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LEGISLATIVE TESTIMONY

To: Members of the Joint Committee on the Judiciary
From: James F. Driscoll., Esq., Executive Director
Re: House 2234, “An Act Relative to Safe Pregnancies and Related Health Care for Female Inmates”
Date: September 20, 2011

House 2234, “An Act Relative to Safe Pregnancies and Related Health Care for Female Inmates ” provides services and protections for pregnant women and their unborn children as well as postpartum inmates and their newly born children. The Massachusetts Catholic Conference (“Conference”) supports services for pregnant woman and their children which honor their human dignity. The Conference opposes all provisions contrary to the dignity of the human person and urges the committee to strike section (c) of House 2234. Additionally, the Conference insists that women deserved to be fully informed prior to all medical procedures and urges the committee to include a new section with these assurances.

Prenatal Care Empowers Women to Develop Healthy Life Skills:

Women are often inspired to make positive life changes while experiencing pregnancy. Barbara Hotelling, MSN, CD (DONA), LCCE, FACCE eloquently described this experience when she stated:

“Pregnancy and giving birth is a transformational time in a women’s life. With adequate support and prenatal care, expectant and new mothers often discard lifestyle behaviors such as smoking and drinking alcohol that would negatively affect their babies. They eat more nutritious foods, alter their social lives to get appropriate sleep, and exercise more regularly, decreasing their risks of physical complications and depression. With education and support, preparation for birth gives women the opportunity, in this most teachable moment, to change their lifestyle behaviors and to have positive birth experiences...¹

Prenatal Care Supports Children at their Most Vulnerable Stage of Development:

Good nutrition and health care is important at all stages of life beginning at conception. Providing access to prenatal care for children at their earliest and most vulnerable stages of development and to their mothers not only respects the human dignity and sacred value of both women and children but is good medical practice.

The literature suggests that maternal prenatal stress, anxiety, and depression may have lasting effects on child development.² Additionally, more than 57% of the women incarcerated in the United States have already suffered severe and prolonged physical and/or sexual abuse³ prior to incarceration. Therefore, as the Department of Corrections reviews its policies and establishes procedures to assure proper prenatal and postpartum medical care for incarcerated pregnant women that decrease her stress and anxiety, the health of both the mother and the child in her womb is enhanced. Pregnant women, and their unborn

¹ Hotelling, Barbara, *Prenatal Needs of Pregnant, Incarcerated Women*, The Journal of Perinatal Education, Spring 2008 at 4.

² O’Connor TG, Caprariello P, Blackmore ER, Gregory AM, Glover, V, Fleming P, ALSPAC Study Team, *Prenatal Mood Disturbance Predicts Sleep Problems in Infancy and Toddlerhood*. Early Human Dev, July 2007, 83(7):451-8.

³ Rathbone, Cristina, *A World Apart*, Random House, May 2005 at p.22.

children, deserve respect, safety, good medical care, compassion and support. Certain components of this bill enhance the rights of vulnerable women and their children.

Section (c) must either be stricken from the legislation or rewritten:

Contraceptive use has numerous side-effects and risks of serious complications. The side-effects of the pill include headaches, depression, decreased libido and weight gain.⁴ Documented serious complications include heart attacks,⁵ cervical cancer⁶ and blood clots.⁷ The Breast Cancer Prevention Institute has a number of documented studies that show the connection between high doses of estrogen and breast cancer. According to a Boston Globe article, “[t]housands of lawsuits have been brought against the makers of Ortho Evra, Johnson & Johnson, by women who used it and suffered heart attacks, strokes, or blood clots.”⁸ Additionally, multiple studies examining sexual behavior and STD transmission have demonstrated risk compensation behavior, which is a greater willingness to engage in potentially risky behavior when one believes risk has been reduced through technology.

Educating women on Natural Family Planning (NFP) and abstinence would be better for a women’s physical, emotional and spiritual health. A woman’s overall health would be better served by including in any health education program information relative to NFP and abstinence. Additionally, the reliance on contraceptives has shown to increase one’s temptation to abort if pregnancy occurs. Research released this month clearly indicates that abortion significantly increased mental health problems for women.⁹

The Conference respectfully submits that it is better to provide incarcerated women with up-to-date resources that teach NFP and abstinence. Women who receive NFP education no longer are required to rely on chemicals to space their children. Additionally, this organic, affordable method of family planning provides women with the opportunity to better understand and appreciate the unique aspects of their body.

The Conference urges the Committee to report favorably on a bill that addresses the health needs of pregnant women and their unborn children without including the harmful components detailed in Section (c) that mandate artificial contraception and referrals to Family Planning Agencies.

Ensure all Women Access to full Knowledge Prior to Any Medical Procedure:

The current Department of Correction regulations at 103 CMR 620.04 Programs for Female Inmates, section 2, a copy of which is attached to this testimony, addresses an inmate’s request to terminate her pregnancy and references abortion services. Protections to ensure a fully informed choice are not provided for women within this policy. Total care for women should ensure that women seeking abortions are provided a fully informed choice.

We respectfully ask that the committee craft legislation that is responsive to the complete medical, emotional and psychological needs of pregnant and postpartum inmates and include in this bill a requirement that inmates contemplating abortion be offered comprehensive information relative to abortion and available alternatives. Access to information on the abortion procedure, the risks, the unborn

⁴ B Tanis, et al., “*Oral Contraceptives and the Risk of Myocardial Infarction*,” 345 New England Journal of Medicine 1787 (December 20, 2001).

⁵ R Hatcher, et al., *Contraceptive Technology* at 418 (1998).

⁶ J Kemmeren, et al., “*Third Generation Oral Contraceptives and Risk of Venous Thrombosis: Meta-analysis*,” 323 British Medical Journal 131 (July 21, 2001).

⁷ Jauser Betwirj, Daily Reproductive Health Report, “*British Lawsuit Filed Against Makers of ‘Third-Generation’ Birth Control Pills*,” October 2, 2001.

⁸ Y. Abraham, “*No Patch for Deepest Cut*,” The Boston Globe, October 21, 2009.

⁹ P. Coleman, “*Abortion and Mental Health: Quantitative Synthesis and Analysis of Research Published 1995-2009*,” 199:180-186, The British Journal of Psychiatry, September 2011.

child's status and development (including ultrasound imaging and heartbeat recording when applicable), the availability of alternatives and corresponding resources, along with sufficient reflection time, would reduce the possibility of serious, lasting, or life threatening consequences of a medical, emotional and psychological nature, and thus should be guaranteed in any legislation addressing the overall care of pregnant women in correctional facilities.

All women and children deserve respect, safety, good medical care, compassion and support. Providing the information and counseling described in the preceding paragraph would go a long way towards meeting these goals.

For the foregoing reasons and to improve the medical and psychological care for pregnant and postpartum inmates and their children, the Conference urges the Committee to give House 2234 a favorable report recommending passage of the bill with the additional provisions enumerated above.

The Massachusetts Catholic Conference is the public policy office of the Roman Catholic Bishops in the Commonwealth, representing the Archdiocese of Boston and the Dioceses of Fall River, Springfield, and Worcester.