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Public Comments before House Judiciary Committee on HB 1059  
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Mister Chair and distinguished Representatives:

Thank you for the opportunity to speak today. My name is Karen Worthington and I am the Director of the Barton Child Law & Policy Clinic at Emory University. The Barton Clinic is a program of Emory Law School dedicated to ensuring safety, well-being and permanency for abused and court-involved children in Georgia. The Clinic advocates a long-range systematic approach to public policy designed for the benefit of the children affected, and we provide research-based information about best practices and whether policies and laws affecting children have their intended effect. I have spent the last decade focusing exclusively on child welfare and juvenile justice matters and I have been the director of the Clinic since it opened in 2000. I also served as the director of the Southern Juvenile Defender Center from 2001 until a few months ago, when the Center moved from Emory to a new host organization.

Thank you for your work on HB 1059 and your commitment to protecting Georgia's children, and specifically for the substitute bill that removed provisions which created aggravated offenses where the victim is under age 14. HB 1059 does much to strengthen protections for children from sexual predators, but it unintentionally victimizes our young people by grouping all sex offenders together in a single category of deviants who are beyond repair. There are vast differences between young offenders and adult sexual predators and research shows that youthful sex offenders who receive appropriate interventions are highly unlikely to pose a lasting threat to anyone. In contrast to recidivism rates for adult sexual offenders, when appropriate interventions are provided, only 11% of young sex offenders reoffend. This is a lower recidivism rate than for other delinquent behaviors, indicating that among young offenders, those committing sex offenses present the best opportunity for full rehabilitation.

Because of this, the Barton Clinic urges this committee to amend HB 1059 to return jurisdiction over youthful sexual offenders to the juvenile courts, or at a minimum, to limit the application of enhanced sentences and lifetime restrictions to offenders who are age seventeen and older.

Adolescents are developmentally different from adults and when sexual behavior exhibited by adolescents rises to the level of criminal behavior, the best place for this behavior to be addressed and corrected is in the juvenile court system, where there is a philosophical and practical commitment to treatment and rehabilitation. Imposing mandatory minimum prison sentences of ten years or more on youthful offenders, or subjecting them to lifetime restrictions based on a youthful

conviction, is in direct contrast to research-based best practices for handling youthful sexual offenders.

The Barton Clinic's primary objection to HB1059 is that it is inconsistent with developmental research showing that adolescents' brains are not fully developed, causing them to have poor impulse control, and adolescents are less culpable than adults and more amenable to treatment and rehabilitation. Georgia has an opportunity to take advantage of solid research available from the fields of neuroscience, developmental psychology, criminal justice, psychiatry, social work, law, and others, to craft a research-based approach to dealing with young offenders that will protect society, maximize limited resources, and ensure a better future for our young people.

Children and adolescents, by reason of their physical and mental immaturity are entitled to special safeguards and protections in their encounters with the criminal justice system. The United States Supreme Court affirmed this last spring when it noted three distinct differences which exist between juveniles and adults: first, youth lack maturity and sound decision-making skills; second, youth are more vulnerable and susceptible to outside influence and lack control of their environment; and third, an adolescents' character is in the midst of transition and development, meaning they are more amenable to treatment and changes in behavior.

Advances in science have taught us that brain development is not complete until the mid-twenties. The last part of the brain to develop is the pre-frontal cortex, which is the part of the brain responsible for executive functions such as judgment, problem solving, decision making, planning, and social conduct. The latest brain development research tells us that there are "neurological explanations for the difficulties adolescents have in cognitive functioning, in exercising mature judgment, in controlling impulses, in weighing the consequences of actions, in resisting the influences of peers, and in generally becoming more responsible."<sup>1</sup> In other words, adolescents are both emotionally immature and neurologically immature. Their immaturity provides an opportunity for treatment and rehabilitation which will lead them to be productive citizens. With proper supports, 89% of adolescent sex offenders will not reoffend as they mature.

The Barton Clinic has been working with committee members to express our concerns about this bill and to provide language that would address those concerns. We are here to help in any way we can to create a bill that will both protect children from sexual predators and serve the best interests of Georgia's youth.

I thank you for your time and attention and urge you to amend HB 1059 to return jurisdiction over youthful sexual offenders to the juvenile courts, or at a minimum, to limit the application of enhanced sentences to offenders who are age seventeen and older.

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<sup>1</sup> Robert E. Shepherd, Jr. The Relevance of Brain Research to Juvenile Defense, 10 *Crim. Just.* 51(Winter 2005).  
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