



## The Growth of Incarceration in the United States: Exploring Causes and Consequences

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## 6

## The Experience of Imprisonment

This chapter summarizes what is known about the nature of prison life and its consequences for prisoners. The dramatic rise in incarceration rates in the United States beginning in the mid-1970s has meant that many more people have been sent to prison and, on average, have remained there for longer periods of time. Therefore, the number of persons experiencing the consequences of incarceration—whether helpful or harmful—has correspondingly increased. Although this chapter considers the direct and immediate consequences of incarceration for prisoners while they are incarcerated, many of the most negative of these consequences can undermine postprison adjustment and linger long after formerly incarcerated persons have been released back into society.

In examining this topic, we reviewed research and scholarship from criminology, law, penology, program evaluation, psychiatry, psychology, and sociology. These different disciplines often employ different methodologies and address different questions (and at times come to different conclusions). In our synthesis of these diverse lines of research, we sought to find areas of consensus regarding the consequences of imprisonment for individuals confined under conditions that prevailed during this period of increasing rates of incarceration and reentry.

Prisons in the United States are for the most part remote, closed environments that are difficult to access and challenging to study empirically. They vary widely in how they are structured and how they operate, making broad generalizations about the consequences of imprisonment difficult to formulate. It is possible, however, to describe some of the most significant trends that occurred during the period of increasing rates of incarceration

that affected the nature of prison life. After reviewing these trends and acknowledging the lack of national and standardized data and quality-of-life indicators, we discuss aspects of imprisonment that have been scientifically studied. From the available research, we summarize what is known about the experience of prison generally, how it varies for female prisoners and confined youth, its general psychological consequences, and the particular consequences of extreme conditions of overcrowding and isolation, as well as the extent of participation in prison programming. We also consider, on the one hand, what is known about the potentially criminogenic effects of incarceration and, on the other hand, what is known about prison rehabilitation and reentry in reducing postprison recidivism.

### VARIATIONS IN PRISON ENVIRONMENTS

Classic sociological and psychological studies have underscored the degree to which prisons are complex and powerful environments that can have a strong influence on the persons confined within them (Sykes, 1958; Clemmer, 1958; Toch, 1975, 1977). However, it is important to note at the outset of this discussion of the consequences of imprisonment that not all “prisons” are created equal. Not only are correctional institutions categorized and run very differently on the basis of their security or custody levels, but even among prisons at the same level of custody, conditions of confinement can vary widely along critical dimensions—physical layout, staffing levels, resources, correctional philosophy, and administrative leadership—that render one facility fundamentally different from another. One of the important lessons of the past several decades of research in social psychology is the extent to which specific aspects of a context or situation can significantly determine its effect on the actors within it (e.g., Haney, 2005; Ross and Nisbett, 1991). This same insight applies to prisons. Referring to very different kinds of correctional facilities as though the conditions within them are the same when they are not may blur critically important distinctions and result in invalid generalizations about the consequences of imprisonment (or the lack thereof). It also may lead scholars to conclude that different research results or outcomes are somehow inconsistent when in fact they can be explained by differences in the specific conditions to which they pertain.

This chapter focuses primarily on the consequences of incarceration for individuals confined in maximum and medium security prisons, those which place a heavier emphasis on security and control compared with the lower-custody-level facilities where far fewer prisoners are confined (Stephan and Karberg, 2003). Prisoners in the higher security-level prisons typically are housed in cells (rather than dormitories), and the facilities themselves generally are surrounded by high walls or fences, with armed guards, detection

devices, or lethal fences being used to carefully monitor and control the “security perimeters.” Closer attention is paid to the surveillance of inmate activity and the regulation of movement inside housing units and elsewhere in the prison. Obviously, these, too, are gross categorizations, with countless variations characterizing actual conditions of confinement among apparently similar prisons. The assertions made in the pages that follow about broad changes in prison practices and policies, normative prison conditions, and consequences of imprisonment all are offered with the continuing caveat that as prisons vary significantly, so, too, do their normative conditions and their consequences for those who live and work within them.

### TRENDS AFFECTING THE NATURE OF PRISON LIFE

Although individual prisons can vary widely in their nature and effects, a combination of six separate but related trends that occurred over the past several decades in the United States has had a significant impact on conditions of confinement in many of the nation’s correctional institutions: (1) increased levels of prison overcrowding, (2) substantial proportions of the incarcerated with mental illness, (3) a more racially and ethnically diverse prisoner population, (4) reductions in overall levels of lethal violence within prisons, (5) early litigation-driven improvements in prison conditions followed by an increasingly “hands-off” judicial approach to prison reform, and (6) the rise of a “penal harm” movement.

The first and in many ways most important of these trends was due to the significant and steady increase in the sheer numbers of persons incarcerated throughout the country. As noted in Chapter 2, significant increases in the size of the prisoner population began in the mid-to-late 1970s in a number of states and continued more or less unabated until quite recently. The resulting increases in the numbers of prisoners were so substantial and occurred so rapidly that even the most aggressive programs of prison construction could not keep pace. Widespread overcrowding resulted and has remained a persistent problem. Congress became concerned about prison overcrowding as early as the late 1970s (Subcommittee on Penitentiaries and Corrections, 1978). Overcrowding was described as having reached “crisis-level” proportions by the start of the 1980s and often thereafter (e.g., Finn, 1984; Gottfredson, 1984; Zalman, 1987), and it was addressed in a landmark Supreme Court case as recently as 2011.<sup>1</sup> At the end of 2010, 27 state systems and the Federal Bureau of Prisons were operating at 100 percent design capacity or greater (Guerino et al., 2011).

In addition to the rapid expansion of the prisoner population and the severe overcrowding that resulted, recent surveys of inmates have shown

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<sup>1</sup>*Brown v. Plata*, 131 S. Ct. 1910 (2011).

high prevalence of serious mental illness among both prisoners and jail inmates (James and Glaze, 2006). Although the reasons for this high prevalence are not entirely clear, some scholars have pointed to the effect of the deinstitutionalization movement of the 1960s (e.g., Hope and Young, 1984; Hudson, 1984; Scull, 1977), which effectively reduced the amount of public resources devoted to the hospitalization and treatment of the mentally ill. Some have suggested that untreated mental illness may worsen in the community, ultimately come to the attention of the criminal justice system, and eventually result in incarceration (Belcher, 1988; Whitmer, 1980). However, Raphael and Stoll (2013) have estimated that deinstitutionalization accounted for no more than approximately “7 percent of prison growth between 1980 and 2000” (p. 156). Even this low estimate of the contribution of deinstitutionalization to the overall rise in incarceration indicates that in the year 2000, “between 40,000 and 72,000 incarcerated individuals would more likely have been mental hospital inpatients in years past” (p. 156). Other scholars and mental health practitioners have suggested that the combination of adverse prison conditions and the lack of adequate and effective treatment resources may result in some prisoners with preexisting mental health conditions suffering an exacerbation of symptoms and even some otherwise healthy prisoners developing mental illness during their incarceration (e.g., Haney, 2006; Kupers, 1999). In any event, the high prevalence of seriously mentally ill prisoners has become a fact of life in U.S. prisons. Further discussion of mental illness among the incarcerated is presented in Chapter 7.

Another trend resulted from the high incarceration rates of African Americans and Hispanics, which changed the makeup of the prisoner population and altered the nature of prison life. As discussed in Chapters 2 and 3, during the past 40 years of increasing imprisonment, incarceration rates for African Americans and Hispanics have remained much higher than those for whites, sustaining and at times increasing already significant racial and ethnic disparities. Racially and ethnically diverse prisoner populations live in closer and more intimate proximity with one another than perhaps anywhere else in society. In some prison systems, they also live together under conditions of severe deprivation and stress that help foment conflict among them. Despite this close proximity, racial and ethnic distinctions and forms of segregation occur on a widespread basis in prison—sometimes by official policy and practice and sometimes on the basis of informal social groupings formed by the prisoners themselves. Race- and ethnicity-based prison gangs emerged in part as a result of these dynamics (Hunt et al., 1993; McDonald, 2003; Skarbek, 2012; van der Kolk, 1987; Valdez, 2005). Estimates of gang membership vary greatly from approximately 9 percent to as much as 24 percent of the prison population during the past two decades (Hill, 2004, 2009; Knox, 2005; Wells et al., 2002). However,

these different estimates mask the wide variation in the proportion of gang members within different prison systems and locations and the level of organization of the gangs themselves (Skarbek, 2011).

A number of scholars predicted that many of the above changes would result in prisons becoming more disorderly and unsafe (e.g., Blomberg and Lucken, 2000; Hagan, 1995). However, some key indicators of order and safety in prisons—including riots, homicides, and suicides—showed significant improvement instead. For example, in a study of reported riots, Useem and Piehl (2006, p. 95) find that “both the absolute number of riots and the ratio of inmates to riots declined.” The number of riots declined from a peak in 1973 (about 90 riots per 1,000,000 inmates) to become a rare event by 2003, even though the prison population significantly increased over this period. The rate of inmate homicides likewise decreased, declining 92 percent from more than 60 per 100,000 inmates in 1973 (Sylvester et al., 1977) to fewer than 5 per 100,000 in 2000 (Stephan and Karberg, 2003). Useem and Piehl (2006) also report a similar drop in the rate of staff murdered by inmates—a rare but significant event that fell to zero in 2000 and 2001. In addition, as discussed further in Chapter 7, suicide rates in prison declined from 34 per 100,000 in 1980 to 16 per 100,000 in 1990, and largely stabilized after that (Mumola, 2005). Although these measures of lethal violence do not encompass the full measure of the quality of prison life (or even the overall amount of violence that occurs in prison settings), these significant declines during a period of rising incarceration rates are noteworthy, and the mechanisms by which they were accomplished merit future study.

In the early years of increased rates of incarceration in the United States, many of the most important improvements in the quality of prison life were brought about through prison litigation and court-ordered change. Thus, as part of the larger civil rights movement, a period of active prisoners’ rights litigation began in the late 1960s and continued through the 1970s. It culminated in a number of federal district court decisions addressing constitutional violations, including some that graphically described what one court called “the pernicious conditions and the pain and degradation which ordinary inmates suffer[ed]” within the walls of certain institutions,<sup>2</sup> and that also brought widespread reforms to a number of individual prisons and prison systems. As prison law experts acknowledged, this early prison litigation did much to correct the worst extremes, such as uncivilized conditions, physical brutality, and grossly inadequate medical and mental health services within prison systems (e.g., Cohen, 2004).

By the beginning of the 1980s, as state prison populations continued to grow and correctional systems confronted serious overcrowding problems,

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<sup>2</sup>*Ruiz v. Estelle*, 503 F. Supp. 1265 (S.D. Tex. 1980), p. 1390.

the Supreme Court signaled its intent to grant greater deference to prison officials. In a landmark case, *Rhodes v. Chapman* (1981),<sup>3</sup> for example, the Court refused to prohibit the then controversial practice of “double-celling” (housing two prisoners in cells that had been built to house only one). Even so, at least 49 reported court cases decided between 1979 and 1990 addressed jail and prison overcrowding, a majority of which resulted in court-ordered population “caps” or ceilings to remedy unconstitutional conditions (Cole and Call, 1992). By the mid-1990s, there were only three states in the country—Minnesota, New Jersey, and North Dakota—in which an individual prison or the entire prison system had not been placed under a court order to remedy unacceptable levels of overcrowding or other unconstitutional conditions (American Civil Liberties Union, 1995).

In 1995, Congress passed the Prison Litigation Reform Act (PLRA), which greatly limited prisoners’ access to the courts to challenge their conditions of confinement. Among other things, the law prohibited prisoners from recovering damages for “mental or emotional injury suffered while in custody without a prior showing of physical injury” [at 42 U.S.C. Section 1997e(3)], and it also required prisoners to “exhaust” all “administrative remedies” (no matter how complicated, prolonged, or futile) before being permitted to file claims in court. Legal commentators concluded that the PLRA had helped achieve the intended effect of significantly reducing the number of frivolous lawsuits; however, it also instituted significant barriers to more creditable claims that could have drawn needed attention to harmful prison conditions and violations of prisoners’ rights (Cohen, 2004; Schlanger and Shay, 2008). By the late 1990s, the average inmate could find much less recourse in the courts than the early years of prison litigation had appeared to promise (Cohen, 2004). Schlanger and Shay (2008, p. 140) note that the “obstacles to meritorious lawsuits” were “undermining the rule of law in our prisons and jails, granting the government near-impunity to violate the rights of prisoners without fear of consequences.”

