COMMUNITY ALLIANCE ON PRISONS

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COMMITTEE ON PUBLIC SAFETY & MILITARY AFFAIRS Rep. Henry Aquino, Chair Rep. Ty Cullen, Vice Chair

COMMITTEE ON HAWAIIAN AFFAIRS Rep. Faye Hanohano, Chair Rep. Chris Lee, Vice Chair

Thursday, March 31, 2010 10:00 a.m. Room 309 HCR 204/HR 176 – PSD Task Force to plan/design correctional treatment facility COMMENTS http://www.capitol.hawaii.gov/emailtestimony

Aloha Chairs Aquino and Hanohano and Members of the Committees!

My name is Kat Brady and I am the Coordinator Community Alliance on Prisons. This testimony is respectfully offered on behalf of the 6,000 Hawai'i individuals living behind bars, always mindful that almost 1,800 individuals are serving their sentences abroad, thousands of miles away from their loved ones, their homes and, for the disproportionate number of incarcerated Native Hawaiians, far from their ancestral lands.

HCR 204/HR 176 request PSD to form a task force to initiate the planning and design process to develop a correctional treatment facility to house 1,000 – 1,200 inmates on undeveloped Hawaiian Home Land on the island of Hawai`i.

Community Alliance on Prisons offers comments on this measure. We believe that there must be more discussion and due diligence to determine the efficacy of correctional treatment facilities versus a range of community-based treatment before we start planning and designing anything.

WHAT THE EXPERTS SAY:

Below is an excerpt from a paper written by three University of Hawai` professors and authors¹ who are recognized experts in their fields.

"...This is a seductive proposal. It responds to community pressure for more drug treatment but remains tough on drug users. But what does the scholarly literature say about the effectiveness of drug treatment prisons?

¹ Let's Not Build a Prison to Treat Drug Offenders: A Review of What Works and What Doesn't, Irwin, K., Dept. of Sociology, Perkinson, R. American Studies, Chesney-Lind, M. Women's Studies.

Are they different than regular prisons and therefore able to help reduce drug use and crime?

The current evidence is mixed. For example, while a 1997 UCLA study found that prison drug treatment plus six months of after-care cut recidivism by 70%, a recent meta-analysis of prison-based drug treatment found only a 10% decrease in recidivism rates. Why this huge variation?

If you look closely at the literature, you will discover a rigid set of criteria necessary to achieve high rates of success. Effective prison programs include costly components, such as separate and segregated units for those receiving treatment, extensive and on-going training for staff, and thoroughly planned interventions with on-going monitoring.

Will Hawai'i's under-funded, over-crowded prison system be able provide this type of comprehensive program, precisely as it was implemented during research trials? If not, taxpayers will have spent an enormous amount of money on a program that may not work.

Finally, there is no guarantee that a drug treatment prison today will remain a drug treatment prison tomorrow. Look again to Texas. In 1991, Governor Ann Richards received funding to add 12,000 beds for prison-based drug treatment. When George W. Bush took over in 1995, however, most of the treatment facilities were converted to regular prisons. In 2003, Governor Rick Perry cut back what prison treatment remained further still. What began as a quest for a new and promising approach to incarceration, therefore, ended in more of the same costly, ineffective imprisonment. Hawai'i should not follow this failed model.

Instead, we believe Hawai`i should do the following:

Invest in crime prevention strategies backed by solid social scientific evidence. Criminologists have deliberated over the 'what works' question for more than 20 years, and they have unanimously concluded that prevention programs do work. Because drug abuse and crime share similar causes, prevention programs can decrease the number of youths abusing drugs while at the same time decreasing the incidence of delinquent and criminal behaviors. Prevention is not only effective, it makes good fiscal sense. One California study estimated that in their first year, prevention programs saved the state anywhere from \$1,468 to \$15,000 depending on the kind of program implemented; thirty years out, the savings were from \$29,350 to \$221,750.

For those already drug addicted, we need to invest in community-based interventions. Extensive evidence suggests that drug treatment programs can decrease drug use, criminal activity, and arrest rates while increasing employment rates among treatment populations.

Finally, we should reduce reliance on incarceration for non-violent drug offenders. We know treatment outside of prison works. It costs less than incarceration and comes with fewer side effects. Prisons are blunt, expensive tools. They devour tax-payer money, chew up the lives of prisoners and their families, and do a poor job of reducing crime. Before investing Hawai't's precious resources in new prisons, therefore, we urge lawmakers to think twice about cheaper, more effective alternatives."

