



The Dangers of Isolation for Young Adults in the Custody of the New York City Department of Correction

Public Comment Submitted by Children's Rights
to the New York City Board of Correction Regarding
Rulemaking on Local Law 42 Banning Solitary Confinement

June 12, 2024

I. Introduction

Children's Rights is a national legal and policy advocacy organization dedicated to improving the lives of children living in or impacted by America's child welfare, immigration, juvenile legal, education, and healthcare systems. We use civil rights impact litigation, advocacy and policy expertise, and public education to hold governments accountable for keeping children safe and healthy. Our work centers on creating lasting systemic change that will advance the rights of children for generations.

As we previously explained in our December 2014 Public Comment, research from biology, neuroscience, and social science shows that youth development does not end at age 18. This finding has only been reinforced since then. Young people continue to mature well into their mid-twenties, making them uniquely vulnerable to the trauma and stress of living in isolation. This is especially true for the adolescents and young adults in child welfare and criminal legal systems, who are more likely to enter these systems with mental health conditions that are subsequently untreated and even exacerbated. Young people require supports that respond to these needs.

As the Board of Correction drafts and promulgates rules to implement Local Law 42 banning solitary confinement in the City's jails,¹ we urge the Board to eliminate Enhanced Supervision Housing (ESH), Secure Unit, and the Risk Management Accountability System (RMAS), and to bring any form of restrictive housing into strict compliance with Local Law 42's provisions concerning out-of-cell time, congregate activities, de-escalation, length of stay, and more. Any method of isolation not in compliance with Local Law 42 would be punitive segregation, and tantamount to torture for all incarcerated persons, especially for youth up to age 25.²

¹ New York City Administrative Code, Title 9: Criminal Justice, Ch. 1: Department of Correction, § 9-167 Solitary Confinement. Rulemaking to implement Local Law 42 has provided this opportunity for Children's Rights to update our December 2014 Public Comment, *Older Youth Development: Insights from Child Welfare and Implications for New York City Department of Correction Policy and Practice*.

² "United States: Prolonged solitary confinement amounts to psychological torture, says UN expert," United Nations Human Rights Office of the High Commissioner, February 28, 2020, <https://www.ohchr.org/en/press-releases/2020/02/united-states-prolonged-solitary-confinement-amounts-psychological-torture>; Columbia University Center for Justice, *Solitary by Many Other Names: A Report on the Persistent and Pervasive Use of Solitary*

We also urge the Board to ensure that all work with young adults in New York’s criminal legal system complies with the Minimum Standards governing correctional facilities³ and incorporates the recommendations and best practices described below. This is critical for supporting incarcerated youth not only now while Rikers is being governed largely by executive order, but also when the Island closes and young adults are housed in the new borough-based jails.⁴

II. Children’s Rights’ Positions

Following is a brief outline of our positions, which are described in more detail in Sections IV through VII.

The New York City Department of Correction should revise its categorization of young adults to include all youth from ages 18 to 25, not just youth from ages 18 to 21.⁵

Children’s Rights joins with other advocates and the New York Advisory Committee to the U.S. Commission on Civil Rights⁶ to urge the Board of Correction to protect young people ages 18 to 25 by excluding them from punitive segregation.⁷ Neural pathways established during adolescence and young adulthood are critically important to brain development.⁸ Neuroscience research has found that the brain, including the frontal lobe, which regulates judgment, reasoning, decision-making, impulsivity, and emotions, is not fully mature until the early to mid-twenties.⁹ In fact, the frontal lobe undergoes far more change during young adulthood than at any other stage

Confinement in New York City Jails (2023), <https://centerforjustice.columbia.edu/news/new-report-solitary-many-other-names-report-persistent-and-pervasive-use-solitary-confinement>.

³ New York City Administrative Code, Title 40: Board of Correction, Ch. 1: Correctional Facilities. Chapter 1 is referred to as the “Minimum Standards” regulating conditions of confinement and correctional and mental health care in all City correctional facilities, <https://www.nyc.gov/site/boc/jail-regulations/jail-regulations.page>.

⁴ See, e.g., Emergency Executive Order 601, <https://www.nyc.gov/office-of-the-mayor/news/601-003/emergency-executive-order-601>; A Roadmap to Closing Rikers, *NYC Borough-Based Facilities*, <https://rikers.cityofnewyork.us/nyc-borough-based-jails/>.

⁵ New York City Administrative Code, Title 40: Board of Correction, Ch. 1: Correctional Facilities, § 1-02(b) and (c) Classification of People in Custody.

⁶ New York Advisory Committee to the U.S. Commission on Civil Rights, *The Solitary Confinement of Youth in New York: a Civil Rights Violation* (2014), at 31, 56.

⁷ New York City Administrative Code, Title 40: Board of Correction, Ch. 1: Correctional Facilities, § 1-17(b)(1)(i) Limitations on the Use of Punitive Segregation.

⁸ Jim Casey Youth Opportunities Initiative, *The Adolescent Brain: New Research and its Implications for Young People Transitioning from Foster Care* (2011), at 7-8; National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Division of Behavioral and Social Sciences and Education; Board on Children, Youth, and Families; Committee on the Neurobiological and Socio-behavioral Science of Adolescent Development and Its Applications, *The Promise of Adolescence: Realizing Opportunity for All Youth* (Emily P. Backes and Richard J. Bonnie, eds., 2019).

⁹ Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 20-23; Adam Ortiz, American Bar Association Juvenile Justice Center, *Adolescence, Brain Development and Legal Culpability* (2004), at 1-2; Child Welfare Information Gateway, *Helping Youth Transition to Adulthood: Guidance for Foster Parents* (2018), at 3, https://www.childwelfare.gov/pubPDFs/youth_transition.pdf; Jim Casey Youth Opportunities Initiative, *The Road to Adulthood* (2017), at 8-9, <https://assets.aecf.org/m/resourcedoc/aecf-theroadtoadulthood-2017.pdf>; Richard Mendel, *Why Youth Incarceration Fails: An Updated Review of the Evidence*, The Sentencing Project, Mar. 1, 2023, <https://www.sentencingproject.org/reports/why-youth-incarceration-fails-an-updated-review-of-the-evidence/>.

of life;¹⁰ experiences during this period shape young people’s futures as adults.¹¹ In particular, chronic adverse experiences can “permanently alter the functioning of key neural systems involved in learning, memory, and self-regulation.”¹² As a result, young people ages 18 to 25 have unique needs and face a serious risk of harm if subjected to chronic adverse experiences such as excessive isolation while in custody.

