be desirable. Texas responded, "Out-of-cell time should depend on the behavior of the offender and the risk imposed on other offenders and staff. TDCJ policy directs that offenders should be provided a minimum of one hour of exercise outside their cells, five days per week, unless security or safety considerations dictate otherwise." Arkansas, Mississippi, Montana, North Carolina, and Wisconsin all responded that a minimum of two hours per day was desirable.
- <sup>372</sup> Those jurisdictions were North Dakota and Oklahoma. Oklahoma responded that more than 12 hours a day would be desirable, depending on the reason for placement.
- <sup>373</sup> That jurisdiction was Indiana.
- <sup>374</sup> Those jurisdictions were North Dakota, Tennessee, and Wyoming. North Dakota indicated 60 hours per week would be desirable. Tennessee responded that 56-70 hours per week was desirable. Wyoming responded that 70 hours per week would be desirable.
- <sup>375</sup> Those jurisdictions were Colorado, Connecticut, and Ohio.
- <sup>376</sup> That jurisdiction was Connecticut. In response to this question, Ohio stated, "We strive to get inmates out of cells as much as we can safely within the resources and infrastructure we are allotted." Colorado responded, "It depends on the classification and risks offenders pose. All offenders need to be offered out-of-cell opportunities to promote pro social interaction and programs to promote behavioral changes."
- <sup>377</sup> That jurisdiction was Idaho.
- <sup>378</sup> That iurisdiction was New York.
- <sup>379</sup> That institution was Kentucky, which indicated a range from 2.25 to 5 hours per day was desirable.
- <sup>380</sup> Those jurisdictions were Oklahoma and Texas.
- <sup>381</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. (This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey).
- <sup>382</sup> These jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, and Wyoming. The jurisdictions that reported restrictive housing cells do not have natural light were Georgia, Oregon, and Wisconsin.
- <sup>383</sup> These jurisdictions were Georgia, Oregon, and Wisconsin.

- <sup>384</sup> These jurisdictions were Arizona, Indiana, Massachusetts, Mississippi, North Carolina, Oregon, South Dakota, Texas, Washington, and West Virginia.
- <sup>385</sup> Those jurisdictions were Idaho, Kansas, Louisiana, Maine, Rhode Island, South Carolina, and Wyoming.
- <sup>386</sup> Those jurisdictions were Alabama, Arkansas, Connecticut, Georgia, Illinois, Kentucky, Maryland, Minnesota, Missouri, Montana, Nebraska, New York, Ohio, Oklahoma, Pennsylvania, Tennessee, and Wisconsin.
- <sup>387</sup> Those jurisdictions were Connecticut, Minnesota, Montana, Nebraska, and New York.
- <sup>388</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. The jurisdictions that reported prisoners do not have in-cell programming were Illinois, Rhode Island, and South Carolina.
- <sup>389</sup> Arkansas, Louisiana, and Missouri reported providing these programs.
- <sup>390</sup> Arkansas, Connecticut, Kentucky, Louisiana, Minnesota, Mississippi, Missouri, and Minnesota reported providing these programs.
- <sup>391</sup> Nebraska, New York, West Virginia, and Wisconsin reported providing these programs.
- <sup>392</sup> Arkansas, Connecticut, Nebraska, New York, West Virginia, and Wisconsin reported providing these programs.
- <sup>393</sup> Connecticut, Massachusetts, Nebraska, New York, Washington, and Wisconsin reported providing these programs.
- <sup>394</sup> Arkansas and Nebraska reported providing these programs.
- <sup>395</sup> Massachusetts reported providing this program.
- <sup>396</sup> Indiana, Kentucky, Minnesota, and Nebraska reported providing these programs.
- <sup>397</sup> The twenty-nine jurisdictions in which prisoners had access to a GED or other diploma program in restrictive housing were Alabama (prisoners were provided materials and visits from an instructor and may work toward a GED, and special education continues), Arizona, Arkansas, Connecticut (only if required by state education regulations), Idaho, Indiana, Georgia (GED and some correspondence college classes), Kansas (only for special education prisoners), Kentucky (varies by institution: some can access the GED, others get packets from teachers and can attend class once released), Louisiana (prisoners in restrictive housing can only take the actual GED test in medium custody status, but they can have study materials in other custody statuses), Maine, Massachusetts (geared toward HiSET), Minnesota (only if under an IEP), Mississippi (receive the study materials via correspondence and instructions from a certified instructor), Missouri (varies by site and program plan but can access correspondence classes including HiSET), Montana, Nebraska, New York (if they meet the criteria after academic testing), North Carolina (offered academic testing and, if qualified, can take TASC and HSE tests), Ohio, Oklahoma, Oregon, Pennsylvania (only for special education prisoners), South Dakota, Tennessee, Texas (available for individuals eligible under IDEA; correspondence courses open to others), Washington, Wisconsin (varies by institution: some do not allow GED access; others allow prisoners to continue with self-study packets and testing if they were enrolled before entering restrictive housing; some allow certain study materials but not testing, as testing is done on computers and study materials can be completed on paper; others proceed on a case-by-case basis if a prisoner expresses interest in continuing their education), and Wyoming (through tablets if enrolled prior to restrictive housing placement). The jurisdictions in which prisoners do not have access to a GED or other diploma program in restrictive housing are Maryland and South Carolina (although they will have such access when they have tablets).
- <sup>398</sup> For example, Texas's "[p]re-release programs offer virtual classrooms in which participants are provided with workbooks that allow them to follow along with curriculum instruction."
- <sup>399</sup> For example, Idaho and Maryland reported offering self-help books or packets and videos.
- <sup>400</sup> Louisiana offered "[p]re-release booklets, education handouts, mental health programming . . . handouts. . . ." Massachusetts reported that "[c]urrently, in cell programming is conducted via handbooks however we have recently

conducted a procurement to implement programming tablets in [restrictive housing.]"

- <sup>401</sup> For example, Mississippi reported, "Mental Health provides one-on-one classes. Limitations are contingent upon offender behavior, space, and available security."
- <sup>402</sup> For example, Arkansas reported, "Tablets for in-cell programming Education (GED), Mental Health (Anger Management, Parenting Class, etc.)." Oregon reported, "some [in-cell programming] is done with packets reviewed weekly with a programmer, others are delivered by electronic tablets."
- <sup>403</sup> West Virginia reported, "The programming is educational packets based on substance abuse and anger management." New York, Maine, and Wisconsin also reported offering workbooks.
- <sup>404</sup> Wyoming provides self-help journals for prisoners to complete on their own time.
- <sup>405</sup> The jurisdiction in which prisoners do not have access to television, music, internet, or reading is Maine.
- <sup>406</sup> These jurisdictions are Arkansas, Georgia, Idaho, Indiana, Massachusetts, Montana, New York, Ohio, Oregon, Pennsylvania, South Dakota, Wisconsin, and Wyoming.
- <sup>407</sup> These jurisdictions are Idaho, Massachusetts, South Dakota, Tennessee, and West Virginia.
- <sup>408</sup> These jurisdictions are Alabama, Arizona, Arkansas, Connecticut, Georgia, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Texas, Washington, Wisconsin, and Wyoming.
- <sup>409</sup> This jurisdiction was Arkansas.
- <sup>410</sup> This jurisdiction was Maine.
- <sup>411</sup> Those jurisdictions were Alabama, Arizona, Arkansas, AConnecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Washington, Wisconsin, and Wyoming. The question did not clarify whether sanitary supplies were provided free of charge.
- <sup>412</sup> These jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming. Colorado, which no longer has restrictive housing as defined by the survey, reported that it did not provide sanitary supplies to females in restrictive housing.
- <sup>413</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. (This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey).
- <sup>414</sup> The jurisdictions in which prisoners in restrictive housing are allowed social visits are Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. The jurisdiction in which prisoners in restrictive housing are not allowed social visits is Pennsylvania. However, prisoners in disciplinary segregation in Alabama are also not allowed social visits.
- <sup>415</sup> That jurisdiction was Alabama, which reported allowing two social visits per year for prisoners in close custody restrictive housing, and four social visits per year for prisoners in preventive custody restrictive housing.
- <sup>416</sup> This jurisdiction was South Dakota. Maryland also allows two social visits per week specifically for those prisoners in administrative segregation housing.

- <sup>417</sup> This does not include jurisdictions that allow a certain number of hours of visitation per week/month because it was not clear how many visits that would amount to. The jurisdictions that reported using this metric were Washington, West Virginia, and Wyoming.
- <sup>418</sup> Those jurisdictions were Connecticut, Illinois, Indiana, Kansas, Massachusetts, Missouri, and South Dakota. As previously noted, Maryland also allows two social visits per week specifically for those prisoners in administrative segregation housing.
- <sup>419</sup> That jurisdiction was Kansas.
- <sup>420</sup> That jurisdictions was Indiana.
- <sup>421</sup> Those jurisdictions were Alabama and Mississippi.
- <sup>422</sup> Those jurisdictions were Alabama, Arizona, Maryland, Minnesota, Nebraska, New York, Ohio, Oklahoma, Oregon, South Carolina, Texas, and Washington.
- <sup>423</sup> Those jurisdictions were Arkansas, Oregon, Rhode Island, Tennessee, and Wisconsin.
- <sup>424</sup> Those jurisdictions were Ohio and South Dakota.
- <sup>425</sup> These jurisdictions are Georgia, Idaho, Indiana, Kentucky, Maine, Maryland, Minnesota, Mississippi, Montana, Missouri, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>426</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. (This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey).
- <sup>427</sup> These jurisdictions are Arizona, Arkansas, Connecticut, Georgia, Idaho, Indiana, Kansas, Kentucky, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. Prisoners in restrictive housing cannot make social phone calls in Alabama and Illinois.
- <sup>428</sup> Those jurisdictions were Hawaii, Indiana (except no phone calls after lights out), and West Virginia.
- <sup>429</sup> Those jurisdictions were South Dakota (prisoners may make phone calls on their tablets during designated hours) and Washington (prisoners may only use the phone when in the yard).
- <sup>430</sup> Those jurisdictions were Connecticut, Idaho, Kentucky, Louisiana, Maine, Maryland, Missouri, Nebraska, New York, Rhode Island, South Carolina, Tennessee, Texas, Wisconsin, and Wyoming.
- <sup>431</sup> That jurisdiction was Texas.
- <sup>432</sup> Those jurisdictions were Hawaii, Indiana (except no phone calls after lights out), and West Virginia.
- <sup>433</sup> Those jurisdictions were Connecticut and Maryland.
- <sup>434</sup> Those jurisdictions were Connecticut, Georgia, Louisiana, Maine, Maryland, Minnesota, Nebraska, New York, Ohio, South Carolina, Tennessee, Texas, Wisconsin, and Wyoming.
- <sup>435</sup> That jurisdiction was Texas.
- <sup>436</sup> Those jurisdictions were Hawaii, Indiana (except no phone calls after lights out), and West Virginia.
- <sup>437</sup> Those jurisdictions were Arizona, Connecticut, Kansas, Louisiana, Minnesota, Montana, Nebraska, New York, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, and Wisconsin.

- <sup>438</sup> The jurisdictions that reported having this restriction were Louisiana, Massachusetts, Mississippi, New York, and Pennsylvania.
- <sup>439</sup> The jurisdictions that reported having this restriction were Connecticut and Washington.
- <sup>440</sup> The jurisdiction that reported having this restriction was Massachusetts.
- <sup>441</sup> Those jurisdictions were Massachusetts and Kentucky.
- <sup>442</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. (This excludes Colorado, Hawaii, North Dakota, and Vermont, who provided us with data, but who do not have restrictive housing as defined in this survey).
- <sup>443</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Georgia, Idaho, Indiana, Maine, Maryland, Massachusetts, Minnesota, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Washington, West Virginia, Wisconsin, and Wyoming. The jurisdictions in which prisoners in restrictive housing cannot send or receive physical or electronic mail are Illinois, Kansas, Kentucky, Mississippi, and South Carolina.
- <sup>444</sup> Those jurisdictions were Connecticut, Georgia, Idaho, Indiana, Louisiana, Maine, Maryland, Minnesota, Missouri, Montana, Nebraska, New York, Ohio, Oklahoma, Oregon, Rhode Island, Tennessee, Texas, Washington, Wisconsin, and Wyoming.
- <sup>445</sup> The jurisdiction that reported having this restriction was Alabama.
- <sup>446</sup> The jurisdiction that reported having this restriction was Arkansas.
- <sup>447</sup> The jurisdiction that reported having this restriction was West Virginia.
- <sup>448</sup> Those jurisdictions were Ohio, Louisiana, Minnesota, Missouri, Nebraska, Rhode Island, Texas, Wisconsin, and Wyoming. In Ohio and Wisconsin, email access was a privilege and varied by site. In Louisiana, Rhode Island, and Texas, all prisoners in restrictive housing were denied email access. In Minnesota and Nebraska, any electronic mail received by prisoners in restrictive housing was provided in hardcopy. In Missouri, electronic mail access depended on the availability of electronic tablets; otherwise, any electronic mail received by prisoners in restrictive housing was provided in hardcopy. In Wyoming, electronic mail access could be denied based on the reasons for placement in restrictive housing.
- <sup>449</sup> See, e.g., Colette Peters, Putting Staff First: Wellness As A Strategic Priority, NATIONAL INSTITUTE OF CORRECTIONS CONFERENCE (June 10, 2015), available at https://info.nicic.gov/virt/node/3.
- <sup>450</sup> These jurisdictions were Alabama, Colorado, Connecticut, Idaho, Kentucky, Mississippi, North Dakota, South Carolina, Texas, Vermont, Washington, West Virginia, and Wyoming.
- <sup>451</sup> This jurisdiction was Mississippi.
- <sup>452</sup> This jurisdiction was Colorado.
- <sup>453</sup> These jurisdictions were Alabama, Kentucky, and Vermont.
- <sup>454</sup> These jurisdictions were Arizona, Arkansas, Georgia, Hawaii, Indiana, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Missouri, Nebraska, New York, North Carolina, Ohio, Oregon, Pennsylvania, Rhode Island, Tennessee, and Wisconsin. North Carolina and Tennessee specified that all staff are trained to work in restrictive housing and therefore hold equal qualifications.
- <sup>455</sup> These jurisdictions were Alabama, Arizona, Arkansas, Colorado, Connecticut, Georgia, Kentucky, Maine, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Washington, and Wyoming.

- <sup>456</sup> This jurisdiction was Alabama.
- <sup>457</sup> This jurisdiction was Arizona.
- <sup>458</sup> These jurisdictions were Colorado, Kentucky, Massachusetts, Minnesota, Missouri, Pennsylvania, South Dakota, and Tennessee.
- <sup>459</sup> This jurisdiction was Massachusetts.
- <sup>460</sup> This jurisdiction was North Carolina.
- <sup>461</sup> This jurisdiction was Washington.
- <sup>462</sup> These jurisdictions were Hawaii, Idaho, Indiana, Maryland, Rhode Island, Vermont, West Virginia, and Wisconsin.
- <sup>463</sup> These jurisdictions were Arizona, Arkansas, Connecticut, Georgia, Hawaii, Idaho, Indiana, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.
- <sup>464</sup> This jurisdiction was South Dakota. South Dakota wrote, "officers on unit work 12hr shifts during the week and 10hr shifts on the weekends."
- <sup>465</sup> This jurisdiction was Oregon.
- 466 This jurisdiction was Alabama.
- <sup>467</sup> These jurisdictions were Alabama, Arizona, Colorado, Connecticut, Indiana, Kentucky, Minnesota, Mississippi, Oklahoma, Oregon, Pennsylvania, South Carolina, West Virginia, and Wisconsin.
- <sup>468</sup> This jurisdiction was South Carolina.
- <sup>469</sup> These jurisdictions were Georgia, Hawaii, Idaho, Louisiana, Maine, Maryland, Massachusetts, Missouri, New York, North Carolina, North Dakota, Ohio, Rhode Island, South Dakota, Texas, Vermont, Washington, and Wyoming.
- <sup>470</sup> These jurisdictions were Hawaii, Idaho, Massachusetts, and Ohio.
- <sup>471</sup> Arizona wrote, "There is a limit of 32 hours of overtime for all staff regardless of the type of unit." Arkansas wrote, "No overtime is allowed." Kentucky wrote, "Varies by institution—limit is 16 hours per day." Oklahoma wrote, "Not outlined in policy, but must rotate after a 12 hour shift." South Carolina wrote, "Staff in RHU or GP shall not work more than 16 hours in a day, work more than 72 hours in a 7 day period, or work more than 6 days in a row." Tennessee answered this question in the affirmative but did not provide further details. Wisconsin wrote, "Same as staff who work in general population—no more than 16 hours in a row."
- <sup>472</sup> These jurisdictions were Colorado, Connecticut, Georgia, Hawaii, Idaho, Indiana, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Pennsylvania, Rhode Island, South Dakota, Vermont, Washington, West Virginia, and Wyoming.
- <sup>473</sup> This jurisdiction was Ohio.
- <sup>474</sup> This jurisdiction was Connecticut.
- <sup>475</sup> These jurisdictions were Alabama, Colorado, Connecticut, Georgia, Hawaii, Idaho, Indiana, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Vermont, Washington, West Virginia, Wisconsin, and Wyoming.

- <sup>476</sup> Arizona wrote that in some situations restrictive housing staff "receive a high risk pay." Arkansas wrote, "All officers at the Maximum Security Units receive extra pay; and those assigned to the Varner Super Max Unit receive a higher amount." South Dakota wrote that restrictive housing staff receive "\$1 extra."
- <sup>477</sup> AMERICAN CORRECTIONAL ASSOCIATION, *Seeking Accreditation*, *available at* http://www.aca.org/ACA Prod IMIS/ACA Member/Standards and Accreditation/Seeking Accreditation Home.aspx
- <sup>478</sup> AMERICAN CORRECTIONAL ASSOCIATION, MANUAL OF ACCREDITATION POLICY & PROCEDURE 6, 9–10 (Mar. 15, 2017), *available at* http://www.aca.org/ACA\_Prod\_IMIS/docs/standards%20and%20accreditation/ALM-1-3\_15\_17-Final.pdf.
- <sup>479</sup> ACA 2016 RESTRICTIVE HOUSING STANDARDS. In 2018, the ACA Committee on Restrictive Housing released updated standards, *Restrictive Housing Expected Practices*, AMERICAN CORRECTIONAL ASSOCIATION (2018), *available at* http://www.aca.org/ACA\_Prod\_IMIS/ACA\_Member/Standards\_\_Accreditation/Standards/Restrictive\_Housing\_Committee/ACA\_Member/Standards\_and\_Accreditation/Restrictive\_Housing\_Committee. aspx?hkey=458418a3-8c6c-48bb-93e2-b1fcbca482a2. The survey continued to refer to the 2016 standards.
- <sup>480</sup> The ASCA-Liman Survey asked: "Has your jurisdiction reviewed its policies since then on restrictive housing?" "Does your jurisdiction rely on these standards to make policies?" We also asked about whether jurisdictions had implemented the ACA Standards regarding juveniles, pregnant women, and individuals diagnosed with serious mental illness and regarding the release of prisoners from restrictive housing directly into the community. We further sought to learn whether any other policies had been "revised in light of the 2016 ACA restrictive housing standards."
- <sup>481</sup> Those jurisdictions were Alabama, Arkansas, Colorado, Delaware, Georgia, Idaho, Indiana, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Vermont, Washington, Wisconsin, and Wyoming.
- <sup>482</sup> ASCA-LIMAN REFORMING RESTRICTIVE HOUSING 2018, at 64.
- <sup>483</sup> The 34 jurisdictions that reported that they reviewed their policies since the release of the ACA Standards were Alabama, Arizona, Arkansas, Colorado, Delaware, Georgia, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Dakota, Tennessee, Texas, Vermont, Washington, Wisconsin, and Wyoming. Both Connecticut and Hawaii responded that they had not revised their policies since 2016. Illinois elaborated that it conducted a full review in February 2016 and "[c]ontinually reviewed and updated as needed."
- <sup>484</sup> Vermont provided an extensive description of its policy-making process:
  - The DOC's administrative segregation is informed by national best practice standards and evidence-based research. To meet these standards, the DOC's administrative segregation adheres to the following:
  - a. To provide a medical and mental health screening to all inmates placed in administrative segregation;
  - b. To conduct real-time reviews of inmates in administrative segregation, including evaluating their conditions of confinement and their continued appropriateness for placement in segregation;
  - c. To conduct multi-disciplinary reviews of inmates in administrative segregation at both the facility and central level:
  - d. To ensure that administrative segregation is never used for punishment;
  - e. To promote the least restrictive conditions of confinement that supports the safety and security needs of the inmate and the facility; and
  - f. To ensure that each inmate placed in administrative segregation has a segregation plan created. This plan shall include goals to mitigate the risk that resulted in segregation placement, outline obligations and expectations for the inmate, and provide a road map to move the inmate into a less restrictive housing environment when appropriate.
  - g. Recognizes the potential for elevated negative impacts of segregation on all individuals, particularly vulnerable populations and provides additional procedural steps for inmates who are designated seriously functionally impaired (SFI), pregnant and postpartum women, and inmates under the age of twenty-five.

