



Maine Medical Association

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March 2, 2020

To: Senator Susan Deschambault and Representative Charlotte Warren, Chairs
Joint Committee On Criminal Justice and Public Safety

From: Dan Morin, Director of Communications and Government Affairs

Re: **Neither for Nor Against LD 2085**, An Act To Ensure Access to Sexual and Reproductive Health Care and Education in All Maine's Jails and State Correctional and Detention Facilities

Dear Chairs and members of the Joint Committee On Criminal Justice and Public Safety,

On behalf of the Maine Medical Association (MMA), representing over 4,300 Maine physicians, residents and medical students, we would like to take this opportunity to provide comments for LD 2085. Attached, you will find a Committee Opinion from the American College of Obstetricians and Gynecologists Committee on Health Care for Underserved Women. It was released in 2012 and reaffirmed in 2019. Highlights of the opinion are:

- Drug offenses are the most common felonies.
- 62% of women in state prisons were parents of one or more children and approximately 6-10% of incarcerated women are pregnant.
- Sexually transmitted infections and pregnancies may result from sexual victimization.
- Most women are incarcerated for nonviolent crimes and those women, including adolescent females often come from economically, educationally, socially, and emotionally disadvantaged environments. A disproportionate number have acute and chronic illnesses, substance abuse issues, and undetected health issues, including reproductive health needs.
- Mental health disorders and substance use disorder are common among incarcerated women, in fact 69% percent of women admitted to local jails met the criteria for substance dependence. Dependence was also more common among women than men.
- Rates of mental health behavioral health issues among women inmates ranged from 61% in federal prison to 75% in local jails.
- The short and often unpredictable duration of incarceration . . . often makes the provision and continuity of care difficult. Historically, health care was delivered by way of "sick call . . ." A sick call system does not allow for provision of primary or preventive care and health education.
- In general, care for incarcerated women and adolescent females should be provided using the same guidelines as those for women and adolescent females who are not incarcerated, with attention to the increased risk of infectious diseases and mental health problems common to incarcerated populations.

You will also find included in the opinion, a table for *Recommended Care for Incarcerated Women and Adolescent Females* for your reference.

Specific recommendations include adequately funding correctional facilities to provide a continuum of care model providing female inmates with initial screenings, in-house services or referrals for preventive and curative care, including Pap tests and appropriate follow-up, health education, and adequate planning before release from correctional facilities.

Thank you for considering our comments and information. We will be happy to provide more information as requested.