



**Senate Judiciary Committee  
October 23, 2019**

Chairman Eklund, Vice Chair Manning, Ranking Member Thomas, and Members of the Ohio Senate Judiciary Committee, thank you for the opportunity to submit written proponent testimony for Senate Bill 18.

With patient care, research, and education as our foundation, UC Health is at the forefront of medicine. We conduct groundbreaking research that leads to new treatments and cures, train the next generation of physicians and medical professionals, and pioneer new ways to deliver highly specialized, complex subspecialty care that would not otherwise be available to patients in our region. In addition to our focus on delivering better, safer and smarter care, we also commit to our community's health, improving the physical and economic health of our community.

As the region's only adult academic medical center we are deeply invested in ensuring that every woman has a healthy pregnancy and birth outcome. SB 18 helps to move this mission forward by ensuring that incarcerated women are not subject to the medically harmful and unnecessary action of restraints during pregnancy. Major law enforcement organizations including the U.S. Marshals Service, the Federal Bureau of Prisons, the American Correctional Association and the National Commission on Correctional Health Care have all come out against the use of restraints, or shackling, of pregnant women. The American College of Obstetricians and Gynecologists (ACOG) strongly supports the efforts to support these organizations and oppose the use of restraints of pregnant women.

At UC Health we are the primary providers of care for the city's incarcerated women during their pregnancies. We aim to provide the high standard of care to these patients as we do to all of our patients. Our goal as Obstetrician-Gynecologists is to improve the health and well-being of our patients. However, there are a number of specific health conditions of pregnancy that the use of restraints directly increases risks for pregnant women including the development of blood clots due to decreased mobility. Furthermore, shackling during labor can potentially affect the normal progress of labor given the lack of mobility and ability to quickly move patients in an emergency situation. In the postpartum period both maternal and neonatal outcomes are improved with immediate bonding between mother and baby. The use of restraints directly inhibits this crucial bonding opportunity.

Each patient that we treat deserves dignity and respect. At UC Health we highly value our commitment to serving a diverse patient population. The act of shackling pregnant women takes away this dignity and is unnecessarily demeaning. SB 18 recognizes this value on human life by limiting the use of restraints to emergency situations.

We strongly stand in support of SB 18 and urge the legislature to join over twenty other states in supporting the rights of incarcerated women to have access to safe, healthy pregnancies.

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