A study funded by the National Institute of Justice (NIJ) which examined the psychological effects of solitary confinement, known as administrative segregation (AS) in corrections, showed that the mental health of most inmates did not decline during the course of a year — contrary to the findings of some previous studies.1 Researchers assessed 247 men in the Colorado prison system. The sample included inmates in AS at the Colorado State Penitentiary and two other groups for comparison: the general prison population and residents of San Carlos Correctional Facility, a psychiatric care prison. The sample of inmates was divided into those with mental illness and those with no mental illness.2

What Is Administrative Segregation?

Prisoners may be placed in solitary confinement, or AS, for violent or disruptive behavior. AS typically involves single-cell confinement for 23 hours daily. Inmates are allowed one hour out of the cell for exercise and showers. Facilities for AS are expensive to build and maintain.

In the Colorado study, the cells were 80 square feet and had 35 square feet of unencumbered floor space. Each cell contained a bunk, toilet, sink, desk and stool and had a window to the outside and one to the inside of the prison. Neither window opened, so the prisoner could not control airflow.

Prisoners were permitted at least five hours a week for recreation, as well as 15-minute showers three times a week. They received most services at their cell doors, including meals. Mental health clinicians visited at least once a month, and a librarian delivered books and magazines once a week. Prisoners were allowed at least one 20-minute phone call and one non-contact visit each month.

Having outsiders arrive in a closed environment may affect the prisoners’ perceptions of the institutions in which they live, and the effects may be larger for those in solitary confinement. Researchers arriving to interview inmates is a major event in the monotonous routine of prison life, especially for an inmate who is in isolation 23 hours a day.

A related factor is the Hawthorne effect, in which social and behavioral researchers’ interactions with and observation of subjects being studied affects the subject’s behavior. The name stems from a study of factory workers at Western Electric’s Hawthorne plant in Illinois in the 1920s and 1930s. Researchers set out to observe how changes in lighting would affect the workers’ productivity. Results showed that regardless of the changes made, productivity increased. They decided that the productivity increased because the workers saw themselves as special participants in an experiment.3 It may be possible that the Hawthorne effect was present in the Colorado study of administrative segregation.4

On the other hand, inmates may be wary of researchers. Establishing trust in order to collect accurate information is a prime concern to researchers, who know that inmates may withhold information or tell researchers only what they think the researchers want to hear.

Method and Results

The researchers tested three hypotheses:

- Offenders in AS would develop an array of psychological symptoms consistent with the “security housing unit syndrome,”
including anxiety, hallucinations, excitability and outbursts;

- The mental health of offenders with and without mental illness would worsen over time in AS, but mentally ill inmates would decline more rapidly and have more serious illnesses; and
- Inmates in AS would experience greater psychological decline over time than the comparison groups in the general prison population and the psychiatric care prison.

Inmates and staff completed standardized tests measuring states such as anxiety, depression and psychosis at three-month intervals during the course of the study. To participate in the study, inmates had to read and write at a proficient level because the assessments were conducted using self-administered pencil-and-paper materials; no clinical psychologist interviewed the inmates.

The study’s results failed to confirm the hypothesis. In fact, the results showed initial improvements in psychological well-being in all three groups of inmates. Most of the improvement occurred between the first and second testing periods and was followed by relative stability. Overall, the researchers found that 20 percent of the study sample improved mental health, and seven percent worsened during the study period.

The researchers noted that their findings might not apply to other prison systems. Systems with more restrictive living conditions and fewer treatment and other programs may have different results. Additionally, the study was limited to literate adult men. Because participation was voluntary, the study sample excluded those with serious mental illnesses, who may be especially vulnerable to the stresses of solitary confinement. Finally, because inmates were not randomly assigned to study groups, the groups and their outcomes may not be comparable.

The researchers also noted that AS may have negative effects that were not measured in the study. For example, previous research has shown that inmates released directly from AS to the streets had dramatically higher recidivism rates than those who first returned to the general prison population. Overall, the Colorado study adds to the knowledge base, but it does not resolve the debate about the effectiveness of AS.

ENDNOTES


2 Placement into AS or general prison conditions occurred as a function of routine prison operations. General population comparison participants included those at risk of AS placement due to their institutional behavior.


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