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A Path to Rehabilitation?: A Policy Analysis of Juvenile Isolation and Room Confinement in Washington State

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Abstract

Throughout the United States, the practice of isolating and confining youth for hours at a time is commonplace in juvenile facilities. The use of isolation in Washington State's juvenile system is no exception. Washington recently acknowledged the dangers of juvenile solitary confinement but continues to utilize the similar practices of isolation and room confinement today. Isolation and confinement require further examination as they can cause significant harm to a youth's social, physical, and educational development, increase youth aggression, and increase recidivism rates. Washington should reconsider whether to permit such a damaging punishment in a system purportedly committed to the rehabilitation of children. This paper initiates the conversation by thoroughly examining the current state of juvenile isolation and room confinement in Washington and proposing three potential alternative approaches to the practice. Each alternative approach is individually evaluated before final recommendations are provided.

Problem Definition

Introduction

The practice of secluding children away from their peers in juvenile facilities began as solitary confinement, in which a child is isolated in a separate cell as punishment, and the use of solitary continues to be permitted in states throughout the country (Riley). The State of Washington (WA) has recognized some of the significant potential for undue harm that the use of solitary presents (Haney) and has thus implemented reforms transforming the practice into the alternative sanctions of "isolation" and "room confinement." The working definition of isolation from Washington's Department of Children, Youth, and Families (DCYF) is when "a youth is separated from the youth population and placed in a room for longer than 15 minutes . . . in a room other than the room assigned to the youth for sleeping," while room confinement's definition simply changes the location by isolating the youth in the cell "that the juvenile is assigned to for sleeping" (Fox and Icenogle 2). However, regardless of these definition shifts, any confinement of children to a solitary room can cause serious impacts varying from developmental setbacks to increased suicidal ideation (Haney).

The risk of psychological harm wrought by isolation and confinement is so severe that the U.N. has deemed any confinement extending beyond 15 consecutive days to be torture for adults and asserts youth should never be placed in isolated confinement as the harm dealt to juveniles is compounded by the youth's ongoing development ("The United Nations"). Longterm confinement presents the most severe risks including psychosis, depression, anxiety, and increased risk of suicide and self-harm ("Position Statement"), yet even brief stints can trigger similar damaging impacts, restrict social connection, and limit meaningful rehabilitation programming (Fox and Icenogle 6-7).

The seclusion and confinement of youth for any period of time can significantly harm cognitive development, threaten progress towards rehabilitation, and exacerbate mental health issues, among several other concerns. This paper first examines the extent of and reasoning for isolation and confinement's use in Washington facilities, before proposing three potential policy approaches that escalate in the scope of reform. The first proposal is a series of reforms specifically addressing isolation and confinement policy, the second advocates for the near-total elimination of isolation and confinement beyond emergency circumstances, and the third seeks to reduce overall disruptive behavior while additionally pursuing systemic improvements such as increased staff recruitment and retention. All three alternatives will be scored in four categories and a subsequent evaluative matrix will be constructed.

Background and History

The need for a separate judicial branch managing youth delinquency is derived from an acknowledged obligation to treat youth differently from adults. Juvenile justice's purported role is to rehabilitate youths and prepare them to safely re-enter society, whereas the adult carceral system is rooted in punishment as restitution (Monahan et al. 580; United States, Supreme Court). Despite the demonstrably damaging use of prolonged solitary confinement in both systems, Washington did not acknowledge solitary is in opposition to the proclaimed goal of rehabilitation until major lawsuits were levied, one against Grays Harbor County in 2017 ("Grays Harbor County") and two against King County in 2017 ("In Response to Lawsuit") and 2021 (Hernandez). District courts found that the use of solitary on juveniles at Grays Harbor County Juvenile Detention Facility, or later in Maleng Regional Justice Center in Kent ("In Response to Lawsuit"), an adult correctional facility, constituted cruel and unusual punishment. Juveniles who are set to be tried as adults are held at adult facilities like Maleng until their trial or plea in what is known as the pre-adjudication phase. Washington youth began speaking out about their experiences, including Denis who felt himself becoming "depressed and feeling hopeless" after 16 days in isolation (Vaughn), and K.C. who began "punching the walls" and "started hearing voices" during two months in Maleng's solitary (Brownstone).

The 2017 lawsuit against King County challenged both King County's use of longterm solitary confinement and failure to provide adequate educational services, leading to a settlement and the swift passage of a ban on solitary confinement for all youth held in King County adult detention facilities ("In Response to Lawsuit"). This reform seemed a strong first step; however, an independent monitor's report on King County's compliance found 15 occasions of youth illegally held in solitary confinement in the six months following the ordinance (SJVetter Consulting 10). The 2021 lawsuit was brought by 76 juveniles placed in solitary both before and after the ban and followed the same claims as the 2017 suit, resulting in a settlement of roughly \$1.4 million (Hernandez).

These lawsuits may have caught the attention of the Washington State Legislature, as HB 2277 proceeded to "ban" solitary confinement in early 2020 (RCW 13.22.020). At least it was premised to be a ban, but in reality, Washington's definition of isolation and room confinement is near-identical to its definition of solitary confinement. The legislature only adjusted the warranted reasoning for confinement's use, codifying that isolation and confinement cannot be used as a "punishment" against youth despite continuing to allow for "disciplinary" isolation (Washington State, House). The bill did successfully implement some positive restrictions too, including limitations and standards for the use of isolation, a data collection system, and requisite visual room checks every 15 minutes (Washington State, Legislature, Juvenile Solitary Confinement Prohibited). It additionally requires facilities to document every instance of and reason for isolation, to provide reading and writing materials, and to develop a reintegration plan for any isolation lasting over four hours. Isolation and room confinement policies do not differ between juvenile detention facilities, in which youth may be held preceding adjudication, and juvenile rehabilitation facilities, in which youth may be committed after adjudication (Clark).