The final trend that affected the nature of prison life in the United States over the past several decades was both an independent factor in its own right and the consequence of several of those previously mentioned. It is somewhat more difficult to document quantitatively but has been vividly described in a number of historical accounts of this era of American corrections (e.g., Cullen, 1995; Garland, 2001; Gottschalk, 2006). The mid-1970s marked the demise of the pursuit of what had come to be called the “rehabilitative ideal” (Lin, 2002; Vitiello, 1991). Rehabilitation—the goal of placing people in prison not only as punishment but also with the intent that they eventually would leave better prepared to live a law-abiding life—had served as an overarching rationale for incarceration for nearly a

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<sup>3</sup>*Rhodes v. Chapman*, 452 U.S. 337 (1981).

century (e.g., Allen, 1959). In this period, as discussed in Chapters 3 and 4, the dominant rationale shifted from rehabilitation to punishment.

As the manifest purpose of imprisonment shifted, aspects of prison life changed in some ways that adversely affected individual prisoners. Once legislatures and prison systems deemphasized the rehabilitative rationale, and as they struggled to deal with unprecedented overcrowding, they were under much less pressure to provide prison rehabilitative services, treatment, and programming (e.g., California Department of Corrections and Rehabilitation Expert Panel on Adult Offender Reentry and Recidivism Reduction Programs, 2007; Office of Inspector General, 2004; Government Accountability Office, 2012). We examine the available data on the decline in opportunities to participate in such services later in this chapter and also in Chapter 7.

As discussed in Chapters 3 and 4, during the period of incarceration growth, politicians and policy makers from across the political spectrum embraced an increasingly “get tough” approach to criminal justice. Eventually, advocates of these more punitive policies began to focus explicitly on daily life inside the nation’s prisons, urging the implementation of a “no frills” approach to everyday correctional policies and practices. Daily life inside many prison systems became harsher, in part because of an explicit commitment to punishing prisoners more severely. What some scholars characterized as a “penal harm” movement that arose in many parts of the country included attempts to find “creative strategies to make offenders suffer” (Cullen, 1995, p. 340).

As Johnson and colleagues (1997) point out, political rhetoric advocated “restoring fear to prisons,” among other things through a new “ethos of vindictiveness and retribution” that was clearly “counter to that of previous decades, which had emphasized humane treatment of prisoners and the rehabilitative ideal” (pp. 24–25). In some jurisdictions, “get tough” policies addressed relatively minor (but not necessarily insignificant) aspects of prisoners’ daily life, such as, in one southern state, “removing air conditioning and televisions in cells, discontinuing intramural sports, requiring inmates to wear uniforms, abolishing furloughs for inmates convicted of violent crimes, and banning long hair and beards” (Johnson et al., 1997, p. 28). In 1995 and several times thereafter, Congress considered an explicit No Frills Prison Act that was designed to target federal prison construction funds to states that “eliminate[d] numerous prison amenities—including good time, musical instruments, personally owned computers, in-cell coffee pots, and so on” (Johnson et al., 1997, p. 28).<sup>4</sup> Although the No Frills Prison Act

<sup>4</sup>See H.R. 663 (104th), whose stated purpose was “to end luxurious conditions in prisons.” Congress also considered No Frills Prisons Acts in 1999 [H.R. 370 (106th)] and again in 2003 [H.R. 2296 (108th)]. A bill by the same name, limiting food expenditures and restrict-

never became law, it did reflect prevailing attitudes among many citizens and lawmakers at the time. As described in more detail below, a number of restrictions on “prison amenities” were imposed through changes in correctional policy rather than legislation.

## PRISON DATA

Before discussing the consequences of imprisonment for individuals, it is useful to describe contemporary conditions of confinement—the physical, social, and psychological realities that prisoners are likely to experience in the course of their incarceration. However, attempts to characterize the overall conditions of confinement are constrained by the lack of comprehensive, systematic, and reliable data on U.S. prison conditions. The best evidence available often is limited to specific places or persons. As noted at the outset of this chapter, any generalizations about typical prison conditions must be qualified by the fact that prisons differ significantly in how they are structured, operated, and experienced. Official national statistics that address certain aspects of imprisonment are useful for many scholarly purposes, but they have two important limitations: a lack of standardization and sometimes questionable reliability, on the one hand, and the fact that they typically focus on few meaningful indicators of the actual quality of prison life. We discuss each of these limitations in turn.

### Lack of National and Standardized Data

Concerns about the accuracy or reliability of official compilations of general criminal justice data—including data collected in and about the nation’s correctional institutions—are long-standing. More than 45 years ago, the President’s Commission on Law Enforcement and the Administration of Justice (1967) concluded that regional and national criminal justice data often were inaccurate, incomplete, or unavailable and recommended a number of reforms. Similar concerns were voiced by the National Advisory Committee on Criminal Justice Standards and Goals and the General Accounting Office in reports published in the early 1970s (Comptroller General of the United States, 1973; National Advisory Commission on Criminal Justice Standards and Goals, 1973). Although a number of reforms and new standards were implemented, a report sponsored by the Bureau of Justice Statistics (BJS) that was published almost two decades after the 1967 Commission report acknowledged that “significant data quality problems still remain” (Bureau of Justice Statistics, 1985, p. 28).

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ing living conditions, recreational activities, and property, was enacted in at least one state. See Alaska S.B. 1 (1997).

Notwithstanding the many improvements made in the intervening years and reasonably reliable data on a number of important criminal justice indicators collected by BJS and other government agencies, on which researchers justifiably rely, the collection and reporting of data from official sources measuring actual living conditions and overall quality of life inside the nation's correctional institutions remain problematic. No mandatory reporting requirement exists for most key indicators or measures, and many prison systems do not systematically assess or report them. In addition, there is little or no standardization of this process (so that different systems often use different definitions of the indicators); little or no quality control over the data; and no outside, independent oversight. As recently as 2005, for example, Allen Beck, chief statistician at BJS, testified that, because of this imprecision and unreliability, "the level of assaults [in prison] is simply not known" (Gibbons and Katzenbach, 2006, p. 418).

A National Research Council panel critically examined the nature and quality of data collection performed by BJS—the agency responsible for providing perhaps the nation's most reliable and relied upon criminal justice data. The panel concluded that "the lack of routine evaluation and quality assessments of BJS data is problematic because of the wide variety of sources from which BJS data series are drawn" (National Research Council, 2009, p. 253). Using BJS's prison-related data as an example, the panel noted that "much of the correctional data are collected from agencies and institutions that rely on varied local systems of record-keeping" that, among other things, include "varying definitions" of even basic facts such as race and level of schooling. The panel recommended that BJS "work with correctional agencies" to "promote consistent data collection and expand coverage beyond the 41 states covered in the most recent [National Corrections Reporting Program]" (p. 253).

### Few Quality-of-Life Indicators

Few official or comprehensive data collection efforts have attempted to capture the quality-of-life aspects of prison confinement. The above National Research Council panel acknowledged the additional challenge of providing reliable descriptive data addressing contextual factors.<sup>5</sup> It rec-

<sup>5</sup>The National Research Council panel commented on the special challenges that are faced in trying to capture statistically the dimensions of "social context"—whether the context in which crime occurs or the context in which punishment is meted out. For example, the panel noted that one of the major limitations in the statistical data collected by BJS and other agencies on the various factors that influence criminality derives from the fact that "contextual factors associated with crime are inherently difficult to describe—and even characterize consistently" (National Research Council, 2009, p. 55). The panel elaborated further on the fact that the "geography of crime . . . including social and physical conditions and community

ommended that BJS “develop a panel survey of people under correctional supervision” that would allow researchers and policy makers to better “understand the social contexts of correctional supervision” both in prison and following release (National Research Council, 2009, Recommendation 3.6, p. 140), but that recommendation has not been implemented.

Ambitious attempts to estimate and compare the overall “punitiveness” of individual state criminal justice systems (e.g., Gordon, 1989; Kutateladze, 2009) have been constrained by not only the quality but also the scope of the data on which they were based. For example, Gordon’s (1989) initial effort to construct a punitiveness or “toughness” index includes no data that pertained directly to conditions of confinement. Kutateladze’s (2009) more recent and more elaborate analysis includes six categories of measurable indicators of conditions of confinement—overcrowding, operating costs per prisoner, food service costs per prisoner, prisoner suicide and homicide rates, sexual violence between inmates and between staff and inmates, and rate of lawsuits filed by prisoners against correctional agencies or staff members. But these indicators, too, were derived from data of questionable reliability; in addition, the analysis omits many important aspects of prison life.

No comprehensive national data are routinely collected on even the most basic dimensions of the nature and quality of the prison experience, such as housing configurations and cell sizes; the numbers of prisoners who are housed in segregated confinement and their lengths of stay and degree of isolation; the amount of out-of-cell time and the nature and amount of property that prisoners are permitted; the availability of and prisoners’ levels of participation in educational, vocational, and other forms of programming, counseling, and treatment; the nature and extent of prison labor and rates of pay that prisoners are afforded; and the nature and amount of social and legal visitation prisoners are permitted. Moreover, the subtler aspects of the nature of prison life tend to be overlooked entirely in official, comprehensive assessments,<sup>6</sup> including those that Liebling (2011) finds are most important to prisoners: treatment by staff and elements of safety, trust, and power throughout the institution.

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resources in an area” is difficult to specify and therefore tends not to be included in BJS and other government data collection efforts (p. 67).

<sup>6</sup>Lacking is what might be called a “national prison quality-of-life assessment” roughly comparable to the national performance measurement system that the Association of State Correctional Administrators has begun to implement to ensure greater levels of correctional accountability. See Wright (2005).

## CONDITIONS OF CONFINEMENT

As noted above, no truly comprehensive, systematic, and meaningful assessment of prison conditions in the United States exists.<sup>7</sup> The lack of high-quality national data on prison life is due in part to the closed nature of prison environments and the challenges faced in studying the nature and consequences of life within them. Nonetheless, a substantial body of scholarly literature provides important insights into prevailing conditions of confinement and the experience of incarceration. Our review of that literature proceeds in the context of internationally recognized principles of prisoner treatment (see Box 6-1) and the long-established standards and guidelines adopted by the American Correctional Association and the American Bar Association.<sup>8</sup>

We agree with the observation that “some of the most valuable knowledge we have about corrections is the product of in-depth and sometimes qualitative research conducted by academics and policymakers inside our correctional institutions” (Gibbons and Katzenbach, 2006, p. 528). For example, Lynch’s (2010) historical and qualitative study of the Arizona prison system chronicles a series of changes in correctional policies and practices that took place in that state over the previous several decades, many of which had direct consequences for the nature and quality of life inside Arizona prisons. These changes included significant increases in the length of prison sentences meted out by the courts, the introduction of mandatory minimum sentences, and the implementation of truth-in-sentencing provisions to ensure that prisoners would serve longer portions of their sentences before being released (see the discussion in Chapter 3). The prison population was reclassified so that a greater percentage of prisoners were housed under maximum security conditions. The nation’s first true “supermax” prison was opened, where prisoners were kept in specially designed, windowless solitary confinement cells, isolated from any semblance of normal social contact nearly around the clock and on a long-term basis (a practice discussed later in this chapter). Investments in security measures expanded in Arizona during this era, including the use of trained attack dogs to extract recalcitrant prisoners from their cells, while rehabilitative program opportunities declined (Lynch, 2010).

Lynch also shows the ways in which Arizona prison officials modified many aspects of day-to-day prison operations in ways that collectively worsened more mundane but nonetheless important features of prison life.

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<sup>7</sup>Some scholars have questioned the feasibility of such a national system. For example, see Kutateladze (2009).

<sup>8</sup>For further articulation of these principles, see <http://www.aca.org/pastpresentfuture/principles.asp> and [http://www.americanbar.org/publications/criminal\\_justice\\_section\\_archive/crimjust\\_standards\\_treatmentprisoners.html#23-1.1](http://www.americanbar.org/publications/criminal_justice_section_archive/crimjust_standards_treatmentprisoners.html#23-1.1) [July 2013].

