March 02, 2021

Sen. Mary Kiffmeyer 95 University Avenue W. Minnesota Senate Bldg., Room 3103 St. Paul, MN 55155 Rep. Jamie Becker-Finn 559 State Office Building St. Paul, MN 55155



Dear Senator Kiffmeyer and Representative Becker-Finn,

The Minnesota Section of the American College of Obstetricians and Gynecologists (ACOG) is writing in support of SF 1315/HF 1403, or the Healthy Start Act, which would help to provide safe and dignified birthing experiences for pregnant women facing incarceration and their babies. The Healthy Start Act would keep babies with mothers during the critical first year of their lives within the security of community alternatives to prison. Authored by a bipartisan team of women legislators and supported by the Minnesota Department of Corrections (DOC), we are proud to join in support of this critical piece of legislation.

Incarceration hurts children, new mothers, and their families, but the data-driven solutions in the Healthy Start Act will help mitigate these harms. Medical researchers, including experts from our very own University of Minnesota, have clearly established links between incarceration and negative health outcomes in this critical life period. While in prison, pregnant women too often experience inadequate prenatal care, forced separation from their babies after birth, and infrequent mother-baby visits from infant caretakers. For mothers, these disadvantages lead to negative outcomes like higher rates of postpartum depression, and for their children these traumas can have life-long health effects.

Too many Minnesotan mothers experience these traumas first-hand. According to the Minnesota DOC, a total of 278 pregnant women were sentenced to serve time in prison between 2013 and 2020. However, 77% were in prison for technical violations of probation or supervised release, or over 210 pregnant women in total. For the women who gave birth while in prison, over half did not receive a single visit from their baby's caretaker while they remained incarcerated.

Worse, this issue disproportionately impacts women of color. The justice system treats people of color more harshly than white counterparts, and in Minnesota 34% of pregnant incarcerated women were Indigenous and another 12% were Black, even though only 1.1% of the total population is Indigenous and only 7.0% is Black. The racial disparities in incarceration during pregnancies compound with the cumulative disadvantages of systemic racism, which cause women of color to face far higher rates of pregnancy-related complications and death.

As the specialty's premier professional membership organization dedicated to the improvement of women's health, ACOG advocates for legislation that confronts issues of reproductive injustice and promotes the health, well-being, and dignity of *all* women. The Healthy Start Act would provide humane and healthy housing for mothers and their babies during the crucial first year of life, protecting both from the trauma of forced separation. Supported by researchers,

advocates, and expert providers like the members of ACOG, the Healthy Start Act should be passed into Minnesotan law without delay.

In summary, ACOG proudly supports SF 1315/HF 1403. We would be happy to further discuss our support of this bill and its importance to mothers facing incarceration and their babies. You can reach our contract lobbyist, Tara Erickson, at <u>Tara@tgeconsultingmn.com</u>. Thank you for your consideration and we look forward to continuing this discussion.

Sincerely,

Siri Fiebiger, MD, MPH Legislative Chair ACOG Minnesota

Minnesota Coalition for Targeted Home Visiting

8800 Hwy 7, Suite 200 St. Louis Park, MN 55426

March 3, 2021

Rep. Jamie Becker-Finn 100 Rev. Dr. Martin Luther King Jr. Blvd 559 State Office Building St. Paul, MN 55155 Sen. Mary Kiffmeyer 95 University Ave West 3103 Minnesota Senate Building St. Paul, MN 55155

Rep. Becker-Finn and Sen. Kiffmeyer:

The Minnesota Coalition for Targeted Home Visiting (MCTHV) is pleased to support the Healthy Start Act, HF 1403/SF 1315, which provides specialized programming for pregnant and parenting women during the first year of life. The MCTHV has long supported programming focused on children and families impacted by incarceration and believes these specialized programs can make a positive impact in the lives of families as they face difficult times.

We know women in prison tend to be younger, have completed less education and more likely to have experienced physical or chemical abuse. Moving women and their children from traditional prison settings to community alternative settings can improve birth outcomes for Mom and baby. Allowing parents to bond during the first year of life can improve the health outcomes for children during this first year and for the remainder of their lives.

