

# Judiciary Committee JOINT FAVORABLE REPORT

**Bill No.:** SB-13

**Title:** AN ACT CONCERNING FAIR TREATMENT OF INCARCERATED WOMEN.

**Vote Date:** 4/2/2018

**Vote Action:** Joint Favorable Substitute

**PH Date:** 3/28/2018

**File No.:**

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## **SPONSORS OF BILL:**

Governor's Bill

## **REASONS FOR BILL:**

To prevent another situation in which a woman is forced to give birth in her cell without healthcare and/or appropriate oversight. In addition, it proposes changes that will improve a woman's chances of success when she reenters society. These changes include: providing free feminine hygiene products, limits use of restraints when a pregnant woman is being transferred for medical treatment, mandates certain medical treatment for expectant women, requires DOC to create better child visitation policies and prenatal, labor and postpartum services, proposes gender focused training for DOC staff.

## **SUBSTITUTE LANGUAGE:**

To determine the course of action to be followed if an inmate's pregnancy is determined to be high risk.

## **RESPONSE FROM ADMINISTRATION/AGENCY:**

### **Governor, State of Connecticut, Dannel P. Malloy:**

Governor Malloy stated that the people involved in the criminal justice system deserve to be treated with dignity, respect and humanity. SB 13 addresses issues unique to the incarcerated female population in an effort to help reduce recidivism. It does this by ensuring that pregnant women receive appropriate pregnancy education and medical care, including not being shackled during labor. They will receive an adequate supply of feminine hygiene products at no cost.

Governor Malloy included substitute language for Section 1 relating to the immediate transfer of an inmate to an appropriate medical facility in the event of a high-risk pregnancy or medical complication which was added in substitute language.

**Commission on Equity and Opportunity, Subira Gordon, Executive Director:**

Supports this bill especially the prohibition of the shackling of women during labor.

The commission requests the following changes be made:

- Add language that requires a written “Pregnant Women’s Bill of Rights” that has everything that is listed in the bill plus whatever services York provides- we want to come up with a good name for this.
- Tighten up language around the carve-out for CO’s discretion to restrain pregnant women outside of labor and delivery
- Add to language that restraints/shackling is prohibited during transport of ANY type for a person in their 3rd trimester. This includes transporting people in the facility and across the facility, to court dates, etc.
- Add a section that requires comprehensive annual reporting to OLR
- Adding to Section 4 that the commissioner will create visitation policies for women with children under 18 in consultation with stakeholders that have a primary focus on children with incarcerated family members and parenting with incarcerated parents.
- Adding language that requires bonding time with a newborn- the bill already has language around lactation and breast pumping.

**The Commission on Human Rights and Opportunities, Tanya Hughes, Executive Director:**

Supports this bill because it offers specific supports to incarcerated women and addresses the unique circumstances of pregnant inmates. The changes will lead to healthier babies being born, stronger family bonds, and education and skill building that will help the women be successful upon their release. The bill provides:

- Proper medical care throughout the women’s pregnancy, delivery and postpartum period including the curtailed and limited use of restraints during labor;
- Education about parental, child, and family reunification support resources as well as about child custody processes;
- Inmate counseling and discharge planning prior to an inmate’s release which is essential for a successful transition into the community;
- Improved family visitation with minor children to enhance the family bonds;
- Improved physical privacy by limiting the ability of male nonmedical staff to view the female inmates when undressed;
- Provision of a lactation policy and adequate hygiene products.

**The Commission on Women, Children, and Seniors (CWCS), Steven Hernandez, Executive Director:**

The CWCS strongly supports this bill because of limitations imposed on the use of restraints during pregnancy which they feel is unethical, poses health risks and are a violation of basic human rights.

