



Responding to the Pandemic

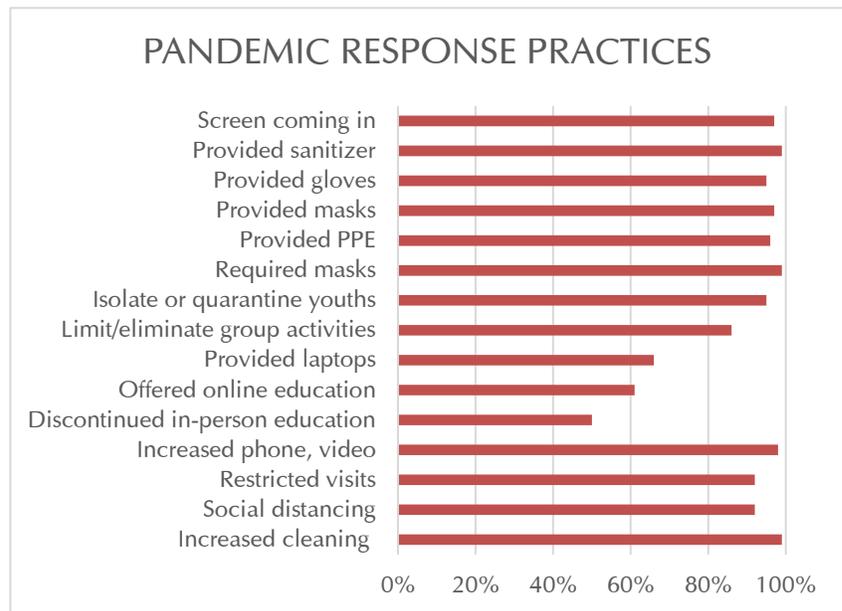
PbS Issue Brief 2: Prevention and Protection Strategies

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The COVID-19 pandemic posed new challenges for juvenile justice agencies to protect the mental and physical health of young people in their care. Like in other congregate care facilities, physical structures and daily activities were not designed for easy social distancing, constant disinfecting and quarantining residents. Agencies quickly changed their policies and practices to limit the spread. [As reported earlier](#), 4% of 2,250 youths tested positive for the virus in April 2021 in facilities participating in [Performance-based Standards \(PbS\)](#). Of the more than 7,000 staff tested, 2% tested positive.

During the month of April 2021, 90% or more of PbS participating facilities were implementing the majority of recommended pandemic responses.

Agencies shared common strategies and developed creative solutions that can continue to inform the field. PbS continues to share its data to better understand the impact, presence and prevalence of COVID-19 in juvenile justice programs and the strategies used to reduce its spread. The data PbS shares is reported voluntarily by 148 correction, detention, assessment and community-based residential programs in 32 states and provides a unique and timely snapshot of conditions of confinement and facility quality of



life. PbS has worked with facilities and agencies since 1995 to implement a set of national aspirational performance standards for operations, services and programs and coaching agencies to collect and use data to implement best practices and achieve positive outcomes for young people.

Education was noticeably impacted by the pandemic. Half of the facilities discontinued in-person education. The majority offered online education (61%) and provided laptops (66%).

Most facilities quarantined youths on living units (84%) with varying degrees of interaction and activities.

A majority of facilities quarantined youths on specially-designated living units. Some facilities allowed them to interact six-feet apart, wearing masks and following prevention protocols. In other facilities, youths were confined to their rooms for up to 14 days and/or until they tested negative for the virus.





While in quarantine, youths in 61% of the facilities left their rooms for recreation, youths in 49% of facilities left for leisure activities and youths in 36% of facilities left for education.

Youths were placed in medical isolation when they tested positive, displayed symptoms of COVID-19 based on Centers for Disease Control (CDC) or local public health guidelines, or in some facilities, while awaiting test results. While there was a slight decline in the average daily population from October 2020 to April 2021, use of medical isolation dropped by almost 50% but the average time a youth spent in medical isolation in April 2021 roughly doubled to 80 hours.

As reported in [Responding to the Pandemic, PbS Issue Brief 3](#), the average daily population of young people in facilities remains below pre-pandemic figures.

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