

Where We Stand:

NAMI believes that no one should be subject to practices that can cause or worsen mental health symptoms. NAMI opposes the use of solitary confinement and equivalent forms of administrative segregation for people with mental health conditions.

Why We Care:

Solitary confinement is the placement of individuals in locked, highly restrictive and isolated cells or similar areas of confinement with limited or no human contact and few, if any, rehabilitative services. Placement in solitary confinement frequently lasts for weeks, months or even years at a time.

NAMI opposes the use of solitary confinement and equivalent forms of administrative segregation for people with mental health conditions.

It is routinely documented that solitary confinement is used extensively in correctional settings for people with severe psychiatric symptoms. A 2018 national report documented that about 8.6% of all individuals held in segregated settings are diagnosed with serious mental illness.

Solitary confinement for people with serious mental illness:

- Causes extreme suffering
- Disrupts treatment
- Causes or worsens symptoms such as depression, anxiety, and hallucinations
- Impedes rehabilitation, recovery and community re-integration
- Causes adverse long-term consequences for cognitive and adaptive functioning

Rather than using isolation strategies that can cause long-term damage, NAMI urges federal, state and other correctional authorities to provide mental health care alternatives to solitary confinement.

To learn more about NAMI's work on this issue, visit www.nami.org/Advocacy/Policy-Priorities