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**TESTIMONY ON HOUSE BILL 2608
RELATING TO PRISONS**

by

Clayton A Frank, Director
Department of Public Safety

House Committee on Public Safety and Military Affairs
Representative Cindy Evans, Chair

Thursday, January 31, 2008, 8:30 a.m.
State Capitol, Conference Room 309

Representative Evans and Members of the Committee:

The purpose of this bill is to create separate forensic treatment facilities within all community correctional centers and to end the practice of housing mentally ill prisoners in solitary confinement and with general prison population.

The State is presently addressing concerns raised by the Department of Justice (DOJ) with regards to the Oahu Community Correctional Center (OCCC). These already existing efforts will create forensic treatment services at the OCCC facility for seriously mentally ill detainees. In good faith, the Department has moved forward on plans to implement these DOJ mental health program recommendations through out its facilities statewide. The Department is presently requesting funding for the necessary mental health staff. There is

adequate dedicated mental health care space available at the larger Oahu facilities such as the OCCC, Women's Community Correctional Center, and the Halawa Correctional Facility, but not at the small neighbor island facilities. As there are few serious mentally ill patients at the small facilities, they are transported for treatment at the larger Oahu facilities as needed.

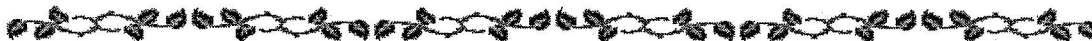
The Department of Public Safety supports the intent of this bill but has concerns with regards to the lack of adequate space to provide these services at the smaller community correctional centers. Additionally, it is important to distinguish between seriously mentally ill inmates and those inmates with far less severe mental-health issues. It is not uncommon for inmates who require some form of mental-health treatment but whose conditions are readily manageable to be housed successfully in the general population.

Thank you for the opportunity to testify on this bill.

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COMMITTEE ON PUBLIC SAFETY & MILITARY AFFAIRS

Rep. Cindy Evans, Chair

Rep. Sharon Har, Vice Chair

Thursday, January 31, 2008

8:30 AM

Room 309

SUPPORT - HB 2608 – FORENSIC FACILITIES AT CCCs

Aloha Chair Evans, Vice Chair Har and Members of the Committee!

My name is Kat Brady and I am the Coordinator of Community Alliance on Prisons, a community initiative working on prison reform and criminal justice issues in Hawai'i for a decade. I respectfully offer our testimony, always being mindful that Hawai'i has more than 6,000 people behind bars with more than 2,000 individuals serving their sentences abroad, thousands of miles away from their homes and their loved ones.

HB 2608 creates separate forensic treatment facilities within all community correctional centers and ends the practice of housing mentally ill prisoners in solitary confinement and with the general prison population.

Community Alliance on Prisons is deeply concerned about incarcerated mentally ill individuals. We are pleased that this bill does not allow mentally ill prisoners to be in the general population and also disallows solitary confinement. We remind the committee that mentally ill inmates in our correctional system are the least fortunate members of our community. That is why it is crucial that the Legislature stay on top of this issue.

In our experience we have found that Hawai'i has many people with mental illness or co-occurring disorders (mental health and substance abuse problems), especially among the incarcerated female population. Sadly, inmates are often accused of faking symptoms, intimidated to silence them, and then ignored. Research shows that prison harms people, and people with mental illness are especially vulnerable since they might not have the resilience necessary to withstand these kinds of responses.

Prisons were never intended as facilities for the mentally ill, yet that is one of their primary roles today. Many of the men and women who cannot get mental health treatment in the community are swept into the criminal processing system after they break the law.

In the United States, there are three times more mentally ill people in prisons than in mental health hospitals, and prisoners have rates of mental illness that are two to four times greater than the rates of members of the general public. While there has been extensive documentation of the growing presence of the mentally ill in prison, little has been written about their fate behind bars.

Our incarcerated population today does not share the same profile as the population twenty years ago, but it appears that staff training still focuses on 'take downs' rather than meeting the needs of today's inmates who are suffering from addiction and mental illness. Hawai'i needs to hire staff (including security staff) with a psychological background to handle today's inmate population and create an ongoing training program for existing and new staff to help them understand best practices for interacting with mentally ill inmates. The power and control model used in our prisons is not appropriate for people suffering from mental illness (or any other inmates, for that matter).

I am a member of the UH Institutional Review Board as the only prisoner advocate in the state. The IRB's role is ensuring that research is conducted in an ethical and non-coercive way. Prisoners are a protected class, and the mentally ill are also considered a protective class, thus mentally ill inmates have a higher level of protection.

Establishing forensic facilities at community correctional centers is at least an acknowledgement that we need to address this issue. Our concern, however, is that the facility be adequately staffed by compassionate people who have had appropriate psychological training to manage a facility housing people with mental illnesses.

A prison's first concern is security, not treatment. What we have learned from mentally ill people who are incarcerated and their families is that these inmates receive numerous write-ups for minor infractions and these write-ups influence their parole eligibility. This is patently unfair to individuals who are unable to follow the rules.

The department of public safety must follow best practice principles and provide access to mental health care and treatment, improve the quality of care, provide education, training, and cultural awareness to staff so everyone understands the needs of the mentally ill.

In our humble opinion, incarceration is not appropriate for someone who is not responsible for their behavior. With an ever-increasing number of mentally ill lawbreakers, it is time for the state to develop a real plan on how to treat people with mental illness who break the law.

This bill gets a good discussion going. Community Alliance on Prisons urges the committee and the legislature to continue seeking humane ways to best handle individuals who break the law and also suffer from mental illness. We urge you to include mental health organizations, self-help organizations, mental health professionals, community service providers, consumers, and their families in these discussions to capture the best thinking of this important issue.

We appreciate your commitment to help these incarcerated individuals who are part of our community and we urge you to pass HB 2608.

Mahalo for this opportunity to testify.