Mr. Hernandez detailed the following risks of using restraints compiled by The American College of Obstetricians and Gynecologists:

- Nausea and vomiting are common symptoms of early pregnancy. Adding the discomfort shackles to a person experiencing these symptoms is cruel and inhumane;
- Shackling increases the risk of falls and decreases the woman's ability to protect herself or her fetus if she does fall;
- Restraints could delay diagnosis and treatment of bleeding during pregnancy which could pose a threat to the health of the woman or the fetus;
- Preeclampsia can result in seizures which are harder to treat in a restrained patient;
- Restraints interfere with normal delivery;
- Being able to walk during labor increases the likelihood for adequate pain management and successful dilation and delivery;
- Women need to be able to move or be moved in preparation for emergencies of labor and delivery, including hemorrhaging and fetal heart rate abnormalities, which may require urgent cesarean delivery; and
- Restraints may prevent or inhibit the healthy mother-child bonding that needs to occur after delivery and interfere with the mother's safe handling of her infant.

Connecticut is one of the last 13 states to forbid this practice. It is time for our state to treat its women and their babies in a compassionate and humane way.

**Department of Corrections, Scott Semple, Commissioner:**

Supports this bill because it focuses on breaking the cycle of trauma and incarceration and will also make our communities safer and save the taxpayers money through the potential reduction in recidivism. Among other important changes, the bill will require the DOC, the Board of Pardons and Paroles and The Court Support Services Division of the Judicial Branch to utilize a gender-responsive approach to risk assessment; and require DOC to develop and implement a policy concerning transgender inmates.

**Office of the Chief Public Defender, Christine Perra Rapillo, Chief Public Defender:**

Supports this bill because it will improve the treatment of incarcerated women and makes changes that will help them be more successful when they reenter their community. Improving family visitation will help the women maintain strong bonds with their children which helps their children be more successful in school and at home (which is often in foster care) while their mother is incarcerated and helps the family adjust better when the mother comes home. These stronger family bonds help the children of incarcerated women be more successful in life and avoid going to prison at the same high rate of children who do not have contact with their mothers.

Submitted a proposal to the committee to introduce additional language to the bill that would give the court the discretion to suspend the termination of an incarcerated woman's parental rights after 23 months of imprisonment if she shows that she is making progress and it can be proven to be in the child's best interest to do so.

**NATURE AND SOURCES OF SUPPORT:**

**Cathy Malloy, First Lady of the State Connecticut:**

Supports this bill because it will lead to more fair, humane and respectful treatment of incarcerated women. Over the last several years, the First Lady has worked with women at the York Correctional Institution through various organizations which seek to ensure that the women have the necessary skills to succeed once they are released.

Over 80% of incarcerated women are mothers, and some are pregnant when arrested. This bill ensures that expectant mothers receive appropriate pre- and post-natal education and care so that they can deliver healthy babies and develop a strong bond to them. The bill also prohibits the shackling of women during birth and the postpartum period and provides for the birth to happen in a hospital. The bill provides parenting education relating to custody, finances, family reunification which will help build for a successful reintegration back into their homes after their release.

Another important aspect of the bill is the gender specific and trauma informed training for correctional staff. The First Lady was the director of a large Sexual Assault Crisis center for over a decade; she knows that helping the many incarcerated women who are sexual abuse survivors deal with this past trauma will help break the negative cycle of behaviors they exhibit. This will help their children be more successful in life because their mothers will be emotionally and mentally healthier and stronger and better able to handle the stresses of life. She also supports the provision of no cost feminine hygiene products.

**Connecticut Women’s Education and Legal Fund (CWEALF), Madeline Granato, Policy Manager:**

Supports the bill. Ms. Granato included the following statistics about women in prison:

- Since 1980, the number of incarcerated women increased at a rate of 50% higher than men.
- Two thirds of the women incarcerated are women of color, and the majority are low income.
- These women are often the primary caregivers to their young children. 79% of women in prison are mothers and 5% are pregnant when incarcerated.
- Many of the current policies and practices in prison were designed for men.

Currently, in Connecticut, many of the policies and services affecting the women at York are in place through administrative directives, not state law. With a change in executive administration, directives that currently support the safety and dignity of inmates could be changed or eliminated. SB 13 will help codify specialized training and female-centered policies that will ensure more respectful, humane treatment for these women and lead to better post-prison outcomes.

