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**Perrie Lectures 2017:
Can any good come of
segregation?**

The effect of segregation

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In addition to being deprived of one's liberty by being sentenced to prison, a proportion of the people in the care of Her Majesty's Prison and Probation Service (HMPPS) may experience a deeper form of custody and exclusion by being placed in segregation units for a period.

The aim of this article is to summarise the findings of a review of the more robust international evidence on the effect of segregation. Mental and psychological health, custodial conduct and recidivism outcomes were examined.

The use of segregation

Segregation units in English and Welsh prisons serve the purpose of removing a person from the main prisoner population. Approximately 1,500 cells are currently set aside for segregation in the estate.¹ HMPPS primarily uses segregation for adults in custody to punish rule breaking (Prison Rule 55 — cellular confinement of up to 21 days), to stabilise and prevent the mainstream prison population from the negative influence of individuals (Prison Rule 45b — Good Order or Discipline), and to protect individuals from threat (Prison Rule 45a — own protection).

Segregation has been described as 'deep custody' (p. 131).² In England and Wales the person is removed from association with other prisoners, placed on a restricted regime and spends the majority of time alone in their cell. They should have access to a shower, one hour of (usually solitary) exercise a day, and limited use of a telephone. They have limited access to their property, and are generally not allowed a television. Access to basic health and mental health services are available, but access to other services (such as education or Offending Behaviour Programmes) is usually very limited or impossible.

The reasons for segregation and descriptions of facilities and regimes in other countries (such as in the United States where much of the research has been conducted), seem broadly similar to ours; however, some can have more extreme conditions. In England and Wales segregation units tend to exist within a larger prison, whereas in the United States entire prisons can be designated for segregation (such as the 'supermax'

prisons), and human contact can be more limited and periods of segregation can last for considerably longer than they do here.

The reasons for placing a person in segregation means that this group of people are likely to be complex and varied, often with multiple needs. They may pose a risk of harm to themselves, to others, or to both. This group includes people who can be very vulnerable and challenging to manage.

Examining the effect of segregation

If we are using this form of custody for safety and stability in prisons, and as a punishment for rule breaking, it is vital that we understand what effect this has. What happens to people who experience segregation? Does this experience affect their mental or psychological well-being, their later conduct in prison and their longer-term outcomes after release, and if so, in what way?

The effect of segregation is a contentious subject. A considerable number of studies have tried to examine its effects and different views of the impact, and the ethics, of segregation abound.³

Coming to a clear conclusion about the effect of segregation is difficult. Much of the existing research is limited in its design, so that it becomes impossible to attribute any changes that people experience (or lack thereof) to the experience of segregation itself. One could reasonably argue that, for example, as segregated people are likely to have greater levels of risk and complexity (explaining their segregation in the first place), this might potentially explain poorer outcomes, rather than their period of segregation causing these.

From a methodological perspective, the only way to confidently ascertain the *cause* of an effect is to conduct a randomised control trial (RCT), in which prisoners are randomly assigned to either segregated or mainstream locations, and their outcomes compared over time. Briefly put, the random allocation produces two groups that are comparable in both observable and unobservable ways, and so if their outcomes differ we can be more confident that this was caused by the only difference between them — whether they were segregated or not.

1. Shalev, S., & Edgar, K. (2015). *Deep custody: Segregation Units and Close Supervision Centres in England and Wales*. Prison Reform Trust.
2. Shalev, S., & Edgar, K. (2015). *Deep custody: Segregation Units and Close Supervision Centres in England and Wales*. Prison Reform Trust.
3. For a summary of some of the studies and their methodological quality see: Morgan, R. D. et al., (2016). Quantitative syntheses of the effects of administrative segregation on inmates' well-being. *Psychology, Public Policy, and Law*, 22(4), 439-461.