**BOX 6-1**  
**Basic Principles for the Treatment of Prisoners**

Adopted and proclaimed by General Assembly resolution 45/111 of 14 December 1990:

1. All prisoners shall be treated with the respect due to their inherent dignity and value as human beings.
2. There shall be no discrimination on the grounds of race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.
3. It is, however, desirable to respect the religious beliefs and cultural precepts of the group to which prisoners belong, whenever local conditions so require.
4. The responsibility of prisons for the custody of prisoners and for the protection of society against crime shall be discharged in keeping with a State's other social objectives and its fundamental responsibilities for promoting the well-being and development of all members of society.
5. Except for those limitations that are demonstrably necessitated by the fact of incarceration, all prisoners shall retain the human rights and fundamental freedoms set out in the Universal Declaration of Human Rights, and, where the State concerned is a party, the International Covenant on Economic, Social and Cultural Rights, and the International Covenant on Civil and Political Rights and the Optional Protocol thereto, as well as such other rights as are set out in other United Nations covenants.
6. All prisoners shall have the right to take part in cultural activities and education aimed at the full development of the human personality.
7. Efforts addressed to the abolition of solitary confinement as a punishment, or to the restriction of its use, should be undertaken and encouraged.
8. Conditions shall be created enabling prisoners to undertake meaningful remunerated employment which will facilitate their reintegration into the country's labour market and permit them to contribute to their own financial support and to that of their families.
9. Prisoners shall have access to the health services available in the country without discrimination on the grounds of their legal situation.
10. With the participation and help of the community and social institutions, and with due regard to the interests of victims, favourable conditions shall be created for the reintegration of the ex-prisoner into society under the best possible conditions.
11. The above Principles shall be applied impartially.

SOURCE: United Nations (1990).

The changes included housing two prisoners in cells that had been designed to hold only one, reducing prisoners' access to higher education, removing certain kinds of exercise equipment from the prison yard, reducing the time prisoners could spend watching television, placing greater limits on the amount and kind of personal property prisoners could have in their cells, requiring prisoners to pay fees for medical services and for the electricity needed to run their electrical appliances, charging room and board to those engaged in compensated inmate labor, greatly reducing the number of "compassionate leaves" that had allowed prisoners to be escorted outside prison to attend to urgent family matters (such as funerals), placing additional restrictions on prison visits in general and on contact visits in particular, requiring prisoners' visitors to consent to being strip searched as a precondition for prison visitation, instituting the tape recording of all prisoner phone calls and adding the expense of the recording process to the fees paid by prisoners and their families for the calls, and returning to the use of "chain gangs" in which groups of shackled prisoners were publicly engaged in hard labor under the supervision of armed guards on horseback. (See Lynch [2010, pp. 116-173], for a more complete description of these changes and the political dynamics that helped bring them about.)

Arizona may be near the far end of the spectrum of prison systems that implemented an especially severe regime of "penal harm" over the period of increasing rates of incarceration in the United States, but other observers have documented severe conditions in other states as well and reached sobering conclusions about the outcomes of incarceration. For example, in an ethnographic study of a modern and otherwise apparently well-run prison in California, Irwin (2005, p. 168) finds:

For long-termers, the new situation of doing time, enduring years of suspension, being deprived on material conditions, living in crowded conditions without privacy, with reduced options, arbitrary control, disrespect, and economic exploitation is excruciatingly frustrating and aggravating. Anger, frustration, and a burning sense of injustice, coupled with the crippling processing inherent in imprisonment, significantly reduce the likelihood [that prisoners can] pursue a viable, relatively conventional, non-criminal life after release.

Irwin (2005, p. 149) concludes that such conditions did "considerable harm to prisoners in obvious and subtle ways and [made] it more difficult for them to achieve viability, satisfaction, and respect when they are released from prison."

One of the most recent and comprehensive summaries of the current state of the nation's prisons was provided by the bipartisan Commission on Safety and Abuse in America's Prisons (Gibbons and Katzenbach, 2006). In 2005, the Commission held a series of information-gathering hearings

in several locations around the country in which it heard live testimony and received evidence from correctional, law enforcement, and other government officials; representatives of interested community agencies and citizens' groups; and a wide array of academic and legal experts. Witness testimony provided the most informed "snapshot" of prison conditions across the country available at that time and since. In its final report, the Commission acknowledges that "America's correctional facilities are less turbulent and deadly violent than they were decades ago," noting that "many correctional administrators have done an admirable job" in bringing these improvements about (Gibbons and Katzenbach, 2006, p. 390). However, the Commission also observes that, despite the decreases nationally in riots and homicides,

there is still too much violence in America's prisons and jails, too many facilities that are crowded to the breaking point, too little medical and mental health care, unnecessary uses of solitary confinement and other forms of segregation, a desperate need for the kinds of productive activities that discourage violence and make rehabilitation possible, and a culture in many prisons and jails that pits staff against prisoners and management against staff. (p. 390)

Thus, the authors argue that "steady decreases nationally in riots and homicides do not tell us about the much larger universe of less-than-deadly violence" or the "other serious problems that put lives at risk and cause immeasurable suffering" (p. 390).

### Imprisonment of Women

Although most of the research conducted on the effects of imprisonment on individuals focuses on male prisoners (e.g., Fletcher et al., 1993), approximately 1 of every 14 prisoners in the United States is female (Carson and Golinelli, 2013). In fact, the incarceration rates of white and Hispanic women in particular are growing more rapidly than those of other demographic groups (Guerino et al., 2011). Compared with men, women are sentenced more often to prison for nonviolent crimes: about 55 percent of women sentenced to prison have committed property or drug crimes as compared with about 35 percent of male prisoners (Guerino et al., 2011). Women also are more likely than men to enter prison with mental health problems or to develop them while incarcerated: about three-quarters of women in state prisons in 2004 had symptoms of a current mental health problem, as opposed to 55 percent of men (James and Glaze, 2006).

There are many similarities between men's and women's prisons and some notable differences, as depicted in a number of ethnographic studies and first-hand accounts by women prisoners (e.g., Morash and

Schram, 2002; Ritchie, 2004; Solinger et al., 2010). For example, Ward and Kassenbaum's (2009) ethnographic study of a women's prison finds that, although women were subjected to virtually the same pains and deprivations of imprisonment as men (albeit with less pressing threats of victimization by other inmates), they felt the loss of familial roles and affectional relationships much more acutely and adapted to the prison environment in ways that reflected this.

Owen's (1998) ethnographic study of the very large women's prison in California (the Central California Women's Facility [CCWF]) reveals an inmate culture that developed "in ways markedly different from the degradation, violence, and predatory structure of male prison life"; that is, "in some ways, the culture of the female prison seeks to accommodate these struggles rather than to exploit them" (Owen, 1998, p. 2). Yet despite the gendered nature of these accommodations, "the social organization of women in a contemporary prison is created in response to demands of the institution and to conditions not of their own making." Thus, just as in male prisons, the typical female prisoner's "subsequent immersion in this culture" has a temporal dimension that "shapes one's level of attachment to prison culture as one becomes prisonized . . . or socialized into the normative prison structure" (Owen, 1998, p. 2). Also as in male prisons, Owen reports that overcrowding permeated the conditions of daily life at CCWF.

Although there are a number of parallels between life in men's and women's prisons, women prisoners face a number of additional hardships that complicate their experience of incarceration. For one, women's prisons historically have been underresourced and underserved in correctional systems, so that women prisoners have had less access to programming and treatment than their male counterparts (e.g., Smykla and Williams, 1996). Women prisoners also are more likely to be the targets of sexual abuse by staff (e.g., Buchanan, 2007). Specifically, women victims of sexual coercion and assault in prison are much more likely than their male counterparts to report that the perpetrators were staff members (e.g., Struckman-Johnson and Struckman-Johnson, 2006). Beck (2012) finds that of all reported staff sexual misconduct in prison, three-quarters involved staff victimizing women prisoners.

A majority of women prisoners are mothers, who must grapple with the burden of being separated from their children during incarceration (e.g., Phillips and Harm, 1997). In 2004, 62 percent of female state and federal inmates (compared with 51 percent of male inmates) were parents. Of those female inmates, 55 percent reported living with their minor children in the month before arrest, 42 percent in single-parent households; for male inmates who were parents, the corresponding figures were 36 and 17 percent (Glaze and Maruschak, 2008).

### Imprisonment of Youth

In the 1980s and 1990s, new laws and changing practices criminalized many juvenile offenses and led more youth to be placed in custody outside the home,<sup>9</sup> including many who were tried as adults and even incarcerated in adult prisons. Confining youth away from their homes and communities interferes with the social conditions that contribute to adolescents' healthy psychological development: the presence of an involved parent or parent figure, association with prosocial peers, and activities that require autonomous decision making and critical thinking. In addition, many youth face collateral consequences of involvement in the justice system, such as the public release of juvenile and criminal records that follow them throughout their lives and limit future education and employment opportunities (National Research Council, 2013).

Youth transferred to the adult criminal justice system fare worse than those that remain in the juvenile justice system (Austin et al., 2000; Task Force on Community Preventive Services, 2007). The number of juveniles held in adult jails rose dramatically from 1,736 in 1983 to 8,090 in 1998, a 366 percent increase. In the late 1990s, 13 percent of confined juveniles were in adult jails or prisons (Austin et al., 2000); the proportion of confined juveniles who end up in adult jails or prisons is about the same today. According to Deitch and colleagues (2009), "once a [youth] has been transferred to adult court, many states no longer take his or her age into consideration when deciding where the child is to be housed before trial and after sentencing. . . . Although federal law requires separation of children and adults in correctional facilities, a loophole in the law does not require its application when those children are certified as adults. On any given day, a significant number of youth are housed in adult facilities, both in local jails and in state prisons" (p. 53). In 2008, 7,703 youth were counted in jails (Minton, 2013), and 3,650 prisoners in state-run adult prisons were found to be under 18 (Sabol et al., 2009). The number of juvenile inmates has declined in recent years, with 1,790 in prisons (Carson and Sabol, 2012).

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<sup>9</sup>Juveniles are considered to be confined (as opposed to incarcerated) when they are adjudicated delinquent and ordered to be placed in residence outside the home—for example, in a group home or juvenile correctional facility. In an overall trend that is very similar to the one we have described for adults, the confinement rate of juveniles increased through the 1980s and 1990s. By 1997, the juvenile confinement rate had reached a peak of 356 juveniles in placement per 100,000 population. The confinement rate of juveniles rose steadily from 167 in 1979, to 185 in the mid-1980s, to 221 in 1989, reaching a peak in 1997 before starting to decline (Allen-Hagen, 1991; Child Trends, n.d.; Kline, 1989; Office of Juvenile Justice and Delinquency Prevention, 1983; Sickmund et al., 2011). It is worth noting that the placement rate did not change substantially between 1985 and 2008; the increased confinement rate is due largely to the growth of delinquency referrals handled by juvenile courts during that period rather than greater use of placement (National Research Council, 2013).

and 5,900 in jails (Minton, 2013) in 2011. With the growth in prison and jail populations, juveniles still represent less than 1 percent of the overall incarcerated population.

When youth are confined in jails, detention centers, or prisons designed for adults, they have limited access to educational and rehabilitative services appropriate to their age and development. Living in more threatening adult correctional environments places them at greater risk of mental and physical harm (Deitch et al., 2009; National Research Council, 2013). Research also has shown that placing youth in the adult corrections system instead of retaining them in the juvenile system increases their risk of reoffending (Bishop and Frazier, 2000; Mulvey and Schubert, 2011; Redding, 2008).

These disadvantages are borne disproportionately by youth of color, who are overrepresented at every stage of the juvenile justice process and particularly in the numbers transferred to adult court. Youth of color also remain in the system longer than white youth. Minority overrepresentation within the juvenile justice system raises at least two types of concerns. First, it calls into question the overall fairness and legitimacy of the juvenile justice system. Second, it has serious implications for the life-course trajectories of many minority youth who may be stigmatized and adversely affected in other ways by criminal records attained at comparatively young ages (National Research Council, 2013).

Congress first focused on these kinds of racial disparities in 1988 when it amended the Juvenile Justice and Delinquency Prevention Act of 1974 (P.L. 93-415, 42 U.S.C. 5601 et seq.)<sup>10</sup> to require states that received federal formula funds to ascertain the proportion of minority youth detained in secure detention facilities, secure correctional facilities, and lockups compared with the general population. If the number of minority youth was disproportionate, then states were required to develop and implement plans for reducing the disproportionate representation. Despite a research and policy focus on this matter for more than two decades, however, remarkably little progress has been made toward reducing the disparities themselves. On the other hand, at least in the past decade, some jurisdictions have begun to take significant steps to overhaul their juvenile justice systems to reduce the use of punitive practices and heighten awareness of racial disparities (for more discussion, see National Research Council [2013]). The steady decline in the juvenile confinement rate, from 356 per

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<sup>10</sup>In 2002, Congress modified the disproportionate minority confinement requirement and mandated that states implement juvenile delinquency prevention and system improvement efforts across the juvenile justice system. Thus, the requirement was broadened from disproportionate minority confinement to disproportionate minority contact, and states were required to implement strategies aimed at reducing disproportionality.