- <sup>485</sup> That jurisdiction was Delaware.
- <sup>486</sup> That jurisdiction was Wisconsin.
- <sup>487</sup> That jurisdiction was Idaho.
- <sup>488</sup> That jurisdiction was Ohio.
- <sup>489</sup> That jurisdiction was Wyoming.
- <sup>490</sup> That jurisdiction was Kentucky.
- <sup>491</sup> That jurisdiction was Mississippi.
- <sup>492</sup> Those jurisdictions were Arizona, Connecticut, Hawaii, Kansas, Minnesota, Oregon, and Texas.
- <sup>493</sup> That jurisdiction was Minnesota.
- <sup>494</sup> That jurisdiction was Oregon.
- <sup>495</sup> ACA Standard 4-RH-0030, ACA 2016 RESTRICTIVE HOUSING STANDARDS 35.
- <sup>496</sup> Those jurisdictions were Arkansas, Colorado, Connecticut, Delaware, Idaho, Indiana, Louisiana, Maine, Massachusetts, Minnesota, Mississippi, New York, North Dakota, Ohio, Rhode Island, South Dakota, Tennessee, Texas, and Washington.
- <sup>497</sup> Those jurisdictions were Colorado, Connecticut, Louisiana and Washington.
- <sup>498</sup> Those jurisdictions were Georgia, Pennsylvania, Vermont, and Wyoming. Alabama, Arizona, Hawaii, Kansas, Maryland, Missouri, Oklahoma, South Carolina, and Wisconsin reported that they had not implemented this Standard.
- <sup>499</sup> Massachusetts indicated that with its most recent policy update in March 2019,

An inmate with an anticipated release date (release from the custody of the Department) of less than 120 days shall not be held in Restrictive Housing unless: (a) the placement in Restrictive Housing is limited to not more than five days; or (b) the inmate poses a substantial and immediate threat. When an inmate in Restrictive Housing is expected to be released to the community within 40 days, any continued retention of the inmate in Restrictive Housing must be authorized by the Deputy Commissioner of Prisons or designee. When the inmate is released to the community directly from Restrictive Housing, the release shall be documented in an incident report indicating the approving authority for the continued placement in Restrictive Housing, the detailed release plan, and the required notifications provided in accordance with 103 DOC 493: Reentry Policy, 103DOC 407: Victim Service Unit, and 103 DOC 404: Inmate Release Policy. The requirements of this paragraph do not apply to immediate court-ordered releases.

Minnesota indicated that it complied with the Standard "[a]bsent a compelling reason" to the contrary. Mississippi reported that it "seeks to transition offenders from restrictive housing through a step down/less restrictive housing assignment prior to releasing to the community." Ohio explained that it perceived ambiguity:

There is a lack of clarity in the standard, wherein it says Extended Restrictive Housing in the opening and then switches to Restrictive Housing. Changes to the standard indicating it was intended for ERH only were approved at the ACA Congress of Corrections in early 2019. Standard is 5-4B-00305-4B-0030. Written policy, procedure and practice require that the agency will attempt to ensure offenders are not released directly into the community from Extended Restrictive Housing. In the event that the release of an offender directly from Extended Restrictive Housing into the community is imminent, the facility will document the justification and receive agency level or designee approval (does not apply to immediate court order release). In addition to required release procedures (see 5-4446) the following must be taken at a minimum: development of a release plan

that is tailored to specific needs of the offender (does not apply to immediate court order release), notification of release to state and local law enforcement, notify releasing offender of applicable community resources, victim notification (if applicable/there is a victim).

Rhode Island indicated reported,

[E]very attempt is made to step an inmate down from Administrative Confinement if they meet the requirements; step down to Transitional Confinement is always considered before release and done if possible. 2 two particular facilities with the use of Administrative Restrictive Status and [] Transitional Confinement, in most cases offenders do not expire their sentence from Restrictive Housing. Transitional Confinement (TC) gives offenders the opportunity to be transferred from higher levels facilities to lower level to assist with acclimating back to general population.

South Dakota indicated that it makes "all attempts to not release an inmate from RH directly to the community." Tennessee initiated a pilot step-down program in December 2018.

<sup>500</sup> ACA Standard 4-RH-0033, ACA 2016 RESTRICTIVE HOUSING STANDARDS at 9.

<sup>501</sup> ACA Standard 4-RH-0031, id. at 36.

<sup>502</sup> *Id*. at 3.

<sup>503</sup> Thirty-three jurisdictions responded to this question. Thirteen jurisdictions reported that they had implemented the Standard after the ACA Standards were issued. Those jurisdictions were Alabama, Arkansas, Delaware, Hawaii, Indiana, Kentucky, Maine, Massachusetts, North Dakota, Ohio, Rhode Island, South Dakota, and Wyoming. Ohio also noted its disagreement with the survey's interpretation of the Standard. Kentucky clarified that its "existing practice was to have a representative of the warden and a representative of the Mental Health Authority consult prior to making a housing assignment for an inmate diagnosed as seriously mentally ill. This is being reviewed for compliance with ACA 5th edition." Five jurisdictions indicated that it was their policy before the ACA Standards. Those jurisdictions were Colorado, Georgia, New York, Oregon, and Texas. Among the jurisdictions that answered that they had not implemented this standard, Connecticut reported that "[a]ll inmates with mental health score of a 4-5 are continually monitored by mental health providers." Wisconsin elaborated on its "no" answer: "In the near future, though, we are likely to change policy and limit RH dispositions to 30 days for most offenses for inmates with serious mental illness."

<sup>504</sup> Those jurisdictions were Mississippi, North Carolina, Pennsylvania, and Tennessee. Mississippi reported that "[t]here is one offender in this category whose file is reviewed every 90 days per policy and SOP." North Carolina reported using extended restrictive housing as a safety measure when no alternative was available. It reported that it considered placement in a less-restrictive therapeutic diversion unit (TDU). It also reported taking into account whether confinement will have a "detrimental impact" on individuals with mental illness and that a "multidisciplinary team" reviewed placements of this population in restrictive housing every 30 days "to determine if continuation of RH is indicated based on safety and security factors." Pennsylvania stated that "[p]rocedures have changed to meet the standards but policy is pending approval from the Department's Legal Office." Tennessee explained that "[f]ormal policy for this mandate is in development." We should note that it is not clear if jurisdictions used the ACA definition of serious mental illness or their own definitions, which varied widely. *See* Appendix C. The data described in Section II of this report (discussing placement of those with serious mental illness in restrictive housing) relied on each jurisdiction's own definition of serious mental illness.

<sup>505</sup> ACA Standard 4-RH-00004, ACA 2016 RESTRICTIVE HOUSING STANDARDS 9.

<sup>506</sup> Fifteen of these 23 jurisdictions implemented the policy after the ACA Standards were issued or did not indicate a date for commencement of the policy. Those jurisdictions were Alabama, Arkansas, Idaho, Indiana, Kentucky, Maine, Minnesota, Mississippi, Montana, North Carolina, Ohio, Rhode Island, South Dakota, Wisconsin, and Wyoming. Idaho does not place individuals under 18 in restrictive housing for more than 29 days. It explained, "We generally don't get those offenders but when we have, we have separated (non-restrictive housing) from the general population until they turn 18. We then evaluate them for the best housing based on their need and maturity level." Kentucky and South Dakota do not house individuals under 18 in their jurisdictions. North Carolina entirely eliminated the use of restricted housing for individuals under 18 in 2016. Ohio indicated its disagreement with the survey's interpretation of the Standard. Another eight jurisdictions stated that this was their policy before 2016. Those jurisdictions were Colorado, Connecticut, Delaware, Georgia, Maryland, New York, Texas, and Vermont.

<sup>507</sup> Those jurisdictions were Louisiana, Oklahoma, Pennsylvania, Tennessee, and Washington. Louisiana did not specify its exceptions. Oklahoma reported that it had "[d]esignated specific facility and housing unit assignments for those under 18 that are consistent with PREA standards." Pennsylvania explained, "Procedures have changed to meet the standards but policy is pending approval from the Department's Legal Office." Tennessee noted that its "[f]ormal written policy is not yet written and approved." Eight jurisdictions responded that they had not implemented this Standard. Those jurisdictions were Arizona, Hawaii, Kansas, Massachusetts, Missouri, North Dakota, Oregon, and South Carolina.

<sup>509</sup> ACA 2016 RESTRICTIVE HOUSING STANDARDS 3. The survey results regarding the placement of pregnant prisoners in restrictive housing are discussed in Section II of this Report.

<sup>510</sup> Twelve jurisdictions said they had implemented the policy after the ACA Standards were issued or did not indicate a date for commencement of the policy. Those jurisdictions were Arkansas, Idaho, Indiana, Massachusetts, Minnesota, Mississippi, North Carolina, Ohio, Oregon, Rhode Island, Tennessee, and Wyoming. Ohio indicated its disagreement with the survey's interpretation of the Standard. Ten jurisdictions reported that this was their policy before 2016. Those jurisdictions were Colorado, Delaware, Georgia, Maine, Maryland, New York, Oklahoma, Texas, Vermont, and Washington.

These jurisdictions were Louisiana, which did not specify its exceptions, and Pennsylvania, which explained that the Standard "is not in official policy as of yet." Six jurisdictions indicated that they had not implemented this Standard. Those jurisdictions were Connecticut, Hawaii, Kansas, Missouri, South Carolina, and Wisconsin. Connecticut clarified that "[a]lthough it is not in this policy, the CTDOC would carefully review any placement of a pregnant female on a restrictive status and would explore other options." Similarly, Idaho indicated that it had "not adopted that requirement but ha[d] not had a pregnant female in long-term segregation." Mississippi confirmed that it "does not place pregnant female offenders in long term segregation for more than 29 continuous days." Tennessee also reported that "[p]regnant females are not housed in restrictive housing[,]" and Wyoming also does not place pregnant women "in restrictive housing unless no other alternative is available for her safety or the safety of the institution."

<sup>512</sup> Those jurisdictions were Arkansas, Colorado, Delaware, Idaho, Kentucky, Massachusetts, Minnesota, North Carolina, Oregon, Tennessee, Texas, and Wisconsin. In addition, Oklahoma noted that it had not made other changes in response to the ACA Standards, but that "OP-090601 is specific to Max inmates Step Down Program. 9-18-2017 published, revised in 2019." Arkansas listed a number of policies: "Administrative Directive 2017-02 Restrictive Housing, Administrative Directive 2017-03 Step Down Program, Administrative Directive 2017-31 Restrictive Housing, Administrative Directive 2018-19 Protective Custody, Administrative Directive 2018-34 Inmate Disciplinary Manual, Administrative Directive 2019-27 Punitive Housing/Restriction, Administrative Directive 2019-28 Restrictive Housing, Administrative Directive 2019-28 Restrictive Housing In-Cell Recreation Handout." Colorado indicated that it had not made changes since answering the 2017-2018 survey. At that time it wrote:

The following policies were modified: 100-19 Communication with Offenders 100-40 Prison Rape Elimination Procedure300-01 Offender Visiting Program 500-02 Library Services 550-11 Offender Release 600-01 Offender Classification 600-09 Management of Close Custody Offenders 700-03 Mental Health Scope of Service 700-29 Mental Health Interventions 750-01 Legal Access 850-10 Emergency Notification850-12 Telephone Regulations for Offenders 850-07 Offender Reception and Orientation 1000-01 Recreation and Hobby Work 1350-02 Victim Notification Program 1550-02 Food Service Menu Planning and Service.

## Delaware explained,

Our jurisdiction put in policy that women are allowed sanitary products while in designated housing unless it poses a security threat or threat to the inmate. We also put into policy that inmates are offered 17.5 hour of out-of-cell time per week in addition to therapeutic structured time, effectively eliminating restrictive housing in Delaware by federal definition.

Idaho reported its policy of limiting short-term segregation to 15 days. Kentucky added, "Use of restrictive housing for transgender prisoners, pregnant prisoners, step-down programs. Many items were taking place in practice; policy is being updated to reflect this." Massachusetts had identified recommendations "during the PDCU review of the new ACA 5th edition in regards to SMI inmates and revisions remain ongoing." Minnesota reported changes regarding

<sup>&</sup>lt;sup>508</sup> That jurisdiction was Washington.

"Mental health, Health Services, Offender Discipline, Administrative Segregation, Restrictive Housing Step-Down management program, pre-hearing detention, administrative control status, restrictive housing management." North Carolina reported creating its TDU/RDU housing. Tennessee was "in the process of implementation of ACA 5th Edition Performance Based Standards." Texas revised its Restrictive Housing Plan in August 2019.

Oregon and Wisconsin provided comprehensive reports of the changes they made. Oregon wrote,

Since the ACA revised restrictive housing standards, we have conducted reviews of all special housings throughout the state and have made the following changes: 1. Reduced the number of segregation eligible infractions in rule. 2. Begun to limit the use of prehearing disciplinary segregation to the adults in custody who pose a serious threat to safety or security only. 3. Ensure that disciplinary hearings are held within 10 days or sooner. 4. Removed "For the good of order" from the rule as a reason for temporary disciplinary sanction. 5. Enhanced supports, structured activities and programming in general population to keep people from going to DSU, particularly high risk groups. 6. Developed a risk assessment tool (RASP) in conjunction with Dr. Ryan Labrecque at Central Florida University designed to predict those adults in custody who are likely to go to segregation and/or commit violent rule violations. 7. Examined case management practices to ensure that adults in custody are receiving appropriate levels of contact and supervision from case managers. 8. Eliminated loss of segregation yard time as a sanction in disciplinary segregation. 9. Discontinued use of the Adjustment to Final Order form a grid as a tool to initiate reviews and time reductions from segregation. Reviews are now initiated by staff and/or adults in custody when correctional program and/or behavior objectives have been achieved. 10. OMHP's are now conducting in-person assessments within 24 hours of a person's placement into segregation. 11. Move adults in custody to the Intensive Management Unit upon approval of status, as opposed to making them finish their disciplinary segregation time first. 12. Adults in custody are now reviewed at 30 day intervals in the Intensive Management Unit. 13. Expanded "blue rooms" (de-escalation rooms) to most restrictive housing units. 14. Implemented a structured re-entry/step-down unit for adults in custody transitioning out of long-term segregation (October 2019). 15. Women who are pregnant, post-partum or who have recently had a miscarriage are diverted from segregated housing. 16. Increased training for staff on responding to gender differences and understanding gender identity. 17. Discontinued practice of automatic segregation placement for returns from the community or from county, transitional leaves. 18. Reduced restrictive housing beds (converted 72 bed Intensive Management Unit to 72 bed incentive housing for general population adults in custody). IMU went from 240 beds to 168 beds. 19. Began the use of "resource teams" at two largest institutions. These teams work to increase out-of-cell time and socialization activities for adults in custody who have been in longer term restrictive housing to assist with the transition to general population or to the community.

Wisconsin explained that since 2016, it has made a number of changes:

We shortened base penalties for most offenses and required dispositions over 120 days to obtain Deputy Warden approval and central office review. Policies specifically encouraged alternative sanctions, providing for the least restrictive setting and penalties that were in proportion to the behavior. Security Director consults with psychology staff prior to approving RH placement for inmates with serious mental illness. Required written Behavior Management Plans for inmates with Serious Mental Illness who had a disposition over 60 days. Further defined and standardized our step programs, positive incentives, RH review process and allowed property.

<sup>&</sup>lt;sup>513</sup> Those jurisdictions were Arizona, Connecticut, Delaware, Maine, Massachusetts, Montana, New York, and North Dakota. Colorado stated that "CDOC's Office of Planning and Analysis has not been tasked with studying any effects of Restrictive Housing policy changes." Pennsylvania responded, "Informal reviews and analysis have been conducted, but nothing formal or polished." Texas stated that "TDCJ remains committed to on-going assessments to ensure the best correctional practices are used; however, no study has been conducted at this time."

<sup>&</sup>lt;sup>514</sup> ASCA-LIMAN REFORMING RESTRICTIVE HOUSING 2018, at 65.

<sup>&</sup>lt;sup>515</sup> Those jurisdictions were Arizona, Connecticut, and Maine.

<sup>&</sup>lt;sup>516</sup> Those jurisdictions were Connecticut, Maine, and Montana.

- <sup>517</sup> Those jurisdictions were Arizona and Montana.
- <sup>518</sup> Those jurisdictions were Arizona, Connecticut, and Montana.
- <sup>519</sup> Those jurisdictions were Arizona, Connecticut, and Montana.
- <sup>520</sup> Those jurisdictions were Montana and New York.
- 521 Those jurisdictions were Connecticut, Montana, New York, and North Dakota.
- <sup>522</sup> That jurisdiction was Delaware.
- 523 That jurisdiction was Massachusetts.
- 524 That jurisdiction was New York.
- <sup>525</sup> Those jurisdictions were Alabama, Arizona, Arkansas, Connecticut, Maine, Massachusetts, Minnesota, Missouri, Montana, Oregon, Pennsylvania, Vermont, Washington, and Wyoming. The four jurisdictions that responded they were not undertaking studies were Colorado, Oklahoma, Texas, and Wisconsin. Colorado reported that "CDOC's Office of Planning and Analysis has not been tasked with studying any effects of Restrictive Housing policy changes." Oklahoma answered, "After NIC Assessment." Texas stated that "TDCJ remains committed to on-going assessments to ensure the best correctional practices are used to manage the population of offenders assigned to restrictive housing; however, no changes to policy are planned at this time." Wisconsin explained, "All of these topics are of interest, but no specific plans/proposals are currently in place to research these topics."
- <sup>526</sup> Those jurisdictions were Alabama, Arizona, Connecticut, Massachusetts, Missouri, Montana, Vermont, and Wyoming.
- <sup>527</sup> Those jurisdictions were Arizona, Connecticut, Massachusetts, Missouri, Montana, Vermont, and Wyoming.
- <sup>528</sup> Those jurisdictions were Arizona, Massachusetts, Missouri, Montana, Vermont, and Wyoming.
- <sup>529</sup> Those jurisdictions were Arizona, Maine, Massachusetts, Missouri, Vermont, and Wyoming.
- <sup>530</sup> Those jurisdictions were Alabama, Arizona, Connecticut, Massachusetts, Minnesota, Missouri, Montana, Pennsylvania, Vermont, and Wyoming.
- <sup>531</sup> Those jurisdictions were Arkansas, Massachusetts, Missouri, Montana, Pennsylvania, Vermont, and Wyoming.
- <sup>532</sup> Those jurisdictions were Arizona, Arkansas, Massachusetts, Missouri, Montana, Pennsylvania, and Wyoming.
- <sup>533</sup> Alabama specified that it was developing both "a Correctional work site wellness program" and "a Post-Crisis Step Down Unit for inmates being discharged to ensure that they are not placed in restrictive housing and to help them better transition from crisis." Massachusetts wrote,

Incidents of prisoner self-harm—For inmates in restrictive housing incidents of self-harm is being tracked and reported on a quarterly basis. Incidents of use of force—Incidents of use of force is included as an outcome measure in the implementation of a new unit for emerging adult fathers and is also being studied in the context of restrictive housing. Prisoner morale—We are developing an inmate survey to assess morale and climate, as well as impact of staff and inmate mentor training regarding changes to culture of corrections. Staff morale—We are developing an inmate survey to assess morale and climate, as well as impact of staff and inmate mentor training regarding changes to culture of corrections. Staff well-being and/or safety—In addition to above mentioned statement(s), partnering with Northeastern University on a study of correctional staff suicide and wellbeing. Prisoner success in the general population, programs, or other activities—Building the capacity to research prisoner programming and services in relation to prison behavior and climate, as well as existing post-release measures, such as recidivism. Prisoner success in returning to communities—See above statement.

