Mental Healthcare in the Texas Juvenile Justice System



Texas Advisory Committee to the U.S. Commission on Civil Rights

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Texas Advisory Committee to the U.S. Commission on Civil Rights

September 2021 – September 2025

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Introduction

Since 1957, the U.S. Commission on Civil Rights and its state advisory committees have prioritized ensuring the fair administration of justice and equal access to justice for all.

In recent years, allegations of civil rights violations, state and federal investigations, and reports of abuse and mistreatment have plagued the Texas Juvenile Justice Department. In response, the Texas Advisory Committee to the U.S. Commission on Civil Rights determined to examine the mental health care provided in these facilities and other potential civil rights issues. The Committee heard expert testimony from individuals, organizations, and professionals with specific knowledge of and experience with the conditions and challenges.

Texas Juvenile Justice Department (TJJD) was created in 2012 when the Texas Youth Commission and the Texas Juvenile Probation Commission were merged. TJJD's responsibilities include operating five secured state facilities and supporting county probation departments by disbursing grants, providing technical support, and ensuring that all facilities are adhering to its guidance. TJJD is tasked with providing rehabilitative services including mental health treatment and quality educational instruction.

Since 2018, the number of youths in state-secured facilities has shrunk by more than a third.¹ There are currently five TJJD-secured facilities for youth: Evins Regional Juvenile Center, Gainesville State School, Giddings State School, McLennan County State Juvenile Correctional Facility, and the Ron Jackson State Juvenile Correctional Complex. The current number of youths in state-secured facilities is somewhere between 540 and 612.² Studies have shown that Black youth are five times more likely than White youth to be incarcerated in the State of Texas.³

On March 27, 2023, our Committee received word of the death of Joshua Beasley, a justice-involved youth we became aware of while he was in the custody of the Texas Juvenile Justice Department. Joshua's story, as told by his mother Amnisty, made personal the Committee's concerns about (1) access to mental health resources for youth confined in TJJD facilities; (2) their ability to report abuse, mistreatment, and denial of rights in a safe, private manner without fear of repercussion; and (3) the overall state and effectiveness of these facilities in their current form.

What we have learned through this process is deeply concerning to the Committee, and for every day that it continues unchecked we feel is another day that the rights of those held in TJJD facilities are violated.

¹ Jolie McCullough. "Almost 600 Texas youths are trapped in a juvenile prison system on the brink of collapse." *The Texas Tribune*. August 2, 2022. Found here.

² Martin Martinez, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, Houston, TX, August 8, 2022. Transcript, pp. 21-22 (hereafter *Transcript I*).

³ Kristan Russell, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, Houston, TX, August 8, 2022. Transcript, p. 32 (hereafter *Transcript I*). *citing* The Sentencing Project. "Black Disparities in Youth Incarceration: Racial Disparities Persist but Fall from All-Time High." July 2021. Found here.

Given the in-custody death of an individual who contributed to our research and given that we have concluded the fact-finding period of our inquiry, the Committee felt compelled to release an expedited, but abbreviated, report of its findings. The Texas Legislature, which meets only biennially for six months, currently has the opportunity to address systemic inadequacies resulting in violations.

Joshua's death serves as an example of the urgency of this problem, and the Committee hopes its findings will contribute to increasing interest among lawmakers to consider the issues within TJJD and address them as they see fit.

Summary of Findings

- I. Most youths in the Texas Juvenile Justice System have clear mental health needs.
- II. Understaffing is a problem in the Texas Juvenile Justice system and inhibits other efforts for reform.
- III. There are not enough resources and staff to provide proper treatment for the mental health needs of the youth in the Texas Juvenile Justice Department's care.
- IV. Being in state-run facilities may further traumatize the youth and increase mental health needs.
- V. The state-run facilities provide an unsafe environment for both the youth and staff.
- VI. The civil rights of these youth may be violated in Texas Juvenile Justice Department facilities, including the lack of adequate health care, education, recreation, sanitation, religious support, and safety.
- VII. The facilities' current grievance process and other accountability measures function poorly.
- VIII. Youth facilities that are closer to home are more effective and better serve the youths' mental health needs.
 - IX. More funding may improve conditions and mental health care in the Texas Juvenile Justice System, but increased budgets alone will not likely fully address needs.

Methodology

As a matter of historical precedent, and in order to achieve transparency, Committee studies involve a collection of public, testimonial evidence and written comments from individuals directly impacted by the civil rights topic at hand; researchers and experts that have rigorously studied and reported on the topic; community organizations and advocates representing a broad range of backgrounds and perspectives related to the topic; and government officials tasked with related policy decisions and the administration of those policies.