A positive, healthy relationship with a parent or caregiver is the most important factor for successful development in early life. These relationships not only provide a safe and healthy environment for physical growth, but also positive interactions that support healthy emotional and social development and learning. Parent education, home visiting and similar supports are critically important because they help strengthen and empower parents to build health connections with their children, even in the most challenging situations. All of this is possible in through the Healthy Start Act.

We thank you both for authoring this important legislation and hope that advocacy is able to get it passed in the 2021 legislative session. If you have any questions or concerns, please feel free to contact me at Laura@LaCroixDalluhnConsulting.com.

Regards,

Laura LaCroix-Dalluhn, Coordinator



March 3, 2021

Rep. Jamie Becker-Finn 100 Rev. Dr. Martin Luther King Jr. Blvd 559 State Office Building St. Paul, MN 55155 Sen. Mary Kiffmeyer 95 University Ave West 3103 Minnesota Senate Building St. Paul, MN 55155

Rep. Becker-Finn and Sen. Kiffmeyer:

The Minnesota Prenatal to Three (PN-3) Coalition is pleased to support the Healthy Start Act, HF 1403/SF 1315, which provides specialized programming for pregnant and parenting women during the first year of life. We know women in prison tend to be younger, have completed less education and more likely to have experienced physical or chemical abuse. Moving women and their children from traditional prison settings to community alternative settings can improve birth outcomes for Mom and baby. Allowing parents to bond during the first year of life can improve the health outcomes for children during this first year and for the remainder of their lives.

The PN-3 Coalition is focused on supporting policies to address racial, economic and geographic inequities so that all Minnesota children and families will thrive. We believe HF 1403 helps address several inequities that impact justice involved children and families.

We thank you for consideration and support. If you have any questions or concerns regarding our support and and/or request for additional action, please contact our Policy and Legislative Affairs Director, Deb Fitzpatrick at <u>dfitzpatrick@childrensdefense.org</u> or Coalition Coordinator, Laura LaCroix-Dalluhn at <u>laura@lacroixdalluhnconsulting.com</u>.

Thank you,

Bharti Wahi, Children's Defense Fund Co-Chair

Nancy Jost

Nancy Jost, West Central Initiative Co-Chair



March 2, 2021

Re: Healthy Start Act SF1315/HF1403

To our Legislative Leaders:

I am a Vice President for Minnesota Adult and Teen Challenge. I am a psychologist and a 35-year Corrections professional. I have been an executive leader in implementing evidence-based practices (the "What Works" research) throughout the State during the course of my career. I have been honored to work with this Administration and the prior Administration on the State Initiatives to Reduce Recidivism. The research on the reforms that have been implemented by the Legislature and these Administrations demonstrates dramatic reductions in recidivism and "smart justice" approaches that have also reduced incarceration without compromising short-term public safety and while enhancing long-term public safety.

I am writing to express our support of the Healthy Start Act SF1315/HF1403. Allowing pregnant women and those having recently given birth time to bond with their baby, heal, attend treatment in the community, and participate in alternatives to incarceration is the wise thing to do. Research shows that this is a crucial bonding time for new moms and secure bonding and attachment are predictive of later adjustment and success in life. The bill also ensures incarcerated women receive much needed parenting education before community entry. This investment supports keeping families together while also protecting public safety.

I think that I can speak with confidence for the Substance Use Disorder Treatment and Recovery field when I say that we stand ready to lend our resources to support pregnant women and new moms with telehealth, direct access, mobile assessment, transportation, access to benefits, treatment, peer support and treatment coordination (all of which have all been provided for by the Legislature's behavioral health services reforms) and to effectively work with the three correctional delivery systems to remove unnecessary barriers to behavioral health services.

Please let me know if you would like me to provide testimony to or consultation on the Healthy Start Act companion bills.