Solitary confinement is inappropriate for older youth up to age 25.

Local Law 42 recognizes the devastating consequences of excessive isolation on incarcerated persons; the Board of Correction should fully incorporate the law’s language in its rulemaking. Other forms of solitary confinement must be abolished as part of this process. For example, RMAS, which was developed in 2021 but is currently suspended, is the latest iteration of solitary confinement; it was supposed to replace ESH, another form of punitive segregation for young adults. (Secure Unit is yet another form of solitary confinement for young adults that unduly restricts out-of-cell time.) In violation of Local Law 42’s ban on solitary confinement, RMAS would lock young people in their cells for 12 to 14 hours a day, and limit their access to visitation and participation in programming.¹³

This is wholly counter-productive for older youth, who need developmentally appropriate services and connections with community. Older youth up to age 25 should always have 14 hours a day of out-of-cell time in accordance with Local Law 42¹⁴ and New York City’s Minimum Standards regulating lock-in time in non-restrictive housing.¹⁵

Adequate and quality programming, education, mental health services, and recreation are essential to improving conditions in the City’s jails.

The Department must take meaningful steps to fulfill the stated mission of the Young Adult Plan “to provide all young adults in . . . custody with comprehensive, individualized, outcome-oriented jail and community-based services in safe environments.”¹⁶

Every day, young adults must receive Local Law 42’s prescribed seven hours of programming in a group setting, and one hour of recreation.

¹⁰ ABA Juvenile Justice Center, *Adolescence, Brain Development and Legal Culpability*, *supra* note 9, at 2.

¹¹ Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 7-8.

¹² *Id.*; Philip A. Fisher *et al.*, *A Translational Neuroscience Perspective on the Importance of Reducing Placement Instability Among Foster Children*, 92 *Child Welfare* 9, 11 (2015).

¹³ New York City Administrative Code, Title 40: Board of Correction, Ch. 6: Restrictive Housing in Correctional Facilities, § 6-03(b)(16) Definition of Restrictive Housing and Related Terms and § 6-16 Required Out-of-Cell Time; Columbia University Center for Justice, *Solitary by Many Other Names*, *supra* note 2.

¹⁴ New York City Administrative Code, Title 9: Criminal Justice, Ch. 1: Department of Correction, § 9-167(b) Solitary Confinement.

¹⁵ New York City Administrative Code, Title 40: Board of Correction, Ch. 1: Correctional Facilities, § 1-05 Lock-in; Columbia University Center for Justice, *Solitary by Many Other Names*, *supra* note 2.

¹⁶ NYC Department of Correction, *Presentation to the Board of Correction on the Young Adult Plan* (2017), at 3, https://www1.nyc.gov/assets/doc/downloads/press-release/BOC_YA_presentation_n.pdf; *see also* NYC Board of Correction, *Young Adult Plan*, <https://www.nyc.gov/site/boc/jail-regulations/ya-plan.page> and NYC Department of Correction, *2020-2021 Young Adult Plan*, https://www.nyc.gov/assets/doc/downloads/pdf/2020-2021_Young_Adult_Plan.pdf.

Appropriate training is critical for effectively working with older youth up to age 25.

Department of Correction staff do not have the appropriate training and skills to work with adolescents and young adults.¹⁷ During this limited window of time, older youth have the chance to develop the knowledge and skills that will help them navigate the adult world.¹⁸ No one benefits from continuing to warehouse older youth without regard to their developmental needs and the opportunities to promote positive outcomes. The Department must provide corrections staff specific, developmentally-appropriate, ongoing training that recognizes that adolescents and young adults up to age 25 are different from older adults.

III. M.B.'s Experience in New York's Foster and Criminal Legal Systems

M.B. is a formerly incarcerated young adult on Rikers. He reflects the widely-recognized overlap between young people involved in the child welfare and criminal legal systems.¹⁹ As many who work in these fields agree, “[y]outh involved in the child welfare and juvenile justice systems are among the most vulnerable children in society.”²⁰ Historically marginalized adolescents and young adults are disproportionately represented in both systems: “[y]outh who have contact with these systems are overwhelmingly poor, from [Black and Brown] populations, and tend to have limited access to social supports and resources that might allow them to avert system involvement.”²¹

After being removed from his mother's home, M.B. entered New York's foster system when he was six years old. He was placed for the first year with a verbally and physically abusive foster parent. He then bounced from placement to placement, living in four separate foster homes, before spending three years in his final placement. While in the foster system, he was diagnosed with mental health conditions and was prescribed medications that made him feel “empty and blank.” He had to fight every day and felt like he “couldn't be a kid” because he had to suppress his feelings. M.B. returned to his mother's home when he was 11 after she advocated for five years for his return.

¹⁷ Status Report of the *Nunez* Independent Monitor (Apr. 18, 2024), at 50, 153, 225; Status Report of the *Nunez* Independent Monitor (Dec. 22, 2023), at 87-88; Status Report on DOC's Action Plan by the *Nunez* Independent Monitor (Nov. 8, 2023), at 73, 117; see Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 28-32 (discussing trauma-informed child welfare practice and positive youth development models) and at 33-37 (providing recommendations to guide child welfare practice); Ellen Yaroshefsky, *Rethinking Rikers: Moving from a Correctional to a Therapeutic Model for Youth, Proposal for Rule-Making Report for the NYC Board of Correction* (2014), at 44-48.

¹⁸ Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 7-8.

¹⁹ See Casey Family Programs, *Improving Outcomes for Older Youth in Foster Care* (2008), at 4; see also Denise C. Hertz *et al.*, *Challenges Facing Crossover Youth: An Examination of Juvenile-Justice Decision Making and Recidivism*, 48 Fam. Ct. Rev. 305, 305-06 (2010); Miriam Aroni Krinsky, *A Not So Happy Birthday: The Foster Youth Transition from Adolescence into Adulthood*, 48 Fam. Ct. Rev. 250, 251 (2010); Miriam Aroni Krinsky, *Disrupting the Pathway from Foster Care to the Justice System – A Former Prosecutor's Perspectives on Reform*, 48 Fam. Ct. Rev. 322, 324-25 (2010); Lauren Wylie, *Closing the Crossover Gap: Amending Fostering Connections to Provide Independent Living Services for Foster Youth who Crossover to the Justice System*, 52 Fam. Ct. Rev. 298 (2014).