100,000<sup>11</sup> in 1997 to 225 in 2010, is one indication that these reforms may be having the desired impact (Child Trends, n.d.; Sickmund et al., 2011).

### General Psychological Observations

Imprisonment produces negative, disabling behavioral and physical changes in some prisoners, and certain prison conditions can greatly exacerbate those changes. Although imprisonment certainly is not uniformly devastating or inevitably damaging to individual prisoners, “particular vulnerabilities and inability to cope and adapt can come to the fore in the prison setting, [and] the behavior patterns and attitudes that emerge can take many forms, from deepening social and emotional withdrawal to extremes of aggression and violence” (Porporino, 1990, p. 36). As discussed further below, numerous empirical studies have confirmed this observation. Even one review of the literature (Bonta and Gendreau, 1990) reaching the overall conclusion that life in prison was not necessarily as damaging to prisoners as many had previously assumed nonetheless cites a number of studies documenting a range of negative, harmful results, including these empirical facts: “physiological and psychological stress responses . . . were very likely [to occur] under crowded prison conditions”; “a variety of health problems, injuries, and selected symptoms of psychological distress were higher for certain classes of inmates than probationers, parolees, and, where data existed, for the general population”; studies show that long-term incarceration can result in “increases in hostility and social introversion . . . and decreases in self-evaluation and evaluations of work” for some prisoners; and imprisonment itself can produce “increases in dependency upon staff for direction and social introversion,” “deteriorating community relationships over time,” and “unique difficulties” with “family separation issues and vocational skill training needs” (Bonta and Gendreau, 1990, pp. 353-359).

### Coping with the Stresses of Incarceration

Many aspects of prison life—including material deprivations; restricted movement and liberty; a lack of meaningful activity; a nearly total absence of personal privacy; and high levels of interpersonal uncertainty, danger, and fear—expose prisoners to powerful psychological stressors that can

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<sup>11</sup>Rates are calculated per 100,000 juveniles ages 10 through the upper age limit of each state’s juvenile court jurisdiction (Child Trends, n.d.; Sickmund et al., 2011).

adversely impact their emotional well-being.<sup>12</sup> Toch and Adams (2002, p. 230) conclude that the “dictum that prisons are stressful cannot be overestimated” and identify patterns of “acting out” and other forms of apparently “maladaptive” behavior in which prisoners sometimes engage as they attempt to cope with the high levels of stress they experience in confinement.

Prison stress can affect prisoners in different ways and at different stages of their prison careers. Some prisoners experience the initial period of incarceration as the most difficult, and that stress may precipitate acute psychiatric symptoms that surface for the first time. Preexisting psychological disorders thus may be exacerbated by initial experiences with incarceration (e.g., Gibbs, 1982). Other prisoners appear to survive the initial phases of incarceration relatively intact only to find themselves worn down by the ongoing physical and psychological challenges and stress of confinement. They may suffer a range of psychological problems much later in the course of their incarceration (Taylor, 1961; Jose-Kampfner, 1990; Rubenstein, 1982).

For some prisoners, extreme prison stress takes a more significant psychological toll. Posttraumatic stress disorder (PTSD) is a diagnosis applied to a set of interrelated, trauma-based symptoms, including depression, emotional numbing, anxiety, isolation, and hypervigilance.<sup>13</sup> In a review of the international literature, Goff and colleagues (2007) find that the prevalence of PTSD in prisoner populations varies across studies from 4 to 21 percent, suggesting a rate that is 2 to 10 times higher than the prevalence found in community samples (Kessler et al., 1995; Stein et al., 1997). Studies conducted in the United States have observed the highest prevalence: PTSD is reported in 21 percent of male prisoners (Gibson et al., 1999; Powell et al., 1997) and in as many as 48 percent of female prisoners (Zlotnick, 1997), and in 24 to 65 percent of male juvenile inmates (Heckman et al., 2007; see also Gibson et al., 1999).

Herman (1992) proposes an expanded diagnostic category that appears to describe more accurately the kind of traumatic reactions produced by certain experiences within prisons. What she terms “complex PTSD” is brought about by “prolonged, repeated trauma or the profound

<sup>12</sup>Early studies of the impact of exposure to extreme forms of environmental stress in general concluded that it “may result in permanent psychological disability” and that “subjection to prolonged, extreme stress results in the development of ‘neurotic’ symptoms” in persons exposed to it (Hocking, 1970, p. 23).

<sup>13</sup>Four criteria must be met for the diagnosis of PTSD to be applied. A person must (1) be exposed to a severe stressor resulting in intense fear or helplessness; (2) undergo psychic reexperiencing or reenacting of the trauma; (3) engage in avoidance behavior or experience psychic numbing; and (4) experience increased arousal, typically in the presence of stimuli related to or reminiscent of the original trauma (American Psychiatric Association, 2000). For additional discussion of the disorder, see Wilson and Raphael (1993).

deformations of personality that occur in captivity” (p. 118). As reported in Haney (2006, p. 185), “unlike classic PTSD—which arises from relatively circumscribed traumatic events—complex PTSD derives from chronic exposure that is more closely analogous to the experience of imprisonment. Complex PTSD can result in protracted depression, apathy, and the development of a deep sense of hopelessness as the long-term psychological costs of adapting to an oppressive situation.”

Of course, the unique and potent stresses of imprisonment are likely to interact with and amplify whatever preexisting vulnerabilities prisoners bring to prison. Prisoners vary in their backgrounds and vulnerabilities and in how they experience or cope with the same kinds of environments and events. As a result, the same prison experiences have different consequences for different prisoners (e.g., Hemmens and Marquart, 1999; Gullone et al., 2000). Many prisoners come from socially and economically marginalized groups and have had adverse experience in childhood and adolescence that may have made them more rather than less vulnerable to psychological stressors and less able to cope effectively with the chronic strains of prison life than those with less problematic backgrounds (e.g., Gibson et al., 1999; Greene et al., 2000; McClellan et al., 1997; Mullings et al., 2004; Zlotnick, 1997).

As noted earlier, significant percentages of prisoners suffer from a range of serious, diagnosable psychological disorders, including clinical depression and psychosis as well as PTSD. The exact onset and causal origins of these disorders cannot always be determined—some are undoubtedly preexisting conditions, some are exacerbated by the harshness and stress of incarceration, and others may originate in the turmoil and trauma generated by prison experiences. The incidence of psychological disorders among prisoners is discussed further in Chapter 7.

### Prisonization: Adaptation to the Nature of Prison Life

Clemmer (1958, p. 299) defined “prisonization” as “the taking on in greater or less degree of the folkways, mores, customs, and general culture of the penitentiary” (see also Gillespie, 2003; Ohlin, 1956; Pollock, 1997). Incorporating these mores is a matter less of choice than of necessity. As one prisoner put it: “Those who adhere to the main tenets of prison culture—never ‘rat’ on another prisoners, always keep your distance from staff, ‘do your own time’—have the best chance of avoiding violence” (quoted by Morris [1995, p. 211]). In addition to the internalizing of cultural aspects of the prison, prisonization occurs as prisoners undergo a number of psychological changes or transformations to adapt to the demands of prison life. It is a form of coping in response to the abnormal practices and conditions that incarceration entails. The nature and degree of prisonization will vary

among prisoners, depending, in part, on their personal identity, strengths and weaknesses, and individual experiences both prior to prison and during the course of their prison stay (e.g., MacKenzie and Goodstein, 1995; Paterline and Petersen, 1999; Walters, 2003).

Two notable characteristics of the prison environment contribute to the process of prisonization: the necessary structure and routines that can erode personal autonomy and the threat of victimization. Maintaining order and safety within prisons often requires that routines and safeguards be established. As a result, daily decisions—such as when they get up; when, what, or where they eat; and when phone calls are allowed—are made for prisoners. Over long periods, such routines can become increasingly natural (Zamble, 1992), and some prisoners can become dependent on the direction they afford. As Irwin (2005, p. 154) put it, because “prison life is completely routinized and restricted,” over time “prisoners steadily lose their capacity to exert power and control their destiny. . . .” He elaborates: “Months or years of getting up at a certain time to certain signals, going about the day in a routine fashion, responding to certain commands, being among people who speak a certain way, and doing things repetitively inures prisoners to a deeply embedded set of unconscious habits and automatic responses” (p. 166). Those who succumb to prisonization may have trouble adjusting to life back in the community, which is more unstructured and unpredictable. In extreme cases, some lose the capacity to initiate activities and plans and to make decisions (Haney, 2006).

In addition, prisoners often are aware of the threat of victimization, especially in overcrowded institutions. As part of the process of prisonization, prisoners develop strategies for coping with or adjusting to this threat (McCorkle, 1992). Some prisoners become hypervigilant. Some cope with the threat of victimization by establishing a reputation for toughness, reacting quickly and instinctively even to seemingly insignificant insults, minor affronts, or slightest signs of disrespect, sometimes with decisive (even deadly) force (Haney, 2011; Phillips, 2001). Other prisoners adopt aggressive survival strategies that include proactively victimizing others (King, 1992; Rideau and Sinclair, 1998). For example, sexual assault in prison has been described as a tragic and extreme adaptation to prison’s harsh context, with severe, traumatic consequences for others (Coggeshall, 1991). As King (1992, pp. 68-69) put it: “Men who have been deprived of most avenues of self-expression and who have lost status by the act of imprisonment may resort to the use of sexual and physical power to reassert their uncertain male credentials.”

The process of adapting to the prison environment has several psychological dimensions. Prisonization leads some prisoners to develop an outward emotional and behavioral demeanor—a kind of “prison mask”—that conceals internal feelings and reactions. Often unable to trust anyone, they

disconnect and withdraw from social engagement (Jose-Kampfer, 1990; Sapsford, 1978). Some prisoners can become psychologically scarred in ways that intensify their sense of anger and deepen their commitment to the role of an outsider, and perhaps a criminal lifestyle (Irwin, 2005).

The prisonization process has additional psychological components. In discussing the “degradation ceremonies” that are a common feature of prison life, Irwin (2005, pp. 163-164) emphasizes that “treating prisoners with contempt and hostility and persistently and systematically casting them as unworthy harms them in complicated and somewhat unexpected ways,” including leaving them psychologically scarred; deepening their commitment to an outsider, criminal lifestyle; and intensifying a sense of anger that collectively “leaves them ill-equipped for assuming conventional life on the outside.”

Finally, as Lerman (2009b, pp. 154-155) notes, the experience of prison may also socialize prisoners “toward the entrenchment or adoption of antisocial norms, which reinforce attitudes that undermine compliance. Similarly, it may build an ‘us against them mentality’ that leads individuals to feel isolated from correctional workers, law-abiding citizens, or society as a whole.” This aspect of prisonization may rigidify once a prisoner is released.

Prisoners who have deeply internalized the broad set of habits, values, and perspectives brought about by prisonization are likely to have difficulty transitioning to the community. Indeed, the ability to adapt successfully to certain prison contexts may be inversely related to subsequent adjustment in one’s community (Goodstein, 1979). Not surprisingly, according to Haney (2006, p. 179), “a tough veneer that precludes seeking help for personal problems, the generalized mistrust that comes from the fear of exploitation, and the tendency to strike out in response to minimal provocations are highly functional in many prison contexts and problematic virtually everywhere else.”

### Extreme Conditions of Imprisonment

We have repeatedly emphasized that even maximum and medium security prisons vary widely in how they are physically structured, in the procedures by which they operate, and in the corresponding psychological environment inside. We have focused our analysis primarily on what can be regarded as the common features of prison life, lived under ordinary circumstances. Living in prison necessarily includes exposure to deprivation, danger, and dehumanization, all experienced as part of what might be termed the “incidents of incarceration.” The experience is not (and is not intended to be) pleasant and, as we have shown, can be harmful or damaging when endured over a long period of time. However, the aphorism that

“persons are sent to prison *as* punishment not *for* punishment” (MacDonald and Stöver, 2005, p. 1) is a reminder that certain extremes of incarceration can exacerbate its adverse consequences. In this section, we consider two prison conditions that are at the extreme ends of the social spectrum of experiences within prison—overcrowding and isolation.

