

SB 776 - Prevent Forced Infant Separation for Inca

Uploaded by: Alicia Pereschuk

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with the Maryland Justice Project. I am a resident of District 43. **I am testifying in support of Senate Bill 776 - Prevention of Forced Infant Separation Act)**



The Prevention of Forced Infant Separation Act provides an alternative to separating newborn babies and their incarcerated mothers. This is a significant issue on a state and national level; the number of incarcerated women is growing, and this increasingly includes pregnant women. For example, Johns Hopkins School of Medicine researchers found 36 pregnant women were admitted into Maryland prisons in 2016, representing 16.7% (1 out of 6) of women's admissions by year's end.¹ Most pregnant women admitted to prison will give birth while still in prison.

Currently, newborns born to incarcerated mothers in Maryland are separated from their mothers almost immediately. As soon as the mother is discharged from the hospital – an average of 1 to 2 days after giving birth – the baby is taken away and placed with a secondary caregiver or into the foster system. This outdated practice is well-documented as traumatic for both mothers and babies, and severely disrupts the formation of a healthy bond between them. This has serious consequences, increasing maternal depression, feelings of extreme powerlessness, grief, and detachment. Their children are more likely to experience poor attachment to their caregiver and later academic difficulties, post-traumatic stress symptoms, delinquency, and risky behaviors.² As women of color are disproportionately likely to be imprisoned, these forced separations also disproportionately impact racial minority communities and exacerbate existing social and structural disadvantages for these families.

The Prevention of Forced Infant Separation Act establishes a program to stop this outdated and harmful separation policy and instead facilitate strong, healthy bonds between incarcerated women and their newborns. In this program, imprisoned pregnant women who have earned pre-release status would transfer to the women's pre-release unit; they would remain there for up to a year after delivery with their infants. This bill also establishes an evidence-based Healthy Start Bonding Program (developed with maternal-child health experts) to support healthy parenting and attachment between mother and child, and strengthens other supportive family ties by facilitating frequent visitation by fathers or secondary caregivers.

Similar programs (often called prison nurseries) have been established in numerous states and are considered to be a best-practice model.³ In addition to the cost benefits of keeping infants out of foster care, such programs have been documented to have significant positive impacts on these infants' secure attachment and well-being, both short and longer-term.^{3,5} Additionally, women who participate in these programs have better outcomes, including lower recidivism rates.⁴

Most importantly, separating a child from their parent is a cruelty that should only be inflicted in circumstances that are best for the child. Denying incarcerated mothers access to available resources that ensure the healthy birth of their child, as well as a recourse to stay and bond with that child are not the behaviors of a benevolent state, but the actions of a callous and vindictive one.

It is for these reasons I am strongly encouraging you to vote **in support of Senate Bill 776 (The Prevention of Forced Infant Separation Act)**. The time is right for the state to adopt this best-practice model to keep families together and end forced infant separation.

Thank you for your time, service, and consideration.

Sincerely,
Alicia Pereschuk
321 W. 28th St
Baltimore MD 21211
Showing Up for Racial Justice Baltimore

¹ Sufrin C et al. Pregnancy Outcomes in US Prisons, 2016–2017. *Am J Public Health*. 2019;109(5):799-805.

² Dallaire. Children with incarcerated mothers: Developmental outcomes, special challenges and recommendations. *Journal of Applied Developmental Psychology*. 2007;28(1):15-24.

³ Byrne et al. Intergenerational transmission of attachment for infants raised in a prison nursery. *Attachment & Human Development*. 2010;12(4):375-393.

⁴ Goshin et al. Preschool outcomes of children who lived as infants in a prison nursery. *The Prison Journal*. 2014;94(2):139-158.

⁵ Goshin et al. Recidivism after release from a prison nursery program. *Public Health Nurs*. 2014;31(2):109-117.

SB0776_Fav_Arielle_Juberg.pdf

Uploaded by: Arielle Juberg

Position: FAV

SB0776, Correctional Services - Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)
Testimony in **Support**

To: Chair Smith and members of the Senate Judicial Proceedings Committee
From: Arielle Juberg, Baltimore, MD 21234

My name is Arielle Juberg. I am a resident of Baltimore County in District 8. I belong to Showing Up for Racial Justice (SURJ) in Baltimore. SURJ is working in collaboration with the Maryland Justice Project. I am testifying in **support** of SB0776, Correctional Services - Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)

SB0776 provides an alternative to separating newborn babies and their incarcerated mothers. In 2016, 1 out of every 6 women admitted to Maryland prisons were pregnant.¹ Most pregnant women admitted to prison will give birth while still in prison.

I care about SB0776 because I believe separating a mother from her newborn child is heartless. As a Christian, I believe each person has inherent dignity bestowed by God. We hear God tell his prophet “Before I formed you in the womb I knew you; Before you were born I sanctified you” (Jeremiah 1:5 NKJV). Separating newborns from their mothers disregards their inherent dignity as human beings.

Our current system for newborns and incarcerated mothers is antiquated and cruel. Newborns born to incarcerated mothers in Maryland are separated from their mothers almost immediately. As soon as the mother is discharged from the hospital – an average of 1 to 2 days after giving birth – the newborn is taken away and placed with a secondary caregiver or into the foster system. Separation has serious consequences for women, increasing maternal depression, feelings of extreme powerlessness, grief, and detachment. Their children – considered some of the most vulnerable, at-risk populations - are more likely to experience poor attachment to their caregiver and later academic difficulties, post-traumatic stress symptoms, delinquency, and risky behaviors.² As women of color are disproportionately likely to be imprisoned, these forced separations also disproportionately impact racial minority communities and exacerbate existing social and structural disadvantages.

SB0776 establishes a program to stop our outdated, harmful separation policy and instead facilitate strong, healthy bonds between incarcerated women and their newborns. Similar programs (often called prison nurseries) have been established in numerous states and are considered a best-practice model.³ In addition to the cost benefits of keeping infants out of foster care, such programs have been documented to have significant positive impacts on infants’ secure attachment and well-being, both short and longer-term.³⁻⁵ Women who participate in these programs have better outcomes, including lower recidivism rates.⁵ SB0776 is simply good public policy that makes sense for Maryland.

It is for these reasons I am strongly encouraging you to vote **in support** of SB0776. The time is right for the state to adopt this best-practice model to keep families together and end forced infant separation. Thank you for your time, consideration, and service.

1. Sufirin C et al. Pregnancy Outcomes in US Prisons, 2016–2017. *Am J Public Health*. 2019;109(5):799-805.
2. Dallaire. Children with incarcerated mothers: Developmental outcomes, special challenges and recommendations. *Journal of Applied Developmental Psychology*. 2007;28(1):15-24.
3. Goshin et al. Recidivism after release from a prison nursery program. *Public Health Nurs*. 2014;31(2):109-117.
4. Byrne et al. Intergenerational transmission of attachment for infants raised in a prison nursery. *Attachment & Human Development*. 2010;12(4):375-393.
5. Goshin et al. Preschool outcomes of children who lived as infants in a prison nursery. *The Prison Journal*. 2014;94(2):139-158.

sb 776.pdf

Uploaded by: Brian Seel

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with the Maryland Justice Project. I am a resident of District 46, and **I am testifying in support of Senate Bill 776 - Prevention of Forced Infant Separation Act)**



The Prevention of Forced Infant Separation Act provides an alternative to separating newborn babies and their incarcerated mothers. This is a significant issue on a state and national level; the number of incarcerated women is growing, and this increasingly includes pregnant women. For example, Johns Hopkins School of Medicine researchers found 36 pregnant women were admitted into Maryland prisons in 2016, representing 16.7% (1 out of 6) of women's admissions by year's end.¹ Most pregnant women admitted to prison will give birth while still in prison.

Currently, newborns born to incarcerated mothers in Maryland are separated from their mothers almost immediately. As soon as the mother is discharged from the hospital – an average of 1 to 2 days after giving birth – the baby is taken away and placed with a secondary caregiver or into the foster system. This outdated practice is well-documented as traumatic for both mothers and babies, and severely disrupts the formation of a healthy bond between them. This has serious consequences, increasing maternal depression, feelings of extreme powerlessness, grief, and detachment. Their children are more likely to experience poor attachment to their caregiver and later academic difficulties, post-traumatic stress symptoms, delinquency, and risky behaviors.² As women of color are disproportionately likely to be imprisoned, these forced separations also disproportionately impact racial minority communities and exacerbate existing social and structural disadvantages for these families.

The Prevention of Forced Infant Separation Act establishes a program to stop this outdated and harmful separation policy and instead facilitate strong, healthy bonds between incarcerated women and their newborns. In this program, imprisoned pregnant women who have earned pre-release status would transfer to the women's pre-release unit; they would remain there for up to a year after delivery with their infants. This bill also establishes an evidence-based Healthy Start Bonding Program (developed with maternal-child health experts) to support healthy parenting and attachment between mother and child, and strengthens other supportive family ties by facilitating frequent visitation by fathers or secondary caregivers.

Similar programs (often called prison nurseries) have been established in numerous states and are considered to be a best-practice model.³ In addition to the cost benefits of keeping infants out of foster care, such programs have been documented to have significant positive impacts on these infants' secure attachment and well-being, both short and longer-term.^{3,5} Additionally, women who participate in these programs have better outcomes, including lower recidivism rates.⁴

Most importantly, separating a child from their parent is a cruelty that should only be inflicted in circumstances that are best for the child. Denying incarcerated mothers access to available resources that ensure the healthy birth of their child, as well as a recourse to stay and bond with that child are not the behaviors of a benevolent state, but the actions of a callous and vindictive one.

It is for these reasons I am strongly encouraging you to vote **in support of Senate Bill 776 (The Prevention of Forced Infant Separation Act)**. The time is right for the state to adopt this best-practice model to keep families together and end forced infant separation.

