JUVENILE JUSTICE NEWS

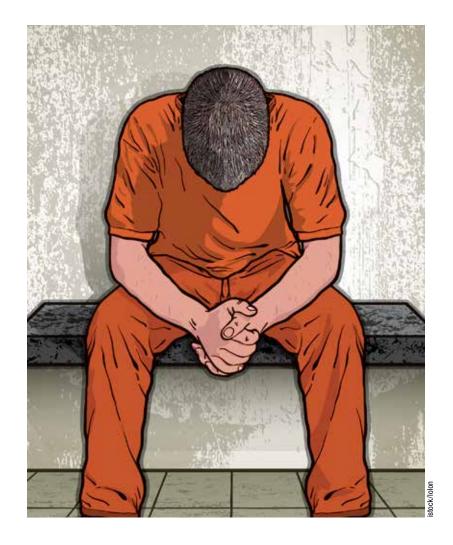
Using space well

By Michael Dempsey and Jennifer Lutz

Walking into the facility, there was a distinct feeling of uneasiness in the air and the youth and staff were visibly tense. The atmosphere was aggressive, hostile and violent. This was recipe for disaster, as our facilities continued to be plagued with rising numbers of acts of violence and seclusion. Something just wasn't working. That's when I realized we needed to change the way we were operating secure juvenile facilities, and the fundamental relationships between youth and staff. It had to begin with how we were using room confinement.

educing room confinement for young people continues to be one of the most complex and challenging tasks facing correctional professionals. While reforms in several states and a growing national awareness about the issue have spurred administrators and staff to re-examine traditional beliefs about room confinement, there is no quick or easy recipe for changing the practice. Many administrators and staff recognize that putting young people in room confinement isn't an effective solution, but they need more information about what to do instead. What strategies will be the most effective to reduce room confinement in their facility? Should

they begin by changing policies, or by providing more training on deescalation and other alternatives? How can they overcome concerns from staff? What data should they monitor most carefully to see if changes are working? How have superintendents and staff in other juvenile justice facilities answered these questions?



In May 2019, the Stop Solitary for Kids Campaign will release a tool to help answer these questions. A new report, "Not in Isolation: How to Reduce Room Confinement While Increasing Safety in Youth Facilities," tells the stories of how four jurisdictions successfully reduced room confinement. Stop Solitary for Kids is a national campaign to end solitary confinement for young people led by four national juvenile justice organizations: The Council of Juvenile Correctional Administrators, the Center for Children's Law and Policy, the Center for Juvenile Justice Reform at Georgetown University and the Justice Policy Institute.

Why reduce room confinement

Over the past decade, the juvenile justice system has undergone major philosophical and structural changes. Detention and corrections professionals have shifted away from models designed to exert maximum control over the behavior of young people through punishment and force. Instead, best practices call for evidence-based and traumaresponsive approaches to hold young people accountable while helping them change their behavior. We now recognize that even young people who commit serious offenses can be effectively rehabilitated. Despite these significant advances in how correctional and court systems handle young people, staff in juvenile facilities still face the difficult task of working with troubled adolescents, many of whom suffer from mental illness, trauma, abuse and serious emotional and behavioral problems.

For decades, staff in juvenile facilities relied on room confinement to control youth. When a resident broke the rules, refused to comply with directions or acted out, locking him or her in a room seemed like a reasonable and effective way to address the problem. Many staff thought that the threat of room confinement as punishment would "get kids' attention" and change their behavior. Unfortunately, research and experience show that these beliefs aren't true. The perceived quick benefits of room confinement obscure the fact that it doesn't solve any problems: room confinement is not an effective deterrent, doesn't equip youth with skills to behave differently in the future and doesn't make them more likely to trust the behavior management system or staff. In fact, misplaced reliance on room confinement can breed a culture of mistrust and violence in the facility that hurts everyone. Research shows a clear link between room confinement and suicide, especially for young people.² In many facilities, high rates of room confinement are also associated with chronic staffing shortages, regular mandatory overtime, frequent staff turnover and high rates of assaults and injuries to staff and youth.3

For example, the Indiana Department of Corrections previously used emergency response teams to respond to youth who refused to follow orders or who became agitated or aggressive. Four to six officers armed with riot gear, shields and chemical agents rushed in to neutralize the disruption through whatever force deemed necessary. Eventually, staff realized that when they called or threatened to call the emergency response team, youth would become more aggressive, noncompliant and

violent. Some youth explained that, when they knew staff would respond to them with physical force and room confinement, the youth escalated their own behavior to protect themselves. In other words, attempts to control behavior with increasingly restrictive responses only made the problems worse.

