



**Testimony of the National Alliance on Mental Illness (NAMI) of
Connecticut before the Judiciary Committee**

March 4, 2015

IN SUPPORT OF

Proposed Senate Bill 796: AN ACT CONCERNING LENGTHY SENTENCES FOR CRIMES COMMITTED BY A CHILD OR YOUTH AND THE SENTENCING OF A CHILD OR YOUTH CONVICTED OF CERTAIN FELONY OFFENSES.

Senator Coleman, Representative Fox and members of the Judiciary Committee, my name is Susan Kelley and I am *the Child and Adolescent Public Policy Manager* at the National Alliance on Mental Illness (NAMI) of Connecticut. In addition to providing educational programs and support groups, NAMI Connecticut advocates at the state level for improved mental health and related services and supports, and an end to stigma and discrimination. We represent individuals who live with mental illness and parents and family members of individuals living with mental illness. I am testifying today on behalf of NAMI Connecticut in support of SB 796.

SB 796 provides parole eligibility rules tailored for juveniles. Individuals serving sentences of more than 12 years for crimes that occurred before they turned 18 would have an opportunity to be heard by a parole board after serving a substantial portion of their sentences. Release would not be guaranteed but would be possible only if, after thorough review, the parole board determined that a person had truly rehabilitated and could be safely released. SB 796 also eliminates mandatory life-without-parole sentences for juveniles and allows judges to consider youth-related factors in sentencing juveniles transferred to adult court.

Well-established scientific evidence demonstrates that adolescents have underdeveloped brains, making them more impulsive and susceptible to peer pressure than adults, and lacking in foresight. This evidence has been recognized by the U.S. Supreme Court in *Graham v. Florida*, 130 S. Ct. 2011 (2010) and *Miller v. Alabama*, 132 S. Ct. 2455 (2012). The U.S. Supreme Court has also reviewed the implications of this evidence as it concerns juveniles' level of culpability and likelihood of successful rehabilitation.

We also know that many of the behaviors that lead youth to commit crimes are all too often the result of unmet behavioral and mental health needs. 64 percent of youth involved in the juvenile justice system in Connecticut have a diagnosable mental health disorder.¹ Nationally, substance

¹ Behavioral Health Services for Young Adults Task Force Report (2014)

abuse is linked to 78 percent of cases where juveniles are taken into custody.² As a result, long prison sentences and mandatory life without parole sentences unfairly punish youth with untreated mental health and behavioral disorders. Giving youth offenders a second chance is critically important when viewed from this mental health perspective, particularly when research shows 70 to 80 percent of all children and youth nationwide with a diagnosable mental illness fail to receive mental health services.³ And, a disproportionate number of children of color are being unfairly punished in this way, as minority youth are over-represented in the juvenile justice system and under-represented in the behavioral health system. Enacting SB 796 would be a significant step forward in juvenile justice while Connecticut continues to undertake the difficult task of improving access to quality mental health services for all children in Connecticut, under the Children's Behavioral Health Plan of PA-12-178 and related work.

Implementing parole eligibility rules and eliminating mandatory life-without-parole sentences for juveniles will allow the justice system to take into account, as it should, the mental health status of juvenile offenders, and consider whether those offenders with mental health conditions have had an opportunity to seek rehabilitation and treatment while serving a portion of their sentences.

NAMI Connecticut supports SB 796.

Thank you for the opportunity to address the Judiciary Committee.

Respectfully submitted,

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NAMI Connecticut; staff to Keep the Promise Coalition

² CASA Columbia (2004). Accessed:
<http://www.casacolumbia.org/addiction-research/reports/substance-abuse-juvenile-justice-children-left-behind>

³ Mental Health: A Report of the Surgeon General, Rockville, MD; US Dept. of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health, 1999.