Executive Summary
Solitary confinement must be carefully scrutinized, principally because it constitutes a significant deprivation of liberty for those who have already been segregated from society. Additionally, a growing body of research has found that there are alternatives to prolonged solitary confinement that are not merely less restrictive, but also increasingly demonstrated to be more effective. For a person in solitary confinement with no remaining opportunities for activity or other privileges that can be taken away and no ability to earn their way out of segregation, there is no leverage to incentivize their behavior. Paradoxically, the complete loss of freedom provides a license to act with impunity. When combined with the health effects of long-term isolation, corrections systems have begun to question whether this dynamic may result in more danger than a lower level of custody for the officers who must escort the person in solitary confinement for one or two hours each day out of their cell to conduct basic activities such as eating or taking a shower.

From Colorado to Maine, many jurisdictions have successfully implemented alternative approaches that do not involve ignoring misconduct within prisons but instead utilize other sanctions and withdrawal of privileges for behavior that does not present an imminent danger. At the same time, such jurisdictions that have reined in the use of prolonged solitary confinement have implemented incentives for those in segregation for brief periods to earn their way out through gradual participation in more and more programming, even if some of it initially occurs while chained to a table. Other promising policies, which can be implemented either administratively or legislatively, include more closely tracking data on the use of solitary confinement, ensuring due process in placement decisions, enhancing correctional officer training in de-escalation tactics, and ending direct releases to the public from solitary confinement. Momentum continues to build for reform, with numerous corrections agencies taking internal steps, New Jersey and Minnesota enacting legislation in 2019, and the American Legislative Exchange Council adopting a model policy in December 2019 (ALEC).

Introduction
For most Americans, prison may seem like the ultimate deprivation of liberty, but in fact there are prisons within prisons. Solitary confinement, which segregates inmates from the general correctional population and requires them to spend up to 22 hours a day in a tiny cell, may seem like the path of least resistance for often overburdened corrections personnel, but increasing evidence shows it is harmful to both the individuals affected and, upon their release, to society as a whole.

Corrections officials are charged with important responsibilities such as preventing escapes, protecting staff and vulnerable populations, and promoting effective rehabilitation. They are entitled to some deference in pursuing these goals, but unlike a defendant in court, a prisoner who claims they did not commit the
violation that resulted in their placement in solitary confinement is not entitled to an attorney or perhaps even a hearing. Moreover, correctional staff may view prisoners’ actions and statements with skepticism, especially since some were convicted of crimes involving dishonesty.

A recent scandal in Texas involving correctional officers who planted contraband on prisoners to create disciplinary violations demonstrates that alleged violations are not always clear cut or sometimes may not have any basis at all (Lisheron). Given that those subject to solitary confinement have limited ability to challenge this placement, external accountability for correctional decisions is critical, and the conservative impulse to temper government power with accountability is particularly important to check the overuse of prolonged solitary confinement.

Accountability can take the form of administrative policies and practices, and in some cases, statutory limitations. For example, correctional systems should be designed with adequate guidance and review to ensure that a single corrections officer cannot mete out this sanction. Given the magnitude of the deprivation of liberty involved, limitations on this practice are necessary to avoid succumbing to an “out of sight, out of mind” mentality. Fortunately, many jurisdictions are demonstrating that it is possible to limit the use of solitary confinement while also promoting safety for both staff and those who are incarcerated.

**The Scope of Solitary Confinement**

In the United States, virtually every system of corrections segregates some inmates from the general correctional population due to certain circumstances (DOJ, 3). This is a broad description of a practice that is implemented in widely varied ways from state to state and at the federal level. Referred to variously as “solitary confinement,” “restrictive housing,” or “administrative segregation,” the practice has neither an empirical definition nor a single name that is consistent across jurisdictions (DOJ, 3). As such, data limitations exist, and aggregating data for the purposes of comparison is challenging.

