



THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

SB 908 – Correctional Services – Restrictive Housing

Chair Smith, Vice Chair Waldstreicher, Members of JPR:

Solitary confinement or, as it is called in Maryland, restrictive housing, is an overtly cruel, inhumane, and ultimately ineffective disciplinary method used in our prison systems. For decades, Maryland has severely overused restrictive housing, with confinement rates that double the national average. The impacts are drastic, lasting, and often irreparable. SB 908 is a small, but critical step, towards improved practices. The legislation will place strict limitations on who may be placed in restrictive housing in prisons, as well as how long they may be placed there.

Maryland defines restrictive housing as “a form of physical separation that has not been requested by the incarcerated individual in which the incarcerated individual is placed in a locked room or cell for approximately 22 hours or more out of a 24-hour period.” Maryland avoids calling it solitary confinement on the basis that individuals are not alone in a cell; the space hardly sufficient for one person is split between two people. For 23 hours a day, seven days a week, they are confined to an area the equivalent of a small parking space. Sometimes, for over a year.

According to the United Nations, prolonged solitary confinement exceeding 15 days is regarded as psychological torture. The average solitary confinement stay in Maryland was 42.5 days in 2022, which is the most recent year we have data on. That is almost triple the threshold for torture.

Restrictive housing has detrimental, lasting, and often irreparable impacts on an individual’s psychological health. The United Nations has stated that the impacts of solitary confinement “can range from progressively severe forms of anxiety, stress, and depression to cognitive impairment and suicidal tendencies.” These impacts are not seen just in the short-term; more often than not, they follow an individual even after their release. These conditions make reintegration into society incredibly difficult.

Individuals suffering from preexisting mental or physical disabilities are even more vulnerable to the harms of solitary confinement. In fact, it is prohibited under international law to subject disabled individuals to solitary confinement, and, “cannot be regarded as a ‘lawful sanction’ under the Mandela Rules.”

Beyond the detrimental psychological impacts to victims, solitary confinement is simply not an effective management strategy. While solitary confinement is intended to make communities

both in and out of prison safer, in practice, it does neither. Studies have shown that solitary confinement fails to reduce instances of violence or misconduct in prison, and further increases instances of recidivism once an individual is released. Its overuse is thus inexplicable and unjustifiable.

We are not the first to implement legislation restricting the use of solitary confinement: Connecticut, New York and New Jersey have all recently passed very similar legislation.

SB 908 works in two ways: it prohibits the use of restrictive housing on members of a vulnerable population and restricts the duration in which people can be held in restrictive housing to no longer than is necessary; no more than 15 consecutive days; and no more than 20 days total in any 60-day period.

The overuse of restrictive housing in Maryland is a dire situation. It inflicts inhumane conditions on incarcerated individuals and should not be tolerated. SB 908 may be only a small step in the right direction, but it is a crucial one to take.

For the foregoing reasons, I urge a favorable report on SB 908.