

SB0827_MHAMD_Fav.pdf

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Position: FAV

**Senate Bill 827 – Juvenile Law – Confinement and
Restrictive Housing - Limitations**

Senate Judicial Proceedings Committee

February 19, 2025

Position: SUPPORT

Mental Health Association of Maryland (MHAMD) is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health and substance use disorders (collectively referred to as behavioral health). We appreciate the opportunity to provide this testimony in support of SB 827.

SB 827 severely curtails the use of restrictive housing (solitary confinement) for minors and limits the allowable time in restrictive housing to no longer than six hours. The bill requires that a mental health care provider must conduct a mental health screening of a minor placed in solitary confinement within one hour, and the facility must provide the minor with any needed mental health services. In addition, SB 827 prohibits minors from being held in custody in an adult correctional facility in all cases.

Mental health conditions are prevalent among juvenile offenders. Some estimates suggest that the numbers are as high as 30% with depression or dysthymia, 30% with attention-deficit hyperactivity disorder, 7% with bipolar disorder, and 32% with posttraumatic stress disorder. On top of these mental health conditions, many juvenile offenders also have a conduct disorder or a substance use disorder.¹

Placing youth in restrictive housing causes mental health distress and exacerbates existing mental health conditions. Studies have shown that placing adults in isolation for an extended time causes serious psychological damage, and the negative impact on juveniles is more profound. Solitary confinement can cause both neurological damage as well as psychological damage and can lead to suicide.² Accordingly, President Obama banned the use of solitary confinement for juveniles in the federal prison system.

SB 827 aligns Maryland practices with the resolution adopted by the American Psychological Association regarding the use of restrictive housing for youth. The APA declared that the

¹ Lee Underwood et.al. Mental Illness and Juvenile Offenders. International Journal of Environmental Research and Public Health (2018).

² Minors in custody - Solitary Confinement. Child Crime Prevention and Safety Center.
<https://childsafety.losangelescriminallawyer.pro/minors-in-custody-solitary-confinement.html>

solitary confinement of youth be prohibited except in extremely rare instances, and then only for a short period of time.³

Confining children with adults also can bring about serious psychological problems.⁴ Youth are at a greatly increased risk of sexual assault, trauma, solitary confinement, and suicide. In addition, studies have shown that incarcerating youth in adult facilities is linked to early death in young adulthood. Children who were housed with adults were found to have a 30% increased risk of mortality between the ages 18 -39.⁵

In 2019, Maryland had 76 youth confined to jails, a higher number than 20 of the 33 states that reported their data, including higher than Alabama, Arkansas, Illinois, Missouri, Ohio, and Virginia.⁶

Humane and rehabilitative treatment of juvenile offenders that doesn't cause debilitating damage require both an end to solitary confinement and a prohibition on youth being incarcerated in adult facilities. For these reasons, MHAMD supports SB 827 and urges a favorable report.

³ APA RESOLUTION. Opposing Involuntary Individual Isolation of Youth in Juvenile Justice Settings (February 2024). <https://www.apa.org/about/policy/isolation-youth.pdf>

⁴ Daniel Semenza et. al. Youth Incarceration in Adult Facilities and Mental Health in Early Adulthood. Journal of Adolescent Health (May 2024). [https://www.jahonline.org/article/S1054-139X\(24\)00044-2/fulltext#:~:text=Respondents%20incarcerated%20in%20an%20adult,exhibited%20more%20mental%20health%20symptoms](https://www.jahonline.org/article/S1054-139X(24)00044-2/fulltext#:~:text=Respondents%20incarcerated%20in%20an%20adult,exhibited%20more%20mental%20health%20symptoms).

⁵ Elizabeth Barnert et.al. Confining Children in Adult Prisons May Kill Them: New Evidence to Inform Policy Action. Journal of American Medical Association Network Open (July 2023). <https://pmc.ncbi.nlm.nih.gov/articles/PMC10833501/>

⁶ Youth in Adult Courts, Jails, and Prisons. The Sentencing Project. <https://www.sentencingproject.org/app/uploads/2022/09/Youth-in-Adult-Courts-Jails-and-Prisons.pdf>

Testimony on SB 827 FAV Cichowski.pdf

Uploaded by: Carol Cichowski

Position: FAV

Senate Bill 827

Juvenile Law – Confinement and Restrictive Housing – Limitations

Judicial Proceedings Committee – February 19, 2025

FAVORABLE

Thank you for the opportunity to submit written testimony on Senate Bill 827.

I am a long-time resident of Montgomery County. I am a retired Federal employee, and I have been serving as a citizen member of the Montgomery County Commission on Juvenile Justice since 2021. The views expressed here are my own.

I strongly support Senate Bill 827. This bill recognizes that children who commit crimes are different from adults and are put at even greater risk of mental and physical harm than adults when they are placed involuntarily in solitary confinement in adult facilities after being charged as adults or in adult prisons after being convicted in adult courts.

This is a significant issue in Maryland because it has had the distinction of charging more children as adults per capita than any state other than Alabama because of its out-of-date and harmful legislation that provides for automatic charging of youth as adults. Under current Maryland law, minors who commit any of the thirty-three specified offenses are charged as adults and face the prospect of incarceration in an adult prison if they are convicted and sentenced by an adult court. Proponents of juvenile justice reform have long sought to end this human rights abuse in Maryland and, to date, have had no success.

However, even if the General Assembly were to enact legislation to end automatic charging altogether, there would be children who end up in adult court in those cases in which a State's Attorney successfully persuades the juvenile court to transfer the case to adult court. Moreover, if legislation were enacted to eliminate some, but not all, of the 33 offenses that trigger automatic charging, children who commit those offenses would not only be at risk of being incarcerated in adult prison if convicted in adult court but would also be at risk of being held in an adult facility pending trial, as is currently the case.

Children do not belong in adult jails or prisons. There is compelling evidence that placing any adolescents in adult correctional facilities is detrimental to their health and developmental well-being. Not only are adult facilities ill-equipped to manage the mental health, physical health, educational, vocational, and developmental needs of youth, there is a risk of physical and sexual assaults when young people are confined with adults in adult facilities.¹

Importantly, SB 827 recognizes both the importance of keeping children out of adult facilities and not relying on the use of solitary confinement, referred to as "restrictive housing" in

¹ Position Statement: Health Services to Adolescents in Adult Correctional Facilities, National Commission on Correctional Health Care (2024), <https://www.ncchc.org/wp-content/uploads/Health-Services-to-Adolescents-in-Adult-Correctional-Facilities-rev-2024.pdf>

Maryland, to achieve the separation of youth from adults by sight and sound when they are housed in adult facilities. SB 827 attempts to limit the use of solitary confinement and reduce the harm of solitary confinement by placing restrictions on the number of hours children can be isolated and by including other requirements and limitations relating to its use.

Placing anyone in solitary confinement is an inhumane practice that causes serious damage to mental and physical health. Under the United Nation's Minimum Standards for the Treatment of Prisoners (also known as "the Mandela Rules"), isolation for more than 15 days is considered torture, permanently damaging the mind, body, and soul of those who experience it.

Solitary confinement of young people, at a critical phase of neurological, physiological, and social development, puts them at serious risk of long-lasting psychological, developmental, cognitive, and behavioral impairments. Young people are especially vulnerable to the harm of isolation because their brains continue to develop until at least their mid-twenties. Solitary confinement can cause permanent psychological effects such as major depression and disconnecting from reality. The risk of harm is significantly magnified for young people with disabilities or a history of trauma or abuse. Placement in solitary confinement also increases the risk of suicide.² Solitary confinement is clearly one of the known, inherent dangers that youth face in adult facilities that are not otherwise equipped to provide them with the programs, services, and interactions that are needed to help them become successful adults.

It is important to protect those individuals who enter adult prisons as youth from the harmful and profound effects of extended solitary confinement on their chances to become successful as adults. It is also important to protect those young people who are detained temporarily from traumatizing experiences like solitary confinement that can impede their rehabilitation.

SB 827 takes a meaningful step toward protecting the human rights of some of Maryland's most vulnerable young people.

For these reasons, I recommend a Favorable report for SB 827.

Carol Cichowski

Bethesda, Maryland

² See The Lancet 391:20131 (2018 April 28) [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)30943-7/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)30943-7/fulltext); "Alone & Afraid: Children Held in Solitary Confinement and Isolation in Juvenile Detention and Correctional Facilities," ACLU (June 2014), https://assets.aclu.org/live/uploads/publications/alone_and_afraid_complete_final.pdf

SB0827 Juvenile Law - Confinement and Restrictive

Uploaded by: Cecilia Plante

Position: FAV



TESTIMONY FOR SB0827

Juvenile Law - Confinement and Restrictive Housing - Limitations

Bill Sponsor: Senator Love

Committee: Judicial Proceedings

Organization Submitting: Maryland Legislative Coalition

Person Submitting: Aileen Alex, co-chair

Position: FAVORABLE

I am submitting this testimony in favor of SB0827 on behalf of the Maryland Legislative Coalition. The Maryland Legislative Coalition is an association of activists - individuals and grassroots groups in every district in the state. We are unpaid citizen lobbyists, and our Coalition supports well over 30,000 members.

Our members object to the inhumane and potentially harmful conditions associated with the restrictive housing of minors, often referred to as solitary confinement. Prolonged periods in restrictive housing can have severe psychological and physical effects on minors, particularly those who are already vulnerable. This bill aims to mitigate these negative impacts by limiting the circumstances under which minors can be placed in restrictive housing and ensuring that the conditions are as humane as possible.

SB0827 prohibits the placement of a minor in restrictive housing for more than six hours a day yet allows a correctional facility to place a minor in restrictive housing at the minor's request. The bill also establishes certain requirements for detaining, confining, or transporting a child, and mandates that the Department of Juvenile Services notify a sentencing court within a certain period of time when a child reaches 18 years of age. The sentencing court is then required to hold a hearing and enter an order transferring the child to other appropriate facilities.