Oregon noted, "We are currently conducting research with Dr. Ryan Labreque of Central Florida University into the effectiveness of our Intensive Management Unit Step-Down Program." Vermont responded, "The new restrictive housing policy is supported by a shift from a paper process to an electronic process. Restrictive housing data will be tracked in the offender management system. This will allow us to conduct more analysis on long term trends related to prisoner self-harm, reasons for stays, lengths of stay, and linking stays in segregation to other outcomes." Washington explained, "WADOC is currently developing the scope of a research project around restrictive housing. Some or all of the above may be considered." Wyoming elaborated, "We are gathering data on the incidents of violence, use of force, inmate success after discharge from restrictive housing and inmate success after discharge from prison. At some point, we would like to conduct an assessment of inmate and staff morale related to restrictive housing implementation."

- <sup>534</sup> See Solitary Confinement: Effects, Practices, and Pathways to Reform (Jules Lobel and Peter Scharff Smith eds., 2020) [hereinafter Solitary Confinement].
- <sup>535</sup> See, e,g., Fatos Kaba, Andrea Lewis, Sarah Glowa-Kollisch, James Hadler, David Lee, Howard Alper, Daniel Selling, Ross MacDonald, Angela Solimo, Amanda Parsons, & Homer Venters, Solitary Confinement and Risk of Self-Harm Among Jail Inmates, 104 Am. J. Pub. Health 442, 445 (2014); Craig Haney, The Psychological Effects of Solitary Confinement: A Systematic Critique, 47 CRIME & JUST., 365, 371–75 (2018); Craig Haney, Restricting the Use of Solitary Confinement, 1 Ann. Rev. Criminology 285, 297-298 (2018).
- <sup>536</sup> See, e.g., Albert Woodfox, SOLITARY (2019).
- <sup>537</sup> See, e.g., Cyrus Ahalt, Colette S. Peters, Heidi Steward & Brie A. Williams, Transforming Prison Culture to Improve Correctional Staff Wellness and Outcomes for Adults in Custody "The Oregon Way": A Partnership Between the Oregon Department of Corrections and the University of California's Correctional Culture Change Program, 8 ADV. CORRECTIONS J. 130 (2019).
- <sup>538</sup> An analysis of the research challenges comes from Brie Williams & Cyrus Ahalt, *First Do No Harm: Applying the Harm-to-Benefits Patient Safety Framework to Solitary Confinement, in Solitary Confinement, at 153, 158.*
- <sup>539</sup> See Robert D. Morgan, Ryan M. Labrecque, Paul Gendreau, Taylor R. Ramler, and Brieann Olafsson, *Questioning Solitary Confinement: Is Administrative Segregation as Bad as Alleged?*, CORRECTIONS TODAY, Sept/Oct. 2017, at 18, 19
- 540 One summary concluded that solitary confinement caused "a wide range of harmful psychological effects, including increases in negative attitudes and affect, insomnia, anxiety, panic, withdrawal, hypersensitivity, ruminations, cognitive dysfunction, hallucinations, loss of control, aggression, rage, paranoia, hopelessness, lethargy, depression, emotional breakdowns, self-mutilation, and suicidal impulses." *See Istanbul Statement of the Use and Effect of Solitary Confinement*, adopted Dec. 9, 2007, appended to Manfred Nowak, Report of the UN Special Rapporteur on Torture of 28 July 2008, U.N. Doc A/63/175, 18 and Annex (22). *See also* Louise Hawkley, *Social Isolation, Loneliness, and Health, in* Solitary Confinement at 185-198; Huda Akil, *The Brain in Isolation*, in Solitary Confinement at 206–10. Animal studies have provided evidence of the physiological effects of isolation. *See* Michael J. Zigmond & Richard Jay Smeyne, *Use of Animals to Study the Neurobiological Effects of Isolation, in* Solitary Confinement at 221–236.
- <sup>541</sup> See David M. Shapiro, Solitary Confinement in the Young Republic, 133 HARV. L. REV. 542 (2019). See also Ashley T. Rubin & Keramet Reiter, Continuity in the Face of Penal Innovation: Revisiting the History of American Solitary Confinement, 43 L. & Soc. Inquiry 1604, 1605, 1613–18 (2018).
- <sup>542</sup> Ryan T. Sakoda & Jessica T. Simes, *Solitary Confinement and the U.S. Prison Boom*, CRIM. JUST. POL'Y REV. (Dec. 29, 2019).
- <sup>543</sup> *Id.* at 14–16.
- <sup>544</sup> *Id*.
- David Cloud, Cyrus Ahalt, Dallas Augustine, David Sears, & Brie Williams, *Medical Isolation and Solitary Confinement: Balancing Health and Humanity in US Jails and Prisons During COVID-19*. J. GEN. INTERN. MED. (2020). https://doi.org/10.1007/s11606-020-05968-y; David Cloud, JD, MPH, Dallas Augustine, MA, Cyrus Ahalt, MPP, & Brie Williams, MD, MS, *The Ethical Use of Medical Isolation—Not Solitary Confinement—to Reduce COVID-19 Transmission in Correctional Settings* (April 9, 2020), https://amend.us/wp-content/uploads/2020/04/Medical-Isolation-

vs-Solitary\_Amend.pdf; AMEND, COVID-19 in Correctional Facilities: Medical Isolation, https://amend.us/wp-content/uploads/2020/04/Medical-Isolation-vs-Solitary Amend.pdf.

<sup>546</sup> Information about pending and enacted legislation was drawn from our own research and other sources, including the ACLU Stop Solitary Campaign and the Vera Institute of Justice. Detailed information regarding legislation enacted or pending as of July 2019 can be found on the Liman Center website at www.law.yale.edu/liman.

The states in which legislation has been introduced were Alabama, Arizona, Arkansas, California, Colorado, Florida, Georgia, Hawaii, Illinois, Kentucky, Louisiana, Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, New Jersey, New Mexico, New York, Ohio, Oregon, Pennsylvania, South Carolina, Tennessee, Texas, Virginia, Washington, and Wisconsin. Specific pending and enacted laws are cited, *infra* notes 13 and 14. Bills regarding restrictive housing proposed between October 2018 and June 2020 that failed include: Alabama House Resolution 90, House Joint Resolution 93, and House Joint Resolution 92, Alabama Legislature, 2020 Session (to recognize the injustice suffered by Anthony Ray Hinton); Florida House Bill 165, Senate Bill 228, and House Bill 347, 2020 Florida Legislature (to prohibit solitary confinement for youth under the age of eighteen); Florida Senate Bill 762, 2020 Florida Legislature (to prohibit solitary confinement and limit restrictive housing of those with serious medical needs); Illinois House Bill 4898, One Hundred and First Illinois General Assembly, 2020 (to prohibit solitary confinement of youth under the age of 21); Illinois House Bill 0892, One Hundred and First Illinois General Assembly, 2020 (to limit solitary confinement to maximum 10 consecutive days for all state inmates); Kentucky House Bill 147, 2020 Kentucky Legislature (to prohibit solitary confinement of youth, except to prevent imminent and significant harm); Maryland House Bill 0742, Maryland General Assembly, 2020 Session (to limit the use of solitary confinement for people with mental illnesses); Mississippi Senate Bill 2743, Mississippi Legislature, 2020 Session (to establish an ombudsman for the Department of Corrections); Oregon House Bill 3186, Seventy Ninth Oregon Legislature, 2019 (to prohibit solitary confinement beyond 15 consecutive days); South Carolina Senate Bill 1018, One Hundred and Twenty Third South Carolina General Assembly, Second Session (to end solitary confinement of children under the age of 18); Tennessee House Bill 1240, One Hundred and Eleventh Tennessee General Assembly, 2020 (to prohibit solitary confinement of pregnant people and for 8 weeks postpartum); Wisconsin Assembly Bill 398, Wisconsin Legislature, 2019-2020 Session (to end solitary confinement for pregnant prisoners); Wisconsin Assembly Bill 825, Wisconsin Legislature, 2019-2020 Session (to require mental health evaluation for all prisoners prior to placement in solitary confinement, and to limit solitary confinement of those with serious mental illness to maximum 10 consecutive days).

<sup>547</sup>The enacted bills include U.S. Senate Bill 756, One Hundred and Fifteenth U.S. Congress, Second Session (enacted December 2018)); Arkansas House Bill 1755, Ninety Second Arkansas General Assembly, 2019 Session (enacted April 2019); Colorado Senate Bill 20-007, Seventy Second Assembly, 2020 Session (awaiting Governor's signature); Florida House Bill 1259, 2020 Legislative Session (enacted June 2020); Georgia House Bill 345, 2019-2020 Georgia General Assembly, Regular Session (enacted May 2019); Louisiana House Bill 344, Louisiana State Legislature, 2020 Session (enacted June 2020); Maryland Senate Bill 809, Maryland General Assembly, 2019 Session (enacted April 2019); Maryland House Bill 1001, Maryland General Assembly, 2019 Session (enacted May 2019); Minnesota Senate File 8, Ninety First Minnesota Legislature, 1st Special Session 2019-2020 (enacted May 2019); Montana House Bill 763, Sixty Sixth Montana Legislature, 2019 Regular Session (enacted May 2019); Nebraska Legislative Bill 230, 2019-2020 Nebraska Unicameral Legislature (enacted February 2020); New Jersey Assembly Bill 3979, New Jersey Legislature 2018-2019 Session, Second Session (enacted January 2020); New Jersey Assembly Bill 314, New Jersey Legislature 2018-2019 Session, Second Session (enacted July 2019); New Jersey Assembly Bill 3979, Two Hundred and Eighteenth New Jersey Legislature, 2018-2019 Session (enacted January 2020); New Mexico House Bill 364, 2019 New Mexico Legislature, Regular Session (enacted April 2019); South Carolina House Bill 3967, One Hundred and Twenty Third Legislative Session (enacted May 2020); Texas House Bill 650, Eighty Sixth Texas Legislature, 2019-2020 (enacted May 2019); Virginia House Bill 1648, 2020 Virginia Legislative Session (enacted March 2020); Virginia Senate Bill 1777, House Bill 1642, 2020 Virginia Legislative Session (enacted March 2019); Washington Senate Bill 6112, House Bill 2277, 2019-2020 Washington State Legislature (enacted April 2020).

<sup>548</sup> House Bill \_\_\_\_, One Hundred and Sixteenth United States Congress, Second Session (prohibiting placement of women in solitary confinement in their third trimester, introduced July 22, 2020); House Resolution 1893, Senate Bill 697, One Hundred and Sixteenth United States Congress, Second Session (to provide grant money to states that adopt laws prohibiting solitary confinement); Senate Bill 719, One Hundred and Sixteenth Congress, Second Session (to prohibit placement of those with serious mental illness and intellectual or physical disabilities in solitary confinement, to prohibit placement of LGBTQ and HIV-positive inmates in solitary confinement solely because of their status, to place caps on the length of solitary confinement, and to prohibit placement of any inmate in solitary confinement who is to be released within 180 days); Arizona House Bill 2894, Fifty-fourth Arizona Legislature, Second Session (to collect and analyze data on solitary confinement); Arizona Senate Bill 1374, Fifty-fourth Legislature, Second Session (to prohibit the use of

solitary confinement for people known to be pregnant or prisoners who are postpartum); California Assembly Bill 732, California Legislature 2019-2020 Regular Session, 2019 (to prohibit the use of solitary confinement for pregnant prisoners); Hawai'i Senate Bill 2520, Thirtieth Hawai'i Legislature, 2020 (to limit administrative segregation to 14 consecutive days maximum within a 30-day period); Hawai'i Senate Concurrent Resolution 161, Thirtieth Hawai'i Legislature, 2020 (to require annual reports to Legislature and Governor with data on solitary confinement, to recommend against isolation for vulnerable populations, including youth, persons with disabilities, pregnant persons, and LGBTQ persons); Hawai'i House Bill 1788, Thirtieth Hawai'i Legislature, 2020 (to set a maximum length of stay in isolation at three hours for youth); Massachusetts Senate Bill 1379, House Bill 2047, One Hundred and Ninety First General Court of the Commonwealth of Massachusetts, 2019 (to expand visitation rights for prisoners in restrictive housing to be the same as for those in the general population); Massachusetts House Bill 1486, Massachusetts Senate Bill 940, One Hundred and Ninety First General Court of the Commonwealth of Massachusetts, 2019 (to prohibit the use of restrictive housing for adults aged 18-24, except in cases of danger to others); Massachusetts House Bill 1539, One Hundred and Ninety First General Court of the Commonwealth of Massachusetts, 2019 (to limit restrictive housing for those under the age of 21 to 15 consecutive days for disciplinary infractions and 48 hours for those who pose an immediate danger); Massachusetts House Bill 2142, One Hundred and Ninety First General Court of the Commonwealth of Massachusetts, 2019 (to create a Corrections Oversight Commission that would submit recommendations related to solitary confinement); Massachusetts Senate Bill 905, House Bill 1341, One Hundred and Ninety First General Court of the Commonwealth of Massachusetts, 2019 (to increase the reporting frequency and breadth of data collected on restrictive housing, including data related to LGBTQ prisoners in restrictive housing); Massachusetts Senate Bill 1362, House Bill 2087, One Hundred and Ninety First General Court of the Commonwealth of Massachusetts, 2019 (to require regular reports on the number of incidents of force used in restrictive housing); Nebraska Legislative Bill 786, Nebraska Legislature, 2020 Session (to require screening for those in solitary confinement for mental illness); New York Assembly Bill 4373, New York Senate Bill 4842, 2019-2020 New York State Assembly, 2020 Regular Session (to create a temporary state commission to study solitary confinement practices); New York Senate Bill 1623, New York Assembly Bill 2500, 2019-2020 New York State Assembly, 2020 Regular Session (to prohibit the use of solitary confinement for those under the age of 21 and those who are pregnant, and to cap solitary confinement for all prisoners at 15 consecutive days); New York Senate Bill 787, 2019-2020 New York State Assembly, 2020 Regular Session (to prohibit restrictive housing except in cases of highly dangerous or serious escape-related behavior, to limit restrictive housing to 30 continuous days maximum except in cases of extreme violence, to require diversion of those with serious mental illnesses from restrictive housing to residential health treatment units); New York Senate Bill 1696, Assembly Bill 5272, 2019-2020 New York State Assembly, 2020 (to prohibit punitive isolation, to provide inmates under the age of 21 in restrictive housing with four hours of out-of-cell programming each day); Ohio Senate Bill 18, One Hundred and Thirty Third Ohio General Assembly, 2020 (to prohibit solitary confinement for pregnant prisoners in the third trimester, during labor/delivery, and in postpartum recovery); Pennsylvania House Bill 497, 2019-2020 Pennsylvania General Assembly, 2020 (to prohibit solitary confinement for pregnant prisoners, inmates under 21 and over 70, and LGBTQ individuals; to cap solitary confinement at 15 consecutive days maximum for all inmates).

```
<sup>549</sup> See ASCA-LIMAN REFORMING RESTRICTIVE HOUSING 2018, at 87.
```

<sup>&</sup>lt;sup>550</sup> A 314, S 3261, 2018-2019 Leg., Reg. Sess. (N.J. 2019).

<sup>&</sup>lt;sup>551</sup> Circumstances include a temporary, facility-wide, emergency lockdown, a mental health emergency requiring "medical isolation," and a request by the individual for protective custody. A 314, S 3261, 2018-2019 Leg., Reg. Sess. (N.J. 2019). C.30:4-82.8.

<sup>&</sup>lt;sup>552</sup> *Id*.

<sup>&</sup>lt;sup>553</sup> See New Mexico House Bill 364, 2019 New Mexico Legislature, Regular Session (enacted April 2019).

<sup>&</sup>lt;sup>554</sup> See id. § 3(A)-(B).

<sup>&</sup>lt;sup>555</sup> See id. § 4.

<sup>&</sup>lt;sup>556</sup> See id. § 5.

<sup>&</sup>lt;sup>557</sup> See id. § 6.

<sup>&</sup>lt;sup>558</sup> HB 763, 2019 Leg., Reg. Sess. Section 1 (Mont. 2019).

```
<sup>559</sup> Id. § 3(6).
```

<sup>&</sup>lt;sup>560</sup> *Id.* § 12.

<sup>&</sup>lt;sup>561</sup> *Id.* §§ 8-10.

<sup>&</sup>lt;sup>562</sup> SF 8, 2019 Leg., 1<sup>st</sup> Special Sess. Section 10(2) (Minn. 2019).

<sup>&</sup>lt;sup>563</sup> *Id.* § 10(3).

<sup>&</sup>lt;sup>564</sup> *Id.* §§ 10(5-6).

<sup>&</sup>lt;sup>565</sup> *Id.* § 10(7).

<sup>&</sup>lt;sup>566</sup> *Id.* § 10(8).

<sup>&</sup>lt;sup>567</sup> See U.S. Senate Bill 756, One Hundred and Fifteenth U.S. Congress, Second Session (enacted December 2018).

<sup>&</sup>lt;sup>568</sup> See Arkansas House Bill 1755, Ninety Second Arkansas General Assembly, 2019 (enacted April 2019).

<sup>&</sup>lt;sup>569</sup> See Colorado Senate Bill 20-007, Seventy Second Assembly, 2020 Session (awaiting signature).

<sup>&</sup>lt;sup>570</sup> See Florida House Bill 1259, 2020 Legislative Session (enacted June 2020).

<sup>&</sup>lt;sup>571</sup> See Georgia House Bill 345, 2019-2020 Georgia General Assembly, Regular Session (enacted May 2019).

<sup>&</sup>lt;sup>572</sup> See Louisiana House Bill 344, Louisiana State Legislature, 2020 Session (enacted June 2020).

<sup>&</sup>lt;sup>573</sup> See Maryland Senate Bill 809, Maryland General Assembly, 2019 Session (enacted April 2019).

<sup>&</sup>lt;sup>574</sup> See Montana House Bill 763, Sixty Sixth Regular Session of the Montana Legislature, 2019 (enacted May 2019).

<sup>&</sup>lt;sup>575</sup> See Nebraska Legislative Bill 230, 2019-2020 Nebraska Unicameral Legislature (enacted February 2020).

<sup>&</sup>lt;sup>576</sup> See New Jersey Assembly Bill 3979, New Jersey Legislature 2018-2019 Session, Second Session (enacted January 2020).

<sup>&</sup>lt;sup>577</sup> See New Mexico House Bill 364, 2019 New Mexico Legislature, Regular Session (enacted April 2019).

<sup>&</sup>lt;sup>578</sup> See South Carolina House Bill 3967, One Hundred and Twenty Third Legislative Session (enacted May 2020).

<sup>&</sup>lt;sup>579</sup> See Texas House Bill 650, Eighty Sixth Texas Legislature, 2019-2020 Section 6 (enacted May 2019).

<sup>&</sup>lt;sup>580</sup> See Virginia House Bill 1648, 2020 Virginia Legislative Session (enacted March 2020).

<sup>&</sup>lt;sup>581</sup> See Washington Senate Bill 6112, House Bill 2277, 2019-2020 Washington State Legislature (enacted April 2020).

<sup>&</sup>lt;sup>582</sup> See Louisiana House Bill 344, Louisiana State Legislature, 2020 Session (enacted June 2020), Section 1(B).

