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PODCAST TRANSCRIPT

OHIO SOLITARY CONFINEMENT, MENTAL HEALTH OF JUVENILES

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SOURCES:

LOIS DEMOTT, ACTIVIST, MOTHER OF MENTALLY ILL CHILD IN SOLITARY CONFINEMENT

KIM TANDY, CHILDREN'S LAW CENTER

SHAKYRA DIAZ, POLICY MANAGER, ACLU OHIO

LOIS DEMOTT: Is it weeks? Is it months? And as the months go on... will it be years?

RACHEL GODIN: Meals come sliding through slots in metal doors, not unlike the merest moments of human interaction that occur with prison staff.

In states of forced idleness, children across America toil their days away in 6 by 9 foot cells.

It is referred to as long term segregation, seclusion, isolation, solitary confinement. Whatever you choose to call it, the issue remains a constant on both a national and international front.

LOIS DEMOTT: My son was sent into the adult prison system here in Michigan at the age of 15 with a known long-term mental illness, diagnosis of bipolar.

RACHEL GODIN: In the last few years Lois Demott and her incarcerated son Kevin's story has been picked up by a handful of reporters and researchers: Mother Jones, ThinkProgress and The Examiner, just to name a few. Lois DeMott is a Coordinator at the Family Participation Program in Michigan and works for prison reforms for those, like her son, who are more likely to slip through the cracks in a system.

LOIS DEMOTT: Often their behaviors are seen as choices and often they wind up not really getting the treatment that they need.

RACHEL GODIN: As of 2011, the most recent year for which national data is available, the Department of Justice reported that over 60,000 minors were being held in just 2,000 juvenile facilities, of which roughly 1 in 5 used isolation

This group includes disproportionate representations of African Americans, LGBT, and those living with mental illness.

Kevin's DeMott's situation exhibits Ohio's two biggest problems: children with mental illness in solitary confinement and on top of that, being housed with adults.

Kim Tandy, Executive Director of the Children's Law Center, whose work focuses mainly in Ohio and Kentucky, explains.

KIM TANDY: Because they have to be separate from adult prisoners, in smaller jails we're concerned that that often leads to them being placed into solitary confinement cell because this is the only mechanism to comply with federal and state regulations.

RACHEL GODIN: Again, Lois DeMott.

LOIS DEMOTT: The level of noise and banging and the lights constantly being on make it very difficult for a person to function. The screaming the yelling, the banging, that is constantly occurring affects one's mental health even more.

RACHEL GODIN: In [2010](#), Ohio had the 10th largest population of youth in adult prisons in the United States. According to a 2013 [report](#) by The department of youth services, more than half of the male population is on the mental health caseload, while the number for females is almost 100%. Many of the youth have multiple disorders that began in childhood and will last into adulthood. Approximately 75% of youth have a diagnosed substance abuse disorder. More than half of the youth are in need of special education.

SHAKYRA DIAZ: Withdrawal, hallucinations, self mutilation, panic, anxiety.

RACHEL GODIN: That was SHakyra Diaz, a policy manager from the ACLU of Ohio, who works towards systemic reform in children's and criminal justice. These are a few of the understood symptoms that children who have experience solitary confinement exhibit after they exit the system.

SHAKYRA DIAZ: Whether you have a mental illness before you go into the system or not, you are going to be negatively impacted by prolonged isolation.

RACHEL GODIN: According to diaz, though, things are looking up for Ohio.

SHAKYRA DIAZ: The U.S. Department of Justice sought a temporary restraining order to stop the Ohio Department of Youth Services from expressively secluding people with mental illness back in 2013.

RACHEL GODIN: Ohio has no real law prohibiting isolation, but In response to federal litigation including the Juvenile Detention Alternatives Initiatives which came about in 2014, Ohio has been very good about now limiting the use of solitary confinement to just punitive and safety purposes, making sure these isolation times stay under four hours.

Actions taken by the Department of Justice to stop isolation practices makes practical economic sense as well. It costs twice as much to hold a prisoner in solitary confinement than it does to hold them within the general population.

Diaz from the ACLU agrees that it is these types of specific structural problems that are coming to light and now being discussed. The [tragic suicide](#) of 22-year old Kalief Browder, who was arrested at the age of 16 and spent [800 days](#) at the New York's Rikers Island jail in solitary confinement has something

to with the upsurge in conversation about children in solitary confinement.

SHAKYRA DIAZ: Is case kind of really highlighted in a lot of respects what is wrong with our justice system, but also noted how a healthy young person entered a facility and deteriorated over time with his experience in Rikers in solitary confinement. He attempted suicide.

RACHEL GODIN: The Department of Justice stated in a recent report that "Nowhere is the damaging impact of incarceration on vulnerable children more obvious than when it involves solitary confinement."

When DeMott's son was finally released after years in prison and hundreds of days spent in complete isolation, he was utterly changed, suffering from post traumatic stress disorder.

LOIS DEMOTT: The inability to move their life forward, to function in a way that is healthy. The inability to sleep with nightmares that occur from incidents that went on inside the system and the inability to be out and to socialize in settings that the rest of can deal with and handle. Those are just a few.

RACHEL GODIN: Ohio is moving forward with strategies to implement more oversight in juvenile prisons in relation to patrolling mental health and seclusion as well as limiting how many juveniles enter adult prisons.

Based on her son's own experiences with solitary confinement, Lois Demotte supported the claim that Youths in isolation are frequently denied access to critical services to which they are entitled, including education, recreation and therapies necessary for success after they are released. Many youths return to their communities suffering from untreated mental and behavioral health needs that increase their chance of recidivism.

LOIS DEMOTT: They're going to come out and be your neighbor and my neighbor. How do we believe they really need to be treated so they're coming out healthier and better than when they went in?

RACHEL GODIN: For TV2 News, I'm Rachel Godin