Committee studies require Committee members to utilize their expertise in selecting a sample of panelists that is the most useful to the purposes of the study and will result in a broad and diverse understanding of the issue. This sampling method requires Committee members to draw from their own experiences, knowledge, opinions, and views to understand the issue and possible policy solutions. Committees are composed of volunteer professionals that are familiar with civil rights issues in their state or territory. Members represent a variety of political viewpoints, occupations, races, ages, and gender identities, as well as a variety of backgrounds, skills, and experiences. The intentional diversity of each Committee promotes vigorous debate and full exploration of the issues. It also serves to assist in offsetting biases that can result in the oversight of nuances in the testimony.

The Committee sees the perspective of the Texas Juvenile Justice Department as essential in understanding this issue and achieving a balanced project record. Many outreach attempts were made, and numerous invitations were extended, but unfortunately, TJJD declined to participate in this project.⁴ Where possible, we have tried to include the agency's perspective through secondary sources such as publicly available quotes and their participation in the Sunset Review.

For the purposes of this study, *Findings* are defined as what the testimony and other data suggested, revealed, or indicated based upon the data collected by the Committee. Findings refer to a synthesis of observations confirmed by a majority vote of members, rather than conclusions drawn by any one member. *Recommendations* are specific actions or proposed policy interventions intended to address or alleviate the civil rights concerns raised in the related finding(s). Where findings indicate a lack of sufficient knowledge or available data to fully understand the civil rights issues at hand, recommendations may also target specific directed areas in need of further, more rigorous study. Recommendations are directed to the Commission; they request that the Commission itself take a specific action, or that the Commission forward recommendations to other federal or state agencies, policymakers, or stakeholders.

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⁴ See Appendix D

Findings

Finding I: Most youths in the Texas Juvenile Justice System have clear mental health needs.

Many of the youth who enter TJJD facilities are identified as having mental health needs.⁵ In 2021, 69 percent of youth were identified at intake as having moderate to severe mental health needs, compared to only 21 percent in 2014.⁶ Nationally, some studies suggest that two-thirds of youth in the juvenile justice system have diagnosable mental health disorders.⁷ In December 2021 alone, TJJD staff reported they performed over 1,000 risk assessments for just 800 youth.⁸

Self-harm and suicide are on the rise, and in 2021, there were over 2,000 incidents of self-harm and 6,500 suicide alerts in Texas's state-secured youth facilities. Over half of the youth in these facilities have been put on suicide watch. For certain demographics, it's even higher; 63 percent of girls are on suicide watch, and 56 percent of youth under age 14. 11

There is a correlation between mental health needs and experiences of trauma.¹² Up to 65 percent of youth in TJJD have had four or more adverse childhood experiences, also called ACEs.¹³ This figure is significantly higher than the general population.¹⁴ Ninety youths in TJJD are identified

⁵ Representative Gene Wu, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, remote panel via ZoomGov, December 7, 2022. Transcript, p. 7 (hereafter *Transcript III*); Alycia Welch, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, Houston, TX, August 8, 2022. Transcript, pp. 15 (hereafter *Transcript I*); Brittany Norman, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, Houston, TX, August 8, 2022. Transcript, p. 157 (hereafter *Transcript II*).

⁶ Martinez Testimony, *Transcript I*, p. 21.

⁷ Liz Ryan, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, remote panel via ZoomGov, February 15, 2023. Transcript, p. 6 (hereafter *Transcript IV*).

⁸ Elizabeth Henneke, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, remote panel via ZoomGov, February 15, 2023. Transcript, p. 6 (hereafter *Transcript IV*).

⁹ Ryan Testimony, *Transcript IV*, p. 4; Welch Testimony, *Transcript I*, p. 11; Henneke Testimony, *Transcript IV*, p. 7; Martinez Testimony, *Transcript I*, p. 24.

¹⁰ Henneke Testimony, *Transcript IV*, p. 8; Welch Testimony, *Transcript I*, p. 11; Martinez Testimony, *Transcript I*, p. 24.

Henneke Testimony, *Transcript IV*, p. 8; Martinez Testimony, *Transcript I*, p. 24.

¹² Jernard Brown, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, remote panel via ZoomGov, April 11, 2023. Transcript, p. 2 (hereafter *Transcript V*). Norman Testimony, *Transcript II*, p. 142; Welch Testimony, *Transcript I*, p. 9; Wu Testimony, *Transcript III*, p. 8; Henneke Testimony, *Transcript IV*, p. 8.

