



Maryland-DC Society of Addiction Medicine (MDDCSAM) is a chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.

**SB 299 Human Services – Trauma–Informed Care – Commission and Training
Senate Finance Committee. Feb 11, 2021**

SUPPORT WITH AMENDMENT

We are writing to convey MDDCSAM’s support with amendment for SB 299, which proposes to establish a Commission on Trauma-Informed Care to promote the trauma-responsive and trauma-informed delivery of State services that affect children, youth, families, and older adults.

We recommend that the Commission be staffed by the Maryland Department of Health rather than the Governor’s Office of Crime Prevention, Youth and Victim Services, as a health-focused lens is needed in this endeavor.

Traumatic experiences in childhood are extremely common--in Maryland, 60% of adults report experiencing at least one Adverse Childhood Experience (ACE), and nearly ¼ report three or more ACEs. ACEs are **associated with increased risk for a broad range of negative outcomes across the lifespan, including substance use disorders,** psychiatric illness, medical problems such as diabetes, heart disease, and cancer, and social problems such as educational failure, unemployment, and incarceration. This impact is cumulative--each additional ACE experienced augments the risk for these outcomes. (1)

Resilience and recovery from trauma can either be fostered or hindered by the institutions with which trauma-affected individuals interact, including schools, health and social services, and law enforcement. **Trauma-informed care (TIC) is an approach to service delivery promoted by the US Substance Abuse and Mental Health Administration to help mitigate the negative impact of ACEs.** TIC infuses awareness of trauma into institutional culture, strengthening an organization’s ability to recognize trauma signs and symptoms and enabling effective response by integrating trauma awareness into policies, procedures, and practices. This approach fosters opportunities for healing rather than re-traumatization and helps pave a path towards recovery by enabling meaningful engagement in State services. (2)

Establishing a Commission on Trauma-Informed Care, as outlined by SB 299, is a critical step towards infusing a trauma-informed approach throughout the State of Maryland. We particularly applaud the inclusion of a broad range of member organizations and institutions, as widespread adoption of such practices will be crucial to the effort’s effectiveness.

(cont’d. . .)

MDDCSAM believes that SB 299 is an important step towards addressing the harmful impacts of trauma and improving the health of children, youth, families, and older adults in Maryland and urges a favorable report.

Respectfully,

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References:

1. Thompson, E. & Kaufman, J. (2019). Prevention, Intervention, and Policy Strategies to Reduce the Individual and Societal Costs Associated with Adverse Childhood Experiences (ACEs) for Children in Baltimore City. Center for Child and Family Traumatic Stress, Kennedy Krieger, Institute. Prepared for the Abell Foundation, Baltimore, MD.
2. Substance Abuse and Mental Health Services Administration. *SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach*. HHS Publication No. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.