Causal Factors

Culture of Punishment

Solitary confinement initially rose from a misguided belief that there may be some rehabilitative function in giving prisoners time to reflect and cool down, away from aggravating factors and other prisoners (Haney). Historically, solitary was mostly phased out as early as 1890 when the Supreme Court found it to be "too severe" (Feierman et al. 3), but it rose again in the twentieth century alongside a significant increase in prison population and a cultural shift away from rehabilitation towards penal harm (Faustino et al. 8). Opposition began to form again around 2014-2016, spurred by agreements to end solitary within federal institutions (Eilperin), and yet as of April 2023, 11 states continue to impose no restrictions on solitary (Riley).

Despite its prevalence, the continued use of isolation does not find much scholarly support, as studies of isolation are often problematic and display little to no clear evidence of effectiveness. Utilizing isolation as a method to calm down youth may even have the opposite effect, as multiple studies examining solitary's impact on adults have reported increased "thoughts, feelings, or actions of anger" (Miller and Young 91). In Colorado, decreasing the use and duration of solitary by 85% resulted in prisoner-on-staff assaults hitting their lowest point in ten years. Another study observing supermax prisoners in California found that severe isolation can lead prisoners to become more, not less, violent (Shames et al. 18-20). Considering the lack of evidence-based support for isolation and confinement, it seems clear that these punishments are remnants of '90s era tough-on-crime policy and the prevailing judicial culture of punishment (Knoth 5).

Administrative Challenges

There are multiple reasons why a youth may be placed in isolation beyond discipline and behavior management, such as concerns for the youth's safety, concern that a youth will attack others, or when a youth is experiencing suicidal ideations. Safety is a significant concern both for youth, who may be targeted by their peers for some affiliation or because of a disagreement, and for staff, who are expected to manage violent youth and are sometimes assaulted. In King County's juvenile detention, a physical assault was the reason for 48% of non-administrative confinements (Olson and Scales 27). Utilizing confinement when a youth is at risk for suicidal ideation or self-harm is only permitted once less-restrictive options have been attempted, and mental health evaluations will be required before the youth is permitted to leave (RCW 13.22.005). Safety concerns can also result in the use of isolation on youth who are detained on charges serious enough to be "auto-declined," or declined from juvenile court to the adult system (Story 495). In some Washington counties, these children are held in adult detention centers but are not allowed to be held with adults, thus resorting them to solitary if no other youth are in detention at that facility (Story 517).

Overcrowding of juveniles or staff shortages is another notably frequent cause of isolation, especially at juvenile rehabilitation (JR) facilities which isolate at near double the rate of juvenile detention centers in part due to their increased youth populations (Fox and Icenogle 17). These issues may be worsening, at least in King County, where the average youth population in secure detention increased from 34.2 to 41.6 between 2022 and 2023 while juvenile detention officer vacancies simultaneously increased from 14 to 19 (Olson and Scales 3-4), and low staffing levels "are an issue state-wide" regardless (Fox and Icenogle 17). Staff shortages as well as behavioral incidents involving multiple youth can force some facilities to utilize split programming, in which staff will work with one youth, a group, or half of the youth in a unit at a time while confining the others and then rotate them (Olson and Scales 26). Confinement is also often necessary during meal prep, staff changes, and other situations when staff are pulled away for other tasks. In the first six months of 2023, King County recorded 301 instances of modified programming due to staff shortages. Shortages of licensed staff can lead to increased isolation lengths, as some isolations require qualified evaluations and assessments before a youth can be released.

Finally, systemic discrimination results in children of color, LGBTQIA+ youth, and those with disabilities or mental health challenges facing higher isolation rates. Youth in the justice system meet the criteria for a disability at more than three times the general rate for youth (Feierman et al. 15). Additionally, a 2011 Bureau of Justice Statistics report revealed that nearly 30% of adult queer inmates were in some form of restricted housing compared to 18% of heterosexual inmates ("Use of Restrictive Housing" 4), although these inmates do face some challenges unique to the adult system. Juvenile punishments are also already disproportionate as youth of color are significantly overrepresented in the juvenile system, and so increased isolation rates continue to compound the racial disparities these youth face. On average, Black male inmates are about 5% more likely to be placed in solitary, while Black female inmates are about 20% more likely (Resnik et al. 35-39). Other inmates of color also faced increased rates of solitary confinement, while white inmates were systemically underrepresented (Resnik et al. 41).

Outcomes

Developmental Harms

As youth age, their bodies, cognitive abilities, and social skills continue to develop. Research demonstrates that the brain does not fully develop until 25 years of age, which is significantly the customary division set between adult and juvenile at 18 years of age (Gagnon et al. 280). This continuous development leaves youth susceptible to additional harms of isolation that adults often do not contend with (Gagnon et al.). According to a recent Washington DCYF report examining the literature on juvenile room confinement and isolation, the "erosion of meaningful social connection" is the most notable harm ("Juvenile Room Confinement" 6-7). In isolation, opportunities to socialize, develop positive relationships, and interact with outside visitors are missed. This lack of interaction and social stimulus can have negative short-term effects and cause long-term damage over time, such as limiting a youth's ability to develop healthy, confident socialization skills.