¹³ Martinez Testimony, *Transcript I*, p. 21; Henneke Testimony, *Transcript IV*, p. 10; Ashley McFarland, Public Comment, *Transcript V*, pp.15-16.

¹⁴ Henneke Testimony, *Transcript IV*, p. 8; Martinez Testimony, *Transcript I*, p. 21.

as victims of sex trafficking.¹⁵ Additionally, many of the behaviors that lead the youth to be in TJJD custody, particularly violence,¹⁶ have mental health connections.¹⁷

Finding II: Understaffing is a problem in the Texas Juvenile Justice system and inhibits other efforts for reform.

All five of TJJD's facilities are experiencing chronic staff shortages. ¹⁸ For example, the Evins Regional Juvenile Center in Edinburg is 200 percent over a proper youth-to-staff ratio, and the Giddings State School, which houses the Crisis Stabilization Unit, TJJD's mental health program, is about 150 percent over a proper youth-to-staff ratio. ¹⁹ In June 2022, the agency had less than 50 percent of its full-time correction officer positions filled. ²⁰ During the pandemic, TJJD staff at the youth facilities called in sick often or did not show up for their scheduled shift. ²¹ In addition to the large number of vacancies, there is a very low staff retention rate. The turnover rate for correction officers was more than 70 percent in 2022. ²² In December 2021, the Texas Rangers were called in to help address the staffing shortages. ²³ This issue of understaffing is not unique to Texas and is an issue nationwide. ²⁴

One factor contributing to low staffing levels is the rural location of many of these facilities, making it hard to recruit qualified individuals.²⁵ Another factor is the relatively low pay these staff members receive.²⁶ Currently, TJJD staff make between \$36,000 and \$42,000 annually, which is generally below the correctional officer salary for non-maximum-security units in the Texas Department of Criminal Justice.²⁷

¹⁵ Henneke Testimony, *Transcript IV*, p. 8.

¹⁶ Amnisty Freelen, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, Houston, TX, August 8, 2022. Transcript, p. 128 (hereafter *Transcript II*); Welch Testimony, *Transcript I*, p. 57; Henneke Testimony, *Transcript IV*, p. 10.

¹⁷ Phyllis Becker, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, remote panel via ZoomGov, December 7, 2022. Transcript, pp. 4 (hereafter *Transcript III*); Freelen Testimony, *Transcript II*, p. 124; Brown Testimony, *Transcript V*, pp. 2-3; Welch Testimony, *Transcript I*, p. 59.

¹⁸ Martinez Testimony, *Transcript I*, p. 23; Welch Testimony, *Transcript I*, p. 12.

¹⁹ Welch Testimony, *Transcript I*, p. 12.

²⁰ Welch Testimony, *Transcript I*, p. 12.

²¹ Welch Testimony, *Transcript I*, p. 55.

²² Martinez Testimony, *Transcript I*, p. 22; Welch Testimony, *Transcript I*, p. 12.

²³ Martinez Testimony, *Transcript I*, p. 65.

²⁴ Becker Testimony, *Transcript III*, p. 9.

²⁵ Norman Testimony, *Transcript II*, p. 135; Wu Testimony, *Transcript III*, p. 25.; Henneke Testimony, *Transcript IV*, p. 15.

²⁶ Welch Testimony, *Transcript I*, p. 12.

²⁷ Henneke Testimony, *Transcript IV*, p. 15; Correctional Officer Salary, Texas Department of Criminal Justice Website. Found here.

Lastly, the understaffing at these facilities creates very difficult working conditions for the staff they do have. ²⁸ They are regularly asked to work 12-hour shifts for six or seven days a week to maintain minimum staffing requirements.²⁹ Other staff, such as teachers and mental health care personnel, have had to fill correction officer roles instead of providing their skilled services.³⁰

These levels of understaffing mean that even when new policies are proposed and the TJJD administration tries to address issues, the facilities are unable to benefit from these attempted reforms.31

Finding III: There are not enough resources and staff to provide proper treatment for the mental health needs of the youth in the Texas Juvenile Justice Department's care.