**Planned Parenthood of Southern New England, Arvia Walker, Public Policy and Strategic Engagement Specialist:**

Supports this bill because it will limit the use of shackles on pregnant incarcerated women at every stage of their pregnancy. This is inhumane and is reproductive oppression. Women who end up in prison often have histories of abuse, trauma, mental health and/or substance abuse problems or were unemployed when arrested. Twenty-two other states including New York, Massachusetts and Rhode Island have already passed legislation to ban the shackling of pregnant women. Ms. Walker included data at the end of her testimony of the dangers of the use of restraints during pregnancy and general information about incarcerated women and their children.

**NARAL Pro-Choice Connecticut, Brenna Doyle, Deputy Director:**

Supports this bill. Ms. Doyle stated that women are the fastest growing population in United States prison system. The reasons for this include: more expansive law enforcement efforts, extreme drug sentencing laws and post-conviction barriers to reentry. She addressed the

banning of shackling and access to free menstrual products specifically. The use of restraints can cause physical and psychological harm. Given the fact that women are more likely than men to be incarcerated for nonviolent crimes, it makes no sense that they would need to be shackled during pregnancy and post-partum recovery.

Regarding free menstrual products, access to these products is essential for the health and dignity of the women in York Correctional facility. Incarcerated women often make less than a dollar a day and not all the women have jobs in prison. They are also less likely than men to have outside financial support. Even when women have money to purchase hygiene products, the prison commissary often does not have an adequate supply of products to sell thus restricting the quantity an individual can purchase. There is an increased risk of toxic shock syndrome and infection if women cannot change their pads and tampons as needed in order to conserve supply. Women without proper supplies often bleed onto their clothing which is humiliating and uncomfortable and adds the additional problem of potential punishment by the guards for violating the strict uniform requirements.

**Connecticut Alliance to End Sexual Violence, Laura Cordes, Executive Director:**

Supports the bill. Ms. Cordes stated that the majority of incarcerated women have a history of sexual violence and are vulnerable to additional abuse while in prison. The requirement that the officer present during an inmate's delivery and when any female inmates are changing clothes, showering, and performing bodily functions be female is an important change this bill creates which will increase the privacy and safety of the inmates. The Alliance supports the development and implementation of a policy to protect the safety of incarcerated transgender individuals which is required under the federal Prison Rape Elimination Act.

**ACLU-CT, David McGuire, Executive Director:**

Supports the bill, but suggest adding or amending the language to include:

- Requiring the Department of Correction to provide all incarcerated women with a written copy of the "Pregnant Women's Bill of Rights" which includes policies and procedures addressed by this bill but has other provisions as well.
- Providing more clarity in the bill's language around the use of restraints on pregnant people when not in labor specifically language that would prohibit the use of any restraints and/or shackling during the transport of any pregnant person in their third trimester.
- Requiring the DOC to allow bonding time with a newborn after delivery.
- Requiring the Commissioner of the DOC to create clear visitation policies that focus on the needs of children.
- Requiring a DOC comprehensive annual report about the restraint of pregnant incarcerated individuals.

**Katal Center for Health, Equity, and Justice, Louis Reed, Connecticut Policy Director:**

Supports this bill. Mr. Reed stated that while the United States has only 5% of the world's population, we have 25% of the world's incarcerated individuals. Far too many of the incarcerated individuals are people of color. 95% of those convicted entered into plea bargains. The conditions in our prisons threaten and/or exacerbate the health and safety of the incarcerated. The arising mental and physical health needs that develop often go unaddressed leading to great suffering and sometimes death. 86% of women in prison report experiencing sexual violence which is four times higher than the general population. Their mental and emotional needs are rarely supported through appropriate, effective and

accessible treatment. This bill addresses many areas that need drastic improvement in the care and support of Connecticut's incarcerated women and their children.

**Connecticut Working Families Party Lindsay Farrell, Director:**

Supports this bill because it protects pregnant women from shackling during pregnancy and labor, supports the mothers bonding with their children, addresses their basic health needs, and protects the women from unnecessary voyeurism.

**Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN), Denise Puia, Chairperson of the Connecticut Section:**

Supports this bill. Pregnant incarcerated women are one of the most vulnerable populations; they often have high-risk pregnancies due to lack of prenatal care, poor nutrition, substance abuse, mental health disorders, and histories of domestic violence. Shackling women further complicates delivery as it makes it more challenging for a healthcare provider to assess the woman and her fetus and could potentially delay lifesaving interventions during obstetric emergencies. AWHONN is in full support of SB 13 as it will significantly limit the use of restraints on pregnant and post-partum women.

**Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN), Heather Evans, Legislative Coordinator- CT section; Registered Nurse:**

Supports this bill. One reason for their support is because the bill ensures that pregnant incarcerated women will receive education about pregnancy, nutrition, addiction and health which is a cost-effective and proven method for improving health outcomes. Additionally, the prohibition of the use of restraints on pregnant or post-partum women is important because the use of such restraints can increase feelings of pain and distress and the risk of falling and injuring either the woman or the fetus. The use of restraints during labor can increase the mother's fear, discomfort and pain as well as increase the possibility of the need for an operative birth and/or an increased change of perineal injury or fetal distress. The final aspect of the bill that Ms. Evans supports is allowing mothers to pump and store breastmilk so their infants can benefit from improved outcomes such as fewer ear and respiratory infections, and a decreased likelihood of developing allergies, asthma and childhood obesity. The families also benefit financially by raising healthier children because family members don't have to miss work for medical appointments.

**Connecticut Voices for Children, Lauren Ruth, Advocacy Director, and Karen Seigel, Health Policy Fellow:**

Support this bill, specifically the improvements in pregnancy care and parent-child connections. Approximately 4% of women report being pregnant upon entering prison. Other women have recently given birth or will discover they are pregnant after incarceration. Pregnant inmates are at a high risk of having pregnancy complications because of existing poor health and their low socioeconomic status. According to a survey, only 54% of pregnant women in state prisons received relevant information relating to maintaining a healthy pregnancy. They support the provision of guidelines to provide appropriate obstetric care to pregnant women including the prohibition of the use of shackles during labor.

The provision which allows women in prison to express their breast milk will improve the emotional connection between the women and their infants and improve the health of their babies.

Providing appropriate care to incarcerated women is ethical and humane as well as fiscally prudent and beneficial to society since it will reduce recidivism and improve the post-incarceration opportunities for the women and their children.

**American College of Obstetricians and Gynecologists (ACOG), Dr. Abigail Cutler, MD, Obstetrician-Gynecologist, Yale School of Medicine:**

Support the bill specifically noting the prohibition of shackling pregnant women. During Dr. Cutler's residency, she cared for a pregnant inmate who was transferred to Yale-New Haven Hospital (YNHH) for heroin withdrawal. This patient was shackled through the duration of her withdrawal while experiencing nausea, vomiting, body aches and the typical discomfort of pregnancy. Dr. Cutler stated that this was excruciating to observe.

Dr. Cutler recently learned about another pregnant inmate who received care at YNHH. This patient had a condition in which the amniotic sac can break far too easily thus endangering the fetus. This health condition required prolonged hospitalization, and the patient was shackled to her bed for the duration. This immobilization adversely impacted her and her baby's health and increased concern that she would develop a blood clot in her legs or lung which is already a high risk because of pregnancy. The doctors were forced to negotiate with the corrections officer to allow the patient to stand and move so that they did not have to inject her with anticoagulation medicine which would have increased her chance of hemorrhaging which is why she came to the hospital in the first place. It was challenging to provide the safest and most humane care for the woman and her baby under these conditions. SB 13 will help address these inhumane and unfair practices.

**Connecticut Coalition Against Domestic Violence, Liza Andrews, Director of Public Policy and Communications:**

Supports this bill because it improves the treatment of incarcerated women, provides appropriate healthcare information and services and seeks to enhance visitation policies with children which will improve family cohesiveness upon release. Ms. Andrews notes that low-income women of color are at most risk for abuse and being criminalized and entrapped by "abusive" policies into the corrections system. Some women are forced into crime by their abusive partners, others are arrested for defending themselves from their abusers, and still others are arrested for not protecting their children from the abuser.

