



Testimony of The Bloom Collective in Support of SB 0843, Perinatal Care - Drug and Alcohol Testing and Screening - Consent

My name is Tanay Lynn Harris, and I am the Director and co-Founder of The Bloom Collective, and we respectfully submit this written testimony in support of SB 0843, a bill that would require prior written informed consent by a pregnant or perinatal person for drug testing of themselves or their newborn. The Bloom Collective is a Black women led community based organization situated in Baltimore City, where we provide holistic care to mamas and birthing persons along the preconception, pregnancy and postpartum period.

SB 0843 would provide critical protections for pregnant and postpartum patients whose rights, privacy, and wellbeing are far too often disregarded by the hospitals in which they give birth. Hospitals routinely drug test perinatal patients without their knowledge or informed consent and are absent of any medical justification for the test. This practice is commonly known as “test and report” and has a negative impact on both maternal and infant health.

Test and report practices cause the unnecessary separation of mothers from their newborns, which causes incredible harm to families and children. We know that mothers/parents are a treatment and health care for their children. Furthermore, keeping children with parents can prevent trauma that might lead to chaotic substance use. Supporting pregnant and parenting people with their substance use is better for families than separating mothers from their children. These punitive practices disproportionately affect Black and Brown women and families, and Black women more often face prosecution for their pregnancies.¹

I was drug tested without my consent when giving birth to my son in 2015. I was completely unaware about the drug testing being done on me until I did my first Covid-19 test at the Baltimore Convention Center, in 2020. Upon receiving my results, I saw an extensive list of drug testing done on me during my time of giving birth. Although the unconstitutionality of drug testing wasn't new to me and the stories I have heard from clients and community members - It was new information for me to process, and a retraumatization about my birthing experience. I thought to myself, what would my life be like if for a moment I decided to partake in substance or drink a glass of wine. Perinatal mood and anxiety disorders were a very real part of my pregnancy and postpartum journey, and I could easily have looked for an escapism.

¹ Lynn M. Paltrow & Jeanne Flavin, *Arrests of and Forced Interventions on Pregnant Women in the United States, 1973–2005: Implications for Women's Legal Status and Public Health*, 38 J. HEALTH POLITICS, POL. & L. 299, 310-11. (2013)

Our clients and people in my community have growing concerns about the quality of their care in the hospital setting, and the blatant disregard for their humanity because of racism and bias from providers. Such oversight and deficit based mother blame narratives are a deterrent from mothers getting the perinatal care and support they need, deserve and desire because they are frightened. Rather than looking at the systems and structures that have created hard outcomes, our society has deemed people as unworthy because of how they respond to harm, oppression and trauma that is historically and institutionally embedded in our society. This disregard further increases maternal and neonatal health challenges and breaks down familial, social and communal ties for mother and baby. What if we rather ensured they had all they needed to live their most joyful and fulfilled lives?

Giving families the opportunity to have meaningful and informed consent prior to drug testing them, can offer them the opportunities to seek support. It also starts to repair the broken bonds between pregnant people and the medical system.

Obtaining informed consent can help build a world where the dignity and integrity of all families is valued and supported. We must end racial inequity in the surveillance and criminalization of drug use and stop the womb to foster care pipeline. We must invest in our communities, not drug war tactics.

- **Between 2004 and 2014**, foster systems spent between \$29 billion and \$32 billion every year in federal, state, and local dollars on child welfare surveillance and control.²
- In the drug war waged by the foster system, the federal government poured unprecedented federal funds into reimbursing states for the costs of removing children (mostly Black, Latinx, American Indian, and impoverished white children) from their parents' care.
- During this same period, funds for basic necessities for families such as drug treatment and associated healthcare, housing, child care, and so on remained constant and a fraction of what was available for removing children from their homes.
- These funds and corresponding regulations, often consolidated the relationship between medical care providers and policing agents like child services creating more infrastructure for reporting services than community support.
- The impact of funding reporting and the foster care system over supports for families has been disastrous.
- According to a recent report, by the [Center for the Study of Social Policy](#)³:
 - families of color are more likely to become involved in child protective services and they experience worse outcomes once they become involved.
 - a staggering 53 percent of Black children—and by extension their parents and families—will be investigated by child protective services, compared to 32 percent of Hispanic children, 28 percent of White children, 23 percent of Native American children, and 10 percent of Asian/Pacific Islander children.
 - Once investigated, children of color are more likely to be removed from their families.

² Lisa Sangoi, *"Whatever they do, I'm her comfort, I'm her protector."* *How the Foster System Has Become Ground Zero for The U.S. Drug War*, Movement for Family Power (June 2020).

³ Minoff, Elisa and Alexandra Citrin. "Systemically Neglected: How Racism Structures Public Systems to Produce Child Neglect." Center for the Study of Social Policy, March 2022.

- Once placed in foster care, Black and Indigenous children spend longer in foster care than White children, are less likely to reunify with their families, and are more likely to age out of care without a permanent connection to a loving adult.
- This is problematic, because when children are removed from their families, they lose important bonds and connections— whether it is to parents, siblings, aunts, uncles, grandparents, or more extended or fictive kin. Not only that, we know that foster care itself can at times be a site of harm and abuse.

Test and Reporting practices are a pipeline to a system that does more to prepare our children for incarceration than protection. Families need to be informed of the potential risks and benefits of drug tests. We believe that birthing people can, and do make good choices for the safety of their children. Moreover, we have the power to reimagine family safety and wellbeing, and ensuring that all birthing people have the right to informed consent is the first step.

Our families need support, not surveillance and separation. Supporting pregnant and parenting people with their substance use is better for families than separating mothers from their children. We support Senate Bill Number 0843 and ask that you support this Bill favorably, as it is an important step in honoring the rights and wellbeing of pregnant patients and families.

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