# ALTERNATIVES TO ISOLATION

EFFECTIVE TOOLS TO INCREASE SAFETY
IN CONNECTICUT PRISONS & JAILS

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#### INTRODUCTION

The PROTECT Act would abolish isolation in favor of humane and effective means to keep prisons – and the people who live and work there – safe. The desire to be safe is a fundamental need of all people, and keeping prisons safe is a basic duty of the state. Unfortunately, decades of misguided policies and a profound lack of oversight have led prisons to rely on highly punitive and ineffective measures like solitary confinement.

The good news is that—finally—many correctional systems are recognizing that using isolation and other forms of violence, on top of being cruel, is shortsighted and counterproductive. Instead, systems are turning to more including pro-social alternatives, programming and mental health treatment. And many systems are thinking far outside "the box" by turning to violence prevention and restorative justice to get at why disputes happen in the first place. This short report outlines the many tools that Connecticut could use to ensure safety without sacrificing humanity.



Pictured above: a cell from a Danish maximum security prison

## EXISTING ALTERNATIVES

Across the country, correctional systems are increasingly turning alternative programs to address behavioral issues that, in the past, would have resulted in solitary confinement. For example, in North Carolina, Rehabilitative Diversion Units serve as a transition program for individuals who otherwise would have been placed in restrictive housing. These units out-of-cell time, group sessions and pro-social include substantial programming, and some other features that are similar to those in general population.[1] At the Middlesex County Adult Correction Center in New Jersey, specialized units are separate from the general population and offer specialized programming, but they include the same out-of-cell time as general population, as well as congregate activity and some programming. [2] In Virginia, Shared Allied Management Units are an alternative placement for individuals living with mental illness, who are medically infirm, and who are otherwise vulnerable and/or at risk for victimization (e.g., based upon age). These units include access to in-unit and outside recreation, programming, and congregate group activities.[3]

The use of alternative, less isolative units has contributed to decreased disciplinary offenses in the prisons and jails where these units are used. For example, individuals placed in Virginia's Shared Allied Management Units experienced a significant decrease in disciplinary offenses, placements in restrictive housing, and lengths of stay in restrictive housing.[4]



# TREATMENT NOT PUNISHMENT



Many correctional systems recognize that isolation—while dangerous for everyone—has special danger for people with mental illness. These systems have created dedicated units to provide individualized mental health treatment for individuals who would have otherwise been placed in prolonged isolation.[5] In Massachusetts, for example, Behavior Management Units employ multidisciplinary treatment teams to address each individual's health needs, and patients have at least 15 hours of structured out-of-cell programming and at least 10 hours of unstructured out-of-cell activity each week.[6] In Colorado, Clinical Alternatives to Punitive Segregation units provide in-patient levels of mental health care and therapeutic and group programming for people with serious mental illness who commit serious disciplinary infractions.[7]

By prioritizing treatment instead of isolation for individuals who commit disciplinary infractions, prison and jail systems have reported decreased violence. Massachusetts' Behavior Management Units contributed to significant reductions in the number of assaults on staff, the number of assaults on other incarcerated people, the number of days on suicide precautions, and the number of days spent in in-patient psychiatric settings.[8] Maine's Intensive Mental Health Units have led to reduced frequency of self-injurious behavior and violence towards others.[9]

Connecticut does not operate effective alternatives to isolation for people with mental illness. Garner Correctional Institution was supposed to serve as an alternative unit for individuals with mental illness, but DOC has continued to place individuals with mental illness in isolation across the system. Furthermore, the conditions at Garner are extremely harsh; for example, in the segregation unit at Garner, individuals are locked down 22 or more hours a day.[10]

### PREVENTING VIOLENCE AND RESOLVING DISPUTES

Proponents have long justified isolation as the best way to handle "the worst of the worst." But a number of jurisdictions have successfully found alternative means of preventing violence and resolving disputes. New York City's Program to Accelerate Clinical Effectiveness (PACE) provides mental health supports in order to support individuals before they commit serious infractions. PACE uses incentives to reward positive behavior, and staff are trained on conflict prevention, conflict resolution, and working with special populations, such as individuals with serious mental illness.[11] In San Resolve to Stop Violence Project Francisco, the (RSVP) uses accountability program wherein individuals receive programming 12 hours per day, 6 days per week that focuses on accountability, empathy, and awareness of one's contribution to the community, among other areas. The men who participated in the program were found to have fewer violent incidents than did men who did not participate, as well as lower levels of recidivism.[12][13]

