

STATE IN THE INTEREST OF  
# client  
  
                    Petitioner  
  
v.  
  
KYSHUN WEBSTER, DIRECTOR  
OF THE JJIC  
                    Respondent  
  
CASE NO:  
  
FILED: \_\_\_\_\_

JUVENILE COURT FOR  
THE PARISH OF ORLEANS  
STATE OF LOUISIANA  
  
\_\_\_\_\_  
DEPUTY CLERK OF COURT

**WRIT OF HABEAS CORPUS**

# attorney name, an attorney duly admitted to practice law in the State of Louisiana, hereby affirms the following under penalty of perjury:

**INTRODUCTION**

1. Petitioner is a youth between the ages of 10 and 17 detained by Orleans Parish Juvenile Court at the Juvenile Justice Intervention Center (JJIC), the juvenile detention center for Orleans Parish. By design, the JJIC houses youth in close congregate settings, with shared dining rooms, common recreational areas, and communal showers. In each dorm, the youths’ single rooms face into a shared common space shared by each unit. Given that JJIC is located in New Orleans, one of the national epicenters of the COVID-19 pandemic, where the transmission rate is growing at an alarming pace, these youth are extremely vulnerable to infection by the virus and its potentially devastating consequences. This petition seeks the immediate release from detention of # client on the grounds that continuing to hold them in JJIC constitutes deliberate indifference to the risk of serious medical and mental health harm in violation of the Eighth and Fourteenth Amendments to the United States Constitution, the corresponding provisions of the Louisiana Constitution, and the Louisiana Children’s Code.

2. Dr. Joshua Yukich, an epidemiologist who specializes in infectious disease and health decision making reviewed JJIC’s Coronavirus Action Plan finding it insufficient to provide for safety of children, staff and the Orleans Parish community that staff returns to daily. Dr. Yukich further concluded that given the inevitability

that COVID-19 will be introduced to the facility a reduction in the population before that time will be most effective to reduce transmission.

3. In only a few months, more than 745,000 people worldwide have been diagnosed with COVID-19 and more than 35,000 of those people have died. There is no vaccine or cure for COVID-19. No one is immune.

4. Risk mitigation through social distancing and isolation is the only known strategy to protect people from COVID-19. The importance of social distancing and isolation is such that Louisiana Governor John Bel Edwards, declared a statewide public health emergency on March 11, 2020. Governor Edwards took further steps to limit transmission of COVID-19 on March 22, 2020, when he issued an unprecedented Executive Order directing all people in Louisiana to “stay at home unless performing an essential activity.”<sup>1</sup> Because risk mitigation is effectively impossible in juvenile detention centers, experts from youth correctional facilities all over the country have called for the immediate release of detained youth to their homes to be safely cared for by family, and if family is unavailable, to be moved to foster homes or similar non-congregate settings. Release is the only effective means of protecting detained youth from contracting and transmitting COVID-19 and of reducing the risk of exposure to staff working in detention centers. Communities have also experienced significant changes of circumstance since # client was detained, and those circumstances permit them to be safely cared for in their homes.

5. COVID-19 has already reached jails, prisons, and youth detention facilities in Louisiana. Though there are yet no known cases in JJIC, the virus’s reach into the Orleans Justice Center portends the danger that continuing to maintain youths in custody poses both for those youth and for detention center staff. Across New Orleans and the State of Louisiana, extraordinary and unprecedented measures are being taken in every area of life to protect people from this pandemic. Orleans Parish cannot leave these young and susceptible individuals behind to suffer potentially dire consequences.

6. Upon information and belief, Orleans Parish Juvenile Court closed on March 19<sup>th</sup> requiring the cancellation or rescheduling of all hearings, including

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<sup>1</sup> JBE executive order of March 22, 2020, Section 3, <https://gov.louisiana.gov/assets/Proclamations/2020/JBE-33-2020.pdf>

continued custody hearings, that were or would have been set from that date through at least April 13, 2020.<sup>2</sup> Moreover, several youth arrested just before or since the March 19<sup>th</sup> court closure have been held without bond and without any detention hearing at all despite the expiration of the 3-day timeline for continued custody hearings established in La.Ch.C. art. 819. Upon information and belief, petitioner can be safely maintained and monitored in the community during the pendency of their juvenile court proceedings without subjecting them to the unreasonable risks to their health and well-being posed by holding them a congregate juvenile detention facility.

### **PARTIES**

7. I am # attorney role of the Louisiana Center for Children’s Rights (LCCR). I make this application on behalf of the below-named Petitioner. LCCR # update according to circumstances either already represents the petitioning youth, or the youth are unrepresented but entitled to representation by LCCR, the public defender for Orleans Parish Juvenile court, pursuant to La.Ch.C. art. 809.

8. # client submits this application for a writ of habeas corpus is held in the Juvenile Justice Intervention Center (JJIC), the juvenile detention center for Orleans Parish located in New Orleans, Louisiana, and operated by the City of New Orleans. As a result, they are at high risk for contracting and transmitting COVID-19.

9. Respondent Kyshun Webster, in his capacity as Director of the JJIC, is the immediate legal custodian of Petitioner.

### **JURISDICTION AND VENUE**

10. This Court has subject matter jurisdiction over this matter under La.C.Cr.P. art. 353.

11. This Court is the appropriate venue for this matter because Petitioner is held in custody in Orleans Parish.

12. Petitioner has made no prior application for the relief requested herein.

13. A copy of the detention order pertaining to Petitioner is not attached hereto due to the emergency nature of this proceeding.

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<sup>2</sup> Orleans Parish Juvenile Court Order of Closure, April 1, 2020, <https://www.nola.gov/juvenile-court/news/news-files/opjc-order-of-closure-2020-04-01/>

## STATEMENT OF FACTS

### The COVID-19 Pandemic Presents a Grave Risk of Harm, Including Serious Illness and Death, to Youth Held in Detention Centers

14. COVID-19 is a coronavirus that has been declared a pandemic. As of March 30, 2020, over 745,000 people worldwide have confirmed diagnoses, including 4,025 cases in Louisiana and 1,480 cases in Orleans Parish.<sup>3</sup> Over 35,000 people have died, including 185 in Louisiana and 86 in Orleans Parish.<sup>4</sup> These numbers make Louisiana a “global epicenter of the pandemic.”<sup>5</sup> Though just over 1 percent of the U.S. population lives in the state, 7 percent of all COVID-19 deaths, 7 percent of all hospitalizations, and 3 percent of all positive tests have been in Louisiana.<sup>6</sup> According to a researcher at University of Louisiana-Lafayette, as of March 21, 2020, Louisiana’s transmission rate was the highest in the world.<sup>7</sup> Likewise, Doctor Rebekah Gee, CEO Louisiana State University Health Care Services, warns the situation in the state is “increasingly dire”.<sup>8</sup> The City of New Orleans leads the country in deaths per population and people are getting sicker as a result of COVID-19 than elsewhere in the country, with a higher rate of intubation.<sup>9</sup> Dr. Gee projects the city will run out of ventilators by April 4, 2020.<sup>10</sup>

15. The World Health Organization (WHO) has declared COVID-19 a pandemic on March 11, 2020, concerned by “the alarming levels of spread and severity, and by the alarming levels of inaction.”<sup>11</sup> The same day, state and parish leaders in New Orleans, Louisiana took steps to address the emerging public health

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<sup>3</sup> Louisiana Department of Health statistics updated once daily (March 30, 2020, 9:00 AM) <http://ldh.la.gov/coronavirus/>.

<sup>4</sup> *Id.*

<sup>5</sup> Vann R. Newkirk II, *Watch New Orleans: With the Country’s Attention Turned North, the Coronavirus Pandemic is Exploding in Louisiana*, THE ATLANTIC (March 27, 2020), <https://www.theatlantic.com/politics/archive/2020/03/coronavirus-pandemic-coming-new-orleans/608821/?fbclid=IwAR389oQzlbZGKmxDJ2TPvpF-BoFCLMtGdTJa72Kuv6O6gbs2pTLo8TKByMM>.

<sup>6</sup> *Id.*

<sup>7</sup> See Louisiana Governor’s Office of Homeland Security and Emergency Preparedness, *COVID-19 Louisiana Case Info* (March 27, 2020), <https://gov.louisiana.gov/assets/docs/covid/govCV19Brief-2.pdf>.

<sup>8</sup> *Coronavirus Crisis in Louisiana is ‘Dire,’ LSU Health Care Services CEO Says*, Today.com (March 27, 2020), <https://www.today.com/video/coronavirus-crisis-in-louisiana-is-dire-lsu-health-care-services-ceo-says-81278021978>.