In addition to the overall understaffing of these facilities, there are even more unfilled positions for mental health care workers.³² As of June 2022, TJJD had only 36 percent of its mental health positions filled across all facilities, and many of these professionals are unlicensed.³³ The mental health workers that are on staff are increasingly being asked to fill security roles rather than providing mental health services.³⁴

There is a months-long waitlist for mental health care across all facilities. At Giddings alone, there are 50 youths on the waitlist for the highest tier of mental health intervention.³⁵ TJJD has described this backlog of needs as a "pool they are emptying with a cup." Not receiving treatment can result in youth staying in TJJD facilities for longer periods and inhibits rehabilitation efforts designed to minimize further justice system involvement.³⁷

When youth are receiving mental health services, it is not always the appropriate treatment.³⁸ For example, evidence received by the Committee indicated a youth who needs a particular type of care (e.g., substance abuse treatment) might be offered a different type of mental health care (e.g., anger management treatment) because it's the only treatment that the facility has to offer at

²⁸ Layla Fry, testimony, Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights, Houston, TX, August 8, 2022. Transcript, p. 108 (hereafter Transcript II); Henneke Testimony, Transcript IV, p. 15. ²⁹ Henneke Testimony, *Transcript IV*, p. 15.

³⁰ Henneke Testimony, *Transcript IV*, p. 13; Welch Testimony, *Transcript I*, p. 13.

³¹ Welch Testimony, *Transcript I*, pp. 12; 43; 97; Norman Testimony, *Transcript II*, p. 133; Henneke Testimony, *Transcript IV*, p. 13.

³² Welch Testimony, *Transcript I*, p. 13.

³³ Welch Testimony, *Transcript I*, p. 14; Norman Testimony, *Transcript II*, p. 13; Martinez Testimony, *Transcript I*, p. 25.

Henneke Testimony, *Transcript IV*, p. 13; Welch Testimony, *Transcript I*, p. 13.

³⁵ Welch Testimony, *Transcript I*, p. 14.

³⁶ Norman Testimony, *Transcript II*, p. 134; Henneke Testimony, *Transcript IV*, p. 6.

³⁷ Henneke Testimony, Transcript IV, p. 8; Norman Testimony, Transcript II, p. 133; Fry Testimony, Transcript II, p.

³⁸ Ryan Testimony, *Transcript IV*, p. 3; Henneke Testimony, *Transcript IV*, pp.7-8.

that time due to a lack of staff and funding.³⁹ Even when a youth is self-advocating for mental health care, they are frequently denied.⁴⁰ Lastly, there is inconsistent access to mental health prescriptions. Evidence received by the Committee suggested that there may be an overreliance by TJJD on medications for youth to compensate for the lack of other more appropriate treatments.⁴¹

Finding IV: Being in state-run facilities may further traumatize the youth and increase mental health needs.

TJJD is increasingly relying on isolating the youth in their cells to compensate for understaffing. The youth will sometimes spend 23 hours a day alone in their cell.⁴² There are reports that youth did not have access to bathrooms during these lockdowns and resorted to relieving themselves in their cells.⁴³ In response to the isolation, youth are self-harming and exhibiting other disruptive behaviors just to leave their cell and receive treatment.⁴⁴

Self-harm and other disruptive behaviors are frequently met with restraints and the use of force, including the use of OC spray (i.e., pepper spray) to stop youth from self-harming. ⁴⁵ Youth who are experiencing a mental health crisis may escalate the situation by resisting, resulting in further trauma. ⁴⁶ For example, the Committee heard the testimony of a girl in a facility who had a history of sex trafficking and abuse and who responded to an officer's use of force with panic and violence. ⁴⁷ Youths need to feel safe before mental health needs can be effectively addressed. ⁴⁸

Finding V: The state-run facilities provide an unsafe environment for both the youth and staff.

A high youth-to-staff ratio leads to unsafe conditions for both the youth and staff⁴⁹ and is a "recipe for disaster."⁵⁰ Safety concerns include increased violence, unsanitary living conditions,

³⁹ Henneke Testimony, *Transcript IV*, pp. 7; 23.

⁴⁰ Norman Testimony, *Transcript II*, p. 140; Henneke Testimony, *Transcript IV*, pp. 9-10.

⁴¹ Freelen Testimony, *Transcript II*, p. 126; Norman Testimony, *Transcript II*, p. 143.

⁴² Martinez Testimony, *Transcript I*, p. 23; Welch Testimony, *Transcript I*, p. 10.

⁴³ Norman Testimony, *Transcript II*, p. 134; Welch Testimony, *Transcript I*, p. 11.

⁴⁴ Welch Testimony, *Transcript I*, p. 11; Norman Testimony, *Transcript II*, p. 139.

⁴⁵ Norman Testimony, *Transcript II*, p. 149. Martinez

⁴⁶ Ryan Testimony, *Transcript IV*, p. 3; Norman Testimony, *Transcript II*, p. 149.

⁴⁷ Henneke Testimony, *Transcript IV*, p. 9.

