[I felt] doomed, like I was being banished … like you have the plague or that you are the worst thing on earth. Like you are set apart [from] everything else. I guess [I wanted to] feel like I was part of the human race—not like some animal.
—Molly, placed in solitary at 16 in Michigan

Solitary confinement is the practice of isolating individuals in confined spaces for 22 to 24 hours a day. Referred to by many names, from segregation to room confinement, solitary confinement places its victims in conditions of profound isolation and sensory deprivation for days, week, months, or years.

With nearly 200,000 minors held in jails, prisons, and juvenile facilities on any given day, potentially thousands of children are subjected to solitary confinement.

Whether it’s used for a youth’s protection in an adult prison or as punishment in a juvenile jail, the damaging effects of isolation pose a serious threat to the mental health, development, and lives of young people.

Psychological Effects of Isolation

Individuals in solitary confinement, particularly for prolonged periods of time, are known to be at risk of developing a host of psychological ailments.

Isolation may lead to an elevated risk for paranoia, cognitive deficits, ruminations, hallucinations, hypersensitivity to external stimuli and difficulties with impulse control.  

Placement in isolation has been associated with feelings of hopelessness, irritability, aggression, suicidal ideation and a sense of impending emotional breakdown.

A study of prisoners who volunteered to spend a week in isolation observed declining EEG alpha frequency, suggesting that even short-term isolation may alter brain activity.  

These effects lead to an increased likelihood of self-mutilation, attacks on staff, destruction of property and suicides.

Approximately half of all suicides among incarcerated children in juvenile facilities takes place while they are in room confinement, defined as a “behavioral sanction imposed on youth that restrict[s] movement for varying amounts of time.”

The Developing Brain

Though most research has been conducted with respect to incarcerated adults, there is reason to believe isolation may have disparate impacts on young people. 

Neuroscience research indicates the brain continues to develop through young adulthood, with the prefrontal cortex, associated with self-control, working memory, and decision-making, among the last region of the brain to mature.

Exposure to stressors may disrupt normal development and functioning of the areas of the brain. It stands to reason isolation may cause even greater suffering and damage among young people than it does for adults.

The Pervasiveness of Solitary

In 2003, the Office of Juvenile Justice and Delinquency Prevention surveyed over 7,000 youth between the ages of 10 and 20 held in state and local juvenile facilities.

The survey revealed 35 percent of youth reported experiencing isolation. Of them, 87 percent were isolated for over two hours and 55 percent for more than 24 hours.

Teenagers tried and convicted as adults may be at even greater risk, often subjected to solitary confinement purportedly for their own protection.

A 2012 report by Human Rights Watch and the American Civil Liberties Union documented the widespread isolation of youth in jails and prisons, sometimes for sev-
eral months or even years. In some systems, isolation is virtually a given for juveniles.¹

With over 139,000 juveniles held in adult jails and prisons as of 2010, there is considerable evidence that thousands of youth are being subjected to solitary confinement.

**International and Professional Perspectives**

In 1990, the United Nations General Assembly adopted the UN Rules for the Protection of Juveniles Deprived of their Liberty, which included a provision declaring: “All disciplinary measures constituting cruel, inhuman or degrading treatment shall be strictly prohibited, including corporal punishment, placement in a dark cell, closed or solitary confinement or any other punishment that may compromise the physical or mental health of the juvenile concerned.”¹⁰

In 2011, the UN Special Rapporteur on Torture, Juan E. Méndez, recommended a complete ban on the solitary confinement of juveniles, along with a limit of 15 days for adults.¹¹

2012, the American Academy of Child and Adolescent Psychiatry announced it “opposes the use of solitary confinement in correctional facilities for juveniles.” The AACAP further recommended “any youth that is confined for more than 24 hours must be evaluated by a mental health professional, such as a child and adolescent psychiatrist when one is available.”¹²

In November 2014, the American Medical Association called for “restricting the use of isolation in juvenile correction facilities for only extraordinary circumstances.”¹³

**Alternatives to the Isolation of Young People**

Many state and local jurisdictions have enacted reforms to the use of solitary confinement on children, sometimes legislatively, though more often through litigation.

States including Alaska, Colorado, Massachusetts, Mississippi, Montana, New York, Oklahoma and West Virginia have implemented restrictions on when and how isolation can be used, even outright bans.¹⁴

One of the latest state to reform its practices was Illinois. In May 2015, the Illinois Department of Juvenile Justice settled a lawsuit with the ACLU over the use of isolation in their juvenile correctional facilities.

The department agreed to end punitive use of isolation, continue providing education and mental health programming to juveniles separated from the general population and provide segregated youths at least 8 hours of time outside of their rooms every day if they are separated for 24 hours or longer.¹⁵

At the local level, also in May, Contra Costa County in California agreed to end isolation for punitive reasons and to only use room confinement for four hours at a time, with a focus on reintegrating youths into general population.¹⁶

Some states, including Maine, have focused on more holistic interventions to address problematic behaviors by actively working with incarcerated youth to understand and better control challenging behaviors. This approach helped Maine cut down on use of seclusion in youth facilities.¹⁷

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11. Juan E. Méndez (2011). Interim report of the Special Rapporteur of the Human Rights Council on torture and other cruel, inhuman or degrading treatment or punishment

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Solitary Watch is a web-based watchdog organization that investigates, reports on, and disseminates information about solitary confinement in U.S. prisons and jails.

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