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Sincerely,

Lilly Chapa
212 S Washington St

Christina Pham Linhoff
46 E Randall St

Holly Powell
2308 Cambridge St

Brian Seel
223 S Wolfe St

Liz Simon-Higgs
308 E Randall St

Showing Up for Racial Justice Baltimore
for Racial Justice Baltimore

SB 776 - Prevent Forced Infant Separation for Inca

Uploaded by: Daryl Yoder

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with the Maryland Justice Project. I am a resident of District 12. **I am testifying in support of Senate Bill 776 - Prevention of Forced Infant Separation Act)**



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Thank you for your time, service, and consideration.

Sincerely,
Daryl Yoder

309 Glenmore Ave., Catonsville, MD 21228

Showing Up for Racial Justice Baltimore

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SB 776 - Prevent Forced Infant Separation for Inca

Uploaded by: Erica Palmisano

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

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Most importantly, separating a child from their parent is a cruelty that should only be inflicted in circumstances that are best for the child. Denying incarcerated mothers access to available resources that ensure the healthy birth of their child, as well as a recourse to stay and bond with that child are not the behaviors of a benevolent state, but the actions of a callous and vindictive one.

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Thank you for your time, service, and consideration.

Sincerely,
Erica Palmisano
5580 Vantage Point Rd, Apt 5, Columbia, MD
Showing Up for Racial Justice Baltimore

¹ Sufrin C et al. Pregnancy Outcomes in US Prisons, 2016–2017. *Am J Public Health*. 2019;109(5):799-805.

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SB 0776-Prevention of Forced Separation Act (3).pd

Uploaded by: Essita Duncan

Position: FAV



www.marylandwomen.org

Maryland Commission for Women

A Commission of the Maryland Department of Human Services

51 Monroe Street, Ste. 1034 – Rockville, Maryland 20850

301-610-4524

www.marylandwomen.org

March 9, 2022

*Yun Jung Yang, Esq.,
Chair*

*Tawanda A. Bailey,
First Vice Chair*

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Second Vice Chair*

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*Judith Vaughan-Prather
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*Tammy Wise
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The Honorable William C. Smith, Jr., Chair
The Honorable Jeffrey Waldstreicher, Vice Chair
Senate Judicial Proceedings Committee
Miller Senate Office Building, 2 East Wing
11 Bladen St., Annapolis, MD 21401 – 1991

RE: SB 0776 - Prevention of Forced Separation Act

Dear Senators Smith and Waldstreicher and Members of the Senate Judicial Proceedings Committee:

The Maryland Commission for Women (MCW) urges support of Senate Bill 0776 which would permit an incarcerated woman who is either pregnant or recently gave birth to transfer to the prerelease unit for women, and will establish the Healthy Start Bonding Program to promote the development of healthy relationships between incarcerated women and their children.

The MCW was established in 1965 and was set in state law in 1971. An office of the Department of Human Services, the Commission is a 25-member advisory board whose duties outlined in its enabling legislation include:

- Study the status of women in our state.
- Recommend methods of overcoming discrimination.
- Recognize women's accomplishments and contributions.
- Provide informed advice to the executive and legislative branches of government on the issues concerning the women of our state.

It is to fulfill this mandate that the Commission writes to you today. Please note that the positions expressed in this letter are those of the Commission for Women and do not necessarily reflect the position of the Governor or the Department of Human Services.

An average of 4-8% of incarcerated women are pregnant during their incarceration. Incarcerated pregnant women are at a higher risk for prenatal complications and preterm births. Additionally, pregnant women often enter our correctional system with multiple sociocultural factors that contribute to detrimental social and health outcomes for themselves and their babies upon release.

During the period of incarceration, Maryland's correctional system has a unique opportunity to address issues, including facilitating strong bonding of the infants with their mothers and incentivizing the mothers to comply with requirements to remain with their child in the prerelease unit. This bill requires the Division of Correctional Services to allow liberal visitation for the father or secondary caretaker with a pregnant incarcerated woman or a woman in post-delivery. In addition, this bill will give our state correctional system the means to provide services aimed at improving potential mental health issues that can arise from the separation of mother and child during periods of incarceration.

This bill will undoubtedly improve health and mental health outcomes when new mothers leave prison and re-enter society. Therefore, we strongly urge your support for SB 0776.

With very best regards,



Yun Jung Yang, Chair
Maryland Commission for Women

SURJ Infant Separation 2022 3 9.pdf

Uploaded by: Jan Kleinman

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with the Maryland Justice Project. I am a resident of District 40 and have been a mother myself for over 30 years. **I am testifying in support of Senate Bill 776 - Prevention of Forced Infant Separation Act)**



The Prevention of Forced Infant Separation Act provides an alternative to separating newborn babies and their incarcerated mothers. This is a significant issue on a state and national level; the number of incarcerated women is growing, and this increasingly includes pregnant women. For example, Johns Hopkins School of Medicine researchers found 36 pregnant women were admitted into Maryland prisons in 2016, representing 16.7% (1 out of 6) of women's admissions by year's end.¹ Most pregnant women admitted to prison will give birth while still in prison.

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Thank you for your time, service, and consideration.

Sincerely,
Jan Kleinman
816 Union Ave
Baltimore, MD 21211
Showing Up for Racial Justice Baltimore

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Maryland Catholic Conference_FAV_SB776.pdf

Uploaded by: Jenny Kraska

Position: FAV



ARCHDIOCESE OF BALTIMORE † ARCHDIOCESE OF WASHINGTON † DIOCESE OF WILMINGTON

March 09, 2022

Senate Bill 776

Correctional Services – Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)

Senate Judicial Proceedings Committee

Position: SUPPORT

The Maryland Catholic Conference (“Conference”) represents the public policy interests of the three Roman Catholic (arch)dioceses serving Maryland: the Archdiocese of Baltimore, the Archdiocese of Washington, and the Diocese of Wilmington.

The Conference supports Senate Bill 776. This bill would require the Department of Correction to allow certain pregnant women and certain women who have recently given birth to transfer to the prerelease unit for women for a certain period of time in order to facilitate strong bonds between incarcerated women and their children.

The Conference supports programming focused on children and families impacted by incarceration and believes these specialized programs can make a positive impact in the lives of families as they face challenging times. The United States is just one of four countries in the world that routinely separate incarcerated moms from their newborn babies. The trauma of such a separation is profound and harms the health of both the mother and baby. Women in prison tend to be younger, have completed less education and are more likely to have experienced physical or chemical abuse. Since 1980 the number of women incarcerated in Maryland has increased over 3-fold and this increase disproportionately affects women of color.

Moving women and their children from traditional prison settings to a prerelease setting, as called for in this legislation, can improve birth outcomes for Moms and babies. Allowing parents to bond during the first year of life can improve the health outcomes for children during this first year and for the remainder of their lives. A positive, healthy relationship with a parent or caregiver is the most important factor for successful development in early life. These relationships not only provide a safe and healthy environment for growth, but also positive interactions that support healthy emotional and social development and learning.

The Prevention of Forced Infant Separation Act is an opportunity to revise ineffective public policies to positively impact two generations at a time and help make Maryland a leader in prison reform for pregnant women.

It is for these reasons that the Maryland Catholic Conference asks for a favorable report on **SB 776**. Thank you for your consideration.

HPP SB 776 Testimony- FAV.pdf

Uploaded by: Jessica Emerson

Position: FAV

Testimony of the Human Trafficking Prevention Project

BILL NO: Senate Bill 776
TITLE: Correctional Services – Pregnancy and Postpartum Support
(Prevention of Forced Infant Separation Act)
COMMITTEE: Judicial Proceedings
HEARING DATE: March 9, 2022
POSITION: FAVORABLE

Senate Bill 454 would create the Healthy Start Bonding Program within the Maryland correctional system which would allow women who are on pre-release status who have recently given birth to reside with their child in the prerelease unit for up to one year following the birth of the child. The Human Trafficking Prevention Project at the University of Baltimore School of Law supports this bill because it prioritizes the emotional health of incarcerated mothers, many of whom are survivors of human trafficking.

Across the country, there has been a disturbing gender disparity in recent prison population trends. While recent reforms nationally have reduced the total number of people in state prisons since 2009, almost all the decrease has been among men. Women are being incarcerated at a significantly higher rate than men, with the number of women in Maryland prisons having increased by over more than eightfold over the past 40 years.¹ Pregnant women who go into labor while incarcerated in a Department of Public Safety and Correctional Services (DPSCS) correctional facility are transported to a hospital but are required to return to their facility as soon as they are discharged. For a standard vaginal delivery, this is generally 1-2 days after giving birth. This means that most incarcerated women have less than 48 hours with their newborns before the baby is forcibly separated from the mother.

Research suggests that the first year is one of the most important in an infant's life, as it is a time of significant physical, cognitive, and social development. This means that when babies are forcibly separated from their parents just days after birth, there can be lifelong developmental consequences. Not only does separation immediately cause a permanent increase in a baby's stress levels, but separated babies are more likely to develop post-traumatic stress and substance use disorders as adults. For mothers, the psychological consequences of forced separation can be just as severe. Further, if the mother is the sole or primary caretaker of the child – like the majority of incarcerated mothers - the separation can become permanent as child protective services and the foster system becomes involved.

SB 776 will also have a strong positive impact on the lives of survivors of human trafficking, who are frequently charged with non-violent criminal offenses stemming from acts they were forced to commit by their traffickers, or from the instability that so often precedes or follows a trafficking experience. Data recently obtained from a national survey of both sex and labor trafficking survivors highlights the regularity with which survivors of trafficking are criminalized, with 91% of survivors reporting having been arrested.² In a life already rife with coercion, control, and abuse, permitting these survivors to remain with their newborns will allow them to work toward creating healthy, secure bonds with their children, which in turn supports their recovery from the trauma of their trafficking experience.