By limiting the duration and conditions of restrictive housing for minors, the bill promotes the humane treatment of incarcerated youth, which can lead to better rehabilitation outcomes and reduce recidivism rates. Protecting minors from the harsh conditions of restrictive housing ensures their safety and well-being, fostering a more just and equitable juvenile justice system. Moreover, this bill aligns with Maryland's commitment to upholding human rights and dignity within its correctional facilities. Implementing SB0827 will likely have positive ripple effects on the community, as rehabilitated youth are more likely to reintegrate successfully into society, becoming productive members of their communities. This, in turn, can lead to safer neighborhoods and a reduction in the overall crime rate.

The Maryland Legislative Coalition strongly supports SB0827 and urges a favorable report from committee. Our members want a more humane and just correctional system that respects the rights and dignity of all individuals.

HRFK TESTIMONY IN SUPPORT OF SB 827.pdf

Uploaded by: Emily Virgin

Position: FAV



TESTIMONY IN SUPPORT OF SB 827 BEFORE THE MARYLAND SENATE JUDICIAL PROCEEDINGS COMMITTEE

February 17, 2025

Dear Chairman Smith and Members of the Maryland Senate Judicial Proceedings Committee:

Human Rights for Kids respectfully requests a favorable report on SB 827. We are grateful to Senator Love for her leadership in introducing this bill and we appreciate the opportunity to express our support.

Human Rights for Kids is a Washington, D.C.-based non-profit organization dedicated to the promotion and protection of the human rights of children. We work to inform the way the nation understands Adverse Childhood Experiences (ACEs) from a human rights perspective, to better educate the public and policymakers' understanding of the relationship between early childhood trauma and negative life outcomes. We use an integrated, multi-faceted approach which consists of research and public education, coalition-building and grassroots mobilization, and policy advocacy and strategic litigation to advance critical human rights on behalf of children in the United States.

We support SB 827 because it will continue the important work to restrict the use of solitary confinement on children that this body began in 2019 with the passage of HB 1001.¹ In that legislation, the Department of Juvenile Services and the Department of Public Safety and

¹ <https://mgaleg.maryland.gov/mgawebbsite/Legislation/Details/hb1001/?ys=2019rs>

Correctional Services became prohibited from placing a minor in “restrictive housing” unless there was clear and convincing evidence that certain qualifying conditions exist.

While HB 1001 was a positive step in protecting the human rights of children who are detained or incarcerated, SB 827 strengthens those protections in vital ways by placing a specific time limit on any use of solitary confinement, providing a clear path back to the general population for any child who is placed in solitary confinement, guaranteeing mental and physical health evaluations, and better defining when this practice can be used on a child.

SB 827 also recognizes the fact that children should never be held in adult facilities regardless of the current protections that separate them from adults in such facilities. Those protections, while well-intentioned, mean that children are placed in what amounts to solitary confinement if they are held in adult facilities. This legislation will fully protect children against solitary confinement by prohibiting the placement of children in adult facilities. Instead, children would be placed in age-appropriate settings through the Department of Juvenile Services.

Summary of SB 827

SB 827 would place important restrictions on the use of solitary confinement (referred to in Maryland’s statutes as “restrictive housing”) to ensure that a child is held in such placement for the least amount of time possible and only as a temporary response to emergent issues. The bill also prohibits the placement of children in adult facilities.

The bill does the following:

- Prohibits the use of solitary confinement for punishment, discipline, retaliation, administrative convenience, or as a response to staffing shortages.
- Specifies that a minor may only be placed in restrictive housing as a **temporary** measure and places a strict 6-hour time limit on its use.
- Places greater restrictions on when a minor may be placed in restrictive housing:
 - There must be no reasonable means to eliminate the risk with another measure.
 - It must be used only to the extent necessary to eliminate the risk.
 - It must take place under the least restrictive conditions practicable.
 - The minor must be promptly notified of the rationale for their placement in restrictive housing.
 - A plan must be developed that allows the minor to leave restrictive housing as soon as possible.
- A health care or mental health care provider must conduct a mental health screening within one hour of the minor’s placement in restrictive housing.
- A minor may still be placed in restrictive housing at their request.
- Prohibits the placement of children in adult facilities.

Prior Legislative Efforts in Maryland

As background, the protections against solitary confinement contained in this legislation were previously filed in 2024 through HB 855.² That bill as filed, however, still allowed children to be placed in adult facilities. Through the hearing on HB 855 in the House Judiciary Committee, it became clear that adult jails would not be able to comply with the provisions of HB 855 that prohibited solitary confinement because of federal “sight and sound” separation requirements.³ This requirement states that if a child is held in an adult facility, they must be “sight and sound” separated from adults.

This requirement, intended to protect children from being harmed by adults, means that children are placed in what amounts to solitary confinement if they are held in an adult facility. County jails and correctional officers testified in 2024 that they would prefer to not have children in their facilities because of the difficulties of housing them and separating them from adults. However, they felt they could not comply with a prohibition against solitary confinement because of the federal “sight and sound separation” requirement.

At that point, the solution became clear, and all stakeholders agreed: children should not be held in adult facilities because such placements pose risks to a child’s physical and mental health.

Solitary Confinement on Children is a Human Rights Violation

International human rights standards are clear: the use of solitary confinement on children is a violation of human rights. The United Nations Convention on the Rights of the Child (CRC) requires that children be protected from torture as well as cruel and unusual punishment,⁴ and the U.N. Committee on the Rights of the Child has deemed solitary confinement a violation of Article 37 of the CRC.⁵

Subsequent U.N. publications have further noted the harms of solitary confinement on children and reiterated the strict ban on its use.⁶ The Committee against Torture and the Special Rapporteur on Torture have also classified the use of solitary confinement on children as cruel, inhumane, and degrading treatment.

² <https://mgaleg.maryland.gov/mgaweb/Legislation/Details/hb0855/?ys=2024rs>

³ https://www.act4jj.org/sites/default/files/resource-files/Jail%20Removal%20and%20Sight%20and%20Sound%20Separation%20Fact%20Sheet_0.pdf

⁴ U.N. Convention on the Rights of the Child, opened for signature Nov. 20, 1989, 1577 U.N.T.S. 3 (entered into force Sept. 2, 1990) (“CRC”).

⁵ 3 U.N. Comm. on the Rights of the Child, 44th Sess., General Comment No. 10, Children’s rights in juvenile justice, U.N. Doc. CRC/C/GC/10 (2007).

⁶ See U.N. Guidelines for the Prevention of Juvenile Delinquency, G.A. Res. 45/112, Annex, 45 U.N. GAOR Supp. (No. 49A), U.N. Doc. A/45/49, at 201 (Dec. 14, 1990) (“The Riyadh Guidelines”) and U.N. Rules for the Protection of Juveniles Deprived of their Liberty, G.A. Res. 45/113, Annex, 45 U.N. GAOR Supp. (No. 49A), U.N. Doc. A/45/49, ¶ 67 (Dec. 14, 1990) (“The Beijing Rules”).

Effects of Solitary Confinement

Children placed in solitary confinement can experience profound negative physical, emotional and psychological effects, including but not limited to psychosis, depression, increased aggression and increased risk of suicide. The use of solitary confinement on children can also lead to their failure to develop positive social skills, limited their access to developmental and educational resources, and can cause stunted physical growth due to inadequate diet and exercise.⁷ For children who have experienced trauma and abuse prior to their detention, the harmful effects can be even more profound.

Because of its well-documented negative effects of the use of solitary confinement on children, in 2012, the American Academy of Child and Adolescent Psychiatry (AACAP) issued a policy statement stating its concurrence with the United Nations standards and opposing the use of solitary confinement on minors.⁸

Bipartisan Efforts at the Federal Level

In 2016, President Barack Obama instituted a ban on solitary confinement for juvenile offenders in the federal prison system, citing its overuse and “potential for devastating psychological consequences.”⁹

Congress took action to prohibit the use of solitary confinement on children in the federal system through the passage of the First Step Act in 2018 (S. 756) which was subsequently signed into law by President Trump. Senator Love’s SB 827 is modeled after the language in this bipartisan legislation.

Children in Adult Jails and Prisons

In the late 1980’s and early 1990’s states began passing laws to make it easier to transfer children into the adult criminal justice system which exposed them to the same treatment as adults, including being housed in the same facilities. Between 1993 and 1997 the number of children housed in adult jails more than doubled. On any given night in America there are more than 2,200 children in our jails and prisons. Approximately 87% of these youth are in local jails, while the other 13% are in state prisons.

Policymakers were driven by the now-debunked “Super-Predator Theory” which stated that a new generation of child predators were coming of age who were more violent and less remorseful than ever before. These children, the authors said, were “Godless, jobless, and fatherless” monsters and urged states to respond by treating them as adults and thereby exposing

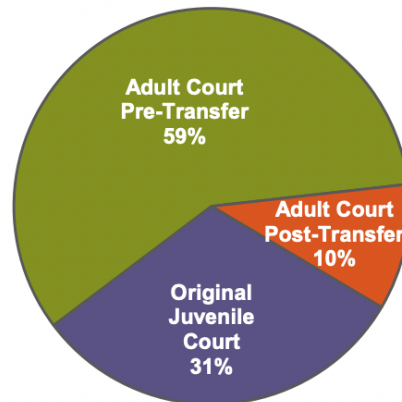
⁷ James, K., & Vanko, E. (2021, April). The Impacts of Solitary Confinement. Brooklyn, New York: Vera Institute of Justice, 1-3.

