

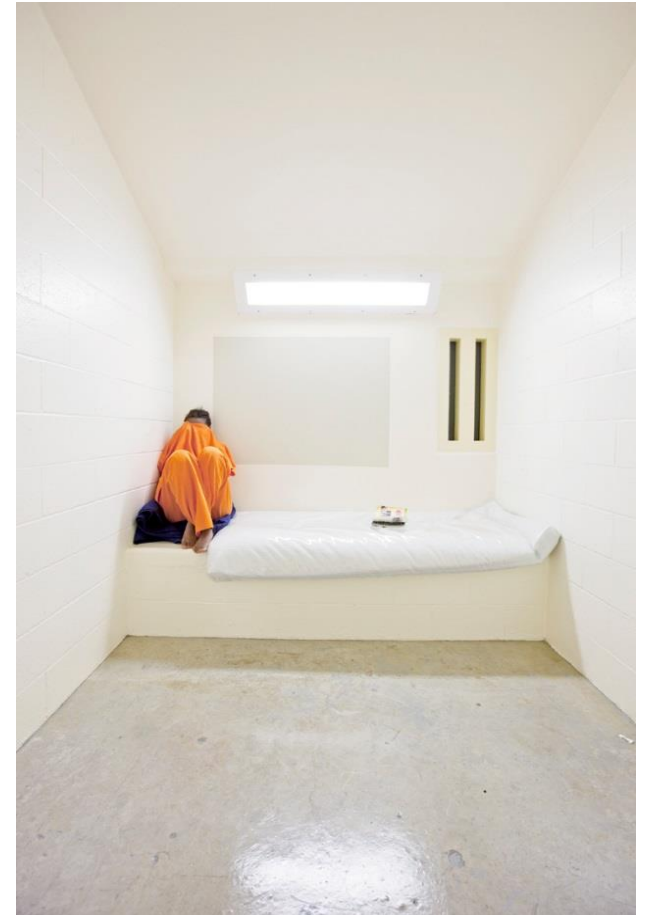
COALITION FOR JUVENILE JUSTICE

**ENDING SOLITARY CONFINEMENT:
STRATEGIES FOR SUCCESSFUL REFORMS**

JUNE 11, 2015

Today's Goals

- Understand the harms of solitary confinement
- Learn about standards addressing solitary in juvenile detention
- Explore ways that SAGs and other concerned individuals can help



The Harms of Room Confinement

- Psychological harm – anxiety, depression, psychosis
- Increased risk of suicide
- Exacerbation of pre-existing mental illness
- Separation from normal social interactions
- Absence from school
- Lack of mental health treatment
- Lack of physical activity
- “Staring at the wall”



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“Room Confinement” Is Also Known As...

- “Seclusion”
- “Isolation”
- “Separation”
- “Administrative segregation” or “ad seg”
- “Solitary confinement”

Whatever the label, it’s the practice that matters: **involuntary restriction of a youth alone in a cell, room, or other area.**

Solitary is a symptom

- Insufficient staffing
- Lack of effective behavior management and incentives for good behavior
- Lack of mental health services
- Insufficient programming
- Punitive environment that stresses control
- Lack of appreciation of the harms of isolation

JDAI and Detention Facility Standards

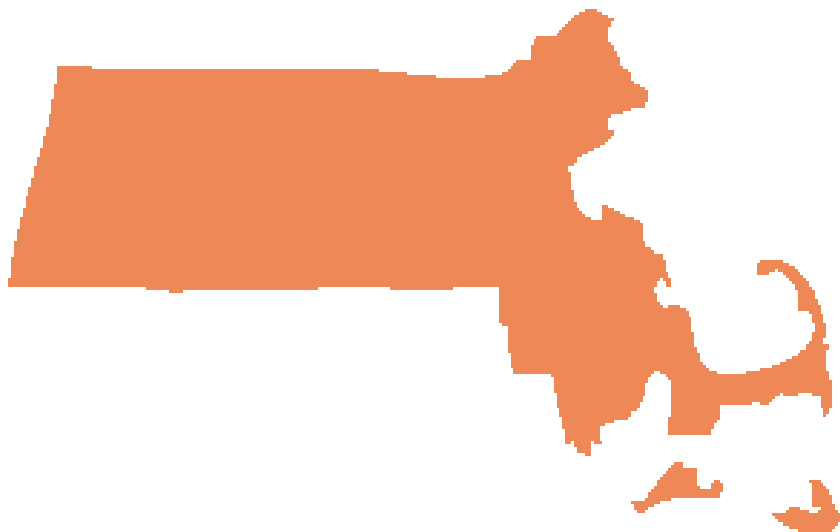
- JDAI is in more than 250 sites in 39 states
- Addressing detention facility conditions is one of 8 core strategies
- Teams learn about the standards and how to assess conditions
- Best practice standards that can guide facility practices and policies
- Standards drawn from case law, best policies, experts, and facility administrator recommendations

JDAI Room Confinement Standards

- **Definition:** The involuntary restriction of a youth alone in a cell, room, or other area
- **Allowed:** As a temporary response to behavior that threatens immediate harm to the youth or others
- **Limitations:** Release as soon as no longer a threat (4 hour maximum)
- **Not allowed:** For discipline, punishment, administrative convenience, retaliation, staffing shortages, or other reasons

Examples of Places Where Elimination of Room Confinement Has Worked

State of Massachusetts



Terrebonne Parish, LA



How Can We Eliminate Solitary?

