



**PAUL DeWOLFE**  
PUBLIC DEFENDER

**KEITH LOTRIDGE**  
DEPUTY PUBLIC DEFENDER

**MELISSA ROTHSTEIN**  
DIRECTOR OF POLICY AND DEVELOPMENT

**KRYSTAL WILLIAMS**  
DIRECTOR OF GOVERNMENT RELATIONS DIVISION

**ELIZABETH HILLIARD**  
ASSISTANT DIRECTOR OF GOVERNMENT RELATIONS DIVISION

## **SUPPLEMENTAL EXPERT TESTIMONY FROM AN OPD LCSW-C**

**BILL: HB406 – Children in Out-of-Home Placements – Placement in Medical Facilities**

**COMMITTEE: Budget & Taxation**

**FROM: Maryland Office of the Public Defender**

**POSITION: Favorable**

**DATE: 03/30/2022**

The Maryland Office of the Public Defender respectfully requests that the Committee issue a favorable report on House Bill 406. This written testimony is intended to supplement the Maryland Office of the Public Defender's testimony in order to convey the substantial harms to youths who are held in hospital emergency departments.

Critical development takes place during childhood and adolescence, and youths require supportive caregiving, a stable environment, and opportunities for peer interactions in order to develop into functional adults. Most of our clients who are held in hospital settings beyond medical necessity are age 13-16. During this stage of development, significant changes occur as youths begin to learn abstract thinking, develop problem-solving skills, become concerned about the world around them, gain independence, and develop their identity, among other important development steps. In essence, this is the stage where youths start figuring out *how* to be an adult, the start of a decade-long journey into adulthood.

Youths are admitted to emergency departments for a variety of reasons pertaining to behavioral health, but in nearly every case, the youth is experiencing an acute psychiatric episode. The purpose of the admission to the emergency department is to stabilize the youth, as the episode they are experiencing is so severe that they cannot move forward in their development until the episode is resolved. Even the best psychiatric emergency departments cannot provide an appropriate setting for youth development. As such, when a youth remains at a hospital longer than is medically necessary, the negative impact of the hospitalization becomes dramatic.

It probably seems obvious to assume that a hospital is a safe place for a youth that cannot otherwise be placed by DSS, but this is categorically untrue. Youths are deprived of education, therapy, peer interactions, exercise, access to their own clothes and belongings, community engagement, privacy, and human contact outside of the staff members present during a given shift. Likewise, youths are exposed on a daily basis to adults experiencing delusions and hallucinations,

patients who expose themselves, situations where staff must physically manage aggressive patients, seeing other patients come and go, and overall, a generally high level of acuity among the other patients on the unit. The damage to vulnerable youths stuck in this situation cannot be understated. Youths are traumatized by the time spent in hospital overstay.

Years of research also demonstrates the harms of needless hospitalization on vulnerable youths. In the case of youths who are deemed aggressive, studies show that hospital overstay can actually increase aggressive behavior as a result of the stressful hospital conditions. Research also shows that the longer a youth stays in the hospital, the more they identify with negative beliefs about themselves and their abilities resulting in feelings of shame and inferiority; this is particularly damaging at an age when youths are trying to define their identity. Lastly, research shows a clear positive relationship between the length of a youth's hospital stay and the likelihood that a youth will be readmitted.

Our own clients have described lengthy hospitalizations as more akin to a prison setting than a place of therapeutic recovery. The environment is dehumanizing, traumatizing, and dangerous, and it deprives youths of the ability to develop into the functional adults that we hope will one day contribute to our communities. Instead, it causes delays in development that can have lasting impacts on individuals who will, in several years, undoubtedly become adults in need of treatment.

**For these reasons, the Maryland Office of the Public Defender urges this Committee to issue a favorable report on HB406.**

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**Submitted by: Maryland Office of the Public Defender, Government Relations Division.**

**Authored by: Lindsey Balogh, JD, MSW, LCSW-C**

**Advanced Social Worker, Mental Health Division**

**Maryland Office of the Public Defender**

**200 Washington Avenue, Suite 300**

**Towson, Maryland 21204**

**Office: 410-494-8130**