For these reasons, the Human Trafficking Prevention Project at the University of Baltimore School of Law supports Senate Bill 776 and respectfully urges a favorable report.

¹ Vera Institute of Justice, *Incarceration Trends in Maryland* (2019), <https://www.vera.org/downloads/pdfdownloads/state-incarceration-trends-maryland.pdf> (citing that the number of women in Maryland's jails has increased from 120 in 1970 to 1,000 in 2015).

² National Survivor Network, *National Survivor Network Members Survey: Impact of Criminal Arrest and Detention on Survivors of Human Trafficking* (2016), <https://nationalsurvivornetwork.org/wp-content/uploads/2017/12/VacateSurveyFinal.pdf>.

MLAW Testimony - SB776 -Correctional Services - Pr

Uploaded by: Jessica Morgan

Position: FAV



Bill No: SB776
Title: Correctional Services - Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)
Committee: Judicial Proceedings
Hearing: March 9, 2022
Position: FAVORABLE

The Maryland Legislative Agenda for Women (MLAW) is a statewide coalition of women's groups and individuals formed to provide a non-partisan, independent voice for Maryland women and families. MLAW's purpose is to advocate for legislation affecting women and families. To accomplish this goal, MLAW creates an annual legislative agenda with issues voted on by MLAW members and endorsed by organizations and individuals from all over Maryland. **SB776 - Correctional Services - Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)** is a priority on the 2022 MLAW Agenda and we urge your support.

SB776 prevents the forced separation of infants born to incarcerated women with pre-release status in Maryland, permits liberal visitation of infants born to incarcerated mothers without pre-release status, and creates the Healthy Start Program, a child development initiative with the goal of building strong bonds between mother and infant.

The crisis of mass incarceration – and the process of ending it – has become a central policy concern in the United States over the past few years. However, much of the conversation both nationally and within Maryland has centered around the experiences of men in carcel institutions, even though women are the fastest growing incarcerated population in the U.S. Despite this rapid growth, many correctional facilities are still not adequately equipped to meet the physiological and social needs of women, primarily due to the nation's male-specific model for incarceration. This has a negative impact on the health of incarcerated women, especially those who are pregnant and give birth while incarcerated.

In the State of Maryland, pregnant women who go into labor while incarcerated in a Department of Public Safety and Correctional Services (DPSCS) correctional facility will be transported to a hospital but are required to return to their facility as soon as they are discharged. For a standard vaginal delivery, this is generally 1-2 days after giving birth. This means that most incarcerated women have less than 48 hours with their newborns before the baby is forcibly separated from the mother. In 2019, 19 pregnant women were sentenced to incarceration in DPSCS facilities and 9 infants were born to mothers in incarceration during the same year. The COVID-19 pandemic has exacerbated this issue, as the rate of pregnancy among incarcerated women in DPSCS custody more than doubled from 2019 to 2020. Considering that the majority of incarcerated women are the sole caregivers of their children, many of these newborns will enter the Maryland Department of Human Services (DHS) foster care program just days after they are born. The forced separation of infants leads to a myriad of adverse health outcomes for both the baby and the mother. Research suggests that the first year is one of the most important in an infant's life, as it is a time of significant physical, cognitive, and social development. This means that when babies are forcibly

Maryland Legislative Agenda for Women
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mdlegagenda4women@yahoo.com • www.mdlegagendaforwomen.org

separated from their parents just days after birth, there can be lifelong developmental consequences. Not only does separation immediately cause a permanent increase in a baby's stress levels, but separated babies are more likely to develop post-traumatic stress and substance use disorders as adults. For mothers, the psychological consequences of forced separation can be just as severe. Mothers separated from their newborns are more likely to experience post-partum depression, extreme powerlessness, grief, and feelings of detachment after forced separation.

For these reasons, MLAW strongly urges the passage of SB776.



MLAW 2022 Supporting Organizations

The following organizations have signed on in support of our 2022 Legislative Agenda:

Allegany County Women's Action Coalition
American Association of University Women - Anne Arundel County
American Association of University Women - Maryland
American Association of University Women - Garrett Branch
Anne Arundel County Commission for Women
Anne Arundel County NOW (National Organization for Women)
Baltimore County Commission for Women
Baltimore Jewish Council
Baltimore NOW (National Organization for Women)
Business and Professional Women of Maryland
For All Seasons, Inc.
Forward Justice Maryland
Indivisible Central Maryland
Make A Difference Monday
Maryland NOW (National Organization for Women)
Maryland Network Against Domestic Violence
Maryland Women's Heritage Center
MoCoWoMen
MomsRising
Montgomery County NOW (National Organization for Women)
Montgomery County Commission for Women
Montgomery County Women's Democratic Club
National Coalition For Sexual Freedom
National Organization for Women
NCBW Anne Arundel County Chapter
Prince George's County Alumnae Chapter
Prince George's County Drug Policy Coalition, Inc.
Reproductive Justice Inside
South Prince George's Business and Professional Women
WISE - WISE Women of Maryland
Women's Equality Day Celebration across Maryland
Women's Law Center of Maryland
Yellow Rose Foundation
Zonta Club Mid Maryland
Zonta Club of Annapolis

Maryland Legislative Agenda for Women

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Testimony_JPC_SB0776_LR1196.pdf

Uploaded by: Jill Carter

Position: FAV



THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

**Testimony of Senator Jill P. Carter
In Favor of SB 776
–Correctional Services – Pregnancy and Postpartum Support
(Prevention of Forced Infant Separation Act)--
Before the Judicial Proceedings Committee
On March 9 , 2022**

Chairman Smith, Vice Chair Waldstreicher, and Members of the Committee:

Senate Bill 776, the Prevention of Forced Infant Separation Act, gives infants born to incarcerated mothers in Maryland the head start they need to live healthier and happier lives.

In Maryland, most pregnant women who go into labor while incarcerated spend less than 48 hours bonding with their infant before the newborn is taken away and either placed with a secondary caregiver or in foster care. This is because there currently exist no accommodations for mothers to remain with their infants during the tenure of their incarceration.

Not only is this forced separation of mother and infant inhumane, but it presents a significant public health issue. [Research shows that an infant's first year of life is one of the most important.](#) When infants are prevented from consistent bonding with their mothers, there can be lifelong developmental consequences such as, for example, an increased risk of post-traumatic stress or substance abuse in adulthood. [The mothers are more likely to experience postpartum](#)

[depression, extreme powerlessness, grief, and feelings of detachment.](#)

In 2021, Minnesota passed legislation known as the Health Start Act. In doing so, it became the first state in the country to prevent the practice of forcibly separating infants from their incarcerated mothers. This bill, Senate Bill 776, is based on the Minnesota law and expands upon a bill sponsored by Senator Washington in 2020, [Senate Bill 684](#), which authorized the Commissioner of Correction to operate a pre-release unit for women within the Division of Corrections.

Specifically, Senate Bill 776 would provide pregnant women in the custody of the Department of Public Safety and Correctional Services with pre-release status, the option to relocate to the pre-release unit throughout the duration of their pregnancy and remain with their infants up to one year postpartum. For pregnant women who are not eligible for pre-release status, they will have access to liberal visitation with their infant. In both facilities, fathers or appropriate secondary caregivers will also be permitted increased visitation with the infant; this will better facilitate the infant's transition into the community.

In addition, Senate Bill 776 will create the Healthy Start Program. The Healthy Start Program is an initiative that will use evidence-based interventions developed by healthcare professionals to ensure well-built bonds between families and infants. A key consideration of this program is the welfare of the infant. Although incarcerated women are at higher risk for substance use disorder, mental illness, and poverty, [research shows that the trauma to an infant caused by forced separation outweighs the consequences of these risk factors](#)

to the infant. Instead, experts in child development advocate for interventions like the Healthy Start Program because it connects incarcerated mothers with needed resources to form lifelong bonds with their children. Such interventions have also been proven to cut the recidivism rates of participants in half and increase the likelihood of mothers retaining custody of their children post-incarceration.

The Prevention of Forced Infant Separation Act is evidence-based legislation that recognizes the right of every person to parent their children. As such, I urge the committee to give a favorable report on Senate Bill 776.

Respectfully,

A handwritten signature in blue ink that reads "Jill P. Carter". The signature is written in a cursive, flowing style.

Jill P. Carter

SB 776 - Prevent Forced Infant Separation for Inca

Uploaded by: Jonathan Smeton

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with the Maryland Justice Project. I am a resident District 40. **I am testifying in support of Senate Bill 776 - Prevention of Forced Infant Separation Act)**



The Prevention of Forced Infant Separation Act provides an alternative to separating newborn babies and their incarcerated mothers. This is a significant issue on a state and national level; the number of incarcerated women is growing, and this increasingly includes pregnant women. For example, Johns Hopkins School of Medicine researchers found 36 pregnant women were admitted into Maryland prisons in 2016, representing 16.7% (1 out of 6) of women's admissions by year's end.¹ Most pregnant women admitted to prison will give birth while still in prison.

Currently, newborns born to incarcerated mothers in Maryland are separated from their mothers almost immediately. As soon as the mother is discharged from the hospital – an average of 1 to 2 days after giving birth – the baby is taken away and placed with a secondary caregiver or into the foster system. This outdated practice is well-documented as traumatic for both mothers and babies, and severely disrupts the formation of a healthy bond between them. This has serious consequences, increasing maternal depression, feelings of extreme powerlessness, grief, and detachment. Their children are more likely to experience poor attachment to their caregiver and later academic difficulties, post-traumatic stress symptoms, delinquency, and risky behaviors.² As women of color are disproportionately likely to be imprisoned, these forced separations also disproportionately impact racial minority communities and exacerbate existing social and structural disadvantages for these families.