Respectfully submitted,

There

Timothy B. Walsh, M.A., L.P.; DPA Vice President Minnesota Adult & Teen Challenge <u>Tim.Walsh@mntc.org</u> 651-242-6293





Dear Members of the Legislature:

Children's Defense Fund Minnesota is committed to ensuring every Minnesota child has a Healthy Start, a Head Start, a Fair Start, a Safe Start and a Moral Start in life and successful passage to adulthood with the help of caring families and communities.

It is hard to imagine a more challenging Start than one in prison, torn from your mother's arms just days after birth. For this reason, we urge you to support HF1403/SF1315 allowing the Commissioner of Corrections to place women who are pregnant or immediately postpartum into community alternatives such as halfway houses, supervise them in accordance with current statute, and provide them treatment and programming in the placement location for the duration of their pregnancy and for up to one year post-birth to allow for the child to be near their mother for the first year of their lives.

Consider the pregnant women who are at the center of the proposal: most are nonviolent offenders (84%) in prison due to technical violations (77%) and due to be released within months of their birth (54% released within 6 months of giving birth). Then consider who is paying the price: Our current short-sighted way of handling these pregnancies punishes babies with potentially devastating long-term consequences. Mothers and children both experience the trauma of separation, unable to create the strong bonds that sustain and nurture child development into the future.

If we are serious as a state about addressing the appalling racial disparities for our state's children, we must include these most vulnerable new Minnesotans in our efforts. This bipartisan, common sense proposal helps us address the impact of an important adverse childhood experience: having an incarcerated parent. It is the smart thing and the right thing. We hope you will join us in supporting this critical proposal.

Bharti Wahi Executive Director

Debra Fitzpatrick Policy and Legislative Affairs Director

March 1, 2021

RE: HF1403/SF1315

Dear Members of the Minnesota Legislature,

Please accept this letter on behalf of our organization in support of the Healthy Start Act that is now before you. Ostara Initiative is the nonprofit organization for the Minnesota Prison Doula Project and the Alabama Prison Birth Project. We exist to collectively transform systems by reimagining justice, advancing health, and reclaiming dignity in our policies and practices for all pregnant and parenting people.

For a decade, our teams have supported birthing incarcerated people in Minnesota, beginning with the first birth we supported in 2010. We have clearly seen the need for reform and enhanced support for this vulnerable population. Our carceral system is simply not equipped to properly care for pregnant, birthing, and postpartum people. The consequences of poor care and parent-child separation have long lasting and costly effects for individuals, families, and communities. As a State, we can do better. We know lower cost options for rehabilitation and recovery are available and produce better outcomes.

We are eager to be shepherds in the system of new thinking, expanded support, and collaborative systems change in partnership with the Minnesota Department of Corrections, those directly impacted by incarceration, and other community resources.

The Healthy Start Act is an opportunity to revise ineffective public policies to positively impact two generations at a time. The moment of change is upon us and through collective, brave, thoughtful action, we can imagine systems that work for all, establish safety, and enhance community well-being.

Thank you for your consideration of this important piece of legislation,

Erica Gerrity, LICSW Executive Director, Ostara Initiative

Raelene Baker, Certified Doula Project Director, Minnesota Prison Doula Project

becca Shlafer

Rebecca Shlafer, PhD, MPH University of Minnesota Research Director, Ostara Initiative





UNIVERSITY OF MINNESOTA

Twin Cities Campus

Robina Institute of Criminal Law and Criminal Justice Law School N160 Walter F. Mondale Hall 229–19th Avenue South Minneapolis, MN 55455

Office: 612-626-6600 Email: robina@umn.edu Website: http://www.robinainstitute.org/

March 3, 2021

Re: Healthy Start Act, HF 1403/SF 1315

Members of the Minnesota Legislature,

On behalf of the Robina Institute of Criminal Law and Criminal Justice, I write to support passage of the Healthy Start Act, which allows the Commissioner of Corrections to place women who are pregnant or immediately postpartum into community alternatives such as halfway houses for up to one year post-birth to allow for better outcomes for both the mother and child.

