



Joint Testimony of The University of Baltimore School of Law's Sayra and Neil Meyerhoff Center for Families, Children and the Courts (CFCC) & Center for Criminal Justice Reform (CCJR)

In Support of HB 921

Juvenile Law - Confinement and Restrictive Housing - Limitations

March 30, 2026

Dear Chair Smith and Members of the Senate Judicial Proceedings Committee:

The Sayra and Neil Meyerhoff Center for Families, Children, and the Courts (CFCC) at the University of Baltimore School of Law envisions communities where children and families thrive without unnecessary involvement in the legal system. We engage communities in all that we do to work towards transforming systems that create barriers to family well-being. CFCC offers this testimony in partnership with the Center for Criminal Justice Reform (CCJR) at the University of Baltimore School of Law. The CCJR is dedicated to supporting community-driven efforts to improve public safety and address the harm and inequities caused by the criminal legal system.

CFCC and CCJR strongly support HB 921, which seeks to limit the Department of Juvenile Services' practice of placing youth in restrictive housing (i.e., solitary confinement) and ban the use of solitary confinement solely for punishment, convenience, retaliation, or staff shortages. This bill will help **protect vulnerable youth from inhumane conditions, support fundamental rights, and strengthen protections for Maryland's youth.**

I. Solitary confinement subjects youth to inhumane conditions.

The practice of placing youth in solitary confinement subjects children to inhumane conditions that resemble torture. In Maryland, the Department of Juvenile Services ("DJS" or "The Department") uses a system of "Restrictive Housing" or "Administrative Segregation" in place of terms like solitary confinement. Individuals placed in restrictive housing may spend twenty-two or more hours in a cell with small ballistic-resistant windows removed from nearly all human contact. These cells, which can be smaller than the interior of a car, are often devoid of clocks. In some instances, restrictive housing units may keep the lights on at all times.

These conditions are unacceptable for anyone, but they are especially harmful when imposed on our state's youth. Furthermore, research has shown that this policy is not evenly applied. Youth solitary confinement is used disproportionately against individuals based on their race, sexual orientation, gender identity and expression, or disability status. Research from across the nation concludes that Black, queer, or disabled youth are more frequently subjected to

solitary confinement than their peers.¹ Indeed, solitary confinement does the most harm to our most vulnerable populations.

The use of involuntary solitary confinement is inherently traumatic, and for many youth in the system - who already carry significant histories of violence, abuse, and neglect - it compounds that trauma. A 2024 report by Human Rights for Kids and Annie E. Casey Foundation found that, among Marylanders who were incarcerated in adult prisons since childhood, more than 70% had experienced physical and emotional abuse and 45% had experienced sexual abuse prior to their system involvement.² Placing child victims of abuse in solitary confinement exacerbates their trauma in significant ways.

II. **Solitary confinement negatively impacts the intellectual, physical, and emotional development of children.**

Adolescence is a highly consequential time of neurological and social development for youth. It is a time when young people deepen their sense of identity and develop important social skills that will be useful later in life. Isolation is the enemy of healthy adolescent development because it can place children at risk of severe impairment in the development of their prefrontal cortex, which is the center of executive functioning and emotional regulation.³ This risk is even more prevalent for youth who have experienced trauma or who have disabilities that may already be impairing the function and development of their prefrontal cortices

The psychological damage of solitary confinement can also have disastrous impacts on youths' mental health and lead to suicide.⁴ Many youth in the legal system are wrestling with mental health conditions such as depression (30%), post-traumatic stress disorder (32%), and attention-deficit hyperactivity disorder.⁵ The isolation that young people experience during solitary confinement can create new mental health problems and worsen existing conditions. The stress of solitary confinement also harms physical health. The limitations of exercise and movement can result in children's developing bodies failing to get the requisite amount of exercise they need. This can lead to physical health declines that also have mental and behavioral health consequences. Additionally, youth have reported experiencing sexual and physical assaults from adults while in solitary confinement. The decision to place a child in solitary confinement can have a significant impact on their very survival, as studies show a 30% increased risk of early death amongst youth who are incarcerated in adult facilities, where

¹ Unlock the Box, Just. Pol'y Inst. & Solitary Watch, Youth in Solitary (2024), <https://justicepolicy.org/wp-content/uploads/2024/11/Youth-in-Solitary-JPI-Branding.pdf>.