²⁰ Jennifer K. Pokempner *et al.*, *The Legal Significance of Adolescent Development on the Right to Counsel: Establishing the Constitutional Right to Counsel for Teens in Child Welfare Matters and Assuring a Meaningful Right to Counsel in Delinquency Matters*, 47 Harv. C.R.-C.L. L. Rev. 529, 529 (2012).

²¹ *Id.* (citations omitted).

Unfortunately, shortly after he graduated from high school, M.B. was arrested and charged with grand larceny. M.B. was detained for 15 months on Rikers Island. He applied for mental health services as soon as he arrived; however, he did not receive any until five months before he was released. Initially, M.B. was able to see a therapist once a week, but after eight sessions, only twice a month. Nevertheless, M.B. found these therapy sessions to be helpful in processing the violence and trauma he faced while incarcerated and in the foster system.

M.B. was sent to Rikers' Transitional Restorative Unit (TRU) three times, where he was only able to leave his cell for two or three hours each day. During his third stay at TRU, M.B. was locked alone in his cell for an entire week due to an incident that occurred on the unit before he arrived. M.B. was prohibited from participating in any programming while at TRU.

Despite sporadic mental health resources and the lack of access to recreation, M.B. took advantage of the limited programming available on Rikers. He obtained certificates in construction, scaffolding, and welding. He sometimes worked in the kitchen during the night shift.

M.B. returned to his mother's home at age 20. At almost 22, he is still struggling to find affordable housing. He has been working for a nonprofit focusing on probation and parole, whose staff he had met on the Island. M.B. also advocates for reforms on Rikers Island, including the need for (a) increased access to programming and recreation; (b) officers to show up for work; (c) family and friends to be able to visit the Island more frequently; and (d) detainees to have information about their charges prior to court hearings.

Young adults, especially young men of color like M.B., commonly find themselves moving from the foster system to corrections systems. "Former foster youth are ten times more likely to be arrested than other youth of the same age, race, and sex, and twenty-five percent of emancipated youth will spend time in jail within two years of leaving the system."²² One study found that children who were victims of maltreatment had a 55 percent increased risk of arrest and a 96 percent increase in risk for arrest for a violent crime when compared with children who had not suffered abuse or neglect.²³ Another study found that by age 23 or 24, 81 percent of young men who had been in the foster system reported having been arrested, compared with only 17 percent of the general public.²⁴

The overlapping populations and experiences of older youth in the foster system and correctional settings provide opportunities to share therapeutic practices that are trauma-informed and developmentally appropriate (*e.g.*, cognitive behavioral therapy, skill-building, alternative discipline) across systems, and to inform policy decisions to improve outcomes for young adults incarcerated in the City's jails.²⁵

²² Wylie, *Closing the Crossover Gap*, *supra* note 19, at 300 (citing Krinsky, *A Not So Happy Birthday*, *supra* note 19, at 251).

²³ Janet Wiig & Cathy Spatz Widom, *Understanding Child Maltreatment & Juvenile Delinquency: From Research to Effective Program, Practice, and Systemic Solutions* (2003), at 2.

²⁴ Jim Casey Youth Opportunities Initiative, *Foster Care to 21: Doing it Right* (2011), at 2.

²⁵ See, *e.g.*, Yaroshefsky, *Rethinking Rikers*, *supra* note 17, at 25, 31-32.

IV. Youth Does Not End at Age 21: Development Continues Through Early Adulthood

Adolescents and young adults involved with the child welfare and criminal legal systems have much in common. Both populations of youth disproportionately experience domestic and community violence,²⁶ mental and physical abuse and neglect,²⁷ chronic and acute mental and behavioral health conditions,²⁸ unmet physical and dental health needs,²⁹ substance use,³⁰ and educational disadvantages.³¹ They also share a likelihood of compromised social and family networks that would normally help older youth establish effective life skills during this time of intense emotional and cognitive development.³²

While most young adults in the general public have access to emotional support systems through their early adult years, older youth involved with the child welfare and criminal legal systems often do not have these supportive relationships in place, and may face obstacles to building supports that ease the transition to adulthood. Older youth need ongoing support and services; without them, they are “more likely to be unemployed or underemployed, to require long-term government support, and to experience life-long difficulties” including involvement with the criminal legal system, low educational attainment, and homelessness.³³ Studies show that incarceration reduces youth’s success in education and employment, and also leads to lasting

²⁶ American Academy of Pediatrics, Task Force on Health Care for Children in Foster Care, *Fostering Health: Health Care for Children and Adolescents in Foster Care* (2d ed. 2005), at 3 (foster system); American Academy of Pediatrics, *Advocacy and Collaborative Health Care for Justice-Involved Youth*, 146, *Pediatrics* 1, 2 (2020), <https://pediatrics.aappublications.org/content/pediatrics/146/1/e20201755.full.pdf>; Jim Casey Youth Opportunities Initiative, *Trauma-Informed Practice with Young People in Foster Care* (2012) (foster system).

²⁷ Yaroshefsky, *Rethinking Rikers*, *supra* note 17, at 18 (juvenile legal); Jim Casey Youth Opportunities Initiative, *Trauma-Informed Practice*, *supra* note 26, at 1 (foster system).

²⁸ U.S. Department of Justice, United States Attorney, Southern District of New York, *CRIPA Investigation of the New York City Department of Correction Jails on Rikers Island* (2014), at 47 (juvenile legal); Yaroshefsky, *Rethinking Rikers*, *supra* note 17, at 25 (criminal legal); American Academy of Pediatrics, *Fostering Health*, *supra* note 26, at ix (foster system).

²⁹ American Academy of Pediatrics, *Fostering Health*, *supra* note 26, at ix, 1-3 (foster system); American Academy of Pediatrics, *Advocacy and Collaborative Health Care*, *supra* note 26, at 2, 6.

³⁰ Yaroshefsky, *Rethinking Rikers*, *supra* note 17, at 25 (Rikers); Jim Casey Youth Opportunities Initiative, *Trauma-Informed Practice*, *supra* note 26, at 3 (foster system).

³¹ American Academy of Pediatrics, *Fostering Health*, *supra* note 26, at 2 (foster system); Yaroshefsky, *Rethinking Rikers*, *supra* note 17, at 12 (citing Alan Singer, *Rikers Island – Last Stop on the New York City School-to-Prison Pipeline*, *Huffington Post*, Feb. 3, 2012, http://www.huffingtonpost.com/alan-singer/rikers-island-prison_b_1252325.html) (juvenile legal).

