

**SB 216 Opponent Testimony**

**NAME: Jennifer Corwin**

**TITLE: Behavioral Therapist**

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**Dear Chairman Manning, Vice-Chair McColley, Ranking Member Thomas, and members of the Senate Judiciary Committee, thank you for the opportunity to offer opponent testimony for SB 216.**

My name is Jennifer Corwin and I have been involved in children's social services for nearly a decade, working in foster care (Houston Texas, Casa De Esperanza De Los Ninos), child respite care (Cleveland Ohio, Providence House) and inpatient residential behavioral therapy for teens (Cleveland Ohio, Applewood Centers Inc) . Given my experience with families who struggle with challenges like trauma and substance abuse, I wanted to reach out about my concerns regarding SB 216.

I understand the case that inspired this legislation is a horrendous tragedy, but I do not believe passing a law of this nature is the best course of action to protect Ohio's children. I have five main concerns and they are as follows;

1. One of the conditions of reunification is that parent(s) enter into an inpatient drug rehabilitation program. Inpatient services are hard to find and the waiting lists can be months. Are we condemning an infant to an extended foster care stay? A system that is often unsafe and already glutted? In addition, is there job protection for individuals entering a rehab program? Are we asking parents to get treatment just to result in the loss of their income, thereby setting them up for reunification failure?
2. Parent(s) will submit to random drug screenings for nine months to a year (seems fair), that they may be required to pay for. Will poverty be the thing that stands in the way of an otherwise possible reunification?
3. Parent(s) may not be involved in any pending criminal case. That is a HUGE category. Would reunification be withheld due to a shoplifting charge?
4. This bill may result in women with substance abuse issues hiding their pregnancy, foregoing prenatal care, and/or delivering in unsafe situations. In a state with an unacceptable infant mortality rate, I can only see this causing further increase.
5. There is to be no contact between the parent and child until the aforementioned conditions are met (a minimum of six months).

Number 5 is my biggest concern as a childcare provider. There is a gross misunderstanding of infant development among the general public; People believe that if a child is adopted very young, you can prevent mental and behavioral health issues. I am writing to tell you IT.IS.NOT.TRUE. The amount of development that occurs in those first few months of life are immeasurable and much of that development comes from forming stable human attachments. Attachments that do not regularly occur in a foster setting. Prohibiting visits will likely result in increase in Reactive Attachment Disorder among Ohio's children. Children with RAD suffer

from an inability to form meaningful relationships throughout their lives. This inability to form a relationship can prevent them from bonding with a foster family, it can grossly hinder their ability to create a meaningful partnership as they grow, and it can result in a difficult time cultivating empathy. These issues can then cause resulting depression and anxiety. Children with RAD typically do NOT get better and will suffer with this dysfunction for the rest of their lives. Passing this bill into law WILL hurt Ohio's children, which is certainly the opposite of its intention.

All of my points are easy to dismiss if your take on the issue is 'people who do drugs are unfit to have children and should have done better.' I will say it loud and clear; addiction is not a choice. It is not a choice. It is not a choice. Drugs are almost always a coping mechanism used to deal with trauma and responding to trauma with more trauma, and then in turn causing it to their infant is a cycle we should NOT be in a hurry to make law. Separations like these should be a last resort, used in the event a family is truly unfit and has shown little interest in creating a better life for their children.

The loss of baby Dylan didn't result from addiction, it resulted from physical abuse that resulted when the local child protective agency did NOT listen to the recommendations of their foster care provider and likely ignored their own instincts. Tragedies like these are a result of a messy CPS system, run independently from county to county, with little funding and less oversight. Children placed in foster care are at a higher risk of abuse and long term mental and behavioral health issues and Ohio's system is gluttoned. We must *stop* trying to put a bandaid on a terminal wound.

In closing, if SB 216 becomes law, it will prevent local agencies, judges, and doctors from making individual calls on a case by case basis as they learn the facts of each child and parent's unique situation. Creating laws of this nature are an easy out and feel good in the moment, but will result in painful, life-altering consequences for those involved. Ohio must meet tragedies like baby Dylan's by rehabilitating our Child Protective Services so they are better able to assess each family's situation and provide them with the support they need to be healthy and successful. Please reconsider your support of this legislation, we absolutely can do better.

Thank you for your time,

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