

**Testimony on behalf of the Amplify  
Before the Judiciary Committee  
Regarding Draft LCO 3471 AAC Police Accountability  
July 17, 2020  
Marcia DuFore, Suffield CT**

Senator Winfield, Rep. Stafstrom and members of the Judiciary Committee.

My name is Marcia DuFore. I am writing as Executive Director of Amplify and as an active member NAMI, the CT Prevention Network and the Keep the Promise Coalition.

I am testifying to provide input about Section 18 of Draft Bill LCO 3471 AAC Police Accountability.

Our Board's responsibility is to study the behavioral health needs of people in our region and assist the Department of Mental Health and Addiction Services to set priorities for improved or expanded services to meet those needs. In order to carry out that responsibility, we do a lot of listening. We hear and hope to give voice to the stories of people in our region. This is one of our most important responsibilities - to ensure that the voice of people most impacted by the system of care have a strong voice in guiding and monitoring that system.

A large percentage of our members are people in recovery from mental health or addiction disorders. Many of them have had encounters law enforcement personnel who have been called to concerns that they might be suicidal or danger of harm to self or others. Many of those encounters have not gone well. Section 18 of this bill suggests that law enforcement evaluate the efficacy of employing or involving social workers or working with mobile crisis personnel for these kinds of calls. As advocates for compassionate and appropriate responses to people in crisis, Amplify has often supported such efforts as well as training for law enforcement personnel to understand and respond appropriately to people in emotional distress.

However, now we find ourselves in a dilemma. How is it that we have come to the place that police officers are often our first line of defense for responding to people in emotional distress. Mobile crisis response is a state funded mental health service designed for this kind of response. It is staffed by clinicians who are well trained and able connect people to services and supports to address their concerns. It is a service should be able to connect people natural supports in their community. But it is a service that has suffered years of stagnant or reduced funding over the past years as a result of difficult economic times and the need to balance the CT budget. Over the last few years agencies responsible to provide mobile crisis services have been forced to reduce their staffing and hours of availability. Most are not on call on weekends or after dark. As a result, we turn to other emergency personnel who have 24-hour, 7 days per week availability. And we insist that they be well trained to be able to offer a compassionate and appropriate response.

How is it that those of us who have allowed this to happen are not complicit in the one of the dilemmas we now face called police accountability? How is it that we as parents, neighbors, faith leaders, behavioral health providers, educators and advocates have delegated the responsibility for responding to vulnerable people in emotional distress to personnel who arrive to the scene in a police cruiser, wear a uniform and badge and are armed with tazers and guns.

Two stories were shared with me in the past month. Someone made a referral for a well-check for a middle-aged very anxious man who lives in a senior living apartment in one of the communities we serve. The police came to his door for a well check. He assured them he had no intent to harm himself or others, but they insisted on coming into his apartment against his wishes. They also insisted on having him transported to the hospital for a psychiatric evaluation. He was promptly released from the hospital back to his home but was traumatized by the invasion to his home and his person. How was he helped? And how was he harmed?

A younger man, also with anxiety issues became ill, assumed it was the CoVID-19 virus, but could not get authorization for testing. He self-isolated and his anxiety became worse. He became obsessed with the number of people dying a nursing home in his community and the lack of transparency by public officials about the seriousness of the pandemic. He started writing posts in the town forum that were inflammatory. Two police cruisers arrived at his door for a well check. They were probably well intentioned but were not well received. and this visit did nothing to relieve his anxiety. Had his family not intervened, the situation could have resulted in violence. How was he helped? And how was he harmed?

Addressing police accountability takes more than new rules and more training. It takes re-imagining the role of law enforcement. It takes re-invigorating (including restoring funding) for community resources and services to offer compassionate and effective responses to people in emotional distress. It takes digging deep, listening to our residents, and strategizing with them about we can work together to promote more healthy and inclusive communities.

Thank you for all you do and for your time and attention to these important matters before you.