

# **Breastfeeding in the Criminal Justice System**

**New Mexico Legislative Criminal Justice Reform Subcommittee  
May 28<sup>th</sup>, 2014**

**Stephanie Andrews, RN, International Board Certified Lactation Consultant  
Esperanza Dodge, MSW- Young Women United**



# Objective & Outline:

Objective: Share expertise and recommendations towards improving access to breastfeeding and breast milk within New Mexico's criminal justice system

- Introduce Recommendations
- Background and Context
  - Benefits to Breastfeeding
  - Intersection of Breast Milk and Criminal Justice System
- Deeper Look at Recommendations
- Larger Considerations
- Next Steps
- Questions and Discussions

# Recommendations:

- 1) Add pregnancy and lactation status as factors that shall be considered during determination of conditions for release and bond
- 2) Add consideration for electronic monitoring, as time served through house arrest with conditions, at sentencing for those with documented pregnancy or lactation status
- 3) Require detention facilities to create a policy suited to their capacity and population needs that allows for inmates that are lactating to express milk for the purpose of maintaining breast milk supply and/or safely providing breast milk for their infant
- 4) Require Children Youth and Families Department to develop a policy regarding breastfeeding and breast milk for families involved in CYFD's prevention, intervention, rehabilitative and after-care services, based on American Academy of Pediatrics guidelines

# Benefits to Breastfeeding & Breast Milk:

- Improved maternal, infant, and child health outcomes
- Reduces infant health problems and hospital admissions
- Nurtures a baby's immune system
- Provides full and high quality nutrition for babies
- Breastfeeding promotes attachment and bonding between mother and infant
- Cost savings: If 90% of babies in the United States were exclusively breastfed for 6 months, a projected 900 deaths would be prevented, with an annual health care savings of \$13 billion dollars