As decisions to segregate people are responsive to their behaviour or circumstances, we cannot easily, practically or ethically apply random allocation. In the absence of this possibility, the next best option is to artificially create comparable groups, by taking segregated and non-segregated people, and using advanced statistical methods⁴ to control for pre-existing group variations that could explain differences in outcomes. For example, risk of reoffending, criminogenic need and previous mental health diagnoses. This design is not perfect, as we can only control for variables that we can measure, and so it does not allow us to draw *causal* conclusions like from an RCT, however, it takes us much closer to an answer. Unfortunately, most research on segregation uses less-robust methods, making it difficult to know what is what.

Scope of the review

Only studies considered more robust, and tested people's mental and psychological health that over time, custodial conduct or reoffending outcomes, were included. In total, 18 studies were summarised. This included a handful of RCTs and a larger number of more robust quasi-experimental studies (such as those described above). In addition, drawing on the wider evidence-base and psychological theory, explanations for the findings are proposed.

As the summarised research took place in other countries, an additional recent and in-depth study of segregation units and Close Supervision Centres (CSC) in England and Wales is referred to. This did not quantify the effect of segregation, however, it explored prisoners' perceptions of processes, treatment and the impact of segregation.

Limitations of the review

As nearly all of the studies included in the review were quasi-experimental, we still cannot draw absolute causal conclusions about the impact of segregation. However, with the weight of evidence available from this better quality research (a small number of RCTs and the

more robust quasi-experimental studies as described in previous sections), we can be more assured in the validity of what we know. While this review sought to identify as many robust studies examining the effect of segregation over time, it is possible that not all existing research has been located and included.

The available research cannot yet give us clear and confident answers to some important questions about segregation. We do not yet fully know if certain groups are affected more or less by segregation than others, for example men compared with women, higher risk compared with lower risk people, or people from different ethnic groups. We also do not yet have enough research comparing the different segregation rules to know how the effects of each may differ in English and Welsh prisons. None of the studies were able to take into account people's criminogenic needs or risk factors, how much contact individuals had with their families, what treatment or services they may have accessed, how the culture of units might vary, what the relationships between staff and prisoners were like, or what the physical conditions were like in the segregation units. These may affect a person's experience of segregation and its impact on their outcomes.

Finally, as none of the impact research came from England and Wales, we cannot be certain that the findings generalise to our segregated prisoners, although there are clearly similarities between our practices and the reasons for segregation and unit regimes in other countries.

What effect does spending time in segregation have on people's well-being and health?

Studies reviewed: Four RCTs⁵ and five other studies,⁶ from Canada, the United States and Denmark examined the impact of segregation on different health or psychological/psychiatric well-being outcomes. Across the studies, samples included people segregated for reasons similar to our Rules 55, 45a and 45b. Time in segregation across the studies included a few days, a few weeks, or up to a year (and in some studies, it was not clear how long people spent there). Most of the

4. Such as propensity score matching.

5. Walters, R. H., Callagan, J. E., & Newman, A. F. (1963). Effect of solitary confinement on prisoners. *The American Journal of Psychiatry*, 119, 771-773; Gendreau, P. E., Freedman, N., Wilde, G. J. S., & Scott, G. D. (1968). Stimulation seeking after seven days of perceptual deprivation. *Perceptual and Motor Skills*, 26, 547-550; Ecclestone, C. E. J., Gendreau, P., & Knox, C. (1974). Solitary confinement of prisoners: an assessment of its effects on inmates' personal constructs and adrenocortical activity. *Canadian Journal of Behavior Science*, 6(2), 178-191; Gendreau, P. E., Freedman, N., Wilde, G. J. S., & Scott, G. D. (1972). Changes in EEG alpha frequency and evoked response latency during solitary confinement. *Journal of Abnormal Psychology*, 79(1), 54-59.