<sup>9</sup> *Id.*

<sup>10</sup> *Id.*

<sup>11</sup> Betsy McKay et al., *Coronavirus Declared Pandemic by World Health Organization*, WALL ST. J. (Mar. 11, 2020, 11:59 PM), <https://www.wsj.com/articles/u-s-coronavirus-cases-top-1-000-11583917794>; World Health Organization, Director-General Opening Remarks (March 11, 2020), <https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020>.

crisis in the state. Governor John Bel Edwards declared a Public Health Emergency in Proclamation Number 25 JBE 2020 in response to the threat posed by the virus,<sup>12</sup> and Mayor LaToya Cantrell declared a state of emergency for Orleans Parish.<sup>13</sup> Just two days later, the President of the United States declared the pandemic a national emergency.<sup>14</sup>

16. On March 20, 2020, as the number of new cases in New Orleans rose at an alarming rate, Mayor Cantrell issued a Stay Home Mandate, implementing her March 16, 2020 Proclamation and requiring all people within New Orleans to remain in their homes unless performing essential functions.<sup>15</sup> According to the mayor's proclamation, even essential service providers must engage in social distancing at all times, where feasible, including "maintain[ing] at least six feet from other individuals, wash[ing] hands with soap and water for at least 20 seconds as frequently as possible or using hand sanitizer, cover[ing] coughs and sneezes, and avoid[ing] shaking hands."<sup>16</sup> These measures recognized that the Centers for Disease Control and Prevention (CDC) "advises that the best way to prevent illness is to avoid being exposed to the virus. Thus, the CDC encourages individuals to put distance between themselves and other people."<sup>17</sup>

17. On March 22, 2020, Governor Edwards determined equally expansive action was required statewide and issued Proclamation Number 30 JBE 2020, requiring all people in Louisiana to stay home unless performing an essential activity and prohibiting gatherings of 10 people or more.<sup>18</sup>

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<sup>12</sup> JBE executive order of March 11, 2020, <https://gov.louisiana.gov/assets/ExecutiveOrders/25-JBE-2020-COVID-19.pdf>

<sup>13</sup> Katelyn Umholtz, *New Orleans mayor declares state of emergency after officials confirm 13 cases*, Times-Picayune, (March 11, 2020); LaToya Cantrell, *Mayoral Proclamation of a State of Emergency Due to COVID-19*, (Mar. 11, 2020, 6:24 PM) [https://www.nola.com/news/coronavirus/article\\_68df3890-63e5-11ea-a4ca-2foe871e7eaf.html](https://www.nola.com/news/coronavirus/article_68df3890-63e5-11ea-a4ca-2foe871e7eaf.html). <https://nola.gov/mayor/executive-orders/emergency-declarations/20200311-mayoral-proclamation-of-a-state-of-emergency-due-to-covid-19/>.

<sup>14</sup> Derek Hawkins et al., *Trump Declares Coronavirus Outbreak a National Emergency*, WASH. POST (Mar. 13, 2020, 10:46 AM), <https://www.washingtonpost.com/world/2020/03/13/coronavirus-latest-news>.

<sup>15</sup> City of New Orleans News Website, *Mayor Cantrell Issues Stay Home Mandate in Response to COVID-19*, <https://nola.gov/mayor/news/march-2020/mayor-cantrell-issues-stay-home-mandate-in-response-to-covid-19/>; City of New Orleans Health Department, *Guidelines for COVID-19 Response and Stay at Home Directives*, (Mar. 20, 2020), <https://ready.nola.gov/NOLAReady/media/Documents/Coronavirus/Proclamation-Guidance-3-20-20.pdf>.

<sup>16</sup> City of New Orleans Health Department, *Guidelines for COVID-19 Response and Stay at Home Directives*, (Mar. 20, 2020) <https://ready.nola.gov/NOLAReady/media/Documents/Coronavirus/Proclamation-Guidance-3-20-20.pdf>.

<sup>17</sup> *Id.*

<sup>18</sup> JBE executive order of March 22, 2020, <https://gov.louisiana.gov/assets/Proclamations/2020/JBE-33-2020.pdf>

18. On March 29, 2020, the President of the United States extended the applicability of federal social distancing guidelines for another 30 days, to April 30, 2020.<sup>19</sup> On March 30, 2020, Governor Edwards indicated at a press conference that he would extend the Louisiana stay at home order until April 30, 2020 as well, and that he would issue his proclamation by the end of the week.<sup>20</sup> He issued the proclamation extending the order on April 2, 2020.<sup>21</sup>

19. The transmission of COVID-19 is expected to grow exponentially. Nationally, projections by the Center for Disease Control and Prevention (“CDC”) indicate that over 200 million people in the United States could be infected with COVID-19 over the course of the pandemic without effective public health intervention, with as many as 1.5 million deaths in the most severe projections.<sup>22</sup>

20. COVID-19 is a particularly contagious disease. A recent study showed that the virus could survive for up to three hours in the air, four hours on copper, up to twenty-four hours on cardboard, and up to two to three days on plastic and stainless steel.<sup>23</sup> Indeed, a new study of an early cluster of COVID-19 cases in Wuhan, China revealed the dangers of indirect transmission resulting from infected people contaminating common surfaces—in the study, it was a communal mall bathroom.<sup>24</sup> New research also shows that controlling the spread of COVID-19 is made even more difficult because of the prominence of asymptomatic transmission—people who are contagious but who exhibit limited or no symptoms, rendering ineffective any screening tools dependent on identifying symptomatic behavior.<sup>25</sup>

21. There is no vaccine for COVID-19. No one is immune.

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<sup>19</sup> Paul LeBlanc, et al., *Trump Extends Federal Social Distancing Guidelines to April 30*, CNN (Mar. 29, 2020, 10:21 PM), <https://www.cnn.com/2020/03/29/politics/trump-coronavirus-press-conference/index.html>.

<sup>20</sup> Courtney Vinopal, *Louisiana Gov. John Bel Edwards Gives Update on Coronavirus Response*, PBS News Hour, (Mar. 30, 2020, 11:25 AM) <https://www.pbs.org/newshour/health/watch-live-louisiana-gov-john-bel-edwards-gives-update-on-coronavirus-response>.

<sup>21</sup> JBE executive order of April 2, 2020, <https://gov.louisiana.gov/assets/Proclamations/2020/41-JBE-2020-Stay-At-Home-Extended.pdf>.

<sup>22</sup> Chas Danner, *CDC’s Worst-Case Coronavirus Model: 214 Million Infected, 1.7 Million Dead*, N.Y. Mag. (Mar. 13, 2020), <https://nymag.com/intelligencer/2020/03/cdcs-worst-case-coronavirus-model-210m-infected-1-7m-dead.html>.

<sup>23</sup> *Novel Coronavirus Can Live on Some Surfaces for Up to 3 Days, New Tests Show*. TIME (March 11, 2020), <https://time.com/5801278/coronavirus-stays-on-surfaces-days-tests>.

<sup>24</sup> Jing Cai et al., *Indirect virus transmission in cluster of COVID-19 cases, Wenzhou, China, 2020*. EMERG INFECT DIS., June 2020, <https://doi.org/10.3201/eid2606.200412>.

<sup>25</sup> Chelsea Ritschel, *Coronavirus: Are Asymptomatic Still Capable of Spreading COVID-19?* INDEPENDENT (March 15, 2020, 8:16 PM), <https://www.independent.co.uk/life-style/health-and-families/coronavirus-symptoms-asymptomatic-covid-19-spread-virus-a9403311.html>.

22. While older individuals face greater chances of serious illness or death from COVID-19,<sup>26</sup> it is now known that the younger population is just as susceptible of contracting the virus and may fall as ill as older people. In a virtual press conference held on March 20, 2020, WHO Director-General Tedros Adhanom Ghebreyesus warned that younger people are not only not spared of contagion, but worldwide, they make up a “significant proportion” of patients requiring hospitalization, sometimes for weeks and sometimes resulting in their deaths.<sup>27</sup> Orleans Parish saw the first death of a child reported March 26, when a 17-year-old lost his life to the virus.<sup>28</sup> Even when asymptomatic or suffering milder symptoms, younger individuals still pose a very serious risk of transmission to those with whom they come into contact, including older, more vulnerable adults. For precisely these reasons, Governor John Bel Edwards took the extraordinary step of closing all K-12 schools.<sup>29</sup>

23. Further, certain underlying medical conditions increase the risk of serious COVID-19 disease for people of any age – including lung disease, heart disease, chronic liver or kidney disease (including hepatitis and dialysis patients), diabetes, epilepsy, hypertension, compromised immune systems (such as from cancer, HIV, or autoimmune disease), blood disorders (including sickle cell disease), inherited metabolic disorders, stroke, developmental delay, and pregnancy.

24. Youth involved in the juvenile justice system are generally less healthy than their peers. They are more likely to go for long stretches without health insurance, and as they get older, more likely than the general population to engage in

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<sup>26</sup> Medical information in this and the petition paragraphs that follow are drawn from the expert testimony of two medical professionals filed in a recent filed federal case in Washington State, as well the website of the Harvard Medical School. See Expert Declaration of Dr. Marc Stern:

<https://www.aclu.org/legal-document/dawson-v-asher-expert-declaration-dr-marc-stern>; Expert Declaration of Dr. Robert Greifinger: <https://www.aclu.org/legal-document/dawson-v-asher-expert-declaration-dr-robert-greifinger>; Expert Declaration of Dr. Jonathan Golob: <https://www.aclu.org/legal-document/dawson-v-asher-expert-declaration-dr-jonathan-golob?redirect=dawson-v-asher-expert-declaration-dr-jonathan-golob>; HARVARD MEDICAL SCHOOL, CORONAVIRUS RESOURCE CENTER, *As coronavirus spreads, many questions and some answers*, <https://www.health.harvard.edu/diseases-and-conditions/coronavirus-resource-center>, (last visited Mar. 19, 2020).

<sup>27</sup> Stephanie Nebehay, *WHO Message to Youth on Coronavirus: ‘You Are Not Invincible’*, REUTERS, (Mar. 20, 2020, 1:29 PM) <https://www.reuters.com/article/us-health-coronavirus-who-idUSKBN21733O>.

<sup>28</sup> Ramon Antonio Vargas, *17-Year-Old New Orleans Boy with Coronavirus Dies, LDH says; First Reported Death Under 36*, [https://www.nola.com/news/coronavirus/article\\_aob256a6-6f90-11ea-9e92-f330bca11048.html](https://www.nola.com/news/coronavirus/article_aob256a6-6f90-11ea-9e92-f330bca11048.html).

