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In early May, the American Civil Liberties Union of Virginia filed a lawsuit against the Virginia Department of Corrections seeking to end the practice of prolonged solitary confinement in the commonwealth.

The class-action lawsuit was submitted on behalf of inmates held in solitary at Red Onion and Wallens Ridge, two supermax state prisons in Southwest Virginia.

The practice of solitary confinement, referred to euphemistically as "restrictive housing" by the Department of Corrections (VDOC), involves isolating inmates in small cells, depriving them of human contact. People in solitary are confined to a windowless or near-windowless cell approximately the size of two parking spaces for 23 hours at a time, seven days a week. Food is passed to prisoners through a slot in the door, and they are brought to showers in irons. Five times a week, an hour is allocated for outdoor recreation conducted alone in a 96-square-foot chain-link cage in the prison yard.

Mental and physical deterioration under these conditions has been found to occur in as little as 10 days. The United Nations Standard Minimum Rules for the Treatment of Prisoners, known as the "Nelson Mandela Rules," find indefinite or prolonged (greater than 15 consecutive days) solitary confinement to constitute torture. The length of stay in solitary for the 12 named plaintiffs in the lawsuit ranges from two to 24 years.

I have long been an advocate for the end of sustained solitary confinement in Virginia. In 2011, I traveled with Dels. Patrick A. Hope (D-Arlington) and Charniele L. Herring (D-Alexandria) to Wise County to visit Red Onion State Prison. We toured the facility, interviewed inmates and ate the food served to prisoners. We were shocked by the then-widespread use of solitary confinement and the enforced living conditions. Most worrying was the number of people in the prisons with preexisting mental-health issues who were held in solitary, which was exacerbating those conditions.

Following our visit and amid mounting public pressure from additional elected officials and advocacy groups, VDOC implemented the Step-Down Program, a review and assessment system to provide a pathway for reentry into the general population. Subsequently, the total number of individuals held in solitary was reduced by 62 percent, from 468 in 2011 to 179 in 2013.

However, for those still in isolation, there remain substantial concerns surrounding this program. The lawsuit alleges that the Step-Down Program uses a system of vague standards that offer people held in solitary no predictable way to progress out of solitary confinement and that this violates their constitutional right to due process.

In addition, inquiries seeking insight into the effectiveness of Step-Down by civil rights organizations have been stymied by a lack of information and transparency. Precise statistics on the success of Step-Down and about those people held in solitary remain unavailable.

This year, I co-sponsored legislation to increase that transparency. Introduced by Sens. Richard L. Saslaw (D-Fairfax), Barbara A. Favola (D-Arlington) and David W. Marsden (D-Fairfax) and Del. Hope, the bills required regular reporting of the number of individuals held in solitary; their race, age and physical and mental-health status; relevant disciplinary proceedings before placement in solitary; how long they were held; and the number of mental-health staff at the facility. The measures passed the General Assembly unanimously and has been signed into law by Gov. Ralph Northam (D).

Though these bills represent a significant step in addressing solitary confinement, they could have been strengthened by requiring VDOC to provide statistics on the prevalence of solitary confinement on a facility-by-facility basis, recording the number of incidents of self-harm or

suicide that occurred in solitary and making other changes contained in earlier versions of the legislation.

These reports will shed more light on the practice and give insight into what legislative steps must be taken to protect vulnerable prison populations. Holding people in solitary confinement costs the commonwealth far more than housing them in the general population and does severe damage to those who experience it. Segregation compounds mental-health and behavioral issues, which works at cross-purposes against rehabilitation and public-safety efforts for people who will eventually return to society, sometimes with no intermediate step between solitary confinement and release into the community.

The fight to reform our criminal-justice system continues in the legislature and in the courts. I will continue to work with my colleagues to address these fundamental issues.