(DJJ), and DJJ in all 21 state-operated secure detention centers. Defendants' statewide policy and practice is to isolate children in solitary confinement, often the same child repeatedly, for hours or days at a time, with no time limit in locked cells alone, without meaningful social interaction, environmental stimulation, outdoor recreation, educational instruction, access to personal property, or adequate sanitation. Defendants' policy and practice causes Plaintiffs, G.H. and R.L. (Plaintiffs), and approximately children a year,[1] to be isolated in solitary confinement in conditions which pose a substantial risk of serious harm to their health and safety because of their continuing social, psychological, and physiological development.

Defendants have been, and continue to be, deliberately indifferent to this risk to children entrusted to their care. Defendants' actions violate the Eighth and Fourteenth Amendments to the United States Constitution. Defendant DJJ also discriminates against children with disabilities through this same policy and practice by failing to have a system to provide reasonable accommodations for all children subject to confinement in violation of the Americans with Disabilities Act, 42 U.S.C. § 12131, *et seq.* (ADA) and Section 504 of the Rehabilitation Act (RA), 29 U.S.C. § 794, *et seq.* tion C 0.00BT 12 14.042 72 18 T42 105.8421

Plaintiffs G.H. and R.L. (Plaintiffs) seek to represent (1) a class of: children who are, or will be, in custody in a DJJ-operated secure detention center and subject to solitary confinement; and (2) a subclass of: all qualified children with disabilities as that term is defined in 42 U.S.C. § 12102 and 29 U.S.C. § 705(9)(B), who are, or will be, in custody in a DJJ-operated secure detention center and subject to solitary confinement.

This case is not about what happened to an individual child in solitary confinement. Plaintiffs seek only declaratory and injunctive relief to remedy Defendants' statewide solitary confinement policy and practice which results in a systemic risk of harm and disability discrimination for them, the class, and subclass. The systemic legal and factual issues here warrant class certification.

STATEMENT OF FACTS

I. Defendants Authorize and Use a Statewide Policy and Practice of Solitary Confinement in Secure Detention Facilities

Defendants Tamayo and DJJ (Defendants) control, operate, and oversee a secure detention system of 21 facilities.[2] These facilities are physically restrictive and children, generally ranging in age from eight to twenty-one, are detained pending adjudication, disposition, placement, or pursuant to court order. *See id.*; *see also* Fla. Admin. Code R. 63G-2.014(58). DJJ's mandate is to manage children

[2] *See* Florida Department of Juvenile Justice, Comprehensive Accountability Report, (2019), available at: http://www.djj.state.fl.us/docs/car-reports/final-(2018-19-car)-detention.pdf?sfvrsn=2 (last visited April 18, 2021).

policy and practice is to

can be confined, has no time limit between confinements, and no limit on the cumulative amount of time a child spends in solitary confinement. *See id.*; *see also* Fla. Admin. Code R. 63G-2.002; Exs. 1-2; Ex. 3, ¶ 19; Ex. 4, ¶ 8.[7] As a result, the

. Ex. 2.

Year	Children Subject to Confinement	Number of Times Conent

Defendants' (unwritten) policy and widespread practice is not to use confinement sparingly or as a last resort when a child's behavior "imminently and substantially threatens the physical safety of others or compromises security." Fla. Admin. Code R. 63G-2.002(3). Rather, statewide, Defendants subject children to confinement [redacted] not even meeting their own written standard. Ex. 5, ¶ 33. For example, class members are subject to solitary confinement for reasons that include [redacted]. *See* Ex. 6, ¶ 4 (Declaration of Rachel Ortiz); *see also* Ex. 3, ¶ 5; Ex. 4, ¶ 8. Defendants' policy and practice is to continue to isolate children in solitary confinement where there is no imminent or substantial threat to safety or security; this is demonstrated where

. Ex. 7 (confinement reports).