⁴⁸ Becker Testimony, *Transcript III*, p. 4; Welch Testimony, *Transcript I*, p. 12.

⁴⁹ Welch Testimony, *Transcript I*, p. 41; Martinez Testimony, *Transcript I*, p. 55; Becker Testimony, *Transcript III*, p. 10.

Ashley McFarland, public comment, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, remote panel via ZoomGov, April 11, 2023. Transcript, pp. 15-16 (hereafter *Transcript V*).

and lack of basic health care and medical attention. With inadequate staff-to-youth ratios, the staff only have time to triage the youths' needs. 51 It was reported that in July 2022, TJJD halted the intake of youths into its facilities because it would not have been able to guarantee their safety.⁵²

The instability in staffing levels decreases peer monitoring, which can increase opportunities for predatory staff to engage in abuse or exploitation.⁵³ There has been an increase in dangerous incidents involving the use of force and sexual violence.⁵⁴ Between 2020 to 2022, there was an increase in sexual misconduct investigations by the Office of Inspector General at four out of the five secure facilities.⁵⁵ One study reported that between January and August 2020, the five facilities reported using restraints on youth a total of 2,947 times.⁵⁶

The Committee heard accounts from youth and former youth in facilities that during their time with TJJD, they felt unsafe, were further traumatized, and were "destroyed."⁵⁷

Finding VI: The civil rights of these youth may be violated in Texas Juvenile Justice Department facilities, including the lack of adequate health care, education, recreation, sanitation, religious support, and safety.⁵⁸

Finding VII: Facilities' current grievance process and other accountability measures function poorly.

TJJD has an Office of the Independent Ombudsman that conducts routine inspections of all five state-secured youth facilities. The office is also required to conduct routine inspections of county-level facilities.

⁵¹ Henneke Testimony, *Transcript IV*, p. 22; Welch Testimony, *Transcript I*, p. 9; Martinez Testimony, *Transcript I*,

⁵² TJJD Director Shandra Carter quoted in: Jolie McCullough. "Almost 600 Texas youths are trapped in a juvenile prison system on the brink of collapse." The Texas Tribune. August 2, 2022. Found here. ⁵³ Ibid.

⁵⁴ Welch Testimony, *Transcript I*, pp. 11,56; Henneke Testimony, *Transcript IV*, p. 9.

⁵⁵ Henneke Testimony, *Transcript IV*, p. 9.

⁵⁶ Russell Testimony, Transcript I, p. 37.

⁵⁷ Brown Testimony, Transcript V, p. 2; Henneke Testimony, Transcript IV, p. 9; Norman Testimony, Transcript II, p. 137; Welch Testimony, *Transcript I*, p. 11; Freelen Testimony, *Transcript II*, p. 125.

58 The Committee thinks this is an essential finding but does not have the capacity to fully consider it in this interim

report. We will fully explore this finding in our full report.

There is currently little to no anonymity for youth in the grievance-filing process.⁵⁹ The youth can access the ombudsman via phone, but only in the common spaces with no privacy.⁶⁰ Additionally, access to common spaces is limited due to understaffing.⁶¹

Most of the grievance complaints that are filed are investigated by staff at the same facility from where the complaint originated. With understaffing, it is difficult to find a neutral staff person to respond. When TJJD's Office of the Inspector General (OIG) conducts an investigation, existing relationships between OIG staff and the facility staff may cloud investigators' judgment. One parent testified that they feared retribution for their child if they filed a complaint about their child's treatment.

Few complaints address mental health care. TJJD's data from 2019 indicates that 1 percent of grievances were for specialized treatment programs and less than 1 percent of the grievances were for mental health.⁶⁶ However, the youth may not understand that this is something they can complain about, and the onus is currently on the youth to make the complaint.⁶⁷

Even when complaints are made and investigated, there are often not enough resources or staff to address the concerns. ⁶⁸ This is especially true for mental health care. ⁶⁹

Finding VIII: Youth facilities that are closer to home are more effective and better serve the youths' mental health needs.

Studies show that community-based programs positively impact youth behavior and reduce reoffending. These programs generally emphasize therapeutic or educational approaches and build
accountability. To Communities can maintain smaller facilities, which can be more effective in
addressing mental health needs. Additionally, research has shown that large incarceration
facilities are not effective for youth and increase the likelihood of recidivism. States that are

⁵⁹ Norman Testimony, *Transcript II*, p. 136; Martinez Testimony, *Transcript I*, p. 45.

⁶⁰ Martinez Testimony, *Transcript I*, p. 45; Norman Testimony, *Transcript II*, p. 135.

