

Voices from Solitary

"This place is so cold, loud, and lonely."

What impact has solitary had on you and what should people know about solitary?

"This place is so cold, loud, and lonely."

"We are in a room 23 hours of a day. Feels like the walls are caving in on you. No one to talk to...."

"Solitary...has only made me worse. It teaches us to be lonely people. It breaks us as people...."

"If you are doing 1 day or one year in the IMU...the consequences on one's mental state can last a lifetime. It changes you and you carry the weight of its impact to the streets when you go home."

"After years of being locked up and months of being alone I'm getting kicked out to the streets."

"I believe solitary is inhumane and does more harm than good."

"When you get released it's a shell shock and you get very anxious."

"We should not be banished."

What supports or programming do you need to survive and transition out of solitary?

"Sunlight"

"I wish I had email or my j-pay tablet. No one writes me..."

"Mental health.... I just got off a three month lockdown due to COVID. None of us are the same after COVID"

Programming that lets you "interact with other humans who can relate to your struggles and help assist you."

"A TV to watch to not be sad"

"Someone to help transition out of the negative life to a positive kind of life kind of like a big brother"

"We need yard time every day, not 5 days a week and showers every day, not 3 days a week"

"I just got off 6 months no phones ...and it's hard on us and our family to be in solitary and can't use the phone."

In groups "you can learn from other's mistakes...sitting in a cell stuck in your own head and emotions in most cases is not constructive at all..."

Is the use of shackles (handcuffs and waist restraints) a disincentive to participate in solitary programming?

"I feel powerless and vulnerable."

"It creates a feeling of not being good enough regardless of what you do."

"It makes us feel less human. Treat me like an animal and we start to feel like an animal."

"You feel like you are in trouble or have done something wrong...."

"It reinforces the idea that you're a threat and doesn't help heal that specific trauma."

"I am African American. I do not like shackles."

"We are humans not animals and most of us are really traumatized."

In November and December of 2021 DRW surveyed more than 200 people in solitary at Washington State Penitentiary, Stafford Creek, and Monroe. This is what they had to say.

Eliminating long term solitary saves states money and DOC's fiscal note on solitary is misleading.

The fiscal note for HB 1312 that DOC submitted to the legislature is wildly inflated, estimating a cost of more than \$36 million per year to implement HB 1312, an estimate clearly intended to undermine support for the bill.

DOC's 2022 budget request to the Governor estimated that in order to provide increased out of cell time, as well as mental health care, training for staff, and continuing reforms, they will need approximately 1.6 million dollars in the 2023-2035 biennial.

DOC has not "fixed" solitary and is not going to make this change on their own.

In its work with Vera, DOC had a three year goal of reducing its solitary population by 20% (156 people). At the end of that *three year period* the total restrictive housing population had dropped by only 3% (26 people), from 781 to 755.

Despite its work with Vera, WADOC's average length of stay in Maximum security (indefinite solitary) is 348 days. The UN Human rights commission has deemed anything over 15 days to be torture.

Restrictive Housing, Administrative Segregation, and Max Custody are *all* solitary confinement.

Vulnerable people are in solitary, often for extended periods.

According to WADOC, almost 120 people with serious mental illness are in solitary confinement in Washington. This is almost certainly an underestimate.

People with intellectual disabilities and traumatic brain injuries are being warehoused in solitary because general population units, including those designed for this population, do not want to work with them.

Transgender people are disproportionately placed in solitary confinement.

Solitary confinement is disproportionately imposed on BIPOC people.

Hispanic, Black, and American Indian or Alaska Native people are more likely than their white counterparts to be sent to solitary due to a major infraction.

In 2018, Hispanic people were still disproportionately subject to solitary, with the Hispanic population making up 21% of solitary but only 13% of the general population. Reducing this disparity was a DOC goal with Vera; after three years of work DOC moved that percentage down by only 1%.

Ending solitary results in better health for incarcerated people, staff, and the community

95% of incarcerated people return to the community and people who have experienced solitary are more likely to recidivate, particularly when released directly from solitary.

Most studies have found that **reducing solitary actually reduces assaults on corrections staff**. In Washington, DOC's prior efforts to reduce solitary led to a 57% reduction in staff assaults and a 45% reduction in self-harm and suicide.

People who have survived solitary are **more likely to die shortly after release from incarceration**. This is particularly true for people who experienced two or more placements in solitary and those who spent more than 14 consecutive days in solitary.

Washington is falling behind other states in ending this barbaric practice

New Jersey and New York passed laws in 2020 and 2021 banning the use of solitary for more than 15 days.

In a 2020 national report, **Washington was is in the minority of states** that reported an **increasing** solitary population from 2015-2019.