**SEIU 32BJ, Juan Hernandez, District Director:**

Supports this bill. Ending the use of restraints is long overdue; the practice increases health risks, is rarely necessary and is humiliating. This bill establishes family-friendly and family-centered policies including the ability for new mothers to pump and store breast milk and improving their right to privacy. He states that it is time for Connecticut to join the other states that have more humane policies in their prisons.

**Connecticut Students for a Dream, Camila Bortolletto:**

Support this bill. Currently prison policies reflect the patriarchal society we live in; the policies ignore and punish the needs of women. SB 13 will take steps to ensure that the women in the York Correctional Institute are treated with dignity and respect.

**YWCA, Ren Brockmeyer, Director of Women's and Girls' Programs:**

Supports this bill. It will help protect the self-esteem and confidence of the women by not allowing male staff to supervise them while unclothed or performing bodily functions. It will improve family connectedness which will reduce recidivism which saves the state money and will help build healthier, stronger communities. The bill will ensure a safer, less traumatic delivery due to the lack of use of restraints. SB 13 will improve the care and treatment that women receive while incarcerated and lead to better outcomes upon release.

**Connecticut Bail Fund, Brett Davidson, Co-Director:**

Supports this bill. This organization has bailed out 28 women from pretrial detention in Connecticut. All of them were survivors of sexual and gender-based violence, and many were arrested for acts of self-defense. Many of these women were found to be innocent of the crimes for which they were arrested, but had to spend some time in jail because they were too poor to afford bail. Mr. Davidson estimates that a third of the over 900 inmates in York are innocent and there because they cannot afford to pay bail.

Mr. Davidson detailed his growing awareness of the “horror stories” occurring in the York Correctional Institute including sexual harassment and assault, life-threatening medical neglect, women denied pre-trial contact with their lawyers, the shackling of women during labor, and a woman’s cellmate delivering her baby. Mr. Davidson believes that the treatment of Connecticut’s incarcerated women meets the United Nation’s definition of torture and constitutes a human rights emergency. SB 13 has the potential to end these inhumane practices.

**MomsRising, Khadija Gurnah, Campaign Director:**

Supports this bill. She stated that over half of the women in state prison have been either physically or sexually abused- or both and that incarceration and shackling compound their traumatization. These women need support to heal from the trauma they have survived. The children of incarcerated women often end up in the perpetuation of the cycle of poverty and incarceration. Prison policy that helps improve the care of these women and the bond they have with their children will be beneficial to society.

She further noted that the health and mother-child bonding benefit of breastfeeding needs to be considered in prison policy and supports the provisions in this bill that allow for this. Women need to have a private space to feed their infant and/or accommodations to express their milk and ensure that it is properly frozen, stored and transported to her baby. According to the American College of Obstetricians and Gynecologists, “Breastfeeding may hold the greatest potential to mitigate” an adverse childhood experience.” Having an imprisoned parent is an adverse childhood experience so allowing mothers to breastfeed their infants will help improve the lives of both the women and their children.

**PrisonDiaries, Chandra Bozelko, award-winning blogger/author:**

Supports this bill- specifically the provision which provides free, unlimited feminine hygiene supplies to the women in the York facility. Ms. Bozelko was an inmate at York for over 6 years, and she wrote an article, which was published in The Guardian in 2015, about the feelings of embarrassment and humiliation she felt while menstruating in prison. She views the provision of adequate supplies for this female health issue is a human right.

**The New Freedom Fighters: Women Against Mass Incarceration, Tiheba Williams-Bain, Founder:**

Supports this bill. Ms. Williams-Bain served time in both state and federal prison. She stated that she would receive 4 to 5 tampons and pads each month and that that amount was insufficient for her menstrual needs. Once, when she needed more napkins, a male officer told her she would not get any and that she “should not have come to prison.” Her clothes were often stained with blood. It is very difficult for women to afford the commissary prices. Ms. Williams-Bain supports the provision of free hygiene supplies to inmates. She also shared that a friend of hers had a baby while incarcerated. That friend became despondent, wouldn’t get out of bed or participate in any activities for the two months until she could see her infant daughter. She supports the bill’s provisions which will enable mothers to see their children more frequently.