Restorative justice is also a promising alternative. For example, In Philadelphia, a staff training program aims to build conflict management and problem-solving skills in order improve staff responses to conflicts with individuals who are incarcerated.[14] At the Marion Correctional Institute in Ohio, the Opening Doors program focuses on developing effective conflict resolution skills through a combination of group and individual skills-building activities. Resolution is a peer mediation program for interpersonal disputes, wherein individuals are provided space to explore their own solutions.[15] And in Connecticut, the TRUE Program, established in 2017 to address the special needs of incarcerated people under 25, seeks to foster conflict resolution through face-to-face conversation and to provide younger incarcerated individuals with older mentors.[16] Building on the success of the TRUE Program and other models could greatly reduce the need for violence intervention and also prepare people to return to home.

#### CONCLUSION

Connecticut has many, non-punitive options to ensure both safety and humanity in its prisons. Across the country, alternatives to isolation are reliably creating safer conditions across a wide array of institutions. Practices adopted by other correctional facilities show that reducing isolation, increasing exposure to other people, and pro-social programming have a positive effect on safety and security. Isolation is shortsighted and counterproductive, a relic of the 1990s "tough on crime" politics. It's time to turn the page on that history and envision a new system that serves the humanity and secures the safety of all people.



#### **END NOTES**

- [1] Promising Practices: Rehabilitative Diversion Unit, Vera Institute of Justice, http://safealternativestosegregation.vera.org/promising\_practice/rehabilitative-diversion-unit/.
- [2] Leon Digard et al., Introduction: Lessons from Five U.S. Jail and Prison Systems, Vera Institute of Justice (May 2018), https://www.vera.org/rethinking-restrictive-housing.
- [3] Promising Practices: Expansion of Shared Allied Management Units, Vera Institute of Justice, http://safealternativestosegregation.vera.org/promising\_practice/expansion-of-shared-allied-management-units-sam/ (last visited Feb. 17, 2021).
- [4] The Role of SAM Units in Virginia's Restrictive Housing Reform, February 20, 2020, VA Department of Corrections, https://vadoc.virginia.gov/news-press-releases/2020/the-role-of-sam-units-in-virginia-s-restrictive-housing-reform/.
- [5] Other examples include, Pennsylvania (Diversionary Treatment Units), North Carolina (Therapeutic Diversion Units), Washington State (Special Offender Units), Maine (Intensive Mental Health Units).
- [6] Joel Andrade, Mental Health Units as Alternatives to Segregation, Vera Institute of Justice (June 22, 2017), https://www.vera.org/blog/addressing-the-overuse-of-segregation-in-u-s-prisons-and-jails/mental-health-units-as-alternatives-to-segregation-it-can-be-done.
- [7] Supra note 2.
- [8] Supra note 6.
- [9] Reducing Placements and Time Spent in Restrictive Housing: Maine Department of Corrections. Vera Institute of Justice, http://safealternativestosegregation.vera.org/promising\_practice/restrictive-housing-reform/ (last visited Feb. 7, 2021).
- [10] Report to the Criminal Justice Policy and Planning Division Pursuant to Public Act No. 17-239, Conn. Dep't Correction (2020) (Addendum J).
- [11] Supra note 2.

[15] Id.

- [12] Bandy Lee & James Gilligan, The Resolve to Stop the Violence Project: transforming an in-house culture of violence through a jail-based programme, 27 J. Pub. Health 149 (2005), https://doi.org/10.1093/pubmed/fdi018.
- [13] James Gilligan & Bandy Lee, The Resolve to Stop the Violence Project: reducing violence in the community through a jail-based initiative, 27 J. Pub. Health 143 (2005), https://doi.org/10.1093/pubmed/fdi011.
- [14] Debbie Roeger, Resolving Conflicts in Prison, 19 Relational Justice Bulletin (November 2003), https://relationshipsfoundation.org/wp-content/uploads/2014/03/Relational\_Justice\_Bulletin\_Dec2003.pdf.
- [16] Thomas Breen, German-Inspired Reform Calms Prison, The New Haven Independent (Nov. 20, 2017), https://www.newhavenindependent.org/index.php/archives/entry/scott\_semple\_corrections\_reform/.