³² David Altschuler *et al.*, Center for Juvenile Justice Reform and Jim Casey Youth Opportunities Initiative, *Supporting Youth in Transition to Adulthood: Lessons Learned from Child Welfare and Juvenile Justice* (2009), at 8-9; *see also* Mendel, *Why Youth Incarceration Fails*, *supra* note 9.

³³ Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 12; Rachel Rosenberg & Samuel Abcott, *Supporting Older Youth Beyond Age 18: Examining Data and Trends in Extended Foster Care*, *Child Trends*, June 3, 2019, <https://www.childtrends.org/publications/supporting-older-youth-beyond-age-18-examining-data-and-trends-in-extended-foster-care>; Annie E. Casey Foundation, *Fostering Youth Transitions: Using Data to Drive Policy and Practice Decisions* (2018), at 2-3, <https://assets.aecf.org/m/resourcedoc/aecf-fosteringyouthtransitions-2018.pdf>.

damage to their health and well-being.³⁴ Studies also show that alternatives to incarceration lead to better outcomes for youth and adolescents, all while costing far less than incarceration.³⁵

For nearly 40 years, the federal government has recognized that adolescents and young adults in the foster system are usually less prepared to begin life on their own. Since 1986, the federal government has provided funding to states to help prepare adolescents in the foster system for the transition to adulthood.³⁶ Today, states are charged with providing life skills preparation, housing support, and educational, vocational, and employment training services for adolescents up to age 21.³⁷ Federal law permits states to claim federal reimbursement for providing youth up to age 21 with basic necessities, including housing assistance and case management services.³⁸ The federal government has also authorized funding for education and training vouchers to cover the cost of postsecondary education until age 23.³⁹ As of 2014, eligible young people who emancipate from the foster system are covered under a mandatory Medicaid pathway until age 26.⁴⁰ Implementation of these policies demonstrates how our child welfare and healthcare systems have adapted to reflect current research on youth development. It is long past time for New York's criminal legal system to do the same.

The codified acknowledgement that older youth in the foster system require ongoing support after they attain the legal age of majority is reinforced by decades of scientific research.⁴¹ The concept of emerging adulthood – that young people gradually move toward independence rather than achieving independence at a pre-determined age – has become well-developed in recent years.⁴² Research from a number of social science fields has shown that the acquisition of critical life skills happens gradually throughout adolescence and into the mid-twenties.⁴³

³⁴ Mendel, *Why Youth Incarceration Fails*, *supra* note 9.

³⁵ *Id.*

³⁶ Independent Living Initiative of 1986, Pub. L. No. 99-272 (providing funding for services to prepare young adults in foster systems for independent living).

³⁷ Foster Care Independence Act of 1999, Pub. L. No. 106-169.

³⁸ Fostering Connections to Success and Increasing Adoptions Act of 2008, Pub. L. No. 110-351.

³⁹ Promoting Safe and Stable Families Amendments of 2001, Pub. L. No. 107-133.

⁴⁰ Patient Protection and Affordable Care Act of 2010, Pub. L. No. 111-148.

⁴¹ MacArthur Foundation & Models for Change Resource Center Partnership, *Because Kids are Different: Five Opportunities for Reforming the Juvenile Justice System* (2014), at 6; Rosenberg & Abcott, *Supporting Older Youth Beyond Age 18*, *supra* note 33; *see also* Child Welfare Information Gateway, *Extension of Foster Care Beyond Age 18* (2017), at 2, <https://www.childwelfare.gov/pubPDFs/extensionfc.pdf>.

⁴² Jim Casey Youth Opportunities Initiative, *Success Beyond 18: A Better Path for Young People Transitioning from Foster Care to Adulthood* (2013), at 8 (citing Jeffrey Arnett, *Emerging Adulthood: The Winding Road from the Late Teens Through the Twenties* (2004)); Vincent Schiraldi *et al.*, *Community-Based Responses to Justice-Involved Young Adults* (2015), at 2, <https://www.ojp.gov/pdffiles1/nij/248900.pdf> (“young people ages 18-24 are more developmentally akin to juveniles than fully mature adults.” Young adults have a greater need for support to enter adulthood than they did 40 years ago, and when one compares “young adulthood in the 19th and 21st centuries, it is no exaggeration to say that 22 is the new 16”); Jim Casey Youth Opportunities Initiative, *The Road to Adulthood*, *supra* note 9, at 8-9, 12; Child Welfare Information Gateway, *Helping Youth Transition to Adulthood*, *supra* note 9, at 3.

⁴³ Altschuler *et al.*, *Supporting Youth in Transition to Adulthood*, *supra* note 32; Child Welfare Information Gateway, *Helping Youth Transition to Adulthood*, *supra* note 9; *see also* Mendel, *Why Youth Incarceration Fails*, *supra* note 9.

This developmental period is also a time of greater risk, when a youth’s environment can have substantial influence on decision-making.⁴⁴ Research has shown that the window of opportunity to positively affect youth development and promote resilience closes in the mid-twenties.⁴⁵ Adults working with older youth should address their need for family supports, education and training, employment, community involvement, adequate physical and mental health supports, and supportive relationships with others.⁴⁶

The MacArthur Foundation has reported that in juvenile legal systems, “[t]he most effective programs and services are those that seek to meet youth’s needs and influence their development in a positive way, by promoting contact with prosocial peers and adult role models, actively engaging parents and family members, offering tools to deal with negative influences that youth may face in their communities, and engaging youth in educational programming and employment that will prepare them for conventional adult roles.”⁴⁷

This is no less true for young adults ages 18 to 25. Regular, consistent access to quality programming, educational opportunities, mental health services, and recreation would also go a long way toward reducing violence on Rikers, and reducing the need for youth to be placed in restrictive housing in the first place.⁴⁸ Unfortunately, the City’s recent budget cuts, among other policies, make these services all but unavailable for months on end; a recent court filing underscores in particular the ongoing lack of access to education on the Island.⁴⁹

V. Youth Development and the Criminalization of Mental Health

Mental health is integral to overall health and well-being, especially for adolescents, shaping their development and influencing their responses to stress and social interactions, and supporting healthy decision-making.⁵⁰ Across the country, including in New York City, the lack of investment in accessible community mental health services results in police and agents of other punitive systems responding to children and young adults experiencing psychiatric distress, rather

⁴⁴ MacArthur Foundation *et al.*, *Because Kids are Different*, *supra* note 41, at 5-6; Jim Casey Youth Opportunities Initiative, *Success Beyond 18*, *supra* note 42, at 5 (citing World Health Organization, *Adolescent Development* (2012)); National Academies of Sciences, *The Promise of Adolescence*, *supra* note 8.