Children in isolation also tend to receive worse educational programming or miss it entirely. Washington does require isolated juveniles to be provided with an education packet, but any student could testify to the poor learning outcomes of packet-based busy work. Particularly when "30%-60% of youth in detention and secure care" (Gagnon et al. 284) have special education needs and require intensive support, such programming cannot adequately replace the time missed with specialized instructor care. Youth may also miss other educational enrichment experiences or opportunities such as vocational training. Another developmental harm is the loss of recreation and physical activity, which youth may not be provided opportunities to make up if missed. The harms of missing physical development can be compounded by both the poor nutritional quality of meals at some facilities, and the loss of appetite that can be a symptom of substantial confinement (Gagnon et al. 284).

Psychological Harms

Isolation can inflict several distinct psychological harms on juveniles, the severity of each dependent on both the time of confinement and the juvenile's psychological state. Because confinement periods in Washington are brief, they are not likely to result in the most serious damages of solitary, such as significant increases in suicide attempts and suicidal ideations (Muir 187). Regardless, even after "very short periods" youth may still experience symptoms such as "paranoia, anxiety and depression" (Boyd). Other potential harms include, but are not limited to, cognitive disturbances, perceptual distortions and hallucinations, increased nervousness, obsessive thoughts, fear of persecution, psychosis, anger, aggression, withdrawal, and self-mutilation (Gagnon et al. 283-284).

What may be most worrisome about Washington's continued reliance on confinement is that 80% of Washington's justice-involved youth have experienced trauma (Fox and

Icenogle 8), and up to 65%-70% have a diagnosable mental illness (Gardner). Thus, utilizing confinement confers a significant risk of exacerbating mental health conditions or of retraumatizing youth. Isolation can "activate painful memories" of past traumas, and reactivation runs the risk of "undermin[ing] progress that youth have made to overcome such trauma and its negative effects" (Ohio State Legislature 1028). Youth with histories of mental illness are also the ones most likely to be placed in isolation (Fox and Icenogle 8), further compounding the harms these vulnerable youth face. Painfully, some youths end up caught in a cycle of isolation, as between 2020-2022 the top 20% of isolation events were caused by only 3% of the population, and the top 60% of isolation events were caused by roughly 20% of the population (Fox and Icenogle 17). While continued research on the psychological impacts of isolation that occurs for shorter periods is necessary, any use of confinement or isolation can lead to significant harm.

Alternatives

The following section will detail three potential alternatives to the current juvenile isolation procedure in Washington. The first alternative proposes restricting the use of disciplinary isolation, and multiple other reforms. The second alternative proposes the nearcomplete elimination of isolation and room confinement. The third and final alternative proposes strategies that seek to eliminate the circumstances exacting the use of isolation, and instead center rehabilitation. Each alternative, from a series of reforms to a systemic overhaul, represents an increasingly drastic shift away from the current punitive nature of juvenile incarceration.

Alternative #1

Reforms to Reduce the Use and Impacts of Isolation

Washington's current regulations on the use of isolation and room confinement in juvenile institutions were set in 2020 with the passage of HB 2277. Multiple of the potential reforms identified below expand on those implemented in HB 2277. Nine distinct reforms are individually identified and examined to comprise this alternative.

Juvenile facilities frequently isolate youth for "disciplinary" purposes such as rule violations or refusals to follow staff directives (HB 2277 Final Bill Report) despite the ban on punitive solitary confinement, revealing an institutional culture that is not fully committed to rehabilitation. While current institutional trainings do include isolation prevention and safe isolation procedures, increased training is needed both to combat the punitive institutional culture at JRs and better prepare staff to respond to youth aggression or misconduct. First, this alternative would implement educational training for staff on the harms of isolation and

punishment and review all alternative rehabilitative responses. Second, all training would be updated to properly emphasize the prevalence of racial and ethnic discrimination in the use of isolation and incorporate practices to limit disparities. Third, staff would be better trained in a variety of identity-conscious interventions, as research indicates gender-specific and abilityinclusive programming is most effective (Goldstein et al.). Fourth, staff would be required to familiarize themselves with restorative justice principles, which are responses that prioritize repairing harm and developing accountability ("Restorative Justice"). Finally, staff would be notified of and trained in all pursuant reforms to enable efficacious implementation.

Washington's allowance of "disciplinary" confinement undermines the purpose of banning punitive confinement. This reform suggests Washington prohibit the use of confinement for disciplinary purposes and shift to alternative sanctions (e.g., added work details, written assignments, or mediation) instead. Washington would also improve and implement behavior modification programs that rely on positive reinforcement as opposed to punishment.

Washington does currently require isolation to be a last-resort technique but does not provide an inclusive list of alternative approaches or a standard for de-escalation attempts. This reform promotes the improvement of written policy to better ensure that all potential de-escalation techniques are known and attempted. Washington could particularly promote further reference to a newly adapted protocol, Advanced Crisis Intervention Training (ACIT) which is the only certification program for responding to anger, aggression, and violence ("Promoting Safety"). While in theory these learned strategies are already being broadly implemented, this reform specifically mandates all ACIT-informed responses be attempted before isolation. Additionally, other alternative techniques would be evaluated and implemented accordingly, such as the use of de-escalation teams and of either Dialectical Behavioral Theory or Cognitive Behavioral Theory (Feierman et al. 16).

Youth are occasionally placed in confinement simply because of staff shortages or overcrowding at a facility. Further training on the importance of avoiding confinement would be implemented to reduce the rate at which staff resort to the practice out of convenience. Some broader, more substantial changes should also be considered to limit situations in which staff use isolation for convenience, particularly changes seeking to combat staff shortages and reduce juvenile populations.

