



SB 275 – Labor and Employment – Family and Medical Leave Insurance Program – Establishment

Committee: Finance

Date: February 10, 2022

POSITION: Support

The Maryland Coalition of Families: Maryland Coalition of Families (MCF) helps families who care for a loved one with behavioral health needs. Using personal experience, our staff provide one-to-one peer support and navigation services to family members with a child, youth or adult with a mental health, substance use or gambling issue.

MCF strongly supports SB 275.

Families who are caring for a child or other loved one with a mental illness frequently are desperate to provide for their needed care. If they have sick leave or vacation leave, it is often not enough to help with a seriously mentally ill child, spouse or parent. At the Maryland Coalition of Families, we have seen first-hand the added burden on families in crisis when they have to worry about their family's finances as well as the mental well-being of their loved one.

Just one example – it is not unusual for the parent of a child or adolescent with a serious mental illness who is in crisis to have to wait weeks in an emergency department until an inpatient bed is found for the child. If the child has co-occurring mental health and autism spectrum disorders, the wait could be for over a month. Some hospital emergency departments have the policy that a parent/caregiver must be in the room at all times with the child, except for brief breaks when a “sitter” can be found. The parent simply cannot go to work during this time. How awful is it that on top of their grave concern for their child, they must worry about their job and how they're going to pay the rent or mortgage that month.

It is not just families with a child in an emergency department for psychiatric reasons who face such dilemmas. Our family was in a similar position trying to care for our 16 year old son in the home. Our son, who was a severe self-injurer, could not be left alone lest he find a way to hurt himself. Owing to his severe mental illness, he would cut himself, burn himself, drink bleach, drink other household cleansers, or hit himself with a bat. There was simply no way of ensuring his protection without constant supervision, and we couldn't find (or afford) a full time baby-sitter for a 16 year old while we were at work.

Our hope was that as he continued with his mental health treatment and medications, his compulsion to hurt himself would go away, but we couldn't wait the months that this would take. Therefore I had to resign from my job to be with him full-time. After months he did improve, but by then I was out of the workforce and our families' finances had taken a considerable hit. We racked up thousands of dollars in credit card debt until I was able to find a new job and slowly start to rebuild our finances.

These are just two of many examples that could be given of families with a loved one with serious mental illness that would benefit from the Family Medical Leave Insurance program.

Therefore we urge a favorable report on SB 275.

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