⁴⁵ Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 14.

⁴⁶ *See id.*; Annie E. Casey Foundation, *Fostering Youth Transitions*, *supra* note 33.

⁴⁷ MacArthur Foundation *et al.*, *Because Kids are Different*, *supra* note 41, at 7; Jim Casey Youth Opportunities Initiative, *The Road to Adulthood*, *supra* note 9, at 19.

⁴⁸ *See, e.g.*, Status Report by the Nunez Independent Monitor (Apr. 18, 2024), at 6-7, 255-256, <https://tillidgroup.com/projects/nunez-monitorship/>; Status Report by the Nunez Independent Monitor (Nov. 15, 2023), at 3-4, <https://tillidgroup.com/projects/nunez-monitorship/>; Columbia University Center for Justice, *Solitary by Many Other Names*, *supra* note 2.

⁴⁹ *See, e.g.*, Jacob Kaye, *Mayor restores programming on Rikers months after cutting funding*, *Queens Daily Eagle*, Mar. 6, 2024, <https://queenseagle.com/all/2024/3/6/mayor-restores-programming-on-rikers-months-after-cutting-funding>; Memorandum of Law in Support of Motion to Alter Judgment under Federal Rule of Civil Procedure 60(b)(5) at 25, *Handberry, et al. v. Thompson, et al.*, 1:96-cv-06161 (S.D.N.Y. 1996) (“access to education is arbitrary, inconsistent, and regularly non-existent”); Michael Elsen-Rooney, *Young Adults on Rikers Say They Are Systematically Blocked From School*, *The City*, Apr. 4, 2024, <https://www.thecity.nyc/2024/04/04/young-rikers-island-blocked-from-school/>.

⁵⁰ Centers for Disease Control and Prevention, *Children’s Mental Health*, <https://www.cdc.gov/childrensmentalhealth/basics.html>.

than trained behavioral health personnel. As a result, youth with mental health conditions are more likely to be arrested and incarcerated than those without mental health conditions.⁵¹

Once involved in the child welfare or juvenile legal systems, youth who are Black or Brown, LGBTQ+, and/or living with a disability disproportionately face the most profound mental health challenges. Young people themselves describe the child welfare⁵² and juvenile legal⁵³ systems as traumatic, and youth who experience these systems often have poor mental health outcomes.⁵⁴ Up to 80 percent of children in the foster system⁵⁵ and 70 percent of young people who are incarcerated present with a serious mental health condition,⁵⁶ compared to 18 to 22 percent of all children.⁵⁷ Data show that 55 percent of the Department's jail population has been diagnosed with mental health conditions,⁵⁸ and over 1,000 detainees have been diagnosed with Serious Mental Illness.⁵⁹ Based on these data and studies showing that brain development is ongoing through the mid-twenties,⁶⁰ failing to exclude 18- to 25-year-olds with mental health conditions from isolated placements like ESH,⁶¹ Secure Unit, and RMAS leaves these older youth at grave risk of harm.⁶²

⁵¹ *Mental Health and Foster Care*, Nat'l Conf. of State Legislatures (Nov. 1, 2019), <https://www.ncsl.org/human-services/mental-health-and-foster-care#:~:text=Up%20to%2080%20percent%20of,percent%20of%20the%20general%20population;MentalHealthBytheNumbers,Nat'lAll.onMentalIllness,https://www.nami.org/about-mental-illness/mental-health-by-the-numbers/#:~:text=70%25%20of%20youth%20in%20the,report%20experiencing%20a%20mental%20illness.>

⁵² Children's Rights, *Are You Listening? Youth Accounts of Congregate Placements in New York State* (2023), https://www.childrensrights.org/wp-content/uploads/2023/01/CR-2023-AreYouListening_report_web.pdf; Sarah Fathallah & Sarah Sullivan, *Away from Home: Youth Experiences of Institutional Placements in Foster Care* (2021), https://assets.website-files.com/60a6942819ce8053cefd0947/60f6b1eba474362514093f96_Away%20From%20Home%20-%20Report.pdf.

⁵³ Mendel, *Why Youth Incarceration Fails*, *supra* note 9.

⁵⁴ Mary Dozier *et al.*, *Consensus Statement on Group Care for Children and Adolescents: A Statement of Policy of the American Orthopsychiatric Association*, 84 *Am. J. Orthopsychiatry* 219 (2014), <https://www.apa.org/pubs/journals/features/ort-0000005.pdf>; Mendel, *Why Youth Incarceration Fails*, *supra* note 9.

⁵⁵ National Conference of State Legislatures, *Mental Health and Foster Care*, *supra* note 51.

⁵⁶ National Alliance on Mental Illness, *Mental Health By the Numbers*, *supra* note 51.

⁵⁷ National Conference of State Legislatures, *Mental Health and Foster Care*, *supra* note 51.

⁵⁸ https://vera-institute.shinyapps.io/nyc_jail_population/ (last visited June 12, 2024).

⁵⁹ New York City Comptroller, *Dashboard Update: NYC Comptroller Releases New Monthly Data on Department of Correction Operations* (2023), <https://comptroller.nyc.gov/newsroom/dashboard-update-nyc-comptroller-releases-new-monthly-data-on-department-of-correction-operations-5/>.

⁶⁰ Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 5.

⁶¹ Although the Minimum Standards purport to exclude young adults from ESH placement, this rule appears to be honored more in the breach than the observance. New York City Administrative Code, Title 40: Board of Correction, Ch. 1: Correctional Facilities, § 1-16(c)(1)(ii) and (iii) Enhanced Supervision Housing; *see also* § 1-17 Limitations on the Use of Punitive Segregation.

⁶² Kyleigh Clark, *The Effect of Mental Illness on Segregation Following Institutional Misconduct*, 45 *Crim. Just. & Behav.* 1363, 1376 (2018), <https://journals-sagepub-com.proxygt-law.wrlc.org/doi/full/10.1177/0093854818766974>

(the presence of mental illness, rather than a detainee's misconduct record, affects the likelihood of being disciplined using segregation. An incarcerated person with mental illness is 1.36 times as likely to be disciplined with segregation compared to incarcerated persons without a mental illness). Although certain rules purport to exclude people with SMI from placement, for example, in RMAS, it is unclear how they would be applied in practice. New York City Administrative Code, Title 40: Board of Correction, Ch. 6: Restrictive Housing in Correctional Facilities,

⁶² Kyleigh Clark, *The Effect of Mental Illness on Segregation Following Institutional Misconduct*, 45 *Crim. Just. & Behav.* 1363, 1376 (2018), <https://journals-sagepub-com.proxygt-law.wrlc.org/doi/full/10.1177/0093854818766974>

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⁶⁰ Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 5.