The Prevention of Forced Infant Separation Act establishes a program to stop this outdated and harmful separation policy and instead facilitate strong, healthy bonds between incarcerated women and their newborns. In this program, imprisoned pregnant women who have earned pre-release status would transfer to the women's pre-release unit; they would remain there for up to a year after delivery with their infants. This bill also establishes an evidence-based Healthy Start Bonding Program (developed with maternal-child health experts) to support healthy parenting and attachment between mother and child, and strengthens other supportive family ties by facilitating frequent visitation by fathers or secondary caregivers.

Similar programs (often called prison nurseries) have been established in numerous states and are considered to be a best-practice model.⁵ In addition to the cost benefits of keeping infants out of foster care, such programs have been documented to have significant positive impacts on these infants' secure attachment and well-being, both short and longer-term.³⁻⁵ Additionally, women who participate in these programs have better outcomes, including lower recidivism rates.⁴

Most importantly, separating a child from their parent is a cruelty that should only be inflicted in circumstances that are best for the child. Denying incarcerated mothers access to available resources that ensure the healthy birth of their child, as well as a recourse to stay and bond with that child are not the behaviors of a benevolent state, but the actions of a callous and vindictive one.

It is for these reasons I am strongly encouraging you to vote **in support of Senate Bill 776 (The Prevention of Forced Infant Separation Act)**. The time is right for the state to adopt this best-practice model to keep families together and end forced infant separation.

Thank you for your time, service, and consideration.

Sincerely,
Jonathan Smeton
Baltimore, MD 21211
Showing Up for Racial Justice Baltimore

¹ Sufrin C et al. Pregnancy Outcomes in US Prisons, 2016–2017. *Am J Public Health*. 2019;109(5):799-805.

² Dallaire. Children with incarcerated mothers: Developmental outcomes, special challenges and recommendations. *Journal of Applied Developmental Psychology*. 2007;28(1):15-24.

³ Byrne et al. Intergenerational transmission of attachment for infants raised in a prison nursery. *Attachment & Human Development*. 2010;12(4):375-393.

⁴ Goshin et al. Preschool outcomes of children who lived as infants in a prison nursery. *The Prison Journal*. 2014;94(2):139-158.

⁵ Goshin et al. Recidivism after release from a prison nursery program. *Public Health Nurs*. 2014;31(2):109-117.

SB 776 - Prevent Forced Infant Separation for Inca

Uploaded by: Katherine Wilkins

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with the Maryland Justice Project. I am a resident of **District 12. I am testifying in support of Senate Bill 776 - Prevention of Forced Infant Separation Act)**



The Prevention of Forced Infant Separation Act provides an alternative to separating newborn babies and their incarcerated mothers. This is a significant issue on a state and national level; the number of incarcerated women is growing, and this increasingly includes pregnant women. For example, Johns Hopkins School of Medicine researchers found 36 pregnant women were admitted into Maryland prisons in 2016, representing 16.7% (1 out of 6) of women's admissions by year's end.¹ Most pregnant women admitted to prison will give birth while still in prison.

Currently, newborns born to incarcerated mothers in Maryland are separated from their mothers almost immediately. As soon as the mother is discharged from the hospital – an average of 1 to 2 days after giving birth – the baby is taken away and placed with a secondary caregiver or into the foster system. This outdated practice is well-documented as traumatic for both mothers and babies, and severely disrupts the formation of a healthy bond between them. This has serious consequences, increasing maternal depression, feelings of extreme powerlessness, grief, and detachment. Their children are more likely to experience poor attachment to their caregiver and later academic difficulties, post-traumatic stress symptoms, delinquency, and risky behaviors.² As women of color are disproportionately likely to be imprisoned, these forced separations also disproportionately impact racial minority communities and exacerbate existing social and structural disadvantages for these families.

The Prevention of Forced Infant Separation Act establishes a program to stop this outdated and harmful separation policy and instead facilitate strong, healthy bonds between incarcerated women and their newborns. In this program, imprisoned pregnant women who have earned pre-release status would transfer to the women's pre-release unit; they would remain there for up to a year after delivery with their infants. This bill also establishes an evidence-based Healthy Start Bonding Program (developed with maternal-child health experts) to support healthy parenting and attachment between mother and child, and strengthens other supportive family ties by facilitating frequent visitation by fathers or secondary caregivers.

Similar programs (often called prison nurseries) have been established in numerous states and are considered to be a best-practice model.³ In addition to the cost benefits of keeping infants out of foster care, such programs have been documented to have significant positive impacts on these infants' secure attachment and well-being, both short and longer-term.^{3,5} Additionally, women who participate in these programs have better outcomes, including lower recidivism rates.⁴

Most importantly, separating a child from their parent is a cruelty that should only be inflicted in circumstances that are best for the child. Denying incarcerated mothers access to available resources that ensure the healthy birth of their child, as well as a recourse to stay and bond with that child are not the behaviors of a benevolent state, but the actions of a callous and vindictive one.

It is for these reasons I am strongly encouraging you to vote **in support of Senate Bill 776 (The Prevention of Forced Infant Separation Act)**. The time is right for the state to adopt this best-practice model to keep families together and end forced infant separation.

Thank you for your time, service, and consideration.

Sincerely,

Katherine Wilkins

10651 Gramercy Pl

Columbia MD 21044

Showing Up for Racial Justice Baltimore

¹ Sufrin C et al. Pregnancy Outcomes in US Prisons, 2016–2017. *Am J Public Health*. 2019;109(5):799-805.

² Dallaire. Children with incarcerated mothers: Developmental outcomes, special challenges and recommendations. *Journal of Applied Developmental Psychology*. 2007;28(1):15-24.

³ Byrne et al. Intergenerational transmission of attachment for infants raised in a prison nursery. *Attachment & Human Development*. 2010;12(4):375-393.

⁴ Goshin et al. Preschool outcomes of children who lived as infants in a prison nursery. *The Prison Journal*. 2014;94(2):139-158.

⁵ Goshin et al. Recidivism after release from a prison nursery program. *Public Health Nurs*. 2014;31(2):109-117.

LWVMD written testimony- SB776 Correctional Servic

Uploaded by: Keisha Walker

Position: FAV



TESTIMONY TO THE SENATE JUDICIAL PROCEEDINGS COMMITTEE

SB776 Correctional Services- Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)

Position: Support

By: Nancy Soreng, President

Date: March 9, 2022

The League of Women Voters is a nonpartisan organization that works to influence public policy through education and advocacy. The League believes that early intervention and prevention measures are effective in helping children reach their full potential. The League supports alternatives to incarceration, including the transfer of pregnant and postpartum people to prerelease units.

The number of women in state and federal prisons grew by nearly 800% between 1978 and 2016. Three-quarters of incarcerated women are of childbearing age. A study that analyzed data from 13 states found a nearly 4% pregnancy rate among women newly admitted to prison in 2016. With this rise, correctional facilities have faced new challenges meeting the health care needs of women, especially those who are pregnant.

Research shows that detrimental effects can occur on maternal-infant attachment when mothers and infants are separated at birth. The majority of women who give birth while incarcerated will be separated from their newborns soon after delivery, which imposes significant limitations on breastfeeding, bonding, and parental rights. Furthermore, there are negative implications on child well-being. Research has linked parental incarceration to childhood health problems.

In 2021, Minnesota passed and the governor signed the Healthy Start Act into law. The Minnesota Commission of Corrections can place incarcerated pregnant and postpartum women in alternative locations during their pregnancy and up to one year post-birth. The benefits include increased mother-infant bonding, improved parenting, enhanced child well-being, reduced recidivism, and more.

SB776 requires the Maryland Division of Correction to allow pregnant women and those who have recently given birth to transfer to the prerelease unit to receive pregnancy and postpartum support and establish healthy bonding between mothers and children.

The League urges a favorable report for SB776.

SB 776 SUPPORT - RJI.pdf

Uploaded by: Kimberly Haven

Position: FAV



Senator Will Smith, Chair
Senator Jeff Waldstreicher, Vice Chair
Senate Judicial Proceedings Committee

SENATE BILL 776

Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)

Position: SUPPORT

Reproductive Justice Inside (RJI) and our coalition members and partners stand in support of SB776. 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.

COVID was a mixed bag – in some ways it was good and in some not so much. But it also presented the opportunity to do things differently. It gave us the space to look critically at issues and situation through a new lens. As the pandemic ravaged our world, our incarcerated population and staff were not spared. States mandated releases in order to hopefully mitigate COVID's impact behind the walls. What we did not know at the time was the impact of COVID on a pregnant individual and their unborn child.

Our state began to release these individuals – to use citations where appropriate – we did things differently. We know the critical importance of maternal bonding – we know the serious health consequences to the infant when this bond is severed. We know too the importance and health benefits of breast feeding – a right that prisons violate every day.

We know too the harm and trauma that is inflicted and compounded when this bond is severed – it creates trauma that plays out for years and generations.

SB 776 is our state's opportunity to keep the maternal bond intact – to believe in family – to believe in doing things differently and to doing all we can to ensure good family outcomes.

Keeping mother and child together as long as possible sets both on a healthy course.

We urge a favorable report on SB 776.

Respectfully,
Kimberly Haven
Executive Director

Reproductive Justice Inside
2103 Gough Street * Baltimore, MD 21202
www.rjinside.org * 443.619.9079



SB 776 - Prevent Forced Infant Separation for Inca

Uploaded by: Lindsay Keipper

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, and the State of Maryland. We are also working in collaboration with Out for Justice. I am a resident of District 46, and **I am testifying in support of Senate Bill 776 - Prevention of Forced Infant Separation Act)**



The Prevention of Forced Infant Separation Act provides an alternative to separating newborn babies and their incarcerated mothers. This is a significant issue on a state and national level; the number of incarcerated women is growing, and this increasingly includes pregnant women. For example, Johns Hopkins School of Medicine researchers found 36 pregnant women were admitted into Maryland prisons in 2016, representing 16.7% (1 out of 6) of women's admissions by year's end.¹ Most pregnant women admitted to prison will give birth while still in prison.