### Overcrowding

As noted earlier, the rapid increase in the overall number of incarcerated persons in the United States resulted in widespread prison overcrowding. The speed and size of the influx outpaced the ability of many states to construct enough additional bedspace to meet the increased demand (Haney, 2006). Despite recent declines in the populations of some state prison systems, many state systems, as well as the Federal Bureau of Prisons, remain “overcrowded,” defined as operating at or very near their design capacity and many cases well above it.<sup>14</sup>

Specifically, as of the end of 2010, only 20 state prison systems were operating at less than 100 percent of design capacity, while 27 state systems and the Federal Bureau of Prisons were operating at 100 percent of design capacity or greater (see Guerino et al., 2011, Appendix Table 23).<sup>15</sup> At the extremes, statewide prison systems in Alabama and California were operating at nearly 200 percent of design capacity in 2010. California has experienced significant prison population reductions since then, largely in response to the federal court directive issued in *Brown v. Plata* (2011).<sup>16</sup> The Federal Bureau of Prisons was operating at 136 percent of its design capacity in 2010 (Guerino et al., 2011).

In the mid-1970s, the average prisoner in a maximum security prison in the United States was housed in a single cell that was roughly 60 square feet in dimension (slightly larger than a king size bed or small bathroom). That relatively small area typically held a bunk, a toilet and sink (usually fused into a single unit), a cabinet or locker in which prisoners stored their personal property (which had to be kept inside the cell), and sometimes a small table or desk. After the 1970s, double-celling (or, in extreme cases, triple-celling, dormitory housing, or even the use of makeshift dormitories

<sup>14</sup>There are several ways to specify a prison’s or prison system’s “capacity.” The “design capacity” of a prison is the number of prisoners that planners or architects designed it to hold. “Operational capacity” generally refers to the number of inmates that can be accommodated based on a facility’s staff, existing programs, and services. The term “rated capacity” is sometimes used to refer to the number of prisoners that a rating official in a jurisdiction has indicated the prison or system can or should hold. See Carson and Sabol (2012, p. 18).

<sup>15</sup>Guerino and colleagues (2011) could not obtain data for three states—Connecticut, Nevada, and Oregon.

<sup>16</sup>*Brown v. Plata*, 131 S. Ct. 1910 (2011).

located in converted gymnasiums or dayrooms) became the norm in prisons throughout the country as correctional systems struggled to keep pace with unprecedented growth in the prison population. The use of double-celling can place a significant strain on prison services if not accompanied by commensurate increases in staffing, programming resources and space, and infrastructure to accommodate the larger population of prisoners in confined spaces. During the period of rapidly increasing rates of incarceration, legislators, correctional officials, and prison architects came to assume that double-celling would continue, and as noted earlier, the Supreme Court in essence authorized its use.<sup>17</sup> The new prisons that were built during this period provided somewhat larger cells, responding to the revised American Correctional Association (2003) standards calling for a minimum of 80 square feet of space for double-bunked cells, which typically housed two prisoners.

Despite the initial widespread concern over double-celling among correctional professionals, prison litigators, and human rights groups, this practice became common in prison systems across the United States. Although many prisoners have a decidedly different view, correctional officials report that it causes a minimum of disruption to basic prison operations (Vaugh, 1993). Several correctional practices have perhaps ameliorated the dire consequences that were predicted to follow widespread double-celling. One such practice is use of the larger cells mentioned above. These are smaller than the previously recommended 60 square feet of space per prisoner, and not all prisons adhere to this new standard. However, those that do—typically prisons built more recently—provide double-celled prisoners with more space than they had in the small cells common in older facilities. In addition, even in some older facilities that do not meet the newer standard, the adverse consequences of double-celling can be mitigated by extending the amount of time prisoners are permitted to be out of their cells and increasing the number of opportunities they have for meaningful programming and other productive activities.

A large literature on overcrowding in prison has documented a range of adverse consequences for health, behavior, and morale, particularly when overcrowding persists for long periods (e.g., Gaes, 1985; Ostfeld, 1987; Paulus et al., 1988; Thornberry and Call, 1983). Early research observed elevated blood pressures (D'Atri, 1975) and greater numbers of illness complaints (McCain et al., 1976). More recently, British researchers found that overcrowding and perceived aggression and violence were related to increased arousal and stress and decreased psychological well-being (Lawrence and Andrews, 2004). In another study, Gillespie (2005) observed that prior street drug use and degree of overcrowding could explain the

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<sup>17</sup>*Rhodes v. Chapman*, 452 U.S. 337 (1981).

likelihood of in-prison drug use. In addition, several studies have made a connection between overcrowding and the increased risk of suicide (Huey and McNulty, 2005; Leese et al., 2006; Wooldredge, 1999). According to Huey and McNulty (2005, p. 507), “the reduced risk of suicide found in much prior research to be evident in minimum security facilities is in fact voided by the deleterious effects of high overcrowding.” Overcrowding within prisons may lead to increased risk of suicide because it decreases the level of “purposeful activity” in which prisoners are able to engage (Leese et al., 2006; see, also, Wooldredge, 1999).

Establishing empirical relationships between overcrowding and inmate disciplinary infractions and violence has proven challenging (e.g., Bleich, 1989). Some studies have found a causal relationship, while others have not (for a review, see Steiner and Wooldredge, 2009). The apparent inconsistency in outcomes may be due in part to other factors of prison life that complicate research in this area, including the level of analysis at which crowding is measured and its effects are assessed (e.g., whether crowding is measured in an individual housing unit, institution, or system); the extent to which prison practices actually change (and/or are perceived by prisoners to have changed) in response to overcrowding, altering such things as classification and security procedures; and the frequency with which disciplinary infractions and victimization are reported. Prison operations adjust and institutional actors adapt in multiple ways in attempts to deal with overcrowding-related pressures. Inmate violence levels themselves are known to be affected by a complex set of forces and factors (Steiner, 2009), and even undercrowded conditions, prisoner behavior can be managed through exceptional means, such as an especially high concentration of staff (Tartino and Levy, 2007). These and other complexities likely help explain the lack of definitive research results on this issue.

According to Haney (2006, p. 202), “overcrowding may affect prisoners’ mental and physical health by increasing the level of uncertainty with which they regularly must cope. . . . Crowded conditions heighten the level of cognitive strain prisoners experience by introducing social complexity, turnover, and interpersonal instability into an environment in which interpersonal mistakes or errors in social judgment can be detrimental or dangerous” (Cox et al., 1984; DiCataldo et al., 1995). Overcrowding is likely to raise collective frustration levels inside prisons by generally decreasing the amount of resources available to prisoners. In addition, overcrowding has systemic consequences for prison systems. Prisons and prison systems may become so crowded that staff members struggle to provide prisoners with basic, necessary services such as proper screening and treatment for medical and mental illnesses (see Chapter 7). In fact, the Supreme Court recently concluded that overcrowding in the large California prison system

was the primary cause of the state's inability to provide its prisoners with constitutionally adequate medical and mental health care.<sup>18</sup>

Prison administrators can take steps to ameliorate the potentially harmful impact of overcrowding, and many of them have done so. To deal with drug use, for example, prison officials have effectively employed increased surveillance and interdiction of the flow of drugs into prisons, increased the number and effectiveness of internal searches, implemented more random drug testing of prisoners, provided significant disincentives for drug possession or use, made treatment more accessible to prisoners with substance abuse problems, and closely monitored the continued application of these measures and their outcomes. Such control efforts have proven effective as part of a comprehensive drug interdiction program in reducing overall levels of drug use even in overcrowded prisons (e.g., Feucht and Keyser, 1999; Prendergast et al., 2004).

Heightened staffing levels may allow prisons to approximate the kind of programming and increased out-of-cell time that less crowded prisons would afford (at least to the point where the sheer lack of space impedes or prevents doing so) and may serve to counteract some of the adverse consequences of overcrowding. Similarly, the introduction of improved mental health monitoring and suicide prevention programs may lessen the harmful psychological consequences of overcrowding.

As noted earlier, there is evidence that at least since the 1990s, prisons generally have become safer and more secure along certain measurable dimensions. Specifically, the number of riots and escapes and per capita rates of staff and inmate homicides and suicides all have decreased sharply from the early 1970s. Thus, however much the severe overcrowding and lack of programming may have adversely affected the quality of life for prisoners, certain basic and important forms of order and safety were maintained and even improved in some prison systems (Useem and Piehl, 2006, 2008).

There are a number of plausible explanations for this unexpected finding. For one, during the period in which rates of imprisonment rapidly increased, a greater proportion of prisoners were incarcerated for nonviolent, less serious crimes. In addition, the architecture and technology of institutional control became much more sophisticated and elaborate over this period, so that correctional systems may have become more effective at responding to and thwarting disruptive or problematic behavior. A number of commentators also have acknowledged the important ways in which decisive judicial intervention and continuing oversight contributed significantly to maintaining prison order and stability, as well as ameliorating the most inhumane practices and conditions during the period of the prison buildup (Feeley and Rubin, 1998; Schlanger, 2003). Finally, other

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<sup>18</sup>*Brown v. Plata*, 131 S. Ct. 1910 (2011).

commentators have concluded that political and correctional leadership made an important contribution to the safer and more secure prisons (Carroll, 1998; DiJulio, 1987; Useem and Piehl, 2008).

As Useem and Piehl (2006) have noted, research is still needed to better understand the full range of factors that help explain the maintenance of prison order and “to develop a more differentiated view of how some systems succeed and others fail” (p. 108). Also deserving of further study is the extent to which prisoner characteristics, modern forms of architectural and institutional control, decisive judicial intervention, and the use of more sophisticated prison management practices have successfully offset the negative consequences of overcrowding discussed above. Whether and to what degree some or all of these ameliorating factors may have entailed significant trade-offs in other aspects of the quality of prison life should be investigated as well (e.g., Liebling, 2011).

### Long-Term Isolation

Historically, to maintain order and safety within facilities, prison administrators have placed individuals exhibiting assaultive, violent, or disruptive behaviors in housing units separate from the general prison population. Segregation or isolated confinement goes by a variety of names in prisons in the United States—solitary confinement, security housing, administrative segregation, close management, high security, closed cell restriction, and others. Isolated units may also be used for protective custody, for those inmates that need to be protected from others but do not necessarily pose a threat to the population. Such units have in common the fact that the prisoners they house have limited social contact in comparison with the general prison population. Among prison systems, there are different types of isolation units, ranging from less to more restrictive in terms of social contact and security. For example, the Bureau of Prisons has three types of segregated housing: special housing units, special management units, and administrative maximum. Referral to and placement in these units are governed by policies for determining the level of security and supervision the Bureau of Prisons believes is required (Government Accountability Office, 2013).

In less restrictive units, inmates may have limited congregate activity with others, be provided access to programming (e.g., educational and vocational training), and even be permitted to have work assignments. In more restrictive units, isolated inmates rarely if ever engage in congregate or group activity of any kind, have limited if any access to meaningful programming, are not permitted contact visits, and have most or all of their social contact limited to routine interactions with correctional staff. The social contact permitted with chaplains, counselors, psychologists,

and medical personnel may occur under conditions in which prisoners are confined in cages, separated by bars or security screens, in mechanical restraints, or sometimes all three. The same is typically true of whatever limited contact they may be permitted to have with other inmates. Even under the best of circumstances, such restrictions mean that social contact or social interaction can hardly be considered “normal.” This applies to instances in which prisoners in isolation units are double-celled with others. Although they have more social contact of a certain sort, in some ways double-celled prisoners in “isolated” confinement experience the worst of both worlds—they are deprived of even the minimal freedoms and programming opportunities afforded to mainline prisoners while at the same time being housed virtually around the clock with another person, inside a small space barely adequate for one.

