Testimony supporting S.B. 233: An Act Concerning Elections

Submitted by Chandra Couzens, MPH Candidate at the Yale School of Public Health

To the members of the Government Administration and Elections Committee:

I am submitting this testimony in wholehearted support of S.B. 233. As an MPH student at the Yale School of Public Health, the implications of felony disenfranchisement and its disproportionate impact in communities of color remain deep concerns for health equity. Thus, felony disenfranchisement should be considered an issue of public health importance.

Felony disenfranchisement & healthy communities

At all points of the U.S. criminal justice system, laws like felony disenfranchisement differentially suppress the voices of low income people of color, limit access to opportunity before and after incarceration, and promote systems of inequality that feed into and reinforce this. Restrictions on voting impose a “poverty penalty” and selectively suppress the voice of low income individuals, especially African Americans.¹ Due to high rates of incarceration among black communities, the rate of disenfranchisement is 7 times higher among African American men than it is among other groups². Here were 9.4 black people incarcerated to every 1 white person in Connecticut in 2014³. 2.66% of the African American population was disenfranchised in 2016 compared to 0.61% of the general Connecticut population³. Disparities in health outcomes are downstream effects and consequences of this disproportionate impact. Mortality rates are higher, health care coverage is spottier, and care coordination remains poor among former felons.⁴ Due to high rates of incarceration among African Americans, these effects are compounded by the fact that blacks and Latinos are more likely to live in or near areas with high levels of environmental toxins and suffer poorer access to care and resources.¹ By disenfranchising members of these communities, people lose agency over the health and safety of their communities, serving to widen already existing health disparities. Those who can vote have higher ability to control allocation of resources within their communities and vote people into power who have their best interests in mind, all of which can promote healthy communities.

Links between chronic stress, recidivism, and voting

Additionally, formerly incarcerated people who have the right to vote restored have lower rates of recidivism, which can reduce the burden on the criminal justice system. This can result in more resources to improve outcomes for those currently incarcerated as well as improve health outcomes for formerly incarcerated people⁵. Formerly incarcerated people also face feelings of low control and social exclusion following release when the right to vote is not restored. These feed into chronic stress, which results in wear and tear on our body’s regulatory systems, leading to worse health outcomes in the long

run. In contrast, when people feel they have high control and are socially included, they have better health outcomes and improved social functioning. Other studies have shown that civic engagement (which includes voting) among young adults is associated with improved mental health and better educational outcomes in the long run.

**How does Connecticut compare?**

Unlike other comparable states in the area, Connecticut has persisted in disenfranchising parolees, which can result in confusing those on probation (who legally can vote) and discouraging them from participating in voting. 19 states and D.C. allow parolees to vote. Only two other states bar parolees from voting while allowing people on probation to vote (California and Oklahoma). Peer states like Massachusetts, Rhode Island, New Hampshire, Maine, and Vermont all allow people on parole to vote—Connecticut is the only state in New England to disenfranchise parolees. Vermont and Maine additionally allow for civic participation during incarceration. Passing S.B. 233 would align Connecticut more with peer states.

While allowing for civic participation during incarceration may have more dramatic impacts on health, equity, and policy, S.B. 233 is a step in the right direction. It’s time to stop criminalizing poverty and punishing those who have already served their time. Passage of S.B. 233 would help mitigate some of the adverse health effects that many formerly incarcerated people face, address health disparities, and reduce the disproportionate impact these policies have had on minority communities.

Respectfully submitted,

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