⁶¹ Welch Testimony, *Transcript I*, p. 46.

⁶² Brown Testimony, *Transcript V*, p. 6; Norman Testimony, *Transcript II*, p. 179.

⁶³ Norman Testimony, *Transcript II*, p. 179.

⁶⁴ Henneke Testimony, *Transcript IV*, p. 19.

⁶⁵ Freelen Testimony, *Transcript II*, p. 178.

⁶⁶ Norman Testimony, *Transcript II*, p. 138; Martinez Testimony, *Transcript I*, p. 46.

⁶⁷ Norman Testimony, *Transcript II*, p. 138.

⁶⁸ Welch Testimony, *Transcript I*, p. 45; Henneke Testimony, *Transcript IV*, p. 23; Norman Testimony, *Transcript II*, p. 139.

⁶⁹ Welch Testimony, *Transcript I*, p. 45.

⁷⁰ Ryan Testimony, *Transcript IV*, p. 4.

⁷¹ Norman Testimony, *Transcript II*, p. 189; Martinez Testimony, *Transcript I*, p. 30.

⁷² Ryan Testimony, *Transcript IV*, p. 4; Martinez Testimony, *Transcript I*, p. 22; Welch Testimony, *Transcript I*, p. 17.

transitioning to regional-based programs are seeing better outcomes for youth and lower costs in the long term. ⁷³

Currently, most youths are in facilities that are far from their home, isolating them from their family and communities.⁷⁴ Children in crisis need stability, and maintaining a connection to homes and communities is important.⁷⁵ Being far from home also makes it hard to ensure youth will have community-based resources to help them after they are released from custody.⁷⁶

Harris County is an example of a county that has already made improvements in how it addresses the mental health needs of the youth in its juvenile justice system. ⁷⁷ It has implemented a Multisystemic Therapy (MST) approach to reduce criminal activity, which includes coordinated services to address behavior, mental health needs, academics, and other needs of the whole family. ⁷⁸ Harris County judges are aware of mental health needs while hearing a youth's case. ⁷⁹ They have also utilized diversion programs to address mental health needs before the youth is officially involved in the justice system. ⁸⁰ Harris County has decreased the amount of youth sent to secure confinement by half in the past four years. ⁸¹

Finding IX: More funding may improve conditions and mental health care in the Texas Juvenile Justice System, but increased budgets alone will not likely fully address needs.

TJJD has had budgeted funds diverted from it several times in the past few years. ⁸² Additional funding for the agency may help address the department's most pressing issue, understaffing. ⁸³ Additionally, improved programming and treatment for youth cannot be successful without adequate investment. ⁸⁴

⁷³ Welch Testimony, *Transcript II*, p. 17; Becker Testimony, *Transcript III*, p. 12; Ryan Testimony, *Transcript IV*, p.

^{3;} Norman Testimony, Transcript II, p. 137

⁷⁴ Martinez Testimony, *Transcript I*, p. 20.

⁷⁵ Ryan Testimony, *Transcript IV*, p. 3.

⁷⁶ Becker Testimony, *Transcript III*, p. 12.

⁷⁷ Leah Wolfthal, testimony, *Briefing Before the Texas Advisory Committee to the U.S. Commission on Civil Rights*, Houston, TX, August 8, 2022. Transcript, p. 152 (hereafter *Transcript III*); Wu Testimony, *Transcript III*, p. 7; Fry Testimony, *Transcript II*, p. 162; Ryan Testimony, *Transcript IV*, p. 4.

⁷⁸ Fry Testimony, *Transcript II*, p. 111; Martinez Testimony, *Transcript I*, p. 27; Ryan Testimony, *Transcript IV*, p. 4.

⁷⁹ Martinez Testimony, *Transcript I*, p. 27; Welch Testimony, *Transcript I*, p. 59.

⁸⁰ Wolfthal Testimony, *Transcript II*, p. 117; Martinez Testimony, *Transcript I*, p. 27.

⁸¹ Ryan Testimony, Transcript IV, p. 4; Martinez Testimony, Transcript I, p. 40; Wu Testimony, Transcript III, p. 7.

⁸² Welch Testimony, *Transcript I*, p. 41.

⁸³ Welch Testimony, *Transcript I*, p. 61; Sunset Advisory Commission. Written Testimony, submitted via email to bpeery@usccr.gov on April 14, 2023.

⁸⁴ Norman Testimony, *Transcript II*, p. 137; Welch Testimony, *Transcript I*, p. 42.