**CT Women’s Education and Legal Fund, Rebecca Yungk, Social Work Intern:**

Supports this bill for many of the same reasons as summarized in previous testimony. She noted that the restraining of pregnant women could increase the chance of a miscarriage.

**Alejandra Zaparolli:**

Supports the bill. She states that the ultimate goal of our prison should be to rehabilitate inmates so they can have successful reentry into the community after serving their sentence. The subhuman treatment of shackling women during pregnancy only alienates them further and is a form of extra-judicial punishment in the form of withholding appropriate, compassionate medical care.

**UCONN School of Social Work, Erica Laquerre, Bridgeport, CT, Graduate Student.:**

Supports this bill because it will prevent the shackling of pregnant women, improve inmates’ pregnancy education, provide free feminine hygiene products, and increase the frequency of family visitation which will promote family bonding.

**SCSU Social Work Student, Alice Simmel, Trumbull, CT:**

Supports the bill because it will end the “gender-tax” on hygiene supplies that women need for basic sanitary and healthcare needs, prohibit the use of restraints on pregnant women, and not allow a male officer to be present in the delivery room.

**Claire Pritchard, Hartford, CT:**

Supports this bill. She supports the prohibition of the use of restraints on pregnant women because it is a harmful practice and the state is responsible to protect the women under its supervision. She also supports the provision of pregnancy education and care because it will help protect and maintain the women’s health. Providing more family bonding time is important for the women’s children so they can be more successful in life. Women should not be forced to reuse or do without appropriate feminine hygiene products; this bill will address that issue by providing free products.

**Sandy Lomonico, MPH, MSW:**

Supports the bill. Ms. Lomonico is a formerly incarcerated woman who went on to earn two masters degrees. Through her studies, she learned about the effect trauma has on individuals, families and communities. She also learned about processes that would prevent injury and violence. She feels SB 13 will make Connecticut the first state that provides accountability for the protection of human rights for the vulnerable population of incarcerated women.

**Lisa Kelly, Guilford, CT:**

Supports this bill. She stated that babies born to incarcerated women deserve a healthy start which requires their mothers receiving appropriate prenatal and maternity education and care. She believes that more compassionate child visitation opportunities and the means to provide breast milk to their infants will provide greater motivation for the women to serve their time and re-enter society in a responsible and productive way.

**Rachel Wilson, East Lyme, CT:**

Supports this bill- specifically the banning of the use of restraints during labor. Ms. Wilson has worked in the birth profession for a decade and previously volunteered as a labor support person for York inmates who were birthing at Lawrence and Memorial Hospital. During one delivery at which she attended, the attending physician pleaded that the woman be unshackled before the surgical procedure began. She was chemically immobilized because of the epidural she had already received. She was not unshackled. For Ms. Wilson, this seemed like a gross abuse of power and she believes that the woman must suffer from long-term emotional damage from that experience.

**Alicia Di Leo, Ellington, CT:**

Supports this bill. She states that it is “laughable” to believe that a woman in labor could escape or deliberately injure prison staff therefore requiring her to be shackled. She feels this policy is deliberately humiliating. She states that it is crucial for newborns to be able to drink their mothers’ milk to promote bonding and the health of the infant. Providing a way for mother’s to get their milk to their infant will promote the public good by providing superior nutrition to the child. She also supports the free provision of feminine hygiene products because it keeps women healthy and prevents UTI infections which cost the state money to cure. By denying these products, the state is creating conditions that foster infection in healthy women which is a violation of the state’s responsibility to treat people under its care with due diligence and a reasonable level of respect.

**Jenevieve Ashman Johnson, Hartford, CT, MSW:**

Supports this bill. She stated that incarcerated women are at a higher risk of having low birth weight and preterm babies. The focus of care in York Correctional should be on rehabilitation and parenting programs because so many women have a history of some type of abuse and drug/alcohol dependency and are also mothers. She points out that women who neglect their children are judged by society; she feels the state should be judged for providing inadequate care and services to the women under its care. She mentioned a program called Mother’s Behind Bars in Kentucky, but her explanation about what the program accomplishes was unclear. In regards to the shackling to pregnant women, she stated that the Eighth Amendment prohibits cruel and unusual punishment; that in 2008, the Federal Government adopted an anti-shackling policy; and that in 2012, the Justice National Task force also recommended that shackling on women or girls during labor and delivery should only be used when deemed necessary. Unjustified restraints should have consequences for individuals and institutions. She urges the passage of this bill.