In an effort to alleviate the problem, the United States Department of Justice produced a report with the goal, in part, to establish a nationally accepted definition (DOJ, 3). In this publication, the definition proffered by the DOJ will be the standard: “[r]emoval from the general inmate population, whether voluntary or involuntary; [p]lacement in a locked room or cell, whether alone or with another inmate; and [i]nability to leave the room or cell for the vast majority of the day, typically 22 hours or more” (DOJ, 3). The DOJ report predominantly uses the term “restrictive housing.” This publication will use the most recognizable term regarding the practice “solitary confinement,” though the term may be a misnomer depending on the circumstances. In accordance with the DOJ’s definition, “solitary confinement” may connotes conditions of confinement that are not literally solitary because another inmate is in the same cell (DOJ, 3). While not crucial to the definition, it is important to note that the average solitary cell is just 60 to 80 square feet (Cloud et al.).

Estimates of the number of inmates in solitary confinement across the United States on any given day vary and have ranged from 25,000 to 80,000. The percentage of the daily state prison population in solitary confinement is estimated to be between 5 to 8 percent (Shames, 6). In 2018, the Association of State Correctional Administrators joined with the Arthur Liman Center for Public Policy at Yale University to produce a survey that generated responses from 45 states and the Federal Bureau of Prisons. The survey defined restrictive housing as the practice of placing individuals in separate cells for an average of 22 hours or more per day for 15 or more continuous days (ASCA-Liman, 4). The results indicated an average of 4.6 percent of inmates were in restrictive housing. In the responding jurisdictions, 22.8 percent of inmates stayed in solitary confinement for 15 to 30 days and 18.7 percent stayed a year or more (14).

In sum, there are variations in estimates regarding the number of inmates in solitary confinement in the United States, differences in how solitary confinement is defined, and a lack of reporting requirements across jurisdictions (Shames, 7). However, despite the gaps in the data regarding the prevalence of solitary confinement, the U.S. data that is available contrasts with the approach in Germany where solitary confinement is used sparingly (York). A 2013 Vera

![Figure 1. Solitary confinement cell at Central Prison in Raleigh, NC](source: Alexander)
Institute report notes that Waldeck Prison and Neustrelitz Prison had only been used a few times over the last several years, in each case for a few hours (Subramanian et al, 13). The report also states that the maximum period of solitary confinement under statute in Germany is four weeks and only two weeks in the Netherlands. While international comparisons are informative, there are many variables to consider when applying approaches from abroad, including that prisons in these nations differ from American prisons in other ways such as staffing ratios and physical design.

Overview of Solitary Confinement

As noted in the Journal of the American Academy of Psychiatry and the Law, solitary confinement can have a pronounced psychological effect on inmates:

Isolation can be psychologically harmful to any prisoner, with the nature and severity of the impact depending on the individual, the duration, and particular conditions (e.g., access to natural light, books, or radio). Psychological effects can include anxiety, depression, anger, cognitive disturbances, perceptual distortions, obsessive thoughts, paranoia, and psychosis (Metzner and Fellner, 104).

In a study based in Washington state, researchers found that inmates released directly from a prison (known as a Supermax unit because it is dedicated entirely to solitary confinement) committed new felonies at a rate 35 percent higher than that of inmates of the same risk profile released from the general population of a correctional facility (Lovell). However, those who were stepped down to the general population in the months prior to release only had a slightly higher recidivism rate which was not statistically significant from the control group of those who were never placed in solitary confinement.

Craig Haney, a professor of psychology, conducted a review of the empirical research on the psychological effects of solitary confinement which found evidence of “stress-related reactions (such as decreased appetite, trembling hands, sweating palms, heart palpitations, and a sense of impending emotional breakdown); sleep disturbances (including nightmares and sleeplessness); heightened levels of anxiety and panic; irritability, aggression, and rage; paranoia, ruminations, and violent fantasies; cognitive dysfunction, hyper-sensitivity to stimuli, and hallucinations; loss of emotional control, mood swings, lethargy, flattened affect, and depression; increased suicidality and instances of self-harm; and, finally, paradoxical tendencies to further social withdrawal (Haney, 371).

