HB 129, HD2

NEIL ABERCROMBIE

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P.O. Box 3378 HONOLULU, HAWAII 96801-3378

In reply, please refer to File:

Senate Committee on Health

H.B. 129, H.D. 2, Relating to Perinatal Care

Testimony of Loretta J. Fuddy, A.C.S.W., M.P.H. Interim Director of Health March 18, 2011

- Department's Position: The Department of Health supports the intent of this bill to appropriate
- 2 funding for continued operations of The Path Clinic.
- 3 **Fiscal Implications:** The fiscal costs for implementing this program do not outweigh the short and long
- 4 term health care costs if The Path Clinic were to close.
- 5 **Purpose and Justification:** To appropriate monies for the continued operation of The Path Clinic.
- 6 Funding would be used to support difficult to reach pregnant women, decrease their substance use, and
- 7 assist them in delivering a healthy infant they are then able to parent. It is known that modifiable risk
- 8 factors associated with substances such as cigarettes, alcohol or other drug use can result in physical,
- 9 mental, behavioral or learning disabilities and longer term implications for a child's well-being.
 - The Path Clinic provides a unique and needed resource in our State as a comprehensive perinatal addiction clinic that integrates prenatal and postpartum obstetric clinical services, addiction medical services, and social services. The Path Clinic has shown, during its three year demonstration period, that it has been highly successful in assisting its patients in discontinuing use of drugs and delivering healthy infants, continuing to maintain child custody, using birth spacing and longer term methods to prevent an unintended pregnancy, and planning for their current or future employment including work skill development. Based on this information, the Maternal and Child Health Branch had awarded The Path

- 1 Clinic funding to implement its services with new contracts to have begun July 1, 2009. However,
- 2 based on funding restrictions, this entire program was eliminated.
- Thank you for this opportunity to testify.



DATE:

March 16, 2011

TO:

Sen. Josh Green, M.D., Chair

Sen. Clarence Nishihara, Vice Chair

FROM:

Jackie Berry, Executive Director

HEARING:

Friday, March 18, 2011 at 3:00 p.m.

RE:

HB129, HD2 Relating to Perinatal Care

Testimony in Strong Support

Chair Green, Vice Chair Nishihara and members of the Committee on Health:

Healthy Mothers Healthy Babies (HMHB) is a statewide coalition of public and private agencies, and individuals committed to the improvement of maternal and infant health status in Hawaii through education, coordination and advocacy. HMHB is testifying today in strong support of HB 129, HD2 Relating to Perinatal Care.

The Path Clinic is the only comprehensive prenatal addiction clinic in Hawaii. The Path Clinic was initially funded as a pilot program by an act of the Hawaii Legislature with the goal of improving birth outcomes of pregnant women who used methamphetamines (estimated to be 4-8% of pregnant women in Hawaii).

Since its inception, the Path Clinic has far exceeded expectations. The population of women serve are known to have a 4-5 times greater risk for costly preterm and low birth weight deliveries. However, the preterm and low birth weight rates for the 180 women who have received Path services are comparable to the average rates for all women statewide. This is remarkable given the risk level of the population of women served: 98% lived below the poverty level; 57% had lost custody of a previous child; 34% had histories of incarceration; and 31% were homeless at some point during their pregnancy.

While not a substance abuse treatment program, over 90% of the women significantly reduced substance use with 81% becoming abstinent. 95% of women maintained custody of their infants at ten weeks and the repeat pregnancy rate was very low.

The Path Clinic's harm reduction approach has achieved exceptional success in not only helping women and their babies, but also in saving the cost of expensive medical treatment both for the women and their babies. Preventing one low weight birth will save over \$200,000 in medical care – the cost of running the Path Clinic for an entire year.

On behalf of mothers and babies in Hawaii, we strongly urge you to pass HB129, HD2. Mahalo for your consideration of this bill and our testimony.

DATE:

March 16, 2011

TO:

Sen. Josh Green, M.D., Chair

Sen. Clarence Nishihara, Vice Chair

FROM:

Renee Schuetter, RN, M.Ed.