Research has shown that the first years of a child's life are critical for developmental success. During this period, abrupt separations, such as those that happen after an infant is removed from a woman who has given birth in prison, can have harmful effects on the child's development.¹ The inability to maintain or form attachment with a parent in prison can result in the child experiencing insecurity, which can lead to other negative outcomes for the child. But establishing strong bonds with a caregiver can build resilience.²

This bill strikes a good balance between holding women in the criminal justice system who are pregnant accountable for their crimes and giving them the best opportunity to form bonds with their children and become caring and effective parents. Under this bill, women continue to be supervised, and must complete appropriate programming. However, the bill also addresses the harm that can be caused by separating a mother and child after birth. The median length of imprisonment for women who are pregnant is 4-1/2 months. Requiring a woman and her newborn to undergo separation during the critical bonding time after birth just so a woman can serve a few more months in prison is nonsensical because the effects of that separation will last a lifetime for the child. For these reasons, we at the Robina Institute support the Healthy Start Act and urge its passage.

Sincerely,

Kelly Lyn Mitchell Executive Director

Driven to Discover^{ss}

¹ Burnson, C., & Weymouth, L. (2019). Infants and young children with incarcerated parents. In *Handbook on children with incarcerated parents* (pp. 85-99). Springer, Cham.

² Arditti, J. A., & McGregor, C. M. (2019). A family perspective: Caregiving and family contexts of children with an incarcerated parent. In *Handbook on Children with Incarcerated Parents* (pp. 117-130). Springer, Cham.



March 3, 2021

Members of the Minnesota Legislature *Via Electronic Delivery*

Re: Letter in Support of the Healthy Start Act HR1403/SF1315

Dear Members of the Minnesota Legislature:

Violence Free Minnesota (VFMN) submits this letter to express our support for the Healthy Start Act - HF1403/SF1315. We are a statewide coalition of 90-member programs working to end relationship abuse. VFMN member programs provide direct services and support to survivors of domestic violence in all 87 counties in Minnesota.

The Healthy Start Act allows the Commissioner of Corrections to place women who are pregnant or are immediately postpartum into community alternatives for supervision and treatment. We know that the majority of women serving prison time are also victims of sexual and/or domestic violence. Violence Free Minnesota has been working for the past two years on a project at Shakopee Correctional Facility (women's prison) addressing the victimization that women have experienced prior to incarceration – with a specific focus on Native women. We have conducted extensive interviews with women residing in Shakopee or who were recently released from facility. **97%** of participants revealed that they had experienced violence or abuse - often multiple instances of violence and abuse - prior to incarceration. **90%** of participants have children of their own. Women reported the difficulty in being absent from their children's lives - "mothering behind bars" - as well as their fears about cycles of abuse and cycles of criminal justice system involvement continuing in their children's lives.

National statistics similarly show that the vast majority of women in prison have been victims of violence prior to their incarceration, including domestic violence, rape, sexual assault and child abuse. 79% of women in federal and state prisons reported past physical abuse and over 60% reported past sexual abuse. From national sources we also know that the majority of women prisoners are incarcerated for non-violent crimes such as fraud or drug offenses. The majority of women in prison are mothers and most were the primary caretaker of their children prior to incarceration.

Being in a home or with a parent who experiences abuse is traumatic for children, and that trauma can have life-long consequences on the child's health and well-being. We also know that the best way to address the trauma and foster resiliency in children is by supporting the non-abusive parent with the child.

The Healthy Start Act will allow women who are pregnant or immediately postpartum to be placed into community alternatives, provide them treatment and programming for the duration of their pregnancy and for up to one-year postbirth, and allow for the child to be near their mother for the first year of their lives. This will result in better outcomes for both children and for their mothers during such a critical time in a child's life and development. We urge you to support HF1403/SF1315 – the Healthy Start Act.