We know what works – we know what to do. Imprisoning individuals who have a treatable drug disorder is expensive and ineffective. There is plenty of research showing the efficacy of community-based treatment programs. Now we need to do it – to shift money from incarceration to community-based programs that directly address an individual's pathway to crime.

Expand Community Drug Treatment Services. For every \$1 spent on drug treatment in the community, you save approximately \$18. Substance abuse treatment provided in the community is more cost effective than imprisonment. Individuals with substance abuse histories compose a large portion of the prison

population. Substance use/abuse plays a role in the commission of certain crimes. Treatment delivered in the community is one of the most cost-effective ways to prevent such crimes.²

<u>Expand Community Mental Health Services.</u> Mental health litigation has established the legal right to treatment in custodial facilities – for pretrial detainees as well as sentenced inmates. Among its benefits, good mental health treatment can reduce security risks by minimizing the symptoms of mental illness, thereby decreasing potential disruptions to jail routines and injuries to staff and detainees. The problems jails experience in connection with mentally ill detainees are associated with the absence of criminal justice policies, procedures, and standards specifically addressed to this group of offenders. Deficiencies in training, communication, and resources result from viewing the jail in isolation, rather than as an integral part of a criminal justice system (that includes the police, the courts, defense attorneys, and prosecutors) with linkages to mental health and other human services based in the greater community.³

Increasing investment in community-based treatment, improving diversion from prison and jail, and ensuring that those leaving prison have adequate care will reduce the financial burden of imprisoning community members with treatable substance abuse disorders or those suffering with a mental illness.

<u>Reduce the Number of Imprisoned Nonviolent Drug Lawbreakers.</u> "Inmates who are released through Residential Reentry Centers (RRCs) are more likely to be gainfully employed and therefore less likely to recidivate as compared to inmates who are released from a prison directly to the community. We have recently begun to place inmates at low risk for recidivism (based on their age, criminal history and other criminogenic factors) and with few reentry needs (housing, employment, family ties) directly into home confinement wherever possible, allowing us to allocate the RRC beds to those with a need for the services and structure provided in that environment."⁴

"One concrete proposal for cutting expenditures on incarceration would be to reduce the number of nonviolent offenders in prison and jail by half (with no change in the incarceration rates for violent offenders).⁵

In summary, the data show that treatment in the community is more effective than prison-based treatment. Please heed the wisdom of our UH professors whose decades of research have gained them the respect of their peers and the plethora of research affirming the efficacy of community-based treatment. Let's build people, not prisons!

Mahalo for this opportunity to share our thoughts.

³ Providing Services for Jail Inmates with Mental Disorders, NIJ Research in Brief, Travis, Jeremy, and January, 1997. http://www.ncjrs.gov/txtfiles/162207.txt

⁴ Statement of Harley G. Lappin, Director, Bureau of Prisons before U.S. Sentencing Commission, Regional Hearing on the State of Federal Sentencing, Austin Texas, November 20, 2009.

² Aos, Steve, Polly Phipps, Robert Barnoski, and Roxanne Lieb. 2001. The comparative costs and benefits of programs to reduce crime. Olympia: Washington State Institute for Public Policy.

⁵ The High Budgetary Cost of Incarceration, John Schmitt, Kris Warner, and Sarika Gupta, June 2010, Center for Economic and Policy Research. <u>http://www.cepr.net/documents/publications/incarceration-2010-06.pdf</u>

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March 30, 2011

COMMITTEE ON PUBLIC SAFETY &MILITARY AFFAIRS Rep. Henry Aquino, Chair Rep. Ty Cullen, Vice Chair

COMMITTEE ON HAWAIIAN AFFAIRS Rep. Faye Hanohano, Chair Rep. Chris Lee, Vice Chair

Re: HCR 204/HR 176 - PSD Task Force to Plan/Design Correctional Treatment Facility - STRONG SUPPORT

Good Morning Chair Aguino and Chair Hanohano & Committee Members:

I am very much in support of the above bill. I believe creating a correctional treatment facility is not only the economical thing to do in these trying times, but the smart thing to do. Locking up non-violent drug offenders is not the answer. We know that. Treatment, prevention and education is what does work. I believe that if we create a place where these people can pay their debt to society and at the same time receive treatment and contribute to the community (as was being done at Kulani) we will have started down the right road to solving our drug problems. We should not keep doing the same old thing, hoping for a different result. Isn't that the definition of insanity?

I also believe the Big Island is the place for such a facility. This is the "healing" island and I believe such a facility will be welcomed here. Too many local families have been affected by drugs. I know the community will support such an effort. Thank you for listening.

