March 17, 2025

**To:** Members of the Finance Committee in the Maryland Senate

**From:** Dr. Samantha Fuld, DSW, MSW, LCSW-C, Clinical Assistant Professor, University of Maryland School of Social Work.

Re: Opposition for HB0468 Petitions for Emergency Evaluation (Arnaud and Magruder Memorial Act)

**Position: Oppose** 

I am a proud resident of Maryland (District 46). I am also licensed as a Clinical Social Worker in Maryland and am a Clinical Assistant Professor at the University of Maryland School of Social Work. In these professional roles I have worked alongside hundreds of individuals and families with mental health disabilities and have contributed to the clinically focused education of hundreds of social workers in Maryland. Please note that in this testimony I am speaking as an individual and not on behalf of my employer.

In the realm of clinical supports, services, and treatment, including the process of emergency evaluation when someone is struggling the most, we know that a sense of safety, autonomy, and choice are paramount to successful engagement in supportive services and healing. These are key elements of the evidence-based <a href="Trauma-Informed Care">Trauma-Informed Care</a> (TIC) model created by the Substance Abuse and Mental Health Services Administration (SAMHSA) in 2014. These principles include safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment, voice, and choice; and [attention to] cultural, historical, and gender issues. These principles have been widely adopted as best practice in the mental and behavioral health realm, including by the Centers for Disease Control and Prevention (CDC) as part of their public health strategy and by the City of Baltimore through the <a href="Elijah Cummings Healing City Act">Elijah Cummings Healing City Act</a>.

The proposed changes to the emergency evaluation process directly challenge the TIC model, particularly in the allowance of police force to be expressly permissible in these circumstances. Maryland has stood out in the past as one of the states with the most protections for people experiencing mental health crises, and likewise has made great progress in creating response systems that prioritize community-based support and mental health professionals involved in crisis intervention services. Implementing this new process would be moving farther away from a TIC-informed process rather than moving more firmly toward one. Keeping people in the emergency petition process longer than is currently allowed with the proposed extension option is also in opposition to the core principles of TIC.

I urge you to oppose HB0468 and instead to uplift the need for greater attention to community-based crisis intervention supports that uphold the principles of empowerment, voice, and choice.

Respectfully,

Dr. Samantha Fuld, DSW, MSW, LCSW-C

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