
PAIMI was enacted in 1986 in response to a 246-page report issued by Senator Lowell Weicker that described conditions at state-operated facilities regarding the care and treatment of institutionalized persons, including those with mental illness. Congress found that “individuals with mental illness are vulnerable to abuse and serious injury” as well as “neglect, including lack of treatment, adequate nutrition, clothing, health care, and adequate discharge planning.” 42 U.S.C. § 10801(a)(1) and (3). Moreover, Congress found that “[s]tate systems for monitoring compliance with respect to the rights of individuals with mental illness vary widely and are frequently inadequate.” 42 U.S.C. § 10801(a)(4). Accordingly, Congress granted protection and advocacy agencies the authority to “investigate incidents of abuse and neglect of persons with mental illness if the incidents are reported to the system or if there is probable cause to believe that incidents occurred.” 42 U.S.C. § 10805(a)(1)(A). P&As also have the authority to monitor a facility’s compliance regarding the rights of residents. 42 C.F.R. § 51.42(c)(2).

At the invitation of the Office of the Child Advocate, and consistent with its authority, and with OPA’s PAIMI program priority to eliminate the use of restraint and seclusion at institutions that provide services to individuals with mental illness, OPA staff reviewed the records of multiple children who are incarcerated at the Connecticut Juvenile Training School. This review of records also included the review of multiple videotapes of children who were restrained and secluded by CJTS staff for behaviors that were consistent with their mental health diagnoses. The records reflected what was recently documented by the National Disability Rights Network [NDRN] in its June, 2015 Report “Orphanages, Training Schools, Reform Schools and Now This? Recommendations to Prevent the Disproportionate Placement and Inadequate Treatment of Children with Disabilities in the Juvenile Justice System.” The Report found that “youth with disabilities are incarcerated at disproportionately higher rates....65-70 percent of youth in the justice system meet the criteria for a disability.”¹ Furthermore, “juvenile justice facilities can be places where children and youth...are physically, emotionally and sexually abused all over again.”²  Id. at 13.

² Id. at 13.
The NDRN Report found that violations of the rights of children with mental illness who are incarcerated at juvenile facilities include:

- Failure to provide necessary substance use treatment; mental health treatment; health care and education.
- Inappropriate use of restraint, seclusion, use of psychotropic medication to control behavior, and segregation/solitary confinement.
- Inhumane conditions in general (inadequate nutrition, space, exercise, bed coverings; heat; light; air, etc.).
- Failure to accommodate youth with disabilities, including both physical (e.g. wheelchair ramps, communication (e.g., sign language interpreters) and programmatic accommodations (e.g. access to therapy groups and educational programming).
- Failure to protect from physical and sexual abuse by peers and staff. \(^3\)

The records reviewed by OPA revealed that, like the children described in the NDRN Report, children at CJTS have been subjected to inappropriate use of restraint and seclusion and have been subjected to unnecessary and harmful segregation and solitary confinement. This establishes not only a failure of treatment, but also raises the question as to whether their rights, as children with disabilities, have been violated. This is the very population that OPA is mandated to protect.

\(^3\) *Id.* at 31.