



HOUSE OF REPRESENTATIVES

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Testimony of Rep. Michael Brennan in support of
**LD 393, An Act To Amend the Laws Regarding Health and Human
Services**
before the Joint Standing Committee on Health and Human Services

Senator Claxton, Representative Meyer and esteemed members of the Health and Human Services Committee, my name is Michael Brennan, and I represent District 36, part of the City of Portland. I am here today to speak in support of **LD 393, An Act To Amend the Laws Regarding Health and Human Services** and the amendment that Rep. Meyer has proposed.

I believe this proposal is an important step forward to improving Maine's child welfare system.

Attached is an Op-ed that Rep. Meyer and I wrote last fall. This piece reflects our thoughts and proposals for how we can best improve the child welfare system in the State of Maine.

Thank you for your time and consideration, and I would be pleased to answer any questions.

Commentary: We know what works to keep Maine kids safe. Now it's time to act.

pressherald.com/2021/11/10/commentary-we-know-what-works-to-keep-maine-kids-safe-now-its-time-to-act/

Michele Meyer and Michael Brennan

November 10, 2021



Following the deaths of five children earlier this year, the Maine Department of Health and Human Services asked Casey Family Programs, a national child welfare agency, to conduct a study of Maine's child protective system. Last month, Casey Family Programs unveiled its findings, along with eight recommendations for improving the state's child welfare system.

Maine's child welfare system was not always struggling. Following the death in 2001 of Logan Marr, a young girl in foster care, the state embarked on a major reform of its child welfare system, an effort that made it a national model by the end of the decade.

These reforms prevented children and families from entering the child welfare system while assisting those families struggling with abuse or neglect. In 2009, Harvard's Kennedy School of Government named Maine's child welfare reform effort as a finalist for its Innovations in American Government award.

Placing children in “kinship care,” reducing reliance on institutional settings and increasing the availability of treatment foster care homes were all prioritized. DHHS also invested in community-based programs that prevented families from becoming entangled with the courts and the child welfare system. These efforts were so successful that the number of children in state care dropped from 3,239 in 2000 to 1,527 by 2011.

Unfortunately, many of the innovative interventions were undone by the last administration. Reduced funding for critical programs eroded the child welfare infrastructure, and family reunification became a lower priority. The loss of key resources, coupled with the national opioid epidemic, caused a significant increase in the number of children entering the child welfare system.

Even before the opioid epidemic, a high percentage of child welfare cases involved substance use. This crisis accelerated incidences of child neglect and noticeably increased the number of children in state care. Currently, more than 2,100 Maine children are in state custody.

In addition to the Casey Family Programs analysis, a state agency is conducting a formal investigation into the deaths while two legislative committees are delving into systemic concerns and policy issues. While DHHS has said it is already implementing recommendations from the report, the investigations and legislative action are months away from moving forward.

In our respective positions as the House chairs of the Committee on Health and Human Services and the Committee on Education and Cultural Affairs, we are proposing a five-point plan to immediately improve outcomes for children and families.

- First, we have asked the attorney general to allocate at least \$3 million from the Opioid Drug Settlement to DHHS to assist families who are struggling with addiction. In the past, similar approaches have helped families to reunite and successfully manage their recovery.



A major reform of Maine’s child welfare system, undertaken after the 2001 death of a girl in foster care, made the state a national model by 2010, but many of the innovations were undone by the last administration. *Marija Stepanovic/Shutterstock.com*

ABOUT THE AUTHORS

Michele Meyer, D-Eliot, is a second-term state representative and House chair of the Health and Human Services Committee, and **Michael Brennan**, D-Portland, is serving his sixth non-consecutive Maine House term and is House chair of the Education and Cultural Affairs Committee. He also served three terms in the Maine Senate.

- Second, DHHS and related state agencies must continue to develop an integrated system of services and intervention. Many of the families in the child welfare system need assistance from multiple departments. The Children’s Cabinet, which includes the commissioners of health and human services, education, labor, public safety and corrections, is in the best position to foster integrated systems and sustain collaboration among state agencies. We believe this approach would be more productive than creating a separate department, as has been suggested by others.
- Third, DHHS should review cases of high-risk families and offer community-based intervention services, including family visiting programs. Offering services to families that are at high risk can prevent them from slipping into the child welfare system.
- Fourth, the Child Welfare Ombudsperson’s Office should be awarded funds immediately for additional staffing. This would augment its capacity to review individual cases and identify better ways to ensure child safety and advocate for research-based best practices.
- Fifth, the Children’s Cabinet should convene a committee to develop recommendations for increasing the financial well-being of families who are struggling to provide appropriate care for their children. Neglect is a primary reason children are taken into state custody, and while neglect is often related to substance use and mental health problems, poverty is also a serious risk factor.

Much needs to be done before our child welfare system will again be seen as one of the best in the nation. By restoring programs and enacting policies that were successful in the past, we believe Maine will be charting a pathway for ensuring that our children are protected and able to thrive.

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