II. Defendants' Statewide Solitary Confinement Policy and Practice Poses a Substantial Risk of Serious Harm to All Children in Secure Detention

Defendants' statewide solitary confinement policy and practice poses a substantial risk of serious harm for all children in secure detention. Ex. 5. ¶¶ 27-38. Since children, as a group, are still developing socially, psychologically, and neurologically, they are at a heightened risk of psychological and physical harm,

including lasting permanent damage, from solitary confinement. *See* Ex. 5, ¶¶ 18-20. This risk includes post-traumatic stress disorder, major depression, anxiety, paranoia, self-harm, suicide, insomnia, agitation, sadness, mistrust, and feelings of hopelessness and abandonment.[9] *Id.*, ¶ 19. Plaintiffs G.H. and R.L. experienced

. Ex. 3, ¶¶ 9, 12; Ex. 4, ¶¶ 10-12; Ex. 5, ¶ 37.

Medical research on the adolescent brain explains why children are more vulnerable to the risk of harm from solitary confinement, including its long-term effects. Ex. 5, ¶ 22. Psychologically, children are different from adults, making their time spent in isolation even more difficult and the developmental, psychological, and physical damage more comprehensive and lasting.[10] They experience time differently – a day to a child feels longer than a day to an adult – and (nge)12 0 0 9 463.32 39 Tm -99 (t)]T(d (nge)12 0 0 9 (.)g Tm 1)4 (5 -2.299)]TJ ol(i)9 (

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Researchers have also found that when juvenile correctional officials promote policies that isolate youth from their peers, alienate them, and deny them social integration, children are exposed to higher rates of suicidal behavior.[11] There is a high correlation between juvenile suicide and the use of solitary confinement in detention. *Id.* This evidence demonstrates a substantial risk of serious harm that can be fatal for children exposed to solitary confinement for even short periods of time. Ex. 5, ¶ 25. Despite this known risk of serious harm, DJJ's policy subjects children to solitary confinement in secure detention who have attempted suicide or engaged in self-injury and, therefore, are at an elevated suicide risk. *See* Ex. 5, ¶ 32; Ex. 3, ¶ 9; Ex. 4, ¶ 11; Ex. 9 (Central Communication Center reports). Defendants kept Plaintiffs R.L. and G.H. in solitary confinement

Ex. 4, ¶ 11; Ex. 3,, ¶ 9.

The risk of harm to children from solitary confinement, including for suicide, is amplified by the disproportionately high incidence of preexisting mental illness among children involved in the juvenile justice system. Ex. 5, ¶¶ 29-30. The prevalence rate for mental illness for these youth is estimated between 60-75%.[12] Ex. 5, ¶ 23. Defendants' policies only require mental health to see a child in

[11] *Id.* at 27; *see also* Ex. 5, ¶ 20.
[12] *See*

confinement if isolation exceeds 24-hours, and then only "as soon as reasonably possible."[13] Even assuming this occurs, it is inadequate to ameliorate the risk of harm. Ex. 5, ¶ 31.

A substantial number of children exposed to solitary confinement are at further risk of harm because they also suffer from trauma[14] Ex. 5, ¶ 23. Children in the juvenile justice system have much higher rates of Adverse Childhood Experiences (ACEs).[15] Defendants' solitary confinement policy places these children at risk for magnifying existing trauma; evidence shows that this can have serious long-term harmful impacts on health and well-being.[16] Ex. 5, ¶ 19.

All children's health and safety is at risk from solitary confinement, but for those children who may have even more vulnerability, Defendants do not categorically exclude them from confinement. This includes children that Defendants identify at risk for suicide or self-harm, or who have a serious mental illness, a physical disability, a developmental disability, or are pregnant. *See* Fla.

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[13] Although DJJ policy allows confined youth access to mental health care "as needed," it does not require any mental health evaluation before subjecting a child to solitary confinement or within the first 24-hours of confinement. Fla. Admin. Code. R. 63G-2.022(3)(d)(4)(a); and FOP 3.03.

[14] Burrell, S., Trauma and the Environment of Care in Juvenile Justice Institutions, at 1 (2013), https://ylc.org/wp-content/uploads/2018/11/jj_trauma_brief_environofcare_burrell_final.pdf (last visited April 26, 2021).

[15] *Id.*

[16] *See* Nat'l Comm'n on Corr. Health Care, Solitary Confinement (Isolation), supra note 3; *see* also Ex. 5, ¶ 28-29.

Admin. Code R. 63G. When Defendants amended their rules they consciously disregarded this change.[17] *Id.*; Ex. 10.