Washington should reduce the length of allowed isolation or confinement from four hours down to two hours. Ohio State implemented a similar model, eliminating solitary confinement and limiting the duration of all lesser seclusions to two hours (Rademacher 1049). In the Washington model, staff would conduct visual check-ins at random intervals in 15-minute blocks and a conversational check-in every 30 minutes. If isolation reaches one hour, a certified staff member must conduct an evaluation to determine the necessity of continued isolation or confinement. Current Washington procedure requires that an institution's superintendent authorize any isolation or confinement that lasts beyond the maximum length allowed. Additionally, authorization is required from the DCYF secretary for any confinement lasting longer than 24 hours (RCW 13.22.020). This reform would modify the policy to instead require supervisor approval in all individualized confinements or the approval of the most executive staffer on site. The time before requiring DCYF secretary approval would also be decreased, requiring an approval for any confinement lasting longer than 12 hours.

Washington should also enable youth who are isolated to adequately make-up for any lost programming. For example, if a juvenile missed their physical programming, staff could provide them with replacement exercise hours later that day or the following day. If a juvenile is going to miss educational programming, perhaps the programming could be video recorded to supplement the educational packets that confined youths are provided. Additionally, allowances could be made to provide youth with individualized de-stressors while in confinement, such as specific hobbies, toys, or other stimulants to help engage the youth (if such objects are not precluded by a suicidal ideation).

As referenced earlier, between 2020-2022 the top 20% of isolation events were caused by only 3% of the population, and the top 60% of isolation events were caused by roughly 20% of the youth (Fox and Icenogle 17). This reform advocates for instituting requisite individualized behavioral therapy plans for those in the top 20% of confinements to curtail the disproportionate rates of isolation these juveniles experience. Such individualized plans would seek to specifically discern and address the root influences of frequent confinements, focusing efforts on rehabilitating those youth who are the most prone to misbehavior and aggression.

Finally, Washington should implement all 6 of the recommendations DCYF made to clarify and improve data collection processes in its 2023 report on juvenile isolation and confinement, refining as necessary (Fox and Icenogle 21-27).

Alternative #2

Eliminate the Use of Isolation

Alternative #2 advocates for the elimination of isolation, and for the use of confinement to only be permitted in limited circumstances. This second proposal also places an increased emphasis on promoting both de-escalation techniques and safe, rehabilitative responses to youth conflicts and crisis. Due to the significant differences between detention centers and rehabilitation facilities (Clark), Washington should consider implementing differing approaches at these institutions. Alternative #2 would also incorporate several of the reforms recommended in Alternative #1.

Limiting Confinements at Detention Centers and Rehabilitation Facilities

In some crisis situations, there may be no alternative that is effective at keeping a youth safe or others safe from the youth beyond separating and confining that youth from the general population. In acknowledgment of the occasional crisis need, this alternative proposes eliminating all use of isolation within juvenile detention centers but does not eliminate room confinement completely. At juvenile rehabilitation facilities Alternative #2 recommends eliminating both traditional isolation and room confinement, instead incorporating a unique approach to isolation known as a "multi-sensory de-escalation room" (MSDR), further explained on the following page. Derived from the policies of Ohio's model, room confinement or the use of MSDR's would *only* be allowed in the following three emergency situations:

1. For the protection of the child.

2. To protect another person from a child.

3. For self-protection.

Room confinement would be limited to one hour in these situations, and any such use of confinement must be signed off in writing by a supervisor. Staff would still complete a visual check of the child in 15-minute intervals and perform an evaluation of their mental state and ability to re-integrate at 30 minutes. At one hour, the child shall be released unless the professional evaluation determines they are not ready to reintegrate, at which point an individualized reintegration plan will be developed. Allowable use of MSDR confinement follows these same procedures but with exceptions to the one-hour limit as staff members will often be actively present in the MSDR, transforming it from an isolated space. If staff have been engaging in programming beyond the one-hour isolation mark, the closing professional evaluation to determine re-integration readiness should be postponed until the completion of programming.

A "multi-sensory de-escalation room" was first developed and instituted in California's Sacramento County in place of an isolation cell ("Sacramento County Probation"). These rooms include a variety of activities designed to engage and stimulate the youth and allow for non-adversarial, trauma-informed interaction between the youth and staff. Activities include games and guided reflections or facilitated conversations with staff, along with several outlets for youth to discharge their energy like fidget toys, creative materials, and beanbags or building blocks. Sacramento staff describe MSDRs as a reflective space for juveniles "blending brain science . . . sensory integration and child development" ("CSAC Challenge" 1:48-2:00). The first MSDR implementation saw isolation rates drop from a per-youth average of 28.3 hours a month in 2010 to an average of 1.6 hours a month in 2017 (Burrell and Song 84). While MSDRs would be a convincing alternative for all juvenile institutions, they may not be appropriate for much smaller, more rural juvenile detention centers as they do require money and space.



Figure 1 A teen engaging with Sacramento Probation's MSDR.

Replacing Isolation

Eliminating isolation as a tool for behavioral management would require the implementation of new, alternative approaches that do not rely on punitive practices. The new approaches would primarily consist of a mix between alternative sanctions and incentives or positive reinforcements. This reform draws on the recommendations of the Stop Solitary for Kids campaign, which advocates for the following:

Alternative behavior management options and responses, including alternative sanctions such as added work details, written assignments, mediation, limited access to canteen items, and restriction on attendance at unit events like movie showings, as well as rewards and incentives for good behavior such as special personal hygiene items, lunch with favorite staff, extra gym time, more visitation and by friends as well as family members, staying up later, and more frequent access to the library and other resource rooms. (Position Statement 2)

All these ideas for sanctions or rewards could be implemented at each facility, and any alternative or facility-specific sanctions or rewards may be implemented, as well, if approved by the facility superintendent. A creative, individualized mix of these techniques is best, and staff should be trained to determine when a sanction or an incentive is appropriate, with preference placed on positive reinforcement when possible.

