

Born Free

Two bills seek to ban the use of restraints on pregnant inmates.

By Maureen Turner

State lawmakers held a hearing earlier this month on two bills that would ban the controversial use of restraints on pregnant inmates, including in the delivery room.

Under one of the bills, sponsored by state senator Cynthia Creem (D-Newton), no restraints would be allowed on inmates after the first trimester of their pregnancies or during transport to the hospital, delivery, or their postpartum recovery period in the hospital. Exceptions would be allowed in “extraordinary circumstances,” defined as when a correctional officer determines that the woman is a flight risk or poses a safety threat to herself or others. In such cases, the restraints must be “the least restrictive available” and cannot be used on her waist or leg, according to the bill.

The second bill, sponsored by state Sen. Karen Spilka (D-Ashland), is broader. It contains the same restraint restrictions as Creem’s bill but also would guarantee a minimum level of prenatal care for pregnant inmates in the state, calling for them to be allowed daily exercise, access to a healthy prenatal diet and supplements, and health monitoring, including screening for post-partum depression. It also addresses patient privacy, banning the presence of correctional officers during an inmate’s medical exam, labor or delivery unless “specifically requested by medical personnel”; in such cases, the officer

would have to be a woman.

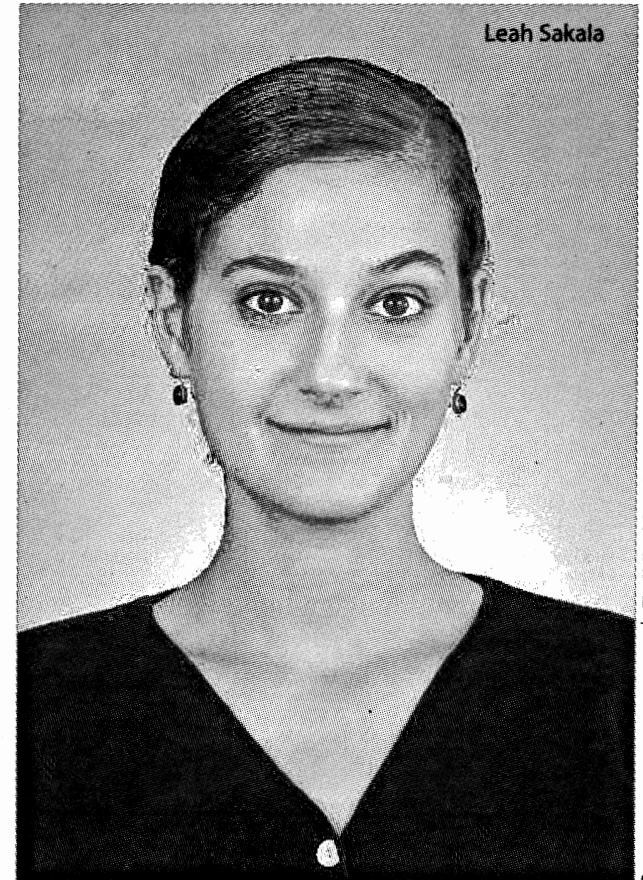
Co-sponsors of Spilka’s bill include, from the Valley, state Reps. John Scibak (D-South Hadley) and Denise Andrews (D-Orange) and state Sen. Gale Candaras (D-Wilbraham).

A third bill, filed by state Rep. Kay Khan (D-Newton) with the Joint Committee on the Judiciary, also would ban shackling and would set standards for healthcare for pregnant inmates. That bill, which has yet to have a hearing, is co-sponsored by Andrews, Scibak, and fellow state Reps. Ellen Story (D-Amherst), Peter Kocot (D-Northampton), Benjamin Swan (D-Springfield) and Aaron Vega (D-Holyoke).

Massachusetts is one of 22 states that do not have a blanket ban on the use of restraints on pregnant and laboring inmates. The Mass. Department of Correction policies does, however, forbid the use of waist chains and leg irons after the first trimester and the use of any restraints during labor. But that policy covers prisoners in the state system only and doesn’t apply to county inmates, noted Marianne Bullock, a doula and co-founder of the Prison Birth Project, which supports pregnant women at the Western Mass Regional Women’s Correctional Center in Chicopee.

COURTESY OF THE PRISON POLICY INITIATIVE

Leah Sakala



news

Bullock said the women her group works with are not restrained while giving birth but are while being transported to the hospital and then again shortly after delivery. But women who come to Chicopee from other facilities report that they've been restrained during labor, she told the *Advocate*.

In addition, Bullock said, while Chicopee corrections officers are respectful of laboring women's privacy, women who've been at other jails have reported "horrifying stories," such as a doctor's asking an officer to assist by holding a light during an inmate's labor. The bill, Bullock said, would establish a baseline of acceptable practices across the state.

Bills to ban the use of restraints on pregnant inmates have been filed several times in recent years but have failed to come to a vote of the full Legislature.

Bullock, who testified at the recent hearing of the Joint Committee on Public Safety and Homeland Security on the Creem and Spilka bills, noted that a number of legislators expressed surprise that Massachusetts doesn't already ban the practice—the result, she suggested, of a broader lack of awareness about conditions in prisons and jails. "It's hard," she said, "Prisons are prisons. The doors are locked. The stories are hard to get."

Still, backers are hopeful that Massachusetts will join the growing number of states that

forbid the use of restraints on pregnant inmates. "I think the Legislature is definitely getting the message that folks are paying attention," said Leah Sakala, a policy analyst at the Easthampton-based Prison Policy Initiative, which offered written testimony at the Public Safety hearing.

Restraining a pregnant or laboring woman poses serious health risks, Sakala said. It prevents her from moving freely, which helps the labor process; it puts her in danger if, say, she falls and cannot catch herself; it can get in the way of caregivers and prevent them from giving her effective care. "And in an emergency situation, it adds a whole extra barrier," Sakala said.

The practice, she added, is also bad for the child, because, among other things, it makes it that much harder for the mother to bond with her newborn, which research shows is vital for a baby's wellbeing. That early bond can also be vital for an imprisoned mother, who will be separated from her child shortly after giving birth, by serving as a powerful motivation for her to be reunited with her family after her release, Sakala said.

"Both the mom's and baby's health is at risk when correctional officers or prisons or jails are imposing these unnecessary restrictions," Sakala said. And in the vast majority of cases, the restrictions are clearly unnecessary, she added: "A deeply pregnant or laboring woman is not a flight risk. She's just not."•