HEARING:

Friday, March 18, 2011 at 3:00 p.m.

RE:

HB129, HD2 Relating to Perinatal Care

Testimony in Strong Support

Chair Green, Vice Chair Nishihara and members of the Committee on Health:

As the former Executive Director and Nurse Manager of The Path Clinic, I am testifying today in strong support of HB 129, HD2 Relating to Perinatal Care.

The Path Clinic is the only comprehensive prenatal addiction clinic in Hawaii. The Path Clinic was initially funded as a pilot program by an act of the Hawaii Legislature with the goal of improving birth outcomes of pregnant women who used methamphetamines (estimated to be 4-8% of pregnant women in Hawaii).

Since its inception, the Path Clinic has far exceeded expectations. The population of women serve are known to have a 4-5 times greater risk for costly preterm and low birth weight deliveries. However, the preterm and low birth weight rates for the women who have received Path services are comparable to the average rates for all women statewide. This is remarkable given the risk level of the population of women served: 98% lived below the poverty level; 57% had lost custody of a previous child; 34% had histories of incarceration; and 31% were homeless at some point during their pregnancy.

While not a substance abuse treatment program, over 90% of the women significantly reduced substance use with 81% becoming abstinent. 95% of women maintained custody of their infants at ten weeks and the repeat pregnancy rate was very low. Repeatedly, The Path Clinic has seen pregnant women stop using methamphetamines and prepare themselves for parenting; changing the trajectories of their lives, the lives of their families. In over 35 years working as a RN and Nurse Manager, I have never seen a program or service **work** like The Path Clinic does. It is both compassionate and cost-effective, investing in the women, children, and families of Hawaii.

The Path Clinic's harm reduction approach has achieved exceptional success in not only helping women and their babies, but also in saving the cost of expensive medical treatment both for the women and their babies. Preventing one low weight birth will save over \$200,000 in medical care – the cost of running the Path Clinic for an entire year.

I strongly urge you to pass HB129, HD2. Mahalo for your consideration of this bill and my testimony.



The Gay, Lesbian, Bisexual and Transgender Caucus 1050 Ala Moana Blvd # 2660 ~ Honolulu, HI 96814-4933

Re: HB 129 HD 2 Relating to Perinatal Care

Hearing: Tuesday, March 18, 2011, 3:00 p.m., Conference Room 229

Testimony in Strong Support

The Gay Lesbian Bisexual and Transgender Caucus of the Democratic Party of Hawaii is proud to stand with its allies, the Hawaii Women's Caucus and the Women's Coalition in support of HB 129 HD2.

We support funding of PATH that serves pregnant women who have a history of substance use.

The clinic is requesting ONLY \$200,000 per year.

The clinic is cost effective, because the average cost of medical care for ONE very low weight infant in its first year of life is over \$200,000.

Women who received prenatal services at PATH were very high risk for preterm birth and low birth weight births. However, the birth weights at PATH were consistent with state and national averages for all births.

While PATH is not a substance abuse treatment program, over eighty percent (80+%) of the women stopped using drugs. Ninety-four percent (94%) tested clean of substances at the time of birth. Over half of the women who tested positive for drug use at birth entered residential substance abuse treatment, often noting that their experience at PATH contributed to their readiness to accept treatment.

Ninety-six percent (96%) of the women maintained custody of their infants 8 weeks after delivery, which is very encouraging since fifty-seven percent (57%) had lost custody of at least one previous child. Fifty percent (50%) of the women who lost custody of their infants were pregnant again within 9 months of having given birth.

Clearly PATH is the path to breaking the addiction/pregnancy cycle. This cycle is extremely costly to the government.

In these stark financial times, we need to support programs like these that ultimately reduce government costs and reduce dependence on government services.