<sup>29</sup> JBE executive order of March 13, 2020, Section 2, <https://gov.louisiana.gov/assets/ExecutiveOrders/27-JBE-2020-COVID-19.pdf>.

sexual behavior that puts them at risk for HIV, AIDS, and other sexually transmitted infections.<sup>30</sup>

25. The vast majority of youth in juvenile detention are Black and come from low-income communities in Orleans Parish. Demographic information for the Travis Hill School, the school that operates within JJIC lists a population that is 93% economically disadvantaged, 31% disabled, 98% African American, and 100% students of color.<sup>31</sup> It is well-documented that these communities suffer from high rates of asthma prevalence. While an estimated 12% of Louisiana households report a child who has received an asthma diagnosis, nearly 23% of high school students have received an asthma diagnosis at some point in their lives.<sup>32</sup> The prevalence of youth currently having asthma increases as grade level increases, and African American children are more likely to suffer from asthma currently than their white counterparts.<sup>33</sup> The rate of asthma deaths per 100,000 population are also significantly higher for African Americans than whites.<sup>34</sup> Among adults those in the lowest income brackets show three times the rate of current asthma and more than double the rate of lifetime asthma than those in the highest income bracket.<sup>35</sup>

26. The CDC has warned that people with asthma are at higher risk of getting very sick from COVID-19, which may affect the respiratory tract (nose, throat, lungs), cause an asthma attack, and possibly lead to pneumonia and acute respiratory disease.<sup>36</sup>

27. For people with medical conditions that increase the risk of serious COVID-19 infection, symptoms such as fever, coughing and shortness of breath can be especially severe.<sup>37</sup>

28. COVID-19 can cause severe damage to lung tissue, sometimes leading to a permanent loss of respiratory capacity, and can damage tissues in other vital organs

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<sup>30</sup> Nicole Westman, *To Reduce Long-Term Health Gaps, a Push for Early Intervention in Juvenile Detention*, UNDark, (July 16, 2018), <https://undark.org/2018/07/16/juvenile-detention-health-care-racial-disparities/>.

<sup>31</sup> 2018-2019 School Report Card, Louisiana Department of Education (March 31, 2020),

[https://louisianaschools.com/schools/36132/academic-performance#breakdown\\_student\\_groups](https://louisianaschools.com/schools/36132/academic-performance#breakdown_student_groups)

<sup>32</sup> 2008 Louisiana Asthma Surveillance Report, Louisiana Department of Health and Hospitals Bureau of Primary Care and Rural Health, 20 (March 31, 2020),

<http://ldh.la.gov/assets/oph/pcrh/asthma/LouisianaAsthmaBurdenReportMarch2010.pdf>.

<sup>33</sup> *Id.*

<sup>34</sup> *Id.* at 21.

<sup>35</sup> *Id.* at 16.

<sup>36</sup> Coronavirus Disease 2019 (COVID-19) Website, Centers for Disease Control and Prevention (March 31, 2020), <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/asthma.html>.

<sup>37</sup> *Id.*



including the heart and liver. Patients with serious cases of COVID-19 require advanced medical support, including positive pressure ventilation and extracorporeal mechanical oxygenation in intensive care. Patients who do not die from serious cases of COVID-19 may face prolonged recovery periods, including extensive rehabilitation from neurological damage and loss of respiratory capacity.

29. COVID-19 may also target the heart muscle, causing a medical condition known as myocarditis, or inflammation of the heart muscle. Myocarditis can affect the heart muscle and electrical system, reducing the heart's ability to pump. This reduction can lead to rapid or abnormal heart rhythms in the short term, and long-term heart failure that limits exercise tolerance and ability to work.

30. Emerging evidence suggests that COVID-19 can also trigger an over-response of the immune system, further damaging tissues in a cytokine release syndrome that can result in widespread damage to other organs, including permanent injury to the kidneys and neurologic injury.

31. These complications can manifest at an alarming pace. Patients can show the first symptoms of infection in as little as two days after exposure, and their condition can seriously deteriorate in as little as five days or sooner.

32. The need for care, including intensive care, and the likelihood of death, is much higher from COVID-19 than from influenza. According to recent estimates, the fatality rate of people infected with COVID-19 is about ten times higher than a severe seasonal influenza, even in advanced countries with highly effective health care systems. According to preliminary data from China, 20 percent of people in high-risk categories who contracted COVID-19 there died.<sup>38</sup>

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<sup>38</sup> *Report of the WHO-China Joint Mission on Coronavirus Disease 2019 (COVID-19)*, World Health Organization (Feb. 28, 2020), at 12, <https://www.who.int/docs/default-source/coronaviruse/who-china-joint-mission-on-covid-19-final-report.pdf> (finding fatality rates for patients with COVID-19 and comorbid conditions to be: “13.2% for those with cardiovascular disease, 9.2% for diabetes, 8.4% for hypertension, 8.0% for chronic respiratory disease, and 7.6% for cancer”); Wei-jie Guan et al., *Comorbidity and its impact on 1,590 patients with COVID-19 in China: A Nationwide Analysis*, MEDRXIV (Feb. 27, 2020), at 5, <https://www.medrxiv.org/content/10.1101/2020.02.25.20027664v1.full.pdf> (finding that even after adjusting for age and smoking status, patients with COVID-19 and comorbidities of chronic obstructive pulmonary disease, diabetes, hypertension, and malignancy were 1.79 times more likely to be admitted to an ICU, require invasive ventilation, or die, the number for two comorbidities was 2.59); Fei Zhou et al., *Clinical course and risk factors for mortality of adult inpatients with COVID-19 in Wuhan, China: a retrospective cohort study*, *Lancet* (March 11, 2020), tb. 1, [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30566-3/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30566-3/fulltext) (finding that among hospital patients, who tended to be older, of those who had COVID-19 and died, 48% had hypertension, 31% had diabetes, and 24% had coronary heart disease).

33. There is no cure for COVID-19 nor is there any known medication to prevent or treat infection.

34. The only known methods to reduce the risk for vulnerable people of serious illness or death from COVID-19 are to prevent infection in the first place through social distancing and improved hygiene, including frequent hand washing with soap and water.

**Youth in Detention Face an Elevated Risk of COVID-19 Transmission**

35. Upon information and belief, juvenile detention centers, by design and operation, make it impossible for youth to engage in the necessary social distancing required to mitigate the risk of COVID-19 transmission. Detained youth have limited freedom of movement and no control over the movement of others with whom they are required to congregate on a daily basis. They are unable to maintain anything close to the recommended distance of six feet from others.

36. Youth charged with delinquent offenses in Orleans Parish Juvenile Court and remanded during the pendency of their cases are housed in the Juvenile Justice Intervention Center (JJIC), operated by the City of New Orleans. The JJIC houses youth in close quarters with shared living spaces and common gathering areas, shared dining and recreation, both in areas used by all incarcerated youth. JJIC experiences constant turnover of detained youth and staff, making the facilities breeding grounds for infection and transmission of COVID-19.

37. Youth at JJIC are assigned to housing units comprised of individual cells connected by a common area with shared shower facilities. Each housing unit eats all its meals in a communal dining room, used by all housing units in the facility. During waking hours, when not in school or other programs, youth generally spend their time in their unit's common area. Due to the virus, school is not being held in the normal classroom setting, and regular education students are learning remotely individually through printed packets provided to each student.<sup>39</sup> As a result, the children are forced to choose between spending the majority of each day in their housing unit's common area, which does not allow for social distancing, or remaining in their cells in a state of de facto solitary confinement.

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<sup>39</sup> Exhibit 1. Public Records Request #20-1789, Center for Educational Excellence in Alternative Settings, April 2, 2020.

38. Medical care in JJIC is provided through a contract with Children’s Hospital. While some nursing staff will remain available on-site, medical emergencies and other major medical needs are treated off-site at Children’s Hospital. The medical director/ primary care physician and medical psychologist will provide treatment through telehealth.<sup>40</sup> It is well-known, however, that the pandemic has already strained and is at risk of overwhelming the capacity of the city’s healthcare system.<sup>41</sup>

39. By its nature, detention during a public health crisis increases risk for those detained and the communities that employees return to after every shift. After reviewing JJIC’s Coronavirus Action Plan<sup>42</sup>, Dr. Joshua Yukich, a trained epidemiologist who specializes in infectious disease and health decision making, concluded that the plan fails to provide necessary protections to Petitioner, staff and the surrounding community of Orleans Parish.<sup>43</sup> Recognizing inherent challenges in mitigating highly transmittable diseases in a detention setting he found “there remain a number of areas in which this response plan is still deficient.”<sup>44</sup> The exposure and risk factors are inadequate to identify those individuals with COVID-19 or at risk of spreading it, even failing to include history of fever in the initial assessment.<sup>45</sup> While the plan provides for separation between symptomatic and asymptomatic children, it fails to address the necessity of having separate staff and locations for personal hygiene, dining and recreation and any social distancing between staff and children.

40. The population at JJIC continually changes, even in the midst of court closures, with new detained youth entering and others being discharged on a daily basis. Youth are typically brought in by law enforcement to await detention hearings, at which time a judge makes a probable cause determination and sets bond.<sup>46</sup> Although no detention hearings have been held since the Court’s closure, youth who

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<sup>40</sup> Exhibit 2. Public Records Request 20-1789, Children’s Hospital, April 2, 2020.

