

IN SUPPORT OF HB 600

To: House Judiciary Committee
From: Gender Violence Clinic, University of Maryland Carey School of Law
Date: February 11, 2022
Re: Written Testimony in support of House Bill 600

The University of Maryland Carey School of Law Gender Violence Clinic unequivocally supports House Bill 600.*

The Gender Violence Clinic represents incarcerated clients convicted of crimes related to their own gender-based victimization. The Clinic represents a number of clients who would benefit from the changes to the standards for geriatric and medical parole.

Our clients include a woman diagnosed with stage four metastatic breast cancer, Parkinsonism, and paranoid schizophrenia. She suffered from debilitating weakness from chemotherapy. She was confined to a wheelchair. She was completely unable to care for herself and often sat in her own urine for hours or days. She applied for medical parole and was finally released to a treatment facility—but not on parole. The Commissioner who initially denied her case relied only on the Karofsky score that accompanied the physician’s recommendation that she be granted medical parole. Without seeing the client and understanding more about her day-to-day reality, the Commission had no way to understand the full extent of her limitations. She was only released after the court resentenced her based on the threat posed by the COVID pandemic to vulnerable incarcerated people. Her many infirmities were not sufficient to qualify her for medical parole.

We have clients who are blind, who have spent months and years in the infirmary with chronic illnesses, who have undergone open heart surgery, who can barely walk. None of them poses a threat to society. All of them would benefit from treatment not readily available in the prison environment. But because they are not close to death, as is required by the current standards for medical parole, they do not qualify.

Many of these clients are also close to, or well over, sixty years old. They have taken every program available to them through the prison system. They earn sterling work evaluations and are highly thought of by prison staff. They would pose no risk to society upon release. And yet they remain in prison, away from families and communities to whom they could contribute. Changing the standards for medical and geriatric parole would return our clients to communities better suited to care for them in their illnesses and old age and alleviate the burden borne by the taxpayers for their support. We urge a favorable report on House Bill 600.

*This written testimony is submitted on behalf of the Gender Violence Clinic at the University of Maryland Carey School of Law and not on behalf of the School of Law or University of Maryland, Baltimore.