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**President,**  
**Baltimore City Council**

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January 24, 2022

To: **Members of the House Health and Government Operations  
Committee**  
Re: **HB 48 – PUBLIC HEALTH – MARYLAND SUICIDE FATALITY  
REVIEW COMMITTEE**  
Position: **FAVORABLE**

Chair Pendergrass and Honorable Members of the Health and Government Operations  
Committee,

The Baltimore City Council Suicide Prevention Legislative Workgroup is composed of providers, survivors, advocates, faith leaders, elected officials, nonprofit organizations, educators, community leaders, and researchers dedicated to decreasing barriers Baltimore City residents face to access efficient and effective mental health services to support their mental health, and prevent suicides from occurring within our city.

**To this end, the Suicide Prevention Legislative Workgroup urges a favorable report on HB 48 - Public Health – Maryland Suicide Fatality Review Committee.**

Since the start of the public health crisis, Maryland has experienced what experts refer to as a “dual pandemic” of suicide and COVID-19. From February 2020 to March 2020, there was a 45% increase in calls to the Maryland Helpline. In March 2020 there was an 842% increase in texts to the Maryland Helpline<sup>1</sup>.

Populations at increased risk of death by suicide include frontline workers, people experiencing homelessness, migrants, victims of abuse and violence, the elderly, and “stigmatized groups” including adolescents and sexual and racial minorities<sup>2</sup>. Pandemic-related factors that increase risk of death by suicide include isolation, stigma and discrimination, increased work pressure, chronic stress, and difficulties in health care access, just to name a few<sup>3</sup>. Considering this dual crisis of COVID-19 and suicide, it is essential to establish a statewide committee to review suicide deaths and develop prevention strategies.

In Maryland, there is no process for the investigation and analysis of findings regarding deaths by suicide. Suicide deaths are significantly underestimated and poorly documented, which prevents experts from identifying risk factors. Suicide Fatality Review Committees are

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<sup>1</sup> [COVID-19 and Suicide: A Crisis Within a Crisis | Hopkins Bloomberg Public Health Magazine \(jhsph.edu\)](#)

<sup>2</sup> [‘The dual pandemic’ of suicide and COVID-19: A biopsychosocial narrative of risks and prevention \(nih.gov\)](#)

<sup>3</sup> [‘The dual pandemic’ of suicide and COVID-19: A biopsychosocial narrative of risks and prevention \(nih.gov\)](#)

multidisciplinary in nature, offering a deeper understanding of the circumstances surrounding a suicide. This bill would provide for a diverse Committee of healthcare providers, experts, suicidologists, and law enforcement representatives that would provide an invaluable assessment of suicide risk factors and prevention strategies.

The Suicide Prevention Resource Center (SPRC) recommends that states “identify, connect with, and strengthen existing data sources” as a best practice for suicide prevention<sup>4</sup>, specifically naming State Suicide Fatality Review Committees as strong data sources. Further, the U.S. National Strategy for Suicide Prevention recommends state-based suicide mortality reviews as best practice for decreasing suicide mortality.

COVID-19 will have a long-term negative impact on mental health and suicide risk, especially for Maryland’s most vulnerable residents. The establishment of a Suicide Fatality Review Committee will ensure that accurate, comprehensive suicide fatality data is collected and analyzed, ultimately preventing future deaths.

**The Baltimore City Suicide Prevention Legislative Workgroup thus urges a favorable report on HB 48- Public Health – Maryland Suicide Fatality Review Committee.**

Sincerely,



Nick J. Mosby  
President, Baltimore City Council

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<sup>4</sup> Suicide Prevention Resource Center. (2019). Recommendations for state suicide prevention infrastructure. Waltham, MA: Education Development Center, Inc