Recognizing all children's greater vulnerability to harm, numerous psychiatric, medical, scientific, correctional, and legal authorities support the elimination of solitary confinement for juveniles. Ex. 5, ¶ 26. These authorities articulate how juveniles' particular vulnerabilities expose them to a risk of adverse reactions from isolation. *See id.*

III. DJJ's Statewide Solitary Confinement Policy and Practice Subjects Children to Conditions That Have the Cumulative Effect of Depriving Them of Basic Human Needs

human contact, environmental stimulation, recreation, and sanitation as basic human needs).

DJJ locks children in solitary confinement for extended periods of time in stark, small, barren cells. *See* Ex. 5, ¶¶ 28, 35; Ex. 3, ¶¶ 6-7; Ex. 4, ¶ 9. These cells are cramped spaces approximately five by seven feet without much room to move around. Fla. Admin. Code R. 63N-1.00952; Ex. 11; Ex. 5, ¶ 28. The only fixtures are a toilet, sink, and concrete slab to sit or lay on. Ex. 11; Ex. 3, ¶ 7; Ex. 4, ¶ 9. DJJ regularly refuses to provide a thin mat for children until sleeping hours. Ex. 3, ¶ 8; Ex. 4, ¶ 9. DJJ refuses to turn off the lights in the cells, leaving children under fluorescent lights 24-hours a day. Ex. 3, ¶ 8; Ex. 4, ¶ 9. The cells have a large locked solid metal door with a very small window that is difficult to see through.

8; Ex. 4, ¶ 10. While in confinement, children have no recreation or programming and no access to phones, radios, or televisions. Fla. Admin. Code R. 63G-2.002; Ex. 3, ¶ 8; Ex. 4, ¶ 10. Personal property is removed from the cell. Ex. 4., ¶ 9; FOP 3.03. The only way children can communicate with someone is by banging on their cell door to try to attract the attention of staff, or by yelling loudly so staff or another child may hear them. Ex. 3, ¶ 10; Ex. 4, ¶ 9. Staff tells them they can get in trouble for doing so. *Id.* Staff will often communicate with a child through the solid metal door rather than opening it to talk to a child face-to-face and hear the child clearly. Ex. 3, ¶ 10; Ex. 4, ¶ 13. When children go into solitary confinement, they have no idea if, or when, they are getting out. Ex. 3, ¶ 19; Ex. 4, ¶ 10.

These deprivations of normal social interactions and environmental stimulation are exacerbated by the austere and decrepit conditions inside the cells. Many of the detention centers are old, dirty, decaying buildings suffering from age and disrepair that is magnified when a child is locked around-the-clock in a tiny cell. *See* Ex. 3, ¶¶ 5-7; Ex. 4, ¶¶ 8-9; Ex. 5, ¶ 28. The paint is peeling and the cell walls and doors are covered in graffiti. *Id.*; Ex. 11. DJJ has failed to maintain the plumbing which causes toilets to not work or to flood the cells. *See* Ex. 3, ¶¶ 6-7; Ex. 4, ¶ 9. The toilets and cells reek of human waste. *See*

eat alone in their cells in these conditions. *See* Ex. 3, ¶ 8; Ex. 4, ¶ 10. The cumulative effect of these deprivations in solitary confinement presents a substantial risk of serious harm to children in the putative class, all of whom are vulnerable due to their continuing development. *See* Ex. 5, ¶¶ 18, 27-38.

IV. Defendant DJJ Fails to Have a System in Place to Provide Reasonable Modifications to Children with Disabilities Subject to Solitary Confinement

Plaintiffs bring two additional claims under the ADA and RA for children with disabilities who have been, or will be, subject to solitary confinement (i.e., the disability subclass). ECF No. 2 ¶¶ 131-49. These claims arise from DJJ's lack of a functioning system to provide reasonable modifications or accommodations for children with disabilities who are subject to solitary confinement. *See* Fla. Admin. Code R. 63G.

There are several systemic deficiencies. DJJ does not train their staff about reasonable modifications or accommodations for children. Ex. 6, ¶ 6. DJJ fails to have an ADA coordinator review, consider, and decide on providing reasonable modifications or accommodations for children. *See* 28 C.F.R. §35.107(b). DJJ fails to provide any information to children in secure detention about their ADA rights, reasonable modification or accommodations, or that DJJ must follow the ADA. *See* Ex. 12. DJJ lacks an adequate grievance procedure to investigate and resolve any ADA complaints from children. *See* 28 C.F.R. §35.107(b); Fla. Admin. Code. R.