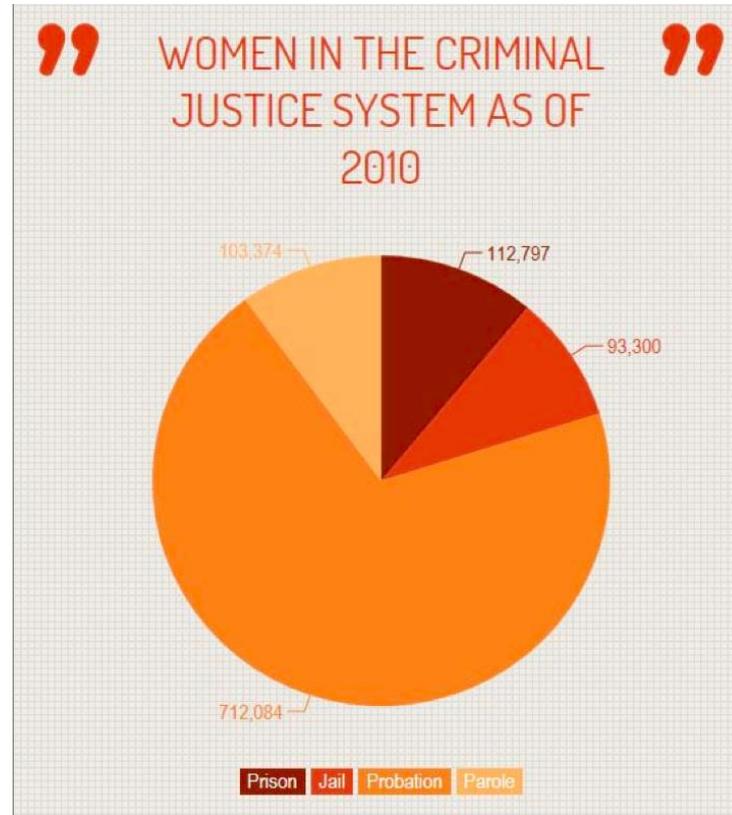
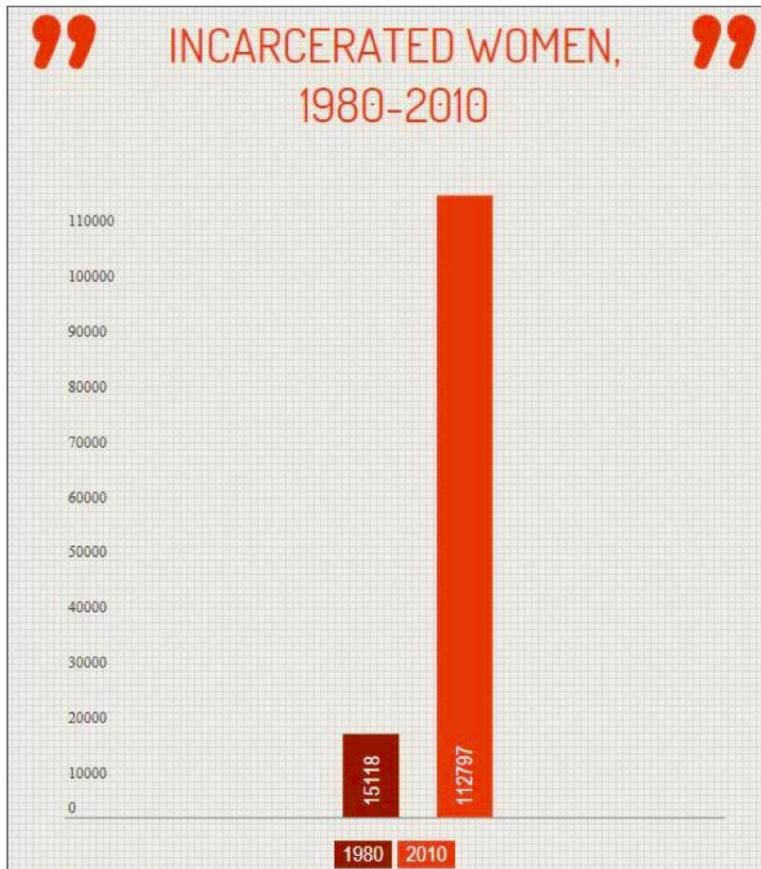
# **Breastfeeding and breast milk reduces rates of acute and chronic conditions in children, including:**

- Childhood Obesity
- Type 2 Diabetes
- Asthma
- Sudden Infant Death Syndrome
- Leukemia
- Ear Infections
- Eczema
- Diarrhea and Vomiting

# **Breastfeeding reduces rates of acute and chronic conditions for lactating adults, including:**

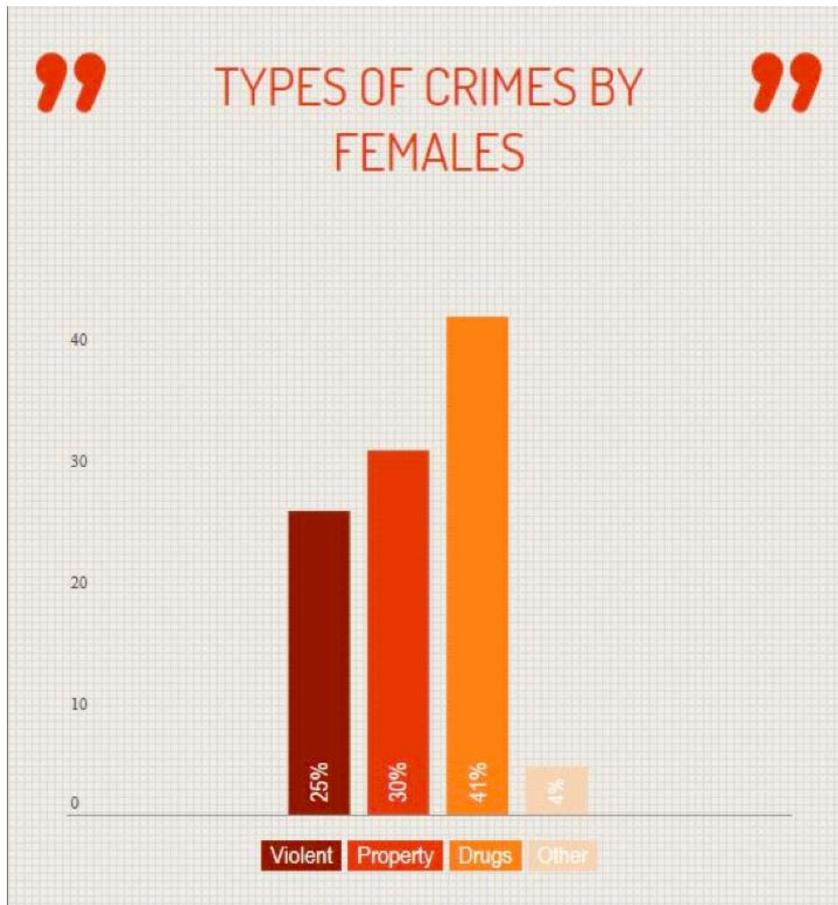
- Postpartum Depression
- Heart Disease
- Breast Cancer
- Ovarian Cancer
- Type 2 Diabetes
- Osteoporosis

