

Solitary and Shackled

Injustices within Oregon's women's prison.

Pregnant Oregonians imprisoned at Coffee Creek Correctional Facility in Wilsonville, the state's only women's prison, are still shackled during labor. Women are routinely put in solitary confinement upon entering prison. Oregon has no program for keeping infants and moms together, so bonding and breastfeeding cannot occur.

These and other topics will be presented at the "Women in Prison" symposium on Friday, Nov. 21, in Rm. 110 of the UO Law Center. The symposium is co-sponsored by The Portia Project and the UO Women's Law Forum. The Portia Project, a nonprofit formed two years ago by prison reform advocate Carole Pope and UO law professor Barbara Aldave with a UO Morse Center grant, assists women incarcerated in the state of Oregon.

A large component of the Portia Project's work has been to develop a booklet that informs imprisoned women who are mothers of young children about their rights and responsibilities as parents and to assist them in maintaining legal custody of their children. (See story on how new foster care laws are affecting women inmates in *EW* archives, "While Mom's Away," 1/9/03). The Project also works for the release of women prisoners who may have been wrongfully convicted or who have demonstrated they are fully rehabilitated and ready to return to the free world. It also educates the public about the problems presented by the rapid growth of the U.S. prison population.

Aldave points to the injustices suffered by women inmates, many of which will be outlined through papers presented at the symposium. For example, being placed in solitary confinement is status quo. "They come in and are routinely

sentenced to solitary confinement for the first week or two just to sit and reflect. Every other country considers that cruel and unusual. Women go bonkers without stimulation," she says.

Another paper outlines the routine shackling of pregnant prisoners during labor. "I found it fascinating how many prisons still shackle women while in labor as if they're going to escape and run off the table," says Aldave.

Written by second year law student Moe Spencer, the paper comprehensively outlines the treatment of pregnant women prisoners in the U.S. and focuses specifically on Oregon's women's prison. He interviews a Coffee Creek inmate, Whitney, as well as a doctor and a prison administrator.

Approximately 5 percent of women offenders are pregnant when they go to prison. In Oregon, pregnant inmates who choose to continue their pregnancy receive obstetric care, including blood work, an HIV test and an ultrasound as soon as the pregnancy is confirmed. If an inmate chooses to terminate her pregnancy, she must pay for the abortion herself.

Prenatal vitamins are given to women as soon as their pregnancy is confirmed, but Spencer discovered that some women are not given pregnancy tests in a timely manner, even if they ask for them. Whitney, the new mom Spencer interviewed for his paper, didn't receive her pregnancy test until she was four months pregnant. Pregnant inmates don't receive special diets, but eat the same food that is based on nutrition analyses for men.

But of the information he presents, it's the practice of shackling that draws the most attention. From Spencer's interview with Whitney:

Q: Tell me about the shackling. Were you restrained whenever you went to the hospital at any time?

W: Yes. I was shackled, ankles and wrist, and with the waist belt, too. Those never came off.

Q: So, full-on?

W: Full-on! During the ultrasound I was still cuffed, but my hands were above my head, and I still had ankles on.

Q: What about after your water broke? Were you restrained at all?

W: I had the wrists on. I was cuffed.

Q: All the way to the hospital?

W: Yes, and when I got to the hospital they put me in a wheelchair and put a blanket over my wrist, so nobody could see that I was cuffed. They rolled me up to my room and then took them off. Now I know a lot of people stay shackled, but I worked hard to earn a good status and to be real respectful to everybody, you know, so that everybody trusts me. So I didn't have to have restraints after I had her. Normally, you would have been restrained again, but they did not put the restraints back on because they know I'm not going anywhere.

Whitney's situation was unique. Because she was due to be released soon after the birth of her baby, she was also allowed to see and nurse her baby three times a week — "the first time that's ever been allowed," she says. According to Lory Humbert, assistant superintendent of Program Services at Coffee Creek, Oregon has improved its rules regarding shackling to reduce the danger to mother and child.

"You have to understand what normal is," says Humbert. Normal is for any offender, male or female, when out of prison, to have leg restraints around each ankle with a short chain for restricted walking, as well as belly restraints, consisting of a chain that encircles the waist, and

off of that two cuffs encircling the wrists, with a very short length for minimal maneuvering of hands and arms.

But pregnant women who've started labor are taken to the hospital in handcuffs attached in front, not back.

"You have to understand nobody is cuffed to the front," says Humbert. "That's abnormal in and of itself — it really is the minimal amount."

During actual birth, the handcuffs are removed. But they are put back on as soon as the mother has given birth. Some women have leg restraints put on — the chain is attached to the bed post — while they are in the recovery room.

The doctor makes the decision as to when the postpartum woman is well enough to be restrained. "Whenever a prisoner is away from a secure facility there is a danger of escape or assault — a very real danger," says Humbert. But the doctor making the decision is not informed of the woman's crime; whether she's a mass murderer or is in for identity theft.

"I think it's a shock to everyone; the shackling thing is just the prison going with the status quo," says Spencer. "There's no legislation saying you shouldn't do it, but plenty says you should do it for regular inmates."

Illinois is the only state that has legislation against the practice.

Oregon has no infant/mom residential type program, so after birth, the baby is taken away and placed either with a family member or with the state foster care system.

Some moms get to have their infants visit a couple of times a week if the care provider is able and willing to bring the child, but not to breastfeed. Humbert says, "Nursing is not a normal practice within the Department of Corrections."

The free symposium runs from 10:30 am to 5 pm. The keynote speaker will be Joan Palmateer, newly appointed administrator of all Oregon prisons. **EW**



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