

PASS LEGISLATION THAT STOPS THE SHACKLING OF INCARCERATED WOMEN DURING LABOR AND CHILDBIRTH

Restraining a pregnant woman can pose undue health risks to the woman and her pregnancy.

Shackling pregnant women is dangerous and inhumane. Restraining prisoners and detainees increases their chances of accidentally tripping or falling, and harming their pregnancies. During labor and postpartum recovery, shackling can interfere with appropriate medical care and can be detrimental to the health of the woman and her newborn child.

Freedom from physical restraints is especially critical during labor, delivery, and during postpartum recovery.

Women often need to move around during labor and recovery, including moving their legs as part of the birthing process. Restraints on a pregnant woman can interfere with the medical staff's ability to appropriately assist in childbirth or to conduct emergency procedures.

The vast majority of female prisoners are non-violent offenders who pose a low security risk—particularly during labor and postpartum recovery.

In the states that have outlawed shackling of pregnant inmates, there have been no documented instances of a woman in labor or delivery escaping or causing harm to themselves, security guards or medical staff.

It is cruel and unusual punishment to shackle a pregnant woman during labor and delivery.

Shackling a woman during labor demonstrates a deliberate indifference to a prisoner's serious medical needs, and constitutes cruel and unusual punishment, running counter to long-established Supreme Court precedent protecting prisoners' constitutional rights.

National correctional and medical associations oppose the shackling of pregnant women because it is unnecessary and harmful to a woman and her pregnancy.

The Federal Bureau of Prisons,¹ the U.S. Marshals Service,² the American Correctional Association,³ the American College of Obstetricians and Gynecologists,⁴ and the American Public Health Association⁵ all oppose shackling women during labor, delivery, and postpartum recovery is unnecessary and dangerous to a woman's health and well being.

International human rights bodies have repeatedly expressed concern about policies that permit the shackling of pregnant and birthing women.

Both the Human Rights Committee and the Committee Against Torture at the United Nations, as well as Amnesty International, have recommended an end to shackling women prisoners and detainees during pregnancy and postpartum recovery

WHAT CAN YOU DO

Join the 6 other states that have passed laws restricting the use of restraints on women during pregnancy, labor, delivery, and/or during postpartum recovery:

**Illinois (2000)
Vermont (2007)
New York (2009)**

**California (2006)
New Mexico (2009)
Texas (2009).**

Enact Legislation during the 2010 session of the Georgia General Assembly that stops this medically unsafe practice.

**For more information
Visit: www.acluga.org
Call : Marlyn Tillman 404-983-6437**

¹ Fed. Bureau of Prisons, Program Statement: Escorted Trips, No.5538.05 at § 570.45 (Oct. 6, 2008), *available at* http://www.bop.gov/policy/progstat/5538_005.pdf.

² U.S. Marshals Serv., Policy 9.1 (Restraining Devices) §§ (D)(3)(e), (h) (as amended in 2008).

³ *ACA File No. 2008-023*, STANDARDS COMM. MEETINGS MINUTES, ACA 138TH CONG. OF CORR. (Am. Corr. Ass'n, New Orleans, La.) Aug. 8, 2008 at 62, *available at* http://www.aca.org/standards/pdfs/Standards_Committee_Meeting_August_2008.pdf.

⁴ Letter from Ralph Hale, Am. Coll. Obstetricians & Gynecologists, to Malika Saada Saar, The Rebecca Project (June 12, 2007) *available at* <http://www.acog.org/departments/underserved/20070612SaarLTR.pdf>.

⁵ AM. PUBLIC HEALTH ASS'N TASK FORCE ON CORR. HEALTH, STANDARDS FOR HEALTH SERVICES IN CORRECTIONAL INSTITUTIONS 108 (2003).