<sup>&</sup>lt;sup>583</sup> See Texas House Bill 650, Eighty Sixth Texas Legislature, 2019-2020 (enacted May 2019), Section 501.144(a) (barring such placement "unless the director or director 's designee determines that the placement is necessary based on a reasonable belief that the inmate will harm herself, her unborn child or infant, or any other person or will attempt escape."); Virginia House Bill 1648, 2020 Virginia Legislative Session (enacted March 2020), Article 2.2 (barring such placement "unless an employee of the Department has a reasonable belief that the inmate will harm herself, the fetus, or any other person or poses a substantial flight risk."); South Carolina House Bill 3967, One Hundred and Twenty Third Legislative Session (enacted May 2020) ("Correctional facilities, local detention facilities, and prison or work camps must not place a known pregnant inmate, or any female inmate who has given birth within the previous thirty days, in restrictive housing unless there is a reasonable belief the inmate will harm herself, the fetus, or another person, or pose a substantial flight risk.").

- <sup>584</sup> Georgia House Bill 345, 2019-2020 Georgia General Assembly, Regular Session (enacted May 2019), Section 1(e); (barring, without exception, the placement "in solitary confinement, in administrative segregation, or for medical observation in a solitary confinement setting" for any "pregnant woman or woman").
- <sup>585</sup> Maryland Senate Bill 809, Maryland General Assembly, 2019 Session (enacted April 2019), Section 9-601.1(B)-(C) (barring placement of any pregnant woman in restrictive housing unless there is "a serious and immediate risk of physical harm to the inmate or another" or "an immediate and credible flight risk that cannot be reasonably prevented by other means" or "a situation that poses a risk of spreading a communicable disease that cannot be reasonably mitigated by other means.").
- <sup>586</sup> Montana House Bill 763, Sixty Sixth Regular Session of the Montana Legislature, 2019 (enacted May 2019), Section 3 (barring placement of any pregnant or postpartum woman in restrictive housing unless an approval has been made by an administrator based on "exigent circumstances.").
- <sup>587</sup> New Jersey Assembly Bill 314, New Jersey Legislature 2018-2019 Session, Second Session (enacted July 2019), Section 3 (barring the use of restrictive housing, with exceptions, for any prisoner who "is pregnant, is in the postpartum period, or has recently suffered a miscarriage or terminated a pregnancy").
- <sup>588</sup> New Mexico House Bill 364, 2019 New Mexico Legislature, Regular Session (enacted April 2019) (barring the use of restrictive housing, without exception, for any inmate known to be pregnant).
- <sup>589</sup> See First Step Act of 2018, § 613, Pub. L. 115-391, 132 Stat. 5194, 5248.
- <sup>590</sup> See New Mexico House Bill 364, 2019 New Mexico Legislature, Regular Session (enacted April 2019), Section 3(A).
- <sup>591</sup> See Washington Senate Bill 6112, House Bill 2277, 2019-2020 Washington State Legislature (enacted April 2020), Section 3.
- <sup>592</sup> See Nebraska Legislative Bill 230, 2019-2020 Nebraska Unicameral Legislature (enacted February 2020), Sections 4-5 (requiring that "[d]ocumentation of the room confinement shall include the date of the occurrence; the race, ethnicity, age, and gender of the juvenile; the reason for placement of the juvenile in room confinement; an explanation of why less restrictive means were unsuccessful; the ultimate duration of the placement in room confinement; facility staffing levels at the time of confinement; and any incidents of self-harm or suicide committed by the juvenile while he or she was isolated.").
- <sup>593</sup> Neb. Rev. St. § 83-4,134.01(2) (2018).
- <sup>594</sup> Circumstances include a temporary, facility-wide, emergency lockdown, a mental health emergency requiring "medical isolation," and a request by the individual for protective custody. A 314, S 3261, 2018-2019 Leg., Reg. Sess. (N.J. 2019). Section 4(b).
- <sup>595</sup> See Montana House Bill 763, Sixty Sixth Regular Session of the Montana Legislature, 2019 (enacted May 2019), Section 12.
- <sup>596</sup> See Arkansas House Bill 1755, Ninety Second Arkansas General Assembly, 2019 (enacted April 2019), Sections 1(b), 2(b) (barring placement for youth in solitary unless the placement is due to "[a] physical or sexual assault committed by the juvenile while in the juvenile detention facility; . . . [c]onduct of the juvenile that poses an imminent threat of harm to the safety or well-being of the juvenile, the staff, or other juveniles in the juvenile detention facility; or . . . [t]he juvenile escaping or attempting to escape from the 4 juvenile detention facility," and the director of the facility provides written authorization "every twenty-four-hour period during which the juvenile remains *in punitive isolation or solitary* confinement after the initial twenty-four (24) hours."
- <sup>597</sup> Montana House Bill 763, Sixty Sixth Regular Session of the Montana Legislature, 2019 (enacted May 2019), Section 4.
- <sup>598</sup> See New Jersey Assembly Bill 314, New Jersey Legislature 2018-2019 Session, Second Session (enacted July 2019), Section 4(b).

- <sup>599</sup> See New Mexico House Bill 364, 2019 New Mexico Legislature, Regular Session (enacted April 2019), Section 4.
- <sup>600</sup> *Id*.
- <sup>601</sup> See Colorado Senate Bill 20-007, Colorado General Assembly, 2019 Session (enacted July 2020).
- <sup>602</sup> See U.S. Senate Bill 756, One Hundred and Fifteenth U.S. Congress, Second Session (enacted December 2018).
- <sup>603</sup> See Maryland House Bill 1001, Maryland General Assembly, 2019 Session (enacted May 2019).
- <sup>604</sup> See Michigan Senate Bill 848, Ninety Ninth Michigan Legislature, 2018 Regular Session (enacted June 2018).
- <sup>605</sup> See Minnesota Senate File 8, Ninety First Minnesota Legislature, 1st Special Session 2019-2020 (enacted May 2019).
- <sup>606</sup> Nebraska Legislative Bill 230, 2019-2020 Nebraska Unicameral Legislature (enacted February 2020), in Sections 4 provides,

"The juvenile facility shall submit a report quarterly to the Legislature on the juveniles placed in room confinement; the length of time each juvenile was in room confinement; the race, ethnicity, age, and gender of each juvenile placed in room confinement; facility staffing levels at the time of confinement; and the reason each juvenile was placed in room confinement. The report shall specifically address each instance of room confinement of a juvenile for more than four hours, including all reasons why attempts to return the juvenile to the general population of the juvenile facility were unsuccessful. The report shall also detail all corrective measures taken in response to noncompliance with this section. The report shall redact all personal identifying information but shall provide individual, not aggregate, data. The report shall be delivered electronically to the Legislature. The initial quarterly report shall be submitted within two weeks after the quarter ending on September 30, 2016. Subsequent reports shall be submitted for the ensuing quarters within two weeks after the end of each quarter; and (d) The Inspector General of Nebraska Child Welfare shall review all data collected pursuant to this section in order to assess the use of room confinement for juveniles in each juvenile facility and prepare an annual report of his or her findings, including, but not limited to, identifying changes in policy and practice which may lead to decreased use of such confinement as well as model evidence-based criteria to be used to determine when a juvenile should be placed in room confinement. The report shall be delivered electronically to the Legislature on an annual basis."

- <sup>607</sup> See New Mexico House Bill 364, 2019 New Mexico Legislature, Regular Session (enacted April 2019).
- <sup>608</sup> See Virginia Senate Bill 1777, House Bill 1642, 2020 Virginia Legislative Session (enacted March 2019).
- <sup>609</sup> Minnesota Senate File 8, Ninety First Minnesota Legislature, 1st Special Session 2019-2020 (enacted May 2019), Article 3, Section 10, Subdivision 9.
- <sup>610</sup> *Id*.
- <sup>611</sup> HR 1893 The Next Step Act, 2019 Leg., Reg. Sess. (U.S. 2019).
- 612 Hawai'i Senate Bill 2520, Thirtieth Hawai'i Legislature, 2020.
- <sup>613</sup> New York Senate Bill 1623, New York Assembly Bill 2500, 2019-2020 New York State Assembly, 2020 Regular Session.
- 614 Pennsylvania House Bill 497, 2019-2020 Pennsylvania General Assembly, 2020.
- 615 Connecticut Senate Bill 1109, House Bill 6705, Connecticut General Assembly, 2019 Session (to prohibit solitary confinement). "Administrative segregation status" is defined as "the Department of Correction's practice of placing an inmate on restrictive housing status following a determination that such inmate can no longer be safely managed within the general inmate population of the correctional facility." "Restrictive housing status" is defined as "the designation of

an inmate by the Department of Correction that provides for closely regulated management and separation of such inmate from other inmates."

- 616 Gumm v. Ford, No. 5:15-CV-41 (MTT), 2019 WL 2017497 (M.D. Ga. May 7, 2019).
- 617 Gumm v. Ford, No. 5:15-CV-41 (MTT) (Second Amended Complaint [date]).
- 618 Final Order of Approval of Class Settlement, Reid v. Wetzel, No. 18-CV-0176 (M.D. Pa. 2020).
- 619 Settlement Agreement, *Reid v. Wetzel*, No. 18-CV-0176 (M.D. Pa. 2018), at 13, *available at* https://live-aclupennsylvania.pantheonsite.io/sites/default/files/field\_documents/reid\_settlement\_agreement\_\_signed\_with\_exhibits.pdf. [https://perma.cc/3H7P-K8GY]. For the complaint, filed in January 2018 by the ACLU, Abolitionist Law Center, and pro bono counsel, see Class Action Complaint for Declaratory and Injunctive Relief, No. 1:18-cv-00176-JEJ, (M.D. Pa. Jan. 25, 2018), https://live-aclupennsylvania.pantheonsite.io/sites/default/files/field\_documents/1\_complaint.pdf [perma.cc/9WKZ-8E4H.].
- <sup>620</sup> See Settlement Agreement at 10, Reid v. Wetzel, No. 18-CV-0176 (M.D. Pa. 2018).
- 621 Ashker v. Newsom, No. 09-CV-05796-CW (RMI), 2019 WL 330461 (N.D. Cal. Jan. 25, 2019), appeal pending (argued June 2020); Order Granting Mot. to Extend Settlement Agreement, Ashker v. Baker, No. 09-cv-05796-CW (N.D. Cal. 2019), available at https://ccrjustice.org/sites/default/files/attach/2019/01/1122%202019-01-25%20Order%20Granting%20MTN%20to%20Extend%20SA%20for%2012%20Months.pdf.
- 622 Settlement Agreement, Ashker v. Governor of California, No. C 09-05796 CW (N.D. Cal. Aug. 31, 2015), https://ccriustice.org/sites/default/files/attach/2015/09/2015-09-01-ashker-Settlement Agreement.pdf. The settlement limited duration of solitary confinement and changed the process of placement in solitary confinement from status-based (e.g. based on gang affiliation), to infraction-based. Conflict over implementation remains; see also Plaintiffs'-Appellees' Answering Brief on Appeal, Ashker ν. Brown, No. 18-cv-16427 (9th Cir. https://ccrjustice.org/sites/default/files/attach/2019/06/41%20Pltfs%27%20Answering%20Brief%202019-05-31.pdf; Marisa Endicott, A 2015 Case was Supposed to Overhaul California's Solitary Confinement. The Reality is Much More Complicated, MOTHER JONES (Feb. 13, 2019), https://www.motherjones.com/crime-justice/2019/02/california-ashkerbrown-solitary-confinement-status-appeal/ [https://perma.cc/KP5S-QMC5].
- Settlement Agreement, *Ashker v. Baker*, No. C 09-05796 CW (N.D. Cal. Aug. 31, 2015), https://ccrjustice.org/sites/default/files/attach/2015/09/2015-09-01-ashker-Settlement\_Agreement.pdf; *see also* Paige St. John, *California Agrees to Move Thousands of Inmates Out of Solitary Confinement*, L.A. TIMES (Sept. 1, 2015, 8:09 PM), *available at* https://www.latimes.com/local/lanow/la-me-ln-california-will-move-thousands-of-inmates-out-of-solitary-20150901-story.html [https://perma.cc/T92Z-LMMQ].
- 624 Settlement Agreement at 10-11, *Ashker v. Governor of California*, No. C 09-05796 CW (N.D. Cal. Aug. 31, 2015), *available at* https://ccrjustice.org/sites/default/files/attach/2015/09/2015-09-01-ashker-Settlement Agreement.pdf.
- <sup>625</sup> Ashker v. Newsom, No. 09-CV-05796-CW (RMI), 2019 WL 330461, at \*14 (N.D. Cal. Jan. 25, 2019), appeal pending (argued June 2020).
- <sup>626</sup> Porter v. Clarke, 923 F.3d 348, 353-57 (4th Cir. 2019), as amended (May 6, 2019), reh'g en banc denied (July 26 2019).
- 627 Porter v. Clarke, 1:14-cv-1588-LMB-IDD, Doc. 1, at 6 (E.D. Va. Nov. 20, 2014).
- 628 Porter, 923 F. 3d at 356-57.
- 629 Id. at 368.
- <sup>630</sup> See Porter v. Clarke, 290 F. Supp. 3d 518, 537–38 (E.D. Va. 2018), aff'd, 923 F.3d 348 (4th Cir. 2019), as amended (May 6, 2019).
- 631 Reynolds v. Arnone, 402 F. Supp 3d. 3, 25 (D. Conn. 2019).

- <sup>632</sup> *Id.* at 12-13.
- 633 Id. at 45.
- <sup>634</sup> See Brief of Plaintiff-Appellee, Reynolds v. Arnone, 19-2858, Doc. 81, at 1 (2d Cir. Feb. 20, 2020); Brief of Defendants-Appellants, Reynolds v. Arnone, 19-2858, Doc. 57, at 1 (2d Cir. Jan. 7, 2020).
- 635 Braggs v. Dunn, 367 F. Supp. 3d 1340 (M.D. Ala. 2019).
- 636 Braggs v. Dunn, 257 F. Supp. 3d 1171, 1267 (M.D. Ala. 2017).
- 637 Id. at 1268.
- 638 Braggs, 367 F. Supp. 3d at 1359.
- 639 Braggs v. Dunn, 367 F. Supp. 3d 1340, 1344-45 (M.D. Ala. 2019).
- 640 Braggs v. Dunn, No. 2:14cv601-MHT (WO), 2019 U.S. Dist. LEXIS 75465 (M.D. Ala. May 4, 2019).
- 641 Disability Rights Montana v. Opper, 2:14-cv-00025-SHE, No. 1, at 2 (D. Mont. Mar. 31, 2014).
- 642 Disability Rights Montana, Inc. v. Batista, 930 F.3d 1090, 1098 (9th Cir. 2019).
- 643 H.C. v. Bradshaw, 9:18-cv-80810-WM, No. 79 (S.D. Fl. Nov. 16, 2018).
- 644 H.C. v. Bradshaw, 9:18-cv-80810-WM, No. 78-1, at 7, 9 (S.D. Fl. Nov. 15, 2018).
- 645 A.T. v. Harder, 9:17-cv-00817-DNH-DEP, No. 69-1, at 5 (N.D.N.Y. July 9, 2018).
- 646 *Id.* Further, "[s]uch confinement shall be for the minimum period of time necessary to resolve the threat," and the Sheriff's Office is to "promptly notify mental health." *Id.* The settlement also limits solitary confinement longer than 24 hours absent a review to determine continuing necessity, with subsequent reviews every eight hours. When confinement extends beyond eight hours, the juvenile will, within the next eight hours, be seen by a medical or mental health professional to assess "whether the juvenile poses an imminent threat of bodily harm to self or others because of a mental health concern or [] whether the juvenile is experiencing serious harm as a result of their cell confinement." *Id.* at 6. If such is found to be the case, the jail will "follow the alternative placement or behavior management recommendations" of the healthcare professional. *Id.* at 7.
- <sup>647</sup> Resolution adopted by the General Assembly on 17 December 2015, UNITED NATIONS STANDARD MINIMUM RULES FOR THE TREATMENT OF PRISONERS (Nelson Mandela Rules), U.N. GENERAL ASSEMBLY, U.N. Doc. A/Res/70/175 (January 8, 2016), https://cdn.penalreform.org/wp-content/uploads/1957/06/ENG.pdf [hereinafter Nelson Mandela Rules].
- <sup>648</sup> ASCA-LIMAN REFORMING RESTRICTIVE HOUSING 2018, at 92-94.
- <sup>649</sup> Special Rapporteur on Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, *Report on Torture and other cruel, inhuman or degrading treatment or punishment*, ¶ 41, U.N. Doc A/HRC/43/49 (March 20, 2020).
- $^{650}$  Id. at ¶¶ 41, 57 n.43; see also Nelson Mandela Rules, Rule 43(1)(b); Note by the Secretary General, Torture and other cruel, inhuman or degrading treatment or punishment, ¶¶ 26, 80, U.N. Doc A/66/268 (August 5, 2011).
- <sup>651</sup> *United States: prolonged solitary confinement amounts to psychological torture, says UN expert*, U.N. Office of the High Comm'r for Human Rights (Feb. 28, 2020),
- $https://www.ohchr.org/en/NewsEvents/Pages/DisplayNews.aspx?NewsID=25633\&LangID=E\#:\sim:text=Mr., of \%20 the \%20 Human \%20 Rights \%20 Council.$
- 652 WMA Statement on Solitary Confinement, WORLD MEDICAL ASSOCIATION 1 (Oct. 2019), https://www.wma.net/policies-post/wma-statement-on-solitary-confinement/[hereinafter WMA Statement].

- 653 WMA Statement at 1.
- <sup>654</sup> *Id.* at 2.
- <sup>655</sup> *Id*.
- 656 See Corporation of the Canadian Civil Liberties Association v. Canada (Attorney General), 2019 ONCA 243(Mar. 28, 2019), at 21, 42, available at https://ccla.org/cclanewsite/wp-content/uploads/2019/03/C64841.rere\_.pdf.
- <sup>657</sup> See British Columbia Civil Liberties Association v. Canada (Attorney General), 2019 BCCA 228 (June 24, 2019), at 42-43, available at https://bccla.org/wp-content/uploads/2019/09/2019-BCCA-228-British-Columbia-Civil-Liberties-Association-v.-Canada-Attorney-General.pdf; see also CANADIAN CONSTITUTION ACT 1982, SEC. 7, available at https://laws-lois.justice.gc.ca/eng/Const/page-15.html.
- <sup>658</sup> See Colin Perkel, Federal government gives up fight against 15 day hard cap on solitary confinement, GLOBAL NEWS (Apr. 22, 2020 6:18 AM), https://globalnews.ca/news/6851298/solitary-confinement-prison-canada/.
- 659 Bill C-83, An Act to amend the Corrections and Conditional Release Act and another Act, Forty-Second Parliament, First Session (2019) (Royal Assent granted June 21, 2019); see Lyne Casavant & Maxime Charron-Tousignant, Legislative Summary of Bill C-83: An Act to amend the Corrections and Conditional Release Act and another Act, LIBRARY OF PARLIAMENT (Aug. 27, 2019), available at https://lop.parl.ca/sites/PublicWebsite/default/en CA/ResearchPublications/LegislativeSummaries/421C83E#ftn30.
- <sup>660</sup> See Commissioner's Directive 711: Structured Intervention Units, CORRECTIONAL SERV. OF CANADA, Annex C (Nov. 30, 2019), available at https://www.csc-scc.gc.ca/acts-and-regulations/711-cd-en.shtml.
- <sup>661</sup> State of Uttarakhand v. Hassan, REF/1/2014, ¶¶ 96, 100 (High Court of Uttarakhand, Apr. 27, 2018); see also Vineet Upadhyay, Abolish solitary confinement of death convicts: HC, The Times of India (April 28, 2018), https://timesofindia.indiatimes.com/city/dehradun/abolish-solitary-confinement-of-death-convicts-hc/articleshow/63944418.cms.
- <sup>662</sup> *Id.* (quoting Nelson Mandela Rules).
- <sup>663</sup> State of Punjab v. Ram, MRC-2-2018, ¶ 71 (High Court of Punjab and Haryana, Dec. 14, 2018); see Ajay Sura, No solitary confinement of death row convicts in Punjab: Punjab and Haryana high court, THE TIMES OF INDIA (Dec. 16, 2018), https://timesofindia.indiatimes.com/city/chandigarh/no-solitary-confinement-of-death-row-convicts-in-punjab-punjab-and-haryana-high-court/articleshow/67111155.cms.
- 664 See IPS Policy for elimination of solitary confinement, IRISH PRISON SERVICE (Nov. 7, 2017), https://www.irishprisons.ie/wp-content/uploads/documents pdf/Elimination-of-solitary-confinement-Policy.pdf.
- <sup>665</sup> See Behind the Door: Solitary Confinement in the Irish Penal System, IRISH PENAL REFORM TRUST (2018), at 3, https://www.iprt.ie/site/assets/files/6439/solitary\_confinement\_web.pdf.
- 666 Progress in the Penal System (PIPS): A framework for penal reform, IRISH PENAL REFORM TRUST (2019), at 91, https://pips.iprt.ie/site/assets/files/Progress-in-the-Penal-System-2019.pdf.
- <sup>667</sup> *Id.* at 91.
- <sup>668</sup> See Report to the Norwegian Government on the visit to Norway carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, COUNCIL OF EUROPE (Jan. 17, 2019), https://rm.coe.int/1680909713.
- <sup>669</sup> *Id.* at 5.
- <sup>670</sup> *Id*.
- <sup>671</sup> *Id*.