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Increasing pressure on facilities to reduce room confinement

Now more than ever, room confinement is a critical issue for facility superintendents, agency administrators and staff. In the past few years, room confinement has been catapulted into the national spotlight due to a convergence of mainstream media attention, litigation, policy developments and investigative reports from advocates. As awareness about room confinement in juvenile facilities grows, so will public scrutiny and legal jeopardy for state and local facilities that continue the practice unchecked. Federal courts

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in New York, Washington, Tennessee and Wisconsin have entered orders against facilities for putting young people in room confinement. Federal litigation has resulted in state agencies and county facilities paying hundreds of thousands of dollars in settlement agreements and attorney fees.4 Legislation in California, Colorado, Massachusetts, New Jersey, Oregon, Seattle and Washington D.C. has limited the use of room confinement in juvenile facilities. Several other states, including Florida, New Mexico and Nebraska, are currently considering similar legislation.5

In December 2018, Congress passed two bipartisan federal laws that will affect the use of room confinement: the First Step Act and the Juvenile Justice and Delinquency Prevention Act (JJDPA).^{6,7} In keeping with the recommendations of juvenile justice, mental health and medical experts, the First Step Act prohibits facilities that house youth in federal custody from using room confinement as punishment and permits room confinement only when youth behavior poses a risk of immediate physical harm that cannot otherwise be de-escalated. Youth must be released as soon as they are calm, and always within three hours. Although it applies only to youth in federal custody, the First Step Act sets an important example for state legislation by establishing the definition of room confinement for juveniles as "the involuntary placement of a covered juvenile alone in a cell, room or other area for any reason."8

The JJDPA reauthorization bill, or H.R. 6964, incentivizes states to implement similar reforms. The act now requires states to provide data on

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the use of isolation in juvenile facilities. It also requires states to describe how they will reduce isolation and other dangerous practices through policies, procedures and training in juvenile facilities. Finally, the act requires federal training and technical assistance to support these goals.

Success is within reach

As developments in legislation, litigation and other strategies call for reforms for the use of room confinement in youth facilities, most of the responsibility for implementing those reforms falls to state and local facilities. Staff members in juvenile justice facilities are on the front lines in the changing landscape of room confinement practices.

Fortunately, national organizations for juvenile detention and correctional professionals have addressed the issue of room confinement. The National Partnership for Juvenile Services, in 2014, and the National Commission on Correctional Health Care, in 2016, adopted positions in favor of limiting room

confinement for youth including prohibiting its use as punishment or discipline. In 2017, ACA introduced new proposed standards on the use of restrictive housing for juveniles. The standards permit isolation only as an immediate response to disruptive behavior that threatens the safety and security of the youth or others, never as discipline or punishment.

In 2014, leaders of the Council of **Juvenile Correctional Administrators** (CJCA) identified reducing room confinement as a key issue on which the organization should provide information to the field. CJCA is the largest membership organization for youth correctional administrators in state juvenile corrections systems in the United States. In 2015, CJCA published an online toolkit, "Reducing the Use of Isolation," as a guide for correctional professionals on key strategies to reduce room confinement.11 CJCA's position is that room confinement should be used only to protect youth from harming themselves or others and if used, should be for a short period and supervised.¹² CJCA also published several policy briefs and a multi-year technical assistance program for facilities on reducing room confinement.

Several state and local jurisdictions have successfully reduced room confinement. The Colorado Division of Youth Services, for example, decreased isolation by 68 percent from October 2016 to July 2018. Youth-on-staff assaults are also down 22 percent. After routinely using room confinement for over 22 hours per day, the Shelby County Juvenile Detention Facility in Memphis virtually eliminated the use of room confinement by setting

confinement to be no longer than 59 minutes. Following federal litigation and subsequent reforms, the Ohio Department of Youth Services was able to end the majority of incidents of room confinement within four hours. Between 2014 and 2015, the agency reduced room confinement by 89 percent and acts of violence by 22 percent. ¹⁴ The Oregon Youth Authority also lowered the number of times isolation was used from 370 instances in July 2016 to 140 instances in December 2018. ¹⁵

A new resource on how to reduce room confinement

Along with guidance from CJCA, the experiences of places like the ones described above have greatly increased understanding about an array of different strategies for juvenile facilities to safely reduce room confinement. Strategies that have proven effective include:

- Establishing clear limits on the use of room confinement in written policy and institutional practice;
- Ensuring full staffing for living units in facilities and eliminating mandatory double-shifts for staff:
- Providing full programming for youth throughout the day and into the evening;
- Delivering regular effective staff training on de-escalation, adolescent development and crisis intervention techniques;
- Integrating mental health professionals into residential units to provide therapeutic services for youth and training for staff, in addition to crisis intervention when conflicts occur; and

In May 2019, the Stop Solitary for Kids Campaign will release a publication that responds to this need by describing four examples of how juvenile justice facilities implemented strategies to reduce room confinement.

 Developing strong incentivebased behavior management programs.

However, many facilities still struggle to determine how to successfully adopt these strategies with limited resources. Administrators and staff routinely request details and examples about how other jurisdictions reduced room confinement. Some state agencies and local facilities even send groups of staff to see firsthand how other states limit the use of room confinement.