<sup>41</sup> David Jacobs, *Louisiana Governor Edwards: Health Care Capacity in New Orleans Could Be Overwhelmed by April 4*, WASHINGTON EXAMINER (March 25, 2020, 3:30 PM), <https://www.washingtonexaminer.com/politics/louisiana-gov-edwards-health-care-capacity-in-new-orleans-could-be-overwhelmed-by-april-4>.

<sup>42</sup> Exhibit 3. Department of Human Services Juvenile Justice Intervention Center, City of Orleans, *Juvenile Justice Intervention Center Coronavirus Action Plan*.

<sup>43</sup> Exhibit 4. Affidavit, Dr. Joshua Yukich, April 5, 2020.

<sup>44</sup> *Id.*

<sup>45</sup> *Id.*

<sup>46</sup> La. Ch.C. Arts. 814 and 821.

are arrested are still being detained at JJIC.<sup>47</sup> As a result, youth in detention are continuously exposed to new detained youth and to different staff members, who alternate from shift to shift. While JJIC's Coronavirus Action Plan includes separating newly detained youth for 72 hours, it fails to provide for separate staff. As the virus spreads, staff will undoubtedly fall ill, increasing the turnover and exposure of youth in the facility.

41. Infectious diseases that are communicated by air or touch, such as COVID-19, are more likely to spread in congregate environments, such as detention centers—places where people live, eat, and sleep in close proximity. Recent events demonstrate that people are particularly vulnerable to transmitted COVID-19 infection where their ability to practice social distancing is limited and they either share common areas where the infection risk is high or they unavoidably come into contact with persons who themselves were exposed to situations that carried a high degree of risk of infection.

42. The highest known person-to-person transmission rate for COVID-19 to date took place in a skilled nursing home facility in Kirkland, Washington, and on afflicted cruise ships in Japan and off the coast of California. Each of these congregate settings became veritable breeding grounds for transmission of COVID-19.

43. The conditions of Orleans Parish detention facilities pose a higher risk of the spread of COVID-19 than in non-carceral locations like a nursing home or cruise ship. Detention centers have a greater risk because of closer quarters, the proportion of vulnerable people detained, and sub-optimal medical care resources.<sup>48</sup>

44. Juvenile detention centers, much like jails, impose limited mobility and heightened confinement on their detainees and feature shared dining and bathroom accommodations, making them particularly vulnerable to the transmission of

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<sup>47</sup> Orleans Parish Juvenile Court Order of Closure, March 18, 2020, <https://www.nola.gov/juvenile-court/news/news-files/opjc-notice-of-closure-2020-03-18/>; Matt Sledge, *New Orleans Juvenile Court Closed: 'Hazardous' After Visitors Test Positive for Coronavirus*, NOLA.COM (March 20, 2020, 9:47 AM).

<sup>48</sup> See, e.g., Joseph A. Bick, *Infection Control in Jails and Prisons*, 45 *Clinical Infectious Diseases* 1047, 1047 (Oct. 2007), <https://doi.org/10.1086/521910> (in jails “[t]he probability of transmission of potentially pathogenic organisms is increased by crowding, delays in medical evaluation and treatment, rationed access to soap, water, and clean laundry, [and] insufficient infection-control expertise”); see also Claudia Lauer & Colleen Long, *US Prisons, Jails On Alert for Spread of Coronavirus*, Associated Press (Mar. 7, 2020).

infection. In China and Iran, major and devastating COVID-19 outbreaks occurred in prisons, and experts predicted the same would happen in the U.S.<sup>49</sup>

45. COVID-19 has gained a foothold in U.S. jails, prisons, and detention centers. On March 28, the Department of Corrections confirmed that a person in an undisclosed Louisiana state prison had tested positive and had been held in isolation since testing.<sup>50</sup> According to the DOC website, 10 DOC staff had self-reported testing positive as of March 26.<sup>51</sup>

46. On March 29, it was reported that Patrick Jones, a 49-year-old man, died of the virus at Oakdale Federal Prison in Louisiana.<sup>52</sup> That day, a guard was admitted to a hospital intensive care unit with the virus, and 30 additional inmates and staff tested positive.<sup>53</sup> According to Corey Trammel, a union representative for correctional officers at the facility, the situation is far from under control. “We don’t know how to protect ourselves,” he said.”<sup>54</sup> On March 31, a Bureau of Prisons spokesperson announced Oakdale was no longer testing individuals who are symptomatic for the virus due to “sustained transmission” at the facility.<sup>55</sup>

47. As of March 30, two people held at the Orleans Justice Center (OJC), the city’s adult jail, also tested positive for the coronavirus following diagnoses of eleven Orleans Parish Sherriff’s Office staff and six employees of jail healthcare provider

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<sup>49</sup> Evelyn Cheng and Huileng Tan, *China Says More than 500 Cases of the New Coronavirus Stemmed from Prisons*, CNBC, Feb. 20, 2020, (quoting Tyler Winkelman, co-director of the Health, Homelessness, and Criminal Justice Lab at the Hennepin Healthcare Research Institute in Minneapolis), available at <https://www.cnbc.com/2020/02/21/coronavirus-china-says-two-prisons-reported-nearly-250-cases.html>.

<sup>50</sup> Jacqueline DeRobertis, *Louisiana State Prison Inmate Tests Positive for Coronavirus; 1<sup>st</sup> Confirmed Case at a State Facility*, THE ADVOCATE, (Mar. 28, 2020, 10:54 PM) [https://www.theadvocate.com/baton\\_rouge/news/coronavirus/article\\_67ac4350-716e-11ea-8cb5-6bee98b98550.html](https://www.theadvocate.com/baton_rouge/news/coronavirus/article_67ac4350-716e-11ea-8cb5-6bee98b98550.html).

<sup>51</sup> COVID-19 Inmate Testing, Louisiana Dept. of Public Safety and Corrections (last visited March 31, 2020), <https://doc.louisiana.gov/doc-covid-19-testing/>.

<sup>52</sup> Kimberly Kindy, *An Explosion of Coronavirus Cases Cripples a Federal Prison in Louisiana*, WASH. POST, (Mar. 29, 2020, 3:01 PM), [https://www.washingtonpost.com/national/an-explosion-of-coronavirus-cases-cripples-a-federal-prison-in-louisiana/2020/03/29/75a465c0-71d5-11ea-85cb-8670579b863d\\_story.html](https://www.washingtonpost.com/national/an-explosion-of-coronavirus-cases-cripples-a-federal-prison-in-louisiana/2020/03/29/75a465c0-71d5-11ea-85cb-8670579b863d_story.html).

<sup>53</sup> *Id.*

<sup>54</sup> *Id.*

<sup>55</sup> Nicholas Chrastil, *Louisiana Federal Prison No Longer Testing Symptomatic Inmates for Coronavirus Due to ‘Sustained Transmission’*, THE LENS, (Mar. 31, 2020), [https://thelensnola.org/2020/03/31/louisiana-federal-prison-no-longer-testing-symptomatic-inmates-for-coronavirus-due-to-sustained-transmission/?utm\\_source=The+Lens&utm\\_campaign=c001b3be4d-EMAIL\\_CAMPAIGN\\_2020\\_03\\_31\\_05\\_46&utm\\_medium=email&utm\\_term=0\\_bbc4ba031-c001b3be4d-407132145](https://thelensnola.org/2020/03/31/louisiana-federal-prison-no-longer-testing-symptomatic-inmates-for-coronavirus-due-to-sustained-transmission/?utm_source=The+Lens&utm_campaign=c001b3be4d-EMAIL_CAMPAIGN_2020_03_31_05_46&utm_medium=email&utm_term=0_bbc4ba031-c001b3be4d-407132145).

Wellpath.<sup>56</sup> Five others held in custody at OJC are awaiting test results, and it is not clear how many others are being quarantined or showing symptoms.<sup>57</sup>

48. East Baton Rouge Parish Prison has likewise identified a COVID-19 case as of March 29 and moved 94 people into quarantine as a result.<sup>58</sup>

49. Underscoring that children are not immune from COVID-19, the Office of Juvenile Justice (OJJ) currently reports that seven children at Bridge City Center for Youth have tested positive for the virus.<sup>59</sup>

50. Though a limited number of cases have been identified in Louisiana's jails, prisons, and detention centers so far, the transmission rate in other facilities across the country highlights the dangers about which physicians and healthcare workers have warned.<sup>60</sup>

51. On March 20, New York Department of Corrections' Rikers Island had eight confirmed COVID-19 cases. By March 30, 167 people in custody and 137 staff members had tested positive for the virus.<sup>61</sup> Two corrections staff members have died, a "low number" of people in custody have been hospitalized, and more than 800 people in custody are being held in isolation of quarantined groups.<sup>62</sup> Though District Attorneys have asserted that New York City "is capable to creating a secure model of inmate care that other municipalities will follow", the Chief Physician of Rikers responded that even with Rikers implementing CDC guidance, the number of infections continued to grow quickly.<sup>63</sup>

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<sup>56</sup> Nicholas Chrastil, *Two Inmates at the New Orleans Jail Test Positive for Coronavirus*, THE LENS, (Mar. 30, 2020) <https://thelensnola.org/2020/03/30/two-inmates-at-the-new-orleans-jail-test-positive-for-coronavirus/>.

<sup>57</sup> *Id.*

<sup>58</sup> *East Baton Rouge Prison Quarantines More Than 90 Inmates After One Contracts Coronavirus*, THE ADVOCATE, (Mar. 30, 2020, 7:45 PM) [https://www.theadvocate.com/baton\\_rouge/news/coronavirus/article\\_e6808422-72e8-11ea-896a-93240d6856c3.html](https://www.theadvocate.com/baton_rouge/news/coronavirus/article_e6808422-72e8-11ea-896a-93240d6856c3.html).