<sup>672</sup> Crushing Humanity: The Abuse of Solitary Confinement in Egypt's Prisons, AMNESTY INT'L (2018), https://www.amnesty.org/download/Documents/MDE1282572018ENGLISH.PDF.

```
673 Id. at 14.
```

678 Chief Inspector calls for major overhaul of harmful separation of children in young offender custody, HM INSPECTORATE OF PRISONS (Jan. 21, 2020), https://www.justiceinspectorates.gov.uk/hmiprisons/media/press-releases/2020/01/chief-inspector-calls-for-major-overhaul-of-harmful-separation-of-children-in-young-offender-custody/; Separation of children in young offender institutions, HM INSPECTORATE OF PRISONS (January 2020), https://www.justiceinspectorates.gov.uk/hmiprisons/wp-content/uploads/sites/4/2020/01/Separation-of-children-thematic-Web-2019.pdf [hereinafter Separation of Children Report].

- <sup>680</sup> *Id*.
- <sup>681</sup> See generally Stopping Solitary Confinement, HUMAN RIGHTS LAW CENTRE (March 31, 2020), https://static1.squarespace.com/static/580025f66b8f5b2dabbe4291/t/5e82ce8fe958d45ab1480a0a/1585630887751/HRL C+Submission+-+Disability+Royal+Commission+-+Final.pdf.
- <sup>682</sup> *Id.* at 2.
- <sup>683</sup> *Id.* at 19.
- <sup>684</sup> *Id.* at 3.
- <sup>685</sup> See generally Solitary Confinement.
- <sup>686</sup> We provided two estimates using alternative calculation methods in Section II.
- <sup>687</sup> The thirty-three jurisdictions that provided data for all three years were Alabama, Arizona, Colorado, Connecticut, Delaware, Georgia, Hawaii, Idaho, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, Mississippi, Missouri, Montana, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Washington, Wisconsin, and Wyoming. An additional three jurisdictions provided data in both 2015 and 2019. These jurisdictions were Minnesota, Vermont, and Virginia. Two more jurisdictions, Arkansas and Rhode Island, provided data in 2017 and 2019.
- <sup>688</sup> We clarified the definition of restrictive housing in the 2017 and 2019 surveys. In 2015, the survey defined restrictive housing as being in-cell for twenty-two or more hours for fifteen or more continuous days; in 2017 and 2019, the survey defined restrictive housing as being in cell for *an average of* twenty-two or more hours a day for fifteen or more continuous days.
- <sup>689</sup> These jurisdictions were Alabama, Arizona, Colorado, Connecticut, Delaware, Georgia, Hawaii, Idaho, Indiana, Kentucky, Louisiana, Maryland, Massachusetts, Nebraska, New York, North Dakota, Ohio, Oklahoma, Pennsylvania, South Carolina, South Dakota, Wisconsin, and Wyoming.
- <sup>690</sup> These jurisdictions were Illinois, Tennessee, and Texas.
- <sup>691</sup> These jurisdictions were Kansas, Mississippi, Missouri, North Carolina, and Oregon.
- <sup>692</sup> These jurisdictions were Montana and Washington.

<sup>&</sup>lt;sup>674</sup> *Id.* at 7.

<sup>&</sup>lt;sup>675</sup> *Id.* at 6.

<sup>&</sup>lt;sup>676</sup> *Id.* at 8.

<sup>&</sup>lt;sup>677</sup> Id

<sup>&</sup>lt;sup>679</sup> SEPARATION OF CHILDREN REPORT, at 5.

- <sup>693</sup> These jurisdictions were, in order, New York, Louisiana, Georgia, Texas, and Illinois. Between 2017 and 2019, Texas and Illinois both reflected an increase in their restrictive housing populations.
- <sup>694</sup> This jurisdiction was Louisiana.
- <sup>695</sup> This jurisdiction was Montana.
- <sup>696</sup> For example, Montana's total custodial population decreased from 2, 554 in 2015 to 1, 769 in 2017 and 1,650 in 2019. During the same time, however, its restrictive housing population increased from 3.5% of its population in 2015 to 6.4% of its population in 2017 and 9.0% of its population in 2019. Thus, while the total number of prisoners in restrictive housing decreased, the percentage of prisoners in restrictive housing increased.
- <sup>697</sup> These jurisdictions were Arizona, Colorado, Delaware, Indiana, Kansas, Kentucky, Louisiana, Massachusetts, Minnesota, Nebraska, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Washington, Wisconsin, and Wyoming. In addition, four jurisdictions provided this data in 2015 and 2019: Connecticut, Maryland, Minnesota, and Vermont. Two jurisdictions, Alabama and Rhode Island, provided this data in 2017 and 2019.
- <sup>698</sup> From 2015 to 2017 the number of people reported in restrictive housing for 15-30 days and for 31-90 days increased. The reported numbers for these time frames decreased overall from 2015-2019.

## **ASCA Liman 2019 Restrictive Housing Survey**

## Introduction

As you know, ASCA and Yale's Liman Center have since 2012 collected data to understand the use of restrictive housing. Through our questionnaires we have provided a series of national pictures detailing the numbers of people housed, the length of their stay, and policy reforms. As in the past, after responses to this questionnaire are in and a draft report compiled, ASCA members will receive a copy for comments. After we review comments, suggestions, and corrections, the report will be revised for publication.

After ASCA-Liman began in 2012, several jurisdictions have enacted statutes requiring reporting on some aspects of restrictive housing. Much of our survey overlaps with the requirements of those statutes. In a few areas, we have revised questions to facilitate compliance in jurisdictions where reporting is required.

## **Instructions and Definitions**

The definition of the term "restrictive housing" in this survey is

separating prisoners from the general population and holding them in cell for an average of 22 or more hours per day, for 15 or more continuous days.

Please respond with data on all forms of restrictive housing populations, whether called administrative segregation, disciplinary segregation, protective custody, intensive management, or another term. Further, please include prisoners held in single and in double cells. Please provide numbers as of July 15, 2019, if possible. Otherwise, specify the date of the information provided. PLEASE COMPLETE THE SURVEY BY OCTOBER 1, 2019.

Please either answer the survey in one session or download the attached PDF version, provide answers, and then input them in one session into Qualtrics. Note: if you have questions before answering, please contact ASCA-Liman at ascalimansurvey@yale.edu or call us at (203) 436-3532. As we sometimes need to clarify information, please answer the question requesting the name and title of the person we should contact.

Download survey as a PDF			

Q1 Please select your jurisdiction and provide the date on which data were collected. If possible, provide data as of July 15, 2019 or specify here the date used for all answers.

▼ Air Force Confinement and C	orrections (1) Wyoming Depar	rtment of Correction (63)
Q1a Name of contact person		
Q1b Title of contact person		
Q1c Contact phone number		
Q1d Contact email		
Q1e Information current as of wh	nat date in 2019? Month	
Please Select:	IVIOTIUT	Day

Q2 Please indicate the extent of your jurisdiction's control over the following types of facilities. By DIRECT CONTROL, the survey means that your jurisdiction hires and supervises staff and that your jurisdiction provides the governing rules and policies. Include facilities where certain services, such as health care or laundry, are performed by subcontractors.

Facilities not under your direct control means facilities located in your jurisdiction that you do not operate or manage. For example, a local jail that houses state prisoners or a privately operated prison.

	Our jurisdiction has facilities of this type under our DIRECT CONTROL	Our jurisdiction has facilities of this type that are NOT under our direct control	Our jurisdiction does not include this type of facility
Prisons	0	$\circ$	$\circ$
Jails	$\circ$	$\circ$	$\circ$
Juvenile Facilities	$\circ$	$\circ$	$\bigcirc$
Mental Health Facilities	$\circ$	$\circ$	$\circ$
Special facilities for death-sentenced prisoners		0	
Privately operated facilities	$\circ$	$\circ$	$\circ$
Immigration detention facilities	$\circ$	$\circ$	$\circ$
Other (please specify, or select 'our jurisdiction does not include this type of facility')			

Q3 Please indicate the total custodial population for all facilities under your DIRECT CONROL as of July 15, 2019 or the date you indicated in answer to Q1.

	TOTAL MALE CUSTODIAL POPULATION for all facilities of this type under your DIRECT CONTROL	TOTAL FEMALE CUSTODIAL POPULATION for all facilities of this type under your DIRECT CONTROL
Prisons		
Jails		
Juvenile Facilities		
Mental Health Facilities		
Special facilities for death- sentenced prisoners		
Privately operated facilities		
Immigration detention facilities		
Other (please specify, or select 'our jurisdiction does not include this type of facility')		
Total		

Q4 Some jurisdictions do not have data on the number of people in restrictive housing for their total custodial population. For examples, some may not have data for all facilities within their jurisdiction or all units within every facility. **Please indicate the total population under your DIRECT CONTROL**, as of July 15, 2019 or the date you indicated in answer to Q1, **for which you can provide restrictive housing data**.

you oun provide resultance ne		
	TOTAL MALE CUSTODIAL POPULATION in facilities under your DIRECT CONTROL for which you CAN PROVIDE RESTRICTIVE HOUSING DATA:	TOTAL FEMALE CUSTODIAL POPULATION in facilities under your DIRECT CONTROL for which you CAN PROVIDE RESTRICTIVE HOUSING DATA:
Prisons		
Jails		
Juvenile Facilities		
Mental Health Facilities		
Special facilities for death- sentenced prisoners		
Privately operated facilities		
Immigration detention facilities		
Other (please specify, or select 'our jurisdiction does not include this type of facility')		
Total		

Q5 How many people total are in **restrictive housing**, defined as **in cell for an average of 22 or more hours a day for 15 or more continuous days**, in the facilities **under your direct control?** 

Do NOT count people in cell for less than 15 days.	
	-

Q5a How many people, by gender, are in **restrictive housing**, defined as **in cell for an average** of 22 or more hours a day for 15 or more continuous days, in the facilities under your direct control?

The total of male and female prisoners should match the total number of people in restrictive housing, just provided.

Do NOT count people in cell for less than 15 days.

	Number of MALE prisoners in RESTRICTIVE HOUSING in the facilities of this type that are under your DIRECT CONTROL:	Number of FEMALE prisoners in RESTRICTIVE HOUSING in the facilities of this type that are under your DIRECT CONTROL:
Prisons		
Jails		
Juvenile Facilities		
Mental Health Facilities		
Special facilities for death- sentenced prisoners		
Privately operated facilities		
Immigration detention facilities		
Other (please specify, or select 'our jurisdiction does not include this type of facility')		

Q6 Please answer as of July 15, 2019 or the date you provided in answer to Q1. If you do not collect this data or the data is otherwise unavailable, please leave the field blank and check the relevant boxes below.

This question asks about the population in cell for less than 22 hours or for less than 15 days. Please 1) enter the number of people in cell for the following lengths of time, or 2) enter a zero to indicate there are no people in cell for that length of time, or 3) leave the space blank to indicate you cannot provide this information

	Male	Female
Number of prisoners in cell an average of 19-21 hours a day for 15 days or more		
Number of prisoners in cell an average of 19-21 hours a day for 1-14 days		
Number of prisoners in cell an average of 22 hours a day for 1-14 days		
Q6a If you left any of the previou	us categories blank, please expla	ain why.
We do not collect	t this information.	
Our data system	does not allow us to provide this	information.
Other (please exp	plain)	

Q7 Please provide, as of July 15, 2019 or the date you indicated in response to Q1, the number of prisoners held in restrictive housing, defined as in cell for an average of 22 or more hours per day for 15 or more continuous days, for the following time periods.

Fill in each box with: 1) the number of people in restrictive housing for that length of time, or 2) a zero to indicate there were no people in restrictive housing for that length of time. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

Please provide the total number of days in restrictive housing REGARDLESS of type (whether called protective, disciplinary, administrative, or other) and include all individuals whether they were moved from one type to another.

Include individuals housed for 15 days or more in "consecutive" placements, defined as two or more time periods not separated by an interval outside of restrictive housing. Do not include non-consecutive or non-continuous placements.

	15 days – 30 days	31 days – 90 days	91 days 180 days	181 days - 365 days	1 year and 1 day – 3 years	3 years and 1 day – 6 years	more than 6 years
Number of MALE prisoners in restrictive housing							
Number of FEMALE prisoners in restrictive housing							

\_\_\_\_\_\_

Q7a If you lef	t any of the previous fields blank, please explain why.
	We do not collect this information
	Our data system does not allow us to provide this information.
	Other (please explain)
	ilities for which you can provide data on restrictive housing, do you regularly collect n <b>HOW LONG</b> each prisoner is in restrictive housing (length of time)?
O Yes	
O Yes, b	out with the following caveats:
O No (pl	ease explain):
systematically	ar did your jurisdiction begin to regularly track length of time? Regularly track means collecting information at regular intervals on how long prisoners are in restrictive ther the data collection is done on paper or by computer.
▼ 1950 (1)	2019 (70)
restrictive hou	umbers you provided in Question 7 include the time that those individuals spent in using before your jurisdiction started regularly tracking length of time? (For example, regularly tracking in 2008, do the numbers include time spent in restrictive housing)
O Yes.	
○ No	
Other	

011	Do you trook whather individuals who were released from restrictive housing are	roturno d
	Do you track whether individuals who were released from restrictive housing are restrictive housing during the same term of incarceration?	eturnea
	○ Yes	
	○ No	

	Please provide the numbers of prisoners in restrictive housing who were returned housing in the following time periods.
	e prisoners released from restrictive housing between July 1, 2017 and June 30, w many were returned within 7 days?
	e prisoners released from restrictive housing between July 1, 2017 and June 30, w many were returned within 7-29 days?
	e prisoners released from restrictive housing between July 1, 2017 and June 30, w many were returned within 30-89 days?
	e prisoners released from restrictive housing between July 1, 2017 and June 30, w many were returned within 90-179 days?
	e prisoners released from restrictive housing between July 1, 2017 and June 30, w many were returned within 180-365 days?
Q12 What ra	cial and/or ethnic categories do you use to classify prisoners?
	White
	Black (African American)
	Hispanic or Latino
	Asian
	Native American or Alaskan Native
	Native Hawaiian or Pacific Islander
	Other

$\sim$	1	2
w	- 1	O

	Explain how you define each categor
White	
Black (African American)	
Hispanic or Latino	
Asian	
Native American or Alaskan Native	
Native Hawaiian or Pacific Islander	
Other	
4 How are identifications made?	

Q15a Provide information on the number of prisoners by gender and age in the TOTAL CUSTODIAL POPULATION. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

	Male	Female
Under 18 years old		
18-25 years old		
26-35 years old		
36-50 years old		
Over 50 years old		
Total		

Q15b Provide information on the number of prisoners by gender and race/ethnicity in the TOTAL CUSTODIAL POPULATION. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

	Male	Female
White		
Black (African American)		
Hispanic or Latino		
Asian		
Native American or Alaskan Native		
Native Hawaiian or Pacific Islander		
Other		
Total		

Q16 These questions ask about the **population in restrictive housing**, defined as in cell an average of 22 hours a day for 15 days or more, in facilities under your direct control.

Q16a Provide information on the number of prisoners **by gender and age** who are in **RESTRICTIVE HOUSING**. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

	Male	Female
Under 18 years old		
18-25 years old		
26-35 years old		
36-50 years old		
Over 50 years old		
Total		

Q16b Provide information on the number of prisoners by gender and race/ethnicity in restrictive housing. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

	Male	Female
White		
Black (African American)		
Hispanic or Latino		
Asian		
Native American or Alaskan Native		
Native Hawaiian or Pacific Islander		
Other		
Total		

		eft any of the fields for Questions 15-16 blank, please explain why.	
		We do not collect this information	
		Our data system does not allow us to provide this information.	
		Other (please explain)	
Q17 F	land de		
		es your jurisdiction define serious mental illness? Please provide the defir f using a diagnostic manual from the health sciences and which version).	-
			-
			<del>-</del>
			-

Q18 Provide the number of male and female prisoners classified as **SERIOUSLY MENTALLY ILL** in **1) the TOTAL CUSTODIAL POPULATION** UNDER YOUR DIRECT CONTROL and for which you can provide restrictive housing data; and **2) the RESTRICTIVE HOUSING POPULATION** UNDER YOUR DIRECT CONTROL.

For all questions regarding serious mental illness, if the number of prisoners in a certain category is so small that you have concerns about protecting identifying information, please

contact us directly at ascalimansurvey@yale.edu.

If you do not collect this data or the data is otherwise unavailable, leave the box blank.

	Male	Female
1) Prisoners with Serious Mental Illness in TOTAL CUSTODIAL POPULATION under your direct control and for which you can provide restrictive housing data		
Prisoners with Serious Mental Illness in RESTRICTIVE POPULATION under your direct control		

Q19 These questions ask about the **total custodial population** under your direct control and for which you can provide restrictive housing data.

Provide the number of prisoners, by race/ethnicity, classified as **SERIOUSLY MENTALLY ILL** in your jurisdiction's **TOTAL CUSTODIAL POPULATION**. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

	Male	Female
White		
Black (African American)		
Hispanic or Latino		
Asian		
Native American or Alaskan Native		
Native Hawaiian or Pacific Islander		
Other		
Total		

Q19a Provide the number of prisoners, by age, classified as **SERIOUSLY MENTALLY ILL** in your jurisdiction's **TOTAL CUSTODIAL POPULATION**. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

	Male	Female
Under 18		
18 - 25		
26 - 35		
36-50		
Over 50		
Total		

Q20 These questions ask about the **population in restrictive housing**, defined as in cell an average of 22 hours a day for 15 days or more, in facilities under your direct control.

Provide the number of prisoners, by race/ethnicity, classified as **SERIOUSLY MENTALLY ILL** in **RESTRICTIVE HOUSING**. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

	Male	Female
White		
Black (African American)		
Hispanic or Latino		
Asian		
Native American or Alaskan Native		
Native Hawaiian or Pacific Islander		
Other		
Total		

Q20a Provide the number of prisoners, by age, classified as **SERIOUSLY MENTALLY ILL** in **RESTRICTIVE HOUSING**. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

	Male	Female
Under 18		
18 - 25		
26 - 35		
36-50		
Over 50		
Total		

Q21 Please provide, as of July 15, 2019 or the date you indicated in response to Q1, the number of seriously mentally ill prisoners in restrictive housing, defined as in cell for an average of 22 or more hours per day for at least 15 continuous days, for the following time periods.

Fill in each box with: 1) the number of seriously mentally ill people in restrictive housing for that length of time, or 2) a zero to indicate there were no seriously mentally ill people in restrictive housing for that length of time. If you do not collect this data or the data is otherwise unavailable, leave the box blank.

Provide the total number of days in restrictive housing REGARDLESS of status (disciplinary, administrative, protective, or other) and include transgender individuals if they were moved from one status or type to another.

If seriously mentally ill individuals are housed for 15 days or more in "consecutive" placements, include them in these answers. Consecutive placements means two or more time periods with no

time outside of restrictive housing in between. Do not include non-consecutive or non-continuous placements.