² Annie E. Casey Found. & Hum. Rts. for Kids, Disposable Children: The Prevalence of Child Abuse and Trauma Among Children Prosecuted and Incarcerated As Adults in Maryland (2024), https://assets.aecf.org/m/resourcedoc/Report_disposablechildren_2024.pdf.

³ Yosuke Nishihata et al., *Effect of Juvenile Social Isolation on Excitability of Prefrontal Pyramidal Cells with Different Subcortical Axonal Projections*, 19 Front. Cell. Neurosci. 1549352 (May 30, 2025), <https://pmc.ncbi.nlm.nih.gov/articles/PMC12163027/>.

⁴ Michael E. Kraut, *Minors in Custody – Solitary Confinement*, Child Crime Prevention & Safety Ctr., <https://childsafety.losangelescriminallawyer.pro/minors-in-custody-solitary-confinement.html> (last visited Feb. 24, 2026).

⁵ Lee A. Underwood & Aryssa Washington, *Mental Illness and Juvenile Offenders*, 13 Int'l J. Env'tl. Res. & Pub. Health 228 (2016), <https://pmc.ncbi.nlm.nih.gov/articles/PMC4772248/>.

they are known to be placed in solitary confinement for their “protection.”⁶

III. Solitary confinement violates fundamental human rights.

It has long been recognized that the practice of solitary confinement, particularly when applied to children, constitutes a violation of fundamental human rights. The United Nations Convention on the Rights of the Child (UNCRC) explicitly states that children must be safeguarded from inhumane forms of punishment and torture.⁷ The United Nations has reiterated and bolstered its commitment to ending solitary confinement in subsequent publications and policy guidelines.⁸ A state practice of solitary confinement creates a system of state-sanctioned child abuse. By utilizing policies of isolation not in accordance with these standards, the Department is implementing a harmful and traumatizing process that, if utilized by parents, would be grounds for a child abuse and neglect allegation.

IV. Codifying restrictions provides stronger protections for Maryland’s Youth and protects public safety.

Passing HB 921 will help ensure that the General Assembly’s expressed intent to restrict the placement of youth in solitary confinement is actualized. In 2019, Maryland’s legislative body passed HB1001 which banned the use of solitary confinement for youth but allowed for exceptions to that rule at the determination of the managing official of that correctional facility. Our fellow colleagues have explained how this exception has swallowed the rule and rendered HB 1001 ineffective for the purpose of restricting the solitary confinement of youth. In addition to providing the protections of HB 1001, HB 921 will also ensure that youth in solitary confinement have sustained access to educational services and mental, medical, dental, and health care.

The alternative imperils public safety. When youth who are already traumatized have that trauma intensified, outcomes deteriorate. Youth are more likely to experience mental health crises, struggle to regulate behavior, and face greater challenges upon reentry, all of which increases the risk of reoffending. By protecting youth HB 921 also protects public safety.

Conclusion

HB 921 will take meaningful steps to respect the human rights of Maryland’s youth and protect them from the inhumane conditions of solitary confinement. **For these reasons, the CFCC and CCJR strongly support HB 921 and urge a favorable report.**

⁶ Elizabeth S. Barnert, *Confining Children in Adult Prisons May Kill Them: New Evidence to Inform Policy Action*, 6 JAMA Network Open e2321755 (2023), <https://pmc.ncbi.nlm.nih.gov/articles/PMC10833501/>.

⁷ Convention on the Rights of the Child, Nov. 20, 1989, 1577 U.N.T.S. 3

⁸ 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”).