6. Andersen, H. S., Sestoft, D., Lillebaek, T., Gabrielsen, G., & Hemmingsen, R. (2003). A longitudinal study of prisoners on remand: repeated measures of psychopathology in the initial phase of solitary versus nonsolitary confinement. *International Journal of Law and Psychiatry*, 26, 165-177; Zinger, I., Wichmann, C., & Andrews, D. A. (2001). The psychological effects of 60 days in administrative segregation. *Canadian Journal of Criminology*, 43, 47-83; O'Keefe, M. L., Klebe, K. J., Stucker, A., Sturm, K., & Leggett, W. (2011). One year longitudinal study of the psychological effects of administrative segregation. U.S. Department of Justice; Kaba, F., Lewis, A., Glowa-Kollish, S., Hadler, J., Lee, D., Alper, H., et al. (2014). Solitary confinement and risk of self-harm among jail inmates. *American Journal of Public Health*, 104(3), 442-447; Andersen, H. S., Sestoft, D., Lillebaek, T., Gabrielsen, G., Hemmingsen, R., et al. (2000). A longitudinal study of prisoners on remand: psychiatric prevalence, incidence and psychopathology in solitary vs. non-solitary confinement. *Acta Psychiatr Scand*, 102, 19-25.

studies involved convicted prisoners, but two focussed on people on remand; most only included men, but some had a mix of men and women. Sample sizes tended to be small, ranging from 16 to around 250, although one very large study examining self-harm used over 134,000 prisoner case records.

Summary of findings: The findings suggest that people in segregation tend to have significantly more psychological difficulties (such as distress, depression, hopelessness and anxiety) than people who are not in segregation. However, spending time in segregation appears to have mixed effects. Compared to the non-segregated comparison groups, some studies showed segregated people improved over time, some showed they worsened and some showed no differences between the groups. Two particular areas that segregated people appear to worsen on, or to develop problems in, during segregation, are anxiety and depression. The one study that looked at self-harm also suggested that segregation is associated with more harming behaviour. People punished with solitary confinement were around seven times more likely to self-harm (and around six times more likely to potentially fatally self-harm). Interestingly, a study that found no significant changes while people were in segregation, found that once segregated prisoners were moved back to mainstream prison location, they showed significant improvements in levels of anxiety, depression and psychological functioning.

A possible explanation: The varied reasons for segregation, and the varied population, might explain why there are mixed findings regarding the impact of segregation on well-being and mental health. As segregation units can house particularly high numbers of people with mental illness, these individuals may be particularly vulnerable to the stresses and pains of imprisonment, and the lack of social interaction and contact experienced in segregation.⁷ Prisoners who are segregated for their own protection (and perhaps out

of choice), might experience and interpret their time there differently to those who are segregated more clearly against their will, or for punishment purposes. Perhaps the answer lies in differences in individuals' personality or coping capability.⁸ For example, resilience — the ability to adapt to changing and stressful circumstances — may influence how a person copes with time in segregated conditions. Further, research has identified that prisoners who feel they have some control over events and outcomes (an internal locus of control) adjust more effectively to prison, report being less depressed, anxious and angry, and experience less stress than prisoners with an external locus of control (where they believe events are out of their control).⁹

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What effect does spending time in segregation have on institutional behaviour?

Studies reviewed: Four studies¹⁰ from the United States looked at whether spending time in segregation affects people's subsequent behaviour in custody. Three looked at behaviour at person-level, and the fourth looked at the effect of opening four supermax facilities to see what impact this had on violence in the prison systems of those States (so this looked at changes in rates for areas, rather than for individuals). Across the studies,

samples included people segregated for reasons similar to our Rules 55 and 45b. Time that prisoners spent in segregation varied; 15 days in one study, 90 days in another, and it was not clear how long people were in segregation in a third. The study examining the effect of opening supermax facilities measured outcomes for at least two subsequent years in each site and for substantially longer in some. Men were included in all of the studies, and women in at least one. Sample sizes ranged from 228 to over 3,800.

