



THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

**Testimony of Senator Jill P. Carter
In Favor of SB 776
–Correctional Services – Pregnancy and Postpartum Support
(Prevention of Forced Infant Separation Act)--
Before the Judicial Proceedings Committee
On March 9 , 2022**

Chairman Smith, Vice Chair Waldstreicher, and Members of the Committee:

Senate Bill 776, the Prevention of Forced Infant Separation Act, gives infants born to incarcerated mothers in Maryland the head start they need to live healthier and happier lives.

In Maryland, most pregnant women who go into labor while incarcerated spend less than 48 hours bonding with their infant before the newborn is taken away and either placed with a secondary caregiver or in foster care. This is because there currently exist no accommodations for mothers to remain with their infants during the tenure of their incarceration.

Not only is this forced separation of mother and infant inhumane, but it presents a significant public health issue. [Research shows that an infant's first year of life is one of the most important.](#) When infants are prevented from consistent bonding with their mothers, there can be lifelong developmental consequences such as, for example, an increased risk of post-traumatic stress or substance abuse in adulthood. [The mothers are more likely to experience postpartum](#)

[depression, extreme powerlessness, grief, and feelings of detachment.](#)

In 2021, Minnesota passed legislation known as the Health Start Act. In doing so, it became the first state in the country to prevent the practice of forcibly separating infants from their incarcerated mothers. This bill, Senate Bill 776, is based on the Minnesota law and expands upon a bill sponsored by Senator Washington in 2020, [Senate Bill 684](#), which authorized the Commissioner of Correction to operate a pre-release unit for women within the Division of Corrections.

Specifically, Senate Bill 776 would provide pregnant women in the custody of the Department of Public Safety and Correctional Services with pre-release status, the option to relocate to the pre-release unit throughout the duration of their pregnancy and remain with their infants up to one year postpartum. For pregnant women who are not eligible for pre-release status, they will have access to liberal visitation with their infant. In both facilities, fathers or appropriate secondary caregivers will also be permitted increased visitation with the infant; this will better facilitate the infant's transition into the community.

In addition, Senate Bill 776 will create the Healthy Start Program. The Healthy Start Program is an initiative that will use evidence-based interventions developed by healthcare professionals to ensure well-built bonds between families and infants. A key consideration of this program is the welfare of the infant. Although incarcerated women are at higher risk for substance use disorder, mental illness, and poverty, [research shows that the trauma to an infant caused by forced separation outweighs the consequences of these risk factors](#)

to the infant. Instead, experts in child development advocate for interventions like the Healthy Start Program because it connects incarcerated mothers with needed resources to form lifelong bonds with their children. Such interventions have also been proven to cut the recidivism rates of participants in half and increase the likelihood of mothers retaining custody of their children post-incarceration.

The Prevention of Forced Infant Separation Act is evidence-based legislation that recognizes the right of every person to parent their children. As such, I urge the committee to give a favorable report on Senate Bill 776.

Respectfully,

A handwritten signature in blue ink that reads "Jill P. Carter". The signature is written in a cursive, flowing style.

Jill P. Carter