Estimates of the number and rates of prisoners in isolated housing are limited by variations in the definitions and terms used to denote solitary-type confinement across different prison systems, as well as the fact that few systems regularly and reliably provide access to data on these issues. With those limitations in mind, it appears that about 5 percent of the U.S. prison population resides in isolated housing units at any given time. Although it is impossible to calculate precisely and reliably whether and how much overall change has occurred in the rate at which prison systems have resorted to isolated confinement during the period of increased rates of incarceration, the fact that there are many more persons in prison means that significantly more of them have been subjected to isolated confinement. Prison censuses conducted by BJS have yielded estimates of increased numbers of prisoners in “restricted housing,” growing from 57,591 in 1995 to 80,870 in 2000 and then 81,622 in 2005 (Stephan, 2008). In these data, restricted housing includes disciplinary segregation, administrative segregation, and protective custody, and these figures represent a 1-day count. In each case, some facilities simply failed to respond to this census item, which may make these figures low-end estimates (e.g., in 2005 the Bureau of Prisons simply did not answer the relevant questions, whereas in 2000 it reported 5,000 in restricted housing). A recent review by the Government Accountability Office (2013) found that 7 percent of the federal prison population was held in segregated housing units in 2013 (5.7 percent in special housing units, 1.1 percent in special management units, and 0.3 percent in administrative maximum). This represents an increase of approximately 17 percent over the numbers held in 2008 and, based on the current Bureau of Prisons prisoner population, indicates that approximately 15,000 federal inmates are confined in restricted housing.

There is general agreement that over the past several decades, prison systems in the United States began to rely more heavily on the practice of confining prisoners on a long-term basis inside the most restrictive kind of

isolation units—so-called “supermax prisons.” Thus, as Useem and Piehl (2006, p. 101) note: “Supermax prisons, once a novelty, have become common. In 1984, the U.S. Penitentiary in Marion, Illinois, was the only supermax prison in the country. By 1999, 34 states and the federal system had supermax prisons, holding just over 20,000 inmates or 1.8 percent of the total prison population. . . .”

The average lengths of stay within isolation units are also difficult to calculate precisely and, because of sporadic reporting by state and federal prisons administrations, impossible to estimate overall. Indeed, only a handful of states have collected data on time spent in isolation. In one public report, Colorado’s fiscal year 2011 review found that prisoners spent a mean of 19.5 months in isolation (14.1 months for those with mental health needs) (Colorado Department of Corrections, 2012). Jurisdictions vary widely in the degree to which they impose determinate and indeterminate terms of isolated confinement, whether there are mechanisms or “steps” by which prisoners can accelerate their release from such restrictive housing, and whether “step-down” or transitional programming is provided for prisoners who are moving from isolated confinement to mainline prison housing or being released from prison. There have been a number of reported cases of isolated confinement for periods of 25 or more years.<sup>19</sup>

The rest of this section focuses on what is known about long-term confinement in these most restrictive “supermax”-type isolated housing units. By policy, these special units are reserved for inmates believed by correctional officials to pose serious problems for prison operations. The supermax prison represents an especially modern version of an old practice—prison isolation—but now paired with increasingly sophisticated correctional technology.<sup>20</sup> Many supermax prisoners are subjected to these conditions for years (and, in extreme cases, for decades), an official practice that had not been widely used in the United States for the better part of a century. (See, for example, *In re Medley*, 134 U.S. 160 [1890]). Indeed, many penologists and correctional legal scholars have condemned the practice as “draconian, redolent with custodial overkill, and stultifying” (Toch, 2001, p. 383) and concluded that this kind of confinement “raise[d] the level of punishment close to that of psychological torture” (Morris, 2000, p. 98).

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<sup>19</sup>*Ruiz et al. v. Brown et al.*, CA, Case No. 4-09-cv-05796-CW; *Silverstein v. Federal Bureau of Prisons*, Civil Action No. 07-CV-02471-PMB-KMT; *Wilkerston et al. v. Stalder et al.*, Civil Action Number 00-304-RET-DLD.

<sup>20</sup>“Supermax prison” most commonly refers to modern solitary confinement or segregation units that are often free-standing facilities dedicated entirely (or nearly so) to long-term isolation and that employ particularly technologically sophisticated forms of correctional surveillance and control.

The possibility that supermaxes may have contributed to a reduction in misbehavior in prisons has been characterized as “speculative” by some analysts (Useem and Piehl, 2006), and the existing empirical evidence suggests that these facilities have done little or nothing to reduce system-wide prison disorder or disciplinary infractions (Briggs et al., 2003). At least one prison system that greatly reduced the number of segregated prisoners by transferring them to mainline prisons reported experiencing an overall *reduction* in misconduct and violence systemwide (Kupers et al., 2009). Moreover, some empirical evidence indicates that time spent under supermax prison conditions contributes to elevated rates of recidivism (Lovell et al., 2007; Mears and Bales, 2009). Further research is needed on the relationship between levels of use of long-term isolation of prisoners and both overall behavior within prisons and recidivism rates.

There are sound theoretical bases for explaining the adverse effects of prison isolation, including the well-documented importance of social contact and support for healthy psychological and even physical functioning (e.g., Cacioppo and Cacioppo, 2012; Festinger, 1954; Hawkley and Cacioppo, 2003; Schachter, 1959; Turner, 1983; Thornicroft, 1991). The psychological risks of sensory and social deprivation are well known and have been documented in studies conducted in a range of settings, including research on the harmful effects of acute sensory deprivation, the psychological distress and other problems that are caused by the absence of social contact, and the psychiatric risks of seclusion for mental patients. (See Cacioppo and Cacioppo [2012] and Haney and Lynch [1997], for reviews of a broad range of these and other related studies on the adverse effects of social isolaton.) As Cooke and Goldstein (1989, p. 288) note:

A socially isolated individual who has few, and/or superficial contacts with family, peers, and community cannot benefit from social comparison. Thus, these individuals have no mechanism to evaluate their own beliefs and actions in terms of reasonableness or acceptability within the broader community. They are apt to confuse reality with their idiosyncratic beliefs and fantasies and likely to act upon such fantasies, including violent ones.

An extensive empirical literature indicates that long-term isolation or solitary confinement in prison settings can inflict emotional damage (see Haney, 2003; Haney and Lynch, 1997; Scharf-Smith, 2006; Shalev, 2009, for summaries). The overwhelming majority of studies document the painful and potentially damaging nature of long-term prison isolation.<sup>21</sup> Occa-

<sup>21</sup>According to Haney (2003, p. 130), “Despite some methodological limitations that apply to some of the individual studies, the findings are robust. Evidence of these negative psychological effects comes from personal accounts, descriptive studies, and systematic research on solitary and supermax-type confinement, conducted over a period of four decades, by

sional studies have found little or no harm—Zinger and colleagues (2001) document no ill effects from as much as 60 days in isolation, while O’Keefe and colleagues (2013) report that a year in administrative segregation actually benefited prisoners (including those who were mentally ill). However, numerous methodological concerns have been expressed that limit any straightforward interpretation of these counterintuitive results (e.g., Grassian and Kupers, 2011; Lovell and Toch, 2011; Rhodes and Lovell, 2011; Shalev and Lloyd, 2011; Scharf-Smith, 2011).

One noteworthy example of research in this area is Toch’s (1975) large-scale psychological study of prisoners “in crisis” in New York state correctional facilities, which includes important observations about the consequences of isolation. In-depth interviews with a large sample of prisoners led Toch to conclude that “isolation panic”—whose symptoms included rage, panic, loss of control and breakdowns, psychological regression, and a buildup of physiological and psychic tension that led to incidents of self-mutilation—was “most sharply prevalent in segregation.” Moreover, Toch reports that the prisoners he interviewed made an important distinction “between imprisonment, which is tolerable, and isolation, which is not” (Toch, 1975, p. 54).

Other direct studies of prison isolation document a broad range of harmful psychological effects (e.g., Brodsky and Scogin, 1988; Cormier and Williams, 1966; Gendreau et al., 1972; Grassian, 1983; Grassian and Friedman, 1986; Korn, 1988a, 1988b; Scott and Gendreau, 1969; Walters et al., 1963). These effects include heightened levels of “negative attitudes and affect, insomnia, anxiety, panic, withdrawal, hypersensitivity, ruminations, cognitive dysfunction, hallucinations, loss of control, irritability, aggression and rage, paranoia, hopelessness, depression, a sense of impending

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researchers from several different continents who had diverse backgrounds and a wide range of professional expertise. . . . Specifically, in case studies and personal accounts provided by mental health and correctional staff who worked in supermax units, a range of similar adverse symptoms have been observed to occur in prisoners, including appetite and sleep disturbances, anxiety, panic, rage, loss of control, paranoia, hallucinations, and self-mutilations. Moreover, direct studies of prison isolation have documented an extremely broad range of harmful psychological reactions. These effects include increases in the following potentially damaging symptoms and problematic behaviors: negative attitudes and affect, insomnia, anxiety, withdrawal, hypersensitivity, ruminations, cognitive dysfunction hallucinations, loss of control, irritability, aggression, and rage, paranoia, hopelessness, lethargy, depression, a sense of impending emotional breakdown, self-mutilation, and suicidal ideation and behavior. In addition, among the correlational studies of the relationship between housing type and various incident reports, again, self-mutilation and suicide are more prevalent in isolated housing, as are deteriorating mental and physical health (beyond self-injury), other-directed violence, such as stabbings, attacks on staff, and property destruction, and collective violence” [internal citations omitted].

emotional breakdown, self-mutilation, and suicidal ideation and behavior” (Haney, 2003, pp. 130-131).

Beyond these discrete negative consequences of isolation, a number of significant transformations appear to occur in many prisoners who have been placed in long-term segregation (see Box 6-2) that, although more difficult to measure, may be equally if not more problematic over the long term (Haney, 2003). These transformations come about because many prisoners find that they must change their patterns of thinking, acting, and feeling to survive the rigors of penal isolation. Such changes are perhaps best understood as forms of “social pathology”—brought about by the absence of normal social contact—that can become more or less permanent and limit the ability of those affected to integrate with others when released from segregation.

Some of the social pathologies that are adopted in reaction to and as a way of psychologically surviving the extreme rigors and stresses of long-term segregation can be especially dysfunctional and potentially disabling if they persist in the highly social world to which prisoners are expected to adjust once they are released. These psychological consequences speak to the importance of regularly screening, monitoring, and treating; sometimes removing prisoners who show signs of psychological deterioration; limiting or prohibiting the long-term isolation of prisoners with special vulnerabilities (such as serious mental illness);<sup>22</sup> and providing decompression, step-down, and/or transitional programs and policies to help those held in isolation acclimate to living within the prison population and/or the community upon release.

### Idleness and Programming

In recounting a day of his maximum security prison routine to the late Norval Morris (1995, p. 203), one prisoner observed:

For me, and many like me in prison, violence is not the major problem; the major problem is monotony. It is the dull sameness of prison life, its idleness and boredom, that grinds me down. Nothing matters; everything is inconsequential other than when you will be free and how to make time pass until then. But boredom, time-slowing boredom, interrupted by occasional bursts of fear and anger, is the governing reality of life in prison.

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<sup>22</sup>For example, the American Psychiatric Association (2012) issued a Position Statement on Segregation of Prisoners with Mental illness stating that “prolonged segregation of adult inmates with serious mental illness, with rare exceptions, should be avoided due to the potential for harm to such inmates.” The Position Statement also explains that “the definition of ‘prolonged segregation’ will, in part, depend on the conditions of confinement. In general, prolonged segregation means duration of greater than 3-4 weeks.”

**BOX 6-2**  
**Consequences of Long-term Segregation: Social Pathologies**

Haney (2003, pp. 138-140) describes "several of the social pathologies that [he and others found] can and do develop in prisoners who struggle to adapt to the rigors of [isolation in] supermax confinement. . . ."

"First, the unprecedented totality of control in supermax units forces prisoners to become entirely dependent on the institution to organize their existence . . . because almost every aspect of the prisoners' day-to-day existence is so carefully and completely circumscribed in these units, some of them lose the ability to set limits for themselves or to control their own behavior through internal mechanisms. . . ."

"Second, prisoners may also suffer a seemingly opposite reaction [in that] they may begin to lose the ability to initiate behavior of any kind—to organize their own lives around activity and purpose—because they have been stripped of any opportunity to do so for such prolonged periods of time. Chronic apathy, lethargy, depression, and despair often result. . . ."

"Third, [in] the absence of regular, normal interpersonal contact and any semblance of a meaningful social context . . . prisoners are literally at risk of losing their grasp on who they are, of how and whether they are connected to a larger social world. Some prisoners act out literally as a way of getting a reaction from their environment, proving to themselves that they are still alive and capable of eliciting a genuine response—however hostile—from other human beings.