Currently, newborns born to incarcerated mothers in Maryland are separated from their mothers almost immediately. As soon as the mother is discharged from the hospital – an average of 1 to 2 days after giving birth – the baby is taken away and placed with a secondary caregiver or into the foster system. This outdated practice is well-documented as traumatic for both mothers and babies, and severely disrupts the formation of a healthy bond between them. This has serious consequences, increasing maternal depression, feelings of extreme powerlessness, grief, and detachment. Their children are more likely to experience poor attachment to their caregiver and later academic difficulties, post-traumatic stress symptoms, delinquency, and risky behaviors.² As women of color are disproportionately likely to be imprisoned, these forced separations also disproportionately impact racial minority communities and exacerbate existing social and structural disadvantages for these families.

The Prevention of Forced Infant Separation Act establishes a program to stop this outdated and harmful separation policy and instead facilitate strong, healthy bonds between incarcerated women and their newborns. In this program, imprisoned pregnant women who have earned pre-release status would transfer to the women's pre-release unit; they would remain there for up to a year after delivery with their infants. This bill also establishes an evidence-based Healthy Start Bonding Program (developed with maternal-child health experts) to support healthy parenting and attachment between mother and child, and strengthens other supportive family ties by facilitating frequent visitation by fathers or secondary caregivers.

Similar programs (often called prison nurseries) have been established in numerous states and are considered to be a best-practice model.⁵ In addition to the cost benefits of keeping infants out of foster care, such programs have been documented to have significant positive impacts on these infants' secure attachment and well-being, both short and longer-term.^{3,5} Additionally, women who participate in these programs have better outcomes, including lower recidivism rates.⁴

Most importantly, separating a child from their parent is a cruelty that should only be inflicted in circumstances that are best for the child. Denying incarcerated mothers access to available resources that ensure the healthy birth of their child, as well as a recourse to stay and bond with that child are not the behaviors of a benevolent state, but the actions of a callous and vindictive one.

It is for these reasons I am strongly encouraging you to vote **in support of Senate Bill 776 (The Prevention of Forced Infant Separation Act)**. The time is right for the state to adopt this best-practice model to keep families together and end forced infant separation.

Thank you for your time, service, and consideration.

Sincerely,
Lindsay Keipper
2425 Fleet St.
Showing Up for Racial Justice Baltimore

¹ Sufrin C et al. Pregnancy Outcomes in US Prisons, 2016–2017. *Am J Public Health*. 2019;109(5):799-805.

² Dallaire. Children with incarcerated mothers: Developmental outcomes, special challenges and recommendations. *Journal of Applied Developmental Psychology*. 2007;28(1):15-24.

³ Byrne et al. Intergenerational transmission of attachment for infants raised in a prison nursery. *Attachment & Human Development*. 2010;12(4):375-393.

⁴ Goshin et al. Preschool outcomes of children who lived as infants in a prison nursery. *The Prison Journal*. 2014;94(2):139-158.

⁵ Goshin et al. Recidivism after release from a prison nursery program. *Public Health Nurs*. 2014;31(2):109-117.

SB 776 - Prevent Forced Infant Separation for Inca

Uploaded by: Martha Schmitz

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with the Maryland Justice Project. I am a resident of District 42B and a birth worker, who can speak to the long-term importance of supporting the bonds between a birthing person and their child. **I am testifying in support of Senate Bill 776 - Prevention of Forced Infant Separation Act)**



The Prevention of Forced Infant Separation Act provides an alternative to separating newborn babies and their incarcerated mothers. This is a significant issue on a state and national level; the number of incarcerated women is growing, and this increasingly includes pregnant women. For example, Johns Hopkins School of Medicine researchers found 36 pregnant women were admitted into Maryland prisons in 2016, representing 16.7% (1 out of 6) of women's admissions by year's end.¹ Most pregnant women admitted to prison will give birth while still in prison.

Currently, newborns born to incarcerated mothers in Maryland are separated from their mothers almost immediately. As soon as the mother is discharged from the hospital – an average of 1 to 2 days after giving birth – the baby is taken away and placed with a secondary caregiver or into the foster system. This outdated practice is well-documented as traumatic for both mothers and babies, and severely disrupts the formation of a healthy bond between them. This has serious consequences, increasing maternal depression, feelings of extreme powerlessness, grief, and detachment. Their children are more likely to experience poor attachment to their caregiver and later academic difficulties, post-traumatic stress symptoms, delinquency, and risky behaviors.² As women of color are disproportionately likely to be imprisoned, these forced separations also disproportionately impact racial minority communities and exacerbate existing social and structural disadvantages for these families.

The Prevention of Forced Infant Separation Act establishes a program to stop this outdated and harmful separation policy and instead facilitate strong, healthy bonds between incarcerated women and their newborns. In this program, imprisoned pregnant women who have earned pre-release status would transfer to the women's pre-release unit; they would remain there for up to a year after delivery with their infants. This bill also establishes an evidence-based Healthy Start Bonding Program (developed with maternal-child health experts) to support healthy parenting and attachment between mother and child, and strengthens other supportive family ties by facilitating frequent visitation by fathers or secondary caregivers.

Similar programs (often called prison nurseries) have been established in numerous states and are considered to be a best-practice model.⁵ In addition to the cost benefits of keeping infants out of foster care, such programs have been documented to have significant positive impacts on these infants' secure attachment and well-being, both short and longer-term.^{3,5} Additionally, women who participate in these programs have better outcomes, including lower recidivism rates.⁴

Most importantly, separating a child from their parent is a cruelty that should only be inflicted in circumstances that are best for the child. Denying incarcerated mothers access to available resources that ensure the healthy birth of their child, as well as a recourse to stay and bond with that child are not the behaviors of a benevolent state, but the actions of a callous and vindictive one.

It is for these reasons I am strongly encouraging you to vote **in support of Senate Bill 776 (The Prevention of Forced Infant Separation Act)**. On this International Women's Day, I urge you to take action to end this form of violence against women and their children. The time is right for the state to adopt this best-practice model to keep families together and end forced infant separation.

Thank you for your time, service, and consideration.

Sincerely,
Martha Schmitz
14 Greentree Drive
Phoenix, MD 21131

¹ Sufrin C et al. Pregnancy Outcomes in US Prisons, 2016–2017. *Am J Public Health*. 2019;109(5):799-805.

² Dallaire. Children with incarcerated mothers: Developmental outcomes, special challenges and recommendations. *Journal of Applied Developmental Psychology*. 2007;28(1):15-24.

³ Byrne et al. Intergenerational transmission of attachment for infants raised in a prison nursery. *Attachment & Human Development*. 2010;12(4):375-393.

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⁵ Goshin et al. Recidivism after release from a prison nursery program. *Public Health Nurs*. 2014;31(2):109-117.

Showing Up for Racial Justice Baltimore

SB 776 - Correctional Services - Pregnancy and Pos

Uploaded by: Michelle Siri

Position: FAV

BILL NO.: Senate Bill 776
TITLE: Correctional Services - Pregnancy and Postpartum Support
(Prevention of Forced Infant Separation Act)
COMMITTEE: Judicial Proceedings
DATE: March 9, 2022
POSITION: **SUPPORT**

Senate Bill 776 would create the Healthy Start Bonding Program within the Maryland correctional system which would allow women who are on pre-release status who have recently given birth to reside with their child in the prerelease unit for up to one year following the birth of the child. Because the Women's Law Center (WLC) believes that keeping families together whenever possible is in the best interest of children, families, and our society at large, we are in favor of SB 776.

Across the country, there has been a disturbing gender disparity in recent prison population trends. While recent reforms nationally have reduced the total number of people in state prisons since 2009, almost all the decrease has been among men. Women are being incarcerated at a significantly higher rate than men, with the number of women in Maryland prisons having increased by over 400% over the past 40 years¹. Pregnant women who go into labor while incarcerated in a Department of Public Safety and Correctional Services (DPS) correctional facility are transported to a hospital but are required to return to their facility as soon as they are discharged. For a standard vaginal delivery, this is generally 1-2 days after giving birth. This means that most incarcerated women have less than 48 hours with their newborns before the baby is forcibly separated from the mother.

Research suggests that the first year is one of the most important in an infant's life, as it is a time of significant physical, cognitive, and social development. This means that when babies are forcibly separated from their parents just days after birth, there can be lifelong developmental consequences. Not only does separation immediately cause a permanent increase in a baby's stress levels, but separated babies are more likely to develop post-traumatic stress and substance use disorders as adults. For mothers, the psychological consequences of forced separation can be just as severe. Further, if the mother is the sole or primary caretaker of the child – like the majority of incarcerated mothers - the separation can become permanent as child protective services and the foster system becomes involved.

Ultimately, allowing incarcerated new mothers the ability to remain with their newborns will help the hidden victims of crime, namely the children left behind. As such, the WLC urges a favorable report on SB 776.

The Women's Law Center of Maryland is a private, non-profit, legal services organization that serves as a leading voice for justice and fairness for women. It advocates for the rights of women through legal assistance to individuals and strategic initiatives to achieve systemic change, working to ensure physical safety, economic security, and bodily autonomy for women in Maryland.

MOPD SB776 Prevention of Forced Infant Separation

Uploaded by: Natasha Khalfani

Position: FAV



PAUL DeWOLFE
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ASSISTANT DIRECTOR OF GOVERNMENT RELATIONS DIVISION

POSITION ON PROPOSED LEGISLATION

BILL: SB 0776

FROM: Maryland Office of the Public Defender

POSITION: Favorable

DATE: 03/7/2022

The Maryland Office of the Public Defender respectfully requests that the Committee issue a favorable report on Senate Bill 0776.