Facilitating a shift towards rehabilitation in institutional culture is even more critical when fully eliminating isolation, as staff will lose a tool in their behavioral management toolkit and will face significant modifications in the protocols and training they reference. To promote staff morale and address concerns in the face of reforms that staff may perceive as decreasing

their safety and ease of work, the initial implementation should thoroughly demonstrate the effectiveness and purpose of rehabilitation and positive reinforcement. If staff perceive their duty to be the rehabilitation of youth, perhaps they will even feel an increased sense of purpose and fulfillment in their position. This alternative would also require the exhaustion of all de-escalation strategies before resorting to an emergency confinement. Individualized rehabilitation plans for those youth that are consistently confined shall also be maintained. Finally, this alternative would also require increased opportunities to make up for missed programming and realize all 6 DCYF data-collection suggestions.

Alternative #3

Eliminating the Need for Isolation (Reducing Causal Factors)

This alternative differs from the first and second by seeking to address three of the common causal factors for a youth's placement in isolation rather than reforming isolation policy itself. These three factors are youth behavior (particularly in preventing violence or self-harm), staff shortages in the system, and the number of youths in juvenile facilities. All of these reforms would additionally improve a variety of other juvenile justice outcomes and programs.

Improving Rehabilitation Effectiveness

Developing a rehabilitation-centric culture as mentioned in Alternative #1 and #2 is imperative to reducing the need for isolation. Rehabilitation models have repeatedly proven more effective than punitive responses at improving youth development and decreasing the juvenile recidivism rate, which is measured by tracking any rearrests, reconvictions, or returns to confinement after being released. Changing an institutional culture is no easy task, particularly when punishment is the foundation for internal procedure at juvenile facilities. While Washington has made attempts to push rehabilitation in the past, these attempts often flair out or do not accomplish enough. For instance, roughly 57% of youth leaving juvenile facilities in 2014-2015 did not receive the level of treatment required by even one standard of Dialectical Behavior Therapy (DBT), the primary residential treatment for JR juveniles (Fox et al. 1). All juvenile policies need critical evaluation to ensure adherence to the goal of rehabilitation, and programs such as DBT should be further expanded and made central to the JR experience.

As referenced in the first alternative, shifting a punitive culture requires an intensive institutional commitment, and, thus, most emphasis is placed on the role of the JR staff. Trainings would be instituted that thoroughly explain and practically demonstrate both the harms of punishment and the potential of rehabilitative strategies. These trainings should frame the staff's role as rehabilitators, making clear that it is their efforts, interactions, and

responses to youth that can most improve behavior and reduce recidivism (Soule & Walker). In hiring and recruiting for open positions, applicants should be screened on their perspective towards rehabilitation. Supervisors can increase accountability amongst staff by taking responsibility and leading reflections on unproductive approaches (Folz). Staff should be trained to identify other overly punitive functions and problem-solve in search of positive reinforcements or alternative sanctions to be implemented instead. Finally, Washington facilities could also complete a youth survey to further connect with and cater to the needs of those most impacted.

Combatting Staff Shortages

Improving staff–youth ratios, particularly the number of mental health specialists or staff with behavioral training, will serve to diminish the amount of youth placed in isolation out of convenience, while also enabling facilities to be more effective in programming and to better ensure staff safety. Washington's chronic understaffing has been the target of several reports in recent years, such as one 2019 report from a federal auditor who found that staffing ratios at a juvenile maximum-security facility were "out of compliance . . . every shift, every day" (Ingalls). In 2018, an independent contractor completed a comprehensive report of staffing Washington Juvenile Rehabilitation facilities, finding multiple glaring issues. The most notable finding was that current staffing cannot support full implementation of the Rehabilitative Model, and the report additionally noted failures in both supervisory and staff training, significant overtime rates, poor pay, high turnover (between 20-45%), and little recruitment or retention of staff (Hyzer Group 3-6). Improvement requires devoting substantial funding towards promoting the recruitment, training, and retention of staff.

Since this 2018 statewide report, there has been some improvement, with some counties offering a \$10,000 hiring bonus or the DCYF secretary hiring 57 more staff in 2019 (Ingalls), but the issue remains. Some potential solutions referenced, with several sourced directly from employees, include a 4/10 work week and a shift-relief factor to estimate the amount of additional staffing needed (Hyzer Group 77-79). An important reminder is that trained counselors spend nearly 80% of their time performing supervision, security, transport, and custodial care. To relieve some of this burden and enable counselors to maximize their time engaging in rehabilitative programming, more security, transport, and custodial hires are needed (79). Furthermore, recruitment should promote diversity, rehabilitation staff salaries should be disconnected from the broad state employee salaries to allow for cost-of-living adjustments in King County and better pay adjustments, and facilities should institute a staff council to address safety concerns that are contributing to high turnover (81-82). Other suggestions include ensuring continuous service bonuses, improving and diversifying job postings, streamlining and expanding the hiring process, and improving employee

recognition and staff development services ("Council of Juvenile Justice Administrators"). Some final recommendations include offering tuition reimbursement and recruiting from within by offering post-release job opportunities to youth that staff consider exemplary or that committed to rehabilitation.