"Fourth, the experience of total social isolation can lead, paradoxically, to social withdrawal for some. . . . That is, they . . . move from, at first, being starved for social contact to, eventually, being disoriented and even frightened by it. As they become increasingly unfamiliar and uncomfortable with social interaction, they are further alienated from others and made anxious in their presence. . . ."

"Fifth, and finally, the deprivations, restrictions, the totality of control, and the prolonged absence of any real opportunity for happiness or joy fills many prisoners with intolerable levels of frustration that, for some, turns to anger and then even to uncontrollable and sudden outbursts of rage. Others . . . occupy this idle time by committing themselves to fighting against the system and the people that surround, provoke, deny, thwart, and oppress them.

Measuring the extent to which idleness persists across U.S. prisons is difficult, in part because of the uneven and unreliable reporting practices discussed earlier. Most inmates usually are engaged in some kind of activity during an average day in prison. The issue of whether and how much that activity is designed to produce positive rehabilitative change is more difficult to assess. Nonetheless, prison officials have long recognized that programs aimed at preventing idleness and encouraging inmates to develop skills and social behaviors are beneficial for institutional security as well as public safety (Government Accountability Office, 2012). Our best estimates suggest that during the period of increasing rates of incarceration in the United States, the availability of prison programs (such as education, vocational training, and work assignments) and the extent of prisoners' participation in these programs have improved in some respects but decreased in many others.

Many people enter prison with educational deficits and could benefit from education while incarcerated. Literacy rates among prisoners generally are low, and substantially lower than in the general population (National Institute for Literacy, 2002; Greenberg et al., 2007). Over the past 40 years, the percentage of prisoners having completed high school at the time of their incarceration fluctuated between about one-quarter and more than one-third for state prison inmates, with higher rates for those housed in federal facilities. On a positive note, basic correctional education programs have been enhanced in response to "mandatory education laws" at both the state and federal levels, requiring prisoners who score below a certain threshold on a standardized test to participate while in prison. Since the Federal Bureau of Prisons implemented the first mandatory literacy program in the early 1980s, 44 percent of states have instituted such requirements (Coley and Barton, 2006). On the other hand, as part of the "get tough" movement discussed earlier, in 1994 Congress restricted inmates from receiving Pell grants, which had been enacted and funded by Congress in the 1970s as a way for disadvantaged groups to obtain postsecondary education. Moreover, reductions in federal funding under the Workforce Investment Act cut funding for correctional education to a maximum of 10 percent (from a minimum of 10 percent).

Data from BJS's Survey of State and Federal Correctional Facilities indicate that the percentage of state prisons offering basic and secondary education programs grew between the 1970s and 1990 and has remained fairly high (more than 80 percent). The percentage of facilities offering basic and secondary education is consistently higher for federal than for state prisons (more than 90 percent). However, the proportion of facilities offering college courses dropped after 1990, reflecting the elimination of Pell grants for inmates (Jacobson, 2005; Tewksbury et al., 2000). Most prison systems now offer at least some academic or educational programs for

inmates targeting different literacy and academic levels. The most common types of programs are adult basic education, general education development (GED) certificate programs, special education, and (less often) college.

The *existence* of prison educational programs does not directly translate into *participation* by prisoners. Analyses of data from the Survey of Inmates in State and Federal Prisons reveal a decline in inmate participation in academic programs from 45 percent in 1986 to about 27 percent in 2004 (see also Phelps, 2011; Useem and Piehl, 2008), with the majority of inmates participating in those focused on secondary education. These reductions may reflect reduced funding in the 1990s as more of correctional budgets went to prison operations, as well as reduced support for rehabilitation programming among policy makers and the public (Messemer, 2011; Crayton and Neusteter, 2008). In addition, not all prisoners are eligible to participate in educational or other kinds of programming. Prisoners who have committed disciplinary infractions, been placed in isolation, or been convicted of certain kinds of crimes may be restricted or prohibited from enrolling. Priority may be given to prisoners with upcoming release dates or those with relatively greater educational needs. The availability of offerings within prisons is seldom sufficient to meet demand, meaning that individual prisoners often are wait-listed until a course opening occurs (Klein et al., 2004).

In addition to more academically oriented education, many prisons offer instruction in vocational or work-related skills. As prison systems moved from contract labor to in-house production of goods, vocational education was seen as a way to keep prisoners busy and keep idleness at a minimum (Schlossman and Spillane, 1994). However, funding for prison vocational programs decreased during the period of increasing rates of incarceration. In 1998, federal Perkins Act funding was reduced from a required minimum of 1 percent to a maximum of 1 percent of funds spent on correctional education. Nonetheless, most prisons now do manage to offer some kind of vocational training to improve the occupational skills of at least some prisoners. Training is provided in specific trade areas such as carpentry, electronics, welding, office skills, food service, horticulture, and landscaping. The best prison vocational training classes teach inmates skills that are currently in demand and are technologically sophisticated enough to transfer to viable job opportunities outside prison. More recently, certification in specific trades has become important as a way to ensure that skills learned in prison help prisoners transition into the outside labor market.

The percentage of state prisons offering vocational training programs has increased slightly over the past 20 years, from about 51 percent to just over 57 percent. The percentage of federal prisons offering vocational training also has been increasing, from 62 percent in 1990 to 98 percent in 2005. As with educational programming, however, the percentage of

prisoners actually participating is low, generally ranging from 27 percent to 31 percent in state prisons from 1974 to 2004 and decreasing between 1997 and 2004. The percentage participating in federal prisons has been relatively flat—approximately 30 percent in 1990 and 32 percent in 2004.

In addition to educational and vocational training, prisons offer opportunities for work experience. Work can serve as a rehabilitative tool as inmates develop and improve work habits and skills. Participation in work assignments among state prison inmates dropped from 74 percent in 1974 to 66 percent in 2005. Participation in federal prisons has remained much higher than in most state prisons—around 90 percent over the past 20 years. Most assignments are “facility support” jobs. Other options include prison industry and work release programs.

Consistently large percentages of prisoners work only in facility support jobs. These low-paid work assignments are especially useful to the prison—they include general janitorial services, food preparation, laundry, and grounds or road maintenance—but not likely to enhance the future employment options of the prisoners. In fact, the most common work assignments for both state and federal inmates are in food preparation, followed by general janitorial work. Not all prisoners are paid for their work, and wages paid for prison labor generally are very low—only cents per hour. Over the past 40 years as incarceration rates have increased, the median number of hours of work per week for state inmates has dropped from 40 to 20.

Prison industry programs produce goods and services for the prison as well as outside vendors. Such work can include a wide range of activity, such as manufacture of license plates, textiles, or furniture or refurbishing of computers for use outside of schools. In 1979, Congress created the Prison Industry Enhancement Certification program as “a cost-effective way of reducing prison idleness, increasing inmate job skills, and improving the success of offenders’ transition into the community” (Lawrence et al., 2002, p. 17). Slightly more than one-third of state prisons offer prison industry programs; in contrast, more than three-quarters of federal prisons have offered prison industry programs over the past 20 years.

Some prisoners participate in work release programs that allow them to leave the facility during the day for jobs in the community and return to the facility at night, but these opportunities have declined sharply over the period of the incarceration rise. States’ work release offerings have fallen dramatically, from almost 62 percent of state prisons in 1974 to 22 percent in 2005. As of 2005, only 2 percent of federal prisons offered work release programs.

In summary, the 2004-2005 figures cited above indicate that only about one-quarter of state prisoners were involved in educational programming, fewer than a third were involved in vocational training, and about

two-thirds had work assignments of any kind (most of these in facility support jobs).

Given the increasing rate of incarceration and declining rates of participation in these programs, larger numbers of prisoners are going without programming or work assignments. In addition, the quality of the programs and work is likely to be undermined by the disjunction between the number of prisoners who need them and the resources devoted to meeting those needs. For example, Irwin (2005, p. 75) studied vocational training programs in a medium security California prison—in which fewer than 20 percent of the prisoners participated—and characterizes the quality of these programs in this way:

Several conditions greatly weaken the efficacy of these vocational training programs, most important, the lack of funds and resources. Instructors report that they have great difficulty obtaining needed equipment and materials. . . Instructors are fired, or they quit and are not replaced. . . Further, the training programs are regularly interrupted by lockdowns [and inclement weather] during which prisoners cannot be released to the hill for vocational training.

Further discussion of educational and work programs within prisons is provided below and in Chapter 8.

### POTENTIAL POSTPRISON CRIMINOGENIC EFFECTS

Petersilia (2003, p. 53) describes the challenges faced by prisoners being released during the period of high rates of incarceration:

The average inmate coming home will have served a longer prison sentence than in the past, be more disconnected from family and friends, have a higher prevalence of substance abuse and mental illness, and be less educated and less employable than those in prior prison release cohorts. Each of these factors is known to predict recidivism, yet few of these needs are addressed while the inmate is in prison or on parole.

A number of recent empirical studies, literature reviews, and meta-analyses report the potentially “criminogenic” effects of imprisonment on individuals—that is, the experience of having been incarcerated appears to increase the probability of engaging in future crime (e.g., Bernburg et al., 2006; Jonson, 2010; Nagin et al., 2009; Nieuwbeerta et al., 2009; Petrosino et al., 2010; Smith et al., 2004; Spohn and Holleran, 2002). For example, Vieraitis and colleagues (2007, p. 614) analyzed panel data from 46 states for the period 1974 to 1991 and found that “increases in the number of prisoners released from prison seem to be significantly associated with increases in crime,” a finding they attribute to the “criminogenic effects

of prison” and the fact that “imprisonment causes harm to prisoners.” A related meta-analysis found that imprisonment had a modest criminogenic effect, and that the effect increased with longer amounts of time served (Smith et al., 2004).

The psychological mechanisms involved are not difficult to understand. The changes brought about by prisonization—including dependence on institutional decision makers and contingencies, hypervigilance, and incorporation of the most exploitative norms of prison culture—may be adaptive in the unique environment of prison but become maladaptive or dysfunctional if they persist in the very different world outside prison. Cullen and colleagues (2011, p. 53S) summarize some aspects of the “social experience” of imprisonment that help explain its criminogenic effect:

For a lengthy period of time, [prisoners] associate with other offenders, endure the pains of imprisonment, risk physical victimization, are cut off from family and prosocial contact on the outside, and face stigmatization as “cons,” a label that not only serves as a social obstacle or impediment with others but also can “foster anger and a sense of defiance” among prisoners themselves.

Thus, the negative individual-level changes that often result from imprisonment can adversely affect the interpersonal interactions in which prisoners engage once they are released, closing off opportunities to obtain badly needed social, economic, and other kinds of support. Sampson and Laub (1993, p. 256) conclude that the indirect criminogenic effects of long periods of incarceration on the men they studied stemmed from how the experience ensured that they were “simply cut off from the most promising avenues of desistance from crime.”

Moreover, some studies indicate that prisoners confined in higher security prisons appear to be more likely to recidivate once they are released. To some extent, this can be attributed to the characteristics of persons sentenced to these kinds of facilities. However, researchers have concluded that negative labeling effects and environmental influences play a separate, independent role. As Bench and Allen (2003, p. 371) note, in general, a prisoner “classified as maximum security instantly obtains an image of one who is hard to handle, disrespectful of authority, prone to fight with other inmates, and at high risk for escape.” To control for this negative initial “labeling effect,” the authors conducted a double-blind experiment in which neither prison staff nor inmates knew the inmates’ original classification scores. They found that when a group of prisoners originally classified as maximum security were randomly assigned to be housed in a medium security facility, the risk of disciplinary problems did not increase. This was true even though, at the outset, the maximum security prisoners “[stood] out on a number of dimensions such as length of sentence, severity

of offense, prior incarcerations, and propensity to for violence" (p. 378). The authors conclude that, in addition to positive labeling effects (so that prisoners labeled and treated as "medium security" were more likely to behave as such), "it seems naïve to assume that the classification at any level is not affected by factors such as environmental influences, behavioral expectations, and contextual situations" (p. 378). Prisoners who are placed in environments structured to house better-behaved prisoners may also help elicit such behavior.

