



March 8, 2022

The Honorable Luke Clippinger
Chairman, House Judiciary Committee
Room 101, House Office Building
Annapolis, MD 21401

House Bill 1120 - Correctional Services - Pregnant Incarcerated Individuals - Substance Abuse Assessment and Treatment - FAVORABLE

Dear Chair Clippinger and House Judiciary Committee members,

Baltimore Harm Reduction Coalition (BHRC) is an advocacy organization that mobilizes community members for the health, dignity, and safety of people targeted by the war on drugs and anti-sex worker policies. As a certified Overdose Response Program, Naloxone distributor, and syringe service program, we have provided essential health care services across the state for years. To supplement the life-saving services provided by us and dozens of harm reduction programs across the state, BHRC supports House Bill 1120 (Correctional Services - Pregnant Incarcerated Individuals - Substance Abuse Assessment and Treatment).

Due to over 145 years of criminalizing drug use, people who use drugs are over-represented in the carceral system where they are unlikely to receive adequate treatment and healthcare. House Bill 1120 would prioritize the health of pregnant people by requiring correctional facilities to screen all pregnant individuals upon intake for a substance use disorder. Upon a positive screening, that facility must immediately refer the pregnant individual to a behavioral health provider for full assessment.

BHRC supports HB1120 for prioritizing autonomy and access to care, which are essential elements of life-saving harm reduction practices. Under HB1120, once a full assessment is conducted, the pregnant individual may choose to (without mandate) initiate or continue receiving FDA-approved Medication Assisted Treatment (MAT) or other care to address their opioid use. For pregnant and postpartum individuals wishing to maintain their pregnancy, MAT with methadone or suboxone is the evidence-based standard of care.¹ Adhering to a methadone or suboxone regimen while pregnant eliminates withdrawal's negative impacts on the fetus and provides stability to the parent during their pregnancy. Any reluctance to provide MAT to pregnant patients is scientifically unfounded and dangerous for the fetus and the pregnant person.

Of utmost importance, the bill would also require the correctional unit to ensure that the pregnant individual has health insurance coverage and a referral for treatment continuity prior to release. Within the first two weeks following release, formerly incarcerated people are 40 percent more likely to die of fatal overdose due to decreased tolerance following a period of incarceration.²

¹ NIDA, Treating Opioid Use Disorder During Pregnancy

² Ranapurwala et al. (2018)

Maryland's leading cause of maternal mortality continues to be drug overdose.³ We must make comprehensive substance use treatment available to all pregnant people, inside and outside of the walls. We ask that the Judiciary Committee give HB1120 a favorable report.

For more information about Baltimore Harm Reduction Coalition or our position, please contact our Director of Mobilization, Rajani Gudlavalleti at rajani@baltimoreharmreduction.org

³ Maryland Department of Health, Maryland Maternal Mortality Review 2019 Annual Report