⁸ https://www.aacap.org/aacap/Policy_Statements/2012/Solitary_Confinement_of_Juvenile_Offenders.aspx

⁹ Eilperin, Juliet (2016, Jan. 26). Obama bans solitary confinement for juveniles in federal prisons. *The Washington Post*. https://www.washingtonpost.com/politics/obama-bans-solitary-confinement-for-juveniles-in-federal-prisons/2016/01/25/056e14b2-c3a2-11e5-9693-933a4d31bcc8_story.html

them to these inhumane, degrading, and cruel conditions. The severe harms that children face when placed in adult jails and prisons have been well documented. They include physical and sexual violence, solitary confinement, lack of mental health treatment, lack of educational programming, and isolation from family. These forms of child abuse frequently follow children as they age and become adults in prison.

Maryland Juvenile Detention Center Population
(May 2023 – April 2024)
Avg. Daily Pop = 257



Over the last year, an average of 7 in 10 youth in detention were either being held on adult cases or had been transferred down to juvenile court

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The population who would be most affected by this change are children charged as adults, who would be held in juvenile facilities. Many of these children, but not all of them, are already held in juvenile facilities. From May 2023 to April 2024, approximately 59% of the children held in Department of Juvenile Services facilities were children who were tried as adults and awaiting the outcome of their transfer hearing. DJS is already safely housing children who are charged in adult court. On any given day, approximately 35-40 children are left in adult jails across the state. Under SB 827, these children would be housed alongside the other children tried as adults who are already placed in DJS facilities.

Adverse Childhood Experiences

In the vast majority of cases in Maryland, children who come into conflict with the law are contending with early childhood trauma and unmitigated adverse childhood experiences (ACEs), including physical and emotional neglect; physical, emotional, and sexual abuse; parental separation, domestic violence, household substance abuse, mental illness, and incarceration. Our research has shown that over 60% of children tried as adults experienced both physical and

¹⁰ Chart from Nate Balis, presentation at Attorney General's Maryland Equitable Justice Coalition. Figures in chart: juvenile detention data from Maryland Department of Juvenile Services Research and Evaluation Unit and the DJS Data Resource Guide.

emotional abuse prior to their offense. Another 40% experienced sexual abuse. Many children tried as adults came from homes where witnessing domestic violence (50%), substance abuse (82%), and mental illness (51%) were prevalent. This type of trauma often leads to early-onset PTSD and subsequently impacts a child's brain development, particularly the prefrontal cortex. This means that kids traumatized by violence in their homes and communities have impaired brain development that influences their behavior and decision making.

Adult jails and prisons neither have appropriate trauma-informed treatment for children, nor do they provide ideal conditions for meaningful therapy.

Lack of Educational Programming

The educational programs that adult jails and prisons provide – mostly geared towards GEDs or professional training, are not designed for a child seeking a high school diploma, so much so that their time in class may not even be credited as progress. There are no individualized programs or accommodations for special needs, and if the prison imposes a period of isolation on or takes disciplinary action against a child, then what little educational programming that is provided may grind to a halt. Children are often unable to participate in educational programming within jails or prisons due to 'sight and sound' restrictions that are meant to protect them from physical or sexual violence at the hands of older adults in prison. Children who were given lengthy prison terms, like life or de facto life sentences, are often prohibited from participating in programming.

Isolation from Family

By removing children from naturally occurring supports, such as connections to family, school and community mentors, children are denied pathways to build their resiliency and address the trauma at the root of their behavior. Furthermore, such removal inhibits the development of important familial connections, hindering development and negatively impacting children's mental health.

Mental Health Risks

When children are held in adult jails and prisons, their mental health suffers due to isolation and increased risk to their physical wellbeing. Children who are held in adult facilities are 36 times more likely to commit suicide than children who are held in juvenile detention facilities.¹¹

There are tragic stories across the country of children held in adult facilities who face life long detrimental effects. Perhaps the most high-profile is that of Kalief Browder, a 16-year-old New Yorker who was held at Rikers Island for three years, spending two of those years in solitary

¹¹ Arya, Neelum. Getting to Zero: A 50-State Study of Strategies to Remove Youth from Adult Jails. Los Angeles, CA: UCLA School of Law, 2018.
https://drive.google.com/file/d/1LLSF8uBlrcqDaFW3ZKo_k3xpk_DTmItV/view

confinement.¹² After he was released from incarceration, Mr. Browder died by suicide, never recovering from the effects of solitary confinement.

In January of 2024, 16-year-old Kayelyn Gwen Drake died by suicide in the Harrison County Adult Detention Center in Mississippi, just one day after she was booked into the facility which also held adults.¹³ After her death, Kayelyn's family's attorney stated "She was made to believe that her life was over . . . That she was unable to get out and scared half to death. Unable to talk to her family and her mother . . . and it was more than she could bear."¹⁴

Racial Disparities

National estimates show that 88% of youth held in adult jails are youth of color.¹⁵ In Maryland, because 87% of youth who are automatically tried as adults are Black, we can assume that the national estimate is accurate for state facilities since the youth held in adult facilities are those who are tried in adult court.

Fiscal Impact of Noncompliance with Federal Law

While the negative effects of placing a child in an adult jail cannot be overstated, committee members should consider the fiscal impact of this legislation as well. According to Maryland's State Advisory Group, the body charged with implementing the federal Juvenile Justice Delinquency Prevention Act (JJDP), the state stands to lose 20% of its federal grant allocation because of the state's current noncompliance with the JJDP. This is due to the number of children who are currently held in adult jails and lockups across the state. By prohibiting the placement of children in adult facilities with the passage of SB 827, Maryland's federal funding will be preserved.

Conclusion

Because the use of solitary confinement on children is strictly prohibited as a form of cruel and inhumane treatment under international human rights standards, the practice should be limited as a temporary response and should never be used for punitive reasons. Maryland should strengthen its current statute by adopting SB 827 which would address facility safety concerns by allowing for a "cooling off" period that can be used in extreme cases, but only for as long as reasonably necessary for the child to be reintegrated with the rest of the children in the facility.

Submitted by: Emily Virgin, Director of Advocacy & Government Relations,
evirgin@humanrightsforkids.org, 405-306-4294.

¹² <https://www.nytimes.com/2015/06/09/nyregion/kalief-browder-held-at-rikers-island-for-3-years-without-trial-commits-suicide.html>

¹³ <https://www.wxxv25.com/familylawsuit/>

¹⁴ Id.

¹⁵ Arya, Neelum. Getting to Zero: A 50-State Study of Strategies to Remove Youth from Adult Jails. Los Angeles, CA: UCLA School of Law, 2018.

SB 827 Restrictive Housing Limitations CCJR FAV.pd

Uploaded by: Heather Warnken

Position: FAV



TESTIMONY IN SUPPORT OF SENATE BILL 827

TO: Members of the Senate Judicial Proceedings Committee

FROM: Center for Criminal Justice Reform, University of Baltimore School of Law

DATE: February 17, 2025

The University of Baltimore School of Law’s Center for Criminal Justice Reform (“Center”) is dedicated to supporting community-driven efforts to improve public safety and address the harm and inequities caused by the criminal legal system. The Center strongly supports Senate Bill 827.

Senate Bill 827 prohibits the use of solitary confinement for children for the purposes of discipline, punishment, administrative convenience, retaliation, or as a response to staffing shortages. Moreover, when the use of solitary confinement is found to be necessary because there is a substantial risk of physical harm to the child, other incarcerated individuals, or staff, the bill ensures that the child only be placed in restrictive housing as a temporary measure; requires that a health care or mental health care provider conduct a mental health screening within one hour of the child’s placement; and absolutely prohibits the placement of any child in an adult facility.

Senate Bill 827 builds on important progress enacted by the Maryland General Assembly in 2019. Under 2019’s HB 1001, the Maryland General Assembly prohibited the Department of Public Safety and Correctional Services and the Department of Juvenile Services (from placing a child in “restrictive housing” unless there is clear and convincing evidence that certain qualifying conditions exist. Senate Bill 827 strengthens those protections and provides a clear path back to the general population for any child who is placed in solitary. By guaranteeing mental and physical health evaluations, keeping children out of adult facilities, and clearly defining when solitary confinement can and cannot be used on a child, Senate Bill 827 will bolster the Department of Juvenile Service’s mission to transform young people’s lives and create safer communities.

Solitary confinement is uniquely harmful to children and its use has been criticized widely, including by the American Academy of Pediatrics,¹ the National Commission on

¹ See <https://www.ncchc.org/american-academy-of-pediatrics-endorses-ncchc-position-statement-on-restricted-housing-for-youths/>

Correctional Health Care,² and the American Academy of Child and Adolescent Psychiatry.³ The negative physical, emotional and psychological effects of solitary confinement are significant and often severely detrimental to human beings of all ages, but are even more amplified in minors and can cause psychosis, depression, increased risk of suicide and increased aggression to others. Moreover, solitary confinement profoundly limits children's rehabilitation by weakening the development of positive social skills and limiting youth access to rehabilitative services and resources. This not only harms the child-- it undermines public safety for all Marylanders.⁴

In 2012, a task force appointed by the U.S. attorney general concluded:

Nowhere is the damaging impact of incarceration on vulnerable children more obvious than when it involves solitary confinement.... Juveniles experience symptoms of paranoia, anxiety, and depression even after very short periods of isolation. Confined youth who spend extended periods isolated are among the most likely to attempt or actually commit suicide. One national study found that among the suicides in juvenile facilities, half of the victims were in isolation at the time they took their own lives, and 62 percent of victims had a history of solitary confinement.⁵

Because Senate Bill 827 will protect children, promote rehabilitation, and enhance public safety for all Marylanders, we urge a favorable report.

² See <https://www.ncchc.org/wp-content/uploads/Solitary-onfinement-Isolation.pdf>

³ See <https://www.ncchc.org/american-academy-of-pediatrics-endorses-ncchc-position-statement-on-restricted-housing-for-youths/>

⁴ See <https://www.ncchc.org/wp-content/uploads/Solitary-Confinement-Isolation.pdf> (“[T]he very nature of [solitary confinement] is antithetical to the goals of rehabilitation and social integration.”)

