

**IN THE UNITED STATES DISTRICT COURT
FOR THE CENTRAL DISTRICT OF ILLINOIS**

J.B.H., by his next friend Debra Medlock,)
and A.M., by his next friend Rachael Puig,)
on behalf of themselves and all others)
similarly situated,)

Plaintiffs,)

v.)

KNOX COUNTY, CHIEF JUDGE)
RAYMOND A. CAVANAUGH of the)
Ninth Judicial Circuit Court, BRIDGET)
E. PLETZ, Director of Court Services of)
the Ninth Judicial Circuit Court, and)
WENDI L. STECK, Superintendent of)
the Mary Davis Home,)

Defendants.)

**STATEMENT OF INTEREST OF THE
UNITED STATES OF AMERICA**

Case No. 24-cv-04096-JES-JEH

STATEMENT OF INTEREST OF THE UNITED STATES OF AMERICA

The Constitution protects children in juvenile justice facilities from excessive isolation. *See Reed v. Palmer*, 906 F.3d 540, 549-550 (7th Cir. 2018). The Fourteenth Amendment prohibits conditions of confinement that are not rationally related to a legitimate government objective or that are excessive in relation to that objective. *Id.* at 550. Plaintiffs, a putative class of children detained at the Mary Davis Detention Home (MDH) in Galesburg, Illinois, allege that the conditions at MDH, including the facility's isolation practices, violate these constitutional rights. Doc. 9, Am. Comp. ¶¶ 16, 17, 23, 204-215, 227-232. Plaintiffs allege that Defendants subject them and other children at MDH to solitary confinement for excessive periods of time and deprive them of basic needs, such as education, mental health services, sleep, and human contact.

Doc. 34-1, Pls.’ Mem. in Support of Mot. for Prel. Inj. (“Pls.’ Mem.”) at 11, 14, 15, 16.¹

Plaintiffs also allege that staff at MDH use solitary confinement to punish children, even for minor infractions. *Id.* at 12, 13. According to Plaintiffs, MDH’s isolation practices exacerbate children’s preexisting mental health conditions, and can lead to new mental health crises. *Id.* at 1, 5, 30. Plaintiffs seek a preliminary injunction to stop MDH’s alleged ongoing, abusive solitary confinement practices. *See* Doc. 33, Pls.’ Mot. Prel. Inj.

The Civil Rights of Institutionalized Persons Act, 42 U.S.C. §1997 (CRIPA), and the Violent Crime Control and Law Enforcement Act, 34 U.S.C. §12601 (Section 12601), charge the United States with enforcing the constitutional and federal rights of children in institutions. CRIPA and Section 12601 authorize the Department of Justice to investigate and remedy systemic violations of those rights in juvenile justice facilities. The United States submits this Statement of Interest to assist the Court in its analysis of Plaintiffs’ Motion for Preliminary Injunction and Memorandum in Support thereof. *See* Doc. 33, Pls.’ Mot. Prel. Inj.; Doc. 34-1, Pls.’ Mem.²

I. Factual Background

MDH is a pre-trial juvenile detention facility that houses children as young as 11 years old. Doc. 34-1, Pls.’ Mem. at 11. Plaintiffs are children currently detained at MDH. *Id.* at 27. Both Representative Plaintiffs have been diagnosed with mental health conditions and have suffered previous trauma, which is common for children sent to MDH. *Id.* at 1, 7; Doc. 9, Am. Comp. ¶¶ 69-70.

¹ Page citations herein refer to ECF page numbering.

² The United States files this Statement of Interest pursuant to 28 U.S.C. § 517, which authorizes the Attorney General “to attend to the interests of the United States” in any case pending in federal court.

