



Kennedy Krieger Institute

**DATE:** February 15, 2023      **COMMITTEE:** Finance  
**BILL NO:** Senate Bill 281  
**BILL TITLE:** Commission on Public Health – Establishment  
**POSITION:** Support

## **Kennedy Krieger Institute supports Senate Bill 281 - Commission on Public Health – Establishment**

### **Bill Summary:**

SB281 would establish the Commission on Public Health to make recommendations to improve the delivery of foundational public health services in the State; requiring the Commission, by October 1, 2024, to conduct an assessment of the capability of the Maryland Department of Health and local health departments to provide foundational public health services; and requiring the assessment to consider the State's response to COVID-19 and overdose deaths, and to racial and ethnic disparities in maternal mortality and birth outcomes in the State.

### **Background:**

Kennedy Krieger Institute is dedicated to improving the lives of children and young adults with developmental, behavioral, cognitive, and physical challenges. Kennedy Krieger's services include inpatient, outpatient, school-based, and community-based programs. Over 27,000 individuals receive services annually at Kennedy Krieger.

The vision for the newly established Office for Health Equity Inclusion and Diversity (O-HEID) at Kennedy Krieger Institute is to promote the health and well-being of those who work and receive training and services at Kennedy Krieger Institute. The O-HEID uses evidence, culturally relevant, and equity-based approaches that assures diversity and inclusion. The O-HEID is working to establish collaboration, data, and metrics to address remediable disparities within our patient populations, policies, and practices.

### **Rationale:**

While the COVID-19 pandemic exacerbated racial and ethnic disparities within health outcomes across the United States, these disparities have long been an issue leading to overwhelming disproportionality in deaths among Black Americans, Hispanic Americans, and other racial and ethnic groups (1)(2)(3). Public health advocates, leaders, and practitioners have long been aware of the disproportionate burden and impact of COVID-19 among racially and ethnically diverse populations.

As it pertains to overdose-related deaths and maternal mortality, Maryland continues to see rates increasing above the national average (4)(5). In the United States, Black women have approximately 2.4 times greater mortality than white women. In Maryland, that risk is even greater given maternal mortality rates continue to be higher than the national average (5)(6). Between 2013 and 2017, the maternal mortality rate for Black women was four times greater than for White women. When you disaggregate this data, we see a trend of maternal mortality decreasing for White women, yet remaining elevated for black women (6). Additionally, in 2020 the number of drug and alcohol-related intoxication death has increased in Maryland, following a steady increase in mortality for the last decade (7) Among the highest overdose death rates are American Indian/Alaska Native, white, and Black American adults compared to Asian adults (8).

Preventable morbidity, mortality, and racial and ethnic disparities resulting from inadequate care, lack of access, structural racism, financial barriers, and other social determinants of health is a public health emergency that would be addressed by the Commission on Public Health. Allocating funding for the creation and equity-focused service delivery of the Maryland Department of Health Commission on Public Health will improve

public health data collection, informed prevention, response, and intervention strategies and promote the health and well-being of all Marylanders.

## **Kennedy Krieger Institute requests a favorable report on Senate Bill 281.**

### **References**

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2. Gauthier, G. R., Smith, J. A., García, C., Garcia, M. A., & Thomas, P. A. (2021). Exacerbating Inequalities: Social Networks, Racial/Ethnic Disparities, and the COVID-19 Pandemic in the United States. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 76(3), e88.
3. Tai DBG, Shah A, Doubeni CA, Sia IG, Wieland ML. The Disproportionate Impact of COVID-19 on Racial and Ethnic Minorities in the United States. *Clin Infect Dis*. 2021;72(4):703-706. doi:10.1093/cid/ciaa815
4. Gadson A, Akpovi E, Mehta PK. Exploring the social determinants of racial/ethnic disparities in prenatal care utilization and maternal outcome. *Semin Perinatol*. 2017;41(5):308-317. <https://www.sciencedirect.com/science/article/pii/S0146000517300502>. doi: 10.1053/j.semperi.2017.04.008.
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6. Maryland Maternal Mortality Review 2019 Annual Report Health – General Article § 13-1207—13-1208, Maryland Department of Health
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8. American Health Rankings: [https://www.americashealthrankings.org/explore/annual/measure/drug\\_deaths\\_1yr/state/MD](https://www.americashealthrankings.org/explore/annual/measure/drug_deaths_1yr/state/MD)

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