Sincerely,

Liz Richards Executive Director Violence Free Minnesota Katie Kramer Policy Director Violence Free Minnesota



March 4, 2021

RE: Support of Healthy Start Act (HF 1403/SF 1315)

Members of the Minnesota Legislature:

Think Small would like to offer support for the Healthy Start Act (HF 1403/SF 1315). Allowing pregnant women to access parenting supports and time to bond with their new baby is essential to starting children on a positive trajectory.

Think Small commits to championing policies and practices of equity that empower a just, inclusive, and equitable care and education system for children in their crucial early years. Our goal is to ensure every child in Minnesota is ready for kindergarten.

A huge barrier to kindergarten readiness is Minnesota's large K-12 achievement gaps when comparing White children to children of color. These achievement gaps begin early, rooted in opportunity gaps, that is, the lack of sufficient high- quality early childhood experiences. The Healthy Start Act would give more mothers the opportunity to bond with their children at birth and form healthy attachments, which is crucial for healthy development. Because Black and Native women are disproportionately represented in Minnesota prisons, this policy change could lead to more equitable early opportunities to help target these disparities and close gaps.

Building brains begins at birth, and we know that children who have a positive attachment with their mother or primary caregiver from birth are more likely to thrive. By ensuring expecting and new parents are supported from the start, we can help remove barriers to later success. We support The Healthy Start Act as one way to decrease disparities and build healthy connections from the beginning.

In addition, as State Early Learning Scholarship Area Administrators for Hennepin and Ramsey County, we are committed to working with this program in helping families in Hennepin and Ramsey County access early learning scholarships to encourage healthy child development.

Sincerely,

Bailma Jates

Barbara Yates President and Chief Executive Officer



March 3, 2021

Re: HF 1403 Healthy Start Act

Dear Chair Mariani and Committee Members:

The Ramsey County Board of Commissioners is proud to offer our support to HF 1403 (Becker-Finn), a bill that allows the Commissioner of Corrections to place women who are pregnant or immediately postpartum into community alternatives such as halfway houses, supervise them in accordance with current statute, and provide them treatment and programming in the placement location for the duration of their pregnancy and for up to one year post-birth to allow for the child to be near their mother for the first year of their lives.

Helping mothers establish parental bonds at the beginning and throughout their pregnancy is one of the best and most preventive steps we can take as a state and society, to ensure the health of mothers and their children. It makes sense economically as well. Research points to returns on investment, as infants' early experiences contribute to shaping developmental milestones that later help them in life.

We are aware of the stark disparities experienced by women sentenced to serve in the Minnesota prison system. They are disproportionately women who lack strong connections to early care and support, which we know makes an incredible difference in a child's growth, development and life trajectory. Our county has made a commitment to birth equity through resource allocation and partnerships. Beginning as early as possible is a worthwhile investment.

For more than a century, Saint Paul-Ramsey County Public Health has served pregnant and parenting women and their families. Our evidence-based and evidence-informed programming crosses boundaries to connect the youngest Minnesotans with the resources to have a healthy start in life. We strongly support the Healthy Start Act and urge committee members to support it. Please feel free to contact Melissa Finnegan (651-278-8374) with any questions regarding this request.

Thank you,

Commissioner Toni Carter Ramsey County Board Chair

To:Members of the Minnesota LegislatureFrom:Elders for InfantsSubject:HF1403/SF1315Date:March 3, 2021

Elders for Infants strongly support the Minnesota Department of Corrections' Healthy Start Act that was recently introduced in both the Minnesota House of Representatives (HF1403) and Minnesota Senate (SF1315).

We endorse the Healthy Start Act (HSA) for several reasons. The bill provides flexibility for the Commissioner of Corrections to develop policy alternatives for non-violent offenders. The bill reflects scientific consensus. The bill respects the rights of infants to attach to their mothers, and of mothers to bond with their babies. The bill saves money in the long run.

We applaud the work of countless people who have contributed to this legislation. We urge your consideration and approval of HF1403/SF1315.

Thank you.

Elders for Infants

Glenace Edwall Dave Ellis Sandy Heidemann Jane Kretzmann Jim Nicholie Glen Palm Mary Kay Stranik Katie Williams