Some of the medical consequences of solitary confinement can be physiologically measured as time progresses. For example, research has found that prolonged isolation can reduce the size of the hippocampus as well as its capacity for generating new neurons (Blanco-Suarez). This can negatively affect the ability to learn and remember, as well as spatial awareness. The amygdala, the part of the brain that processes emotions, increases its activity in response to isolation. This translates as greater fear and anxiety (Blanco-Suarez).

There has been some concern about the effects of solitary confinement on the safety of prison guards. For example, the association representing Texas prison guards, the American Federation of State, County, and Municipal Employees Local 3807, called for the reduction of solitary confinement for death row inmates in January 2014 (Flatow). Noting that “inmates have very few privileges to lose,” a representative argued prison guards became targets as a result (Flatow).

 Downsizing Solitary Confinement

Several recent examples demonstrate how correctional officials have reduced the number of inmates in solitary confinement while improving correctional environments for both staff and inmates.

Administrative Reform

In 2011, the state prison in Warren, Maine, instituted a plan to reduce solitary confinement. Joseph Ponte, the Maine Corrections Commissioner at the time, oversaw the
implementation of changes that resulted in a staggering decline in the use of solitary confinement. The population of inmates in solitary confinement dropped from 139 inmates to between 35 and 45 inmates just one year later. The state prison in Warren achieved this result by implementing strategies that utilized solitary confinement for safety reasons as opposed to punishment for disciplinary violations that did not endanger staff or other prisoners. Some of the changes involved moving away from utilizing solitary confinement as the default punishment for institutional violations and reducing the duration of solitary confinement. For example, those segregated for drugs could now graduate out of confinement and stay in the general population as long as they passed a drug test. There was also a change in the chain of command. Rather than the shift captain being able to place an inmate in segregation for more than three days, the segregation unit manager and the housing unit manager had to agree after a 72-hour period to continue the segregation followed by the ratification of that decision by the Commissioner (Barber).

Regarding the downsizing of solitary confinement, Ponte said the new practices led to “substantial reductions in violence, reductions in use of force, reductions in use of chemicals, reductions in use of restraint chairs, reductions in inmates cutting [themselves] up.” In turn, reducing the population of inmates in solitary confinement reduced the overtime costs regarding prison guards. According to Ponte, the overtime costs per two-week pay period dropped from between $1,800 and $2,000 to between $400 and $500 after the changes were implemented (Barber).

Mississippi is one of the most prominent examples of a state safely reducing solitary confinement while cutting costs. Following litigation efforts beginning in 2002 by the Mississippi ACLU in regards to prison conditions, correctional officials in Mississippi started to reexamine solitary confinement (Simms, 249). Several changes were made to Mississippi’s corrections policies over a span of years, including revisions to the classification process regarding whether a prisoner warrants a period in solitary confinement (249-250). Officials also implemented a “step down” system with incentives that created a way for a prisoner to “earn” his or her way out of solitary confinement through positive behavior and compliance (250). Beyond prisoner-focused initiatives, correctional staff received enhanced training (250).

As a result of implementing measured policies, Mississippi reduced its overall inmate population in solitary confinement, experiencing a 75 percent drop within a six-year span (Pinkston). The reduction allowed the state to close a unit dedicated to solitary confinement, saving taxpayers $6 million a year out of its corrections budget (Pinkston). Most importantly, violence targeting staff and prisoners within Mississippi’s correctional system declined following the implementation of the new policies, dropping nearly 70 percent (Simms, 249-250).