The legislature, statute and case law agree that the best interest of a child is with their parent. Therefore, any opportunity that we have to increase the amount of time a child and or an infant has with their mother should be utilized. Additionally, the constitution has identified the right to parent one's child as a fundamental right. Any opportunity we have to preserve that right should also be taken. Senate Bill 0776 allows for the best interest of the child and the fundamental right to parent to be preserved and should therefore be treated favorably.

In the State of Maryland, pregnant women who go into labor while incarcerated in a Department of Public Safety and Correctional Services (DPSCS) correctional facility will be transported to a hospital but are required to return to their facility as soon as they are discharged^[3]. For a standard vaginal delivery, this is generally 1-2 days after giving birth^[4]. This means that most incarcerated women have less than 48 hours with their newborns before the baby is forcibly separated from the mother. Among incarcerated women in Maryland, 10% are pregnant and 64% of these women will give birth while incarcerated^[5]. Considering that the majority of incarcerated women are the sole caregivers of their children, many of these newborns will enter the Maryland Department of Human Services (DHS) foster care program just days after they are born^[6].

The forced separation of infants leads to a myriad of adverse health outcomes for both the baby and the mother. Research suggests that the first year is one of the most important in an infant's life, as it is a time of significant physical, cognitive, and social development^[7]. This means that when babies are forcibly separated from their parents just days after birth, there can be lifelong developmental consequences. Not only does separation immediately cause a permanent increase

in a baby's stress levels, but separated babies are more likely to develop post-traumatic stress and substance use disorders as adults [8]. For mothers, the psychological consequences of forced separation can be just as severe. Mothers separated from their newborns are more likely to experience post-partum depression, extreme powerlessness, grief, and feelings of detachment after forced separation [9].

This Act would expand upon SB684, legislation that was led by numerous advocacy groups in 2020 and authorized the Commissioner of Correction to operate a pre-release unit for women within the Division of Corrections (DOC). In particular, the Act would provide pregnant women under DPSCS custody with pre-release status the option to relocate to this unit throughout the duration of their pregnancy and remain with their infants up to one year postpartum. Pregnant women who are not eligible for pre-release status and are instead housed at the Maryland Correctional Institution for Women will have access to infant bonding programs that will help them maintain strong bonds with their children through increased visitation. Both pre-release eligible and non-eligible women will also have access to the Healthy Start Program, which will be developed by professionals in child development and ensure that mothers get the resources they need to form strong and lasting bonds with their infants.

This bill treats incarcerated women and their families like they matter. At best, this bill has the potential to keep families together. If a woman who gives birth has a year or so to serve in her sentence and is allowed to spend that year with her infant while serving out her sentence, this dramatically reduces the possibility that the family bond will be severed permanently. When a child enters foster care, the court must consider changing that child's permanency plan to adoption after the child has been in care for 15 months. Where infants are concerned, most courts in Maryland do not wait the full 15 months and will usually change the child's plan within the first six months of the infant being in care. For a woman who is serving a sentence of longer than six months and has not family to care for the child, her incarceration will almost always mean that she will lose custody of her child permanently. This fact is even more devastating when the mother's sentence is greater than six months but less than a year or fifteen months where by law they could have had an opportunity to reunify with their child but in practice those familial ties are severed forever. Additionally because of the stigma associated with incarcerated people coupled with the stigma associated with most parents that find themselves involved in child welfare, these mothers will most likely not be allowed to have any contact with their child in the form of visitation or electronic contact after they are adopted. The Prevention of Forced Infant Separation Act would allow mothers the opportunity to maintain custody of their children where there sentences are two years or less, because it grants them a year to be with their child and establishes a bond with their children. As a result, even if their child has to go into foster care, the statutory timelines work more in their favor. Additionally, should their child enter the foster care system, this law would give them a jump start on receiving the services that would allow them to reunify with their child, thereby making it more likely that they would be able to reunify with their children timely upon their release.

Furthermore, Senate Bill 776 increases the likelihood of rehabilitation among incarcerated women as it reduces the trauma of a mother being separated from her infant and gives her something to work toward, which is the opportunity to stay with her child or reunify with her child if she has to be separated after one year. We often forget that incarcerated people are

people. The same pain and trauma that any other woman would experience if the baby she carried for ten months were taken from her, is the same pain and trauma that an incarcerated mother feels. Perhaps, an even greater pain knowing that their actions put them in that position. The impact of that trauma is sometimes an insurmountable barrier to accessing whatever resources that may be available to that mother that would lead to reform. As a Parental Defender, I have seen how devastating it is for a mother to sit in court and know there is nothing she can do to regain access to her child because she is incarcerated and there are generally limited services available to her to assist her in doing what she needs to do to reunify. With access to the Healthy Start Program, women are given the opportunity to improve their circumstances and their ability to parent their children while incarcerated. That resource not only strengthens the mother but the family as a whole.

There is a clear need for Maryland to prevent the cruel and harmful separation of infants days after birth. However, there is also a clear legislative solution. SB0776 will help incarcerated parents form strong attachments with their newborns, leading to better health outcomes and a strong incentive against recidivism. It's time for Maryland to keep families together and end forced infant separation.

For these reasons, the Maryland Office of the Public Defender urges this Committee to issue a favorable report on SB 0776.

Submitted by: Government Relations Division of the Maryland Office of the Public Defender.

**Authored by: Natasha Khalfani, Esq. Assistant Public Defender, (301) 580-3786,
Natasha.Khalfani@maryland.gov**

SB776_FAV_ACLUMD_Spaccasi.pdf

Uploaded by: Olivia Spaccasi

Position: FAV



Testimony for the Senate Judicial Proceedings Committee

March 9, 2022

SB 776 - Correctional Services – Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)

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PUBLIC POLICY INTERN

FAVORABLE

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OFFICERS AND DIRECTORS
JOHN HENDERSON
PRESIDENT

The ACLU of Maryland urges a favorable report on SB 776, the Prevention of Forced Infant Separation Act.

Though many more men are in prison than women, the rate of growth for female imprisonment has been twice as high as that of men since 1980. Between 1980 and 2019, the number of incarcerated women increased by more than 700%.¹ Despite this, adequate attention has not been given to the specialized needs of women who are incarcerated. Nowhere is this more obvious than in the treatment of pregnant and postpartum mothers.

In the State of Maryland, pregnant women who go into labor while incarcerated in a correctional facility will be transported to a hospital to give birth, but are required to return to their facility as soon as they are discharged. These women generally have less than 48 hours with their newborns before they are forcibly separated from them.

The forced separation of infants leads to a variety of adverse health outcomes for both the baby and the mother. Research suggests that the first year is one of the most important in an infant's life, as it is a time of significant physical, cognitive, and social development. When babies are forcibly separated from their parents just days after birth there can be lifelong developmental consequences.² The incarceration of a

¹ Incarcerated Women and Girls. The Sentencing Project, 24 Nov. 2020, <https://www.sentencingproject.org/publications/incarcerated-women-and-girls/>.

² Wan, William. "What Separation from Parents Does to Children: 'the Effect Is Catastrophic!'" The Washington Post, WP Company, 19 June 2018, https://www.washingtonpost.com/national/health-science/what-separation-from-parents-does-to-children-the-effect-is-catastrophic/2018/06/18/c00c30ec-732c-11e8-805c-4b67019fcfe4_story.html.

parent, regardless of the age of the child, has been connected to increased risk of substance abuse, teenage pregnancy, social isolation, development of learning disabilities, financial hardship, and involvement in the criminal legal system.³ These hurdles, coupled with the long lasting cognitive, emotional, and psychological effects of separation on newborns, places an immense burden on these vulnerable children. Additionally, because of existing racial disparities in incarceration, these harms disproportionately effect Black and brown children.

Mothers separated from their newborns are more likely to experience post-partum depression, extreme powerlessness, grief, and feelings of detachment after forced separation.⁴ Many of these mothers will maintain or reacquire their parental rights and act as caregivers to their children upon release. However, the harms of that initial separation pose great risks to maternal competency and attachment behavior.

The provisions in this bill would maximize contact between mother and baby, mitigating the harms that come along with parental incarceration. This bill would provide pregnant women with pre-release status the option to relocate to the pre-release unit throughout the duration of their pregnancy and remain there with their infants up to one year postpartum. Pregnant women who are not eligible for pre-release status will have access to infant bonding programs that will help them maintain strong bonds with their children through increased visitation. The positive effects that these initiatives will have on mothers and their children cannot be understated.

For the foregoing reasons, the ACLU of Maryland urges a favorable report on SB 776.

³ Gifford, E. J., Eldred Kozecke, L., Golonka, M., Hill, S. N., Costello, E. J., Shanahan, L., & Copeland, W. E. (2019). Association of Parental Incarceration With Psychiatric and Functional Outcomes of Young Adults. *JAMA network open*, 2(8), e1910005. <https://doi.org/10.1001/jamanetworkopen.2019.10005>

⁴ Leiderman, P. H., & Seashore, M. J. (1975). Mother-infant neonatal separation: some delayed consequences. *Ciba Foundation symposium*, (33), 213–239. <https://doi.org/10.1002/9780470720158.ch13>; Furneaux, Rosa. “Forcibly Separating Children from Their Mothers Doesn't Just Hurt the Kids.” *Mother Jones*, 21 June 2018, <https://www.motherjones.com/politics/2018/06/trump-forced-family-separation-children-devastating-effects-mothers-1/>; Goudarzi, Sara. “Separating Families May Cause Lifelong Health Damage.” *Scientific American*, *Scientific American*, 20 June 2018, <https://www.scientificamerican.com/article/separating-families-may-cause-lifelong-health-damage/>.