<sup>59</sup> OJJ COVID-19 Information, Off. of Juvenile Justice (last visited April 2, 2020), <https://ojj.la.gov/ojj-covid-19-information/>.

<sup>60</sup> Jon Schuppe, *Prisoners in New York City Jarils Sound Alarm as Coronavirus Spreads*, NBC NEWS (March 30, 2020, 5:30 PM), <https://www.nbcnews.com/news/us-news/prisoners-new-york-city-jails-sound-alarm-coronavirus-spreads-i-n1172306>; Statement Regarding COVID-19 Risks for Detained and Incarcerated Youth, Physicians for Criminal Justice Reform 2 (March 22, 2020), <https://njdc.info/wp-content/uploads/PFCJR-Statement.pdf>; Thomas A. LaVeist et al., *An open letter regarding COVID-19 and jails in Orleans Parish, Louisiana*, Tulane Sch. Pub. Health & Tropical Medicine, <https://sph.tulane.edu/open-letter-covid19-jail>; Affidavit of Brie Williams, MD, March 27, 2020, [http://www.sado.org/content/pub/11248\\_affidavit.pdf](http://www.sado.org/content/pub/11248_affidavit.pdf)

<sup>61</sup> Jan Ransom and Alan Feuer, *'We're Left for Dead': Fears of Virus Catastrophe at Rikers Jail*, THE N.Y. TIMES, (Mar. 30, 2020, 7:49 PM) <https://www.nytimes.com/2020/03/30/nyregion/coronavirus-rikers-ny-jail.html>.

<sup>62</sup> *Id.*

<sup>63</sup> Larry Celona, et al., *City District Attorneys Rip de Blasio Over Planned Release of High-Risk Inmates*, N.Y. POST, (Mar. 30, 2020, 5:09 PM), <https://nypost.com/2020/03/30/city-district-attorneys-rip-de-blasio-over-planned-release-of-high-risk-inmates/>; CITE TO TWITTER THREAD BY ROSS MACDONALD, I HAVE IT SCREEN SHOTTED.

52. At Cook County Jail in Chicago, Illinois, the first two cases of COVID-19 were announced March 23, and by March 30, the number of cases had climbed to 134.<sup>64</sup> Twenty staff members have also tested positive.<sup>65</sup>

53. JJIC is as vulnerable to COVID-19 as any other juvenile detention facility, jail, or prison. Given that the period during which a COVID-19 infection incubates in a person before that person develops symptoms is estimated to be between two and 14 days,<sup>66</sup> and given the current lack of access to testing for asymptomatic individuals who have been exposed to the disease,<sup>67</sup> it is possible that COVID-19 is already in the facility.

54. Based on media reports, communication with staff, and information obtained from JJIC, it is clear JJIC has not implemented protocols sufficient to protect either the youth in detention or staff working in the facility. The attempted assessment of exposed individuals is inadequate to identify possible carriers, the failure to plan for staff division between exposed, diagnosed and healthy children risks the health of staff and detainees. Moreover, given the constant influx of new detained youth, there are simply no measures absent unavailable mandatory and prompt testing to address those youth who may be in the incubation period of the virus or asymptomatic carriers of it.<sup>68</sup>

55. There is an unavoidable dilemma that while a youth remains housed at JJIC the measures that have or could be taken to prevent the transmission of COVID-19 may somewhat reduce the risk to a youth's physical wellbeing but only at a tremendous cost to the youth's psychological wellbeing, rehabilitation, and mental and emotional health. JJIC has suspended in-person family visits to reduce transmissions, but that isolates youth from their families and support networks. The suspension of all visits for youth in detention during this incredibly stressful period places them at risk of significant emotional harm. Youth in JJIC have already

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<sup>64</sup> Sam Kelly, *134 Inmates at Cook County Jail Confirmed Positive for COVID-19*, THE CHICAGO SUN-TIMES, (Mar. 30, 2020, 8:11 PM), <https://chicago.suntimes.com/coronavirus/2020/3/29/21199171/cook-county-jail-coronavirus-positive-134-cases-covid-19>.

<sup>65</sup> *Id.*

<sup>66</sup> Coronavirus Disease 2019 (COVID-19) Website, Centers for Disease Control and Prevention (March 31, 2020), <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>.

<sup>67</sup> Louisiana Department of Health Office of Public Health, *State Department of Health Recommends COVID-19 Testing for any Patient with Fever, Respiratory Symptoms and a Negative Influenza Test*, (March 13, 2020), <http://ldh.la.gov/index.cfm/newsroom/detail/5478>.

<sup>68</sup> Chelsea Ritschel, *Coronavirus: Are Asymptomatic Still Capable of Spreading COVID-19?* INDEPENDENT (March 15, 2020, 8:16 PM), <https://www.independent.co.uk/life-style/health-and-families/coronavirus-symptoms-asymptomatic-covid-19-spread-virus-a9403311.html>.

expressed how fears related to COVID-19 are negatively impacting their education in the facility and causing severe anxiety about their own health and safety and that of vulnerable caregivers whom they cannot see or visit.<sup>69</sup>

56. The vast majority of youth in the juvenile justice system have experienced trauma and suffer from mental health disorders. According to the Vera Institute, in 2014 “approximately 85 percent of young people assessed in secure detention intake reported at least one traumatic event, including sexual and physical abuse, and domestic or intimate partner violence. Furthermore, one in three young people screened positive for Post-Traumatic Stress Disorder (PTSD) and/or depression.”<sup>70</sup> One youth at JJIC expressed his fears simply but powerfully saying, “I just don’t want to die in here.”<sup>71</sup>

57. These previous traumas have the potential to exacerbate the traumatic harms of the current pandemic. Trauma experts assert that the traumatic effects of COVID-19 will likely be most harmful among children. Those experts point to data that is all too familiar in Orleans Parish—data about the traumatic effects of Hurricane Katrina.<sup>72</sup> Importantly, poor recovery from that trauma “was directly linked to existing social disadvantages—namely poverty and race.”<sup>73</sup> Detained status should not be overlooked as a social disadvantage that will lead to long-term mental health outcomes as a result of this crisis. Dr. Antoinette Kavanaugh called for the reduction of detained children during the COVID-19 pandemic noting that system involved children are more likely to have mental health disorders.<sup>74</sup> The CDC reported that children, teens and those with pre-existing mental health conditions

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<sup>69</sup> Tyler Kingkade, *Coronavirus in Juvenile Detention is a ‘Nightmare Scenario,’ Doctors and Advocates Say*, NBC NEWS (March 27, 2020, 11:51 AM), <https://www.nbcnews.com/news/us-news/coronavirus-juvenile-detention-nightmare-scenario-doctors-advocates-say-n1170256>.

<sup>70</sup> Jennifer Fratello et al., Vera Institute of Justice, *Innovations in NYC Health and Human Services Policy Juvenile Detention Reform*, 12 (2014), [https://www.vera.org/downloads/Publications/innovations-in-nyc-health-and-human-services-policy-juvenile-detention-reform/legacy\\_downloads/transition-brief-juvenile-detention-reform.pdf](https://www.vera.org/downloads/Publications/innovations-in-nyc-health-and-human-services-policy-juvenile-detention-reform/legacy_downloads/transition-brief-juvenile-detention-reform.pdf); See also Trauma Informed Systems, The National Child Traumatic Stress Network (April 1, 2020) (80% of juvenile-justice involved youth report experiencing trauma), <https://www.nctsn.org/trauma-informed-care/trauma-informed-systems/justice/essential-elements>.

<sup>71</sup> *Id.*

<sup>72</sup> Vann R. Newkirk II, *The Kids Aren’t All Right*, THE ATLANTIC, (Mar. 24, 2020) (Though media and policy has tended to focus on the vulnerability of adults and those with pre-existing conditions to COVID-19, the University of Vermont’s Alice Fothergill emphasizes, “Disasters last a really long time in the lives of children. . . People are talking about vulnerability, but they are not talking about children at all.” Others point to the long-lasting effects of Hurricane Katrina on rates of PTSD in young people. Denese Shervington, the president and CEO of the Institute of Women and Ethnic Studies, notes that “Katrina left PTSD rates in children similar to veterans.”), <https://www.theatlantic.com/health/archive/2020/03/what-coronavirus-will-do-kids/608608/>

<sup>73</sup> *Id.*

<sup>74</sup> Exhibit 5. Declaration of Dr. Antoinette Kavanaugh, March 30, 2020.



may have stronger responses to stress and fear related to the outbreak.<sup>75</sup> There are likely lasting emotional problems for those children separated from their family during a traumatic events.<sup>76</sup> That can be mitigated by the release of Petitioner.

58. Cutting youth off from visits by their families and supports during the difficult, anxiety-producing time increases the emotional toll associated with detention and with the pandemic more generally. Gladys Carrion, former Commissioner of New York City's Administration for Children's Services, issued a statement noting that visitation for incarcerated youth is "essential" to their emotional well-being and she, along with other experts in the juvenile justice system, are pressing for the release of detained youth to their homes whenever possible, given that the facilities are not equipped to handle the crisis.<sup>77</sup>

### **Release is Required to Address the Risk of Serious Medical Harm**

59. On March, 20, 2020, Youth Corrections Leaders for Justice (YCLJ), a group comprised of youth corrections officials across the country, issued a joint statement signed by 30 current and former youth correctional administrators calling for the immediate release of youths in juvenile detention facilities to protect them from COVID-19.<sup>78</sup>

60. In the press release announcing the statement, YCLJ co-chair Vincent Schiraldi is quoted as saying:

As a nation, we have decided that it is not safe for our children to be in school together. That means it is certainly not safe for them to live in congregate care facilities with hundreds of other youth, 24/7. . . Those of us who have run these places know that the idea of social distancing is preposterous in such an environment and introducing the virus to locked facility would be devastating.<sup>79</sup>

61. In a similar initiative, youth justice advocates in thirty-two states, including Louisiana, sent letters to their governors, juvenile justice system administrators, and other state and local officials, demanding the release of detained

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<sup>75</sup> *Id.*

<sup>76</sup> *Id.*

<sup>77</sup> Recommendations for Youth Justice Systems During the COVID-19 Emergency, Youth Correctional Leaders for Justice (March 19, 2020), <https://yclj.org/covid19statement>.