⁵ See Report of the Attorney General's National Task Force on Children Exposed to Violence, Department of Justice (December 2012) available at <https://www.justice.gov/defendingchildhood/cev-rpt-full.pdf>.

2025 Letter of Support for Restrictive Housing SB0

Uploaded by: Judith Lichtenberg

Position: FAV



MARYLAND ALLIANCE FOR JUSTICE REFORM

Citizens working to reform criminal justice in Maryland



www.MA4JR.org

Senate Judicial Proceedings Committee

February 19, 2025

Testimony in support of SB 827—Juvenile Law – Confinement and Restrictive Housing – Limitations

We are testifying on behalf of the [Maryland Alliance for Justice Reform](http://www.MA4JR.org) (MAJR), where we serve as executive committee members and co-chairs of the Behind the Walls Workgroup.

This bill is a crucial step toward protecting vulnerable youth by restricting the use of involuntary restrictive housing to cases where it is necessary to eliminate an identifiable risk.

Restrictive housing, often referred to as solitary confinement, has severe and lasting consequences for juveniles. Adolescents are in a critical stage of brain development, and prolonged isolation exacerbates mental health conditions, increases anxiety, and significantly raises the risk of self-harm and suicide. National data shows that over half of juvenile suicides in custody occur while youth are in isolation.

Beyond the psychological toll, restrictive housing also hinders rehabilitation. Youth in solitary confinement have limited access to education, counseling, and other programming essential for their growth and successful reintegration. The practice disproportionately affects youth with disabilities, trauma histories, and mental health challenges, further deepening disparities in the juvenile justice system.

By prohibiting the placement of a minor in restrictive housing for more than six hours, this legislation acknowledges the well-documented psychological and developmental harm that prolonged isolation can cause to children. Research has consistently shown that extended periods of solitary confinement can exacerbate mental health issues, hinder rehabilitation, and increase the likelihood of adverse long-term outcomes.

The bill appropriately allows minors to voluntarily request restrictive housing when they feel unsafe, while ensuring that correctional facilities meet specific standards when detaining, confining, or transporting children. These provisions reflect a balanced and humane approach that prioritizes both the safety and the mental health of incarcerated youth.

We urge the committee to support this critical bill with these recommended modifications. Thank you for your time and consideration.

Sincerely,

Donna Rojas
District 6

Judith Lichtenberg
District 22

2025 - SB 0827 - Juvenile Law - Confinement and Re

Uploaded by: Ken Phelps Jr

Position: FAV



THE EPISCOPAL DIOCESE OF MARYLAND

TESTIMONY IN SUPPORT OF SB 0827:

Juvenile Law - Confinement and Restrictive Housing – Limitations

****FAVORABLE****

TO: Sen. William C. Smith, Jr., Chair, Sen. Jeff Waldstreicher, Vice Chair and the members of the Senate Judicial Proceedings Committee

FROM: Rev. Kenneth O. Phelps, Jr., Co-Chair, Maryland Episcopal Public Policy Network, Diocese of Maryland

DATE: February 19, 2025

The Episcopal Church, at its 78th Convention in 2015, passed sweeping resolutions aimed at ending mass incarceration practices and mitigating solutions for the damages inflicted upon certain communities by both arrest and sentencing policies and practices, and called for sweeping reforms in the practice of restrictive housing.

Numerous studies show that restrictive housing hurts prisoners, families and communities. First and foremost, prisoners suffer. Prisoners in restrictive housing have suffered physical and psychological harms, such as psychosis, trauma, severe depression, serious self-injury, or suicide.

Their families suffer. When a prisoner is in restrictive housing, s/he has limited visits and calls from family—this not only punishes families it breaks down the family ties that are crucial to re-entry.

And their communities suffer. Many prisoners are released directly from restrictive housing into the community—this is not safe. During restrictive housing, prisoners often have limited opportunity to seek support from faith leaders and other sources of support, which may be instrumental in supporting the inmate during confinement, but also for safe re-entry upon release.

Why would we submit juveniles to this practice?

The Diocese of Maryland requests a favorable report.

HB 827 RH for Juveniles testimony.pdf

Uploaded by: Luciene Parsley

Position: FAV

House Judiciary Committee
HB 827: Juvenile Law – Restrictive Housing - Limitation

February 19, 2025

POSITION: SUPPORT

Disability Rights Maryland (DRM) is Maryland's state-designated Protection and Advocacy organization, empowered under state and federal law to protect individuals with disabilities from abuse, neglect and civil rights violations. Over the past decade, DRM has advocated for improved conditions for individuals with serious mental illness and other disabilities in state correctional facilities, particularly those housed on segregation (restrictive housing) units. DRM has received many complaints of youth with disabilities being maintained in restrictive housing in detention centers, whether as a means of addressing behavior problems, keeping the youth safe, the need to manage apparent serious mental illness or developmental disabilities, or at the request of the youth who is concerned about violence and victimization if maintained in general population.

DRM agrees with the positions adopted by the National Commission on Correctional Health Care (NCCHC) and the American Academy of Child and Adolescent Psychiatry, that the practice of restrictive housing should not be used on juveniles in corrections. Restrictive housing should never be used as a disciplinary or punitive measure under any circumstances, as a response to minor infractions, because of staffing shortages, for administrative convenience, or for retaliation. DRM supports HB 827 as a means of addressing ongoing and widespread use of restrictive housing for youth in Maryland's detention centers.

Studies have shown that confining an individual in a cell for 22 hours or more per day is a harmful practice that can cause depression, trauma, paranoia, anxiety, suicidal ideation, and exacerbate existing mental illness. DRM's investigations in state correctional facilities have revealed that individuals with serious mental illness are placed in restrictive housing at much higher rates and for much longer than persons without serious mental illness. In FY 2022, DPSCS reported that 38.5% of incarcerated individuals with serious mental illness were placed in restrictive housing at some point during the year.¹ Some individuals were placed in restrictive housing multiple times. DRM's experience and complaints received indicate that restrictive housing is similarly widespread among youth with disabilities in detention centers.

In DRM's experience, very little, if any, mental health services are provided to individuals in restrictive housing units to mitigate its harmful effects. At least for individuals in state prisons, health care records indicate that some individuals may not receive any structured out of cell services or programming for months at a time. Mental health treatment in segregation is typically limited to psychiatric medication or occasional work

¹ DPSCS FY 22 Report on Restrictive Housing, available online at https://goccp.maryland.gov/wp-content/uploads/MSAR10904_FY-22-Restrictive-Housing-Report.pdf.

sheets that must be completed alone in cell. The quality of mental health care in these units is grossly inadequate.

In addition to prohibiting the use of restrictive housing in all cases except where there are no other reasonable means to eliminate the risk of harm, it is essential that detention center staff are well-trained and have adequate resources available to use trauma-informed de-escalation techniques with youth in detention. Facilities that house juveniles should maintain clear policies and procedures around safe, trauma-informed, and developmentally sensitive behavioral management. In the event that a detention center determines there is no other reasonable means to eliminate the risk of harm to the minor or others or to the security of the facility, as soon as the youth is determined to no longer be of risk to self or others, isolation should be terminated. It is essential that notification to the youth under § 9-614.1(d)(1)(v) be developmentally and linguistically appropriate. The communication should provide information about why restrictive housing is being used, what specifically is involved in the restriction, and what criteria will be used to end the restrictive housing. This information should be communicated to the correctional staff as well.

The mental health screening done pursuant to § 9-614.1(d)(2) should include specific consideration of risk for suicide, trauma, and other underlying medical or mental health conditions. DRM recommends that there be consultation with appropriate medical and mental health professionals when indicated to minimize risk of harm to the youth. Any restrictive housing placement should be considered a reportable event and thoroughly documented. The individualized programming provided for in § 9-614.1(d)(4)(iv) should be made available, if needed, regardless of whether the youth is returned to the general population, moved to a mental health facility, or transferred to the medical unit at the facility. Currently that provision reads as individualized programming is only available if the youth is not returned to general population or transferred to a medical facility.

The use of restrictive housing should be tracked to include monitoring for racial disparities and disproportionate use among juvenile detainees with disabilities, including mental health and developmental disabilities. Staff training around use of restrictive housing must include steps to mitigate disproportionate use for racial minorities and youth with disabilities.

Finally, DRM fully supports the proposed changes that would prohibit children charged with crimes being detained or confined with adults or held in adult correctional facilities, as developmentally inappropriate and posing a grave risk to the child's safety and well-being.

The widespread use of restrictive housing in Maryland correctional facilities must change. Given the widespread use of restrictive housing and the well-understood negative health impacts of these practices on youth, DRM urges this committee to issue a favorable report on House Bill 827. Should you have any further questions, please contact Luciene Parsley, Litigation Director at Disability Rights Maryland, at 443-692-2494

or lucienep@disabilityrightsmd.org.

2025 LEGISLATIVE SESSION JJMU TESTIMONY IN SUPPORT

Uploaded by: Nick Moroney

Position: FAV



**STATE OF MARYLAND
OFFICE OF THE CORRECTIONAL
OMBUDSMAN
JUVENILE JUSTICE MONITORING
UNIT**

**TESTIMONY IN SUPPORT OF SB 827: JUVENILE LAW – CONFINEMENT AND
RESTRICTIVE HOUSING - LIMITATIONS**

Senate Judicial Proceedings Committee

February 19, 2025

Submitted by Nick Moroney, Juvenile Justice Monitoring Unit

The Juvenile Justice Monitoring Unit supports SB 827, which, if passed, will place limits on the use of restrictive housing on children and young people held in correctional facilities.