In May 2019, the Stop Solitary for Kids Campaign will release a publication that responds to this need by describing four examples of how juvenile justice facilities implemented strategies to reduce room confinement. As a unique partnership between juvenile justice advocates and juvenile corrections and detention administrators, the campaign embraces the idea that lasting change must include providing administrators and staff who work in juvenile facilities with viable alternatives to room confinement

"Not in Isolation: How to Reduce Room Confinement While

Increasing Safety in Youth Facilities" tells the stories of how three state juvenile correctional agencies and one county sheriff's department operating a juvenile detention facility successfully reduced room confinement. "Not in Isolation" relies on extensive interviews with administrators and staff to provide concrete examples and links to sample documents. The agencies described in the report include:

- Colorado Division of Youth Services
- Massachusetts Department of Youth Services
- Oregon Youth Authority
- Shelby County Juvenile
 Detention Center in Memphis,
 Tennessee

Each jurisdiction in "Not in Isolation" has a story about why and how it reduced room confinement. Some agencies were compelled to respond to specific events, whether a series of suicides, filing of federal litigation, investigation and reporting by outside entities, or passage of new state laws. Some administrators recognized the harmful effects of room confinement and made the internal

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decision to move away from the practice. Often it was a combination of these and other factors.

Regardless of the impetus for change, administrators in these jurisdictions discovered that strategies to end room confinement were connected with many other aspects of facility operations. They could not safely reduce room by changing any one facility policy "in isolation" from other aspects of the institution. "Not in Isolation" describes specific changes that each facility made in areas such as programming activities and schedules, integrated mental health staff on housing units, data collection and analysis and new behavior management programs.

"Not in Isolation" includes:

- Quotes and perspectives from facility and agency staff;
- Direct links to policies, forms, reports, training material and other useful materials;
- Information on how jurisdictions addressed challenges in areas of leadership, staff culture, behavior management, mental health, staff training and data; and
- Details about what steps each site took — what worked and what did not.

Committing to room reduction

Achieving sustainable reductions in room confinement is time-consuming and staff-intensive. Changes do not happen overnight. Even when jurisdictions make progress, continued success will depend on constant attention to detail and regular review of behavior of both youth and staff. While none of the jurisdictions featured in "Not in

Isolation" is a perfect model, they all achieved measurable reductions in the frequency and duration of room confinement through commitment, patience and regular review. Although letting go of long-held beliefs about the use of room confinement was difficult for some, staff at every facility ultimately said that reducing room confinement was the right decision. It helped reduce violence, improve relationships between youth and staff and made facilities safer and more rewarding places to work.

"Not in Isolation" will be available at no cost online in May 2019. For more information visit www.StopSolitaryForKids.org/not-in-isolation/.

ENDNOTES

- ¹ Mike Dempsey has worked in the corrections field for over thirty years as a corrections officer, superintendent, and executive director of the Indiana Department of Corrections, Division of Youth Services. He is currently the executive director of the Council for Juvenile Correctional Administrators.
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- ⁴ Knauss, Tim. (2018). "Settled lawsuit over teen solitary confinement to cost Onondaga County \$270,000." Central NY News. Retrieved from https://www.syracuse.com/news/2018/04/settled_lawsuit_over_teen_solitary_confinement_to_cost_onondaga_county_270000.html.
- ⁵ Stop Solitary for Kids. (2019). "State and local action." Retrieved from http://www.stopsolitary-forkids.org/state-or-local-policies-and-bans/.
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- 8 18 U.S.C. § 5043. (2018).
- ⁹ National Commission on Correctional Health Care. (2016). "Position statement: solitary confinement." Retrieved from https://www.ncchc. org/filebin/Positions/Solitary-Confinement-Isolation.pdf. The National Partnership for Juvenile Services. (2014). "Position statement on the use of isolation." Retrieved from http://npjs. org/wp-content/uploads/2012/12/NPJS-Use-of-Isolation.pdf.
- ¹⁰ American Correctional Association. (2017). "Use of separation with juveniles – proposed expected practices and definitions." Retrieved from http://www.stopsolitaryforkids.org/wp-content/uploads/2019/02/Use-of-Separation-with-Juveniles Portal-draft-2017.pdf.
- ¹¹ "Reducing the use of isolation, supra," note 3: 6.
- ¹² "Id.": 5.
- ¹³ Jacobson, Anders & Soler, Mark. (2018). "More states need to limit solitary confinement, which doesn't work." Juvenile Justice Information Exchange. Retrieved from https://jjie.org/2018/09/12/more-states-need-to-limit-solitary-confinement-which-doesnt-work/.
- ¹⁴ Reed, Harvey. J. (2015). "Ohio implements path to safer facilities." Corrections Today, 77(5): 26-31, 30. Alexandria, Virginia: American Correctional Association.
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