



**REPRODUCTIVE  
JUSTICE INSIDE**

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c/o NPCMF

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## **SB 255 – Correctional Services – Pregnant Incarcerated Individuals**

### ***“Pregnant Incarcerated Continuity of Care Act”***

#### **SUPPORT**

Chairman Smith  
Vice Chair Waldstreicher  
Members of the Senate Judicial Proceedings Committee

Reproductive Justice Inside (RJI) and our coalition members and partners stand in support of SB 255. RJI is Maryland’s only statewide coalition working to address the needs of systems-involved individuals and their access to quality and timely sexual and reproductive healthcare and the right to parent with dignity.

Concern is growing among advocates regarding the sexual and reproductive healthcare for systems-involved females in the care/custody/control of the State of Maryland. The number of women in U.S. prisons has increased by more than 700% and has outpaced men by more than 50%.

Pregnant individuals have health-care needs that are minimally met by prison systems. Many of these mothers have high-risk pregnancies due to the economic and social problems that led them to be incarcerated: poverty, lack of education, inadequate health care, and substance abuse.

Already a vulnerable population while incarcerated, pregnant inmates who are preparing to be released lack the support upon re-entry for their unique health needs. Pregnant inmates must be afforded continuity of reproductive health care upon release and there should be a relationship with community-based partners for care in the jurisdiction they will return to.

Currently, there is no care coordination provided between public safety institutions and community-based providers. This legislation will ensure that there is a clear referral to those providers and create a pathway that can lead to improved maternal health outcomes. The transition time between release and accessing reproductive health care represents a high-risk period for these individuals.

Continuity of care would help to prevent adverse health outcomes for parent and child, as well as prevent unnecessary pregnancy complications. Additionally, pregnant inmates who present with a substance use disorder must also be afforded comprehensive assessment and offered medication assisted treatment as well as be offered mental health evaluations and care prior to release.

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The National Commission on Correctional Health Care also weighed in on the need to view incarcerated women as a special population and to provide appropriate treatment. They recommended screening, health assessment, pregnancy counseling, and comprehensive services for incarcerated women's unique health problems.

With the growing number of incarcerated women who are pregnant, it is important to recognize that failing to provide preventive and curative health care for these women may cost more to society than funding programs that might improve attachment and parenting behaviors, facilitate drug rehabilitation, and reduce recidivism among this population.

Finally, this legislation is also good risk management for the State and local jurisdictions and one that will lead to good maternal health outcomes.

Reproductive Justice Inside urge your support and favorable report on SB 255.

Respectfully submitted,

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Coalition Coordinator