The JJMU was established in the wake of widespread systemic abuse issues in the Maryland juvenile justice system. Unit monitors perform unannounced visits to Maryland Department of Juvenile Services' (DJS') operated facilities to guard against abuse of incarcerated young people and ensure that they receive appropriate treatment and services.

The proposed legislation is necessary and will benefit incarcerated young people. While DJS policy limits the circumstances and length of time under which separation of a young person from the general population can be used, and mandates medical and mental health services involvement and ongoing documentation of the situation, this departmental policy is not enshrined in statute.

Young people held in non-DJS operated facilities such as local detention centers, jails and prisons are especially in need of the protections proposed in this bill. Use of restrictive housing in prisons and jails further compounds the inherent trauma of incarceration, and the deleterious effect of this practice is particularly harmful to young people. Most of the young people in the juvenile and criminal justice system have been exposed to violence, and justice-involved youth have a high prevalence of traumatic stress and mental health disorders. The utilization of restrictive housing in correctional settings has been shown to both cause acute mental health problems and exacerbate existing mental health conditions. Furthermore, rather than de-escalating heightened emotions and promoting positive behavior, isolation can increase anxiety, agitation and feelings of aggression.

In contrast, well-designed intensive and holistic interventions and programming, including those that utilize positive behavioral supports, cognitive therapy, and social skills training have been proven to reduce aggressiveness and acting-out behavior and promote positive youth development. SB 827 privileges the use of such programming support over the harmful practice of restrictive housing and will lead to improved safety and better short and longer-term outcomes for incarcerated young people.

For all the reasons just given, the JJMU strongly supports this important bill and respectfully urges the committee to give SB 827 a favorable report.

Testimony in support of SB0827 - Juvenile Law - Co

Uploaded by: Richard KAP Kaplowitz

Position: FAV

02/19/2025

Richard Kaplowitz
Frederick, MD 21703

TESTIMONY ON SB#0827 - POSITION: FAVORABLE
Juvenile Law - Confinement and Restrictive Housing – Limitations

TO: Chair Smith, Vice Chair Waldstreicher, and members of the Judicial Proceedings Committee

FROM: Richard Keith Kaplowitz

My name is Richard Kaplowitz. I am a resident of District 3, Frederick County. I am submitting this testimony in support of SB0827, Juvenile Law - Confinement and Restrictive Housing – Limitations

The purpose of this bill is to mitigate the negative impacts of restrictive housing, i.e., solitary confinement, on minors by limiting its use and ensuring humane conditions, which promotes better rehabilitation and reduces recidivism rates. By upholding human rights and dignity, the bill aligns with Maryland's commitment to fostering a better juvenile justice system and safer communities.

This bill accomplishes this goal through limiting the circumstances under which an incarcerated minor may be involuntarily placed in restrictive housing to the extent necessary to eliminate identifiable risk. It will place a time limit on the use of this form of restrictive housing by prohibiting the placement of a minor in restrictive housing for more than 6 hours. In some cases, due to fear of harm by a minor to themselves it will establish that minor's right to request restrictive housing and authorize a correctional facility to place a minor in restrictive housing at the minor's request. It sets up guardrails on the treatment of minors by establishing certain requirements for detaining, confining, or transporting a child.

It will move Maryland closer to meeting the stated purpose of the Juvenile Justice System.¹

Maryland's juvenile justice system is based on a philosophy of juvenile justice known as "balanced and restorative justice." Balanced and restorative justice requires the juvenile justice system to balance the following objectives for children who have committed delinquent acts:

1. Public safety and the protection of the community.
2. Accountability of the child to the victim and the community for offenses committed; and
3. Competency and character development to assist the child in becoming a responsible and productive member of society.

In addition, the juvenile justice system seeks to hold parents of children entering the system accountable and responsible for remedying the circumstances that led their children to enter the system.

I respectfully urge this committee to return a favorable report on SB#0827.

¹ <https://www.peoples-law.org/juvenile-system-juvenile-courts>

SB 827 Children in Restrictive Housing - Love Test

Uploaded by: Sara Love

Position: FAV



THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

SB 827 – Juvenile Law – Confinement and Restrictive Housing - Limitations

Chair Smith, Vice Chair Waldstreicher, Members of JPR:

Earlier this session we heard the Chair's bill regarding charging children as adults. On top of the issue of charging as adults is the issue of where you house these children. Federal law requires that when a child is held in an adult facility, they have to be separated by 'sight and sound' from adults. What this has translated to is children being held in restrictive housing.

Maryland defines "Restrictive Housing" as "a form of physical separation that has not been requested by the incarcerated individual in which the incarcerated individual is placed in a locked room or cell for approximately 22 hours or more out of a 24-hour period." Correctional Services, §6-914. We call it "restrictive housing" and not solitary confinement here in Maryland because people are not alone in a cell, they share the small space with another person.

The harms of restrictive housing are well known to this Committee. Those harms are compounded when we put them on children.

In 2019 this Committee placed some limits around putting children in restrictive housing. SB 827 would build on that work in a number of ways. It prohibits a minor being placed in restrictive housing solely for the purposes of discipline, punishment, administrative convenience, retaliation, or staffing shortages. A minor may only be placed in restrictive housing as a temporary measure – less than 6 hours - if there is clear and convincing evidence of an immediate and substantial risk to the minor, other incarcerated individuals, staff, or the security of the facility. SB 827 also requires that all juveniles charged as adults be held in a secure juvenile facility unless the youth is released on bail or other conditions of release.

SB 827 has several important purposes. First, it ensures that we are not harming our children by placing them in restrictive housing. Second, it would bring us into compliance with federal law. The federal standard is 14.68 per 100,000 youth: in FY23 Maryland housed 93.26 youth in adult facilities and in FY 23, that number was 112.34 per 100,000. The cost of this compliance will be upwards of \$500,000 for the next two years in lost federal funding.

For the foregoing reasons, I ask for a favorable report on SB 827.

SB0827-JPR_MACo_SUP.pdf

Uploaded by: Sarah Sample

Position: FAV



Senate Bill 827

Juvenile Law - Confinement and Restrictive Housing - Limitations

MACo Position: **SUPPORT**

To: Judicial Proceedings Committee

Date: February 19, 2025

From: Sarah Sample

The Maryland Association of Counties (MACo) **SUPPORTS** SB 827. The bill would prohibit the placement of a juvenile in an adult detention center, including all local detention centers. Additionally, the bill limits the use of restrictive housing for minors while they are in a juvenile holding facility or detention center.

This bill wisely recognizes that adult detention centers operated by both the State and counties are not suitable for the holding of minors under any circumstances. In prohibiting the holding of minors in these facilities, not only are local detention centers relieved of a substantial operational burden, but the minors in question will also be placed in an environment better suited to manage their needs and vulnerabilities.

“Sight and sound separation” mandates were signed into federal law as The Juvenile Justice Reform Act of 2018. This standard requires an incarcerated juvenile to be shielded from visual or audible exposure to any incarcerated adult within a detention center. In local facilities – typically far smaller in physical space than state facilities – such segregation options may simply be unavailable due to the simple logistics of smaller buildings. Local detention centers have gone to great lengths to comply with the mandate in the rare instances when they have juveniles in custody, but adjusting physical structures and procedures to account for these standards has been inconsistent and sometimes impossible. The resulting incomplete care and liability exposure in those instances should be avoided.

An even more worrisome challenge arises when a local detention center has only one juvenile in custody, and their means of confinement are necessarily restrictive housing. To avoid the individual being safely separated but not alone, local detention centers have regularly coordinated with one another, and devised strategies to find alternative local facilities where other minor inmates are being held. Despite this being a complicated process, local facilities have gone to these lengths to ensure the minor can feel safe but also not isolated. While an honorable task, SB 827 relieves facilities of this unintended challenge and the juvenile from the potential fear of unwarranted isolation, particularly while they experience what is likely great personal and emotional hardship.

This bill rightly considers the impractical effects sight and sound separation have on smaller facilities in each county and additionally recognizes that adult facilities are simply inappropriate for juvenile placement. For these reasons, MACo urges a **FAVORABLE** report for SB 827.

MD SB0827 Testimony.pdf

Uploaded by: T. Shekhinah Braveheart

Position: FAV



TESTIMONY BY SAMARIA TAYLOR

Intern, Justice Policy Institute

Senate Bill 827

Juvenile Law - Confinement and Restrictive Housing - Limitations

Wednesday, February 19, 2025

Thank you, Chairman Smith and other Committee members, for allowing me to submit written testimony supporting Senate Bill 827. I am Samaria Taylor with the Justice Policy Institute (JPI), a national nonprofit organization founded in 1997 dedicated to developing practical solutions to problems plaguing juvenile and criminal legal systems. With over 25 years of experience, JPI has played a crucial role in national reform initiatives.

JPI supports Senate Bill 827, which would restrict the use of solitary confinement on children. This bill aims to promote fairness and support public safety by ensuring that children are treated justly in our criminal legal system.

A large amount of the work I have done since being at JPI has revolved around juvenile justice, and it is heartbreaking to see how much work we have to do in so many states across this country in order to remotely achieve what justice should be. This bill takes the necessary steps in order to ensure our children experiencing the system in Maryland can achieve the best possible outcome, ensuring their future success down the line as they emerge from the system.

Inhumanity

To begin, I will state the simple fact of the inhumanity associated with solitary confinement. According to the Eighth Amendment, we all have the constitutional right to protect ourselves from cruel and unusual punishment. Solitary confinement arguably violates this protection for adults, but it absolutely violates this right when it comes to minors. The United Nations Convention on the Rights of the Child (CRC) has deemed solitary confinement a violation of Article 37 of the CRC,¹ placing a strict ban on its use.² Additionally, the Committee against

¹ 3 U.N. Comm. on the Rights of the Child, 44th Sess., General Comment No. 10, Children's rights in juvenile justice, U.N. Doc. CRC/C/GC/10 (2007).