# National Data on Incarcerated Women



- Between 1980 and 2010, the number of women in prison has increased by 646% (The Sentencing Project, Research and Advocacy for Reform-[www.sentencingproject.org](http://www.sentencingproject.org))

# Types of Crimes by Females 2010



- Majority of women are incarcerated for drug and property offenses

Women 2012 admissions, NM Women's Prison---  
Presented by Women's Justice Project, April 2014

# **Pregnancy in the criminal justice system**

- Pregnancies among incarcerated women are often high-risk and impacted by low rates of prenatal care, poor nutrition, domestic violence, mental illness, and perinatal substance use (ACOG Committee Opinion)
- On average, 6-10% of incarcerated women are pregnant, with the highest rates in local jails (ACOG Committee Opinion)

## **American College of Obstetricians and Gynecologists Committee Opinion**

“...incarcerated mothers wishing to breastfeed should be allowed to either breastfeed their infants or express milk for delivery to their infant. If the mother is to express her milk, accommodations should be made for freezing, storing, and transporting the milk. This can be difficult to facilitate and is another argument for prison nurseries or alternative sentencing of women to community-based non institutional settings.”

Health Care for Pregnant and Postpartum Incarcerated Women and Adolescent Females,  
Number 511, November 2011

# **Working Group Recommendation One**

**1) Add pregnancy and lactation status as factors that shall be considered during determination of conditions for release and bond**

(Section 7-401. Bail. B. Factors to be considered in determining conditions of release)

# Working Group Recommendation Two

**2) Add consideration for electronic monitoring, as time served through house arrest with conditions, at sentencing for those with documented pregnancy and/or lactation status.**

If the pregnant/lactating candidate for electronic monitoring does not have the financial means to pay for electronic monitoring, the court shall waive the fee.

The person facing sentencing must have a letter or statement in her medical record from her OB healthcare provider stating that the provider supports the decision to breastfeed based on medical best practices, including those for breastfeeding and substance abuse.

Consideration shall not apply to persons with charges or convictions of child abuse.

148 N.M. 89 , 230 P.3d 836 , 2010 -NMCA- 017

STATE of New Mexico, Plaintiff-Appellant, v. Clyde WOODS, Defendant-Appellee.