	Number of seriously mentally ill prisoners in restrictive housing
15 days – 30 days	
31 days – 90 days	
91 days – 180 days	
181 days – 365 days	
1 year and 1 day – 3 years	
3 years and 1 day – 6 years	
More than 6 years	
Total	
We do not collect this information Our data system does not allow to Other (please explain)  Q22 How are prisoners identified as transgen dentification or medical records.	

Note: For the questions below, please leave the field blank if you do not track this information. Enter "0" if you track the information and the answer to the question is zero.
Q23 How many transgender prisoners are in your jurisdiction's total custodial population?
Q24 How many transgender prisoners in your jurisdiction are in restrictive housing?
Q24a If you left any of the previous fields blank, please explain why.
<ul><li>We do not collect this information</li><li>Our data system does not allow us to provide this information.</li></ul>
Other (please explain)
Note: For the questions below, please leave the field blank if you do not track this information. Enter "0" if you track the information and the answer to the question is zero.
Q25 How many pregnant prisoners are in your jurisdiction's total custodial population?

Q26 How ma	ny pregnant prisoners in your jurisdiction are in restrictive housing?
Q26a If you le	eft any of the previous fields blank, please explain why.
	We do not collect this information
	Our data system does not allow us to provide this information.
	Other (please explain)

Q27 Please check any of the following subpopulations for which your jurisdiction's restrictive housing policies vary.

-	subpopulations with text boxes (juveniles, older prisoners, prisoners with special medical or other), please explain how your jurisdiction defines that subcategory.
	Women
	Pregnant prisoners
	Juveniles
	Older prisoners
	Transgender prisoners
	Prisoners with serious mental illness
	Prisoners with special medical needs
	Other (
Q27a F vary?	or each of the subpopulations checked above, how does the restrictive housing policy
$\bigcirc$	Women
$\bigcirc$	Pregnant prisoners
	Juveniles
	Older prisoners
	Transgender prisoners
	Prisoners with serious mental illness
$\bigcirc$ I	Prisoners with special medical needs
	Other
Q27b F	or women in restrictive housing, are there gender responsive programs or policies?
$\circ$	Yes (please explain)
	No

Q27c Please upload any relevant policy or program documents regarding gender responsive programs or policies.

If you have more than one file, please upload a .zip file or email the files to ascalimansurvey@yale.edu.

\_\_\_\_\_

Q27d For women in restrictive housing, are sanitary supplies provided?
O Yes (please explain)
○ No
020 What are the oritoria for placement in rectrictive bevious 2. Check all that apply Liet any
Q28 What are the criteria for placement in restrictive housing? Check all that apply. List any criteria not included.
Physical violence against staff
Physical violence against another prisoner
Self-harm
Prisoner poses a threat to the security or orderly operation of the institution
Prisoner poses a threat to others
Prisoner poses a threat to themselves
Prisoner poses a threat to the security or orderly operation of the institution Prisoner poses a threat to others Prisoner poses a threat to themselves Participation in a fight Membership in a security risk group Attempted escape
Membership in a security risk group
Attempted escape
Escape
Drug or alcohol use
Possession of a weapon
Prisoner requests placement
Nature of underlying offense of conviction or sentence
[Criteria not listed above]
Q28a If you selected 'nature of underlying offense of conviction or sentence' as a criterion fo
placement in restrictive housing, list the offenses or sentence that result in restrictive housing
placement.

Q28b If a prisoner is placed in restrictive housing based on the offense or sentence (such a capital crime), are the conditions of restrictive housing the same as those for other ped restrictive housing?						
○ Yes						
O No (please explain differences)						
Q28c Upload any relevant policy or program documents regarding prisoners placed bas offense or sentence.	ed on					
If you have more than one file, upload a .zip file or email the files to ascalimansurvey@yale	edu.					

Q29 As of July 15, 2019 or the date provided in answer to Q1, of the people in restrictive housing, how many are placed there for each of the following reasons? If an individual is placed in restrictive housing for more than one reason, count that person more than once. If you do not

collect this data or the data is otherwise unavailable, please leave the box blank.

	Number of male prisoners currently in restrictive housing for this reason	Number of female prisoners currently in restrictive housing for this reason
Physical violence against staff		
Physical violence against another prisoner		
Self-harm		
Prisoner poses a threat to the security or orderly operation of the institution		
Prisoner poses a threat to others		
Prisoner poses a threat to themselves		
Participation in a fight		
Membership in a security risk group		
Attempted escape		
Escape		
Drug or alcohol use		
Possession of a weapon		
Prisoner requests placement		
Nature of underlying offense of conviction or sentence		
[Criteria not listed above]		

Q30 As of July 15 2019 or the date provided in answer to Q1, how many prisoners in restrictive housing, **by age**, are placed there for each of the following reasons? If an individual is placed in restrictive housing for more than one reason, count that person more than once. If you do not

collect this data or the data is otherwise unavailable, please leave the box blank.

For the following table, please answer for **MALE** prisoners only.

	Under 18	18-25	26-35	36-50	Over 50
Physical violence against staff					
Physical violence against another prisoner					
Self-harm					
Prisoner poses a threat to the security or orderly operation of the institution					
Prisoner poses a threat to others					
Prisoner poses a threat to themselves					
Participation in a fight					
Membership in a security risk group					
Attempted escape					
Escape					
Drug or alcohol use					
Possession of a weapon					
Prisoner requests placement					
Nature of underlying offense of conviction or sentence					
[Criteria not listed above]					

Q30a As of July 15 2019 or the date provided in answer to Q1, how many prisoners in restrictive housing, **by age**, are placed there for each of the following reasons? If an individual is placed in restrictive housing for more than one reason, count that person more than once. If you do not

collect this data or the data is otherwise unavailable, please leave the box blank.

For the following table, please answer for **FEMALE** prisoners only.

	Under 18	18-25	26-35	36-50	Over 50
Physical violence against staff					
Physical violence against another prisoner					
Self-harm					
Prisoner poses a threat to the security or orderly operation of the institution					
Prisoner poses a threat to others					
Prisoner poses a threat to themselves					
Participation in a fight					
Membership in a security risk group					
Attempted escape					
Escape					
Drug or alcohol use					
Possession of a weapon					
Prisoner requests placement					
Nature of underlying offense of conviction or sentence					
[Criteria not listed above]					

Q31 As of July 15 2019 or the date provided in Question 1, how many prisoners in restrictive housing, **by race**, are placed there for each of the following reasons? If an individual is placed in restrictive housing for more than one reason, count that person more than once. If you do not

collect this data or the data is otherwise unavailable, please leave the box blank. For the following table, please answer for **MALE** prisoners only.

	White	Black (African American)	Hispanic or Latino	Asian	Native American or Alaskan Native	Native Hawaiian or Pacific Islander	Other
Physical violence against staff							
Physical violence against another prisoner							
Self-harm							
Prisoner poses a threat to the security or orderly operation of the institution							
Prisoner poses a threat to others							
Prisoner poses a threat to themselves							
Participation in a fight							
Membership in a security risk group							
Attempted escape							
Escape							
Drug or alcohol use							
Possession of a weapon							

Prisoner requests placement				
Nature of underlying offense of conviction or sentence				
[Criteria not listed above]				

Q31b As of July 15 2019 or the date provided in Question 1, how many prisoners in restrictive housing, **by race**, are placed there for each of the following reasons? If an individual is placed in restrictive housing for more than one reason, count that person more than once. If you do not collect this data or the data is otherwise unavailable, please leave the box blank.

For the following table, please answer for **FEMALE** prisoners only.

	White	Black (African American)	Hispanic or Latino	Asian	Native American or Alaskan Native	Native Hawaiian or Pacific Islander	Other
Physical violence against staff							
Physical violence against another prisoner							
Self-harm							
Prisoner poses a threat to the security or orderly operation of the institution							
Prisoner poses a threat to others							

Prisoner pose threat to themselves							
Participation fight	in a						
Membership security ris group							
Attempted escape							
Escape							
Drug or alcoluse	nol						
Possession of weapon	of a						
Prisoner requests placement	t						
Nature of underlying offense of conviction of sentence							
[Criteria no							
Q31c If you lef	t any of the fiel	ds for Quest	ions 29-31	blank, plea	ase explain w	hy.	
	We do not coll	ect this infor	mation				
	Our data syste	em does not a	allow us to <sub>l</sub>	provide thi	s information	ı <b>.</b>	
	Other (please explain)						

232a How and	ov whom is the					
					Troubling rovie	
Q32b Is review	mandatory?					
O Yes						
Q32c Is there a	time limit withir	n which the de	ecision to pla	ce someone i	n restrictive ho	ousing mus

Q33 Do mental health professionals screen prisoners before placement in restrictive housing
-
Q33a Do mental health professionals screen prisoners within 48 hours of placement?
Q34 Is placement for a predetermined or indeterminate length of time?
O Predetermined length of time
○ Indeterminate
It depends (please explain)

Q35 Is there a cap on length of time in restrictive housing?
O Yes, and it is
○ No
O Sometimes (please explain)
Q35a In calculating whether the cap on length of time in restrictive housing is reached, do you include consecutive placements? Consecutive placements mean placement in restrictive housing for two or more time periods with no time out of restrictive housing in between.
<u> </u>
Q35b In calculating whether the cap is reached, do you include successive or repeated placements? Repeated placements means placement in restrictive housing for two or more time periods with 48 hours or less outside of restrictive housing in between placement.

36 What information is provided to prisoners upon entry into restrictive housing? Follows, duration of placement, available programming?	or example
	-
	-
	-
	-
37 Once placed, can prisoners' behavior reduce the length of time in restrictive hou	ising?
O Yes (If yes, please explain how. Additionally, please explain how prisoners are of this option, if at all.)	e informed —
○ No	
38 How often is the restrictive housing status of a prisoner reviewed?	
38a Who reviews the status? Indicate the staff position or title NOT the name.	

Q39c How are mental health visits made?
through cell door with prisoner inside and professional outside
both prisoner and professional inside cell
both prisoner and professional outside cell (please explain where):
other (for example, video, phone, telepsych):
Q40 Of the number of people in restrictive housing (in cell for an average of 22 hours a day or more for 15 days or more) in facilities under your direct control, how many people are in cells without a cellmate?
Q41 Of the number of people in restrictive housing (in cell for an average of 22 hours a day or more for 15 days or more) in facilities under your direct control, how many people are in cells with one or more other prisoners?
Q42 Is there natural light in each cell?
○ Yes
○ No

Q42a For how many hours a day is artificial light turned on:
O 24 hours on
O 16 hours on
Other
Q43 Is there in-cell programming in restrictive housing?
○ Yes
○ No
Q43a How many hours of in-cell programming are provided per week?
<del></del>
Q44 Describe the type of in-cell programming and any limitations on participation.
Q44a
Upload any relevant policy or program documents regarding in-cell programming and limits on

participation.

If you have more than one file, upload a .zip file or email the files to ascalimansurvey@yale.edu.
Q45 Do prisoners in restrictive housing have access to television, music, internet or reading and writing materials?
○ Yes
○ No
Q45a [If yes] What type(s) of television, music, internet or reading and writing materials do they have access to?
Q45b [If yes] Do they have access to tablets?
○ Yes
○ No
Q45c [If yes] Are any reading materials provided free of charge? (If yes, please describe what type and how provided):

		A-
Q46	6 May prisoners in restrictive housing purchase items from the commissary?	
	○Yes	
	○ Yes, with limitations (please explain)	
	○ No	

Q47 How many hours per week are prisoners in restrictive housing out of cell for:

	times per week	hours allotted for each event
Showers		
Individual exercise		
Group exercise		
Individual out-of-cell programming		
Group out-of-cell programming		
Individual meals out-of-cell		
Group meals out-of-cell		
Other individual, unstructured time out-of-cell (not designated for showers, exercise, meals, formal programming)		
Other group, unstructured time out-of-cell (not designated for showers, exercise, meals, formal programming)		
TOTAL TIME OUT-OF-CELL		
Q47a If time out-of-cell varies for p	prisoner or for type of restrictiv	e housing, please explain:

Q47b Where does the exercise take place?
Outdoors
Indoors
Q47c [If outdoors] Is the area for outdoors exercise designated for restrictive housing use?
Q47d [If outdoors] What are the dimensions of the outdoor exercise area?
Q47e [If indoors] Is the indoors exercise area designated for restrictive housing use?
Q47f [If indoors] What are the dimensions of the indoor exercise area?
Q47g [If indoors] Is there natural light in the indoor exercise area?

_	ny limitations on participation. Include any educational, out-of-cell classes.
_	
_	
_	
Q48a	Upload any relevant programming documents.
If you	have more than one file, upload a .zip file or email the files to ascalimansurvey@yale.edu
Q48b expla	Can prisoners in restrictive housing access a GED or other diploma program? Pleas in.
_	
_	
_	

Q49 May prisoners in restrictive housing receive social visits?
○Yes
○ No
Q49a How many social visits are allowed? Specify per day, week, month or other time period:
Q49b Are there any restrictions on social visits? (If yes, please explain):
Q49c Are restrictions on social visits different for prisoners in restrictive housing than for those in the general population? (If yes, please explain):

Q50 May prisoners in restrictive housing make social phone calls?		
○ Yes		
○ No		
Q50a How many social calls are allowed? Specify per day, week, month or other time period:		
Q50b Are there any restrictions on phone calls? (If yes, please explain):		
Q50c Are restrictions on phone calls different for prisoners in restrictive housing than for those in the general population? (If yes, please explain):		

Q51 May prisoners in restrictive housing send and receive physical or electronic social mail?
○ Yes
○ No
Q51a Are there any restrictions on social correspondence for prisoners in restrictive housing? (If yes, please explain):
Q51n Are restrictions on social correspondence different for prisoners in restrictive housing than for those in the general population? (If yes, please explain):

_		
_		
Thes	se questions ask about release from restrictive housing to the community.	
	How many prisoners during calendar year 2018 were released directly from ing to the community without completing a step-down or transition program?	restrictive
than	How many prisoners during calendar year 2018 were released into the community 30 days after having been in restrictive housing, without completing a step-down or ram?	•
	How many prisoners during calendar year 2018 were released from restrictive I ommunity via a step-down or transition program?	housing to

These questions ask about release from restrictive housing to the general population.
Q56 How many prisoners during calendar year 2018 were released directly from restrictive housing to the general population without completing a step-down or transition program?
Q57 How many prisoners during calendar year 2018 were released from restrictive housing to the general population via a step-down or transition program?

Q58 Do you collect data on the number of individuals (whether in general population or restrictive housing) who return to prison after being released to the community (recidivism data)?
○ Yes
○ No
Q58a [If yes] For the following questions, count people who were released from prison during calendar year 2015 and who returned to prison. Count both returns for new convictions and returns for technical violations. Count the number of prisoners released, not the number of releases.
Include only those prisoners who were released from prison because they completed their sentence, were released on parole or probation, or who received conditional release.
People who returned to prison within 12 months should also be counted among those returned to prison within 24 months and within 36 months. People who returned to prison within 24 months should also be counted among those returned to prison within 36 months. The percentage of people who returned to prison within 36 months should thus be greater than both the other two percentages.
Q58b What percentage of people released from prison during calendar year 2015 returned to prison within 12 months?
58c What percentage of people released from prison during calendar year 2015 returned to prison within 24 months?
Q58d What percentage of people released from prison during calendar year 2015 returned to prison within 36 months?

Q58e [If yes] Do you collect data on the number of individuals <b>who were in restrictive housing</b> at any point during their incarceration and who return to prison after being released to the community?
○Yes
○ No
Q58f For the following questions, include individuals who were in restrictive housing at any poin during the incarceration from which they were released in 2015. Include individuals whether they were released directly from restrictive housing to the community or not. Do NOT count individuals who were never in restrictive housing or who were only in restrictive housing during a previous term of incarceration that ended before 2015.
Count both returns for new convictions and returns for technical violations. Count the number or prisoners released, not the number of releases.
Include only those prisoners who were released from prison because they completed their sentence, were released on parole or probation, or who received conditional release.
People who returned to prison within 12 months should also be counted among those returned to prison within 24 months and within 36 months. People who returned to prison within 24 months should also be counted among those returned to prison within 36 months. The percentage of people who returned to prison within 36 months should thus be greater than both the other two percentages.
Q58g What percentage of people who were in restrictive housing and were released from prison during calendar year 2015 returned to prison within 12 months?
Q58h What percentage of people who were in restrictive housing and were released from prison during calendar year 2015 returned to prison within 24 months?
Q58i What percentage of people who were in restrictive housing and were released from prison during calendar year 2015 returned to prison within 36 months?

## The following questions ask about staffing and training for restrictive housing units.

-		
-		
-		
-		
	Do you provide for staff working in restrictive housing additional training or education or tunities beyond the training provided to all staff? (If so, specify)	ona
-	•	
-		
-		
	Do staff in restrictive housing have schedules for work different than those working eral population units? (If so, specify)	in
-		
-		
-		
(61	a Is there a limit on overtime hours in restrictive housing units? (If so, specify)	
-		
-		

				-
				-
				=
				-
Do rest	rictive housing staff receive extra pay or amounts)			
				-
				-
				=
				-
Are oth	er staffing policies different for restric			
 Are oth				-
Are oth				- 
 Are oth				-  - -
Are oth				-  - -
Are oth				-  - -
Are oth				-  - -
Are oth				-  - -
n an id		ne necessary resou		-
n an id	eal situation, if your jurisdiction had the	ne necessary resou	urces, what numl	-

Q65 Do you housing?	collect d	ata on	incidents	ΟT	violence	in	tne	generai	population	and I	ı resti	ictive
O Yes												
○ No												
Q65a How year 2018?	many inc	idents o	f violence	in t	the gene	ral	pop	oulation	have you co	ounted	in cal	endar

Q65b Types of violence counted and the number of incidents in each category **in the general population** in calendar year 2018:

	Leave the box blank if you do not count this type of violence, enter 0 if you do track it and there were zero incidents
Prisoner-on-prisoner assaults	
Prisoner-on-prisoner fights	
Prisoner-on-staff assaults	
Staff-on-prisoner assaults	
Prisoner-on-prisoner sexual violence	
Prisoner-on-staff sexual violence	
Staff-on-prisoner sexual misconduct	
Prisoner-on-prisoner homicides	
Prisoner suicides	
Prisoner self-harm	
Other (Explain)	
Q65c How many incidents of violence <b>in restric</b> 2018?	tive housing have you counted in calendar year

Q65d Types of violence counted and the number of incidents in each category **in restrictive housing** in calendar year 2018:

	Leave the box blank if you do not count this type of violence, enter 0 if you do track it and there were zero incidents
Prisoner-on-prisoner assaults	
Prisoner-on-prisoner fights	
Prisoner-on-staff assaults	
Staff-on-prisoner assaults	
Prisoner-on-prisoner sexual violence	
Prisoner-on-staff sexual violence	
Staff-on-prisoner sexual misconduct	
Prisoner-on-prisoner homicides	
Prisoner suicides	
Prisoner self-harm	
Other (Explain)	

Q66 Upload any research on incidents of violence in restrictive housing. Include both published research as well as any internal agency reporting, if available.

If you have more than one file, upload a .zip file or email the files to ascalimansurvey@yale.edu.

Q67 If you have any research on restrictive housing in your jurisdiction generally, please upload it.

If you have more than one file, upload a .zip file or email the files to ascalimansurvey@yale.edu.

Q68 Upload your restrictive housing policies.

If you have more than one file, upload a .zip file or email the files to ascalimansurvey@yale.edu.

-----

Q69 Since January 1, 2018 have your jurisdiction's restrictive housing policies changed for any of the following?

	Please check any of the categories for which policies have changed
	Criteria for placement
	Length of time placed
	Review of placement
	Time out of cell
	Programming
	Release from restrictive housing
	Data collection
	Use of restrictive housing based on age of prisoner
	Use of restrictive housing for prisoners with serious mental illness
	Use of restrictive housing for pregnant prisoners
	Use of restrictive housing for transgender prisoners
Q69a [Fo 2018?	r any of the categories checked] What was the policy on [category] before January 1,
-	ve more than one file, upload a .zip file or email the files to ascalimansurvey@yale.edu. ly, you can paste the text of any policy below.
Q69b Ho	w did the policy on [category] change?.