² See U.N. Guidelines for the Prevention of Juvenile Delinquency, G.A. Res. 45/112, Annex, 45 U.N. GAOR Supp. (No. 49A), U.N. Doc. A/45/49, at 201 (Dec. 14, 1990) ("The Riyadh Guidelines") and U.N. Rules for the Protection

Torture and the Special Rapporteur have classified the use of solitary confinement on children as cruel, inhumane, and degrading treatment. SB 827 allows us to be steps closer to create a more humane justice system for juveniles in Maryland, that would not violate any of their constitutional guarantees.

Psychological Consequences

Research has repeatedly proven the negative effects of prolonged isolation within prisons, and the toll it takes on the mental health of the people who experience it. In the case of juveniles, the effects of prolonged isolation include depression, anxiety, and psychosis.³ Solitary confinement creates the conditions where mental crises arise, but no one is equipped to treat it.

Young people have reported to organizations like the Human Rights Watch and the American Civil Liberties Union that they were deprived of a significant level of access to: physical and mental health care services; recreation or physical exercise; education, reading, or writing materials; visits, calls, correspondence, or contact with family members and loved ones; and other rehabilitative and developmentally-appropriate programming. Young people report very similar experiences regardless of why they were placed into solitary confinement.⁴ Institutions force these children to be isolated from everything in society, made to feel alone, ultimately creating and/or strengthening mental illnesses, then release them in the conditions to harm either themselves or others.

This country does not do a great job at acknowledging and protecting children suffering from mental health issues, which only worsen as they get older, but with the passage of this bill, we will be able to confidently say that we are improving mental health outcomes for children who are incarcerated. Although merely limiting solitary confinement will not eradicate mental health crises under incarceration, it will force people to address the toll incarceration takes on the mental health of all people incarcerated, but especially children.

Federal and State Levels

In 2016, President Barack Obama instituted a ban on solitary confinement for juvenile offenders in the federal prison system, citing its overuse and its “potential for devastating psychological consequences.”⁵ Support on this bill would allow Maryland to not only join other states taking strides in juvenile justice reform, but it would join on the national level.

of Juveniles Deprived of their Liberty, G.A. Res. 45/113, Annex, 45 U.N. GAOR Supp. (No. 49A), U.N. Doc. A/45/49, ¶ 67 (Dec. 14, 1990) (“The Beijing Rules”).

³AACAP. *Solitary Confinement of Juvenile Offenders*.

https://www.aacap.org/aacap/Policy_Statements/2012/Solitary_Confinement_of_Juvenile_Offenders.aspx

⁴ Rep. *Growing Up Locked Down: Youth in Solitary Confinement in Jails and Prisons Across the United States*, 2012. <https://www.aclu.org/publications/growing-locked-down-youth-solitary-confinement-jails-and-prisons-across-united-states>.

⁵ Eilperin, Juliet (2016, Jan. 26). Obama bans solitary confinement for juveniles in federal prisons. The Washington Post. https://www.washingtonpost.com/politics/obama-bans-solitary-confinement-for-juveniles-in-federal-prisons/2016/01/25/056e14b2-c3a2-11e5-9693-933a4d31bcc8_story.html

In 2018 there was the bipartisan First Step Act, the actual legislation for the ban on solitary confinement for children. Although this act was monumental, the majority of juveniles incarcerated and in solitary confinement are housed in state prisons, not the federal ones. All states individually have to follow the steps to ask for the true abolition of solitary confinement for children. Many states have begun implementing acts and laws to achieve this. Still, we need total abolition in order to say we are truly rehabilitating juveniles and receiving recidivism in all of our communities, which truly protects public safety.

For these reasons, I encourage you to vote for Senate Bill 827.

MD Catholic Conference_SB 827_FWA.pdf

Uploaded by: Garrett O'Day

Position: FWA



February 19, 2025

SB 827

Juvenile Law - Confinement and Restrictive Housing - Limitations

Senate Judicial Proceedings Committee

Position: FAVORABLE w/ Amendments

The Maryland Catholic Conference offers this testimony in support of Senate Bill 827, with amendments. The Catholic Conference is the public policy representative of the three (arch)dioceses serving Maryland, which together encompass over one million Marylanders. Statewide, their parishes, schools, hospitals and numerous charities combine to form our state's second largest social service provider network, behind only our state government.

Senate Bill 827 would build upon two important aspects of youth justice reform: a.) prohibiting youth from being held in solitary confinement and b.) ensuring the youth charged as adults are never held in an adult jail facility. This legislation would ensure that youth are only subject to isolation using the least restrictive means, under the supervision of mental health providers, and never for reasons related to administrative convenience, retaliation, or staffing shortages. Furthermore, this legislation removes exceptions to detaining youth in adult facilities, including DJS capacity exceptions.

While this legislation represents two large steps in the right direction, we acknowledge concerns that removal of the capacity exceptions to youth being held in adult facilities may result in DJS having to open more facilities. Thus, we recommend that this legislation be passed in conjunction of the ending of automatically charging youth as adults, thus freeing up DJS capacity and ensuring the protection of system-involved youth, while (as evidence shows) reducing recidivism and increasing public safety in the long run.

The Conference supported legislation to ensure youth were held in adult facilities in 2014 and 2015, when that legislation was finally passed. The Conference then supported the current restrictions on solitary confinement for youth passed in 2019. While both were exceptional steps in the right direction, youth continue to be held in both solitary confinement and adult facilities to this day.

Pope Francis has equated punishment involving external isolation to a form of "torture". He denoted that states should not be "allowed, juridically or in fact, to subordinate respect for the dignity of the human person to any other purpose, even should it serve some sort of social utility." (*Address of Pope Francis to the Delegates of the International Association of Penal*

Law, October, 2014) In addition to violating personal dignity, solitary confinement has been shown to cause a variety of physical ailments. In the aforementioned address, Pope Francis also noted, “As shown by studies carried out by various human rights organizations, the lack of sensory stimuli, the total impossibility of communication and the lack of contact with other human beings induce mental and physical suffering such as paranoia, anxiety, depression, weight loss, and significantly increase the suicidal tendency.” Although the Conference maintains that solitary confinement should not be utilized in general, employing such measures on juvenile detainees as if they were fully-formed adult is unjust to an even greater extent.

Furthermore, Placing youth in adult jails, rather than the rehabilitative, service-based venue of juvenile detention facilities, poses several developmental issues. This is particularly true considering that some 87% of youth charged as adults either have their cases dismissed entirely or remanded to the juvenile system.

Aside from the fact that youth placed in adult jails are more likely to be repeat offenders, they are subject to violence and possibly gang initiation. Youth placed in adult jails are 36 times more likely to commit suicide. Additionally, although youth inmates only make up one percent of the jail population, they make up twenty-one percent of the total victim pool of inmate-on-inmate sexual violence. Lastly, juveniles housed in adult jail populations spend an average of four months in incarceration, resulting in significant setbacks in their education.

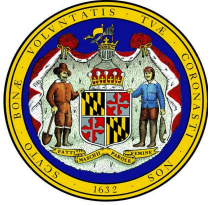
The United States Conference of Catholic Bishops has stated that “society must never respond to children who have committed crimes as though they are somehow equal to adults fully formed in conscience and fully aware of their actions. Placing children in adult jails is a sign of failure, not a solution. In many instances, such terrible behavior points to our own negligence in raising children with a respect for life, providing a nurturing and loving environment, or addressing serious mental or emotional illnesses.” (*Responsibility, Rehabilitation, and Restoration: A Catholic Perspective on Crime and Criminal Justice*, USCCB, 2000)

It is for these reasons that the Maryland Catholic Conference thus urges this committee to return a favorable report with amendments on Senate Bill 827.

SB827_HB1107 - SAG - Letter of Information - signe

Uploaded by: Jenny Krabill

Position: FWA



Juvenile Grant Planning and Review Council
Maryland's State Advisory Group

Fred Chavis
Chair

TESTIMONY IN SUPPORT WITH AMENDMENTS OF SENATE BILL 827

Background

Maryland's State Advisory Group (SAG) is responsible for carrying out the statutory requirements of the Juvenile Justice and Delinquency Prevention Act (JJDP) as they pertain to state responsibilities under [Executive Order 01.01.2022.06](#). The JJDP provides formula funding to the state to issue grants to organizations that support reform in Maryland's juvenile justice system and focus on initiatives and strategies that support the hallmarks of the Developmental Approach to Juvenile Justice Reform.

To be eligible to receive this formula grant, Maryland must maintain a SAG, prepare a three-year strategic plan for juvenile justice system reform, and comply with the Act's core requirements. Those requirements are:

- Deinstitutionalization of Status Offenders
- Sight and Sound Separation of Juveniles from adults in institutions
- Removal of juveniles from adult jails and lockups
- Addressing Racial and Ethnic Disparities

The requirement to remove juveniles from adult jails and lock-ups includes juveniles charged as adults as of 2018. Currently, the law in Maryland allows juveniles charged as adults to be held in adult facilities if the Department of Juvenile Services determines there is not sufficient capacity in a secure juvenile facility, or if the court finds that detention in a juvenile facility would pose a risk of harm to the youth or others in the facility.¹ As of January 2025, the Office of Juvenile Justice and Delinquency Prevention (OJJDP) has issued a standard to states for compliance with this core requirement.

Senate Bill 827 (cross-listed with HB 1107) would place a number of limitations on holding a juvenile in restrictive housing, establish certain requirements for detaining, confining, or transporting a child; and require that all juveniles charged as adults be held in a secure juvenile facility unless the youth is released on bail or other conditions of release.