There have been pay increases to address employee retention issues in TJJD in the past, yet there were no long-term improvements.⁸⁵ In 2022, TJJD approved a 15 percent pay increase for all facility staff, but this raise only brought salaries to parity with the adult system, the Texas Department of Criminal Justice. 86 Increased pay may not address other concerns, such as the rural location of many of these facilities, the availability of qualified individuals, or unfavorable working conditions.87

⁸⁵ Martinez Testimony, *Transcript I*, p. 60; Norman Testimony, *Transcript II*, p. 136.

^{Welch Testimony,} *Transcript I*, p. 62.
Becker Testimony, *Transcript III*, p. 20; Ryan Testimony, *Transcript IV*, p. 12.

Recommendations

Among their duties, advisory committees of the Commission are authorized to advise the Agency (1) concerning matters related to discrimination or a denial of equal protection of the laws under the Constitution and the effect of the laws and policies of the Federal Government with respect to equal protection of the laws, and (2) upon matters of mutual concern in the preparation of reports of the Commission to the President and the Congress. 88 In keeping with these responsibilities, and given the testimony heard on this topic, the Committee submits the following recommendations to the Commission:

The U.S. Commission on Civil Rights should issue the following recommendations to the Governor of Texas and the Texas Legislature:

- 1. Invest in the staff of all your facilities, including:
 - a. Improve the salaries of staff to a competitive rate and in recognition of the essential and challenging roles these staff fill.
 - b. Require additional training for corrections officers and ensure the training is developmentally appropriate for youth and considers their unique mental health needs.
 - c. Increase the number of specialty staff, including teachers, medical personnel, and mental health care workers. Ensure these specialists are being used for their expertise and are not required to fill in for corrections officers.
- 2. Invest in the local and county-level juvenile systems and incentivize these community-based programs to treat youth closer to home, including:
 - a. Expanding multidisciplinary programs to address all the needs of youth, such as Multisystemic Therapy (MST).
 - b. Incorporate families in all mental health care programming.
 - c. Develop a regionalized system that can offer better support and funding to the many rural counties in Texas.
 - d. Consider participation in the Department of Justice's Community-Based Alternatives to Youth Incarceration Initiative, ⁸⁹ which supports states and localities as they close large, under-capacity youth prisons.
- 3. Prioritize rehabilitation over punishment in all future investments and program changes to TJJD.
- 4. Mandate that TJJD provide multiple avenues for youth and their families to submit grievances and appoint investigators external to the facility to investigate all complaints.

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^{88 45} C.F.R. § 703.2 (2018).

⁸⁹ OJJDP FY 2023 Community-Based Alternatives to Youth Incarceration. Office of Juvenile Justice and Delinquency Prevention. Department of Justice. <u>Found here.</u>

The U.S. Commission on Civil Rights should issue the following recommendations to the Texas Juvenile Justice Department:

- 1. Prioritize the human and civil rights of all the youth in its care.
- 2. Increase efforts to educate the youth in its custody and their parents on their rights and their avenues for grievance. The grievance process should be more available to youth, be private, and be adjudicated by neutral parties.
- 3. Invest in additional mental health care resources that can begin to address the needs of youth in its custody in the short term, including:
 - a. Consider additional remote resources such as 24/7 mental health hotlines that could support both the youth and staff in crisis and offer additional capacity for understaffed facilities.
 - b. Develop relationships with national resources such as the National Alliance on Mental Health and Substance Abuse and the Mental Health Services Administration.
 - c. Utilize telehealth in its full capacity to provide mental health care to youth. This includes one-on-one therapeutic services, not large group therapy sessions.
- 4. Reduce the use of isolation. When isolation is deemed necessary, ensure it is used sparingly and for the least amount of time possible. Increase mental health support during and after periods of isolation.
- 5. Require all staff to be trained in trauma-informed care and ensure that all policies recognize the potential trauma experienced by the youth and their mental health needs.
- 6. Provide additional crisis prevention training to staff to improve their de-escalation skills to prevent violent situations.
- 7. Accept all avenues of additional funding, including accepting all federal funds available and pursuing additional grants.
- 8. Consider the use of peer support services from individuals who have previous experience in the juvenile justice system but who have been rehabilitated and trained in crisis and behavioral management.
- 9. For youth who age out of or are released from state-secured facilities, conduct family assessments to ensure that the youth are returning to a safe environment and that family members are receiving support services as needed.

