HOUSE MEMORIAL 14

50TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2011

INTRODUCED BY

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A MEMORIAL

REQUESTING THE CREATION OF A TASK FORCE TO OVERSEE AND IMPLEMENT THE RECOMMENDATIONS OF THE TASK FORCE CONVENED TO ASSESS AND IMPROVE ACCESS TO SUBSTANCE ABUSE TREATMENT AND PRENATAL CARE FOR PREGNANT WOMEN WITH SUBSTANCE ABUSE PROBLEMS.

WHEREAS, the first session of the forty-ninth legislature passed Senate Memorial 19, which requested the governor's women's health council to create a statewide task force to develop a comprehensive plan for the state to address the needs of pregnant and postpartum women with substance abuse problems and address the well-being of the children and families of those women; and

WHEREAS, the office of the governor's council on women's health submitted its recommendations for a comprehensive plan to the legislative health and human services committee in

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November 2010, which recommendations included reducing unnecessary referrals to the children, youth and families department and increasing home visitation; increasing access to quality substance abuse treatment, prenatal care and family planning for women; increasing access to supportive services; increasing treatment over incarceration for non-violent drug-related crimes; changing attitudes about substance abuse; increasing research and data collection; and creating a task force to oversee and implement the council's recommendations; and

WHEREAS, the Family Preservation Act affirms the state's policy of support for the family and emphasizes the responsibilities of parents and the state in the healthy development of children and the family as an institution; and

WHEREAS, New Mexico has a commitment to strengthen families in crisis and at risk of losing their children so that children can remain safely in their own homes; and

WHEREAS, prenatal medical care is recommended for women before and during pregnancy to improve pregnancy outcomes through prevention and detection of, and early intervention in, problems; and

WHEREAS, the New Mexico legislature has supported prenatal care and protected the confidentiality of the practitioner-patient relationship; and

WHEREAS, substance abuse treatment is a proven public .183320.4

safety and health measure; and

WHEREAS, the state is keenly aware that pregnant, substance-using women and their children suffer from the adverse effects of addiction, and the state is dedicated to enhancing and mobilizing the health and human services programs that these individuals need; and

WHEREAS, pregnant women with substance abuse problems may not seek prenatal care because of stigma and fear; and

WHEREAS, one of the best opportunities to approach and intervene with women with substance abuse problems is during pregnancy, when motivation is high to seek treatment for addiction; and

WHEREAS, early intervention efforts during the prenatal period increase the likelihood that women will successfully recover from alcohol and other drug abuse; and

WHEREAS, a continuum of prenatal and postnatal services is needed to help women successfully parent their children, maintain recovery from substance abuse and address complex social needs; and

WHEREAS, the social and financial costs to incarcerate a woman with substance abuse problems far outweigh the costs of providing specialized prenatal and family-oriented substance abuse treatment; and

WHEREAS, prominent public health and medical organizations agree that a punitive approach to drug use during pregnancy has

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been shown to erode women's willingness to seek health care or to confide in their health care providers if they do seek such care; and

WHEREAS, these organizations include the New Mexico section of the American college of obstetricians and gynecologists, the New Mexico public health association, the New Mexico nurses association, the American college of physicians, the national association of social workers, the national association of social workers-New Mexico, the American academy of pediatrics, the march of dimes, the national association of public child welfare administrators, the national council on alcoholism and drug dependence, the American nurses association, the American public health association, the American academy of addiction psychiatry and the national perinatal association; and

WHEREAS, threats of arrest and prosecution will deter many pregnant women from seeking prenatal care and drug and alcohol treatment; and

WHEREAS, the United States has experienced a seven hundred percent increase in the incarceration of women, with drug law violations accounting for one-third of the increase; and

WHEREAS, incarceration is not an effective method of treatment for women struggling with substance abuse;

NOW, THEREFORE, BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES OF THE STATE OF NEW MEXICO that the university

of New Mexico health sciences center be requested to create a task force to oversee and implement the recommendations of the office of the governor's council on women's health submitted to the legislative health and human services committee in November 2010, pursuant to Senate Memorial 19, passed by the first session of the forty-ninth legislature; and

BE IT FURTHER RESOLVED that the task force be composed of experts in the fields of ethics, law, perinatal medicine, behavioral health treatment and social services; representatives from the department of health, the interagency behavioral health purchasing collaborative, the drug policy alliance and the women's justice project; and at least one woman who has recovered from perinatal substance abuse; and

BE IT FURTHER RESOLVED that the task force provide an interim report on the progress of the task force to the legislative health and human services committee by November 1, 2011 and present a final report to the legislative health and human services committee by November 1, 2012; and

BE IT FURTHER RESOLVED that copies of this memorial be transmitted to the university of New Mexico health sciences center, the director of the office of the governor's council on women's health, the secretary of health, the interagency behavioral health purchasing collaborative, the drug policy alliance and the women's justice project.