While this legislation is a start to the changes required under federal law, it does not address [Crim. Pro. § 4-202\(k\)](#), which speaks to where juveniles should be held after bail review or a preliminary hearing in District Court. The language in subsection (k) mirrors the language in [Crim. Pro. § 4-202\(h\)](#), which SB827 would amend. The SAG would request that the same language be utilized for both sections. Additionally, the bill should add the specific factors listed in federal law that would continue to give courts the ability to make housing decisions based on each individual case. The language needed is contained in [2023 SB704](#) which was previously submitted by the Department of Juvenile Services.

¹ [Crim. Pro. § 4-202. Transfer of criminal cases to juvenile court](#)

If this law is not passed with the recommended amendments, Maryland will face multi-year non-compliance with JJDP requirements resulting in negative impacts on youth charged as adults, and a significant decrease in funding currently utilized to make system improvements. The State Advisory Group supports Senate Bill 827/ House Bill 1107 and requests a favorable report.

Health Implications for Restrictive Housing and Adult Jails or Lock-Ups

Housing youth in restrictive housing can lead to serious, unintended consequences on their physical and mental health. The risk of harm for youth within restrictive housing facilities is significantly higher than in a secure juvenile facility. Since restrictive housing cannot accommodate sight and/or sound separation between juvenile and adult offenders, this may lead to unnecessary exposure to hostile environments where juveniles may be victimized by adult inmates. Studies have shown that adult prison environments may lead to more incidents of physical assaults and sexual violence due to a typically more violent and less supportive environment that is found in adult facilities.²

Furthermore, being held in adult facilities can lead to detrimental impacts on a youth's mental and psychological health, creating irreversible changes to a juvenile's well-being. Youth are developing emotionally and cognitively until around the age of 18, which allows them to be more vulnerable to the stress and trauma of adult jail facilities.³ Additionally, housing youth in adult facilities can create feelings of fear and isolation, which can lead to behavioral changes post-release.⁴

By limiting exposure to these environments, youth can remain in developmentally appropriate environments that foster growth and development during vulnerable times. Alternatives to pre-trial detention in adult facilities may allow for youth to remain in connection with critical support systems, such as family ties and education, that may lead to better post-detention outcomes and may result in higher compliance with court dates and lower levels of reoffending⁵

Adult jails often do not have services or resources intended for youth rehabilitation or development, which can lead to higher recidivism rates. Secure juvenile facilities have resources intended for youth rehabilitation that consider their brain development and aid in rehabilitation during their sentence.⁶ Therefore, when youth engage in developmentally appropriate resources within secure juvenile facilities, the risk of recidivism lowers, improving community reintegration and public safety.⁷

Impact of Non-Compliance with the Core Protections

² Baetz, C. L., Surko, M., Moaveni, M., McNair, F., Bart, A., Workman, S., Tedeschi, F., Havens, J., Guo, F., Quinlan, C., & Horwitz, S. M. (2021). Impact of a Trauma-Informed Intervention for Youth and Staff on Rates of Violence in Juvenile Detention Settings. *Journal of Interpersonal Violence*, 36(17-18), NP9463-NP9482. <https://doi.org/10.1177/0886260519857163>

³ Stanford Medicine, Children's Health <https://www.stanfordchildrens.org/en/topic/default?id=cognitive-development-in-adolescence-90-P01594#>:

⁴ E. Jason Baron, Brian Jacob, and Joseph P. Ryan, "[Pretrial Juvenile Detention](#)," *Journal of Public Economics* 217 (January 2023): 104798.

⁵ IBID

⁶ <https://www.juvjustice.org/blog/1425>

⁷ <https://www.pbs.org/wgbh/pages/frontline/shows/juvenile/stats/kidslikeadults.html#fn6>

If a state is out of compliance with one or more of the core requirements of the JJDP, its grant award amount for the following fiscal year will be reduced by 20 percent for each requirement with which the state fails to comply under [34 U.S.C. § 11133\(c\)\(1\)\(A\)](#). To receive any allocation, the state must use 50 percent of the amount received after the reduction for noncompliance to achieve compliance, pursuant to [34 U.S.C. § 11133\(c\)\(1\)\(B\)\(i\)](#).

The Office of Juvenile Justice and Delinquency Prevention issued a letter to State Administering Agency Directors dated January 15, 2025, with the Federal Fiscal Year (FFY) 2024 compliance standards for each core requirement. Maryland will be out of compliance due to the number of youth being held in adult jails and lock-ups.

Federal Standard for Compliance:

- **14.68** violations per 100,000 youth (FFY24)

Maryland's Compliance Report:

- **93.26** per 100,000 youth (FFY23)
- **112.34** per 100,000 youth (FFY24)⁸

Therefore, Maryland's FFY 2025 grant award will be reduced by 20% and required to use 50% of the remaining funds to achieve compliance⁹.

The primary purpose of the JJDP grant program is to improve outcomes for children and youth within the juvenile justice system by increasing and strengthening community-based programs and services, expanding community-based diversion programs, and prioritizing programs focused on positive youth development. This program currently supports the funding of 4 community partners around Maryland.

The FFY 2023 JJAC grantees provide services reaching communities, including Baltimore City public schools by re-engaging students and families with their schools, helping to break the school-to-prison pipeline, providing weekly restorative circles, mentorship tutoring, workshops, and attendance check-ins to youth at risk for delinquency, and providing wraparound services to promote academic success. In Montgomery County, JJDP funding supports mediation and conflict resolution services that prevent or remedy harm, empower youth, promote accountability and successful reintegration after disciplinary actions, and develop skills to handle conflict and anger to create a safer school and community environment, reduce recidivism, expulsion rates, and disproportionate contact with law enforcement. Restorative services in Baltimore County allow youth to decide what should be done to repair the harm that occurred to them while directly processing and expressing the emotional impact of the crime to the offender. This quickly and effectively holds offenders personally accountable for their behavior in a community-based environment, rather than in a justice system setting. Anne Arundel Teen Court services allow youth who have committed low-level offenses to appear before a jury of peers to receive sentences of community service, counseling, restitution, and/or an apology to the victim to accept responsibility and make amends.

⁸ This rate is an estimate and will not be verified until FFY24 reporting is submitted to OJJDP in June 2025.

⁹ The exact amount of the award will not be known until the federal solicitation for funds is released. The anticipated release date is June 2024.

With a reduction of funding due to non-compliance with Section 223(a)(11)(b), these community partners will not likely receive funding for the continuation of these programs, which takes away resources from youth and their families. These partners provide programming and other resources to approximately 1,107 youth in the current grant awarding period.

The JJDPA grant program also funds SAG events in the community, member attendance at conferences to learn new developments in the youth justice field, and stipends for youth members. The SAG recently hosted several community events that screened documentaries such as *13th* and *Stamped from the Beginning*, which examine the United States' history of racial inequality and mass criminalization, particularly of Black Americans. The screening was followed by a panel of justice-involved youth and adults to promote community connection and understanding. October is nationally recognized as Youth Justice Action Month (YJAM). In October 2024, the SAG hosted two events: a virtual event to improve mental health for system-involved youth and a community conversation to promote voting and legislative participation from young people held in Baltimore City, Maryland. The SAG has also hosted youth-recruitment events at local colleges and town halls.

SB827/HB1107 attempts to ensure that youth would not be housed in an adult jail or lockup prior to the resolution of their legal case, which, with the amendments proposed in this testimony, **will** ensure Maryland's compliance with the [34 USC 11133\(a\)\(11\)\(B\)](#) requirement of the Act, restoring the full federal grant award.

Given the health and safety consequences for juveniles charged as adults and the consequences of Maryland's noncompliance with the JJDPA, the SAG requests a favorable report with amendments on Senate Bill 827/House Bill 1107.

Sincerely,

Fredrick Chavis

Fred Chavis
Chair, Maryland State Advisory Group

MCAA SB827 Juvenile Restrictive Housing Confinemen

Uploaded by: Ryan Ross

Position: FWA



SB827 - Juvenile Law – Confinement and Restrictive Housing – Limitations

MCAA Position: **SUPPORT W/ Amendments** TO: Judicial Proceedings Committee

DATE: February 17, 2025

FROM: Ryan Ross, President
Lamonte Cooke, Legislative Committee
Mary Ann Thompson, Legislative Committee

The Maryland Correctional Administrator's Association (MCAA), an organization comprised of our statewide jail wardens and administrators for the promotion and improvements of best correctional practices **SUPPORTS** Senate Bill 0827 with an amendment specifying that restrictive housing limitations apply specifically to the Department of Juvenile Services (DJS) as a correctional unit, in accordance with Correctional Services Article §2-401 (2) (ii). This bill is a crucial step in safeguarding juveniles in the justice system, especially those under adult criminal court jurisdiction.

The bill's intent to ensure juveniles are not housed in adult facilities, where they may come into contact with incarcerated adults, is vital for their safety, rehabilitation, and well-being. However, the bill would be more effective if restrictive housing limitations are directly applied to DJS.

Adult correctional facilities are not designed for juveniles and lack the infrastructure to ensure proper sight and sound separation. Modifying these facilities would be costly, with some estimates exceeding \$30 million, which makes retrofitting adult facilities an impractical solution. Currently, juveniles often remain in adult facilities for extended periods while awaiting placement in juvenile facilities, where they are sometimes placed in restrictive housing, which is harmful and insufficient.

Instead of retrofitting adult facilities, the focus should be on creating and expanding juvenile facilities that meet the specific needs of young offenders, providing age-appropriate programming and ensuring separation from adults.

The MCAA respectfully urges the committee to issue a **FAVORABLE** report on Senate Bill 0827, with the amendment to apply restrictive housing limitations to DJS. This will better address the needs of juveniles and ensure they are placed in the proper environment for rehabilitation.

