

Pregnancy in Prison Statistics (PIPS): A Multi-Sector Research Collaboration

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Disclosure

- I have no actual or potential conflict of interest in relation to this presentation.

Pregnancy in correctional settings

- 220,000 women behind bars in U.S.
- Unique medical, social, and legal issues
- Meta-analysis, lawsuits and media reports suggest worse outcomes than general population
- Outdated and incomplete systematic data
- Data → scope of problem, help improve services

How common are pregnancy and childbirth in custody?

- 6-10% of incarcerated women pregnant
- Women who report being pregnant at intake:
 - 5% (@4,700) of women in jail
 - 4% (@ 4,052) of women in state prison
 - 3% (@ 411) of women in federal prison
- 1400 births per year

1999 BJS report
on women in
custody

2004 and 2005 BJS
inmate surveys
Self-report
Representative sample

1998 ACA survey of 43
state prisons

Pregnancy in Prison Statistics



- Monthly pregnancy outcomes reporting x 12 months
- Baseline services and policies survey
- Focus on prisons and large jails
 - Target DOCs > 2000 females

PIPS Outcomes

Tier 1:

Pregnant admissions/count
Live births (term/preterm)
Stillbirths (term/preterm)
Miscarriage, abortion, ectopic
C-section/vaginal delivery
Maternal & neonatal deaths

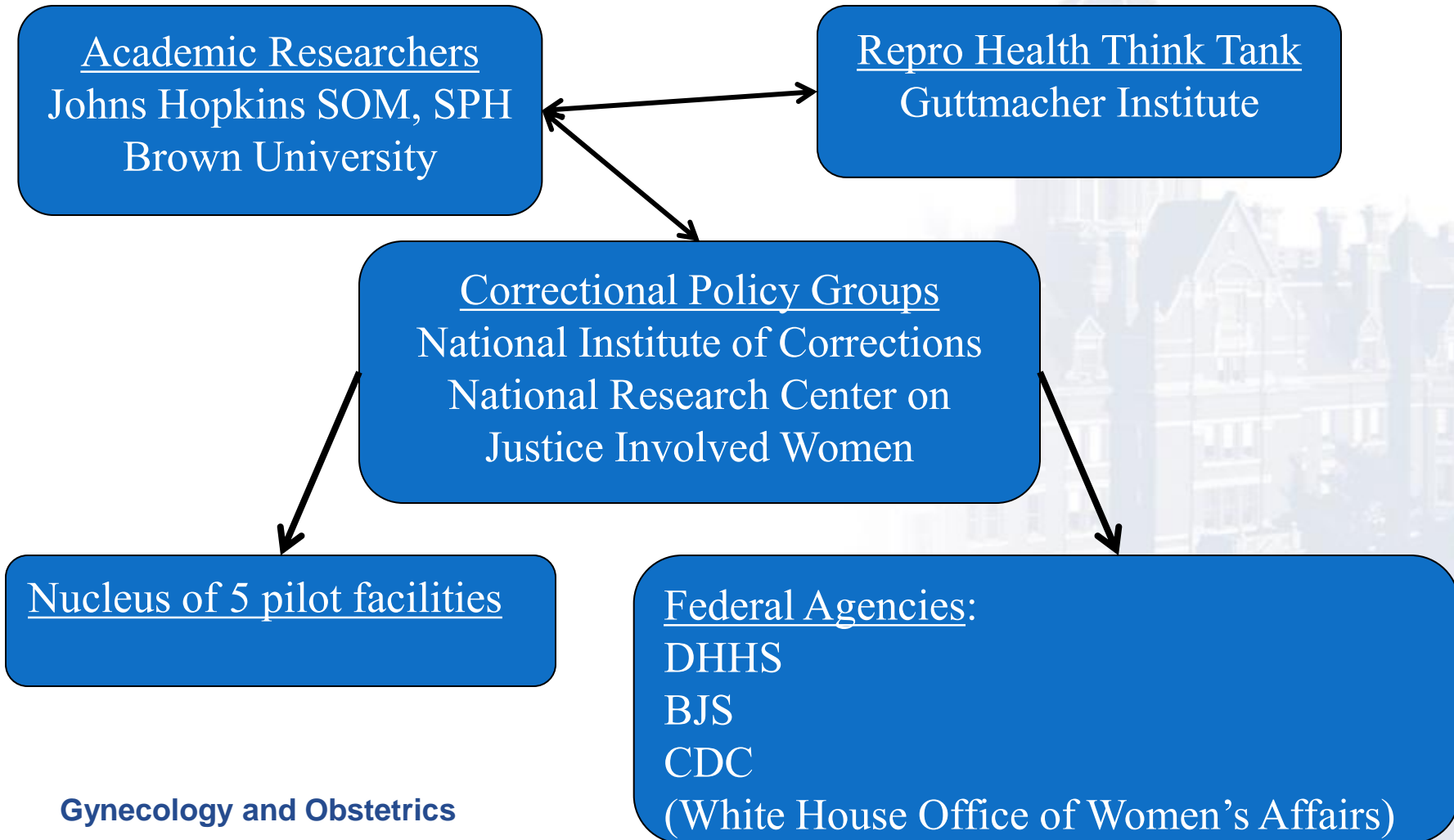
Tier 3:

Medical and psych comorbidities
Postpartum depression
Breastfeeding
SUD and MAT
Conception in custody
Requests for abortion

Tier 2:

Infant placement
NICU stay
Tubal ligations

PIPS Collaboration: Who?



PIPS Collaboration: What?



- Pilot facilities: content of survey, overall design, feedback on process
- NIC, NRCJIW: CONTACTS!!
- Gov't agencies: policy discussions

Pilot Study Sites

- MA (n=602)
- WA (n=881)
- MD (n=825)
- RI (n=158)
- LA County Jail (n=2320)

Pilot results (3 months): Tier 1 Pregnancy Outcomes

Outcome	All facilities	Prisons (n=4)	Jail (n=1)
Admissions of pregnant women	109	35	74
Monthly average admissions	36.3	11.7 (2-13)	24.7 (12-42)
Average monthly total pregnant women	61	19.3	41.7
Live births	11	7	4
Miscarriages	2	0	2
Abortions	9	2	7
Ectopics	1	1	0
Vaginal delivery	7	5	2*
C-section	2	2	0*

There were zero of the following outcomes: pre-term birth; stillbirth; maternal death; neonatal death

*Missing data

Pilot results: Select Tier 2&3

Outcome	Prisons (n=4)
Monthly average Postpartum women	1.5 (0-7; median=0.5)
Breastfeed/pump	6*
PP depression	1
Infant to family	1
Infant to foster	1
Infant to prison nursery	4*
Infants to NICU	1
Diabetes	1
On MAT (all methadone)	14
Opiate detox with meds	11