<sup>78</sup> *Id.*

<sup>79</sup> *Id.*

and incarcerated youth and the halting of new admissions to protect youth from the spread of COVID-19.<sup>80</sup>

62. Physicians for Correctional Reform issued a statement calling for the release of children in juvenile detention and describing the health risks posed by COVID-19 in carceral settings:

Transmission of infectious diseases in adult jails and prisons is incredibly common, especially those transmitted by respiratory droplets. For example, it is estimated that up to one quarter of the U.S. prison population has been infected with tuberculosis, a rate of active TB infection that is six to ten times higher than the general population. Flu outbreaks are regular occurrences in jails and prisons across the United States. With a mortality rate 10 times greater than the seasonal flu and a higher Ro (the average number of individuals who can contract the disease from a single infected person) than Ebola, an outbreak of COVID-19 in youth detention and correctional facilities would be devastating.<sup>81</sup>

63. On March 25, 2020, United Nations High Commissioner for Human Rights Michelle Bachelet called upon governments to reduce the number of people in detention, including juvenile detention, and emphasized that “[u]nder international human rights law, States have an obligation to take steps to prevent foreseeable threats to public health.”<sup>82</sup> Bachelet also underscored the duty to protect detained people’s physical and mental health, noting that “imprisonment should be a measure of last resort, particularly during this crisis.”<sup>83</sup>

64. The Dean of the Tulane School of Public Health and Tropical Medicine, along with faculty from the School of Public Health and the School of Medicine urge that the jail population be immediately reduced “before widespread infection takes hold.”<sup>84</sup> Though the faculty’s focus was on the Orleans Justice Center, the concerns about congregate settings and the adequacy of risk-mitigation measures apply equally to the youth in JJIC.

65. Dr. Brie Williams, Professor of Medicine at University of California, San Francisco (UCSF), Director of UCSF’s Criminal Justice & Health Program, and a former

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<sup>80</sup> Copies of the letters may be found at the following address:

[https://docs.google.com/document/d/1WR7L2dWyrDP5\\_XC21Nm3RlupILm5QG8dbXQ-d1ETJA4/edit](https://docs.google.com/document/d/1WR7L2dWyrDP5_XC21Nm3RlupILm5QG8dbXQ-d1ETJA4/edit).

<sup>81</sup> Statement Regarding COVID-19 Risks for Detained and Incarcerated Youth, Physicians for Criminal Justice Reform 2 (March 22, 2020), <https://njdc.info/wp-content/uploads/PFCJR-Statement.pdf>.

<sup>82</sup> Michelle Bachelet, Urgent Action Needed to Prevent COVID-19 ‘Rampaging Through Places of Detention’, (Mar. 20, 2020)

<https://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=25745&LangID=E>

<sup>83</sup> *Id.*

<sup>84</sup> See Thomas A. LaVeist et al., *An open letter regarding COVID-19 and jails in Orleans Parish, Louisiana*, Tulane Sch. Pub. Health & Tropical Medicine, <https://sph.tulane.edu/open-letter-covid19-jail>.

consultant for the California Department of Corrections and Rehabilitation, has likewise stated that community health is at risk if jail and prison populations are not reduced.<sup>85</sup>

**Failure to Release Violates Petitioner’s Constitutional Rights as a Result of Deliberate Indifference to Serious Medical Harm**

66. Allowing JJIC to continue to detain # client under conditions in which they are unable to take the only known steps to protect themselves from transmission of COVID-19 constitutes deliberate indifference to serious medical harm in violation of the United States and Louisiana State constitutions and the Louisiana Children’s Code.

67. The Due Process Clause of the Fourteenth Amendment proscribes deliberate indifference to the serious medical needs of people held in pretrial confinement. *Duvall v. Dallas County*, 631 F.3d 203 (5<sup>th</sup> Cir. 2011) (holding a pretrial detainee’s due process rights were violated when he suffered injury from a staph infection contracted at a county jail when the county knew of the outbreaks and continued to house detainees in those conditions). This proscription applies equally to youth confined pursuant to juvenile delinquency matters. *See Schall v. Martin*, 467 U.S. 253 (1984). To establish a federal constitutional claim, Petitioner must prove that Respondents (1) acted intentionally to impose the alleged condition, or recklessly failed to act with reasonable care to mitigate the risk that the condition posed to the pretrial detainee even though (2) they knew, or should have known, that the condition posed an excessive risk to health or safety. *Darnell v. Pineiro*, 849 F.3d 17, 35 (2<sup>nd</sup> Cir. 2017).

68. The State also owes an affirmative duty to protect youth with whom it has developed a “special relationship” under the Eighth Amendment. The State holds liability when it takes individuals into custody against their will and fails to provide for their basic needs. *DeShaney v. Winnebago Cty. Dept. of Soc. Services*, 489, U.S. 189, 200 (1989) (“[W]hen the State by the affirmative exercise of its power so restrains and individual’s liberty that it renders him unable to care for himself, and at the same time fails to provide for his basic human needs...it transgresses the

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<sup>85</sup> Affidavit of Brie Williams, MD, March 27, 2020, [http://www.sado.org/content/pub/11248\\_affidavit.pdf](http://www.sado.org/content/pub/11248_affidavit.pdf)

substantive limits on state action set by the Eighth Amendment and the Due Process Clause.”). Both the United States Supreme Court and the Fifth Circuit have determined that a special relationship exists between the State and incarcerated persons, as well as between the State and involuntarily committed individuals. *Id.* at 199; *See Estelle v. Gamble*, 429 U.S. 97 (1976) (holding the Eighth Amendment proscribes deliberate indifference to serious medical needs of prisoners based on “the government's obligation to provide medical care for those whom it is punishing by incarceration. An inmate must rely on prison authorities to treat his medical needs; if the authorities fail to do so, those needs will not be met.”). Thus, it is well established that, if the State is holding an individual in its custody involuntarily, it is obligated to provide constitutionally adequate care and safety.

69. The Louisiana Constitution further enshrines protections of the Eighth Amendment by guaranteeing the right to humane treatment and a prohibition on subjecting any person “to torture, or to cruel, excessive, or unusual punishment.” LA. CONST. art. 1 §20. Efforts to satisfy these duties and protections should be applied with special force against pretrial detainees as those who have not been convicted cannot be punished at all under the Eighth Amendment and are detained “only for safe custody, and not for punishment” *See Kingsley v. Hendrickson*, 135 S. Ct. 2466, 2475 (2015) (citing 4 W. Blackstone, Commentaries 300).

70. The U.S. Supreme Court and courts throughout Louisiana have recognized that contracting a communicable disease constitutes an “unsafe, life-threatening condition” that threatens “reasonable safety.” *Helling v. McKinney*, 509 U.S. 25, 33 (1993). *See also Johnson v. Epps*, 479 F. App'x 583, 592 (5th Cir. 2012) (claim that the prison barbershop that required reuse of blades exposed inmates to serious, communicable diseases sufficient to defeat a claim of qualified immunity regarding claim of deliberate indifference).

### **Failure to Release Petitioner Violates the Special Protections Afforded to Youth in the Juvenile Justice System**

71. Above and beyond the care due to adults in the custody of the state, children are entitled to special protections. The juvenile system is unique in “its focus on rehabilitation and individual treatment rather than retribution and the

state's role as *parens patriae* in managing the welfare of the juvenile in state custody." *In re C.B.*, 708 So. 2d 391, 396-97 (La. 1998)(citing *McKeiver v. Pennsylvania*, 403 U.S. 528 (1970); *Santosky v. Kramer*, 455 U.S. 745 (1982); *In re Winship*, 397 U.S. 358 (1970); *In re T.M.*, 742 P.2d 905 (Colo. 1987)). Indeed, the entire purpose of the state's juvenile justice system is to ensure:

that each child and parent coming within the jurisdiction of the court shall be accorded due process and that each child shall receive, preferably in his own home, the care, guidance, and control that will be conducive to his welfare. In those instances when he is removed from the control of his parents, the court shall secure for him care as nearly as possible equivalent to that which the parents should have given him. These Code provisions shall be construed to promote the stability of the family and to secure simplicity in procedure, fairness in adjudication and administration, and the elimination of unjustifiable delay.

La. Ch. C. art. 102.

72. "Due Process under the Fourteenth Amendment also "requires that the nature and duration of commitment bear some reasonable relation" to the rehabilitative, treatment-focused purpose of the juvenile system. *See In re S.D.*, 832 So. 2d 415 (La. 4<sup>th</sup> Cir. 2002) (citing *Jackson v. Indiana*, 406 U.S. 715, 738 (1972)).

73. For youth held in state custody, even those held after adjudication, Louisiana courts have held that the care provided by the state must be "care as nearly as possible equivalent" to that which a child's parent owes him" and must not, as a matter of law, constitute abuse or neglect. *In re S.D.* at 436 (citing La.Ch.C. Arts. 606, 619, 626 (West 2001)).