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⁶² Kyleigh Clark, *The Effect of Mental Illness on Segregation Following Institutional Misconduct*, 45 *Crim. Just. & Behav.* 1363, 1376 (2018), <https://journals-sagepub-com.proxygt-law.wrlc.org/doi/full/10.1177/0093854818766974> (the presence of mental illness, rather than a detainee's misconduct record, affects the likelihood of being disciplined using segregation. An incarcerated person with mental illness is 1.36 times as likely to be disciplined with segregation compared to incarcerated persons without a mental illness). Although certain rules purport to exclude people with SMI from placement, for example, in RMAS, it is unclear how they would be applied in practice. New York City Administrative Code, Title 40: Board of Correction, Ch. 6: Restrictive Housing in Correctional Facilities,

Young people with unmet mental health needs are more likely to become trapped in systems that are simultaneously causing harm; incapable of providing adequate mental health care; and in some cases, unwilling to support youth's return to the community due to ongoing unmet mental health needs. In this way, government systems reinforce the criminalization of mental health and create a negative feedback loop where people who are experiencing a crisis are responded to with isolation and violence.

VI. No Youth Under 25 Should be Placed in Punitive Segregation by Any Name

Whether in the foster system or detention, while in government custody, all youth must be free from harm.⁶³ Research and intervention models developed in child welfare show that placement of and services for adolescents and young adults must address trauma and normalize young people's lives.⁶⁴ Institutionalized youth need *more* contact with trusted adults and peers – not less.⁶⁵ Excessive isolation is incompatible with current research and policy for older youth today.⁶⁶

Adolescents and young adults are more vulnerable than older adults to the negative effects of solitary confinement, including increased risk for mental illness or worsened mental illness; anxiety; rage; insomnia; self-mutilation; suicidal thoughts; and suicide.⁶⁷ In addition to the immediate harm it presents, solitary confinement can impede brain development and affect long-term cognitive and social abilities.⁶⁸ A report issued by the New York Advisory Committee to the U.S. Commission on Civil Rights affirms the threat that solitary confinement poses to older youth and calls for its prohibition for all young people up to age 25.⁶⁹

§ 6-09 Exclusions. In any event, there does not appear to be an exclusion for people without SMI, but with significant mental health conditions for whom extended isolation could also be harmful.

⁶³ See *County of Sacramento v. Lewis*, 523 U.S. 833, 851 (1998); *DeShaney v. Winnebago Cnty. Dep't of Soc. Servs.*, 489 U.S. 189, 199-200 (1989); see also *R.G. v. Koller*, 415 F.Supp.2d 1129, 1156 (D. Haw. 2006).

⁶⁴ Charlyn Harper Browne, Center for the Study of Social Policy, *Youth Thrive: Advancing Healthy Adolescent Development and Well-Being* (2014), at 2; Jim Casey Youth Opportunities Initiative, *Trauma-Informed Practice*, *supra* note 26, at 6.

⁶⁵ Jim Casey Youth Opportunities Initiative, *Trauma-Informed Practice*, *supra* note 26, at 6 (foster system); MacArthur Foundation *et al.*, *Because Kids are Different*, *supra* note 41, at 7 (juvenile legal); Jim Casey Youth Opportunities Initiative, *The Road to Adulthood*, *supra* note 9, at 19; Annie E. Casey Foundation, *Turning Brain "Strains" into "Gains" for Adolescents in Foster Care* (Aug. 30, 2017), <https://www.aecf.org/blog/turning-brain-strains-into-gains-for-adolescents-in-foster-care>.

⁶⁶ Local Law 42 banning solitary confinement recognizes the importance of activities with others in a group setting, and prescribes seven hours a day of out-of-cell congregate programming even in restrictive housing. New York City Administrative Code, Title 40: Board of Correction, Ch. 1: Correctional Facilities, § 9-167(h)(4).

⁶⁷ MacArthur Foundation *et al.*, *Because Kids are Different*, *supra* note 41, at 10-11. American Academy of Child & Adolescent Psychiatry, *Solitary Confinement of Juvenile Offenders* (2012), https://www.aacap.org/aacap/Policy_Statements/2012/Solitary_Confinement_of_Juvenile_Offenders.aspx.

⁶⁸ Anthony Giannetti, *The Solitary Confinement of Juveniles in Adult Jails and Prisons: A Cruel and Unusual Punishment?*, 30 Buff. Pub. Int. L.J. 31, 45-49 (2011-2012); Brian Levy, *At Baltimore's Youth Detention Center, children are in solitary confinement under "abominable conditions."* Baltimore Brew (Mar. 12, 2021), <https://baltimorebrew.com/2021/03/12/at-baltimores-youth-detention-center-children-are-kept-in-solitary-confinement-under-abominable-conditions/>.

⁶⁹ New York Advisory Committee to the U.S. Commission on Civil Rights, *supra* note 6; see also Stephanie Wykstra, *The case against solitary confinement*, Vox, Apr. 17, 2019, <https://www.vox.com/future-perfect/2019/4/17/18305109/solitary-confinement-prison-criminal-justice-reform>.

Moreover, warehousing 18- to 25-year-olds in ESH, Secure Unit, RMAS, or any other solitary confinement unit places these “emerging adults”⁷⁰ in settings where they are cut off from essential services and connections, jeopardizing young people’s access to therapeutic services, education and training, visitation with family and friends, and connection with the social networks older youth need to survive once they exit custody.⁷¹

The Department of Correction allegedly excludes 18- to 21-year-olds from punitive segregation, which it recognizes is a “severe penalty” that “represents a serious threat to the physical and psychological health of adolescents.”⁷² But ESH, Secure Unit, and RMAS are just other names for punitive segregation,⁷³ notwithstanding the Department’s statements to the contrary. People are locked in their cells most of the day or are permitted to move only to a slightly extended or larger cell; programming, if it takes place at all, can take place while detainees are shackled to desks; and detainees continue to be isolated without meaningful engagement with other people in the same shared area.⁷⁴ It does not appear that New York State’s 2022 HALT Act, which prohibits segregated confinement for individuals age 21 and younger, will protect young adults in Department custody as long as euphemistically-named programs keep them isolated. In any event, all youth ages 18 to 25 are vulnerable during this critical period of development, and should be excluded from punitive segregation by any name.