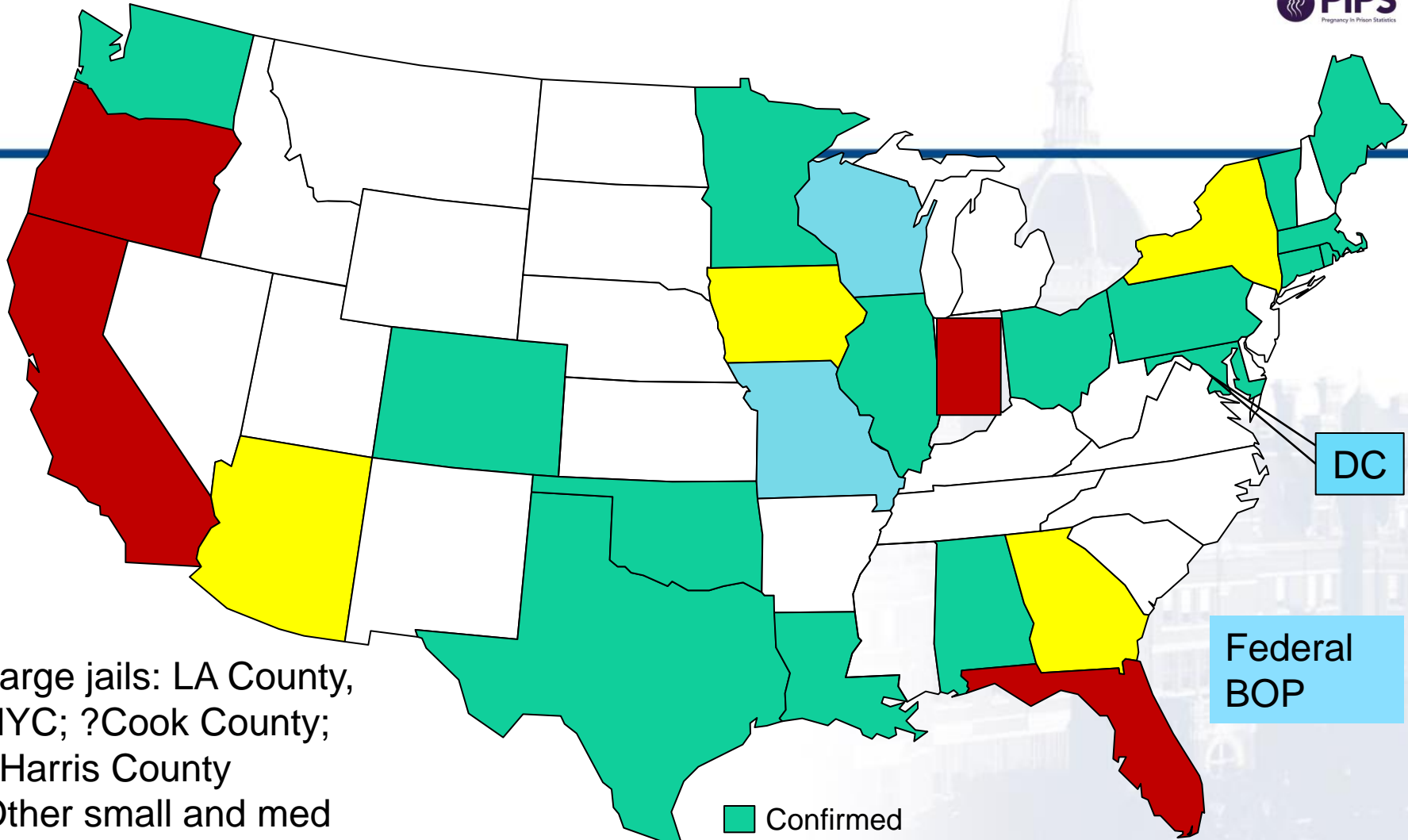
No pregnant women in prison had hypertensive disorders

*All BF women and prison nursery babies were at one facility

Phase 2 plan

- Revisions to survey based on pilot
- Recruit prison systems and select jails
 - Through NIC, NRCJIW
 - Snowball sampling through other networks
- 12 (+1?) months of reporting
- Each participating system will receive end of study site report

Phase 2 Recruitment



Large jails: LA County, NYC; ?Cook County; ?Harris County
Other small and med jails: CA, ME, MA, DC

Federal BOP

- Confirmed
- Considering
- No
- Awaiting response

Challenges & strengths

Challenges

- Not all 50 DOCs
- Random inclusion of jails and 2 juvenile facilities
- Facilities concerned about time
- Reporting person may not be from medical
- Recruitment

Strengths

- Enthusiasm from correctional facilities and various agencies
- Multi-sector collaboration lends legitimacy and policy opportunities
- Any data is better than none

Implications

- Data to illuminate scope of problems
- Raise awareness of pregnancy amid discussions of criminal justice system reform
 - Standardization of care
 - Alternatives to incarceration
- Inform national, ongoing data collection system
 - HR 759

References

1. Todd Minton and Zhen Zeng. 2015. Jail inmates at midyear 2014; NCJ 248629. Bureau of Justice Statistics. FEMALE: 108,800. This is a 7% increase. Not accounted for by a drop in women in prison, because women in prison also increased from 2013 to 2014!
2. E. Ann Carson. 2015. Prisoners in 2014. NCJ 248955. BJS.
3. U. S. General Accounting Office. Women in prison: Issues and challenges confronting U.S. correctional systems. Washington, DC; 1999. Report No.: GAO/GGD-00-22.
4. Greenfeld L, Snell T. Women Offenders. Washington, DC: Department of Justice, Bureau of Justice Statistics. Report No. NCJ 175688.
5. Maruschak L. Medical Problems of Jail Inmates. Washington, DC: Department of Justice, Bureau of Justice Statistics; 2006. Report No. NCJ 210696.
6. Maruschak L. Medical Problems of Prisoners. Washington, DC: Department of Justice, Bureau of Justice Statistics; 2008. Report No. NCJ 221740.
7. Knight M, Plugge E. The outcomes of pregnancy among imprisoned women: a systematic review. BJOG: an international journal of obstetrics and gynaecology. 2005;112(11):1467–1474.