63G-2.002. Nor is DJJ's general grievance procedure accessible, for example, to those children with learning disabilities or who are blind. Fla. Admin. Code R. 63G-2.

These systemic failures result in DJJ subjecting these children to or retaining them in solitary confinement because of their disabilities. For example, in response to rule violations, DJJ places children with disabilities in solitary confinement who are unable to regulate or conform their behaviors due to the nature of their disabilities, [redacted] *See* Ex. 4, ¶¶ 3-5; Ex. 3, ¶¶ 14-15; Ex. 5, ¶ 34. This results in Defendants isolating them in solitary confinement because of their disabilities, rather than modifying DJJ policy to provide accommodations such as further behavior interventions or mental health services to avoid placement in solitary confinement. DJJ's failure to have a legally compliant system to provide reasonable accommodations or modifications to their solitary confinement policy and practice results in a denial of meaningful access to programs, services, and activities available to children in the general population, such as recreation, education, cafeteria, television, and mental health treatment. Ex. 3, ¶¶ 8, 12; Ex. 4, ¶¶ 10, 14. DJJ's lack of a functioning system to provide reasonable accommodations or modifications to solitary confinement policies impacts children with disabilities in all detention facilities.

V. Defendants Have Subjected the Named Plaintiffs to Their Unconstitutional and Discriminatory Solitary Confinement Policies and Practices

Defendants have repeatedly subjected the named Plaintiffs to solitary confinement in secure detention for hours or days. Ex. 3, ¶ 5; Ex. 4, ¶ 8. G.H. is now in secure detention. Ex. 3, ¶ 7; R.L. Decl., ¶ 2. They remain under DJJ's jurisdiction based on pending juvenile delinquency cases and may be detained again at any time. *Id.* Their Declarations provide details about the conditions they experienced in solitary confinement. Ex. 3, ¶ 6-8; Ex. 4, ¶¶ 8-10.

Plaintiffs' goal is to obtain declaratory and injunctive relief, not money damages, on behalf of themselves and the putative class and subclass. Each is willing to be a class representative. Ex. 3, ¶ 21; Ex. 4, ¶¶ 2, 16.

SUMMARY OF PLAINTIFFS' CLAIMS

To assist the Court in considering the Rule 23 requirements, Plaintiffs summarize their claims. *See* ECF No. 2 ¶¶ 117-149.

In an Eighth Amendment challenge to conditions of confinement in isolation, Plaintiffs must show that: (a) the conditions of confinement must be objectively serious or 'extreme, i.e., the prisoner must show that a condition of his confinement pose[s] an unreasonable risk of serious damage to his future health or safety, and (b) that the defendant prison officials subjectively acted with deliberate indifference with regard to the conditions at issue. *Farmer v. Brennan*, 511 U.S.

825, 834 (1994); *Helling v. McKinney*, 509 U.S. 25, 35 (1993); *Thomas v. Bryant*, 614 F.3d 1288, 1304 (11th Cir. 2010); and *G.H.*, 424 F. Supp. 3d at 1114 (citation omitted). An unreasonable risk "is not one that today's society chooses to tolerate." *Helling*

See, e.g., *G.H.*, 424 F. Supp. 3d at 1116; and *V.W. v. Conway*, 236 F. Supp. 3d 554, 583-84 (N.D.N.Y. 2017).

For a claim under the ADA and RA, a plaintiff must show: "(1) that he is a qualified individual with a disability; and (2) that he was either excluded from participation in or denied the benefits of a public entity's services, programs, or activities, or was otherwise discriminated against by the public entity; and (3) that the exclusion, denial of benefit, or discrimination was by reason of the plaintiff's disability."[18] *Bircoll v. Miami-Dade Cnty.*, 480 F.3d 1072, 1083 (11th Cir. 2007). "[A]n ADA claim may proceed on the theory that the Defendant failed to reasonably accommodate the Plaintiffs' disability." *G.H.*, 424 F. Supp. 3d at 1120 (citations omitted).