Finally, Colorado has had the most tragic and dramatic experience in overhauling the use of solitary confinement. In 2013, a Colorado inmate released directly from solitary confinement murdered the state’s director of corrections, Tom Clements (Prendergrast). Dating back to 2002, half of those released from Colorado prisons who subsequently committed murder served time in solitary confinement (Crummy and Brown). However, more research would be needed to determine to what extent this stemmed from their predisposition to violence before entering solitary confinement versus the effects of solitary confinement. Moreover, 47 percent of those leaving solitary were discharged directly to the street (Prendergrast). Colorado phased out this dangerous practice and also reduced the solitary count from 1,500 in 2011 to just 185 by 2016 (Hall).

In 2017, Colorado eliminated solitary confinement periods of more than 15 days, which is the international standard that is part of the Mandela Rules (United Nations). Key reforms implemented by the Colorado Department of Corrections included de-escalation rooms and gradually increasing hours outside the cell for programming, even when that initially involves the inmate being chained to a table during the programming. The Colorado Department of Corrections also instituted transparency about the treatment of inmates and safety within the prisons, including annual reports to the Legislature and a constituent services office that handles complaints. While there were initially some concerns from staff about their safety, from 2011 to 2016, annual inmate assaults on staff in Colorado fell from an average of 262 to 160 (Hall).

Many other jurisdictions, including both state prison systems and local jails, have taken steps that have resulted in substantial reductions in the use of solitary confinement, often with outside technical assistance providers.
For example, the Vera Institute has highlighted the reductions achieved through its partnerships with the Nebraska Department of Corrections, North Carolina Department of Corrections, Oregon Department of Corrections, New York City, and Middlesex County, New Jersey (Digard et al.). Similarly, corrections leaders such as former Colorado Department of Corrections Executive Director Rick Raemisch, former Idaho Department of Correction Director Henry Atencio, North Dakota Department of Corrections and Rehabilitation Director Leann Bertsch, and former Ohio Department of Rehabilitation and Correction Director Gary Mohr have described the steps they took to reduce solitary confinement, which involved both changes in practice and culture (ASCA-Liman).

Corrections departments are charged with ensuring the safety of both staff and inmates. The success of many states described earlier in this report shows that corrections agencies can safely reduce the use of solitary confinement without changes in statute. Changes in administrative practices offer some advantages in comparison to legislation, such as being easier to modify as their impact is monitored and new knowledge is gained. By the same token, if a reform-minded head of a corrections agency departs, the successor may lack a similar commitment to this cause and roll back changes despite their effectiveness. Conversely, legislation is more durable but also more prone to unintended consequences.

While it is too early to assess the impact of bills enacted in 2019, both New Jersey and Minnesota adopted legislation to reform the use of solitary confinement. The New Jersey bill (A314) encompasses several reforms. First, it only permits the use of solitary confinement, defined as segregation for 22 hours a day or more, if there is “reasonable cause to believe that the inmate or others would be at substantial risk of serious harm as evidenced by recent threats or conduct.” It also caps the time period in solitary at 20 consecutive days or 30 total days over any period of 60 days, unless there is a facility-wide lockdown. The legislation, which goes into effect in August 2020, requires state prisons and county jails to screen inmates for mental illness before and during isolated confinement and includes a data reporting provision. The bill also contains specific limits on the use of solitary confinement for vulnerable populations, such as the seriously mentally ill and pregnant women. It prohibits solitary confinement in such instances, with exceptions for unit-wide lockdowns, 24-hour emergency placements, protective custody, and if a clinician certifies that it is necessary.

The Minnesota legislation (HF 493/SF 1911), also enacted in 2019, takes a narrower approach. The bill, championed by State Rep. Nick Zerwas (R-Elk River), was propelled by investigative reporting in the Minneapolis Star-Tribune that revealed 1,600 individuals were in solitary confinement for six months or more, including many who were mentally ill and had simply disobeyed an order (Mannix). The bill requires a psychological screening before those exhibiting signs of mental illness may be placed in solitary confinement. It also calls for daily wellness checks and creates a path for those in solitary confinement to earn back privileges through good behavior, including returning to the general population. Finally, the legislation creates reporting requirements to track the number of people in solitary confinement and prohibits releasing individuals directly from solitary confinement to the public.