74. La. Ch.C. art. 603(1)(a) defines abuse in part as "[t]he infliction, attempted infliction, or, as a result of inadequate supervision, the allowance of the infliction or attempted infliction of physical or mental injury upon the child by the parent or any other person." La.Ch.C. art. 603(14) defines neglect in part as "the refusal of a parent or caretaker to supply the child with necessary food, clothing, shelter, care, treatment, or counseling for any injury, illness, or condition of the child, as a result of which the child's physical, mental or emotional health is substantially threatened or impaired."

75. Respondent is well aware of the extraordinary risk COVID-19 poses to youth in JJIC custody. As pleaded above, numerous media outlets have covered these and other calls to action. Whatever steps Respondent has taken to manage the risk of COVID-19 will fail because, as pleaded above, Respondent is not capable of

managing that risk in a confined close-quartered environment. Given the rate at which COVID-19 has been skyrocketing in New Orleans, the longer these youth remain in detention facilities, with their woefully inadequate protections, the greater the likelihood they will fall sick and spread the virus among themselves and staff.

76. The lack of access to visitation, normal schooling, social interaction, detention hearings, and general access to the courts are also causing great harm to the Petitioner both in terms of their due process rights and their overall wellbeing. The Children's Code imposes strict limitations on remanding youth to detention with the default being that children taken into custody should be released as soon as possible to the care of their parents or other relatives unless that is not appropriate as determined under defined legal criteria within well-established timelines. *See* La. Ch. C. art. 817 and 819. D

77. Further, the Court maintains the authority to modify orders of detention or bail requirements to release a child on its own motion or the motion of the child if good cause exists for the modification. La. Ch. C. art. 830. The circumstances have changed dramatically since the remand order was issued against # client, and the harm posed by COVID-19 to the best interests of # client and the risk to public health and safety from their continued confinement far outweighs any prior considerations that would have made the youth's continuation in custody appropriate in the absence of this epidemic.

78. Inadequate risk-mitigation measures based on the nature of JJIC as a congregate environment constitute abuse and/or neglect under La. Ch.C. art. 603. Moreover, due to staffing changes and elimination of visitation intended to implement CDC guidance, thereby lessening the rehabilitative and therapeutic resources available to youth in JJIC custody and isolating children from outside social supports, the purpose of commitment is undermined, violating Due Process.

79. Moreover, safeguards can be put in place to minimize any risks presented by releasing the Petitioner from detention. Any of the alternative to detention programs normally employed by the Court can be used to monitor the youth while allowing for more effective social distancing measures than are available for youth confined to JJIC. *See* La. Ch.C. art. 815.1. Additionally, the court may order home

confinement, already directed by the Governor's executive order and require phone and video monitoring to ensure compliance.

80. A central feature of pre-trial detention under the Children's Code is that detention status triggers shorter time delays—60 days for youth charged with offenses enumerated as crimes of violence and 30 days in all other cases. La. Ch.C. art. 877. Youth in custody today are facing protracted detention due to COVID-19, certainly far longer than that contemplated by the Children's Code. In the ordinary course, failure to hold an adjudication hearing within time delays would result in a youth's release from custody. While the pandemic may make it practically unfeasible to hold adjudication hearings within established timelines, it does not create good cause for detaining youth indefinitely at great risk to their physical, emotional, and mental wellbeing when release provides an alternative that is both in the best interest of the youth and the only option that promotes public health and safety under the circumstances.

81. The current operating conditions of the JJIC also violate the youths' right to effective assistance of counsel under Louisiana Constitution art. 1 §13. Effective assistance of counsel requires both that the attorney have adequate skill and knowledge and that the attorney have the resources and time to represent each individual client. *State v. Peart*, 621 So. 2d 780, 789 (La. 1993). Adequacy of resources must be understood to include access to clients, ability to discuss the case and related discovery confidentially, and other basic aspects of representation. As the JJIC attempts to comply with CDC guidance, youth are unable to access their attorneys in any way other than using video conferencing. # cut if inapplicable Children who are newly brought into detention are not being afforded timely detention hearings. That these procedures are responsive to the pandemic does not suspend constitutional rights. To the extent that these rights are suspended, Petitioner is entitled to release from custody. It is especially important for youth to participate in their defense given the unique challenges of communicating with and counseling youth in various stages of adolescent development. Such participation includes meaningful, private consultations with attorneys and gathering and reviewing evidence. For young people it is vital to have these conversations with their attorneys in person to gauge the young person's understanding and capacity.

82. Even under typical circumstances, the use of juvenile detention can be harmful to youth<sup>86</sup>, and it is for that reason its use has been strictly limited in scope and duration in Louisiana. It is excessive and punitive to keep youth in detention for months on end before they even go to an adjudication hearing when they are at such grave risk of health issues possibly exceeding a term of commitment that would be imposed if there is ever an adjudication. Rehabilitation is a hallmark of the juvenile legal system where education and treatment feature prominently. Detention facilities such as JJIC are not designed for long-term treatment and rehabilitation of youth.

83. Clearly, when balancing the harm to # client by remaining confined in detention during the COVID-19 pandemic, where they continue to be exposed to the very high risk of infection, against the benefit to the public and judicial system of maintaining their remand status, due process demands their immediate release. *Cf. U.S. v. Stephens*, 2020 WL 1295155 (S.D.N.Y. Mar. 19, 2020) (granting defendant bail upon finding that “unprecedented and extraordinarily dangerous” nature of COVID-19 pandemic and heightened risk of contracting it in jail setting provided changed circumstances to compel reconsideration of original remand order).

84. Respondent’s intentional failure to release Petitioner while actually aware of the substantial risk of COVID-19 infection and transmission plainly constitutes deliberate indifference and constitutes abuse and/or neglect under Louisiana law as well as a violation of the protections within Title VIII of the Children’s Code that are enacted to safeguard the welfare and constitutional rights of youth.

**# cut 84 – 92 for kids that have had CC hearings/ bond settings Emergency Orders Related to COVID-19 Do Not Suspend All Constitutional Rights or Allow for Indefinite Detention Without Due Process**

85. Although both the Governor of Louisiana and the Louisiana Supreme Court have issued proclamations related to COVID-19, the operation of the courts generally, and the computation of speedy trial timelines, none of these proclamations allow courts to suspend a defendant’s fundamental constitutional

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<sup>86</sup> Barry Holman and Jason Ziedenberg, *The Dangers of Detention: The Impact of Incarcerating Youth in Detention and Other Secure Facilities*, Justice Policy Institute (2006), [http://www.justicepolicy.org/uploads/justicepolicy/documents/dangers\\_of\\_detention.pdf](http://www.justicepolicy.org/uploads/justicepolicy/documents/dangers_of_detention.pdf).



rights such as the right to due process, the right to safe custody in detention, and the right to humane treatment.

86. First, and most importantly, the Chief Justice has specifically ordered courts to proceed with hearings related to pretrial detention, commanding in her initial emergency order that “[c]riminal initial appearances for adults and juveniles, arraignments for incarcerated individuals and bond hearings *shall continue as scheduled* and shall be conducted with the use of telephone and video conferencing whenever possible.” Johnson, C.J., *Order* (Mar. 16, 2020). The order’s reference to “initial appearances for adults and juveniles” clearly covers continued custody hearings which are “a combination of the initial appearance described in Code of Criminal Procedure Article 230.1 and the preliminary hearing described in Code of Criminal Procedure Article 294.” La. Ch. C. art. 821, Comments 1991. An amended order issued on March 23<sup>rd</sup> subsequent to the Governor’s proclamation on the matter maintains that “essential criminal matters set forth in [the previous order] should be conducted via video and/or telephone conference with *increased frequency* to alleviate potential overcrowding of jails, which is a public health emergency for citizens and jail personnel.” Johnson, C.J. *Order* (March 23, 2020) (emphasis added).

87. The Chief Justice’s order directly governs the conduct of this Court— “[t]he Supreme Court has general supervisory jurisdiction over all other courts” and may “establish procedural and administrative rules not in conflict with law.” La. Const. art. 5, § 5(A).

88. The Governor’s more general emergency proclamation does not relieve the duty to conduct a continued custody hearing, or, if it does, such an order is outside the governor’s emergency authority. Nothing in the Governor’s series of emergency orders relieves this Court of its obligation to conduct a continued custody hearing. Pursuant to the authority granted by the Louisiana Homeland Security and Emergency Assistance and Disaster Act, La. R.S. 29:721, and the Louisiana Health Emergency Powers Act, La. R.S. 29:766, Governor Edwards has issued a series of emergency executive orders. *COVID-19 Newsroom*, Office of the Governor.<sup>87</sup>

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<sup>87</sup> <https://gov.louisiana.gov/index.cfm/newsroom/category/23> (last updated Mar. 27, 2020).

89. Of the several orders issued in recent days, only the Governor’s March 16 emergency proclamation dealt specifically with courts and court proceedings.

Governor John Bel Edwards, *Additional Measures For Covid-19 Public Health Emergency*, Proc. No. JBE 2020-30 at 2-3 (Mar. 16, 2020).<sup>88</sup> In that proclamation, the governor ordered that:

Legal deadlines, including liberative prescription and preemptive periods applicable to legal proceedings in all courts, administrative agencies, and boards, are hereby suspended until at least Monday, April 13, 2020, including but not limited to any such deadline set forth by law within . . . [the] Louisiana Children’s Code . . . In addition, all other deadlines in legal proceedings in all courts, administrative agencies, and boards shall be suspended until Monday, April 13, 2020.