Lessening Youth in Juvenile Facilities

The population of Washington juvenile institutions has been steadily decreasing since its peak in 1998, primarily due to decreasing arrest rates ("Juvenile Rehabilitation Institutional Population"). Despite population decreases, staffing ratios still struggle to keep up with the hundreds of incarcerated children. Further decreasing JR numbers would enable remaining youth to receive the best possible treatment, ensure fewer youth encounter the harmful juvenile system, and of course, lessen the amount of youth placed in isolation. Several potential approaches could be taken to drive down youth adjudications, most tending to fall under the umbrellas of either prevention or early intervention.

The most effective preventions occur as early as possible. Early prevention that acts on risk factors can prevent the onset of delinquent behavior and improve youth's general quality of life. It also saves taxpayer money, with savings of seven to ten dollars per every dollar invested in early prevention (Greenwood 185). Key risk factors can often arise within the family unit or at school; therefore, improving the effectiveness of other DYCF familial programs working with at-risk youth would additionally decrease youth offending. Improving and instituting programs within schools can assist in recognizing and addressing youth behavior, such as programming for conflict resolution, mentoring, and classroom behavior management. Improving after-school recreation opportunities and increasing community intervention would help keep youth grounded and in their community. If a youth slips through these improved social safety nets and does encounter the juvenile system, then DCYF can fall back on early intervention programs.

A youth may be redirected after initial contact with the juvenile system into a diversion program, either in replacement of adjudication or even before charges are filed. One example of an effective diversion program is the Adolescent Diversion Project, in which diverted youth are matched with a volunteer caseworker who provides tailored community-based services that focus on skill building ("Adolescent Diversion Project"). Diversion programming that extends into a youth's community is often effective as well, such as the intervention Parenting with Love and Limits, which includes therapy and training for both the child and their parents or family. Probation is also commonly utilized, often relying on Functional Family Therapy (FFT) or Multisystemic Therapy (MST) (Knoth et al. 21). FFT involves counselors working with a youth's entire family and extrafamilial influences to facilitate positive growth and development, while in MST, therapists partner with youth over long periods, coordinating with caregivers, families, schools, and other influences to uncover and promote home-based treatments targeting the origins of a youth's behavioral problems. All these programs are currently operational in Washington, but they could be improved with increased support and funding to expand and enhance effectiveness.

Evaluation of Alternatives

Evaluative Criteria

Each of the three proposed alternatives will now be scored through the lens of four separate evaluative criteria: short-term effectiveness, long-term effectiveness, ease of implementation, and political feasibility. Alternatives receive a score from 1-5 for their perceived ability to achieve each criterion, representing solely the author's perception on each alternative's potential. A 5 illustrates this author's belief that the alternative will be very successful in fulfilling that criterion, while a 1 illustrates this author's belief that the alternative will have little to no success at fulfilling that criterion. Take these scores to hold little scientific weight, as they are to be interpreted more as reference points demonstrating the distinct strengths and weaknesses of each alternative proposal. The criteria were developed dominantly in reference to "Evaluating Policy Proposals," Chapter 4 of Richard Caputo's 2014 textbook *Public Policy for Social Workers*.

Caputo defines effectiveness as "the likelihood of achieving policy goals and objectives" (61), and with substantial variation of policy goals between each alternative, effectiveness is broken down into both short-term and long-term effectiveness. Short-term effectiveness will primarily consider each alternative's likelihood of directly reducing or eliminating the use of isolation and room confinement, weighted by the scope of that reduction. The primary data references that inform short-term effectiveness are isolation and confinement rates, repeat-offender isolation and confinement rates, identity-based isolation and confinement rates, and extended isolation and confinement rates. The long-term effectiveness criterion will evaluate each alternative's potential to reduce both juvenile recidivism rates and the rates at which violent incidents or incidents of self-harm occur. These indicators are more revealing of the system's overall rehabilitative effectiveness and less of isolation and confinement-specific outcomes.

The ease of implementation criterion merges two of Caputo's chosen criteria, administrative feasibility and technical feasibility. Administrative feasibility primarily evaluates the cost of each alternative and considers staffing needs and concerns, while technical feasibility takes into account ease of fulfilling prospective technological advancements such as data collection requirements. Finally, the political feasibility criterion will defer to Caputo's political feasibility criterion, and to Caputo's separate criterion of social acceptability, defined as the extent to which the public will support a proposal. The political feasibility of each alternative may hinge more on the current legislative climate than on the content of the alternative itself but will also rely on the ability to practically demonstrate or prove that an alternative will have its intended impact. Political feasibility is likely the most theoretical criterion, as such extensive isolation and confinement reform proposals have not been seen on any legislative floor.

Alternative #1

Short-Term Effectiveness

Alternative #1 proposes the least expansive reforms, but still includes mechanisms that seek to reduce all short-term data points. Making specific reduction estimates is difficult, but as confinements to de-escalate a situation after an assault or threat account for the majority of confinements in King County detention, ensuring consistent and effective de-escalation protocols should directly address most confinements. The reforms cultivating an institutional shift towards rehabilitation will also discourage the use of confinement. With an improved staff culture and capacity, the rate of extended isolation beyond the maximum two-hour allowance should see reductions as well. As Alternative #1 additionally devotes reform towards the creation of an individualized rehabilitation plan, it should see success in decreasing the rate of repeat-offender isolation use. Alternative #1 may struggle to reduce discrimination in isolation rates, as it does not propose any reforms that would specifically address this systemic failure. However, the improvements to staff culture and the elimination of disciplinary isolation may lessen the potential for staff bias to produce discrimination. Score: 3

