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POSITION ON PROPOSED LEGISLATION

**BILL: SB1085 Correctional Services – Segregated Housing – Limitations** 

FROM: Maryland Office of the Public Defender

**POSITION:** Favorable

DATE: 03/05/2024

The Maryland Office of the Public Defender respectfully requests that the Committee issue a favorable report on Senate Bill 1085.

Something that is not often considered with individuals in carceral settings is the role that trauma plays in criminal behavior. Adverse childhood experiences (ACEs) are potentially traumatic events that occur before the age of 18. According to the Center for Disease Control (CDC), 61% of the U.S. population has experienced at least one or more ACEs, while 98% of the prison population has experienced at least one or more ACEs. ACEs can have long-term, negative effects on health and well-being, and the toxic stress from ACEs can negatively impact brain development, the immune system, and stress-responses. The trauma of ACEs may be exacerbated by the harsh conditions of segregated housing, resulting in increased health issues and a decline in functioning that negatively impacts immediate wellbeing as well as reintegration upon release.

I attached a copy of the ACE assessment tool with some background information about how it should be administered. The short documentary by the Compassion Prison Project at this link, <a href="https://vimeo.com/398088783">https://vimeo.com/398088783</a>, shows the pervasive presence of ACEs among prison populations

and how lives can be transformed by addressing childhood trauma through increased awareness and compassionate understanding.

According to Dr. Robert Block, "ACEs are the single greatest unaddressed health threat facing our nation." ACEs and mental illness are prevalent in the assessments conducted by OPD social workers of our clients. Many people in our carceral system are being punished for having mental illness, which directly correlates with their ACEs; and for that reason, we have some of the most traumatized people in our society inside our jails and prisons.

Because correctional settings serve individuals who bring their traumatized and troubled histories into the jails and prisons with them, the characteristics of confinement can trigger PTSD reactions. This makes it essential for anyone working with incarcerated individuals to be trauma-informed, especially when working with individuals in solitary confinement, so they are able to appropriately address the effects of trauma.

Trauma-informed care (TIC) recognizes and responds to the signs, symptoms, and risks of trauma to better support the health needs of people who have experienced ACEs and toxic stress. TIC is highly compatible with the risk, need, and responsivity (RNR) principles of effective correctional rehabilitation, and is central to the responsivity component, which may be the most important, yet most overlooked of the three RNR principles. TIC provides a sense of safety, empowerment, trust, and respect in service settings, and is beneficial to everyone. The overall use of TIC can improve safety for the correctional setting and in the community upon one's reentry.

The UN considers solitary confinement to be torture. It has been reported that the psychological effects of solitary confinement are equivalent to physical torture. More than 150 years of

research in psychiatry, psychology, criminology, anthropology, and epidemiology has documented the detrimental effects of solitary confinement on mental health and well-being that can lead to serious and lasting psychological damage. Physical and social isolation, combined with sensory deprivation and forced idleness, create a toxic combination associated with a variety of harmful effects.

As lawmakers, it is up to you to make the best decisions that provide the most beneficial outcomes for the individuals and communities you represent. The reforms outlined in this bill will bring Maryland in line with the rest of the world.

For these reasons, the Maryland Office of the Public Defender urges this Committee to issue a favorable report on Senate Bill 1085.

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

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