



TESTIMONY OF
JAMES BHANDARY-ALEXANDER
IN SUPPORT OF RAISED BILL NO. 987 (Justice Reinvestment), SB 1019 (Clean Slate), and
SB 978 (Parole Opportunities)

March 10, 2021

Thank you to Chairman Winfield, Chairman Stafstrom, Vice Chairs Kasser and Blumenthal, and Ranking members Kissel and Fishbein, and all of the members of the Judiciary Committee, for holding this hearing.

My name is James Bhandary-Alexander and I am Legal Director of the Transitions Clinic. The Transitions Clinic program serves the primary care needs of people leaving incarceration and their families. I am testifying in support of Raised Bill No. 987, which would reinvest funds saved from the closing of Northern CI into the needs of people leaving incarceration, including reentry coordination, housing, and hiring community health workers (“CHW”) to serve people leaving incarceration. At Transitions, I supervise law students who provide civil legal screening, referrals, advice, and sometimes representation to people returning home from incarceration. I want to use my brief time to highlight why the funding of CHWs is so important.

The Transitions model incorporates formerly-incarcerated community health workers into a care team specifically organized to serve people coming out of incarceration. This population is twelve times more likely to die than the general population, so effective health interventions are important immediately after release. Each Transitions location is staffed by a CHW with a history of incarceration. They are a vital member of the healthcare team, connecting patients with health and social services through outreach, educational, and advocacy efforts. CHWs act as cultural liaisons to ensure the provision of culturally relevant health services. They work both in the community and clinical setting, bridging the healthcare gap for the sickest and most vulnerable patients.

Mass incarceration has created barriers to employment in health care for people with a felony conviction. Transitions seeks to break this cycle by providing meaningful healthcare careers to CHWs with a history of incarceration. Transitions CHWs leverage the singular knowledge of an individual who has successfully reentered. Through their shared history, CHWs build a unique trust with their clients resulting in enhanced primary care engagement and

reduced Emergency Department utilization. For these reasons, and because our patient population are routinely denied work because of their records, we also support the Clean Slate Bill, SB 1019.

At Transitions, we have rigorously studied the outcomes of incorporating formerly-incarcerated CHWs into our work. The intervention leads to improved health and fewer emergency room visits¹, fewer probation and parole violations, and less recidivism.² We see how proper supports for people leaving incarceration changes lives and improves public safety, which is why we also fully support SB 987, which opens up the possibility of parole to more people. Thank you for considering how to reinvest savings from incarceration into life-saving activities like health, housing, and emergency services, and how to support people leaving incarceration generally.

Sincerely,

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¹ <https://ajph.aphapublications.org/doi/10.2105/AJPH.2012.300894>

² <https://bmjopen.bmj.com/content/9/5/e028097>