Long-Term Effectiveness

Examining Alternative #1, individually, reveals some sustained potential for longterm change throughout all data references due to the foundational reforms accentuating rehabilitation in culture and practice; this, combined with statistical evidence, reveals that extended isolation can increase actions of anger (Miller and Young 91). Individualized rehabilitation plans may serve to reduce violent incidents by addressing the association between youth's consistent isolation and violent incident rate. Improved de-escalation procedures should also help reduce altercations reaching physicality. Finally, while the impact of limiting isolation to two hours or less on recidivism rates has not yet been studied, longer stints in solitary confinement have consistently been shown to increase recidivism; therefore, reductions in recidivism, particularly from those who are repeatedly isolated, could be seen. The reforms increased focus on rehabilitation could also result in a decrease in recidivism. While there is some potential for long-term effective reductions, this alternative does not score high in comparison to Alternatives #2 and #3. Score: 2

Ease of Implementation

As Alternative #1 advocates for the least expansive reforms of the three, this alone secures Alternative #1's position as the easiest to implement. Implementation would still not be easy, mostly due to the costs of increased training devoted to culture shifting and training on all the new reforms. Some slight additional cost would arise from implementing DCYF's data collection recommendations, and increased funding for qualified examinations would be necessary to ensure smaller facilities can keep up with the proposed increase in mental health evaluations. Finally, as this alternative would increase the workload of staff in increasing procedural requirements for isolation and lessening the potential for convenience-based isolation, increased staffing numbers or support would help ensure adherence to each of the reforms. Score: 4

Political Feasibility

The first alternative, while still a substantial shift in institutional procedure, requires the least expansive reforms. Eliminating disciplinary isolation should be feasible as the legislature has already shown an aversion to purely punitive practices in juvenile rehabilitation. Eliminating disciplinary isolation has also been achieved in Ohio, along with the reduction of isolation maximums down to two hours (Ohio State Legislature). However, there has not been any definitive research comparing the harms between four and two-hour isolations and so this reform may require evidence-based study to ground political support. Additionally, there will likely be pushback on the increased workload and increased training for staff as institutions are already so short-handed. Alternative #1 is the most politically feasible of the three on account of its less-substantial reforms, but legislation may still falter depending on the political climate. Score: 3.5

Alternative #2

Short-Term Effectiveness

The second alternative would be extremely effective in the short term, as it directly eliminates nearly all uses of isolation and confinement, barring any illegal use. There will still be the occasional emergency confinement or use of a MSDR, and so short-term data for extended, repeat, or identity-based confinements can be collected. Any extended use should be significantly reduced as both supervisory approval and evaluation plans would be required in all extensions, and as MSDRs are established to reduce youth aggression (Burrell and Song 84). Repeat-offender rates should also see more significant reductions with improved behavioral management practices and decreased confinement opportunities, and discrimination rates should similarly be further reduced because of less staff discretion in the use of confinement. Score: 4.5

Long-Term Effectiveness

The elimination of isolation and other reforms proposed in Alternative #2 would likely be more effective than Alternative #1 in reducing recidivism and incidents of violence as isolation could no longer worsen these metrics. Reducing disturbances and improving behavioral responses also improves the effectiveness of rehabilitative programming designed to decrease both violent tendencies and recidivism. As many other factors beyond isolation contribute to youth violence and recidivism, this alternative is not the most effective long-term but should still produce noticeable results regardless. Score: 3

Ease of Implementation

The second alternative would incur all the same implementation costs associated with Alternative #1, as it is introducing essentially all the same base reforms. Some additional costs of Alternative #2 include increased training as new behavioral management procedures are incorporated and somewhat increased staffing needs to ensure all de-escalation practices are followed. Finally, the implementation of a MSDR at larger facilities will require some investment. However, Sacramento County's MSDR only cost \$5,000 to implement (Burrell and Song 85) as they already had an open room, and seeing as most Washington's juvenile facilities are not at capacity, there will likely be unused space to implement an MSDR. Most of the cost of MSDR implementation would instead be incurred through room remodeling and the purchase of sensory tools and de-escalation materials, along with increased staff presence when one-on-one programming is utilized. Score: 3

Political Feasibility

In advocating for the complete elimination of juvenile isolation, Alternative #2 will raise many more eyebrows than Alternative #1. If the harms of isolation are not properly demonstrated, it may be seen as "going too far" or "unnecessary" despite being, again, similar to Ohio's current emergency-only protocol. This proposal does have a few more phases than Ohio's by pushing for a more substantial reform of behavioral management practices, increasing focus on institutional culture, implementing MSDRs, and bringing confinement down from two hours to one. Passing Alternative #2 would require a substantial advocacy effort, and these additional reforms would need to be very thoroughly justified, but if these burdens can be overcome there is still some political feasibility. Score: 2.5

Alternative #3

Short-Term Effectiveness

The third alternative will have some significant struggles with short-term effectiveness, as it is a long-term alternative. All the reforms listed in Alternative #3 would take years to properly implement and significantly longer to see tangible results. While all isolation data points would begin to see reductions, it would be at a much slower rate, making this the least effective alternative in the short term. Score: 1.5

Long-Term Effectiveness

What Alternative #3 may be lacking in short-term effectiveness, it remedies through promoting long-term effectiveness as the reforms proposed in this alternative are specifically designed to influence the two long-term data points. Effective, successful rehabilitation programming would directly reduce the number of violent incidents and help youth avoid self-harming tendencies, while also reducing the likelihood of a youth reoffending after their release. Additionally, if staffing needs are fulfilled, staff can devote more time to rehabilitative programming and individualized care, further decreasing violent altercations and combatting recidivism. Finally, reducing the overall number of juveniles would directly reduce the frequency of violent altercations, and, again, help allow staff to devote more individualized care. Score: 5