The Department of Justice has found that more than 50 percent of all suicides in juvenile facilities occurred while young people were held in isolation, and more than 60 percent of young people who died by suicide in custody had a history of being held in isolation.⁷⁵ For young people who have experienced incarceration on Rikers, the effects are no less deadly. In 2015, at the age of 22, Kalief Browder died by suicide two years after suffering solitary confinement and beatings during the three years he was incarcerated on Rikers Island.⁷⁶ Also in 2015, at 25, Jason Echevarria died in solitary confinement while experiencing mental health challenges.⁷⁷ In 2021, at 25,

⁷⁰ Jim Casey Youth Opportunities Initiative, *Success Beyond 18*, *supra* note 42, at 4.

⁷¹ MacArthur Foundation *et al.*, *Because Kids are Different*, *supra* note 41, at 10-11; *see* New York City Board of Correction, *Notice of Public Hearing and Opportunity to Comment on Proposed Rules*, <https://rules.cityofnewyork.us/wp-content/uploads/2021/03/BOC-Proposed-Amendment-of-Minimum-Standards-Concerning-Restrictive-Housing-Preliminarily-Certified-3.5.21-to-TG-w-certs-1.pdf>, at 3-4.

⁷² New York City Administrative Code, Title 40: Board of Correction, Ch. 1: Correctional Facilities, § 1-17(a) Limitations on the Use of Punitive Segregation.

⁷³ New York City Board of Correction, *Notice of Public Hearing and Opportunity to Comment on Proposed Rules*, *supra* note 71, at 10 (April 2021 Proposed RMAS Rules frankly admitted that they “eliminate[d] specific references to punitive segregation and enhanced supervision housing (ESH) and insert[ed] references to RMAS where appropriate”); Columbia University Center for Justice, *Solitary by Many Other Names*, *supra* note 2.

⁷⁴ Columbia University Center for Justice, *Solitary by Many Other Names*, *supra* note 2. In order to comply with Local Law 42, the implementing rules should explicitly state that restraints can be used only when necessary to prevent an imminent risk of injury to self or others.

⁷⁵ Lindsay M. Hayes, *Juvenile Suicide in Confinement: A National Survey* (2009), at 27, <https://www.ojp.gov/pdffiles1/ojdp/213691.pdf>; Brian Levy, *supra* note 68.

⁷⁶ Tammie Gregg & Donna Lieberman, *Prolonged solitary confinement is torture. It’s time for all states to ban it*, *The Washington Post*, Apr. 28, 2021, <https://www.washingtonpost.com/opinions/2021/04/28/ban-prolonged-solitary-confinement/>.

⁷⁷ *Id.*

Brandon Rodriguez died by suicide in isolation.⁷⁸ In 2022, Erick Tavira, 28, died by suicide alone in his cell on the Island.⁷⁹

VII. Department of Correction Staff Must Have Appropriate Training and Skills for Working with Older Youth Up to Age 25

Training and Credentials

Research and best practices support the conclusion that the Department cannot rely on mental health providers and social workers alone to ensure the safety and well-being of young adults on Rikers – corrections staff must receive specific, ongoing training to work with youth. Yet a January 2022 assessment of staff resources at the Robert N. Davoren Complex (“RNDC”), where the majority of young adults are held, found that the Department “cannot accurately identify where staff are assigned or their status at any given time,”⁸⁰ and that nearly half of the 929 officers assigned to RNDC were “unavailable to be assigned directly to a post engaged with incarcerated persons.”⁸¹ Moreover, even though *Nunez* Monitor Reports⁸² show that RNDC has particularly high rates of *avoidable* use of force and violence,⁸³ staff fail to follow the basic steps of a 2021 Department policy intended to reduce violence.⁸⁴ In 2020, the Monitor found that use of force against individuals was often due to “[s]taff’s aggressive demeanor and lack of de-escalation skill.”⁸⁵ These conditions persist to this day, in the form of “poor staff decision making, poor situational awareness, and staff actions that precipitate[] the event.”⁸⁶

The Monitor recently reported, however, that proper training of corrections staff could go a long way toward shifting the culture on Rikers away from excessive uses of force: “Substantially reducing the frequency of unnecessary and excessive uses of force will require quality training and

⁷⁸ Columbia University Center for Justice, *Solitary by Many Other Names*, *supra* note 2.

⁷⁹ *Id.*

⁸⁰ Special Report of the *Nunez* Independent Monitor (Mar. 16, 2022), at 23, <https://tillidgroup.com/projects/nunez-monitorship/>.

⁸¹ *Id.*

⁸² *Nunez v. City of New York*, No. 11 Civ. 05845 (S.D.N.Y. August 18, 2011), was a class action lawsuit brought by incarcerated persons in the custody of the Department of Correction. The 2015 consent judgment entered in the case provided for a monitor to issue progress reports on a regular basis regarding, among other things, the use of force on Rikers, staff training, and the safety and proper supervision of 18-year-old detainees, all with the goal of ensuring major reforms of the system. All *Nunez* Monitor reports can be found at <https://tillidgroup.com/projects/nunez-monitorship/>.

⁸³ Special Report of the *Nunez* Independent Monitor (Mar. 16, 2022), at 17; Second Status Report on DOC’s Action Plan by the *Nunez* Independent Monitor (Oct. 28, 2022), at 65; Status Report of the *Nunez* Independent Monitor (June 30, 2022), at 17-18. <https://tillidgroup.com/projects/nunez-monitorship/>.

⁸⁴ Status Report of the *Nunez* Independent Monitor (Dec. 22, 2023), at 91, <https://tillidgroup.com/projects/nunez-monitorship/>.

⁸⁵ Eleventh Report of the *Nunez* Independent Monitor (July-Dec. 2020), at 36; *see also* Status Report of the *Nunez* Independent Monitor (Apr. 18, 2024), at 32, 42. <https://tillidgroup.com/projects/nunez-monitorship/>.