1. Adopt clear limits on use of room confinement
2. Develop an institutional culture that limits room confinement
3. Maintain adequate staffing levels
4. Provide adequate mental health services
5. Develop an array of programming and an effective behavior management system
6. Create a positive physical environment
7. Monitor use of room confinement and identify helpful resources



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What About Youth Who Continue To Be Disruptive?

- Seek advice from mental health professionals
- Develop individual behavior plans
- Provide frequent interaction with adults
- Gradually increase time with other youth
- Continue to provide education and programming
- Do not leave youth alone in a room
- If necessary, transfer to a mental health facility



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How to Get Started

- Review facility data on reasons for room confinement, frequency of use, length of confinement, racial and ethnic disparities in discipline
- Examine facility policies and staff training to see where changes could be made
- Engage in listening sessions with staff and youth to learn what is working, understand challenges, identify potential leaders
- Establish alternative forms of discipline
- Reduce the maximum amount of time room confinement is allowed, then consider further reductions

What can SAGs Do?

- Collect data from facilities about use of room confinement (e.g., reasons for confinement, average length of time in room, incidents per month, incidents per youth, race/ethnicity)
- Fund and support assessments of facility conditions
- Develop trainings on room confinement reduction
- Collaborate with JDAI in the state
- Use public position to promote policies that eliminate solitary

JJDPA provisions – S. 1169

- **State plans** must include policies and procedures, as well as training for staff, on evidence-based and promising techniques that are designed to eliminate the use of dangerous practices and unreasonable restraints and isolation (Section 205).
- **Research** supported by OJJDP shall include training efforts and reforms that have produced reductions in or elimination of the use of dangerous practices (Section 210).
- OJJDP Administrator shall coordinate **training and technical assistance programs** with juvenile detention and corrections personnel of States and units of local government to promote evidence-based and promising methods for improving conditions of juvenile confinement, including those that are designed to minimize the use of dangerous practices, unreasonable restraints, and isolation (Section 211).

Ohio – A Success Story



Ohio -- Before

- The “worst of the worst” were placed on the “Progress Units”
- Youth were locked down 23 hours a day
- Meals, school, therapy were all provided with youth behind their doors
- When youth came out for one hour, they were gatorated

Demographics

- All the youth on the Progress Units were African-American
- By contrast, all youth on the mental health unit were white
- All youth, whether on the Progress Units or on the mental health unit, had diagnosed mental health disorders

Acts of Violence

- Astronomically high on the Progress Units
- Acts of Violence (AOVs) were on both youth and staff
- Staff were increasingly unwilling to work on the units

Ohio -- After

POLICIES:

- Disbanding of the Progress Units
- Prohibition on the use of disciplinary seclusion

RESULTS:

- Use of seclusion down 90%
- Youth spend hours – never days -- in seclusion
- Majority of youth released within 4 hours
- Acts of violence significantly reduced

What It Took to Get There

- Two law suits (S.H. v. Reed, DOJ)
- Almost 10 years of litigation and oversight by subject matter experts
- New leadership at ODYS
- Complete transparency with the staff and union, including:
 - > Regular meetings
 - > Collection and sharing of AOV reductions
 - > More nuanced way of understanding youth-on-staff assaults: “Purposeful,” “Accidental”

Commitment by ODYS to “Build Safer Facilities”

- Beautification projects at the facilities:
Engagement of youth at both the facility level and with regard to their personal living space – e.g., youth can paint their rooms a color of their choice
- GREATLY enhanced programming within the facilities and in the community
- Implementation of a protocol and process around youths’ acts of violence – STR, SRT

Building Safer Facilities

- Implementation of a mentoring program – staff and administrators provide individual mentoring to youth in their care
- Improvements to the behavior management system – incentives system implemented throughout the facility
- Great relationship with the monitoring team, which provided trainings and constant consultation

Resources and Contacts

Visit the JDAI Help Desk

jdaihelpdesk.org

Juvenile Detention
Facility Assessment
Practice Guide

Strategies to Eliminate
the Unnecessary Use of
Room Confinement

Other publications and
resources

Contact the Center for Children's Law and Policy

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