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Adolescent Medicine

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Testimony of Robert Bidwell, M.D.
In Support Of
H.B. 7050 An Act Concerning The Juvenile Justice System

Submitted to the Connecticut General Assembly
Joint Committee on Judiciary

March 30, 2015

State Capitol, Hartford, Connecticut

My name is Robert Bidwell. I am writing in support of Section Four of H.B. 7050. I am a physician, board certified in pediatrics and adolescent medicine. I currently care for youth at the Hawai`i Youth Correctional Facility and O`ahu Juvenile Detention Facility. I have worked extensively in juvenile detention/correctional settings since 1984.

When I meet with youth at the O`ahu Juvenile Detention Facility and the Hawai`i Youth Correctional Facility, I ask whether they have been shackled in a courtroom as a part of my routine health assessment. Most say yes. Handcuffs and ankle chains are most frequently reported. Many youth report at least minor injuries to their ankles and wrists.

Though the physical harm is troubling, it is the lasting emotional effect of shackling that most concerns me as a pediatrician. When asked, "How did you feel when you appeared in court in front of the judge wearing shackles?" the youth I am speaking with will often begin to cry. "I felt so shamed." "I felt like a criminal." "It didn't seem

like anyone cared.” “I felt like a danger to society.” “I felt like I wasn’t welcomed there.” “I didn’t think anyone wanted to listen to why things happened the way they did.” “It seemed like I was being targeted.” “It didn’t seem fair.” The most frequent responses spoke of shame and pain at having family see them in shackles. “It hurt so much to have my little 3-year-old brother and 5-year-old sister there seeing me like that, and to see my mother crying.”

It’s not surprising that these are the responses I get given that a high proportion of young people in the juvenile justice system have experienced trauma and exhibit symptoms of Post-Traumatic Stress Disorder.¹ Shackling can mirror past trauma, particularly physical and emotional abuse, increasing the risk that trauma’s effects will endure long-term. Putting youth in situations reminiscent of past trauma can cause distress, invasive thoughts about the original incident, and physical symptoms such as abdominal pain, nausea, vomiting, sweating, chest pain, and a sense of suffocation and impending death. Stress makes it harder to focus, and impairs memory and self-expression.

Adolescents are exceptionally vulnerable to the humiliation inherent in shackling. A fundamental task of adolescence is to develop a sense of self and self-esteem. Shackling implies that one is bad, dangerous, a criminal, or sub-human, leading youth to see themselves in this way. This might lead someone who would otherwise be rehabilitated to engage in anti-social behaviors.

¹ Dierkhising, C., et. al., Trauma histories among justice-involved youth: findings from the National Child Traumatic Stress Network (2013), available at <http://www.ejpt.net/index.php/ejpt/article/view/20274>.

Lesbian, gay, bisexual and transgender youth are over-represented in the juvenile justice system.² Many experience rejection and physical and emotional violence from families and peers. Shackling can represent more treatment as “other” and unacceptable. In a world that finds it hard to accept them, LGBT youth are particularly vulnerable to the shackling practices imposed by the state.

Shackling takes away an opportunity to self-regulate. Instead of learning and practicing acceptable ways to behave, the child comes to believe that he or she must be tightly controlled. When youth are not shackled, the adults working with them find other ways to manage behavior, such as communicating expectations, modeling appropriate behavior, and providing reinforcement when the youth follows rules.

Given the damage caused by shackling, it should be used only in rare cases where the child poses a safety risk and cannot be managed with other less-restrictive means.

My experience is relevant to Connecticut. In Hawai`i, we also have not yet enacted shackling reform legislation. I see this as a real problem, but members of our judiciary have made statements that the shackling of youth is uncommon in Hawai`i’s courts and therefore not a problem. This clearly is not true, as a large majority of youth of the youth I see in my clinic report the experience of appearing shackled before a judge in courtrooms across our state. I believe that court officials often do not see, *really see*, what is occurring in their own courtrooms, a failure that is made easier by often deferring to others the decision to shackle or not shackle a child. Because the practice of shackling children has, in a sense, become “invisible” to many court officials because its occurrence has become commonplace, there has been little or no consideration of the

² Majd, K. et. al., “Hidden Injustice: Gay, Lesbian and Transgender Youth in the Juvenile Justice System.” National Juvenile Defender Center, 2009.

significant harm that shackling imposes on the youth standing before them. I ask you to carefully consider this legislation because I have seen how informal (or even formal) policies fall far short of their intended goals. The presumption in Section Four of this bill is vital.

Thank you for your time and consideration.

Respectfully submitted,

/s/ Robert Bidwell

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