Sincerely,

Erin Welsh

PBMtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Tuesday, March 29, 2011 10:31 AM
To:	PBMtestimony
Cc:	Ken_Conklin@yahoo.com
Subject:	Testimony for HCR204 on 3/31/2011 10:00:00 AM

Testimony for PBM/HAW 3/31/2011 10:00:00 AM HCR204

Conference room: 309 Testifier position: comments only Testifier will be present: No Submitted by: Kenneth R. Conklin, Ph.D. Organization: Individual Address: Phone: E-mail: <u>Ken Conklin@yahoo.com</u> Submitted on: 3/29/2011

Comments: Regarding HCR204, HR176, and HCR115:

These proposals are perhaps the best legislation to come forth from the Hawaiian Affairs Committee. I would very much like to give my wholehearted support to these creative proposals, except for a few issues not addressed in them. Please improve the language of the resolution to address these issues explicitly.

1. There should be no racial requirement or preference when identifying the inmates to be housed and treated in the facilities envisioned for the Hawaiian Homelands. The language of the resolutions should be improved to make it clear that there will be no separation of inmates by race either in choosing which inmates get sent to which facilities or in deciding which inmates receive which specific programs within an institution. All inmates whose criminal records, family stability, social situation etc. make them similarly situated should receive the same treatments based on those factors and not based on race. There should be no racial segregation either between institutions or internally within any particular institution. Prisons on DHHL lands should not be seen as factories for recruiting or inculcating inmates with Hawaiian sovereignty-focused political attitudes.

2. There should be no "rent" paid to DHHL for the use of the land. As the "whereas" language makes clear, a significant percentage of the inmate population is ethnic Hawaiian. The ethnic Hawaiian activists have made it a major issue that those inmates who are ethnic Hawaiians should remain in Hawaii. Therefore, the use of DHHL land for these prison facilities should be seen as a great benefit for ethnic Hawaiians and a worthy use of DHHL lands without payment of "rent." This project should not be a "cash cow" for DHHL.

3. In the event an ethnic Hawaiian governing entity is established either through passage of the federal Akaka bill or through passage of Hawaii legislation to create a state-recognized "Akaka tribe", the prison facilities established on DHHL lands must remain owned and operated by the State of Hawaii and not by the "tribe." The State of Hawaii should not be in the position of investing megabucks in building these State prison facilities, only to then see these facilities become transferred out of the State of Hawaii and into the Akaka tribe.

PBMtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, March 30, 2011 1:11 AM
To:	PBMtestimony
Cc:	rmiller@aya.yale.edu
Subject:	Testimony for HCR204 on 3/31/2011 10:00:00 AM

Testimony for PBM/HAW 3/31/2011 10:00:00 AM HCR204

Conference room: 309 Testifier position: comments only Testifier will be present: No Submitted by: Prof. Richard S. Miller Organization: Individual Address: Phone: E-mail: <u>rmiller@aya.yale.edu</u> Submitted on: 3/30/2011

Comments:

I strongly share Kat Brady's very well-informed doubts about the wisdom of this resolution.

PBMtestimony

From:	mailinglist@capitol.hawaii.gov
Sent:	Tuesday, March 29, 2011 10:16 PM
To:	PBMtestimony
Cc:	netra@electnetra.com
Subject:	Testimony for HCR204 on 3/31/2011 10:00:00 AM

Testimony for PBM/HAW 3/31/2011 10:00:00 AM HCR204

Conference room: 309 Testifier position: comments only Testifier will be present: No Submitted by: Netra Halperin, M.A. Organization: Individual Address: Phone: E-mail: <u>netra@electnetra.com</u> Submitted on: 3/29/2011

Comments: Aloha Chair Aquino, Chair Hanohano and members of the committees,

I support a treatment center, but not a traditional, " corrections" facility, as these programs have not been shown to actually " correct" anything. A traditional corrections center, which is a euphemism for jail or prison, is not only ineffective, but often counter-effective, exacerbating offenders pre-existing conditions of drug abuse, unresolved trauma, and lack of pro-social job skills.

However, a treatment facility, such as Delancey Street, which employs positive group culture and self-esteem enhancing, financially sustainable small businesses, such as moving companies and cafes, have shown to have a high success rate for turning offender's lives around, and enabling them to leave a life of crime, for a positive law abiding life.

I support HCR204/HR76 only as it applies to treatment facilities, not as it applies to corrections facilities.

Mahalo for hearing my testimony.

Netra Halperin, M.A. Kihei