Summary of findings: The findings suggest that segregation as a punishment, and when used similarly to our Rule 45b, does not lead to differences in later

7. Hayney, C. (2017). 'Madness' and penal confinement: some observations on mental illness and prison pain. *Punishment & Society*, 0(0), 1-17.
8. O'Donnell, I. (2016). The survival secrets of successful solitaries. *The Psychologist*, 29, 2-5.
9. Goodstein & Wright, 1989; Zamble & Porporino, 1988; Mackenzie and Goodstein, 1986; Goodstein, 1979; as cited in Pugh, D. N. (1993). The effects of problem-solving ability and locus of control on prisoner adjustment. *International Journal of Offender Therapy and Comparative Criminology*, 37, 163-176.
10. Morris, R. G. (2016). Exploring the effect of exposure to short-term solitary confinement among violent prison inmates. *Journal of Quantitative Criminology*, 32, 1-22; Medrano, J. A., Ozkan, T., & Morris, R. (2017). Solitary confinement exposure and capital inmate misconduct. *American Journal of Criminal Justice*. DOI: 10.1007/s12103-017-9389-3; Lucas, J. W., & Jones, M. A. (2017). An analysis of the deterrent effects of disciplinary segregation on institutional rule violation rates. *Criminal Justice Policy Review*, 1-23. DOI: 10.1177/0887403417699930; Briggs, C. S., Sundt, J. L., & Castellano, T. C. (2003). The effect of supermaximum security prisons on aggregate levels of institutional violence. *Criminology*, 41(4), 1341-1376.

misconduct (any, minor or major rule violations) or violence specifically in custody, or change how long it is before a person goes on to break prison rules. In other words, it appears to have a null effect — it does not seem to deter people or change their later conduct in prison. This was the same for people followed up for one year, two years and three years. Opening four supermax facilities also did not change rates of prisoner-on-prisoner violence in those States. Changes to prisoner-on-staff violence showed inconclusive/mixed effects (increasing in one State after supermax opening, decreasing in another, and not changing in two).

A possible explanation: Punishment comes to us very naturally, especially when we want to reinforce rules and laws to people who transgress them. In fact, research has shown that we are so motivated to punish others that we are prepared to pay to do this even when there is no personal benefit.¹¹ But does it work? Research has identified a number of underlying conditions for punishment to effectively change or deter poor behaviour,¹² which include immediacy (the punishment must follow soon after the misconduct), certainty (the punishment must always follow the misconduct) and intensity (the punishment must be intense). If these are not all present, as they rarely are in responses to custodial misconduct, poor behaviour is not suppressed. From an evidence-based perspective then, we would not expect punishing prisoners with segregation to have a positive effect on their future rule adherence.

Research on parenting¹³ has revealed that certain approaches lead to acceptance and internalisation of social rules and behaviour. More authoritarian approaches relying on rigid and punitive approaches do not seem to achieve this, and instead can lead to increases in disobedience and the person learning to

avoid immediate negative consequences rather than develop pro-social behaviour. Furthermore, expecting segregation to change someone's behaviour assumes that their misconduct was a rational choice, in that the person knew the potential consequences and weighed this up 'in the moment'. However, often people do not think this way, such as when behaving impulsively or when under the influence of drugs or alcohol. In these circumstances, more severe sanctions have little or no deterrent effect.¹⁴ Finally, evidence points to a number of unintended side effects of punishment.¹⁵ It can interfere with desirable behaviours (such as communicating or engaging with others), risks the development of learned helplessness (which has been linked to depression, stress and poor coping), can negatively affect the relationship with the punisher (in this case prison staff) and models that using negative

behaviours to control others is socially acceptable. As such, in the light of evidence it is unsurprising, and explainable, that when segregation is used to punish and control, it is not associated with improved custodial outcomes.

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What effect does spending time in segregation have on recidivism?