Very truly yours,

Chair, Gay Lesbian Bisexual and Transgender Caucus

Democratic Party of Hawaii

In-Ann M. Adams



HAWAII MEDICAL ASSOCIATION

1360 S. Beretania Street, Suite 200, Honolulu, Hawaii 96814 Phone (808) 536-7702 Fax (808) 528-2376 www.hmaonline.net

Friday, March 18, 2011; 3:00 p.m. Conference Room 229

To: COMMITTEE ON HEALTH

Senator Josh Green, M.D., Chair

Senator Clarence K. Nisihara, ViceChair

From: Hawaii Medical Association

Dr. Morris Mitsunaga, MD, President

Linda Rasmussen, MD, Legislative Co-Chair Dr. Joseph Zobian, MD, Legislative Co-Chair Dr. Christopher Flanders, DO, Executive Director Lauren Zirbel, Community and Government Relations

Re: <u>HB 129, HD 2 RELATING TO PERINATAL CARE</u>

In Support

Chairs and Committee Members:

Women who received prenatal services at PATH are at a very high risk for preterm birth and low birth weight births. However, the birth weights at PATH were consistent with state and national averages for all births.

While PATH is not a substance abuse treatment program, over 80% of the women stopped using drugs. 94% tested clean of substances at the time of birth. Over half of the women who tested positive for drug use at birth entered residential substance abuse treatment, often noting that their experience at PATH contributed to their readiness to accept treatment.

Clearly PATH is the path to breaking the addiction/pregnancy cycle. This cycle is extremely costly to the government.

The clinic has been successful in enabling its patients to become successful parents and encouraging families to stay together.

Thank you for the opportunity to provide this testimony.

OFFICERS

COMMUNITY ALLIANCE ON PRISONS

76 North King Street, Honolulu, HI 96817

Phone/E-Mail: (808) 533-3454 / kat.caphi@gmail.com



COMMITTEE ON HEALTH

Sen. Josh Green, M.D., Chair
Sen. Clarence Nishihara, Vice Chair
Friday, March 18, 2010
3:00 p.m.
Room 229
HB 129 HD2 - RELATING TO PERINATAL CARE
STRONG SUPPORT
http://www.capitol.hawaii.gov/emailtestimony

Aloha Chair Green, Vice Chair Nishihara and Members of the Committee!

My name is Kat Brady and I am the Coordinator Community Alliance on Prisons. This testimony is respectfully offered on behalf of the 6,000 Hawai'i individuals living behind bars, always mindful that almost 1,800 individuals are serving their sentences abroad, thousands of miles away from their loved ones, their homes and, for the disproportionate number of incarcerated Native Hawaiians, far from their ancestral lands.

HB 129 HD2 appropriates funds for the continued operation of the PATH Clinic and the services it provides.

Community Alliance on Prisons is in strong support of this measure. PATH is a comprehensive perinatal addiction clinic that integrates prenatal/postpartum obstetric clinical services.

But that's not all. PATH offers non-judgmental, compassionate and professional services to the women who access their services. And they serve the most difficult population of pregnant women – those who are using drugs. Many of these women are afraid to access care for fear of losing their children and/or unborn child. PATH's caring and nurturing environment has produced some spectacular outcomes.

The PATH Clinic has truly been a shining star in Hawai'i's healthcare spectrum. Through the incredible work of Dr. Tricia Wright, the PATH Clinic was established by the Legislature in 2006 as a three year pilot project to respond to the high rate of methamphetamine use by pregnant women.

Community Alliance on Prisons has been working for almost 15 years to build strong, healthy and safe communities by employing data-driven solutions to social problems. PATH is a smart strategy that is working to accomplish this goal.

Among the goals of the program are that healthy babies be born and that the women are able to care for the babies. Whether a baby is healthy is determined by length of the pregnancy (e.g., do the women make it to full term) and by birth weight. This can be hard to achieve with the population served by the Path Clinic, many of whom are addicted to methamphetamine.

The clinic is doing just as well as private practice when it comes to birth weight. Since the clinic opened in 2007, 61 of 65 deliveries were full-term and the clinic's pre-term birthrate (6.2%) is much better than the national average of 12.7% and 12.2% for Hawai'i. Low birth weights are also about half of the national percentage.