Plaintiffs allege that MDH routinely confines children alone in their cells for up to 23 or sometimes even 24 hours per day. Doc. 9, Am. Comp. ¶ 2; Doc. 34-1, Pls.’ Mem. at 11, 12, 13. Plaintiffs further allege that this isolation is often punitive, even for non-violent and trivial offenses like talking back, cursing, arguing with staff, or refusing to follow directions. Doc. 34-1, Pls.’ Mem. at 13. According to Plaintiffs, staff place children at MDH in punitive solitary confinement “on a whim.” *Id.* At times, Plaintiffs allege, staff cause a “vicious cycle” of solitary confinement by provoking children who are already isolated and then extending the children’s solitary confinement when they act out in response. *Id.*

Conditions in MDH’s cells are reportedly bleak. The cells are small and concrete, and lights illuminate them 24-hours-a-day, making it difficult to impossible for children to sleep. *Id.* at 14. According to Plaintiffs, staff exacerbate this harm by refusing to tell children in isolation what time it is, which Plaintiffs state, “makes day blend into night” for those children. *Id.* Plaintiffs also allege that children eat meals alone in their cells. *Id.*

According to Plaintiffs, MDH further denies children in isolation adequate education, exercise, human interaction, and programming activities to pass the time. *Id.* at 14, 15. Other than pacing their cells, children have few means to occupy themselves. MDH occasionally permits children to read books or write letters, but often takes even these activities away. *Id.* at 14.

MDH also allegedly fails to provide adequate mental health care for children in isolation—even children known to have mental illness. *Id.* at 15-16. Children reportedly experience mental health crises while in isolation, including self-harm and suicide attempts. *Id.* at 16. When this happens, MDH places children on suicide watch, which exposes children to more isolation. *Id.* at 16-17. MDH then withholds most mental health services from children

while on suicide watch, even though they are experiencing mental health crises. *Id.* Adding to children’s trauma and harm, MDH allegedly conducts invasive, unnecessary, and fully naked strip searches on children. *Id.* at 14; Doc. 9, Am. Comp. ¶¶ 8, 30.

Plaintiffs allege they and other children at MDH suffer as a direct result of MDH’s isolation practices. Doc. 34-1, Pls.’ Mem. at 11, 14, 15, 40, 41, 47. Isolation practices at MDH are described by Plaintiffs as “psychologically taxing” on children, causing “self-mutilation and attempted suicide.” *Id.* at 11, 14, 41. One child reports that his prolonged time in isolation with nothing to do and little human contact leaves him feeling hopeless and depressed, and that MDH “is making him go crazy.” Doc. 9, Am. Comp. ¶ 39 (citing Ex. 1, Declaration of J.B.H. ¶ 39). Another child describes feeling “trapped in his own thoughts” and in a constant state of agitation and anger because of his excessive isolation. *Id.* ¶ 74 (citing Doc. 9-2, Declaration of A.M. ¶ 21). According to another child, excessive isolation “really kills a person on the inside,” and makes him feel inhuman. *Id.* ¶ 83 (citing Doc. 9-3, Declaration of N.J. ¶ 11). Similarly, a child placed in isolation at least 20 times while detained at MDH “explained that when you spend that much time in your room by yourself you get more and more angry, and then a hopelessness sets in.” *Id.* ¶ 102 (citing Doc. 9-4, Declaration of M.P. ¶ 14). As he describes, “it hurts you mentally.” Doc. 9-4, Declaration of M.P. ¶ 14. Plaintiffs’ expert medical consultant confirmed the harm Plaintiffs and other children suffer because of MDH’s isolation practices. Doc. 34-1, Pls.’ Mem. at 40, 41.

Plaintiffs seek an order compelling Defendants to permanently stop confining children at MDH in the alleged conditions because they violate children’s rights under the Fourth, Eighth, and Fourteenth Amendments. *See* Doc. 9, First Am. Comp. at 55. Specifically, as relevant to this Statement of Interest, Plaintiffs assert that Defendants are violating Plaintiffs’ constitutional

rights by subjecting them to extended periods of solitary confinement “in conditions that are shockingly inadequate,” “affirmatively abusive,” and “profoundly harmful.” *Id.* ¶¶ 29, 192, 205. Plaintiffs also seek a preliminary injunction requiring Defendants to cease these abusive and harmful isolation practices while this litigation continues, as well as expedited discovery that will allow Plaintiffs to supplement the factual record before any hearing on their motion. Doc. 34-1, Pls.’ Mem. at 11.

