

House Bill 851 Correctional- Restrictive Housing – Serious Mental Illness

Judiciary Committee

February 23, 2021

Position: SUPPORT

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates, and concerned citizens for unified action in all aspects of mental health, mental illness, and substance use. We appreciate this opportunity to present testimony in support of House Bill 851.

HB 851 limits the use of solitary confinement, particularly as it relates to inmates with serious mental illness. Restrictive housing, often referred to as solitary confinement, isolates a prisoner in a closed-cell for 23 to 24 hours a day – often for weeks or months and sometimes for years or decades at a time. According to the Department of Public Safety and Correctional Services, there were 17,646 restrictive housing placements during fiscal 2016, including 172 inmates diagnosed with severe mental illness.

Confined inmates often experience various physiological symptoms, even after a short amount of time in confinement. Isolated inmates often report symptoms similar to those of hypertension, such as chronic headaches, trembling, sweaty palms, extreme dizziness, and heart palpitations. Inmates also experience trouble with their eating and digestion, especially within the first three months of solitary confinement. Solitary confinement is often used to prevent particularly risky inmates from escaping, to keep an inmate from harming other inmates and staff, or to punish an inmate for misconduct occurring within the prison. Some inmates lose the ability to maintain a state of alertness, while others develop crippling obsessions.

For inmates who are *already* living with a mental health disorder, solitary confinement often exacerbates their illness. The U.S. uses solitary confinement more than some countries, with the practice disproportionately affecting Black and Hispanic people and those with mental health conditions. In 2007, researchers at the University of Washington reported that prisoners released directly from supermax prisons into the community committed new crimes sooner than prisoners who had been transferred from segregation into the general prison population for several months before being released (*Crime and Delinquency*, 2007).

Furthermore, suicide is a significant concern for individuals in solitary confinement. Studies have found that suicides among prisoners in solitary confinement, who make up 3 to 8 percent of the nation's prison population, account for about 50 percent of prison suicides.

For these reasons, MHAMD supports HB 851 and urges a favorable report.

For more information, please contact Derrell Frazier at (410) 978-8865