Studies reviewed: Five studies from Canada and the United States¹⁶ looked at recidivism outcomes for people who had been segregated, compared to non-segregated groups. The samples included people segregated mainly for reasons similar to our Rule 45b, but one included voluntary segregation (presumably like our Rule 45a). Three studies were of supermax prisoners who spent at least three or four months in those conditions continuously, or at least 40 per cent of their sentences there (which means they were segregated for longer than we typically do in England

11. Fehr, E., & Gächter, S. (2002). Altruistic punishment in humans. *Nature*, 415, 137-140.
 12. Andrews, D. A., & Bonta, J. (2010). *The psychology of criminal conduct* (5th ed). London: Routledge.
 13. Baumrind, D. (1991). The influence of parenting style on adolescent competence and substance use. *Journal of Early Adolescence*, 11, 56-95; Maccoby, E. E., & Martin, J. A. (1983). Socialization in the context of the family: Parent-child interaction. In P. H. Mussen & E. M. Hetherington (Eds.), *Handbook of child psychology: Vol. 4. Socialization, personality, and social development* (4th ed., pp. 1-101). New York: Wiley; Weiss, L. H., & Schwarz, J. C. (1996). The relationship between parenting types and older adolescents' personality, academic achievement, adjustment, and substance misuse. *Child Development*, 67, 2101-2014.
 14. Robinson, P. H. & Darley, J. M. (2004). Does criminal law deter? A behavioural science investigation. *Oxford Journal of Legal Studies*, 24, 173-205.
 15. For a summary of this research see: Andrews, D. A., & Bonta, J. (2010). *The psychology of criminal conduct* (5th ed). London: Routledge.
 16. Lovell, D., Johnson, L. C., & Cain, K. C. (2007). Recidivism of supermax prisoners in Washington State. *Crime & Delinquency*, 53(4), 633-656; Lovell, D. & Johnson, C. (2004). *Felony and violent recidivism among supermax prison inmates in Washington State: A pilot study*. Seattle, WA: University of Washington; Mears, D. P., & Bales, W. D. (2009). Supermax incarceration and recidivism. *Criminology*, 47(4), 1131-1166; Motiuk, L. L., & Blanchette, K. (2001). Characteristics of administratively segregated offenders in federal corrections. *Canadian Journal of Criminology*, 43, 131-143; Butler, H. D., Steiner, B., Makarios, M. D., & Travis III, L. F. (2017). Assessing the effects of exposure to supermax confinement on offender post-release behaviours. *The Prison Journal*, 1-21. DOI: 10.1177/0032885517703925.

and Wales). The fourth study was of supermax prisoners who spent *any* time in those conditions; the median amount (middle point) of time spent there was one year. It was not clear how long people were segregated for in the fifth study. Four studies only included men, and it was unclear whether the fifth included women too. Four studies looked at three-year reconviction outcomes; one looked at 1-year rearrest and 7-year reincarceration and reconviction outcomes. Sample sizes ranged from around 110 to around 2,500.

Summary of findings: The findings show a mix of null and negative findings for reconviction outcomes. Four studies showed no significant differences in overall reconviction or reincarceration rates between segregated and non-segregated people, although one found significantly higher rates of returning to custody, and returning to custody for a new crime, for segregated prisoners. The single study that looked at rearrest after one year found no significant differences between the two groups overall, but did find worse outcomes for the people who were in supermax for at least 90 days. When looking only at more serious and violent reoffending, three studies found that segregated prisoners were significantly more likely to be reconvicted. Being released directly from segregation seemed to be potentially associated with poorer outcomes too. Two studies found that these people had significantly higher rates of reconviction (one also found that these people reoffended much faster) than people who moved from segregation back to mainstream location before their release. A third study did not replicate this finding though.

A possible explanation: What we know so far about the potential for punishment to have little

positive effect on, or to even worsen, behavioural outcomes provides a possible explanation for these findings. There is very scarce empirical evidence demonstrating that punishment effectively deters future offending,¹⁷ and a considerable amount of good quality research has demonstrated that people who experience imprisonment fare similarly or worse in the longer-term compared with people who receive non-custodial sanctions.¹⁸ Research has identified a range of possible reasons for why this might be.¹⁹ Imprisonment may sever people's pro-social bonds, such as by losing a partner and employment while they are separated from the community. It may increase anti-social ties by placing people in a deprived and criminal culture, in which they may be introduced to new criminal

techniques or anti-social peers. Imprisonment might reinforce a person's identity as a criminal, making it harder for them to break away from this in the future. It is possible that prisons provide less support and services than those available to people on community sanctions. Finally, there are a number of barriers to resettling into the community after release from prison, related to the stigma of being a former prisoner, such as being unable to find a job or appropriate housing.