⁸⁶ Status Report of the *Nunez* Independent Monitor (Apr. 18, 2024), at 28 (“While the rates of nearly every indicator reached an apex in 2021 and then subsequently decreased, the decreases – though obviously necessary – are of little consolation. Qualitative assessments of individual incidents show a *continued pattern where staff use force when it is unnecessary and/or in a manner that is excessive and out of proportion to the extant threat.*”) (emphasis added), <https://tillidgroup.com/projects/nunez-monitorship/>.

supervision, strict adherence to sound security practices, and reliable and appropriate staff discipline.”⁸⁷

With regard to credentials, the National Association of Social Workers (“NASW”) outlines standards for working with adolescents, emphasizing that “everyone – individuals, communities, and society as a whole – reaps the benefits from investments in helping our young people achieve optimal physical and mental health.”⁸⁸ NASW’s comprehensive standards include (a) holding a bachelor’s degree or a master’s of social work from accredited programs; (b) demonstrating knowledge and understanding of adolescent development; (c) assessing services and community-based resources for how well they meet the adolescent’s needs; (d) developing a case plan jointly with youth and their family; and (e) participating in multidisciplinary case consultation across agencies.⁸⁹

While detention and correctional settings have unique concerns that make them different from congregate placements or independent living in child welfare, the needs of the youth are similar. Penological issues of safety and population management are not inconsistent with developmentally-appropriate training that recognizes that adolescents and young adults up to age 25 are different from older adults.⁹⁰

Trauma-Informed Orientation and Services

As noted earlier, adolescents and young adults in child welfare and correctional settings have often experienced severe trauma.⁹¹ The concept of “complex trauma” has come to describe the “dual problem of exposure to multiple traumatic events and the impact of this exposure on immediate and long-term” outcomes.⁹² Trauma is especially injurious for adolescents and young adults because it can disrupt and slow brain development.⁹³

Research shows, however, that even complex trauma can be remedied when young people have the benefit of corrective experiences and relationships.⁹⁴ For this reason, there is a growing consensus that adolescents and young adults can recover from trauma and are entitled to the “same

⁸⁷ Status Report of the Nunez Independent Monitor (Apr. 18, 2024), at 86 and 263-266 (emphasizing the need for consistent staffing); *see also* Status Report of the Nunez Independent Monitor (Apr. 18, 2024), at 32, <https://tillidgroup.com/projects/nunez-monitorship/>; Yaroshesky, *Rethinking Rikers*, *supra* note 17, at 7, 44-48.

⁸⁸ <https://www.socialworkers.org/Practice/NASW-Practice-Standards-Guidelines/NASW-Standards-for-the-Practice-of-Social-Work-with-Adolescents>.

⁸⁹ *Id.*

⁹⁰ The Board of Correction acknowledges the special treatment that young adults should receive in the Young Adult Plan specifying that “[h]ousing for people in custody ages 18 through 21 shall provide such people with age-appropriate programming.” New York City Administrative Code, Title 40: Board of Correction, Ch. 1: Correctional Facilities, § 1-02(c)(1) Classification of People in Custody. Again, the Young Adult Plan should be expanded to include youth up to age 25.

⁹¹ *See, e.g.,* Mendel, *Why Youth Incarceration Fails*, *supra* note 9.

⁹² Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 13.

⁹³ *Id.* at 25 (citing D.F. Becker *et al.*, *Trauma and Adolescence: The nature and scope of trauma* (2003)); Schiraldi *et al.*, *Community-Based Responses to Justice-Involved Young Adults*, *supra* note 42, at 2.

⁹⁴ Jim Casey Youth Opportunities Initiative, *The Adolescent Brain*, *supra* note 8, at 27-28 (citing Bessel A. van der Kolk, *Clinical implications of neuroscience research in PTSD*, *Ann. N.Y. Acad. Sci.* (2006)); Jim Casey Youth Opportunities Initiative, *The Road to Adulthood*, *supra* note 9, at 8-9.

opportunities, experiences, and high expectations as all other youth in the community.”⁹⁵ Experts working with young adults agree that “[i]t is important for people working in youth-serving systems to understand young people’s responses to trauma in order to promote healing and emotional security.”⁹⁶

Trauma-informed and trauma-specific practices are essential components of serving older youth.⁹⁷ Local Law 42 mandates that young adults “receive access to trauma-informed, age-appropriate programming and services on a consistent, regular basis.”⁹⁸ Professional standards call for youth-serving organizations to “provide therapeutic and practical opportunities for youth to learn how to acknowledge and cope with past trauma, and to create a meaningful sense of personal identity.”⁹⁹ Older youth in the custody of New York City’s Department of Correction deserve no less.

VIII. Conclusion

Children’s Rights has helped lead child welfare and juvenile legal reform in states across the country for nearly three decades, and understands how challenging systemic change can be. The Board of Correction has an opportunity, and the responsibility, to align Department of Correction rules with best practices in youth development. By doing so, young adults in New York City’s correctional facilities will be safer and less likely to re-enter detention after their release.¹⁰⁰

⁹⁵ See Browne, *Youth Thrive*, *supra* note 64, at 2 (collecting authorities on foster systems; citation omitted); Jim Casey Youth Opportunities Initiative, *The Road to Adulthood*, *supra* note 9, at 10; Jim Casey Youth Opportunities Initiative, *Success Beyond 18*, *supra* note 42.

⁹⁶ Jim Casey Youth Opportunities Initiative, *Trauma-Informed Practice*, *supra* note 26, at 1; Jim Casey Youth Opportunities Initiative, *The Road to Adulthood*, *supra* note 9, at 7.

⁹⁷ *Id.*

⁹⁸ New York City Administrative Code, Title 9: Criminal Justice, Ch. 1: Department of Correction, § 9-167(k) Solitary Confinement. Local Law 42 also recognizes the critical nature of trauma-informed therapeutic interventions for those held in restrictive housing. New York City Administrative Code, Title 9: Criminal Justice, Ch. 1: Department of Correction, § 9-167(h)(5).

⁹⁹ Child Welfare League of America, *Standards of Excellence for Transition, Independent Living, and Self-Sufficiency Services* (revised ed. 2005), at 115; Jim Casey Youth Opportunities Initiative, *The Road to Adulthood*, *supra* note 9, at 13, 17-18.

¹⁰⁰ See, e.g., Baser, O., Rodchenko, K., Zeng, Y. *et al.*, Mental Health Disparities in Young Adults with Arrest History: A Survey-Based, Cross-Sectional Analysis. *Health Justice* 12, 1 (2024), <https://doi.org/10.1186/s40352-023-00257-2>