II. Isolation Causes Children Significant and Lasting Harm.

When isolating children is not rationally related to a legitimate government objective or is excessive, it violates the Fourteenth Amendment. *See Reed*, 906 F.3d at 550.³ The governmental objective of the Illinois Department of Juvenile Justice is rehabilitation, and it is the Department of Juvenile Justice that establishes minimum standards for the treatment of children by county juvenile detention facilities such as MDH. *See* 730 ILCS § 5/3-2.5-5 (stating that the Department’s purpose is “to provide treatment and services through a comprehensive continuum of individualized educational, vocational, social, emotional, and basic life skills” and that it promotes “the philosophy of balanced and restorative justice”); 730 ILCS § 5/3-15-2(a). *See also Application of Gault*, 387 U.S. 1, 15 (1967) (explaining that juvenile justice system was established to treat and rehabilitate children).

The isolation practices alleged by Plaintiffs would cause children significant harm. As medical, psychiatric, and correctional communities have widely recognized, isolation inflicts

³ The Fourteenth Amendment provides the proper standard for youth in MDH because they have not been convicted of crimes. *See, e.g., Hardeman v. Curran*, 933 F.3d 816, 823 (7th Cir. 2019) (citing *Kingsley v. Hendrickson*, 576 U.S. 389, 398 (2015)) (applying the Fourteenth Amendment standard, rather than the Eighth Amendment, to conditions of confinement for adult pretrial detainees). Indeed, no child in the juvenile justice system, whether detained pending adjudication or confined post-adjudication, has been convicted of a crime. Thus, similar to adult pretrial detainees and involuntarily committed patients, children in state custody based on a delinquency adjudication are not confined for punitive purposes. *See*

serious and lasting harms on children because of their developmental immaturity, brain development, and lack of effective coping mechanisms.⁴ Because children’s brains are still developing, “their time spent in solitary confinement [is] even more difficult and the developmental, psychological, and physical damage more comprehensive and lasting.”⁵ Children also “experience time differently—a day for a child feels longer than a day to an adult—and have a greater need for social stimulation.”⁶ As a result, exposure to stressful conditions such as isolation can result in long-term negative changes in children’s bodies and brains. Children placed in isolation are at high risk of harmful psychiatric effects, including hallucinations, paranoia, depression, anxiety, self-harm, and suicide.⁷

For these reasons, the American Academy of Child & Adolescent Psychiatry, American Psychological Association, American Public Health Association, the National Commission on Correctional Health Care, and the American Bar Association have all called for a ban on solitary

Nelson v. Heyne, 491 F.2d at 358 (describing the rehabilitative purpose of the juvenile justice system); *Vann v. Scott*, 467 F.2d 1235, 1239 (7th Cir. 1972) (explaining that the purpose of the “delinquent” classification is “to afford the State an adequate opportunity to rehabilitate and safeguard delinquent minors rather than to punish them”).

⁴ The prefrontal cortex of the brain—the area associated with response inhibition, emotional regulation, planning, and organization—continues to develop well into a person’s 20s. See U.S. DEPT. OF JUSTICE, REPORT AND RECOMMENDATIONS CONCERNING THE USE OF RESTRICTIVE HOUSING 59 (Mar. 2016), <https://www.justice.gov/dag/file/815551/dl> Perma | www.justice.gov; see also B.J. Casey et al., *Structural and Functional Brain Development and its Relation to Cognitive Development*, 54 BIOLOGICAL PSYCHO. 241, 243 (2000); Jay N. Giedd et al., *Brain Development During Childhood and Adolescence: A Longitudinal MRI Study*, 2 NATURE NEUROSCIENCE 861 (1999).