/ 569¢ —	Why did you change the policy on [category]?	-
_		-
_		-
 Q69d \	When was the change put into place?	
		-
		-
 Q69e∃	Does the change affect only certain facilities within your jurisdiction?	
		-
		<del>.</del> -

	mplementation.
_	our jurisdiction studied the impact of restrictive housing policy changes on any of the your jurisdiction? Please select all that apply:
	Incidents of prisoner self-harm
	Incidents of use of force
	Prisoner morale
	Prisoner morale  Staff morale
	Staff morale
	Staff morale Staff well-being and/or safety

Q72 Upload a	any research on the areas selected.
If you have m	ore than one file, upload a .zip file or email the files to ascalimansurvey@yale.edu.
-	ur jurisdiction have future plans to study policy changes and their impact on any of Plf so, please select all that apply.
	Incidents of prisoner self-harm
	Incidents of use of force
	Prisoner morale
	Staff morale
	Staff well-being and/or safety
	Prisoner success in the general population, programs, or other activities
	Prisoner success in returning to communities
	Other (please explain)
Q73a Upload	any research proposals regarding the areas selected.
If you have m	ore than one file, upload a .zip file or email the files to ascalimansurvey@yale.edu.
Q73b If you d	lo not have a file to upload regarding any areas selected, please briefly summarize research.

f you have more than one file, upload a .zip file or email the files to ascalimansurvey@yale.edu.
Q74 In August 2016, the American Correctional Association (ACA) adopted new standards on restrictive housing. Has your jurisdiction reviewed its restrictive housing policies <b>since August</b> 2016?
○ Yes
○ No
Q74a Date policies on restrictive housing were last reviewed
Q75 Does your jurisdiction rely on the ACA standards when developing policies?
O Yes (please explain)
O No (please explain)
Q76 <b>Since August 2016</b> , has your jurisdiction implemented the requirements of ACA standard 4-RH-0034, which prohibits the use of extended restrictive housing (more than 29 continuous days) for offenders under the age of 18?
O Yes (please explain and indicate when the requirements were implemented)
○ No
O We have substantially implemented this policy, with exceptions (please explain)
This was our jurisdiction's policy before the 2016 ACA revisions

4-RH-0033, which prohibits the use of extended restrictive housing (more than 29 continuous days) for females determined to be pregnant?
O Yes (please explain and indicate when the requirements were implemented)
○ No
We have substantially implemented this policy, with exceptions (please explain)
<ul> <li>This was our jurisdiction's policy before the 2016 ACA revisions</li> </ul>
Q78 <b>Since August 2016</b> , has your jurisdiction implemented the requirements of ACA standard 4-RH-0031, which prohibits the use of extended restrictive housing (more than 29 continuous days) for inmates diagnosed as seriously mentally ill?
O Yes (please explain and indicate when the requirements were implemented)
○ No
O We have substantially implemented this policy, with exceptions (please explain)
This was our jurisdiction's policy before the 2016 ACA revisions
Q79 <b>Since August 2016</b> , has your agency implemented ACA standard 4-RH-0030, whereby it attempts not to release inmates from restrictive housing directly into the community?
O Yes (please explain and indicate when the requirements were implemented)
○ No
We have substantially implemented this policy, with exceptions (please explain)
This was our jurisdiction's policy before the 2016 ACA revisions
Q80 Please describe any other policies your jurisdiction has revised <b>since August 2016</b> in light of the ACA's revised restrictive housing standards.

Q77 Since August 2016, has your jurisdiction implemented the requirements of ACA standard

Q81 complete and you will not be able to submit any more answers.

O I understand, and I have completed the survey.

Appendix B: Total Prison Populations for Responding and Non-Responding Jurisdictions

Jurisdiction	Total Population under	Population under Direct	Difference: Incarcerated
	Legal Control as of	Control and Reported in the	Population Not Counted by
	December 2019 <sup>1</sup>	2019 CLA-Liman Survey	the 2019 CLA-Liman Survey
Alabama	28,266	20,673	7,593
Alaska	4,475	0 (No Survey Response)	4,475
Arizona	42,441	42,312	129
Arkansas	17,759	15,618	2,141
California	125,507	0 (No Survey Response)	125,507
Colorado	19,714	14,397	5,317
Connecticut	12,293	12,942	-649
Delaware	5,692	4,568	1,124
Florida	96,009	0 (No Survey Response)	96,009
Georgia	55,556	44,073	11,483
Hawaii	5,179	3,561	1,618
Idaho	9,437	9,196	241
Illinois	38,259	38,425	-166
Indiana	27,268	27,182	86
Iowa	9,282	0 (No Survey Response)	9,282
Kansas	10,177	10,005	172
Kentucky	23,436	11,465	11,971
Louisiana	31,609	14,269	17,340
Maine	2,205	2,289	-84
Maryland	18,686	19,059	-373
Massachusetts	8,205	8,424	-219
Michigan	38,053	0 (No Survey Response)	38,053
Minnesota	9,982	8,565	1,417
Mississippi	19,469	9,436	10,033
Missouri	26,044	27,924	-1,880

\_

<sup>&</sup>lt;sup>1</sup> These data are from the Vera Institute of Justice. *See* Jacob Kang-Brown, Chase Montagnet, Eital Schattner-Elmaleh, & Olivia Hinds, *People in Prison in 2019* at 2 (Vera Institute of Justice May 2020), https://www.vera.org/downloads/publications/people-in-prison-in-2019.pdf.

Montana	3,811	1,650	2,161
Nebraska	5,651	5,499	152
Nevada	12,942	0 (No Survey Response)	12,942
New Hampshire	2,622	0 (No Survey Response)	2,622
New Jersey	18,613	0 (No Survey Response)	18,613
New Mexico	6,723	0 (No Survey Response)	6,723
New York	44,284	46,066	-1,782
North Carolina	34,510	34,869	-359
North Dakota	1,794	1,775	19
Ohio	49,762	48,887	875
Oklahoma	25,712	17,531	8,181
Oregon	15,755	14,734	1,021
Pennsylvania	45,875	45,174	701
Rhode Island	2,740	2,663	77
South Carolina	18,608	18,401	207
South Dakota	3,804	3,858	-54
Tennessee	26,539	21,817	4,722
Texas	158,820	143,473	15,347
Utah	6,731	0 (No Survey Response)	6,731
Vermont	1,608	1,479	129
Virginia	36,091	29,994	6,097
Washington	19,160	17,668	1,492
West Virginia	6,800	0 (No Survey Response)	6,800
Wisconsin	23,956	23,539	417
Wyoming	2,479	2,013	466
Federal Prison System	175,116	0 (No Survey Response)	175,116
Total	1,435,509	825,473	610,036

Appendix C: Definitions of "Serious Mental Illness" by Jurisdiction

Jurisdiction	Definition of "Serious Mental Illness"
Alabama	"Psychotic Disorders, Bipolar Disorders, Major Depressive Disorder: any diagnosed mental disorder
	(excluding substance use disorders) associated with serious impairment in psychological, cognitive, or
	behavioral functioning that substantially interferes with the person's ability to meet the ordinary demands of
	living and requires an individualized treatment plan by a qualified mental health professional(s)."
Arizona	A patient is designated as SMI if according to a licensed mental health clinician or provider, the patient
	possesses 1) a qualifying mental health diagnosis; and 2) a severe functional impairment directly relating to
	his/her mental illness.
Arkansas	SMI are defined as Psychotic, Bipolar and Major Depressive Disorders and any other diagnosed mental
	disorder (excluding substance use disorders) associated with serious behavioral impairment as evidenced by
	examples of acute decompensation, self-injurious behaviors and mental health emergencies that require an
	individualized treatment plan by a qualified mental health professional.
Colorado	Serious Mental Illness: The current diagnosis of any of the following DSM diagnoses accompanied by the P-
	code qualifier of M, denoting the presence of a major mental disorder: schizophrenia, schizoaffective disorder,
	delusional disorder, schizophreniform disorder, brief psychotic disorder, substance-induced psychotic disorder
	(excluding intoxication and withdrawal), unspecified schizophrenia spectrum and other psychotic disorder
	(previously psychotic disorder not otherwise specified), major depressive disorders, and bipolar disorders.
	Offenders, regardless of diagnosis, indicating a high level of mental health needs based upon high symptom
	severity and/or high resource demands, which demonstrate significant impairment in their ability to function
	within the correctional environment.
<u> </u>	CDOC Clinical Services uses the Diagnostic and Strategic Manual of Mental Disorder, Fifth Edition (DSM-5)
Connecticut	An inmate with a Mental Health (MH) score of 4-5 is considered our highest mental health level. This level
	can change and be lowered. If an inmate is placed as a MH 4-5 they are usually prescribed a psychoactive
D 1	drug. The raising or lowering of a score can only be done by a mental health professional.
Delaware	Delaware defines serious mental illness (SMI) as:
	Serious Mental Illness: Serious Mental Illness (SMI) includes offenders diagnosed with the following:
	- Schizophrenia
	- Delusional Disorder
	- Schizophreniform Disorder
	- Schizoaffective Disorder

- Brief Psychotic Disorder
- Substance-Induced Psychotic Disorder (excluding intoxication or withdrawal)
- Other Specified Psychotic Disorder
- Major depressive Disorder
- Bipolar I, II Disorder
- Other Specified Bipolar Disorder
- Anyone who has Significant Functional Impairment (SFI) due to their mental health (including severe Personality Disorders, Intellectual Disability, Autism Spectrum Disorder), defined as:
<ul> <li>Self-harming behaviors (i.e., cutting, head-banging, suicide attempts, self-strangulation, self-mutilation, swallowing foreign bodies, etc.)</li> </ul>
<ul> <li>Demonstrated difficulty in his or her ability to engage in activities of daily living (i.e., eating, grooming, participation in recreation, etc.)</li> </ul>
<ul> <li>Demonstrated a pervasive pattern of dysfunctional or disruptive social interactions (i.e., social isolation, bizarre behavior, disruptive behavior, etc.).</li> </ul>
(Disability Law Center, Inc. v. Massachusetts Department of Correction, et. al., Civil Action No. 07-10463)
A substantial disorder of thought or mood which significantly impairs judgment, behavior, capacity to
recognize reality or cope with the ordinary demands of life within the prison environment and which is
manifested by pain or disability. Serious mental illness requires a mental health diagnosis, prognosis and
treatment by appropriate mental health staff.
We have adopted the definition used by ACA to describe serious mental illness.
Offenders with the two highest levels of mental health care. This Level of Care is for inmates with the most
profound and debilitating impairments in functioning. These inmates may present a serious risk to the safety of
self and others. Inmates at this level of care must be housed in a specialized Acute Mental Health Unit unless
imminent security issues exist, in which case alternative placement must be approved by the chief psychologist
and facility head.
Seriously Mentally Ill (SMI) "shall mean an offender who as a result of a medical disorder as defined in the
current edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) of the American
Psychiatric Association, exhibits impaired emotional, cognitive or behavioral functioning that interferes
seriously with his or her ability to function adequately except with supportive treatment or services. These
individuals also must either currently have, or have had within the past year, a diagnosed mental disorder, or
must currently exhibit significant signs and symptoms of a mental disorder. A diagnosis of alcoholism or drug
addiction, developmental disorders, or any form of sexual disorder shall not, by itself, render an individual
seriously mentally ill. The combination of either a diagnosis or significant signs and symptoms of a mental

	disorder and an impaired level of functioning, as outlined above, is necessary for one to be considered Seriously Mentally III. Whether a person meets the criteria of Seriously Mentally III is initially determined by a comprehensive professional clinical assessment by an IDOC mental health professional in order to 1) determine if the individual has a diagnosable mental disorder as defined by the current DSM and 2) to establish the personal overall level of functioning. The appropriate threshold to establish level of functioning that equates to a Serious Mental Illness includes serious impairments in capacity to recognize reality, in work environments, school or learning environments, frequent problems with authority/rules, occasional combative behavior, serious impairments in relationships with friends and family, serious impairments in judgment, thinking and mood and serious impairment due to anxiety. These aforementioned disturbances must be observed in at least one of the areas listed above."
Indiana	<ul> <li>a. Prisoners determined to have a current diagnosis or recent significant history of schizophrenia, delusional disorder, schizophreniform disorder, schizoaffective disorder, brief psychotic disorder, substance-induced psychotic disorder (excluding intoxication and withdrawal), undifferentiated psychotic disorder, bipolar I or II disorders;</li> <li>b. Prisoners diagnosed with any other validated mental illness that is clinically severe, based on evidence-based standards, and that results in significant functional impairment; and</li> <li>c. Prisoners diagnosed with an intellectual or developmental disability or other cognitive disorder that results in a significant functional impairment.</li> </ul>
	<ul> <li>d. As used above: <ul> <li>i. "Recent significant history" refers to a diagnosis made at any time in the last 12 months.</li> <li>ii. "Significant functional impairment" includes one of the following as determined by qualified mental health staff: <ul> <li>Within the previous 6 months, the prisoner has either made a suicide attempt that mental health staff considers serious, inflicted self-injury that mental health staff considers serious, or both;</li> <li>The prisoner has demonstrated difficulty in his/her ability to engage in activities of daily living including: <ul> <li>Eating</li> </ul> </li> </ul> </li> </ul></li></ul>
	<ul> <li>Grooming and/or personal hygiene</li> <li>Maintenance of housing area</li> <li>Participation in recreation</li> <li>Ambulation</li> </ul>

	<ul> <li>The prisoner has demonstrated a pervasive pattern of dysfunctional or disruptive social</li> </ul>
	interactions, bizarre or disruptive behavior, etc., as a result of mental illness.
	iii. A misdiagnosis does not qualify as a diagnosis or determination of mental illness for purposes
	of this settlement, once the error has been determined by a qualified mental health professional.
Kansas	Mental health is diagnosis with mental health professional with use of the DSM-IV then given a number to
	categorize them from 1 to 6. 4 thru 6 being serious mental health disorders.
Kentucky	0 - No treatment needs
	1 - Mild level mental health treatment needs
	2 - Moderat level mental health treatment needs
	3 - Serious functional impairment due to mental health
	4 - Severe functional impairment due to mental health
	Levels 3 and 4 fall under the definition of SMI.
Louisiana	SMI is defined as a confirmed diagnosis of at least on of the following:
	Major Depressive Disorder (MDD), Schizophrenia, Schizoaffective Disorder, Bipolar Disorder, Unspecified
	Schizophrenia Spectrum or Severe Anxiety Disorder. A SMI diagnosis shall be made only by a mental health
	care practitioner/provider/professional.
Maine	Serious mental illness is determined by a clinician, utilizing the DSM V.
	Diagnoses classified as SMI include all schizophrenia spectrum disorders (schizophrenia, schizoaffective,
	other psychotic disorders), severe bipolar disorder, and severe and persistent major depressive disorder
	(treatment resistant and/or with psychotic features).
Maryland	COMAR 10.21.17.02 (76)
	(76) "Serious mental illness" means a mental disorder that is:
	(a) Manifest in an individual 18 years old or older;
	(b) Diagnosed, according to a current diagnostic classification system that is recognized by the Secretary as:
	(i) Schizophrenic disorder;
	(ii) Major affective disorder;
	(iii) Other psychotic disorder; or
	(iv) Borderline or schizotypal personality disorder, with the exclusion of an abnormality that is manifested
	only by repeated criminal or otherwise antisocial conduct; and
	(c) Characterized by impaired functioning on a continuing or intermittent basis, for at least 2 years, and
L	1 ( )

(ii) Social behavior that results in interventions by the mental health system; (iii) Inability, due to cognitive disorganization, to procure financial assistance to support living in the community; (iv) Severe inability to establish or maintain a personal support system; or (v) Need for assistance with basic living skills.  Massachusetts  A current or recent diagnosis by a qualified mental health professional of one or more of the following disorders described in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders: (a) schizophrenia and other psychotic disorders; (b) major depressive disorders; (c) all types of bipolar disorders; (d) a neurodevelopmental disorder, dementia or other cognitive disorder; (e) any disorder commonly characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		includes at least three of the following:
(iii) Inability, due to cognitive disorganization, to procure financial assistance to support living in the community; (iv) Severe inability to establish or maintain a personal support system; or (v) Need for assistance with basic living skills.  Massachusetts  A current or recent diagnosis by a qualified mental health professional of one or more of the following disorders described in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders: (a) schizophrenia and other psychotic disorders; (b) major depressive disorders; (c) all types of bipolar disorders; (d) a neurodevelopmental disorder, dementia or other cognitive disorder; (e) any disorder commonly characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		(i) Inability to maintain independent employment;
community; (iv) Severe inability to establish or maintain a personal support system; or (v) Need for assistance with basic living skills.  Massachusetts  A current or recent diagnosis by a qualified mental health professional of one or more of the following disorders described in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders: (a) schizophrenia and other psychotic disorders; (b) major depressive disorders; (c) all types of bipolar disorders; (d) a neurodevelopmental disorder, dementia or other cognitive disorder; (e) any disorder commonly characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
(iv) Severe inability to establish or maintain a personal support system; or (v) Need for assistance with basic living skills.  Massachusetts  A current or recent diagnosis by a qualified mental health professional of one or more of the following disorders described in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders: (a) schizophrenia and other psychotic disorders; (b) major depressive disorders; (c) all types of bipolar disorders; (d) a neurodevelopmental disorder, dementia or other cognitive disorder; (e) any disorder commonly characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
(v) Need for assistance with basic living skills.  Massachusetts  A current or recent diagnosis by a qualified mental health professional of one or more of the following disorders described in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders: (a) schizophrenia and other psychotic disorders; (b) major depressive disorders; (c) all types of bipolar disorders; (d) a neurodevelopmental disorder, dementia or other cognitive disorder; (e) any disorder commonly characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
Massachusetts  A current or recent diagnosis by a qualified mental health professional of one or more of the following disorders described in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders: (a) schizophrenia and other psychotic disorders; (b) major depressive disorders; (c) all types of bipolar disorders; (d) a neurodevelopmental disorder, dementia or other cognitive disorder; (e) any disorder commonly characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
disorders described in the 5th edition of the Diagnostic and Statistical Manual of Mental Disorders: (a) schizophrenia and other psychotic disorders; (b) major depressive disorders; (c) all types of bipolar disorders; (d) a neurodevelopmental disorder, dementia or other cognitive disorder; (e) any disorder commonly characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
schizophrenia and other psychotic disorders; (b) major depressive disorders; (c) all types of bipolar disorders; (d) a neurodevelopmental disorder, dementia or other cognitive disorder; (e) any disorder commonly characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.	<b>Aassachusetts</b>	
(d) a neurodevelopmental disorder, dementia or other cognitive disorder; (e) any disorder commonly characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
characterized by breaks with reality or perceptions of reality; (f) all types of anxiety disorders; (g) trauma an stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
stress or related disorders; or (h) severe personality disorders; or a finding by a qualified mental health professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
professional that the inmate is at serious risk of substantially deteriorating mentally or emotionally while confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.  Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		
Minnesota  Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		confined in Restrictive Housing, or already has so deteriorated while confined in Restrictive Housing, such
other diagnosed mental disorder (excluding substance use disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		that diversion or removal is deemed to be clinically appropriate by a qualified mental health professional.
impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.	<b>Ainnesota</b>	Serious Mental Illness (SMI)-psychotic disorder, bipolar disorder, and major depressive disorder; and any
person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a mental health professional.		other diagnosed mental disorder (excluding substance use disorders) currently associated with serious
mental health professional.		impairment in psychological, cognitive, or behavioral functioning that substantially interfered with the
		person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a
Mississippi A clinical disorder that is a disorder of thought, mood or anxiety included under Axis I of the DSM IV (i.e.		
1	Mississippi	A clinical disorder that is a disorder of thought, mood or anxiety included under Axis I of the DSM IV (i.e.,
schizophrenia, major depression, bipolar disorder).		schizophrenia, major depression, bipolar disorder).
Missouri The department does not define "serious mental illness" in policy. All offenders classified MH-3 and above	Missouri	The department does not define "serious mental illness" in policy. All offenders classified MH-3 and above
(Form 931-0730 Classification Analysis-Mental Health Needs) are enrolled in mental health chronic care and		(Form 931-0730 Classification Analysis-Mental Health Needs) are enrolled in mental health chronic care and
are offenders with a serious mental illness.		are offenders with a serious mental illness.
Our working definition is that defined by Substance Abuse and Mental Health Services		Our working definition is that defined by Substance Abuse and Mental Health Services
Administration(SAMHSA, Department of Health and Human Services, https://www.samhsa.gov/disorders):		
Serious mental illness among people ages 18 and older is defined at the federal level as having, at any time		
during the past year,		
a diagnosable mental, behavior, or emotional disorder that causes serious functional impairment that	i i	
substantially interferes with or limits one or more major life activities.		a diagnosable mental, behavior, or emotional disorder that causes serious functional impairment that