Lerman (2009a, 2009b) discusses other ways in which exposure to certain aspects of prison life can have criminogenic effects on prisoners. Her study revealed that, "among those [prisoners] with a relatively limited criminal past—with little experience in the criminal justice system and few past offenses—placement in a higher-security prison appears to have a criminogenic effect on both cognitions and personality" (Lerman, 2009b, p. 164). She also found that the severity of the prison environment appeared to influence prisoners' self-reported "social network," so that higher security prisons place prisoners in environments where they are surrounded by "significantly more friends who have been arrested, friends who have been jailed, and friends involved in gangs" (p. 19). In addition, she found that the likelihood that prisoners who were unaffiliated with a gang before entering prison would eventually join a gang increased with the security level of the prison to which they were assigned. Even those whom prison officials identified as gang members at the time they were admitted to the prison system were influenced by the security level of the prison to which they were assigned and were more likely to self-identify as gang members in higher security than in lower security prisons.

Other researchers have found similar results and concluded that time spent in higher security prisons and living under harsher prison conditions is associated with a greater likelihood of reoffending after release (e.g., Chen and Shapiro, 2007; Gaes and Camp, 2009). As a group of Italian researchers conclude, "overall, prison harshness, measured by overcrowding and numbers of deaths in prison, exacerbates recidivism" (Drago et al., 2011, p. 127).

## WHAT WORKS IN PRISON REHABILITATION AND REENTRY

In any given year, approximately three-quarters of a million prisoners leave prison and return to free society (Petersilia, 2003). Research on reentry includes evaluations of prisoner reentry programs, as well as more basic research on how individuals navigate the reentry process. The most significant barriers to successful reentry include the difficulties faced in obtaining satisfactory employment and housing, arranging successful family reunification, and obtaining health care and transportation (e.g., Travis,

2005). (Further discussion of consequences after release from prison with respect to health care, employment, and families is provided in Chapters 7, 8, and 9, respectively.)

Many corrections agencies have created special offices with staff assigned to deal specifically with prisoner reentry. National organizations, including the Council of State Governments and the National Governors Association, have established working groups to address reentry, such as the Reentry Policy Council. The federal Serious and Violent Offender Reentry Initiative in 2003 awarded more than \$100 million to 69 jurisdictions for the establishment of reentry programs. In the 2004 State of the Union address, President Bush included a promise of federal support for reentry efforts. More than \$13 million was granted to 20 states in 2006 through the Prisoner Reentry Initiative Award program. And more than \$270 million in federal funding has been dedicated to reentry over the past 4 years through the Second Chance Act of 2007.

Some research suggests that certain kinds of proactive programs of prison rehabilitation can be effective in neutralizing or even reversing the otherwise criminogenic effects of incarceration. The advent of so-called “evidence-based corrections” has encouraged correctional administrators, policy makers, and officials to place increased reliance on program evaluation and quantitative outcome measures to determine “what works” in prison rehabilitation and postprison reentry programs—both being evaluated primarily on the basis of how well they reduce recidivism (Cullen and Gendreau, 2000; MacKenzie, 2000; Sherman, 1998; Sherman et al., 1997).

One especially promising model of prison rehabilitation, known as risk-need-responsivity or RNR (Andrews and Bonta, 2006), has been successful in reducing recidivism when (1) prisoners at medium to high risk of recidivating are targeted, (2) they are assessed to determine their “criminogenic needs” (individual issues known to be associated with future criminal behavior), and (3) they are placed in rehabilitative programs designed to address those needs in a manner consistent with their learning styles to ensure their responsivity.

In addition, cognitive-behavioral therapy, which focuses on the way “an individual perceives, reflects upon, and, in general, thinks about their [sic] life circumstances” (Dobson and Khatri, 2000, p. 908)—has been shown to improve postrelease outcomes in some studies. The therapy is premised on the notion that “criminal thinking” is an important factor in deviant behavior (e.g., Beck, 1999). Cognitive-behavioral therapy has been used with a range of juvenile and adult prisoners inside institutions or in the community, and has been administered alone or as part of a multifaceted program (Lipsey et al., 2007). Meta-analyses of numerous and diverse studies of program effectiveness indicate that under the appropriate

circumstances, when conducted by appropriately trained professionals, this kind of therapy can significantly reduce recidivism (e.g., Lipsey et al., 2007; Losel and Schmucker, 2005). Perhaps not surprisingly, better results were obtained for programs that were rated as better quality, had participants spend longer amounts of time in treatment, and were combined with other services.

Medical treatment, particularly for drug addictions, combined with a “continuum of care” that includes follow-up or aftercare services in the community for prisoners once they have been released, has been found to be effective in controlling substance abuse and reducing recidivism. Further discussion of this issue is included in Chapter 7. Education and work programming have long been viewed as essential components of rehabilitation. They also serve other purposes, such as eliminating idleness and thereby reducing management problems. Moreover, when work assignments directly support the needs of the institution, they decrease the costs of incarceration. Support for such programs comes in part from research demonstrating a strong relationship between criminal activity and low levels of schooling and unemployment. However, the quantity and quality of research examining the effectiveness of such programs in reducing recidivism and increasing employment are extremely limited.

Despite the widely recognized importance of prisoner education, comprehensive, reliable data are not available on the nature and quality of programs offered, the levels of actual participation, and the overall effectiveness of various approaches (MacKenzie, 2008). Studies often examine numbers of prisoners participating in such programs but overlook the actual amount of time spent in the classroom, specific program components, and the level of academic achievement attained. Other than documenting the impressive success of certain postsecondary prison education programs, research has as yet not resolved the critical issues of what works for whom, when, why, and under what circumstances, as well as the way in which special challenges faced by inmate-students in prison, such as lockdowns, transfers between facilities, and restricted movement, affect their learning and undermine their educational progress.

The available research indicates that, when carried out properly, certain forms of cognitive-behavioral therapy, drug treatment, academic programs, and vocational training appear to reduce recidivism. As yet, fewer studies have demonstrated positive outcomes for prison work programs (such as correctional industries) and “life skills” programs. (See, generally, Cecil et al., 2000; Fabelo, 2002; Gerber and Fritsch, 1995; MacKenzie, 2006, 2012; Steurer et al., 2001; Western, 2008; Wilson et al., 2000.)

## KNOWLEDGE GAPS

As discussed earlier, attempts to characterize the overall conditions of confinement and analyze their impact on prisoners in general have been somewhat constrained by the relative lack of overarching, systematic, and reliable data. The best evidence available often is limited to specific places or persons, and any generalizations about typical prison conditions must be qualified by the significant differences in how prisons are structured, operated, and experienced. Because individual prisons are different and distinct institutions, useful knowledge about any one of them must often be case-specific and tied to actual conditions. Some of the limitations in knowledge and generalizability stem from the fact that, despite the substantial national investment in the use of incarceration, there has been no parallel investment in systematically studying its nature and consequences. Official national statistics addressing certain aspects of imprisonment have been useful for the present review, but they are limited by their lack of standardization and of focus on meaningful indicators of the actual quality of prison life. We offer the following observations regarding the gaps in knowledge about the issues examined here.

### Data Improvement and Standardization

During the period of rising use of incarceration, the treatment of prisoners and the opportunities available to them have varied notably across prisons. The ability to rigorously measure the extent of that variation is currently lacking. Available national-level data rely on records intermittently submitted with varying degrees of reliability by a variety of local sources. The collection of records does not cover all correctional agencies, and each source uses slightly different definitions, so even basic “facts” are not comparable. A concerted effort to promote standard and reliable data collection with expanded coverage is needed.

A national database is needed for the routine, reliable, and standardized collection of information on basic dimensions of the nature and quality of the prison experience. This database should include but not necessarily be limited to data on housing configurations and cell sizes; the numbers of prisoners confined in segregated housing, their lengths of stay, and their degree of isolation; the amount of out-of-cell time and the nature and amount of property that prisoners are permitted; the availability of and prisoners’ levels of participation in educational, vocational, and other forms of programming, counseling, and treatment; the nature and extent of prison labor and rates of pay that prisoners are afforded; the nature and amount of social and legal visitation prisoners are permitted; the nature and frequency of disciplinary infractions, violence, and

assaults, as well as mental health and medical contacts, more frequent and nuanced than existing data on homicides, suicides, and prison riots; and a range of more subjective (but nonetheless reliably and precisely assessed) aspects of prison life, such as the nature and quality of prisoner and staff interactions, prisoners' overall level of participation in prison decision making, and the nature and quality of grievance resolution mechanisms to which they have access.

### Mechanisms for Observed Consequences

Numerous studies have documented the adverse impact of imprisonment on prisoners. Yet some individuals are known to have benefited from imprisonment, and some problematic and potentially damaging prison conditions have been ameliorated or eliminated in some jurisdictions. The extent to which prisoner characteristics, modern forms of architectural and institutional control, decisive judicial intervention, certain kinds of rehabilitative and other programming, and the use of more sophisticated prison management practices have successfully offset the negative impacts of imprisonment, such as those due to overcrowding, deserves further study. Research should also address whether, to what degree, and in what ways improved institutional control and reductions in certain indicators of institutional dysfunction have entailed significant trade-offs in other aspects of the quality of prison life. Similarly, the ways in which changes in specific conditions of confinement affect postprison adjustment also warrant further study. As noted, for example, some empirical evidence indicates that time spent in isolated, supermax-type housing contributes to elevated rates of recidivism. The degree to which higher levels of institutional control and security contribute to increased recidivism in the long term also merits additional research.

### Diversion Programs

One way of limiting the adverse consequences of imprisonment for individuals is to ensure that fewer people are incarcerated. It appears especially important to consider the option of relying on alternative sanctions or programs in cases of nonviolent crime and for lawbreakers who suffer from substance abuse problems or serious mental illness. Thus, there is a continuing need for research on evidence-based diversion programs that address both societal needs for safety and protection and the social, psychological, and medical needs of those convicted, but do so in ways that are less psychologically damaging and more cost-effective than incarceration.

## CONCLUSION

Increased rates of incarceration may have altered the prison experience in ways that are, on balance, appreciably harmful to some prisoners and undermine their chances of living a normal life when released. Prisons are powerful social settings that can incur a variety of psychological, physical, and behavioral consequences for the persons confined within them. In general, those consequences include the ways in which prisoners can be adversely affected by the severe stressors that characterize prison life (e.g., danger, deprivation, and degradation), albeit to different degrees, and the many accommodations prisoners make to adjust to and survive the psychological pressures they confront and the behavioral mandates with which they must comply while incarcerated. On the other hand, prisons also can have positive impacts on some prisoners, especially when they provide effective programming that prepares them for life after release.

Conditions of confinement vary widely from prison to prison along a number of dimensions discussed in this chapter. Those variations affect the nature and degree of the changes prisoners undergo in the course of their incarceration. Some poorly run and especially harsh prisons can cause great harm and put prisoners at significant risk. Individual prisoners also vary in the degree to which they are affected by their conditions of confinement. Persons who enter prison with special vulnerabilities—for example, having suffered extensive preprison trauma or preexisting mental illness—are likely to be especially susceptible to prison stressors and potential harm.

The commitment of at least some prison systems to the goal of rehabilitation fluctuated over the period during which rates of incarceration rose in the United States—ranging from outright rejection in many jurisdictions at the outset of that period to greater acceptance and commitment in at least some places in more recent years. As a result, the potential of prisons to provide prisoners with meaningful opportunities for educational, vocational, and other forms of programming has been only partially realized (and in some places, and for some prisoners, not at all).

The individual consequences summarized in this chapter underscore the importance of moving beyond the admittedly significant interrelated issues of who is incarcerated, for how long, and under what conditions; what is done with them while they are there; and whether and how their postprison reintegration is supported. It is also important to consider the possibility that less restrictive and potentially less psychologically damaging alternatives are more appropriate for a number of those who are currently incarcerated. These alternatives also may be more cost-effective and contribute as much or even more than imprisonment to the overall goal of ensuring public safety.

In many ways, the use of long-term segregation needs to be reviewed. It can create or exacerbate serious psychological change in some inmates and make it difficult for them to return to the general population of a prison or to the community outside prison. Although certain highly disruptive inmates may at times need to be segregated from others, use of this practice is best minimized, and accompanied by specific criteria for placement and regular meaningful reviews for those that are thus confined. Long-term segregation is not an appropriate setting for seriously mentally ill inmates. In all cases, it is important to ensure that those prisoners who are confined in segregation are monitored closely and effectively for any sign of psychological deterioration.

Regardless of how many people are sent to prison and for how long, the nation's prisons should be safe and humane. The physical and psychological needs of prisoners should be properly addressed in a manner that is mindful of the reality that virtually all of them eventually return to free society. The way prisoners are treated while they are imprisoned and the opportunities they are provided both in prison and upon release will have a direct impact on their eventual success or failure and important consequences for the larger society.