MCPA-MSA SB 827 Juvenile Law – Confinement and Res

Uploaded by: Samira Jackson

Position: FWA



Maryland Chiefs of Police Association Maryland Sheriffs' Association



MEMORANDUM

TO: The Honorable William C. Smith, Jr., Chair and
Members of the Judicial Proceedings Committee

FROM: Darren Popkin, Executive Director, MCPA-MSA Joint Legislative Committee
Andrea Mansfield, Representative, MCPA-MSA Joint Legislative Committee
Samira Jackson, Representative, MCPA-MSA Joint Legislative Committee

DATE: February 19, 2025

RE: **SB 827 - Juvenile Law - Confinement and Restrictive Housing - Limitations**

POSITION: **SUPPORT WITH AMENDMENTS**

The Maryland Chiefs of Police Association (MCPA) and the Maryland Sheriffs' Association (MSA) **SUPPORT WITH AMENDMENTS SB 827**. The bill's primary objective is to prevent juveniles from being housed in adult correctional facilities where they may be exposed to adult inmates, which is critical to their safety, rehabilitation, and overall well-being. However, for the legislation to be truly effective, it must ensure that restrictive housing limitations are directly applied to the Department of Juvenile Services (DJS).

Adult correctional institutions are not designed to accommodate juveniles safely and lack the necessary infrastructure to maintain adequate sight and sound separation. Reconstructing these facilities to meet juvenile housing requirements would be prohibitively expensive, with estimated costs exceeding \$30 million—an impractical and inefficient solution. As a result, juveniles often remain in adult facilities for extended periods while awaiting transfer to appropriate juvenile placements, where they may be subjected to restrictive housing practices that fail to meet their developmental needs.

Rather than investing in costly modifications to adult facilities, efforts should focus on expanding and enhancing juvenile-specific facilities. These environments are better suited to providing age-appropriate programming, ensuring the separation of juveniles from adults, and fostering rehabilitation.

For these reasons, MCPA-MSA respectfully urges the committee to issue a favorable report on SB 827, with the necessary amendment to apply restrictive housing limitations to DJS. This amendment will help ensure juveniles receive proper care and placement essential for their rehabilitation and future success.

For these reasons, MCPA and MSA **SUPPORT SB 827 WITH AMENDMENTS** and urge a **FAVORABLE** committee report.

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2025 19 2_OPD FWA_SB 827 Juvenile Restrictive Hous

Uploaded by: Stephen Bergman

Position: FWA



NATASHA DARTIGUE
PUBLIC DEFENDER

KEITH LOTRIDGE
DEPUTY PUBLIC DEFENDER

MELISSA ROTHSTEIN
CHIEF OF EXTERNAL AFFAIRS

ELIZABETH HILLIARD
DIRECTOR OF GOVERNMENT RELATIONS

BILL: SB 827 Juvenile Law - Confinement and Restrictive Housing – Limitations

FROM: Maryland Office of the Public Defender

POSITION: Favorable with Amendments

DATE: February 19, 2025

The Maryland Office of the Public Defender (hereinafter “OPD”) respectfully requests that the Judicial Proceedings Committee issue a favorable report with amendments on Senate Bill 827.

The two purposes of Senate Bill 827 are:

(1) to make sure that all youth ordered detained while pending hearings seeking to have their cases transferred to Juvenile Court pursuant to Criminal Procedure § 4-202 are maintained in a secure juvenile detention center operated by the Maryland Department of Juvenile Services (hereinafter “DJS”); and

(2) to ensure that those youth under the age of 18 who are either ineligible to have their cases transferred to juvenile court or have had their motions to transfer denied are maintained in a secure facility where they are prevented from having physical, sight, and/or sound contact with adult inmates without having to be placed in solitary confinement to achieve this objective.

While we applaud the intent of the bill, we think that there is a simpler way to craft the language to achieve the second of these objectives.

All Detained Youth Pending Transfer Hearings to Be Held in Secure Juvenile Facilities Operated by DJS

The proposed language amending the existing provisions of Criminal Procedure § 4-202 to ensure that all detained youth pending transfer are detained in a juvenile detention facility achieves the intent of objective number one in a clear and concise way. No revisions are recommended for this section.

All Detained Youth Ineligible for Transfer or Who Have Been Denied Transfer to be Held in a Secure Facility for Youth Operated by the Department of Public Safety and Correctional Services (hereinafter “DPSCC”)

In OPD’s view, the language proposed to achieve this objective is overly complicated. In order to preclude youth from unnecessarily being placed in restrictive housing in an adult facility and moved to the “general population,” while still preventing the youth from having contact with adult inmates, the facility would have to keep the youth in a “general population” composed of only youth. Jails would have to maintain a separate juvenile wing, which would be cost

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For further information please contact Elizabeth Hilliard, Elizabeth.hilliard@maryland.gov 443-507-8414.

prohibitive for many County jails. For smaller jails, where there may be only one youth detained, the juvenile only wing would consist of that one youth and would essentially still amount to solitary confinement. Maryland has a youth detention center operated by the DPSCS in Baltimore called the Youth Detention Center (hereinafter “YDC”). It has only children under the age of 18 and has an excellent school, which will allow them to continue their educations for so long as they are there. Many youth ineligible to have their cases transferred to juvenile court or who have had their motions to transfer denied, are currently housed there. However, there are also a number of these youth currently housed in local jails, often maintained in solitary confinement to keep them from having exposure to adult inmates.

Rather than SB 827’s language to achieve this objective, OPD proposes to simplify the language as follows:

“Any detained child under the age of 18 who is not eligible to have their case transferred to juvenile court pursuant to Criminal Procedure Sec. 4-202 or any child under the age of 18 who has had their petition to transfer to juvenile court denied shall be detained at a facility for children operated by the Maryland Department of Public Safety and Correctional Services.”

With this amendment, OPD urges the Judicial Proceedings Committee to issue a favorable report on SB 827.

Submitted by: Maryland Office of the Public Defender, Government Relations Division.

SB 827.DJS.Final.pdf

Uploaded by: Karalyn Aanenson

Position: UNF

Date: February 19, 2025
Bill Number/Title: SB 827 - Juvenile Law - Confinement and Restrictive Housing - Limitations
Committee: Judicial Proceedings Committee
DJS Position: Oppose

The Department of Juvenile Services (DJS) opposes SB 827. SB 827 seeks to:

- Limit the utilization of restrictive housing for a minor incarcerated in either juvenile or adult correctional facility; and,
- Prohibit a child from being placed in an adult correctional facility, regardless if the child is subject to the jurisdiction of the juvenile or criminal courts.

First, the provisions of SB 827 that limit the use of restrictive housing are both unnecessary and problematic in their application within the juvenile justice system. There is long-standing law that prohibits DJS from using locked door seclusion as punishment. Md. Code, Human Services, 9-227(2)(i). DJS has further implemented policy and procedures that are consistent with juvenile correctional best practices and only permits the use of seclusion if the youth presents an imminent threat to themselves, others, and/or facility security. DJS policy and procedure clearly outlines preventive interventions that must be taken before the use of seclusion, permits seclusion to be used in only 1-hour increments, requires notification outside of facility leadership for any seclusion that exceeds 4 hours, requires staff to observe the youth every 10 minutes, medical observation must occur within the first 15 minutes, and behavioral health observation within 30 minutes, and lastly the youth shall be released from seclusion as soon as the intervening event or circumstances have been de-escalated. Creating a statutory framework, as contemplated in SB 827, that dictates the process and procedure for the use of seclusion (restrictive housing) will be confusing for staff and eliminates the ability for DJS to make operational changes that are in the best interest of the youth and safety.

SB 827 would also prohibit admitting any child into an adult correctional facility. Although DJS believes no youth should be placed in adult correctional facilities, without other statutory changes the proposed framework will result in overcrowding, and unnecessary delays, and will require DJS to build new facilities. , SB 827 would over-populate DJS detention facilities due to the significant time it takes for a youth's case to process through the adult system requiring DJS to increase detention capacity.

For these reasons, DJS requests an unfavorable report on SB 827.

Contact: Kara Aanenson, DJS Director of Legislation Policy and Reform, kara.aanenson@maryland.gov

SB 827 - MSAA Informational.pdf

Uploaded by: Patrick Gilbert

Position: INFO



Maryland State's Attorneys' Association

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Rich Gibson
President

Steven I. Kroll
Coordinator

DATE: February 17, 2025

BILL NUMBER: SB 827

POSITION: Informational

The Maryland State's Attorneys' Association (MSAA) submits the following for the consideration of this Committee as it reviews and deliberates Senate Bill 827.

SB 827 refines the conditions under which a juvenile may be placed in restrictive housing. The restrictions proposed in the bill are grounded in the idea that restrictive housing should be used only as a final resort – these measures are important, and supported by a growing body of scientific evidence that establishes that juveniles are particularly susceptible to the devastating psychological and developmental effects of restrictive housing.¹

The bill also prohibits juveniles from being detained in adult facilities. Current Maryland law requires that juveniles charged in adult court that are eligible for transfer – which, with the exception of juveniles aged 16 or 17 charged with murder in the first degree or juveniles previously convicted in adult court, is all juveniles charged in adult court – be held in juvenile facilities pursuant to MD. CODE ANN., CRIM. PROC. § 4-202(h), unless one of three exceptions exists: (1) the juvenile is released prior to trial, (2) there is not available space for the juvenile in a juvenile facility, or (3) detaining the juvenile in a juvenile facility would pose a risk of harm to the juvenile or others. This third exception is important in the event a juvenile would pose a danger to other detained juveniles. Maryland's prosecutors see cases involving violence between detained juveniles in Department of Juvenile Services facilities – no one should be subject to such violence while in the custody of the State. Preserving this exception is important in the event a court finds that danger posed by a juvenile to other detained juveniles is outside the capacity of the Department of Juvenile Services to address.

¹ See, e.g., *Position Statement: Restrictive Housing in Juvenile Correctional Settings*, National Commission on Correctional Health Care (Feb. 2021), available at https://www.ncchc.org/wp-content/uploads/Restrictive-Housing-in-Juvenile-Correctional-Settings-2021_endorsements.pdf.