



Testimony in Support of HB 1118

"Health, Health Insurance, and Health Occupations – Perinatal Mental Health Conditions"

Submitted to the House Health Committee, March 13, 2026

Position: SUPPORT

My name is Leah Hairston, and I am the founder and CEO of Sweet Bee Services, a concierge doula agency serving families across Maryland, DC, and Northern Virginia. I'm here today because HB 1118 is exactly the kind of policy that can change *and save* lives.

This bill would require healthcare providers to screen for perinatal mood and anxiety disorders (PMADs) at prenatal appointments, at the postpartum visit, and at each of the seven well-child visits during a baby's first year of life. That is a straightforward, evidence-based ask. And it is long overdue.

At Sweet Bee, our mission is to move families from surviving to thriving. We know from ten years of frontline work that a baby cannot truly thrive if their parent is struggling in silence. Mental health is maternal health. And right now, far too many Maryland parents are not getting the screening, the diagnosis, or the support they need.

The data tells a clear story:

- 1 in 5 women experience a perinatal mental health condition
- 75% of those women never receive treatment
- Perinatal mental health conditions are the **leading cause of maternal death** — responsible for 22% of maternal mortality
- When a parent's mental health goes unaddressed, it disrupts the parent-child bond and can lead to behavioral, cognitive, and emotional delays in their child



These are not abstract statistics. These are the families we serve every day.

HB 1118 would take meaningful action on all of this. It would implement the most impactful recommendations of the Task Force to Study Maternal Mental Health, which the General Assembly established back in 2015. It would bring Maryland in line with states like Minnesota, California, Virginia, West Virginia, and New York, which have already passed similar legislation. And it would help us achieve key goals outlined in Maryland's own 2025 Maternal Health Improvement Plan, including better screening, diagnosis, and workforce training around perinatal behavioral health.

Here's what concerns me: Maryland is falling behind. The Policy Center for Maternal Mental Health gives our state an overall grade of "C" in its 2025 report card, but critically, Maryland received an "F" for gaps in prenatal and postpartum screening rates and accountability. That grade reflects a real gap in care that families in this state are experiencing right now.

HB 1118 is a practical, compassionate step toward closing that gap. It would improve outcomes for women, strengthen families, and help build the kind of comprehensive perinatal mental health system of care that Maryland's families deserve.

Every family, regardless of their zip code or insurance status, deserves to have their mental health taken seriously during one of the most vulnerable seasons of their lives. We respectfully urge this committee to issue a favorable report on HB 1118.

Thank you.

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