We do not know if or how time in segregation might exacerbate these hypothesised

reasons for the effect of incarceration on recidivism. It is possible (but as yet untested) that segregation adds greater reinforcement to an antisocial identity (such as being 'a rule-breaker' and 'disruptive'), makes contact with family and visits even more challenging, places individuals in closer quarters (although not physically able to interact) with people who are also viewed as the most 'difficult', and removes chances to engage in

When looking only at more serious and violent reoffending, three studies found that segregated prisoners were significantly more likely to be reconvicted.

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17. Andrews, D. A., & Bonta, J. (2010). *The psychology of criminal conduct* (5th ed). London: Routledge; McGuire, J. (2004). *Understanding psychology and crime. Perspectives on theory and action*. Maidenhead: Open University Press.
 18. Villettaz, P., Gillieron, G., & Killias, M. (2015). The effects on re-offending of custodial vs. non-custodial sanctions: An updated systematic review of the state of knowledge. *The Campbell Collaboration*, 1; Jolliffe, D., & Hedderman, C. (2015). Investigating the impact of custody on reoffending using propensity score matching. *Crime & Delinquency*, 61(8), 1051-1077; Mews, A., Hillier, J., McHugh, M., & Coxon, C. (2015). *The impact of short custodial sentences, community orders and suspended sentence orders on re-offending*. Ministry of Justice, London; Bhuller, M., Dahl, G. B., Loken, K. V., & Mogstad, M. (2016). *Incarceration, recidivism and employment. Working Papers in Economics No.7116*. Department of Economics, University of Bergen: Norway; Siren, R., & Savolainen, J. (2013). No evidence of specific deterrence under Penal Modernisation: imprisonment and recidivism in Finland. *Journal of Scandinavian Studies in Criminology and Crime Prevention*, 14(2), 80-97; Cochran, J. C., Mears, D. P., & Bales, W. D. (2014). Assessing the effectiveness of correctional sanctions. *Journal of Quantitative Criminology*, 30, 317-347; Mitchell, O., Cochran, J. C., Mears, D. P., & Bales, W. D. (2017). The effectiveness of prison for reducing drug offender recidivism: a regression discontinuity analysis. *Journal of Experimental Criminology*, 13, 1-27; Mueller-Smith, M. (2015). *The criminal and labor market impacts of incarceration*. Department of Economics, University of Michigan; Stemen, D. (2017). *The prison paradox: More incarceration will not make us safer*. Vera Evidence Brief. Vera Institute of Justice: NY.
 19. For summaries of this research, see: Cochran, J. C., Mears, D. P., & Bales, W. D. (2014). Assessing the effectiveness of correctional sanctions. *Journal of Quantitative Criminology*, 30, 317-347; Jolliffe, D., & Hedderman, C. (2015). Investigating the impact of custody on reoffending using propensity score matching. *Crime & Delinquency*, 61(8), 1051-1077.

activities that could facilitate better outcomes and successful resettlement (albeit usually in the short-term in England and Wales). It is possible, for some people, that the pains of imprisonment²⁰ might be more painful in segregated conditions.

What do we know about segregation in England and Wales?

A recent study²¹ of segregation units and CSCs in England and Wales included interviews with 67 prisoners (50 of whom were in segregation units) and 74 staff. Surveys were sent to prisons to gather information, and processes (such as adjudications and reviews of people with active Assessment, Care in Custody and Teamwork (ACCT) documents)²² were observed. Of the 50 segregated prisoners interviewed, 19 had engineered a move to the segregation unit (for example by refusing to return to their cell, or climbing on the roof). The most common reason was to pressure the prison to transfer them, but reasons also included self-protection and not wanting to share a cell.

Overall, the segregation units were characterised by social isolation, inactivity and increased control over prisoners. Regimes were impoverished; most exercise sessions were 30 minutes long or less, and in some units prisoners had to choose between having a shower and getting exercise. Relationships between staff and prisoners were reported to be good, and over half of the prisoners perceived officers to be supportive.