SB 776 - Prevent Forced Infant Separation for Inca

Uploaded by: Sarah Johnson

Position: FAV

Dear Members of the Senate Judicial Proceedings Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with the Maryland Justice Project. I am a resident of District 41. **I am testifying in support of Senate Bill 776 - Prevention of Forced Infant Separation Act.**



The Prevention of Forced Infant Separation Act provides an alternative to separating newborn babies and their incarcerated mothers. This is a significant issue on a state and national level; the number of incarcerated women is growing, and this increasingly includes pregnant women. For example, Johns Hopkins School of Medicine researchers found 36 pregnant women were admitted into Maryland prisons in 2016, representing 16.7% (1 out of 6) of women's admissions by year's end.¹ Most pregnant women admitted to prison will give birth while still in prison.

Currently, newborns born to incarcerated mothers in Maryland are separated from their mothers almost immediately. As soon as the mother is discharged from the hospital – an average of 1 to 2 days after giving birth – the baby is taken away and placed with a secondary caregiver or into the foster system. This outdated practice is well-documented as traumatic for both mothers and babies, and severely disrupts the formation of a healthy bond between them. This has serious consequences, increasing maternal depression, feelings of extreme powerlessness, grief, and detachment. Their children are more likely to experience poor attachment to their caregiver and later academic difficulties, post-traumatic stress symptoms, delinquency, and risky behaviors.² As women of color are disproportionately likely to be imprisoned, these forced separations also disproportionately impact racial minority communities and exacerbate existing social and structural disadvantages for these families.

The Prevention of Forced Infant Separation Act establishes a program to stop this outdated and harmful separation policy and instead facilitate strong, healthy bonds between incarcerated women and their newborns. In this program, imprisoned pregnant women who have earned pre-release status would transfer to the women's pre-release unit; they would remain there for up to a year after delivery with their infants. This bill also establishes an evidence-based Healthy Start Bonding Program (developed with maternal-child health experts) to support healthy parenting and attachment between mother and child, and strengthens other supportive family ties by facilitating frequent visitation by fathers or secondary caregivers.

Similar programs (often called prison nurseries) have been established in numerous states and are considered to be a best-practice model.⁵ In addition to the cost benefits of keeping infants out of foster care, such programs have been documented to have significant positive impacts on these infants' secure attachment and well-being, both short and longer-term.^{3,5} Additionally, women who participate in these programs have better outcomes, including lower recidivism rates.⁴

Most importantly, separating a child from their parent is a cruelty that should only be inflicted in circumstances that are best for the child. Denying incarcerated mothers access to available resources that ensure the healthy birth of their child, as well as a recourse to stay and bond with that child are not the behaviors of a benevolent state, but the actions of a callous and vindictive one.

It is for these reasons I am strongly encouraging you to vote **in support of Senate Bill 776 (The Prevention of Forced Infant Separation Act)**. The time is right for the state to adopt this best-practice model to keep families together and end forced infant separation.

Thank you for your time, service, and consideration.

Sincerely,

Sarah Johnson
1 Merryman Court
Baltimore, MD 21210
Showing Up for Racial Justice Baltimore

¹ Sufirin C et al. Pregnancy Outcomes in US Prisons, 2016–2017. *Am J Public Health*. 2019;109(5):799-805.

² Dallaire. Children with incarcerated mothers: Developmental outcomes, special challenges and recommendations. *Journal of Applied Developmental Psychology*. 2007;28(1):15-24.

³ Byrne et al. Intergenerational transmission of attachment for infants raised in a prison nursery. *Attachment & Human Development*. 2010;12(4):375-393.

⁴ Goshin et al. Preschool outcomes of children who lived as infants in a prison nursery. *The Prison Journal*. 2014;94(2):139-158.

⁵ Goshin et al. Recidivism after release from a prison nursery program. *Public Health Nurs*. 2014;31(2):109-117.

WDC Testimony SB776-2022_FINAL.pdf

Uploaded by: Beth Tomasello

Position: FWA



MONTGOMERY COUNTY, MARYLAND
WOMEN'S DEMOCRATIC CLUB

P.O. Box 34047, Bethesda, MD 20827

www.womensdemocraticclub.org

**Senate Bill 776– Correctional Services - Pregnancy and Postpartum Support
(Prevention of Forced Infant Separation Act)
Judicial Proceedings Committee – March 9, 2022
FAVORABLE WITH AMENDMENTS**

Thank you for this opportunity to submit written testimony concerning an important priority of the **Montgomery County Women's Democratic Club (WDC)** for the 2022 legislative session. WDC is one of Maryland's largest and most active Democratic Clubs, with hundreds of politically active women and men, including many elected officials.

WDC urges the passage of SB776. The goal of this legislation is to allow women who give birth while incarcerated to keep their newborns with them for one-year post-partum. SB776 is patterned after Minnesota's Healthy Start Act, a first-in-the nation law, passed on a bi-partisan basis, that allows an incarcerated woman to be placed in a community-based setting with her baby for the first year of the baby's life. Separation of infants from their mothers during the first year of life is bad for the baby and bad for the mother. SB776 is good policy and should be passed without delay.

Pregnant Women in Maryland's Jails and Prison: In the State of Maryland, pregnant women who go into labor while incarcerated in a Department of Public Safety and Correctional Services (DPSCS) correctional facility will be transported to a hospital but are required to return to their facility as soon as they are discharged¹. For a standard vaginal delivery, this is generally 1-2 days after giving birth². This means that most incarcerated women have less than 48 hours with their newborns before the baby is forcibly separated from the mother. Among incarcerated women in Maryland, 10% are pregnant and 64% of these women will give birth while incarcerated.³ The majority of incarcerated women are the sole caregivers of their children, therefore, many of these newborns will enter the Maryland Department of Human Services (DHS) foster care program just days after they are born⁴. We can only expect those numbers to rise as the number of women in Maryland's prisons and jails continues to rise. Since 1980, Maryland's population of women in jail has increased 462 percent, and the percentage of women in prison has increased 264 percent.⁵

¹ <https://casetext.com/statute/code-of-maryland/article-correctional-services/title-9-state-and-local-correctional-system-inmates/subtitle-6-miscellaneous/section-9-601-pregnant-inmates>

² <https://www.acog.org/womens-health/faqs/a-partners-guide-to-pregnancy>

³ <https://ajph.aphapublications.org/doi/10.2105/AJPH.2019.305006>

⁴ <https://www.apa.org/pi/ses/resources/indicator/2019/04/incarcerated-women>

⁵ <https://www.vera.org/downloads/pdfdownloads/state-incarceration-trends-maryland.pdf>



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Forced Separation Leads to Negative Outcomes for Baby and Mother. The forced separation of infants from their incarcerated mothers leads to a myriad of adverse health outcomes for both the baby and the mother. Research suggests that the first year is one of the most important in an infant's life, as it is a time of significant physical, cognitive, and social development⁶. This means that when babies are forcibly separated from their mothers just days after birth, there can be lifelong developmental consequences. Not only does separation immediately cause a permanent increase in a baby's stress levels, but separated babies are more likely to develop post-traumatic stress and substance use disorders as adults⁷. For mothers, the psychological consequences of forced separation can be just as severe. Mothers forcibly separated from their newborns are more likely to experience post-partum depression, feelings of extreme powerlessness, grief, and feelings of detachment.

A central tenet of attachment theory is the notion that caregivers must be physically present and accessible for children to become attached to them. Research has shown that maternal availability is particularly important within the first two years of a child's life because of a baby's limited understanding of the reasons for maternal absence. As a result, experiences of separation during the first year of life may be particularly determinant of negative outcomes for the child throughout his or her life. For one example, studies examining the impacts of even minor separations of a week or more from a caregiver found adverse consequences associated with children's reading achievement by age 8.⁸ And, that is just the tip of the iceberg. Given that all incarcerated women in Maryland must serve their sentences in the Maryland Correctional Institute for Women (MCI-W), which is in Jessup and is not served by public transit, opportunities for mother-baby visitation are limited.

Minnesota's Healthy Start Act. In 2021, Minnesota became the first state to prevent the forced separation of infants from incarcerated mothers after the passage of the Healthy Start Act. The Healthy Start Act allowed the Minnesota Commissioner of Corrections to place pregnant individuals into community alternatives up to one-year postpartum, giving babies and caregivers support they need during that first critical year of infancy⁹. The Healthy Start Act received strong bipartisan support in the Minnesota legislature. Through the passage of the

⁶ <https://www.uofmhealth.org/health-library/hw251065>

⁷ <https://theconversation.com/a-sudden-and-lasting-separation-from-a-parent-can-permanently-alter-brain-development-98542>

⁸ Kimberly Howard, Anne Martin, Lisa J. Berlin & Jeanne Brooks-Gunn (2011) Early mother-child separation, parenting, and child well-being in Early Head Start families, *Attachment & Human Development*, 13:1, 5-26, DOI: [10.1080/14616734.2010.488119](https://doi.org/10.1080/14616734.2010.488119)

⁹ https://www.senate.mn/committees/2021-2022/3099_Committee_on_Judiciary_and_Public_Safety_Finance_and_Policy/Healthy%20Start%20Act%20Fact%20Sheet%20-%20SF%201315.pdf



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Prevention of Forced Infant Separation Act, Maryland can join Minnesota in keeping mothers and babies together during incarceration.

Proposed Amendments. SB776 applies to pregnant women in prerelease status and envisions that those women would be housed with their infants at the Women's Prerelease Center which SB684/HB801, legislation passed in 2020, required DPSCS to build and operate. However, despite a statutory deadline requiring the commencement of operations of the center by December 31, 2023, DPSCS Secretary Robert Green and others testified at a January 25, 2022, hearing before the Senate Judicial Proceedings Committee, that DPSCS does not even plan to request capital funding for the Women's Prerelease Center until the 2024 budget cycle. Therefore, there is currently no prerelease center to house incarcerated women and infants, nor will there be one any time soon. SB776 should be amended to require the Department of Corrections to find suitable community-based programs for incarcerated mothers and their newborns until the Women's Prerelease Center is operational.