**Sarah Motta, Hartford, CT, Senior at University of Connecticut:**

Supports this bill- specifically the section about providing free feminine hygiene products. Incarcerated women make less than a dollar a day on average, and the cost of a box of commissary menstrual products cost more than \$4 a box. She noted that on the UConn campus, there are now locations where students can get free menstrual products because

the student government recognized that college students often struggle to find the time and money to purchase these products and that the stress of school life can cause unexpected periods which cause students to miss class because of a lack of access to products. Having access to feminine hygiene products helps maintain good health and self-esteem which are essential to an incarcerated women's rehabilitation process.

**Jane Nadel, Essex, CT:**

Supports all aspects of this bill because current practices and treatment of incarcerated women demeans and dehumanizes them in ways that will make it harder for them to lead healthy, productive lives upon release.

**Erin Livensparger, Portland, CT:**

Supports this bill. Ms. Livensparger has worked in female correctional facilities in Massachusetts and Connecticut. She feels that the birthing of a baby should be a time of support and respect. Ensuring that a female officer, not male, is present during delivery and that the woman is not shackled will restore more respect to this process.

**Kathleen Callahan, Stratford, CT:**

Supports the bill. Ms. Callahan has been in recovery for 6 years now after decades of abusing drugs and alcohol. Her abuse stemmed from childhood trauma and led to clinical dependence. She feels she is lucky that the poor choices she made while addicted did not lead to time in prison. She feels that we as a society have lost our compassion for others and the intrinsic worth of all human beings. Allowing incarcerated women to foster and maintain strong connections with their children will only benefit society. This bill is a step in the right direction of criminal justice reform in Connecticut.

**Angela Bellas, MSW, Manchester, CT:**

Supports the bill. Specifically she supports the ban on use of restraints, separating the birth mom from her newborn and providing appropriate healthcare support to incarcerated women, including postpartum support. She states that Black, Latinx and Indigenous people are disproportionately incarcerated and that women are the fastest growing incarcerated population. Maternal mortality rates are three times higher for American Black women than for Caucasian women. Black infant mortality rates are twice as high as the rates for Caucasian infants. She feels that our society should be doing more to change these disparate outcomes.

**Ashley Gaudino, Trumbull, CT:**

Supports all aspects of this bill. Ms. Gaudino worked in the Cook County Public Defender's Office in Chicago while in law school. She saw what prison life was like inside some of our country's worst jails and prisons. SB 13 helps improve the treatment of incarcerated women in Connecticut and brings us closer to important criminal justice reform. She states that research shows the children of incarcerated women are far more likely to enter the foster care system which can lead to intergenerational issues of poverty, substance abuse and incarceration. Helping the women in York Correctional maintain healthy bonds with their children will positively impact many lives.

**Eric Cruz Lopez, Bridgeport, CT:**

Supports the bill- specifically the family-centric policies that would help families build and maintain relationships while the mother is incarcerated. Mr. Lopez, his mom and his brother

were sent to a detention facility when they were caught crossing the border into the United States when he was 7. Even though they were not detained for very long, the memory of that time stays with him today. He cannot imagine having to be without his mother during that time.

**Maria T. Sandoval-Schafer, Hamden, CT:**

Supports the bill. Ms. Sandoval-Schafer is a doctor in neurobiology. She states that there is ample scientific evidence that shows that environmental factors like maternal malnutrition, substance abuse, stress, mental health problems and exposure to violence have serious effects on the development of the infant's brain as early as three weeks of gestation. Current York Correctional practices exacerbate many of these areas and have the potential to inflict irreversible harm or death to the fetus. Changes in SB 13 would make significant improvements by providing health education and prohibiting the use of restraints. The additional bill changes which support more maternal/child contact from infancy on up will result in positive outcomes. These measures have the potential to lead to more positive social emotional health for the children and might also facilitate the inmate's rehabilitation.