**Recommendations**

Whether the use of solitary confinement is better addressed through administrative changes or legislation will depend on many factors in each jurisdiction. However, the following goals are among those supported by the research.

**Require regular reporting of data on the use of solitary confinement**

All correctional institutions should track their use of solitary confinement, including not just the number of people in this form of custody at any given time, but also the length of stay. Unit-level data should be available to the leader of the state corrections agency as well as policymakers. Additionally, to the extent they are represented, such data should identify special populations, though prolonged solitary confinement of groups such as juveniles, pregnant women, and those suffering from serious mental illness should be avoided. The availability of this data can be used to identify units that should be audited to determine if they are overusing solitary confinement.

**Enhance training of correctional officers in de-escalation tactics**

Correctional officials should enhance training for prison personnel in de-escalation techniques regarding issues that often lead to solitary confinement. Such de-escalation training, including mental health first aid training for corrections officers, has been an important part of the North Carolina Department of Public Safety’s initiative to reduce the number of people in solitary confinement through a partnership with the Vera Institute (Wilcox et al.). Such training parallels Crisis Intervention Training (CIT) that most major police departments have implemented because of its effectiveness in helping officers defuse encounters, particularly those with mentally ill persons, resulting in greater use of diversion and increased officer satisfaction (Rogers et al.). Moreover, correctional systems consider filling some positions with individuals with backgrounds in areas such as social work, equipping officers with the ability to not just respond to behavior but potentially alter it.
Clearly limit conduct that results in solitary confinement

Given the loss of liberty and physical and mental impact of placement in solitary confinement, it should be reserved for conduct or threats that indicate the individual presents a substantial risk to his safety or to others’ safety. Unfortunately, solitary confinement is often used to address disciplinary violations that fall short of this standard. For example, in New York, male prisoners were found to receive an average of 17 days in solitary for disobeying an order, 16.5 days for profane language, and 28 days for unauthorized use of tobacco (Bowers et al., 45).

While of course those who have perpetrated or threatened violence present more serious cases than those who have violated such rules, it is not clear that solitary confinement is necessary in these cases. Indeed, Sheriff Tom Dart eliminated solitary confinement altogether in Cook County, which operates the nation’s largest single site jail located in Chicago. Sheriff Dart created the Special Management Unit (SMU) where detainees who broke the rules or committed an act of violence engage in activities in open rooms or yards. However, unlike the general population, these detainees are closely watched with a much lower staff-to-inmate ratio. They are in groups of six to eight with supervision by staff trained in de-escalation and conflict resolution. It is still a highly restrictive setting, as the prisoners, many of whom were placed there due to an assault of another inmate, are in their cells 21 hours a day and are often chained to a table or desk when receiving programming outside their cell (Kriebala). Nonetheless, the average time spent in the SMU is only 10 days, demonstrating that many earn their way out through good behavior (Kriebala). Sheriff Dart reports that since this model was introduced, “detainee-on-detainee assaults have dropped significantly and assaults on staff plummeted” (Dart).

Although more research is needed on responses to incidents of violence without solitary confinement, it is apparent that, in addition to ending the use of solitary confinement for routine disciplinary violations, there are also promising alternatives in cases involving more serious conduct.

Establish menu of lesser sanctions for dealing with routine disciplinary violations and consider missioned housing

Promoting order in prisons and ensuring accountability for violations of rules are important goals. However, correctional institutions can create a menu of alternative sanctions, including withdrawal of privileges, to respond more proportionally to violations that do not threaten safety. Correctional officials should create a matrix of intermediate sanctions to be used prior to, and ideally in lieu of, solitary confinement, unless the inmate has intentionally caused or threatened injury. Additionally, many systems that have safely curtailed the use of solitary confinement have adopted “missioned” housing (U.S. Department of Justice, 74). For example, those who suffer from serious mental illness that interferes with their ability to follow orders may be segregated from the general population, but in a supportive environment rather than being confined to a cell for 22 hours a day.