*Id.*

90. This order does not relieve this Court of the duty to conduct continued custody hearings. First, the term “legal deadlines” does not clearly cover an obligation to conduct continued custody hearings, even where the code places a time limit on the Court to do so. Louisiana Children’s Code Article 819’s prohibition on holding children in custody for more than three days without a continued custody hearing is not a filing deadline. Instead, it is a mechanism for enforcing the requirement that detained children be provided basic due process rights.

91. Faced with this ambiguity, the Chief Justice’s more specific order controls. This is particularly true where the specific order was issued by “the chief administrative officer of the judicial system of the State.” La. Const. art. 5, § 6. Indeed, the Chief Justice’s command that “[c]riminal initial appearances for adults and juveniles, arraignments for incarcerated individuals and bond hearings *shall continue as scheduled*” was reaffirmed in a subsequent order issued several days *after* the governor’s proclamation. Johnson, C.J., *Order* (Mar. 20, 2020).<sup>89</sup>

92. What is more, the Governor’s proclamation must be read in conjunction with the two emergency powers statutes it relies upon for its authority. *See* Proc. No. JBE 2020-30 (issuing the proclamation pursuant to the Louisiana Homeland Security and Emergency Assistance and Disaster Act, La. R.S. 29:721, and the Louisiana Health Emergency Powers Act, La. R.S. 29:766). Both of these statutes contain an important exclusion from the Governor’s authority prohibiting the

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<sup>88</sup> <https://gov.louisiana.gov/assets/ExecutiveOrders/JBE-EO-30.pdf>

<sup>89</sup> [http://www.lasc.org/COVID19/orders/2020-03-20\\_LASC\\_EXTENSION.pdf](http://www.lasc.org/COVID19/orders/2020-03-20_LASC_EXTENSION.pdf).

exercise of emergency powers in a manner which infringes on state or federal constitutional rights:

Nothing in this Chapter shall be interpreted to diminish the rights guaranteed to all persons under the Declaration of Rights of the Louisiana Constitution or the Bill of Rights of the United States Constitution. This Chapter shall not violate Article II (Distribution of Powers), Article III (Legislative Branch), or Article V (Judicial Branch) of the Louisiana Constitution. The courts shall be open, and every person shall have an adequate remedy by due process of law and justice, administered without denial, partiality, or unreasonable delay, for injury to him in his person, property, reputation, or other rights.

La. R. S. § 29:736; *see also* La. R. S. § 29:722 (“R.S. 29:736 shall apply to this Chapter.”).

93. A prompt continued custody hearing in delinquency proceedings vindicates several fundamental constitutional rights. As a result, the denial of a continued custody hearing functions to deny those fundamental rights including the right to counsel, the right to a determination of bail, and the right to an adversarial determination of probable cause. *See Riverside County v. McLaughlin*, 500 U.S. 44, 55 (1991); *see also*, La. Const. Ann. Art. 1 §14. Accordingly, were the Governor’s proclamation read to deny continued custody hearings, such an order would exceed his lawful authority under La. R. S. § 29:736 & 722 by denying incarcerated children *any* opportunity to vindicate these rights for the duration of the emergency.

#### **Habeas Relief is the Appropriate Remedy**

94. The Louisiana Constitution establishes an unqualified guarantee that “[t]he writ of habeas corpus shall not be suspended.” LA. CONST. art. 1 §21. This constitutional right applies with equal force to youth in juvenile proceedings as [a]ll rights guaranteed to criminal defendants by the Constitution of the United States or the Constitution of Louisiana, except the right to jury trial, shall be applicable in juvenile court [delinquency] proceedings. La. Ch.C. art. 808. The situation of # client falls squarely within the type of issue intended for resolution through a writ of habeas corpus as they are challenging the authority for the custody in which they are held incidental to an anticipated or instituted criminal proceeding. La. C.Cr.P. art. 351.

95. The affirmative obligation to protect against infectious disease empowers Courts to provide remedies designed to prevent imminent harm to future health. *Helling*, 509 U.S. at 33 (“It would be odd to deny an injunction to inmates who

plainly proved an unsafe, life-threatening condition in their prison on the ground that nothing yet had happened to them.”; *Sanchez v. State of New York*, 99 N.Y.2d 247, 254 (2002) (recognizing that it is “duty of the State, as [petitioner’s] custodian, to safeguard and protect him from the harms it should reasonably foresee based on its knowledge derived from operation of a maximum security prison.”); *Jabbar v. Fischer*, 683 F.3d 54, 57 (2d Cir. 2012) (“We have held that prisoners may not be deprived of their basic human needs—e.g., food, clothing, shelter, medical care, and reasonable safety—and they may not be exposed to conditions that pose an unreasonable risk of serious damage to [their] future health.”) (citation and internal quotation marks omitted).

96. Immediate release pursuant to a writ of habeas corpus is available to address constitutional violations arising from circumstances or conditions of confinement. *People ex rel. Brown v. Johnston*, 9 N.Y.2d 482, 485 (1961) (habeas petition may be used to address “restraint in excess of that permitted by...constitutional guarantees”); *Kaufman v. Henderson*, 64 A.D.2d 849, 850 (4th Dep’t 1978) (“[W]hen appellant claims that he has been deprived of a fundamental constitutional right, habeas corpus is an appropriate remedy to challenge his imprisonment.”).

97. A person is “not to be divested of all rights and unalterably abandoned and forgotten by the remainder of society” by virtue of incarceration. *Brown*, 9 N.Y.2d at 485. Thus, courts have addressed whether the failure to address medical needs has risen to the level of a constitutional violation, requiring immediate release. See, e.g., *People ex rel. Kalikow on Behalf of Rosario v. Scully*, 198 A.D.2d 250, 250–51 (2d Dep’t 1993) (habeas petition addressing whether failure to provide adequate medical care constituted cruel and unusual punishment or deliberate indifference). Indeed, habeas relief is the only remedy available in such circumstances. *Preiser v. Rodriguez*, 411 U.S. 475, 489 (1973).

98. # cut if CC hearing has been done : Moreover, youth held without a timely detention hearing under La. Ch.C. art. 819 are held without court order pursuant to La. C.Cr.P. art. 361. In such cases, Respondent has the burden of proving the legality of the custody and why the person in custody should not be released. La. C.Cr.P. art. 365.

99. Petitioner is entitled to relief under La. C.Cr.P. art. 362, which provides relief when “(2) The original custody was lawful, but by some act, omission, or event which has since occurred, the custody has become unlawful; (3) The order for the custody is deficient in some legal requisite; (4) The order for the custody, although legal in form, imposes an illegal custody; or (7) He is being held in custody prior to trial in violation of due process of law.”

**The Court Has the General Authority to Release Petitioner**

100. Finally, a juvenile court “inherently possesses all powers necessary for the exercise of its juvenile jurisdiction and the enforcement of its lawful orders. It has authority to issue such writs and orders as may be necessary or proper in aid of its jurisdiction. It has the duty to require that the juvenile proceedings be conducted with dignity and in an orderly and expeditious manner.” La. Ch.C. art. 318. Further, the Code of Criminal Procedure grants the following authority to all courts: “Where no procedure is specifically prescribed by this Code or by statute, the court may proceed in a manner consistent with the spirit of the provisions of this Code and other applicable statutory and constitutional provisions.” La. C.Cr.P. art. 3. The Court has the power to grant the release of Petitioner as a writ of habeas corpus, under its authority to release youth from detention contained in Title VIII of the Children’s Code, and the general authority to exercise its juvenile jurisdiction in furtherance of the purpose of the state’s juvenile justice system.

**PRAYER FOR RELIEF**

WHEREFORE, Plaintiffs request that this Court issue a writ of habeas corpus and order # client’s immediate release, with appropriate precautionary public health measures, on the ground that their continued detention violates the Cruel and Unusual Punishment Clause of the Eighth Amendment, the Due Process Clause of Fourteenth Amendment, Article 1 §§2, 13, 18, and 20 of the Louisiana Constitution, and cited provisions of the Louisiana Children’s Code and Code of Criminal Procedure.

Dated: March 31, 2020  
New Orleans, Louisiana

Respectfully Submitted,

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# attorney name  
Louisiana Center for Children’s Rights  
1100-B Milton Street

New Orleans, LA 70122  
(504) #####  
email@laccr.org

*Attorney for Petitioner*

# attorney name, an attorney admitted to practice law in the State of Louisiana, states that he has read the foregoing petition and that same is true to his own knowledge, except for those portions stated on information and belief, for which citations are provided.

Dated: April 3, 2020  
New Orleans, Louisiana

STATE IN THE INTEREST OF

# client

Petitioner

v.

KYSHUN WEBSTER, DIRECTOR  
OF THE JJIC

Respondent

CASE NO:

FILED: \_\_\_\_\_

JUVENILE COURT FOR

THE PARISH OF ORLEANS

STATE OF LOUISIANA

\_\_\_\_\_  
DEPUTY CLERK OF COURT

**ORDER**

Premises considered, it is HEREBY ORDERED that this **WRIT OF HABEAS CORPUS AND IMMEDIATE RELEASE is GRANTED** and that the Juvenile Justice Intervention Center shall immediately release: # client name

It is HEREBY ORDERED that if #client is *not* immediately released, **A HEARING SHALL BE HELD** at which the Juvenile Justice Intervention Center shall appear before this Court to answer why # client should not be released given the global pandemic, on \_\_\_\_\_, 2020.

\_\_\_\_\_  
Judge #  
Orleans Parish Juvenile Court

Dated: \_\_\_\_\_