⁵ Solitary Confinement (Isolation) Position Statement, Nat’l Comm’n on Corr. Health Care (Apr. 2016), [Solitary Confinement \(Isolation\) \(2016\) - National Commission on Correctional Health Care https://perma.cc/RE6L-RA76](https://perma.cc/RE6L-RA76) .

⁶ *Id.*

⁷ See Position Statement, Am. Psychiatric Ass’n, Position Statement on Solitary Confinement (Restricted Housing) of Juveniles (July 2018), <https://www.psychiatry.org/File%20Library/About-APA/Organization-Documents-Policies/Policies/Position-2018-Solitary-Confinement-Restricted-Housing-of-Juveniles.pdf> Perma | www.psychiatry.org.

confinement for children.⁸ The American Correctional Association, too, advises that “isolating a youth for extended periods can have serious psychological and developmental consequences.”⁹

Relying on these developments in psychology and brain science, the Supreme Court has recognized on several occasions the developmental differences of children and adolescents. *See Miller v. Alabama*, 567 U.S. 460 (2012) (mandatory life imprisonment without parole for children constitutes cruel and unusual punishment under the Eighth Amendment); *Graham v. Florida*, 560 U.S. 48 (2010), *as modified* (July 6, 2010) (mandatory life imprisonment without parole for children who did not commit homicide violates the Eighth Amendment); *Roper v. Simmons*, 543 U.S. 551 (2005) (imposing the death penalty on children violates the Eighth Amendment). The Court has observed that children “have a lack of maturity and an underdeveloped sense of responsibility,” and are “more vulnerable...to negative influences and outside pressures,” and that their characters are not as “well formed” as those of adults. *Miller*,

⁸ See Policy Statement, Am. Acad. of Child & Adolescent Psychiatry, *Solitary Confinement of Juvenile Offenders* (Apr. 2012), http://www.aacap.org/aacap/policy_statements/2012/solitary_confinement_of_juvenile_offenders.aspx Perma | [Solitary Confinement of Juvenile Offenders](#); Am. Psych. Ass’n, RESOLUTION Opposing Involuntary Individual Isolation of Youth in Juvenile Justice Settings (2024), <https://www.apa.org/about/policy/isolation-youth.pdf> Perma | <https://www.apa.org/about/policy/isolation-youth.pdf>; Am. Pub. Health Ass’n, *Solitary Confinement as a Public Health Issue* (Nov. 5, 2013), <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2014/07/14/13/30/solitary-confinement-as-a-public-health-issue> Perma | [Solitary Confinement as a Public Health Issue](#); Nat’l Comm’n on Corr. Health Care, *Restrictive Housing in Juvenile Settings* (2021), <https://www.ncchc.org/position-statements/restrictive-housing-in-juvenile-settings-2021> Perma | [Restrictive Housing in Juvenile Settings \(2021\) - National Commission on Correctional Health Care](#); Position Statement, Solitary Confinement (Isolation) (Apr. 2016), <http://www.ncchc.org/solitary-confinement> Perma | [Solitary Confinement \(Isolation\) \(2016\) - National Commission on Correctional Health Care](#); American Bar Association Resolution (Aug. 14-15, 2017); *c.f.* Policy Statement, Am. Med. Ass’n, *Solitary Confinement of Juveniles in Legal Custody* (Nov. 2014) (opposing solitary confinement of juveniles for disciplinary purposes); Policy Statement, Am. Acad. of Child & Adolescent Psychiatry, *Solitary Confinement of Juvenile Offenders* (Apr. 2012) (same).

⁹ Am. Corr. Ass’n, *Letter from President Mary L. Livers and Executive Director James A. Gondles, Jr. to Staff Attorney at the Center for Children’s Law and Policy Jennifer Lutz* (Mar. 24, 2016), <http://www.stopsolitaryforkids.org/wp-content/uploads/2016/04/ACA-Support-Letter.pdf> Perma | www.stopsolitaryforkids.org.

567 U.S. at 471 (quoting *Roper*, 543 U.S. at 569); *see also Graham*, 560 U.S. at 68. Thus, “youth is more than a chronological fact.... It is a moment and condition of life when a person may be most susceptible to influence and to psychological damage.” *Miller*, 567 U.S. at 476 (internal quotations and citations omitted).