Over half of the segregated prisoners who were interviewed reported having three or more of the following: anger, anxiety, insomnia, depression, difficulty concentrating and self-harm. The study did not compare this with reports from the non-segregated population. Some of the prisoners self-reported deteriorating mental health while segregated, and others believed there was a direct link between their segregation and their self-harm or thoughts or suicide. The study did not distinguish between problems that

pre-existed their segregation, however. Furthermore, prisoners were given a list, based on previous segregation research, of problems or ill effects of segregation, and asked if they experienced these, which may lead to over-reporting. Roughly equal numbers of the interviewed prisoners reported experiencing some benefits, as the number reporting no benefits, from segregation. The current mental health difficulties of a small proportion of the sample appeared to make segregation a better environment for them (albeit temporarily) than the mainstream prison location, supporting or improving their mental health. For example, the social isolation could reduce anxiety,

help them to feel safe and calm, and to let them relax. People who engineered their segregation were more likely to find some benefit in it, than those who had not engineered this.²³

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Conclusions and implications

It is internationally accepted that due to the reasons for their segregation, this group of people often have multiple and complex needs, may behave in challenging ways and may be very vulnerable too. In England and Wales there are no widespread specialist services designed specifically to meet the needs of segregated people (although a small number of prisons are currently piloting new approaches, such as in the

High Security prison Estate).²⁴

The research findings summarised here suggest that segregation can have *some significant negative effects on people's psychological health, particularly for anxiety, depression and self-harm. For the most part, however, psychological outcomes over time seem to look quite similar to those for prisoners who are not segregated.* This does not minimise the potentially adverse effects that segregated people may experience, but suggests that these effects do not tend to be greater than the effects or pains of incarceration more generally. The findings also suggest that *using segregation to manage custodial misconduct may be ineffective. It may also increase people's risk of future serious or violent recidivism.* Given the evidence-base

20. Sykes, G. (1958). *The Society of Captives: A Study of a Maximum-Security Prison*. Princeton, NJ: Princeton University Press; Crewe, B. (2011). Depth, weight, tightness: Revisiting the pains of imprisonment. *Punishment & Society*, 13(5), 509 – 529.

21. Shalev, S., & Edgar, K. (2015). *Deep custody: Segregation Units and Close Supervision Centres in England and Wales*. Prison Reform Trust.

22. Used for prisoners who are at risk of suicide or self-harm.

23. Personal communication with Dr Kimmet Edgar, Prison Reform Trust, 08.02.18.

24. Category A prisons, or high security prisons, can be described together under the term 'High Security Estate'.

for what works (and does not work) to effectively change behaviour, and the evidence about the impact of imprisonment on reoffending outcomes, these findings are unsurprising.

Segregation is not usually designed to help people learn how to behave differently and resettle effectively into a community. The kinds of services and interventions on offer in prisons that are designed to achieve these goals (such as Offending Behaviour Programmes and education courses), are generally not available to people in segregation. Furthermore, although many staff in segregation units in England and Wales may sincerely desire and be highly motivated to help the people in their care to achieve progression and better outcomes, for many reasons units are often focussed primarily on containing people (although there are, of course, exceptions).

Punishment for rule breaking in prison may be warranted. Protecting individuals from harm and

attempting to stabilise the prison population by temporarily removing individuals with undue influence (and providing respite to staff coping with challenging people and complex situations) are also important. However, the evidence suggests that segregation may not be all that successful in achieving its intended goals or in facilitating longer-term change and stability for people living in custody.

The evidence suggests that it is important that the services available in segregation help to mitigate potential adverse consequences, and people are reintegrated as quickly as possible into mainstream location where they can access services that have been shown to positively affect short- and long-term outcomes. Furthermore, as HMPPS aims to develop the rehabilitative culture of prisons, in which all the aspects of prison life support rehabilitation, the purpose, use and regime of segregation units could be reconsidered.