

**Testimony Supporting SB 572:
An Act Concerning Community Crisis Response Teams and Reentry Centers.
Legislative Office Building
February 10, 2021**

Representative Maria Horn, Senator Dennis Bradley, Senator Catherine Osten, Representative Alphonse Paolillo, and distinguished members of the Public Safety and Security Committee, thank you for the opportunity to speak with you today.

My name is Sarah Diamond. I am a public interest anthropologist with twenty-years experience conducting evaluations and research in the areas of urban violence, public health, and reentry in Connecticut. I have interviewed 100s of youth and youth violence prevention workers over the years as a mixed-methods researcher on a project that examined urban lifestyles. From this research and from my years of work evaluating youth violence prevention programs and reentry programs in Hartford, New Haven, Bridgeport, and Waterbury, I am in full support of SB572 as an essential strategy for reducing trauma inflicted on people living in urban communities, and for saving lives.

As other backers of this bill have also stated, I support SB 572 because it will tackle issues that disproportionately affect communities of color. The Community Crisis Response Team will limit unneeded contact with law enforcement by dispatching appropriately qualified professionals to respond to 9-1-1 and non-emergency calls related to welfare checks, homelessness, substance use disorder and mental health crises. The war on drugs has been a war on people, many of whom have mental health and addiction issues. Likewise arresting people who are homeless is akin to a war on poor people. Putting people in jail who are in crisis—does nothing to aid them in their treatment or recovery. The jail system is a costly way of removing them temporarily from the community only to have them return back in the same or worse health and mental state than when they arrived. As a result of people in need or in crisis being treated as criminals, many of them begin to lose faith in society and hope in themselves. Incarceration of people who are ill and poor actually fosters system-dependency. With proper, compassionate treatment and care many of the people who end up in prison would be more likely to heal from their traumas and be able to lead healthy, independent and lawful lives.

The Community Crisis Response Team program will create a support system to deal with individuals who should not be incarcerated but provided with the opportunity to get connected to treatment, services and programs during their moments of crisis. This social service approach to law enforcement will reduce the incarceration rate and divert people from unnecessary visits to the emergency room. Police have been tasked with responding to many social issues that they are inappropriately equipped for. As the nation and state call for social justice and reimagining policing, SB 572 seeks to enhance first responses and reduce repeat emergency calls, while getting constituents the help that police officers don't have the training, resources, or time to provide.

I also support SB 572 because it is the first step to ensuring that men and women returning home from incarceration have better chances to reintegrate into society. People returning home from incarceration are disproportionately affected by issues related to housing, employment, substance use disorder, mental illness, and chronic medical illness. The Reentry Welcome Centers will ensure that people are connected to these services on the day of their release, rather than dropped with no resources or assistance. The centers will also help people apply for public benefits and provide continuing supports while people are already in the community.

The establishment of Reentry Welcome Centers to provide comprehensive reentry services through collaboration between the Connecticut Department of Correction, other social service agencies, community providers, and the Transitions health clinics is recognized as a priority by many municipal and community leaders across Connecticut and also nationally. A majority of people who

are incarcerated in Connecticut will end up returning to one of its most-densely populated metropolitan centers, also referred to as 'urban cores.' Combined, the cities of Waterbury, Bridgeport, New Haven, Hartford, New London, and New Britain represent 17% of Connecticut's population, but are home to an estimated 51% of the people who are released each year from state prison or jail. People who are released from incarceration often end up residing in the most distressed neighborhoods and communities in Connecticut.

A high proportion of people returning home from incarceration at the end of their sentence have mental health and addiction needs. An analysis by the Connecticut Sentencing Commission of the CT data classification system used to determine mental health placement within CTDOC revealed that on May 22, 2020, as many as 28.5% of people who were incarcerated had an active mental health disorder requiring treatment. Another 40.4% of incarcerated individuals were classified as having a prior history of a mental health disorder, but not currently requiring treatment. Only 31.2% were classified as having no history of a mental health disorder. Along with the high risk of recidivism, returning citizens also face an increased risk of ending up in the emergency room and of dying from preventable causes. Former prisoners between the ages of 20 and 29 in Connecticut had an eight-fold increased chance of dying within a year of being released compared with the general population, mostly due to either opioid overdose or homicide¹.

I have conducted a process evaluation of the Greater Hartford Reentry Welcome Center in 2019, and from my interviews with clients and staff I was able to document the benefits that were provided to clients. The Center which opened in September 2018 served over 700 unduplicated clients in its first two years of operation. Even during the pandemic, staff continued to meet with clients on the day of their release to ensure that they were connected with vital services. Clients were able to be assisted with basic needs and provided case managers to support them as they navigated the challenges of procuring IDs, finding a safe and stable place to live, getting and retraining their job, reconnecting with their family. Having a safe place to go for help and someone to turn to for guidance was of vital importance to help them cope with feelings of shame, stigma, and fear of letting their loved ones down which follows them as they struggle to rebuild their lives.

The Connecticut Reentry Councils have made the establishment of Reentry Welcome Centers across our state one of their top legislative priorities. Why, because they recognize that this model for delivering resources and services in a comprehensive, timely and coordinated fashion works and is vital to strengthening the social fabric of our urban communities. From a fiscal perspective, SB 572 is a long-term investment to generate savings due to diversion from incarceration and the emergency room. From a human perspective, SB 572 provides the opportunity to fix systemic issues that disproportionately affect communities of color. Both these initiatives are backed by research showing the benefits of treatment over incarceration, the neuroscience of trauma and recovery, the importance of investing in social determinants of health, and overwhelming evidence of the inequities that have been borne by poor people and people of color within the criminal justice system. Providing culturally competent and compassionate care in a timely fashion and putting resources into ensuring people returning home from incarceration are essential steps toward building a more just and humane country for everyone.

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¹ Kuzyk, K. Baudoin, K. Bobula, Office of Policy and Management, Mortality Among Ex-Prisoners, Criminal Justice Policy and Planning Division (March 2018). Retrieved from https://www.ct.gov/opm/lib/opm/cjppd/cjresearch/mainnav/prisoner_mortality_final_03232018.pdf