Courts in recent cases across the country have followed suit, weighing children’s unique vulnerabilities to serious harm when assessing the constitutionality of isolation. *See Alex A. v. Edwards*, No. CV 22-573-SDD-RLB, 2023 WL 5984280, at *18 (M.D. La. Sept. 14, 2023), *order vacated on other grounds, appeal dismissed as moot sub nom. Smith v. Edwards*, No. 23-30634, 2023 WL 8747492 (5th Cir. Dec. 19, 2023) (“There is no dispute that solitary confinement has a very negative affect [sic] on the developing brain of adolescents; it exacerbates already existing mental health problems, it can exacerbate or cause the onset of mental illness and depression, and it causes an increased risk of suicide.”); *J.H. v. Williamson Cnty.*, 951 F.3d 709, 718 (6th Cir. 2020) (“A growing chorus of courts have recognized the unique harms that are inflicted on juveniles when they are placed in solitary confinement.”); *C.P.X. v. Garcia*, 450 F. Supp. 3d 854, 909 (S.D. Iowa 2020) (“Due to their traumatic backgrounds and mental health issues, juveniles in detention facilities are ‘exquisitely vulnerable to psychiatric and behavioral decompensation when housed in solitary confinement.’”) (internal citation omitted); *G.H. v. Marstiller*, 424 F. Supp. 3d 1109, 1116 (N.D. Fla. 2019) (finding that plaintiffs had alleged sufficient facts to show that the practice of isolating children “violates contemporary standards of decency” due to “children’s heightened vulnerability and continued physical, psychological, and social development”); *A.T. v. Harder*, 298 F. Supp. 3d 391, 416 (N.D.N.Y. 2018) (granting preliminary injunction to a plaintiff class of children in an adult facility, finding “defendants’ continued use of solitary confinement on juveniles puts them at

serious risk of short- and long-term psychological damage”); *V.W. Conway*, 236 F. Supp. 3d 554, 583 (N.D.N.Y. 2017) (enjoining disciplinary isolation of children in an adult facility and relying on the “broad consensus among the scientific and professional community that juveniles are psychologically more vulnerable than adults”); *Doe v. Hommrich*, 2017 WL 1091864, at *2 (M.D. Tenn. 2017) (holding that “solitary confinement of juveniles in government custody for punitive or disciplinary reasons, especially for extended periods of time and especially for youth who may suffer from mental illness,” is unconstitutional).

The federal government, too, has repeatedly recognized that children are developmentally and constitutionally different than adults and that excessive isolation causes children unique and significant harm.¹⁰ As a result, the Justice Department has concluded that this practice can violate the Constitution. For example, the Justice Department recently found that Texas’ use of isolation for both disciplinary and operational purposes in its juvenile justice facilities harms children, in violation of the Constitution.¹¹ In that case, the Department stressed that regardless of why isolation is imposed, “excessive time that children spend locked alone in their cells poses a serious risk of harm.”¹² The Department also found that the practice of withholding most

¹⁰ Over ten years ago, the United States Attorney General’s National Task Force on Children Exposed to Violence concluded that “[n]owhere is the damaging impact of incarceration on vulnerable children more obvious than when it involves solitary confinement,” including increased vulnerability to suicide. ROBERT L. LISTENBEE, JR., REPORT OF THE ATTORNEY GENERAL’S NATIONAL TASK FORCE ON CHILDREN EXPOSED TO VIOLENCE 178 (Dec. 12, 2012). A Department of Justice nationwide study found that half of the suicides in juvenile detention facilities occurred when the juvenile was held in solitary confinement, and more than sixty percent of young people who died by suicide while in confinement had a history of being held in isolation. See Lindsay M. Hayes, Dep’t of Justice Office of Juvenile Justice and Delinquency Prevention, *Juvenile Suicide in Confinement: A National Survey*, viii (2009), <https://www.ncjrs.gov/pdffiles1/ojjdp/213691.pdf> [Perma | www.ojp.gov](#).