The cost of 50 births was about \$250,000 per year at the clinic - premature babies cost ten times as much. However, since the majority of these women deliver at full-term and have normal weight babies, the program is able save approximately \$550,000 per year. Thus, this is a cost effective clinic and program. Additionally, most of the women (61 out of 65) tested clean at the time of delivery.

Women who receive prenatal care to address their addictions in a small, dedicated, nonjudgmental setting that also provides social service support, parenting education, and transportation are overwhelmingly likely to stop using drugs, deliver healthy infants, maintain custody, choose a long term birth control method, and choose to work/develop work skills six months after delivery.

Some other outcomes...

- At least 80% of women became abstinent
- Over 90% significantly decreased substance use within 8 weeks of engaging in PATH's services
- 94% tested clean of substances at the time of birth
- Over half of the women who tested positive for drug use at birth chose to enter residential substance abuse treatment, often noting that their experience at PATH contributed to their readiness to accept treatment.
- 96% maintained custody of their infants 8 weeks after delivery (57% had lost custody of at least one previous child).

PATH proves that providing appropriate parenting education and other social services to enable mothers to successfully parent their children affect repeat pregnancy rates.

Hawai'i should be touting the success of this very important and specialized area. We must support programs and strategies that are evidence-based and successful. PATH saves money and lives and gets us on the road to building strong and healthy communities.

Mahalo for this opportunity to share our support for this terrific program.



A sister organization of the Drug Policy Forum of Hawai'i PO Box 61233, Honolulu, HI 96839 ~ (808) 988-4386

Dedicated to safe, responsible, and effective drug policies since 1993

TO:

House Committee on Finance

FROM:

Pamela Lichty, MPH

President

DATE:

March 1, 2011, 4 p.m., room 308

RE:

H.B. 129, H.D. 1 RELATING TO PERINATAL CARE – IN STRONG

SUPPORT

Aloha Representatives Oshiro, Lee and members of the Committee. My name is Pam Lichty and I'm testifying in support of this measure on behalf of the Drug Policy Action Group. I'm also proud to serve on the Advisory Committee for the PATH Clinic.

The clinic, Perinatal Addiction Treatment of Hawai'i (located on the Kaimuki campus of the Salvation Army) has proven to be both a compassionate and highly cost-effective way of dealing with the needs of substance using pregnant women and their babies.

The PATH clinic provides one-stop integrated care to their patients in which prenatal care is provided together with other needs such as physical and mental health services and access to social services. This holistic approach represents a very smart strategy for both the near and long term and we are proud that Hawaii's legislature has funded this innovative program. You can read in the measure itself about the impressive results that the supportive holistic approach of the clinic have achieved.

The uniqueness of the clinic is in part due to the social services that surround their clients – in addition to the superb medical care they receive. Yet is it has proven far more difficult for the clinic to find funding for these ancillary services. This measure will serve to underwrite those important services

We urge the Committee to pass out this important measure. Thank you for hearing this bill and thank you for permitting us to testify today.



March 18, 2011

To:

Senator Josh Green, Chair

Senator Clarence Nishihara, Vice Chair and

Members of the Committee on Health

From: Jeanne Y. Ohta, Executive Director

RE:

HB 129 HD2 Relating to Perinatal Care

Hearing: Friday, March 18, 2011, 3:00 p.m., Conf. Room 229

Position: STRONG SUPPORT

The Drug Policy Forum of Hawai'i writes in strong support of this measure.

This measure requests funds for the Path clinic, a program originally established in 2006 to provide perinatal services to women with substance-use issues. The clinic has been extremely successful, reducing the risk of low-birth weight infants to women who have high-risk pregnancies because of their histories of drug usage.

Without the clinic, services that provide appropriate health care to substance-using pregnant women to ensure the birth of a healthy baby are either extremely limited or unavailable. In addition, the care of just one extremely low-birth weight infant for the first year of its life averages \$200,000.

The clinic's programs provide both prenatal care, and follow up services in a supportive environment rather than a punitive one. One of the barriers to women seeking perinatal care is fear of prosecution. This type of program recognizes the importance of a public health approach to the issue of pregnant drug-using women.