Mental Disorder- Exhibiting impaired emotional, cognitive, or behavioral functioning that interferes seriously with an individual's ability to function adequately expert with supportive treatment or services. The individual
with an individual's ability to function adequately except with supportive treatment or services. The individual
also must: a) currently have or have had within the past year a diagnosed mental disorder, and b) currently
exhibit significant signs and symptoms of a mental disorder
Nebraska defines serious mental illness in Nebraska Revised Statute §44-792(5)(b): Serious mental illness
means, on and after January 1, 2002, any mental health condition that current medical science affirms is
caused by a biological disorder of the brain and that substantially limits the life activities of the person with the
serious mental illness. Serious mental illness includes, but is not limited to (i) schizophrenia, (ii)
schizoaffective disorder, (iii) delusional disorder, (iv) bipolar affective disorder, (v) major depression, and (vi)
obsessive compulsive disorder.
An inmate has a serious mental illness when he or she has been
determined by a mental health clinician to meet at least one of the
following criteria:
(i) he or she has a current diagnosis of, or is diagnosed at the
initial or any subsequent assessment conducted during the inmate's
segregated confinement with, one or more of the following types of Axis
I diagnoses, as described in the most recent edition of the Diagnostic
and Statistical Manual of Mental Disorders, and such diagnoses shall be
made based upon all relevant clinical factors, including but not limited
to symptoms related to such diagnoses:
(A) schizophrenia (all sub-types),
(B) delusional disorder,
(C) schizophreniform disorder,
(D) schizoaffective disorder,
(E) brief psychotic disorder,
(F) substance-induced psychotic disorder (excluding intoxication and
withdrawal),
(G) psychotic disorder not otherwise specified,
(H) major depressive disorders, or
(I) bipolar disorder I and II;
(ii) he or she is actively suicidal or has engaged in a recent,
serious suicide attempt;
(iii) he or she has been diagnosed with a mental condition that is

North Carolina	frequently characterized by breaks with reality, or perceptions of reality, that lead the individual to experience significant functional impairment involving acts of self-harm or other behavior that have a seriously adverse effect on life or on mental or physical health;  (iv) he or she has been diagnosed with an organic brain syndrome that results in a significant functional impairment involving acts of self-harm or other behavior that have a seriously adverse effect on life or on mental or physical health;  (v) he or she has been diagnosed with a severe personality disorder that is manifested by frequent episodes of psychosis or depression, and results in a significant functional impairment involving acts of self-harm or other behavior that have a seriously adverse effect on life or on mental or physical health; or  (vi) he or she has been determined by a mental health clinician to have otherwise substantially deteriorated mentally or emotionally while confined in segregated confinement and is experiencing significant functional impairment indicating a diagnosis of serious mental illness and involving acts of self-harm or other behavior that have a serious adverse effect on life or on mental or physical health.  Psychotic disorders, Bi-Polar, and any diagnosed mental disorder (excluding substance abuse disorder) currently associated with serious impairment in psychological, cognitive or behavioral functioning that
	substantially interferes with the person's ability to meet the ordinary demands of living and requires an individualized treatment plan by a qualified Mental Health Processional(s).  M2 and above is inclusive of all inmates diagnosed with a mental illness receiving bother psychological and psychiatric services.
	We use the DSM 5 and ICD-10
North Dakota	People found to have current symptoms or who are currently receiving treatment for the following types of Diagnostic and Statistical Manual, Fifth Edition diagnoses that cause or have caused significant functional impairment: Delusional Disorder, Psychotic Disorders of all types including Schizophrenia, Major Depressive Disorders, Bipolar I and II Disorders, Obsessive Compulsive Disorder (OCD), Panic Disorder, Post Traumatic Stress Disorder (PTSD) or Borderline Personality.

Ohio	Adults with a serious mental illness are persons who are age eighteen (18) and over, who currently or at any time during the past year, have a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the most current Diagnostic and Statistical Manual of Mental Disorders and that has resulted in functional impairment which substantially interferes with or limits one or more major life activities. These disorders have episodic, recurrent, or persistent features; however, they vary in terms of severity and disabling effects.
Oklahoma	OP-140201, Attachment B, November 1, 2006, levels B through D
	MH-B (Baker)  • *Requires psychotropic medications.  • *Current major diagnosis of Psychotic Disorder, Bi-Polar, or Major Mood Disorder.  • *Requires scheduled periodic to frequent clinical monitoring. **  • *Requires prescribed, scheduled treatment program or therapy (Which may not include psychotropic medication). **  • *Suicide attempts/ideation within last twelve months and/or current suicide ideation.  • *Needs exemption from random housing assignment, although may be housed in regular housing as appropriate. **  • *Self-injurious behavior within the last 12 months.  • Moderate to severe adjustment and/or impulse control problems.  • Can be seen on outpatient basis.
	MH-C1 (Charlie 1)  *Requires special intermediate housing unit with intensive treatment track(s) to be able to adjust to incarceration. **  *Adjustment dependent upon special arrangements administrative overrides/housing. **  *History of cycling or consistent non-compliance with prescribed treatment with resultant behavioral and/or mental deterioration.  *Requires specialized intensive treatment track(s) and release planning to be able to function upon release to community. **  Needs exemption from random housing assignment.
	MH-C2 (Charlie 2)

	• *Developmentally disabled and/or significant cognitive deficits.
	• *Requires special intermediate housing unit with intensive treatment tracks to be
	able to adjust to incarceration. **
	• *Requires specialized intensive treatment track(s) and release planning to be able to
	function upon release to community. **
	Needs exemption from random housing assignment.
	MH-D (Delta)
	• *Due to mental illness, is a danger to self or others or is grossly impaired in ability for
	self-care, and this situation is predicted to last more than 72 hours.**
	• *Requires 24 hour medical monitoring. **
	• Needs exemption from random housing assignment.
Oregon	Serious Mental Illness: An inmate that, in the judgment of the department, because of a mental disorder is one
	or more of the following:
	(a) Dangerous to self or others;
	(b) Unable to provide for basic personal needs and would likely benefit from receiving additional care for the
	inmate's health or safety;
	(c) Chronically mentally ill, as defined in ORS 426.495; or
	(d) Will continue, to a reasonable medical probability, to physically or mentally deteriorate so to become a
	person described in (c) above unless treated.
Pennsylvania	Inmates are determined to be SMI by the Psychiatric Review Team (PRT). In order to be diagnosed as SMI
	the inmate need to have a current diagnosis or a recent significant history of any of the DSM5 diagnosis (using
	ICD 10 codes and letter tags).
Rhode Island	The Rhode Island Department of Corrections defines serious and persistent mental illness (SPMI) as being a
	condition that affects persons aged 18 or older who currently or at any time in the past year, have had a
	diagnosed mental, behavioral or emotional disorder of sufficient duration to meet criteria specified within
	DSM-V (with the exception of substance use disorders and developmental disorders) that has resulted in
	significant functional impairment that has occurred on either a continuous or intermittent basis.
	The qualifying diagnoses recognized by our jurisdiction are as follows: Schizophrenia, Schizoaffective
	Disorder, Other Specified Schizophrenia Spectrum and other Psychotic Disorders, Bipolar Disorder(s),
	Delusional Disorder, Major Depressive Disorder, Panic Disorder, Agoraphobia, Post Traumatic Stress
	Disorder, Obsessive Compulsive Disorder and Borderline Personality Disorder.
	Disorder, Obsessive Compulsive Disorder and Borderinie reisonality Disorder.

There must be evidence of extended impairment in functioning due to the qualifying mental illness. This includes the following:

- 1. Extended Impairment in Functioning due to Mental Illness
  - a. Documentation that the individual has experienced two of the following four functional limitations due to a designated mental illness over the past 12 months on a continuous or intermittent basis:
    - i. Marked difficulties in self-care (personal hygiene, diet, clothing avoiding injuries, securing health care or complying with medical advice).
    - ii. Marked restriction of activities of daily living (maintaining a residence, using transportation, day to day money management, accessing community services).
    - iii. Marked difficulties in maintaining social functioning (establishing and maintaining social relationships, interpersonal interactions with primary partner, children or other family members, friends, neighbors, social skills, compliance with social norms, appropriate use of leisure time).
    - iv. Frequent deficiencies of concentration, persistence or pace resulting in failure to complete tasks in a timely manner (ability to complete tasks commonly found in work settings or in structured activities that take place in home or school settings, individuals may exhibit limitations in these areas when they repeatedly are unable to complete simple tasks within an established time period, make frequent errors in tasks, or require assistance in the completion of tasks).
    - v. Required inpatient psychiatric hospitalization and treatment more intensive than outpatient care at least once in his/her lifetime
    - vi. Experienced at least one episode of continuous, structured supportive residential care, lasting for at least 2 months (i.e. group home)
    - vii. Requires public financial assistance
    - viii. Shows a severe inability to establish and maintain a personal support system, as evidenced by extreme withdrawal and social isolation
    - ix. Exhibits inappropriate social behavior not easily tolerated in the community, which results in a demand for intervention by mental health or judicial systems

Or

2. Reliance on Psychiatric Treatment, Rehabilitation and Supports
A documented history shows that the individual at some prior time met the threshold for 3 (above), but

	the symptoms and/or functioning problems are currently attenuated by medication or psychiatric rehabilitation and supports. Medication refers to psychotropic medications which may control certain primary manifestations of mental disorder; e.g. hallucinations, but may or may not affect functional limitations imposed by the mental disorder. Psychiatric rehabilitation and supports refer to highly structured and supportive settings (e.g. Congregate or Apartment Treatment Programs) which may greatly reduce the demands placed on the individual and thereby, minimize overt symptoms and signs of the underlying mental disorder.
South Carolina	Schizophrenia, Schizoaffective Disorder, Cognitive Disorder, Paranoia, Major Depression, Bipolar Disorder, Psychotic Disorder, or any other mental condition that results in significant functional impairment including the ability to perform activities of daily living, extreme impairment of coping skills, or behaviors that are bizarre an/or dangerous to self or others.
South Dakota	An inmate who meets the criteria for SMI (Seriously Mentally III) for the purpose of our policy is defined as an inmate who has a chronic mental illness by history, diagnosis, or prognosis and requires repeated and prolonged periods of mental health care, and who exhibits persistent disability or impairment in the prison.
Tennessee	A substantial disorder of thought or mood that significantly impairs judgment, behavior, capacity to recognize reality or cope with the ordinary demands of life within the correctional environment and is manifested by substantial impairment or disability. Serious mental illness requires a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the most current Diagnostic and Statistical Manual (DSM) or International Classification of Disease (ICD) equivalent (and subsequent revisions) in accordance with an individualized treatment plan.
Texas	As defined by the American Correctional Association Adult Correctional Institutions Manual 5th edition. Serious mental illness is defined as any diagnosed mental disorder (excluding substance abuse disorders) currently associated with serious impairment in psychological, cognitive, or behavioral functioning that substantially interferes with person's ability to meet the ordinary demands of living and requires an individual treatment plan by a qualified mental health professional(s).
Vermont	Serious Functional Impairment (SFI) is defined as: a) A substantial disorder of thought, mood, perception, orientation, or memory, any of as diagnosed by a qualified mental health professional, which grossly substantially impairs judgment, behavior, capacity to recognize reality, or ability to meet the ordinary demands of life, and which substantially impairs the ability to function within the correctional setting or b) a developmental disability, traumatic brain injury or other organic brain disorder, or various forms of dementia or other neurological disorder as diagnosed by a qualified mental health professional, which substantially impairs the ability to function in the correctional setting

Washington	A substantial disorder of thought or mood which significantly impairs judgment, behavior, capacity to
	recognize reality or cope with the ordinary demands of life within the prison environment and is manifested by
	substantial pain or disability. Serious mental illness requires a mental health diagnosis, prognosis and
	treatment, as appropriate, by mental health staff. It is expressly understood that this definition does not include
	inmates who are substance abusers, substance dependent, including alcoholics and narcotics addicts, or
	persons convicted of any sex offense, who are not otherwise diagnosed as seriously mentally ill.
West Virginia	WVDCR uses NCCHC definition of SMI-which states that those individuals that have basic psychotic or
	mood disorders would be classified as having a serious mental illness.
Wisconsin	Our definition of serious mental illness includes any of the following:
	- A current diagnosis of, or being in remission from, the following conditions: Schizophrenia, Delusional
	Disorder, Schizophreniform Disorder, Schizoaffective Disorder, Other Specified (and Unspecified)
	Schizophrenia Spectrum and Other Psychotic Disorder, Major Depressive Disorder, Bipolar I Disorder, or
	Bipolar II Disorder.
	- Current or recent symptoms of the following conditions: Brief Psychotic Disorder, Substance / Medication-
	Induced Psychotic Disorder, head injury or other neurological impairments that result in behavioral or
	emotional dyscontrol, chronic and persistent mood or anxiety disorders, or other conditions that lead to
	significant functional disability.
	- Primary personality disorder that is severe, accompanied by significant functional impairment, and subject to
	periodic decompensation; i.e., psychosis, depression, or suicidality. Excluded from this classification are
	inmates who have a primary diagnosis of Antisocial Personality Disorder and whose behavior is primarily the
	result of targeted goals rather than impairment from diagnosed mental illness.
Wyoming	Psychotic, Bipolar, and Major Depressive Disorders and any other diagnosed mental disorder (excluding
	substance abuse disorders) currently associated with serious behavioral impairment as evidenced by examples
	of acute decompensation, self injurious behaviors, multiple major rule infractions and mental health
	emergencies that require an individualized treatment plan by a qualified mental health professional.

## **Appendix D: Identifying Transgender Prisoners**

Jurisdiction	How Prisoners are Identified as Transgender
Alabama	self-identification
Arizona	self-identification and medical evaluation and records
Arkansas	The Intake Staff will refer any inmate presenting with symptoms of Gender Dysphoria to the Gender Dysphoria Management and Treatment Committee for determining the appropriate treatment referrals for identified Gender Dysphoria and Intersex Inmates.
Colorado	Offenders must identify themselves as transgender before Clinical Services will be involved. Once they have identified themselves as such, they submit a "kite" to mental health or the psychiatrist for treatment.
Connecticut	Connecticut has implemented Administrative Directive 8.17, Gender Non-Conforming as the governing policy. Within this policy there are multiple avenues to identify gender non-conforming needs. Some include self-reporting, mental health input, review of medical records (including community records and other agency documentation.
Delaware	Prisoners identify as transgender by self-reporting. See policy 11-E-14.
Georgia	self-identification
Hawaii	Medical records and birth certificates
Idaho	By our current policy, we only track Gender Dysphoria. We have 39 in our system. Those are identified by self-identification medical considerations. Transgendered is self-identified.
Indiana	self-reported
Kansas	We don't track them.
Louisiana	A person whose gender identity (i.e., internal sense of feeling male or female) is different from the persons sex at birth. Transgender status is based on an individuals self-report of identifying characteristics.
Maine	Prisoners are identified as potentially transgender through our intake and assessment process (if documentation or report indicates such), through our medical processes, or through self-report; If, at any time during any of these processes, the prisoner self-reports/identifies as transgender, indicates a history of being perceived as transgender, has accompanying documentation or reports from other CJ agencies, medical services, etc. indicating they are transgender, or has a condition making gender unclear, they are referred to the Chief Administrative Officer for an immediate housing decision, and then are reviewed by an assigned multi-disciplinary team to consider facility housing, medical and mental health needs, and other appropriate/relevant topics.
Maryland	A person whose gender identity (i.e. internal sense of feeling male or female) is different from a person's assigned sex at birth.

Massachusetts	Gender expression is the sole province of the individual. Therefore, self-identification for assessment of needs is required.
	- Gender Identity: A person's identity, appearance or behavior as it relates to gender, whether or not that gender identity, appearance or behavior is different from that traditionally associated with the person's physiology or assigned sex at birth. Gender identity may be verified by providing evidence which may include, but is not limited to, medical history, mental health history, care or treatment of the gender identity, consistent and uniform assertion of the gender identity, or any other evidence that the gender identity is sincerely held as part of a person's core identity; provided, however, that gender identity shall not be asserted for any improper purpose.
Minnesota	26 Transgender individuals
Mississippi	Transgender offenders self identify and medical confirms.
Missouri	Each offender who is transgender should notify staff they identify as a transgender.
	The information is forwarded to the Site PREA Coordinator who sets up a meeting
	which includes the following staff: Chief of Mental Health Services, Medical Services
	Administrator and PREA Staff. They interview the offender and initiate the process.
Montana	self identification
Nebraska	Transgender inmates are defined as inmates who have self-identified as transgender and who have a current mental health diagnosis for Gender Dysphoria
New York	self reported or Gender Dysphoric Diagnosis inmates self-identity during intake processing interviews or through risk-screening interviews.
North Carolina	During intake diagnostics; self-report; during clinical contact. After being identified transgender offenders are provided accommodation if requested. Policy outlines accommodation review process both at the facility level and the Division level.
NI41- D -1 4 -	see transgender policy
North Dakota	The diagnosis of Gender Dysphoria will be based on the current diagnostic and statistical manual of mental disorders criteria and must be recommended by a licensed psychiatrist or psychologist.
	The committee may choose to accept the diagnosis or ask for a second opinion from another Department of Corrections and Rehabilitation psychiatrist or psychologist or a contract provider. If the providers do not reach agreement, the committee may choose to engage a third provider and will support the decision of the majority.
	A committee-approved Gender Dysphoria diagnosis must be in a place for consideration of specific medical

	services associated with treating Gender Dysphoria; however, access to routine and emergency medical and mental health services will not be withheld in the absence of an approved diagnosis.
	Adults in custody who identify as gender non-conforming or transgender, but who do not meet criteria for a Gender Dsyphoria dianosis, may be given special property or housing accommodations based on their individual needs and safety considerations. These may be done through the committee's development of an individualized plan without creating an individual treatment plan.
Ohio	self-identified
Oklahoma	self-identified
	OP-030102, Attachment B, January 2018, self-reported orientation as transgender
Oregon	self-identification and Medical Records
Pennsylvania	self-identification
Rhode Island	Records and Identification nurses ask offenders upon commitment. self identification.
South	inmates who identify as transgender report it through self-identification during assessments, notification to staff
Carolina	and/or through medical records if available. Once identified, Transgender inmates are then tracked by the Agency PREA Coordinator and the Multi-Disciplinary Management Team (MMTT) to ensure services and treatment is
	provided as indicated
South Dakota	gender nonconform alert
	self identified
Tennessee	Primarily self-identification
Texas	Offenders self-identify as transgender. Once an identification is made, they are identified by a code in the Institutional Adjustment Record Data System and they referred to the medical and mental health departments for an evaluation.
Vermont	self-identification
Washington	It is based on self-report. An offender can notify staff at any point during their incarceration that they identify as being transgender/intersex. An offender transgender/intersex status will be maintained as confidential and only disclosed on a need to know basis. The facility where it is believed the offender is most likely to succeed will be identified and prior to any transfer staff initiate form "Protocol for Housing Review for Transgender and intersex offenders" which includes offenders current housing assignment, Facility Review Team members (which includes classification, health services, mental health and custody staff), housing assignment review factors and a Facility Review Team recommendation. The document is reviewed and signed by the facility Superintendent and then forwarded to the Prisons Division Deputy Director for a final housing decision. Monitoring plans are developed by assigned Classification Counselors as well.

West Virginia	self identification
Wisconsin	Inmates can self-identify as transgender at any time during their incarceration.
Wyoming	self identification