¹¹ U.S. Dep’t of Justice Special Lit. Section, *Letter from Assistant Attorney General Kristen Clarke to Governor Greg Abbott* (Aug. 1, 2024), <https://www.justice.gov/crt/media/1362531/dl?inline> [Perma | www.justice.gov](#) (finding that isolating children for multiple days for disciplinary purposes as well as isolating children for 17-22 hours a day for operational purposes causes children serious harm in violation of the Constitution).

¹² *Id.* at 21.

mental health services from children on suicide watch, a practice much like that alleged by Plaintiffs, exacerbates the harm that children experience.¹³

The Justice Department also recently entered an agreement requiring that Connecticut phase out its use of disciplinary isolation for children housed in an adult correctional facility on criminal charges.¹⁴ The agreement seeks to resolve the Department's finding that conditions for children in that correctional facility violated the Fourteenth Amendment.¹⁵ In its investigation report, the Department emphasized how harmful isolation is to children who—like the children in MDH—have trauma-related mental health difficulties.¹⁶ Indeed, the Justice Department has a long history of protecting children's right under the Fourteenth Amendment to be free from excessive isolation in juvenile justice and adult correctional settings, as reflected by settlements with the South Carolina Department of Juvenile Justice, Hinds County, Mississippi, LeFlore County, Mississippi, and the state of Ohio.¹⁷

¹³ *Id.* at 38 (“Although suicidal behavior or ideation should be considered a signal that more clinical intervention is needed, at [Texas’ juvenile justice facilities], it leads to less.”).

¹⁴ Settlement Agreement between the United States and the Connecticut Department of Correction (Aug. 29, 2024), <https://www.justice.gov/crt/media/1365966/dl?inline> Perma | www.justice.gov (phasing out disciplinary isolation of children and requiring the facility to instead develop an age-appropriate behavior management program).

¹⁵ U.S. Dep’t of Justice Special Lit. Section, *Letter from Assistant Attorney General Kristen Clarke to Governor Ned Lamont* (Dec. 21, 2021), https://www.justice.gov/d9/press-releases/attachments/2021/12/21/manson_findings_report_508_compliant_0.pdf Perma | www.justice.gov (prohibiting use of disciplinary isolation on children held both pretrial and post-conviction in an adult correctional facility as violative of the Fourteenth and Eighth Amendments).

¹⁶ *Id.* at 13 (“subjecting children who experience trauma-related mental health difficulties to isolation provides more opportunity to focus on the traumas endured, which may exacerbate their symptoms.”). See also *Paykina ex rel. E.L. v. Lewin*, 387 F. Supp. 3d 225, 243 (N.D.N.Y. 2019) (enjoining adult correctional facility from isolating a child and noting that “the deleterious effects of solitary confinement on mentally ill juveniles are a matter of common knowledge in the medical and psychiatric communities”).

¹⁷ See Settlement Agreement between the United States and the South Carolina Dep’t of Juvenile Justice, *United States v. South Carolina Dep’t of Juvenile Justice*, No. 3:22-cv-01221 (D.S.C. Apr. 14, 2022), ECF No. 4-1 at 8-11, <https://www.justice.gov/media/1299196/dl?inline> Perma | www.justice.gov (resolving Department finding that facility’s use of isolation violated children’s Fourteenth Amendment rights by limiting use of isolation on children in a juvenile justice facility to brief periods of time “as a