The clinic has also been successful in enabling its patients to become successful parents, encouraging families to stay together and to avoid foster care and child protective services systems.

Please pass this bill and provide funding for this worthwhile and effective program. Thank you for this opportunity to provide testimony.

Board of Directors Pamela Lichty, M.P.H. President

Kat Brady Vice President

Heather Lusk Treasurer

Katherine Irwin, Ph.D. Secretary

Michael Kelley, D.Phil.

Richard S. Miller, Prof. of Law Emer.

Robert Perkinson, Ph.D.

Donald Topping, Ph.D. Founder 1929-2003

P.O. Box 241042 Honolulu, HI 96824-1042

Phone: (808)-988-4386 Fax: (808) 373-7064

Email: info@dpfhi.org Website: www.dpfhi.org March 15, 2011

To: Honorable Josh Green

Honorable Clarence Nishihara

From: Lin Joseph

Director of Program Services
March of Dimes Hawaii Chapter

Re:

In strong support of

HB129, HD2

Hearing:

Friday March 18, 2011

Conference Room 229, State Capitol

Chair Green, Vice Chair Nishihara, Members of the Committee:

I am writing to express strong support for HB129: Appropriates moneys for the continued operation of the Perinatal Addiction Treatment of Hawaii program and clinic.

Since opening in 2007, the Perinatal Addiction Treatment of Hawaii (PATH) clinic has provided comprehensive perinatal care to women with alcohol and substance abuse issues on Oahu. The care is focused on the social, medical and behavioral health needs of pregnant women who are using substances.

The interests of mothers and their babies are interdependent and substance abuse threatens the health of both. Drug abuse during pregnancy can lead to low birth weight, prematurity, birth defects, and infant mortality. The National Institute on Drug Abuse estimates that in the United States 6 million women of childbearing age are current users of illicit drugs. In Hawaii, the Department of Health found that, using self-reports, approximately three percent of women reported using illicit drugs while they were pregnant, six percent admitted drinking alcohol, and more than eight percent reported smoking while pregnant. These figures reveal an unnecessary burden of risk and damage to infants.

The PATH clinic has demonstrated very successful outcomes in the first three years of operation. They report that 80% of women become abstinent of all substances except tobacco within two months of beginning PATH services, and that the clinic's preterm birth rate and low birthweight rates are at or below state and national averages in a population at high risk for poor birth outcomes.

For more than 70 years, the March of Dimes has been a leader in improving the health of women of child bearing age, infants, and children. The Foundation works to prevent or reduce drug abuse before and during pregnancy by funding community programs such as PATH (grants to PATH in 2008 and 2009) and by supporting basic research regarding reproductive hazards, including substance abuse. Our mission is to *improve the health of babies by preventing birth defects, premature birth, and infant mortality.*

March of Dimes encourages the members of the Committee on Health to join us in helping to improve the health of all babies by supporting HB129.

Hawaii Chapter 1451 King Street, Suite 504 Honolulu, HI 96814 Telephone (808) 973-2155 Inter-island 1-800-272-5240 Fax (808) 973-2160

marchofdimes.com/hawaii



1350 S. King Street • Suite 309 • Honolulu, Hawaii 96814 • www.pphi.org • Phone: 808-589-1156 • Fax: 808-589-1404

March 16, 2011

Testimony in Support: HB 129 HD2

To: Chair Josh Green, Vice Chair Clarence Nishihara and Members of the Senate Committee on Health From: Katie Reardon, Director of Government Relations & Public Affairs, Planned Parenthood of Hawaii

Re: Testimony in Support of HB 129 HD2, Relating to Perinatal Care

Planned Parenthood of Hawaii (PPHI) supports HB 129 HD2 Relating to Perinatal Care. This bill allows for an appropriation of \$200,000 for the Perinatal Addiction Treatment of Hawaii Clinic (The PATH Clinic). We understand that The PATH Clinic, like too many other non-profit organizations in Hawaii, has suffered during this economic crisis. The appropriation provided in HB 129 HD2 will help the organization continue to provide outstanding care to our community.