**Rachel Liu-Ballard, Hamden, CT:**

Supports the bill. Ms. Liu-Ballard is a former labor and birth nurse at Yale New Haven Hospital. The use of restraints during labor makes it difficult for the normal labor process to occur. Movement of the body is necessary so the baby can find the right position to navigate their way through the pelvis; unrestricted movement also decreases labor pains and allows a woman to respond to labor naturally. The use of restraints could inflict physiological damages as well as psychological. Incarcerated women should have access to free pads and tampons in the same way they have access to toilet paper. If the women use the tampons for too long, they could get toxic shock syndrome. She noted the health benefits of breastfeeding and/or pumping for women include: decreased risk of cancer, healthy postpartum weight loss, a lower risk of postmenopausal osteoporosis, and decreased likelihood of postpartum depression, among other benefits. Their children who would receive the breast milk would gain: increased immunity, milk perfectly formulated for their needs, a decreased risk of childhood cancers and SIDS, as well as an improved connection to their mother. SB 13 will improve the lives of both the women and their children.

**Caroline W. Christensen, Winsted, CT:**

Supports the bill. Ms. Christensen shared her personal story of a pregnant employee of hers who had to return to prison after having a "dirty urine" sample. This employee suffered from opioid addiction. The woman was transferred to some type of alternative facility but her treatment there and during her labor mirrors that of the women in York Correctional. Pregnant women who are incarcerated have a different level of stress and guilt than non-pregnant women, in Ms. Christensen's opinion. Because of this personal experience with a woman who was involved in the criminal justice system because of addiction, Ms. Christensen supports more of a focus on treatment than punishment and SB 13 furthers this goal.

**Polly C. Moran, MSN, Certified Nurse-Midwife:**

Supports the bill. Ms. Moran pointed out that because there is only one Connecticut state facility for women, their families are likely to live far away making visitation challenging, and the women are likely to not have a partner willing and able to make the trip with their children. Ms. Moran included a list of affirmations from the American College of Nurse Midwives many addressed limiting the use of restraints on pregnant, delivering and post-partum women for

various medical reasons, and the promotion of mother/newborn bonding to establish attachment during the hospitalization period which sets the stage for optimal newborn development.

**Jessica Labrencis, West Hartford, CT:**

Supports all aspects of this bill. She noted that current family visitation hours are limited and often inconvenient for the family visitors. This bill addresses that problem.

**Amanda Carrington, Bloomfield, CT:**

Supports the bill. Ms. Carrington stated that in 2010, the United Nations implemented Bangkok Rule 24 which states in part: "*instruments of restraint shall never be used on women during labour, during birth, and immediately after birth.*" The UN continues to pressure the United States to change the policy of use of restraints in American prisons.

**Christina Crowder, Hamden, CT:**

Supports all aspects of the bill but wrote specifically about the use of restraints. She referenced NPR and Pro Publica articles that offer evidence that black women, regardless of socioeconomic status, are three to four times more likely to die during childbirth because there is a huge chance their pain symptoms will not be taken seriously. Their pain is routinely diminished and discounted by medical professionals. She feels the use of restraints is inhumane and that only a man could think such a practice would be necessary and justifiable. The passage of this bill will help gear the treatment of incarcerated women as a one of rehabilitation and not of cruel and unusual punishment.

**Alyssa Siegel-Miles, Ledyard, CT:**

Supports all aspects of this bill.

**Donna Grossman, Windham, CT:**

Supports this bill because it will end the current "barbaric" practices in the York facility.

**Jessica Sloan:**

Supports all aspects of this bill.

**NATURE AND SOURCES OF OPPOSITION:**

**Stephen Mendelsohn, New Britain, CT:**

Opposes the bill because Mr. Mendelsohn states there is a gender disparity in the criminal justice system that treats women better than men for similar crimes. He does not feel a bill specifically geared to female inmates is necessary or just.

**Reported by: Tamara Morris**

**Date: April 30, 2018**