Moreover, WDC believes that other incarcerated women in Maryland should be eligible to keep their infants with them for the first year of life. Therefore, WDC proposes that SB776 be amended to track the Healthy Start Act and allow all women in Maryland's jails and prisons to be eligible for placement in community-based programs with their infants during the first year of the infant's life. It is unclear why a woman who is incarcerated for a non-violent crime, is in minimum security status, and has exhibited good behavior but has not yet reached prerelease status should be denied the opportunity to be with her baby in infancy.

All mothers in community-based housing will have access to the Healthy Start Program, which will be developed by professionals in child development and ensure that mothers get the resources they need to form strong and lasting bonds with their infants. Although the Fiscal Note estimated that the costs associated with the implementation could be "significant," we note that in Minnesota, it is estimated that such programming would cost \$200,000 per year.¹⁰ Given the cost of foster care and the lifelong costs of remedying mother-infant separation, regardless of the amount, the money is well spent.

Despite the rapid growth of the population of women in Maryland's prisons and jails, Maryland's carceral system has not adapted to a model that meets women's needs as caregivers and recognizes children's need for their mothers' continued physical presence. Like prison systems throughout the country, Maryland's prison system is based on a male-centered model in which men are not assumed to be responsible caregivers for children. It is time for Maryland to rethink corrections and incarceration to develop programs and housing that meet

¹⁰ https://mn.gov/doc/assets/2021_Healthy%20Start%20Act_tcm1089-466712.pdf



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the needs of incarcerated women and their children. This is especially true for those women who are pregnant and give birth while incarcerated. SB776 is a step in that direction.

There is a clear need for Maryland to prevent the cruel and harmful separation of mothers and their infants, days after birth. SB776 will help incarcerated mothers and their infants form strong attachments, leading to better health outcomes for the women and their children and create a strong incentive against recidivism. It is time for Maryland to show the leadership that Minnesota has shown and to commit to keep families together and end forced infant separation.

We ask for your support for SB776 with the amendments proposed above and strongly urge a favorable Committee report.

Respectfully,

Leslie Milano
President

SB0776_LOI_MDACOG_Corr. Serv. - Preg. and Post. Su

Uploaded by: Pam Kasemeyer

Position: INFO



Maryland Section

TO: The Honorable William C. Smith, Jr., Chair
Members, Senate Judicial Proceedings Committee
The Honorable Jill P. Carter

FROM: Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman

DATE: March 9, 2022

RE: **LETTER OF INFORMATION** – Senate Bill 776 – *Correctional Services – Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)*

The American College of Obstetricians and Gynecologists, Maryland Section (MDACOG), which represents the Maryland physicians who serve the obstetrical and gynecological needs of Maryland women and their families, submits this **letter of information** for Senate Bill 776.

MDACOG strongly supports the intention of this legislation, which is to build a strong connection between incarcerated mothers and their newborns. However, MDACOG is concerned that the approach proposed to achieve this notable objective is not evidenced based and that the potential trauma that a baby could experience by being in a carceral setting would negate the intended benefits or possibly result in worse outcomes.

The most optimal, compassionate approach to achieving the bill's objectives of supporting families and encouraging infant-parent bonding would be for the implementation of a program with a path to release into the community. Women would be eligible for the program because they are already nearing release. The State of Minnesota enacted such a program in 2021 (attached).

Despite these concerns, if the Committee chooses to move forward with the legislation as proposed, MDACOG would strongly encourage the program be started as a pilot program if the program is to be implemented in the coming year. Alternatively, MDACOG would suggest that the effective date of the program's implementation be extended to ensure sufficient time for design and development and to ensure the program will minimize the risk of trauma to the infant and achieve the notable objectives of the legislation.

For more information call:

Pamela Metz Kasemeyer
J. Steven Wise
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410-244-7000

SENATE
STATE OF MINNESOTA
NINETY-SECOND SESSION

S.F. No. 1315

(SENATE AUTHORS: KIFFMEYER, Housley, Pratt, Benson and Pappas)

DATE	D-PG	OFFICIAL STATUS
02/22/2021	490	Introduction and first reading Referred to Judiciary and Public Safety Finance and Policy
02/25/2021	575	Author added Pappas
03/17/2021	947a	Comm report: To pass as amended
	954	Second reading
04/13/2021	2768	Special Order
	2768	Third reading Passed
05/11/2021	4189	Returned from House Presentment date 05/12/2021
05/17/2021	4262	Governor's action Approval 05/13/2021
	4262	Secretary of State Chapter 17 05/13/2021 Effective date 08/01/21

1.1 A bill for an act

1.2 relating to corrections; authorizing the placement of pregnant and postpartum

1.3 female inmates in community-based programs; requiring reports; amending

1.4 Minnesota Statutes 2020, section 244.065.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2020, section 244.065, is amended to read:

1.7 **244.065 PRIVATE EMPLOYMENT OF INMATES OR SPECIALIZED**

1.8 **PROGRAMMING FOR PREGNANT INMATES OF STATE CORRECTIONAL**

1.9 **INSTITUTIONS IN COMMUNITY.**

1.10 Subdivision 1. Work. When consistent with the public interest and the public safety,

1.11 the commissioner of corrections may conditionally release an inmate to work at paid

1.12 employment, seek employment, or participate in a vocational training or educational program,

1.13 as provided in section 241.26, if the inmate has served at least one half of the term of

1.14 imprisonment.

1.15 Subd. 2. Pregnancy. (a) In the furtherance of public interest and community safety, the

1.16 commissioner of corrections may conditionally release:

1.17 (1) for up to one year postpartum, an inmate who gave birth within eight months of the

1.18 date of commitment; and

1.19 (2) for the duration of the pregnancy and up to one year postpartum, an inmate who is

1.20 pregnant.

1.21 (b) The commissioner may conditionally release an inmate under paragraph (a) to

1.22 community-based programming for the purpose of participation in prenatal or postnatal

2.1 care programming and to promote mother-child bonding in addition to other programming
2.2 requirements as established by the commissioner, including evidence-based parenting skills
2.3 programming; working at paid employment; seeking employment; or participating in
2.4 vocational training, an educational program, or chemical dependency or mental health
2.5 treatment services.

2.6 (c) The commissioner shall develop policy and criteria to implement this subdivision
2.7 according to public safety and generally accepted correctional practice.

2.8 (d) By April 1 of each year, the commissioner shall report to the chairs and ranking
2.9 minority members of the house of representatives and senate committees with jurisdiction
2.10 over corrections on the number of inmates released and the duration of the release under
2.11 this subdivision for the prior calendar year.

SB0776-Pregnancy and Postpartum Support.docx (1).p

Uploaded by: Wayne Hill

Position: INFO



**Department of Public Safety and Correctional Services
Office of the Secretary**

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BILL: SENATE BILL 776

POSITION: LETTER OF INFORMATION

EXPLANATION: This bill would allow pregnant and postpartum women in prerelease status to be housed at the prerelease center for women throughout the duration of the pregnancy and for up to one year postpartum. In addition, postpartum women would be able to reside with their infant for up to one year following the birth of the child. The bill also requires the Division of Correction (DOC) to develop a Healthy Start Bonding Program at the Maryland Correctional Institution for Women (MCI-W) and to offer liberal visitation.

COMMENTS:

- The Department of Public Safety and Correctional Services (Department) oversees the DOC which operates 13 State correctional facilities, housing offenders sentenced to periods of incarceration for 18 months and longer.
- SB 776 will require that all pregnant and postpartum women in prerelease status be housed at the prerelease center for women throughout the duration of the pregnancy and up to one year postpartum.
- The Department operates the Maryland Correctional Institution for Women (MCI-W) that houses female incarcerated individuals.
- At this time, there is no standalone prerelease facility for women. As such, the Department will be unable to comply with the requirements under the bill.
- SB 684 (2020 Session) required the Department to construct and operate a standalone Prerelease Center for Women. The bill was passed by the Maryland General Assembly on March 18, 2020 and

was subsequently vetoed by the Governor on May 7, 2020. The legislature overrode the veto on February 11, 2021.

- The Department does not have the authority to initiate a capital construction project that exceeds \$200,000 as that authority falls under the Department of General Services. In addition, funding must be included in the Department's budget in order to initiate the first phase of any capital improvement project (Phase I).
- The Department requested funding to initiate Phase I at the earliest point possible based on the veto and veto override timeline. Specifically, the Department's fiscal year (FY) 2023 budget, as introduced to the Legislature, does include \$150,000 to hire a project consultant and develop the Part I Program. As long as the Department's budget remains intact, the Department will be in a position to hire a project consultant at the beginning of FY 2023.
- DGS estimates that, like other capital improvement projects, fulfilling the capital requirements of SB 684 will take three to four years if the budget is there to support various steps along the way.
- SB 776 also requires the development of a Healthy Start Bonding Program to facilitate strong bonds between incarcerated women and their infants. The program:
 - will be developed by the DOC
 - shall be offered at MCI-W; and
 - the father or secondary caretaker of the infant shall be allowed liberal visitation with the infant.
- The Bill is discriminatory in its limitation (3-903) of visits to fathers and secondary caretakers. It does not allow same sex parents or non-binary/x marker parents the same rights and privileges. (Note that same gender parents should not be considered secondary caretakers).
- MCIW operates a Baby Bonding program, which allows female inmates with children between the ages of infancy to 3 years to have the opportunity to embrace and play with their children in a nursery setting. A similar program is offered monthly to grandmothers.
- As the prerelease center for women moves forward in the capital construction process, the Department will begin developing comprehensive programs and services to provide to the incarcerated women which will include programs such as the Healthy Start Bonding Program.

CONCLUSION: The Department of Public Safety and Correctional Services respectfully requests the Committee consider this information as it deliberates Senate Bill 776.