Among the goals of The PATH Clinic is facilitating the transition of isolated substance-using pregnant women to coping, capable parents linked to community resources, increasing knowledge, access, and readiness to accept long-term birth control among women who struggle with substance abuse issues, and keeping families together and preventing outplacement.

The care that The PATH Clinic provides to the women they serve assists them to not only become and stay healthy during pregnancy, but enables them to build a safe and loving life for their children. The work done at The PATH Clinic is unthinkably difficult and yet their success rate is phenomenal. According to their Pilot Program, at least 80% of the women served stopped using substances altogether and over 90% significantly decreased substance use within 8 weeks of engaging in PATH services. At the time of giving birth, 94% of the women tested clean of substances. Of the few that did test positive, over half agreed to enter a residential treatment program.

The children served by The PATH Clinic similarly did well. While the women who received prenatal services were at very high risks for preterm birth and low birth weight births (a 4-5 fold risk), their birth outcomes were consistent with state and national averages for all births. The children were also more likely to stay with their mothers- 96% of the women maintained custody of their infants 8 weeks after delivery. At PPHI, we believe in providing people with the best possible care and resources they need to make healthy decisions about their sexual and reproductive lives. We also believe that children flourish best in families and communities where they are nurtured, honored, and loved. Based on their goals and the tremendous success of their work, we consider The PATH Clinic an invaluable provider of reproductive health care and social services.

PPHI respectfully asks that the Committee pass HB 129 HD2 so that the much needed services of The PATH Clinic can continue. Thank you.



Hawai'i State Democratic Women's Caucus 1050 Ala Moana Blvd #D-26, Honolulu, HI 96814 Email: hidemocraticwomenscaucus@yahoo.com

March 18, 2011

To: Senator Josh Green, Chair

Senator Clarence Nishihara, Vice Chair and Members of the Committee on Health

From: Amy Monk, Legislative Committee

Re: HB 129 HD 2 Relating to Perinatal Care

Hearing: Friday, March 18, 2011, 3:00 p.m., Conference Room 229

Position: STRONG SUPPORT

Thank you for hearing this bill and for allowing me to present testimony today, in strong support of HB 129 HD2 which provides funds for the PATH Clinic. The clinic provides perinatal care and social services to women who have a history of substance use. The goals of the clinic are to provide care so that women give birth to healthy babies they are capable of parenting.

The Hawai'i State Democratic Women's Caucus is a catalyst for progressive, social, economic, and political change through action on critical issues facing Hawai'i's women and girls. It is because of this mission, the Women's Caucus strongly supports this measure which provides care that this population of women may not be able to find elsewhere. The clinic expects to care for over 60 women with addictions in 2011. Since its inception, the clinic has cared for over 180 women.

This clinic provides a successful and effective public health approach to the issue of pregnant women with addictions. Women are provided with care in a small, dedicated and non-judgmental setting which supports them in decreasing their substance use and helps them deliver healthy babies. It is the unique integration of prenatal, clinical, and social services that results in a cessation of substance use in most women. Some women recognize that they require residential substance abuse treatment and the clinic staff facilitates their admission into an appropriate program.

This is the type of program that should be encouraged. It reduces the harms of substance use, it has successful outcomes, and is cost-effective. In the long run, it saves taxpayer money. We urge the committee to pass the measure.



THE LEAGUE OF WOMEN VOTERS OF HAWAII

March 16, 2011

Testimony in support of HB 129

The Senate Committee on Health Senator Josh Green, M.D., Chair Senator Clarence N. Nishihara, Vice Chair

Date: March 18, 2011

Time: 3:00 P.M. Place: Room 229

The League of Women Voters of Hawaii support funding for the PATH clinic in HB 129.

The statistics show and there is compelling evidence that this program allows a women with child to be successful in delivering a substance free infant, as well as maintaining sobriety for a significant period of time, allowing her to be a substance free parent.

The \$20,000 they need to operate is money well spent, avoiding later costs of poor health to the child, but also lowering life long impairment that results when an infant is born to a mother abusing/using substances to include alcohol.