MEMORANDUM OF LAW

Plaintiffs satisfy the requirements of Rules 23(a) and (b)(2) of the Federal Rules of Civil Procedure for the proposed class and disability subclass. The Court

a strict formula. The Eleventh Circuit recognizes that "generally less than twenty-one is inadequate, more than forty adequate, with numbers between varying according to other factors." *Cox v. Am. Cast Iron Pipe Co.*, 784 F.2d 1546, 1553 (11th Cir. 1986). "A plaintiff need not show the precise number of members in the class." *Jones v. Desantis*, 4:19cv300-RH/MJF, 2020 WL 5646124, at *3 (N.D. Fla. April 7, 2020) (citation omitted).

Even without complete discovery, Plaintiffs have demonstrated that numerosity is satisfied for the class based on the numbers alone. According to Defendants' confinement data, [redacted] *See* Ex. 2.

Joinder is "impracticable because the juveniles may by law be incarcerated for varying lengths of time, the [detention] population is constantly in flux, and the proposed class includes future members whose identities are unknown." *See Hughes v. Judd*, No. 8:12-CV-568-T-23MAP, 2013 WL 1821077, at *22 (M.D. Fla. Mar. 27, 2013), *report and recommendation adopted as modified*, No. 8:12-CV-568-T-23MAP, 2013 WL 1810806 (M.D. Fla. Apr. 30, 2013); *see also Gerstein v. Pugh*, 420 U.S. 103, 110 n. 11 (1975)

trauma, developmental disabilities, or at risk for suicide or self-harm, suffer from the same risk of harm from Defendants' solitary confinement policy and practice as the class, though it is further amplified. Ex. 5, ¶ 24.

In solitary confinement, class members experience the same conditions and deprivations which, cumulatively, expose them to a common substantial risk of serious harm. *See G.H.*, 424 F. Supp. 3d at 1116 (citations omitted). These include: a lack of environmental stimulation; lack of normal human contact; no access to recreation and exercise; inadequate sanitation; leaving children in locked cells for hours or days with nothing to do; only briefly allowing children out of solitary confinement for a few minutes each day to shower; requiring children to eat all their meals alone in their cells next to a toilet; removal of personal property; no school instruction; and only requiring mental health services after 24-hours in isolation. Fla. Admin. Code. R. 63G-2.002; Ex. 1; Ex. 3, ¶¶ 6-8, 11; Ex. 4, ¶¶ 9-10. As this Court has recognized, the deprivations of basic human needs (e.g., human contact, environmental stimulation, recreation, and sanitation) are caused by Defendants' statewide solitary confinement policy and practice. *G.H.*, 424 F. Supp. 3d at 1114. Defendants isolate [redacted] class members each year in these austere conditions. Ex. 2.

Even if some conditions in one facility are arguably slightly better than another, commonality does not require perfect uniformity, and these conditions demonstrate commonality because they are rooted in Defendants' statewide policy and practice. *See Wal-Mart*, 564 U.S. at 350. In totality, the conditions that all class members experience in solitary confinement expose them to the same substantial risk of serious harm.

Commonality is also demonstrated because, across detention centers, Defendants do not use confinement as an "immediate, short-term, crisis management strategy for use during situations in which one or more youth's behavior imminently and substantially threatens the physical safety of others or compromises security." Ex. 6; FOP 3.03; Fla. Admin Code R. 63G-2.002(3)(a). Rather, Defendants subject [redacted]. *Id.* Defendants also [redacted] Ex. 7. This demonstrates a common question of fact. *See, e.g., J.S.X. Through Next Friend D.S.X. v.*

Foxhoven, 330 F.R.D. 197, 208-

does not require "that all putative class members share identical claims, and ... factual differences among the claims of the putative class members do not defeat certification." *Cooper v. Southern Co.*, 390 F.3d 695, 714 (11th Cir. 2004), *overruled on other grounds by Ash v. Tyson Foods, Inc.*, 546 U.S. 454, 457 (2006) (citations omitted). This is precisely the type of systemic civil rights reform case supporting a finding of commonality. *See, e.g.*, *Jones*, 2020 WL 5646124, at *4 (N.D. Fla. April 7, 2020).

b. ADA and Section 504 Claims

Plaintiffs also satisfy commonality for the disability subclass claims. The common question is: whether Defendants have violated the ADA and RA by failing to have a functioning system for reasonable modifications in secure detention to prevent the denial of access to programs, services, and activities for children with disabilities who are subject to solitary confinement. This is a common question capable of subclass-wide resolution because, to answer it, the Court need only look to Defendants' policies and practices (or lack thereof) regarding modifications and accommodations when children with disabilities are placed or retained in confinement. *See, e.g.*, *Dunn v. Dunn*, 318 F.R.D. 652, 663 (M.D. Ala. 2016), *modified sub nom. Braggs v. Dunn*, No. 2:14CV601-MHT, 2020 WL 2395987 (M.D. Ala. May 12, 2020).

