

**ATTN: COMMITTEE ON HEALTH**  
Rep. Ryan I. Yamane, Chair  
Rep. Dee Morikawa, Vice Chair  
Committee Members

DATE: Friday, January 28, 2011  
TIME: 9:30am  
PLACE: Conference Room 329

**HB 129 - RELATING TO PERINATAL CARE**  
**STRONG SUPPORT**

Aloha Chair Yamane, Vice Chair Morikawa and members of the Health Committee:

I am Ann S. Freed, Co-Chair of the Women's Coalition.

PATH is a comprehensive perinatal clinic that treats pregnant addicted women. Continued funding for this highly successful clinic is one of our top legislative priorities for 2011.

The requested \$200,000 is necessary to keep its doors open. This manini amount of investment will result in a large cost-savings to the taxpayer as infants born to untreated addicted women have a host of costly long-term health care problems.

The average cost of first year health care for low birth weight babies (one of the sad results of drug use during pregnancy) is over \$200,000 on average. If only one baby is saved this fate, the program pays for itself.

The Coalition supported the legislation that established the clinic in 2006 as a three-year pilot project in response to the high rate of methamphetamine use by pregnant women.

Since that time the Path Clinic has been incredibly successful in achieving positive outcomes both for the women it treats and for their babies. Its gentle, nonjudgmental approach has had the following results.

- **At least 80% of women became abstinent and over 90% significantly decreased substance use within 8 weeks of engaging in Path 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).
- Women who received prenatal care through this unique clinic were 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.

We are pleased and heartened with these high success rates that are very rare in the field of addiction counseling and treatment.

We urge you to pass this bill out of committee. We can't afford to loose this program.

Regards,

Ann S. Freed  
Co-Chair Women's Coalition  
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COMMITTEE: House Health  
HEARING DATE: Friday, January 28, 2011  
TIME: 9:30am  
PLACE: Conference Room 329  
Testifier: Nancy S. Partika, RN, MPH

Bill: HB 129 - RELATING TO PERINATAL CARE

Aloha Chair Yamane, Vice Chair Morikawa and Members of the Health Committee:

My name is Nancy Partika, and I am testifying as a long-time Hawaii maternal and child health and public health advocate and professional. I am testifying today in strong support for the PATH Clinic bill (HB 129).

PATH was established in 2006 to help address community and legislative concerns about the lack of effective intervention with pregnant, substance-using women in Hawaii.

Rather than locking these women up and putting their children in state custody, it was proposed at that time by Dr Tricia Wright, PATH Clinic founder and medical director, that the more effective and medically-appropriate way to address this troubling issue was to treat these women in a respectful and humane medical manner that addressed the many health-related needs of these women and their infants and children.

Four years later, the PATH Clinic has proven itself to be perhaps the most cost-effective treatment in the country for substance-using pregnant women. Over 94% of women delivering via PATH clinic are non-substance-using at the time of their baby's birth, and over 95% women retain custody of their infants 8 weeks after delivery, saving the State further costs for child protection and care. PATH also acts as the "bridge to treatment" for many of their clients who have been unwilling or unable to access substance use treatment prior to their PATH experience.

The array of services developed by the small and modest but surprisingly comprehensive PATH Clinic provides the women with the support and skills they need in order to be successful mothers and productive adults.

The \$200,000 requested by PATH Clinic is less than the medical costs of caring for one very low-birth-weight infant post-delivery in Hawaii, which PATH has more than saved yearly over the past four years of its operation.

The question is not whether this clinic is a good public investment, but why we have not provided more support to expand PATH, so that more of our pregnant substance-using teens and women statewide are able to be offered these unique maternal and infant health services.

Please indicate your support for the work of this truly responsive and cost-effective substance use intervention for pregnant women by voting YES on HB 129. Mahalo for your attention to this important community health issue.