



MEASURE



LONE STAR
JUSTICE ALLIANCE

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Dear Travis County Judges and Officials,

With cases of coronavirus disease (COVID-19) increasing daily, we know the virus will enter Texas' juvenile facilities and detention centers, if it has not already. We are concerned about the impact of COVID-19 virus on incarcerated and detained youth. Our mayors and counties are taking steps to stop the spread of the COVID-19 virus, closing schools, canceling events, and shifting to supporting children in their homes and communities, but one group has the potential to be overlooked: youth in custody and youth interacting with the juvenile justice system in Texas.

Research by health care experts shows that incarcerated populations are most at risk during a public health crisis. According to the Centers for Disease Control (CDC), the virus is spread mainly from person-to-person, between people who are in close contact with each other (within about 6 feet). Physicians for Criminal Justice Reform issued a [letter](#) on March 22nd highlighting the specific risks to children and young people in juvenile and correctional settings; steps must be taken to address their concerns. Further, with facilities suspending in person-visits and

volunteer programming, and schools closing, kids are likely to be isolated and stressed; it will be crucial to ensure that youth in custody still have access to programs and support.

In an institutional setting, spread will be almost impossible to contain. Contagious viruses such as COVID-19 spread much faster in detention centers and prisons as incarcerated youth are in close quarters and sometimes in unsanitary conditions. Behind bars, youth are not able to take proactive measures to keep themselves safe, such as practicing social distancing, frequently washing hands, or staying in sanitized spaces. Even if youth are in individual cells, ventilation is often inadequate. Youth detention and correctional facilities are unlikely to be equipped to meet the medical needs of youth if a COVID-19 outbreak inside juvenile detention or correctional facility should occur. Many juvenile detention and post-adjudication facilities do not have full-time nursing or other medical professionals such as doctors on staff or that come to the facility regularly. It is important that we increase youth's access to medical care in light of COVID-19.

Further, confined individuals are [likely to contract the virus from staff who enter and exit facilities daily](#)—and staff who have not yet been infected will be at greater risk of becoming ill. As concerns about contracting the virus rise for staff members, and as childcare becomes less accessible for staff members who are primary caretakers, staffing facilities will become more difficult. This will create significant safety risks for both youth in custody and staff.

Today, Texas officials still have the opportunity to act decisively in the interest of public safety before the pandemic escalates to the level of severity that it has already escalated to in other countries. To prevent the spread of COVID-19, **we urge you to publicly share your emergency plan for addressing COVID-19 in the juvenile justice system**, including the adoption of these measures to protect youth under the supervision of the juvenile justice system:

1. Immediately halt new admissions to juvenile detention and correctional facilities and initiate the removal of youth from juvenile detention and correctional facilities by:
 - a. Examining all pre- and post-adjudication release processes and mechanisms and employing these as quickly as possible (encourage the use of videoconferencing for certain court hearings, if the defense attorney agrees);
 - b. Removing youth who have COVID-19 symptoms; chronic illnesses, such as asthma or diabetes; autoimmune disorders; other serious illnesses; or are in need of medical care;
 - c. Reducing or eliminating referrals to the juvenile justice system from foster care providers and schools and for children under the age of 14; and
 - d. Eliminating any form of detention or incarceration for youth by rejecting cases unless a determination is made that a youth is a substantial and immediate safety risk to others; and
 - e. If detention is used, ensuring that there is full and fair participation in any virtual detention hearings that includes the young person's family.
2. While youth are awaiting release:
 - a. Provide written and verbal communications to youth and their families on COVID-19, access to medical care, and community-based supports;
 - b. Ensure continued safe access to education, including virtual educational programming;
 - c. Ensure access to legal counsel through teleconferencing;

- d. Reduce the potential for transmission from the community to inside the facility by suspending family visitation (but provide free and expanded access to video calls as a mitigation measure until visitation can be restored)¹;
 - e. Suspend volunteers' and outside program providers' access to the facility. Encourage volunteers to find other ways to support the facility to deliver their programming. Add volunteers to approved call lists, at the volunteers' request, and ensure delivery of programming through other means;
 - f. Ensure regular access to medical care, including mental health care, and proper sanitation and hygiene;
 - g. Ensure there are no gatherings of more than 10 youth at once; and
 - h. Seek opportunities to keep youth in custody at least 6 feet apart. Avoid excessive use of solitary confinement due to the risk of mental deterioration and suicide and avoid imposing disciplinary sanctions for failure to comply with these rules.
3. Create transitional plans for youth released from custody and detention, including youth who are in foster care. Each plan should ensure the following:
 - a. A designated safe and welcoming place to live;
 - b. A confirmation of how basic needs will be met; and
 - c. A provision for immediate and adequate medical care;
 - d. A provision for youth to receive access to a virtual course-system either through their school districts, or provided by juvenile probation, to ensure they have continued educational instruction; and
 - e. Confirmation that youth and their parent/guardian are educated on COVID-19 spread mitigation.
 4. For youth on probation:
 - a. Eliminate incarceration as an option for technical violations of probation;
 - b. Eliminate requirements for in-person meetings with their probation officers;
 - c. Place a moratorium on all requirements to attend court and probation-ordered programs, including community service or other work programs; and
 - d. Suspend billing to youth or their families for probation or court-ordered programs.
 5. Expand community-based programs for youth in the justice system so that they are effectively supported in their communities.
 - a. Provide a compiled list of pre-screened resources to youth and their families.
 6. For staff:
 - a. Screen all workers for symptoms of COVID-19 before allowing them to enter the facility; and
 - b. Emphasize that no staff member should come to work if they are ill or have been exposed.

If you have additional questions or need more information, you can reach us by email at the addresses below. Thank you for your time and consideration. We look forward to hearing from you.

¹Legal visits cannot be restricted, but juvenile access to confidential phone lines and/or unsupervised video conferences can be increased to minimize the need for attorneys to come to the facility.

Sincerely,

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