Thank you for allowing me to testify in support of HB 129

Joy A Marshall, R. N.
Chair, Health Care Reform
League of Women Voters-Hawaii

From:

mailinglist@capitol.hawaii.gov

Sent:

Wednesday, March 16, 2011 8:34 AM

To:

HTHTestimony

Cc:

staciaohira@gmail.com

Subject:

Testimony for HB129 on 3/18/2011 3:00:00 PM

Testimony for HTH 3/18/2011 3:00:00 PM HB129

Conference room: 229

Testifier position: support
Testifier will be present: No
Submitted by: Stacia Ohira
Organization: Individual

Address: Phone:

E-mail: staciaohira@gmail.com

Submitted on: 3/16/2011

Comments:

Aloha my name is Stacia Ohira and I am case worker here in Honolulu I just wanted to express my support for HB 129 with regards to continue the PATH Clinic. I knew about the PATH Clinic for many years and all the good work that they do, however I learned first hand on what they really do through experience. I helped a client get into the PATH Clinic because she was using and also HIV positive as well as in a domestic violent relationship. In other words all odds were against her. Dr. Tricia Wright immediately worked her loving heart to help her feel that she has a chance. This person has never had a child full term and all six of her other children were born premature. I am happy to report that she is no longer using, she is out of her domestic violent relationship, she is still carrying her baby at seven months (the longest ever for her), and she has her own apartment where she can nest a happy place for her baby to come home to.

Please continue to help support the PATH Clinic and to help people like this person I just shared about. We have another chance to make Hawaii shine when it comes to ALOHA. ALOHA to the mothers who are suffering out in our land. Thank you for allowing me to submit testimony and feel free to contact me should you have any questions.



From:

mailinglist@capitol.hawaii.gov

Sent:

Wednesday, March 16, 2011 6:01 AM

To:

HTHTestimony

Cc:

catslamp@hotmail.com

Subject:

Testimony for HB129 on 3/18/2011 3:00:00 PM

Testimony for HTH 3/18/2011 3:00:00 PM HB129

Conference room: 229

Testifier position: support
Testifier will be present: No
Submitted by: Catherine Lampton

Organization: Individual

Address: Phone:

E-mail: catslamp@hotmail.com
Submitted on: 3/16/2011

Comments:

Aloha Chair Green, Vice Chair Nishihara and Members of the Committee! My name is Catherine Lampton and this testimony is respectfully offered on behalf of the 6,000 Hawai`i individuals living behind bars, always mindful that almost 1,800 individuals are serving their sentences abroad, thousands of miles away from their loved ones, their homes and, for the disproportionate number of incarcerated Native Hawaiians, far from their ancestral lands.

HB 129 HD2 appropriates funds for the continued operation of the PATH Clinic and the services it provides.

I am in strong support of this measure. PATH is a comprehensive perinatal addiction clinic that integrates prenatal/postpartum obstetric clinical services.

But that's not all. PATH offers non-judgmental, compassionate and professional services to the women who access their services. And they serve the most difficult population of pregnant women – those who are using drugs. Many of these women are afraid to access care for fear of losing their children and/or unborn child. PATH's caring and nurturing environment has produced some spectacular outcomes.

The PATH Clinic has truly been a shining star in Hawai`i's healthcare spectrum. Through the incredible work of Dr. Tricia Wright, the PATH Clinic was established by the Legislature in 2006 as a three year pilot project to respond to the high rate of methamphetamine use by pregnant women.

Community Alliance on Prisons has been working for almost 15 years to build strong, healthy and safe communities by employing data-driven solutions to social problems. PATH is a smart strategy that is working to accomplish this goal.

Among the goals of the program are that healthy babies be born and that the women are able to care for the babies. Whether a baby is healthy is determined by length of the pregnancy (e.g., do the women make it to full term) and by birth weight. This can be hard to achieve with the population served by the Path Clinic, many of whom are addicted to methamphetamine.