Congress banned the use of isolation on children in federal facilities in 2018. The First Step Act prohibits the use of isolation on children in federal facilities “for discipline, punishment, retaliation, or any reason other than as a temporary response to a covered juvenile’s behavior [that] poses a serious and immediate risk of physical harm to any individual, including the covered juvenile.” 18 U.S.C. § 5043(b)(1).¹⁸ Many other organizations, such as the Annie E. Casey Foundation’s Juvenile Detention Alternatives Initiative, Council of Juvenile Correctional Administrators, National Partnership for Juvenile Services, and PbS Learning Institute have issued professional standards similarly limiting the use of isolation in juvenile justice facilities to

response to behavior that poses a serious and immediate danger to self or others.”); Settlement Agreement Between the United States and Hinds County, Mississippi Regarding the Hinds County Jail, *United States v. Hinds Cnty.*, No. 16-489 (S.D. Miss. July 19, 2016), ECF No. 8-1 at 37-38, <https://www.justice.gov/crt/file/883861/download> Perma | www.justice.gov (prohibiting use of disciplinary isolation on children in an adult detention facility as violative of the Fourteenth Amendment); Settlement Agreement between the United States and Leflore County, Mississippi, *United States v. Leflore Cnty.*, No. 15-00059 (N.D. Miss. May 13, 2015), ECF No. 3-1 at 10-12, [Settlement Agreement between the United States and LeFlore County, Mississippi](#), Perma | www.justice.gov (resolving Department finding that facility’s conditions violate children’s Fourteenth Amendment rights by, in part, limiting use of isolation on children in a juvenile detention facility to brief cool-down periods); Agreed Order, *United States v. Ohio*, No. 04-1206 (S.D. Ohio May 21, 2014), ECF No. 148 at 2, https://www.justice.gov/sites/default/files/crt/legacy/2014/06/30/ohiojuv_order_5-21-14.pdf Perma | www.justice.gov (phasing out use of disciplinary isolation on children in two of Ohio’s juvenile justice facilities, based on the Department’s finding that this practice violated the Fourteenth Amendment).

¹⁸ Under the Act, no child in federal custody may be kept in isolation for longer than three hours under any circumstances. 18 U.S.C. § 5043(b)(2)(B). The Act requires that facility staff members seek to use less restrictive techniques prior to resorting to isolation, including talking with the child in an effort to de-escalate the situation, and allowing a qualified mental health professional to talk to the child. 18 U.S.C. § 5043(b)(2)(A)(i). If staff nonetheless decide to place a child in isolation after attempting to use less restrictive measures, they must explain to the child the reasons for doing so and that he or she will be released as soon as he or she regains self-control. 18 U.S.C. § 5043(b)(2)(A)(ii), (B)(i). If a child continues to pose a “serious and immediate risk of physical harm” beyond the maximum period of permissible time in isolation, the facility must transfer the child “to another juvenile facility or internal location where services can be provided to the covered juvenile without relying on room confinement,” or “if a qualified mental health professional believes the level of crisis service needed is not currently available, a staff member of the juvenile facility shall initiate a referral to a location that can meet the needs of the covered juvenile.” 18 U.S.C. § 5043(b)(2)(C).

a brief de-escalation period (i.e., a short time to allow a child to regain emotional and physical self-control in response to an imminent risk of serious physical harm to another person).¹⁹

Current research shows that the risk of serious harm from isolation is compounded when children experience isolation under the conditions Plaintiffs allege. The deprivation of essential supports and services, exposure to traumatic strip searches, and harsh cell conditions all exacerbate the serious harm that children experience from isolation.²⁰ Isolation under these circumstances exposes children to long-term negative changes in their bodies and brains.²¹ The resulting maladaptation “disrupts brain circuitry and other organ and metabolic systems ... during sensitive developmental periods, which may result in damage to the regulation of these systems.”²² The risk of harm is particularly acute for children who, as alleged here, “have