Ease of Implementation

As the most expansive alternative, Alternative #3 would be the most difficult to implement. The most significant expense of Alternative #3 would be the implementation of procedures to reduce staff shortages. The most important improvements to staff recruitment and retention can be made through increasing pay, benefits, and the resources offered to staff. To truly solve shortages, millions of dollars must be invested into staffing statewide, and juvenile populations must be substantially decreased. Current training and procedures would also need to be overhauled, requiring an increase in cost compared to the training costs of the first two alternatives. Finally, increasing youth diversions requires increased implementation funding initially, but this reduction will also result in decreased funding needs at juvenile institutions. Score: 2

Political Feasibility

In stepping back from isolation-based reforms, Alternative #3 also shies away from evidence-based reforms. Little empirical study has or can be performed on the effectiveness of such reforms, indicating Alternative #3 would likely face a lot of criticism for a lack of grounding and a lack of realism. Sweeping shifts encouraging procedural rehabilitation would also require a more substantial reorganization of juvenile institutions than the other alternatives, likely burdening several stakeholders. Legislative support for juvenile incarceration has not yet waned enough for a full shift towards rehabilitation to be feasible, but perhaps an increased emphasis on diversion could still find support. Score: 1.5

Evaluative Matrix

The total score assigned to each alternative is representative of the author's faith in its likelihood of being passed and effectively implemented with demonstrable reductions in the damaging use of isolation and room confinement. To re-center each proposal towards this overall goal of achieving a successful reduction or even elimination of confinements, the short-term effectiveness criterion that specifically considers isolation and confinement rates is weighted as doubly influential. Long-term effectiveness is influential in that several additional benefits would be extended throughout the juvenile system, but reforms targeting recidivism and violent incidents would be less successful in directly influencing isolation and confinement rates; thus, the weight of long-term effectiveness was not increased. Ease of implementation improves the effectiveness of each alternative, but as some implementation struggles will not necessarily capsize an alternative, the weight of ease of implementation was not increased. Political feasibility is critical to the successful reduction or elimination of isolation and room confinement as each alternative must first be passed by the legislature; hence, the weight of political feasibility is multiplied by 1.5.

	Short-term Effectiveness (Score * 2)	Long-term Effectiveness (Score)	Ease of Implementation (Score)	Political Feasibility (Score * 1.5)	TOTAL
Alternative #1	(3) 6	2	4	(3.5) 5.25	17.25
Alternative #2	(4.5) 9	3	3	(2.5) 3.75	18.75
Alternative #3	(1.5) 3	5	2	(1.5) 2.25	12.25

 Table 1 Evaluative matrix estimating each alternative's fulfillment of the four identified criteria.

Recommendations and Rationale

This evaluative matrix demonstrates the strengths and weaknesses of each alternative. Alternative #1 is not as effective as other alternatives in both the short and long-term but is easier to implement and more politically feasible. Alternative #2 is the most effective in the short-term and decently effective long-term but sacrifices some ease of implementation and feasibility. Alternative #3 is barely effective in the short-term but holds by far the most longterm potential, while sacrificing the ease of implementation and feasibility even further. While the evaluative results somewhat prefer Alternative #2, it is important to ensure the alternative most in-line with the state's priorities is selected, and to consider room for improvement or lessons that can be learned from the other alternatives.

The second alternative is successful in treading a middle ground with at least a 3 in every evaluative criterion, but it also receives a significant boost from scoring best in the heaviest-weighted criteria. The elimination of isolation provides a clear short-term result that could be rapidly implemented following the completion of new trainings and construction of MSDRs. In making significant allowances for the use of confinement in emergency situations, it is difficult to argue for any productive confinement uses that would be banned, and it would likely be much easier to mobilize public opinion around eliminating isolation as opposed to Alternative #3's broad changes. Despite Alternative #2's success, a recommendation that would be more effective in benefiting the whole juvenile system would be to institute aspects of every alternative.

If these three alternatives were implemented as a sequence of changes, it is likely that ideal improvements in both short- and long-term effectiveness could be met, while also encouraging political feasibility and further enabling the implementation of the next alternative in sequence. As the initial isolation reduction is most feasible and easiest to implement, passing this measure would help make an immediate short-term effect while increasing public perception on the ills of isolation and improving institutional culture. Moving to eliminate the use of isolation would ensure short-term effectiveness and implementing the reforms of Alternative #3 as the final step would secure the long-term elimination of confinement.

Conclusion

Limiting the isolation and confinement of juveniles has the potential to indirectly decrease rates of youth violence, self-harm, and recidivism, while mitigating the direct damages youth placed in confinement face. Through careful, comprehensive reform, isolation and confinement use can be significantly reduced. Reforms critical to any considered proposal

include developing an institutional culture that promotes rehabilitation, procedures to reduce staff shortages, ensuring proper data collection, and either limiting or eliminating isolation. The most impactful approach would be to pass the dominant reforms of all three proposals at staggered intervals, promoting the political feasibility of each phase while addressing youth isolation and confinement as immediately and expansively as possible.

In an ideal world, pursuing this staggered approach would achieve extreme shortand long-term success. However, the difficulties of planning, advocacy, and implementation also significantly increase with this approach. If only one alternative was to be selected, the elimination of isolation should be the legislation's top priority as it is the most effective at immediately improving the short-term conditions of juvenile incarceration. The second priority should be improving staff recruitment and retention. Staff shortages are increasing isolation rates, significantly harming both the frequency and quality of rehabilitative programming, and place staff at increased risk. Reducing staff shortages will help combat all these systemic struggles.

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