



TESTIMONY IN SUPPORT OF SENATE BILL 1081 April 11, 2018

Thank you for hearing this complex and challenging issue. Mental Health America of Eastern Missouri, in support of MHA National and their issue brief 54, believe that persons with Serious Mental Illness (SMI) should be exempted from the death penalty. We are fully in support of Senate Bill. 1081.

When there is an act of violent crime, the media and the public, seeking any possible explanation, first question the mental health of the perpetrator. The perception is that the person must have a mental illness to do such a heinous thing. In reality, most people with mental illness are no more violent than the general population and in fact, persons with SMI are 10 times more likely to be a victim of violent crime. According to one study, only 4 percent of interpersonal crime is attributable to mental illness, but more than 40 percent of media stories about mental illness make the link to violent acts (Time Health, 2016).

Though we don't have exact data, it is believed that between 5 and 20 percent of persons on death row have a serious mental illness. Most people assume that Missouri already exempts persons with serious mental illness from the death penalty because we exempt juveniles and persons with developmental disabilities believing that these populations do not understand their actions or the consequences of their actions. Developmental disabilities, however, are not inclusive of mental illness. This exemption would not hold persons with SMI unaccountable for their criminal actions, just remove the death penalty as an option for punishment. It's also a false assumption that persons with mental illness automatically qualify for an "insanity" defense. Insanity is a legal defense, not a medical diagnosis.

Determining competence at the time of the crime, or at the time of trial or sentencing, is difficult because mental illness is cyclical meaning that a person's understanding of their actions and consequences, as well as their competence (*whether or not a person can understand the nature and consequences of the criminal proceedings against them*), can change. There are many factors that might impact a person's competency at any one time including: whether or not they received appropriate mental health diagnosis and treatment, compliance with their treatment plan including adherence to their medication. One study indicated that 55 percent of people with SMI are not adherent to medication plans because they don't think they're ill. Other factors in competency include "synthetic sanity" (when inmates are given certain psychotropic drugs to try to make them competent for trial -- these drugs do not cure the

underlying illness, only alleviate some symptoms), and a “catastrophic reaction” to living in solitary confinement once put on death row.

Currently, there are at least seven other states considering similar legislation (Indiana, Idaho, NC, OH, SD, TN and VA). MHA urges you to pass Senate Bill 1081 and spare the lives of people with SMI by prohibiting use of the death penalty and seek to maximize due process protections (police interrogation techniques, ability to form criminal intent, mitigation) and assistance by legal counsel to avoid discrimination and unfairness in capital cases.

Thank you for your time and attention.

Mark Utterback
President and CEO
Mental Health America of Eastern Missouri

1905 S. Grand Avenue
St. Louis, MO 63104
314-773-1399
Mark.Utterback@MHA-EM.org

Mark Utterback
President and CEO
Mental Health America of Eastern Missouri
1905 S. Grand Avenue
St. Louis, MO 63104

314-773-1399
Mark.Utterback@MHA-EM.org