Implement administrative reviews

Corrections departments should ensure that there is an oversight mechanism, whether that is an ombudsman or the head of the department, to review decisions to keep an inmate in solitary confinement beyond 72 hours. This is particularly important in correctional systems in which inmates can be placed in solitary confinement simply for being a suspected gang member, a subjective determination which is prone to human error. Additionally, in November 2019, it was revealed that many New York prisoners had been placed on solitary confinement due to flawed drug tests that produced false-positive results (Ransom). This illustrates the importance of ensuring due process and high-level review.

Create a process for individuals to earn their way out of solitary confinement

No one should remain in solitary confinement unless they continue to present a substantial danger, but corrections systems can create more avenues for those in solitary confinement to prove that whatever factors led to them being placed there are no longer present. Examples include a period of exemplary behavior and gang renunciation. In Texas Department of Criminal Justice prisons and state jails, some 4,754 prisoners have exited solitary confinement through the Gang Renouncement and Disassociation (GRAD) since it began in 2000, and of these, only 19 are known to have returned to gang activity (Schiller). The GRAD program involves many steps to verify the sincerity of the participant. Clear avenues out of solitary confinement are important partly because risk to safety may be increased to the extent a person in solitary confinement comes to believe he has “nothing to lose” by acting out even while in solitary.

Cap length of time spent on solitary confinement absent exigent circumstances

Setting a maximum period of solitary confinement with precision is challenging. On the one hand, the negative effects begin soon after placement, as it has been found that even a few days of solitary confinement affect the brain. A few days can shift the electroencephalogram (EEG) pattern toward an abnormal pattern characteristic of stupor and
Still, there is a distinction between a condition that can revert to normal upon reentering the general population and long-term medical consequences discussed earlier, such as those suffered by Anthony Graves. Moreover, as noted at the outset of the paper, a balance must be struck with the need to respond to urgent safety threats with a brief “time out” to defuse the situation.

In light of the successful experiences in Colorado and many other jurisdictions, correctional institutions should strive to limit periods to no more than 15 to 20 days. To the extent a longer period is permitted, circumstances should be strictly specified, such as a unit-wide lockdown or because the inmate has been determined to be responsible for a serious violent or sex offense such as murdering another inmate. Additionally, in such cases, continued placement beyond the 15- or 20-day mark should be approved by the leader of the corrections agency and reviewed regularly to determine that it remains necessary.

**End the practice of releasing inmates directly from solitary confinement**

It is counterintuitive to release someone to the general public who only the prior day was confined to a cell for at least 22 hours a day, ostensibly because they were not determined to be suitable for the general prison population. Being placed in solitary confinement limits the ability of prisoners to participate in rehabilitative programming or classes that teach life skills. Moreover, even solitary confinement that includes a cellmate limits social interaction. In turn, these conditions negatively affect the reentry process for an inmate who is preparing for his or her release back into society. To facilitate the reentry process, correctional officials should not hold an inmate in solitary confinement until the completion of his or her sentence. Stepping inmates down to a lower level of custody at least several months prior to release in order to facilitate preparation for reentering society has been demonstrated to reduce recidivism (Lovell).

**Conclusion**

Solitary confinement for brief periods is occasionally necessary to protect the safety of both people who are incarcerated and the staff responsible for them. However, absent appropriate limitations, it is subject to being used too frequently. Perhaps most importantly, systems without proper safeguards may impose solitary confinement for excessively long periods, imperiling the physical and mental health of those so confined. The public safety imperative of reducing recidivism is also at stake, owing in part to releases directly from solitary confinement and the dearth of programming offered in this setting. Fortunately, ample evidence and recent experience demonstrate that the use of solitary confinement can be safely minimized through a range of proven policies and practices. By taking these steps, we affirm that there must be a high bar to take the last modicum of liberty away from even those who must be segregated from society.
References


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