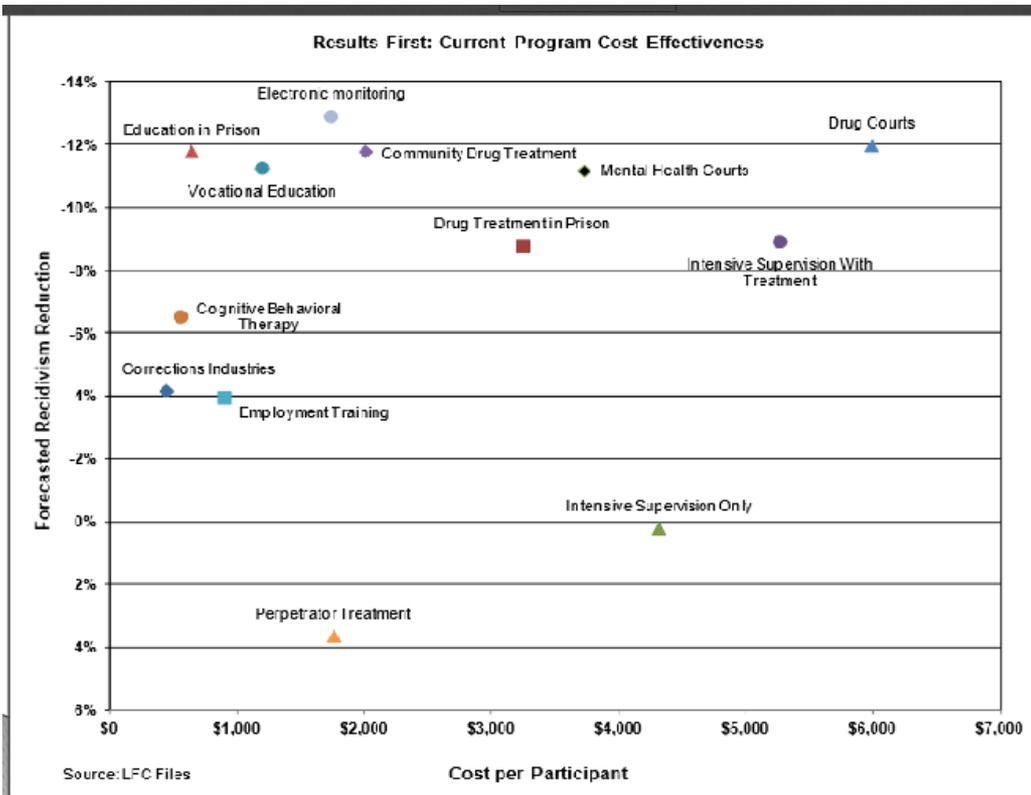
No. 28,289.

Sept. 30, 2009.

Certiorari Denied, No. 32,031, Jan. 7, 2010.

Court of Appeals of New Mexico.

# Results First: Current Program Cost Effectiveness



Legislative Finance Council,  
Presentation to Criminal  
Justice Reform Subcommittee  
on Fiscal Impact of Criminal  
Justice System, April 2014

# Estimated Cost Per Inmate, Corrections:

Corrections Department Average Cost Per Inmate / Client-Slot FY01 and FY13 Comparison			
Institution / Program	FY01 Average Annual Cost Per Inmate/ Client-Slot	FY13 Average Annual Cost Per Inmate/ Client-Slot	Cost Per Day (In \$'s)
Total Department Operated Facilities	\$ 33,595	\$ 40,931	\$ 112.14
Private Prisons (Females)	\$ 24,480	\$ 29,528	\$ 80.90
Private Prison (Males)	22,787	29,242	80.11
<b>Institution Totals</b>	\$ 29,333	\$ 35,631	\$ 97.62
Community Corrections	\$ 10,746	\$ 1,539	\$ 4.22
Residential Treatment Center Programs (Females)			
Albuquerque		\$ 30,135	\$ 82.56
CC Residential Treatment Center Programs (Males)			
Los Lunas		\$ 22,197	\$ 60.81
Probation & Parole (Less ISP)	\$ 1,381	\$ 2,678	\$ 7.34
Intensive Supervision Program	\$ 4,785	\$ 7,206	\$ 19.74
<b>Probation &amp; Parole/Community Corrections Totals</b>	\$ 1,890	\$ 2,984	\$ 8.17

Legislative Finance Council  
presentation to Criminal  
Justice Reform Subcommittee  
on Fiscal Impact of Criminal  
Justice System, April 2014

# **Working Group Recommendation Three**

3) Require detention facilities to create a policy suited to their capacity and population needs that allows for inmates that are lactating to express milk for the purpose of maintaining breast milk supply and/or safely providing breast milk for their infant.