The clinic is doing just as well as private practice when it comes to birth weight. Since the clinic opened in 2007, 61 of 65 deliveries were full-term and the clinic's pre-term birthrate (6.2%) is much better than the national average of 12.7% and 12.2% for Hawai`i. Low birth weights are also about half of the national percentage.

The cost of 50 births was about \$250,000 per year at the clinic - premature babies cost ten times as much. However, since the majority of these women deliver at full-term and have normal weight babies, the program is able save approximately \$550,000 per year. Thus, this is a cost effective clinic and program. Additionally, most of the women (61 out of 65) tested clean at the time of delivery.

Women who receive prenatal care to address their addictions in a small, dedicated, nonjudgmental setting that also provides social service support, parenting education transportation are overwhelmingly likely to stop using drugs, deliver healthy infants, maintain custody, choose a long term birth control method, and choose to work/develop work skills six months after delivery.

Some other outcomes...

- At least 80% of women became abstinent
- Over 90% significantly decreased substance use within 8 weeks of engaging in PATH's services
- 94% tested clean of substances at the time of birth
- Over half of the women who tested positive for drug use at birth chose to enter residential substance abuse treatment, often noting that their experience at PATH contributed to their readiness to accept treatment.
- 96% maintained custody of their infants 8 weeks after delivery (57% had lost custody of at least one previous child).

PATH proves that providing appropriate parenting education and other social services to enable mothers to successfully parent their children affect repeat pregnancy rates. Hawai`i should be touting the success of this very important and specialized area. We must support programs and strategies that are evidence-based and successful. PATH saves money and lives and gets us on the road to building strong and healthy communities.

Mahalo for this opportunity to share our support for this terrific program.

DATE:

March 17, 2011

TO:

Sen. Josh Green, M.D., Chair

Sen. Clarence Nishihara, Vice Chair

FROM:

Marilyn Brown, Ph.D.

University of Hawaii at Hilo

HEARING:

Friday, March 18, 2011 at 3:00 p.m.

RE:

HB129, HD2 Relating to Perinatal Care

Aloha mai Committee Members:

I am writing to urge the Committee to support HB 129, HD 2. One of the main concerns of my research is the issue of maternal addiction, particularly the many women who are involved in the criminal justice system. (I am a sociologist at the University of Hawai'i at Hilo.) I have been acquainted with the PATH Clinic for several years and have become familiar with their excellent outcomes. It is essential that women who use drugs during pregnancy have access to quality preand post-natal care. My many conversations with such women indicate that they will often try to stay under the radar—avoiding doctors and even giving birth on their own because they fear losing their children or coming to the attention of the police. Needless to say, this has catastrophic effects on maternal and child health.

The approach of the PATH Clinic is to meet the women where they are—literally as well as figuratively. They will go above and beyond to get women to the Clinic for their first meeting, providing consistent support as well as medical care. Their results speak for themselves in terms of infant indicators like birth weight and near-term births. The majority of women are abstinent at the time of delivery and most women will go on to keep their children and continue to do well.

PATH uses a holistic approach to reproductive health and effectively connects women to substance abuse treatment and other needed services. Their services are culturally appropriate and gender responsive. The professionals at PATH understand the precursors of women's drug use and involvement with the justice system. Gender violence, poverty, mental health problems, and lack of opportunity all play a role in the complex issue of maternal addiction. The research shows us that once women engage in treatment, they are motivated to have a healthy pregnancy. With the right support, their motivation can be built upon to make real breakthroughs. PATH effectively helps women deal with their addiction and provides the services they need to have a good pregnancy outcome. More than that, PATH's patients discover their own strengths and access their own empowerment as a result of the respect and caring that characterize the Clinic's approach.

The war on drugs approach to maternal addiction is ill-founded. The PATH approach works. The modest allocation requested by this bill will be multiplied many times over through returns in good maternal and child health in this vulnerable population. My hope is that there will be a

PATH Clinic in each county eventually. They are an excellent model and an important aspect of the continuum of effective child and maternal health services in Hawai'i.

Mahalo nui,

Marilyn Brown, Ph.D. Associate Professor University of Hawai'i at Hilo