Commonality is also met because the Plaintiffs and all subclass members have suffered the same injury: the lack of a functioning and adequate system that would ensure children with disabilities are appropriately accommodated. *Id*. Stated differently, Defendant DJJ has failed to remedy an inadequate system that has the effect of discriminating against Plaintiffs and the subclass by failing to accommodate their disabilities when they are subject to solitary confinement. *Id.*

Here, there are several systemic ADA and RA failures common to DJJ's secure detention system. DJJ does not train their staff to consider whether and how a child's rule violations could be a result of disability and what reasonable modifications should be made in response. Ex. 6, ¶ 6-7. DJJ does not involve an ADA coordinator in the decision to place or retain children with disabilities in solitary confinement to ensure they are accommodated. *See* 28 C.F.R. §35.107(b). DJJ does not inform children of their ADA rights. Ex. 12. The only arguable way for children with disabilities in secure detention to receive a reasonable modification is through the grievance process, if they somehow know it is available for this purpose, but DJJ is obligated to provide reasonable modifications to children with known disabilities regardless of whether they request them. *See Nattiel v. Fla. Dep't of Corr.*, CASE NO. 1:15-cv-sl sym5

Based on these systemic failures, when children engage in behaviors related to their disabilities, DJJ's response is to place or retain them in solitary confinement, rather than consider a reasonable modification of their solitary confinement policy and practice. Fla. Admin. Code R. 63G; Ex. 3, ¶¶ 5, 14-15; Ex. 4, ¶¶ 8, 14. As a result of this placement, DJJ denies these children equal access to the programs, services, and activities available to children in the general population such as recreation, education, cafeteria meals, T.V., and mental health services because of their disabilities. *See*,

The Plaintiffs' claims under the ADA and RA are also aligned with those of

4. The Named Plaintiffs and Their Counsel Will Adequately Protect the Interests of the Class and Subclass

Plaintiffs will "fairly and adequately protect the interests of the class" as required under Fed. R. Civ. P. 23(a)(4). This requirement is met when: (1) there are no substantial conflicts of interest between the representatives and the class, and (2) the class representatives and their counsel will adequately prosecute the action. *Valley Drug Co.*, 350 F.3d at 1189. Adequate representation is usually presumed in civil rights actions for injunctive and declaratory relief classes because there is no monetary pie to slice. *Canupp v. Liberty Behavioral Healthcare Corp.*, Case No. 2:04-cv-260-FtM-33DNF, 2005 WL 8148817, at *6 (M.D. Fla. Mar. 29, 2005). These criteria are satisfied here.

None of the Plaintiffs have any conflicts of interest with the class; all are seeking to invalidate the same unlawful conduct. They share a common goal: an end to the unconstitutional and discriminatory treatment of juveniles in solitary confinement in DJJ secure detention. Plaintiffs seek relief that will benefit the entire class and subclass in the same manner. Plaintiffs are also capable of fairly and adequately protecting the interests of the class because they do not have any interests antagonistic to the class. Ex. 3, ¶ 21; Ex. 4, ¶¶ 2, 16. Plaintiffs, the class, and subclass members, all seek to enjoin the unlawful acts and omissions of Defendants. Any differences in disabilities or the circumstances of their confinement among class and subclass members do not equate to a "substantial

No. 4:15-cv-00615-RH/CAS, 2017 WL 1433032, at * (N.D. Fla. March 23, 2017) (citation omitted). Here, Defendants' statewide policy and practice applies to all class members (without exception) and subjects them to conditions in solitary confinement that, cumulatively, deprive them of basic human needs and exposes them to a substantial risk of serious harm to their future health and safety due to

declaratory relief sought to enjoin discriminatory state prison system policy segregating all HIV-positive prisoners); *Hughes*, 2013 WL 1821077, at *24 (finding (b)(2) certification appropriate where juveniles seek injunctive relief to remedy

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