# Working Group Recommendation Four

4) Require CYFD to develop a policy regarding breastfeeding and breast milk for families going through their prevention, intervention, rehabilitative and after-care services, based on American Academy of Pediatrics guidelines.

# Larger Considerations

- Pregnancy and Substance Use
  - HM 14
  - We are More Than Addiction
- Investing in Family Relationships and Well-being
  - Mama/Baby Units in Correctional Facilities

# Next Steps: Continuing the Conversation

- More data requested across detention facilities:
  - Policies and costs on pregnancy assessment and pregnancy related care (prenatal, labor and delivery, postpartum, and lactation)
  - Pregnancy Rates
  - Convictions of pregnant and lactating inmates

# **Working Group Collaborative Partners**

- NM Breastfeeding Task Force
- Young Women United
- Milagro
- PB&J Family Services
- Nourish The Dream

# Contact information for presenters:

Esperanza Dodge, [edodge@youngwomenunited.org](mailto:edodge@youngwomenunited.org)

Young Women United, [youngwomenunited.org](http://youngwomenunited.org)

Stephanie Andrews, RN, IBCLC, [sandrews424@comcast.net](mailto:sandrews424@comcast.net)

New Mexico Breastfeeding Task Force

# Citations for Benefits of Breastfeeding

Breastfeeding and neonatal abstinence syndrome:

Bailain, Munisha; Johnson, Kathryn, "Neonatal abstinence syndrome: the role of breastfeeding", *Infant (INFANT)*, 2014 Jan; 10 (1): 9-13. (40 ref).

Pritham, U.A. ; "Breastfeeding Promotion for Management of Neonatal Abstinence Syndrome" *JOGNN: Journal of Obstetric Gynecologic and Neonatal Nursing*, 2013 Sep-Oct: 517-526.

Breastfeeding overall:

<http://www.ncbi.nlm.nih.gov/books/NBK52680/>

Pediatric:

SIDS - Hauck, et al, "Breastfeeding and Reduced Risk of Sudden Infant Death Syndrome: A Meta-analysis," *Pediatrics* 2011;128;103;

<http://pediatrics.aappublications.org/content/128/1/103.full.html>

Obesity - Crume, TL, et al, "Long-Term Impact of Neonatal Breastfeeding in Childhood Adiposity and Fat Distribution Among Children Exposed to Diabetes in Utero," *Diabetes Care* March 2011;34:3;641-645.

Maternal:

Ovarian Cancer - Titus-Ernstoff, et al, "Breast-feeding the Last Born Child and Risk of Ovarian Cancer," *Cancer Causes Control* (2010) 21:201-207.

Breast Cancer - Gajalakshmi, V, et al., "Breastfeeding and breast cancer risk in India: A multicenter case-control study," *Int. J. Cancer*: 125, 662-665 (2009)

Heart Disease - —Schwarz, E.B., et al., Duration of Lactation and Risk Factors for Maternal Cardiovascular Disease, *Obstet Gynecol.* 2009 May; 113(5): 974–982.

Depression - —Kendall-Tackett, K., Cong, Z., Hale, T.W., "The Effect of Feeding Method on Sleep Duration, Maternal Well-Being, and Postpartum Depression," *Clinical Lactation*, Vol. 2-2, 2011.

Depression - °Dennis, C, McQueen, K, The Relationship Between Infant-Feeding Outcomes and Postpartum Depression: A Qualitative Systematic Review, *Pediatrics* Vol. 123:4, April 2009.