¹⁹ See Juv. Det. Alts. Initiative, *Juvenile Detention Facility Assessment Standards Instrument: 2014 Update* (Dec. 2014), <http://www.cclp.org/wp-content/uploads/2016/06/JDAI-Detention-Facility-Assessment-Standards.pdf> Perma | [cclp.org](http://www.cclp.org); Council of Juv. Corr. Adm’rs, *Council of Juvenile Correctional Administrators Toolkit: Reducing the Use of Isolation* (Mar. 2015), <https://nicic.gov/resources/nic-library/all-library-items/council-juvenile-correctional-administrators-toolkit> Perma | [Council of Juvenile Correctional Administrators Toolkit: Reducing the Use of Isolation](https://nicic.gov/resources/nic-library/all-library-items/council-juvenile-correctional-administrators-toolkit) | [National Institute of Corrections](https://www.nicic.gov/resources/nic-library/all-library-items/council-juvenile-correctional-administrators-toolkit); Position Statement, Nat’l P’ship for Juv. Servs., *Use of Isolation* (Oct. 20, 2014), <https://irp.cdn-website.com/45a58767/files/uploaded/2014%20-%20Use%20of%20Isolation.pdf> Perma | [irp.cdn-website.com](https://irp.cdn-website.com/45a58767/files/uploaded/2014%20-%20Use%20of%20Isolation.pdf); PBS LEARNING INST., *REDUCING ISOLATION AND ROOM CONFINEMENT 2* (2012), <https://stopsolitaryforkids.org/wp-content/uploads/2016/04/PbS-Reducing-Isolation-and-RoomConfinement-Sept-2012.pdf> Perma | stopsolitaryforkids.org.

²⁰ Depriving children of basic needs and subjecting them to traumatic strip searches likewise undermines their right to rehabilitative treatment—a right the Seventh Circuit recognized fifty years ago and which remains the law today. See *Nelson v. Heyne*, 491 F.2d 352 (7th Cir. 1974); see also *K.H.*, 914 F.2d at 851 (7th Cir. 1990) (“[T]he Constitution requires the responsible state officials to take steps to prevent children in state institutions from deteriorating physically or psychologically. We had anticipated this ruling in *Nelson v. Heyne*, 491 F.2d 352, 360 (7th Cir. 1974).”). Moreover, undermining treatment is not rationally related to the rehabilitative purpose of detaining children in MDH, as set forth in state law. See 730 ILCS § 5/3-2.5-5; *Reed*, 906 F.3d at 550.

²¹ See NAT’L ACADS. OF SCIS., ENG’G & MED., *THE PROMISE OF ADOLESCENCE: REALIZING OPPORTUNITY FOR ALL YOUTH* 58, 88-89 (Richard J. Bonnie & Emily P. Backes eds., 2019), <https://nap.nationalacademies.org/catalog/25388/the-promise-of-adolescence-realizing-opportunity-for-all-youth> Perma | [Front Matter](https://nap.nationalacademies.org/catalog/25388/the-promise-of-adolescence-realizing-opportunity-for-all-youth) | [The Promise of Adolescence: Realizing Opportunity for All Youth](https://nap.nationalacademies.org/catalog/25388/the-promise-of-adolescence-realizing-opportunity-for-all-youth) | [The National Academies Press](https://nap.nationalacademies.org/catalog/25388/the-promise-of-adolescence-realizing-opportunity-for-all-youth).

²² *Id.* at 89.

suffered abuse and trauma in their lives and face significant mental health issues that predate their incarceration.” Doc. 9, Am. Comp. ¶ 1.²³

III. Conclusion

For the foregoing reasons, we respectfully request that the Court consider this Statement of Interest regarding Plaintiffs’ Motion for Preliminary Injunction.

Dated: October 24, 2024

Respectfully submitted,

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²³ RICHARD G. DUDLEY, JR. NEW PERSPECTIVES IN POLICING: CHILDHOOD TRAUMA AND ITS EFFECTS: IMPLICATIONS FOR POLICE 5 (July 2015), <https://www.ojp.gov/pdffiles1/nij/248686.pdf> [Perma | www.ojp.gov](#) (discussing how repeated exposure to trauma causes changes in children’s brains that impair their ability to effectively cope with stressors).

CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of the foregoing STATEMENT OF INTEREST OF THE UNITED STATES was served by operation of the Court's Case Management/Electronic Case Files (CM/ECF) system on October 24, 2024, on all counsel or parties of record.

/s/ Ariona Jean-Johnson
ARIONA JEAN-JOHNSON