



Mission: *To improve public health in Maryland through education and advocacy*

Vision: *Healthy Marylanders living in Healthy Communities*

HB0523: Correctional Services - Pregnancy and Postpartum Support (Prevention of Forced Infant Separation Act)

Hearing Date: 02/21/23

Committee: Judiciary

Position: SUPPORT

Delegate Clippinger and members of the Judiciary Committee,

The Maryland Public Health Association (MdPHA) would like to express support for House Bill 523, which requires the Division of Correction to allow a certain pregnant woman and a certain woman who recently gave birth to transfer to the prerelease unit for women for a certain time period. This bill establishes the Healthy Start Bonding Program to facilitate strong bonds between incarcerated women and their children and requires the Division to allow liberal visitation between certain individuals and certain children under certain circumstances.

In recent decades, there has been a dramatic increase in the U.S. correctional population, and women are a rapidly growing segment of this population.^{1,2} Most women who are incarcerated are within their reproductive years, and as the number of incarcerated women has increased, pregnancy during incarceration has become an important concern. Childbirth can be a daunting experience even under the best of circumstances. For pregnant inmates, labor and delivery may be additionally anxiety-provoking, because of lack of control over the birthing experience, limited health education, absence of support from family or friends, anxiety related to mother–newborn separation following delivery, and concern about infant placement.^{3,4} Additionally, high levels of stress in the perinatal period have been associated with maternal depression, preterm delivery, and low birth weights; therefore, support for pregnant women and those who have recently given birth is particularly important for incarcerated women who are already at higher risk for complicated pregnancies.^{3,5}

Thirty years ago, the 1989 United Nations Convention on the Rights of the Child noted “in all actions concerning children, whether undertaken by public or private social welfare institutions, courts of law, administrative authorities or legislative bodies, the best interests of the child shall be a primary consideration” (Ref. 6, Part 1, article 3). In 2007, the United Nations Children's Fund (UNICEF) noted that infants should not be separated from their mothers due to incarceration because of the child's best

1 Clarke JG, Simon RE: Shackling and separation: motherhood in prison. *Virtual Mentor* 15:779–85, 2013

2 Chambers AN: Impact of forced separation policy on incarcerated postpartum mothers. *Policy Polit Nurs Pract* 10:204–11, 2009

3 Ferszt GG, Erickson-Owens DA: Development of an educational/support group for pregnant women in prison. *J Forensic Nurs* 4:55–60, 2008

4 Shaw J, Downe S, Kingdon C: Systematic mixed-methods review of interventions, outcomes and experiences for imprisoned pregnant women. *J Adv Nurs* 71:1451–63, 2015

5 Kotlar B, Kornrich R, Deneen M, et al: Meeting incarcerated women's needs for pregnancy-related and postpartum services: challenges and opportunities. *Perspect Sex Reprod Health* 47:221–5, 2015

6 United Nations Office of the High Commissioner of Human Rights: Convention on the rights of the child. Adopted November 20, 1989. Available at: <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>. Last accessed February 14, 2023

7 UNICEF: Implementation handbook for the convention on the rights of the child. 2007. Available at:

https://www.unicef.org/publications/files/implementation_handbook_for_the_convention_on_the_rights_of_the_child_part_1_of_3.pdf. Accessed February, 14, 2023

8 Goshin LS, Byrne MW, Blanchard-Lewis B: Preschool Outcomes of Children Who Lived as Infants in a Prison Nursery. *Prison J*. 2014 Jun;94:139-158, 2014

9 Dolan RM, Birmingham L, Mulee M, Gregoire A: The mental health of imprisoned mothers of young children: a follow-up study. *J Forensic Psychiatr Psychol* 24:421–39, 2013

10 Shlonsky A, Rose D, Harris J, et al: Literature review of prison-based mothers and children programs: final report. The Victorian Department of Justice and Regulation. Available at:

http://assets.justice.vic.gov.au/corrections/resources/b5ef4e77-10e5-4a27-bbfd-9a5c3e9c9db69/mothersandchildren_programs.pdf. Accessed February 15, 2023

interest and a right to family life. If the mother is to be incarcerated, it was noted that the infant should be present in prison if possible.⁷

Incarcerated women overwhelmingly report that they plan to resume care for their children after release. Infants and toddlers of incarcerated mothers represent a relatively small portion of affected children but are arguably the neediest and most vulnerable group. Post release parenting may be impaired in women separated from infants because a relationship between the pair never developed. A recent study found that separation was associated with significantly worse anxious/depressed scores, even after accounting for risks in the caregiving environment. Findings suggest that prison nursery co-residence with developmental support confers some resilience in children who experience early maternal incarceration.⁸ Additionally, in a U.K. study, Dolan and colleagues⁹ found that, among mothers who had been in the Mother-Baby Units (MBU) with their infants, over three quarters (77%) had their children living with them at follow-up, which occurred at a mean of 4.5 years later. Among mothers who were separated from their infant in prison, however, only 20% lived with their children at follow-up. Those who had been separated from their infants were also more likely to have been reconvicted.⁹ A meta-analysis confirmed that, compared with mothers separated from their infants, MBU participants were less likely to return to prison.¹⁰

Given the clear benefit of pregnancy and postpartum support for both incarcerated mothers and their children, we urge a favorable report of HB0523.

The Maryland Public Health Association (MdPHA) is a nonprofit, statewide organization of public health professionals dedicated to improving the lives of all Marylanders through education, advocacy, and collaboration. We support public policies consistent with our vision of healthy Marylanders living in healthy, equitable, communities. MdPHA is the state affiliate of the American Public Health Association, a nearly 145-year-old professional organization dedicated to improving population health and reducing the health disparities that plague our state and our nation.

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