Appendix

- A. List of Panelists
- B. Panel Agendas, Minutes, Presentation Slides & Transcripts
- C. Written Testimony
- D. Letter Requesting Written Comment from Texas Juvenile Justice Department

Appendix A – List of Panelists

Panel 1 – August 8, 2022, Houston, TX

Alycia Welch, University of Texas at Austin Martin Martinez, Texas Appleseed Dr. Kristan Russell, Prairie View A&M University

Panel 2 – August 8, 2022, Houston, TX

Layla Fry, Meadows Mental Health Institute Leah Wolfthal, Center for Urban Transformation Amnisty Freelen, Parent Advocate Brittany Norman, Disability Rights Texas

Panel 3 – December 7, 2022, Virtual

State Representative Gene Wu, Texas House of Representatives Phyllis Becker, Missouri Division of Youth Services

Panel 4 – February 15, 2023, Virtual

Liz Ryan, Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice Elizabeth Henneke, Lone Star Justice Alliance

Panel 5 – April 11, 2023, Virtual

Jernard Brown, Collective Action 4 Youth

Appendix B - Panel Agendas, Minutes, Presentation Slides & Transcripts

Documents found at:

 $\underline{https://securisync.intermedia.net/us2/s/folder?public_share=409J0xbKeIQ2vuMJBvQond0011ef}\\ \underline{58\&id=L1RYL0p1dmVuaWxlIEp1c3RpY2U\%3D}$

Appendix C – Written Testimony

All written testimony can be found at:

 $\frac{https://securisync.intermedia.net/us2/s/folder?public_share=409J0xbKeIQ2vuMJBvQond0011ef}{58\&id=L1RYL0p1dmVuaWxlIEp1c3RpY2U\%3D}$

Testimony submitted by: Alycia Castillo Amanda Burnitt Rachel Gandy Natalia Oakes Sarah L. Martin

<u>Appendix D – Letter Requesting Written Comment from Texas Juvenile Justice</u> <u>Department</u>



Texas State Advisory Committee to the U.S. Commission on Civil Rights Written Testimony Request

The Texas State Advisory Committee to the <u>U.S. Commission on Civil Rights</u> is requesting written testimony to aid in their current investigation on mental health care in the Texas Juvenile Justice Department. Written testimony is a vital part of the Committee's investigation and is used to inform policy recommendations that are developed from the Committee's report.

The U.S. Commission on Civil Rights is an independent, bipartisan agency established by Congress and directed to study and collect information relating to discrimination or a denial of equal protection of the laws under the Constitution because of race, color, religion, sex, age, disability, or national origin, or in the administration of justice. The Commission has established advisory committees in each of the 50 states, the District of Columbia, and the five U.S. territories. These Advisory Committees advise the Commission on civil rights issues in their states that are within the Commission's jurisdiction.

The bi-partisan, Texas State Advisory Committee is undertaking an investigation on mental health care in Texas Juvenile Justice Department. The Committee strives to gather balanced testimony in all its projects to develop robust and fully informed recommendations. Thus far, the Committee has heard testimony regarding this issue from elected officials, family judges and attorneys, academic experts, community organizations, and impacted families.

However, the perspective of Texas Juvenile Justice Department is vital to achieving balanced testimony for the Committee's report. We would like to hear directly from the department about the efforts they have made and their barriers to improvement. We have included the following specific questions. Some of these questions were inspired by testimony already gathered. Please answer all the questions that you feel qualified to address, but do not feel that you need to address each one in its entirety.

- 1. What is the process for juveniles to raise concerns about their access to mental health services? How are their privacy rights protected?
- 2. Does TJJD have a healthcare management plan in place for juveniles? What are the details of that management plan? Do you partner with other governmental agencies, entities, or universities?

- 3. What is your current operating budget breakdown? Did the agency receive sufficient appropriations over the past twenty years to fulfill its obligations and ensure inmate wellbeing? If not, did you request more from policymakers?
- 4. What roles are fulfilled by contract providers versus state-employed staff? What training is required for state employees and contractors who are responsible for and engage with juveniles?
- 5. What qualifications are necessary for those who have direct interactions with juveniles and their immediate supervisors?
- 6. What are the standards for operation for each center? What specific policies and practices are in place to ensure the mental well-being of juveniles?
- 7. What access do juveniles have to mental health and/or religious counseling and resources?
- 8. What is the visitation policy? What conditions are necessary for a juvenile to lose their visitation privileges?
- 9. What discretionary privileges are provided to juveniles by TJJD? What would be the conditions necessary for an juvenile to lose these privileges?

The Texas State Advisory Committee requests you please send your response to Brooke Peery at bpeery@usccr.gov by Wednesday, May 10th.