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MORE INFANTS DYING

PANEL MUST BE EMPOWERED TO FIND OUT WHY

In 1996, Maine lost around four babies for every thousand born. As of 2014, that number is around seven. With medical advances and policy changes, the United States as a whole steadily lowered its infant mortality rate in the same timeframe, but Maine's rate climbed.

The chart above is based on data from the National Center for Health Statistics.

No one has a good handle on the circumstances that led to these deaths or how families could have been better supported. The group established to examine trends in maternal, fetal and infant mortality is not doing so because of shortcomings in the legislation that created it.

Maine lawmakers need to make granting this panel expanded authority a priority in the upcoming legislative session so policymakers can begin to understand why the state's mortality rate has increased and, hopefully, work to reverse the trend.

The Maine Maternal, Fetal and Infant Mortality Review panel is restricted by two main things: It needs a family's consent before viewing any state or medical records, and it has to wait four months after the death of the infant to contact the family for that permission or an interview.

Four months after an infant dies, the Maine Center for Disease Control and Prevention is supposed to send a letter to the family offering support services, such as grief groups, and asking if they would like to participate in a review, to potentially help prevent future infant deaths or improve available resources for families.

Since the creation of the panel, no deaths have been reviewed as a result of that letter from the Maine CDC, according to the 2015 report to the Legislature. The few deaths it has reviewed have come to the panel either from a family reaching out directly, or a medical professional making a referral.

The panel did not meet in 2015 and was only able to review two of the 85 deaths in 2014.

Clearly, this system is not working.

Meanwhile, the number of drug-affected babies has increased 500

percen t from 2005 to 2015; about 20 percent of Maine women smoke cigarettes in their last three months of pregnancy; and there were five infant deaths in 2015 from preventable unsafe sleeping arrangements.

However, it's impossible to know whether anything specific is causing Maine's infant mortality rate to increase by looking at the numbers alone. Are there any gaps in care for people living in a certain area of the state? Did parents encounter health care professionals who couldn't help?

Because Maine has such small birth and death numbers, the National Maternal, Fetal and Infant Mortality Review Program recommends that Maine examine every death of a baby and talk directly with surviving family members. Without rights to view hospital records and the ability to reach out to families sooner, the panel can't begin to do this.

The panel has not asked for expanded powers yet out of fear it would be canceled altogether, but it would be negligent not to attempt to understand why Maine's babies are dying more often than they used to. Not only is the infant mortality rate saddening, it's also an indicator of the health of Maine's entire population.

Legislators should grant Ellie Mulcahy, coordinator of the Maine Maternal, Fetal and Infant Mortality Review Panel, full access to medical and state documents should she request them, not to assign blame but to understand the problem.

This way, the panel coordinator can aggregate information to identify trends. Before she presents information to the panel as a whole, identifying information must be taken out of the documents. Then, if more information is needed, the panel coordinator can reach out to the family, perhaps through a health care provider, for an interview.

We don't want the state meddling unnecessarily in the life of a family experiencing an unimaginably difficult time, but understanding this issue is crucial to preventing more deaths. Before Maine can fix this problem, it has to know what's going on.

OTHER VOICES

TRUMP NEEDS TO SHOW TAX RETURNS

Donald Trump's Wednesday staff shake-up suggests the billionaire candidate will double down on the ugliness that helped him win the primaries. If so, it will sharpen the dilemma for Republicans who have hitched their fortunes to the Trump campaign — beginning with his more conventional running mate, Indiana Gov. Mike Pence.

Pence has already indicated that he will diverge from Trump on at least one important matter: political transparency. The GOP vice-presidential nominee indicated last weekend that he would release his tax returns. Pence said there would be nothing earth-shattering in the financial forms he will turn over. Yet the fact of disclosure itself would be remarkable. It would mean that the GOP vice-presidential candidate, the lesser partner on a major-party ticket, would have submitted himself to a higher standard of scrutiny than the man whose character voters most need to understand.

Revealing tax returns signals respect for the voters and their right to review the conduct of those asking to be elected to the world's most powerful office. Every major-party presidential nominee since 1976 has released

his or her tax returns. Hillary Clinton, Trump's Democratic opponent, has released decades of them. Her running mate, Sen. Tim Kaine of Virginia, released his promptly after his nomination. Mitt Romney, the previous GOP presidential nominee and a wealthy businessman in his own right, resisted but ultimately complied with public pressure to release his tax forms.

Even Romney, meanwhile, had a record in public office that voters could review. Trump has never held public office, and most of his private dealings are shrouded in secrecy. The Trump Organization, his business, is a closely held private company. If any candidate has a special responsibility to offer voters financial information, it is Trump.

There are a variety of speculations about what Trump might be hiding. Perhaps, as documents from decades ago suggest, he has paid little or no taxes. Maybe he earns less than he has led voters to expect. It could be that he gives little to charity. It could be a combination of all of these. What's clear is that Trump's spurning of essential transparency is politically out of bounds. His running mate apparently understands as much.

The Washington Post (Aug. 18)



LETTERS TO THE EDITOR

Improving Riverview

I found the Aug. 16 BDN editorial about "DHHS' ever-changing plans for housing mentally ill" to be troubling. My concern is not with the department's plans, but rather with the implied lack of purpose that they represent.

Members of the Legislature's Health and Human Services Committee, including myself, often discuss the fact that we house forensic patients for whom the court has determined they no longer require a "hospital level of care." The federal regulators cited this as a major problem, and it has been an impediment in regaining certification for the Riverview Psychiatric Recovery Center. Everyone agrees that we have people in Riverview who do not belong there.

I applaud the department for beginning to construct a "forensic step down facility." It has long been necessary, and it will greatly improve the backlog of both forensic and civil admissions to Riverview. Our civil hospitals will be grateful that beds are finally opening up within the mental health system. Likewise, the courts will have increased access to Riverview for evaluations and observations, once those patients are in an independent setting.

This is a positive step and it comes on the heels of the department funding 12 additional beds at Spring Harbor this spring. Both are significant accomplishments that could only be achieved through aggressive budgetary control in the Department of Health and Human Services.

There are 14 individuals in Riverview who do not require a hospital level of care. It is appropriate to construct a facility that has the capacity to address the needs of these individuals and those patients who will be rehabilitated at some point in the future.

Rep. Richard Malaby
Hancock

Allegiance not an issue

I would add to the Donald Trump and Sen. Susan Collins brouhaha that her Republicanism and conservatism are not the issue here. Maine has had a proud history of sending honest, hardworking and independent-minded representatives to serve us in Washington. The list of courageous, pragmatic doers we have elected over the years from both of our political parties and independents, such as Sen. Angus King, is a long and distinguished one.

People might recall that we had one Republican congressman (a freshman at the time) who cast a committee vote for

impeachment of his party's sitting president. Bill Cohen was able to continue to represent his party and his state during a long and distinguished career as a senator and secretary of defense.

Oddly enough, Cohen is relevant to the current issue, as recently, he came out strongly in opposition to Trump's candidacy. I haven't heard folks challenging Cohen's party membership or his conservatism, perhaps because he is not a current office holder. Collins is in excellent company with many Republicans who judge Trump unfit for the presidency. I want to thank her for speaking her mind.

John Lord
Brewer

WRITE TO US

Letters must be 250 words or fewer and include a full name, town of residence and daytime phone number. OpEds may be 700 words. Letters may be edited or rejected for clarity, taste, libel and space. If a letter or OpEd is published, submissions by the same writer will not be considered for 60 days.

Letters may be sent to letters@bangordailynews.com. **OpEds** may be sent to OpEd@bangordailynews.com or P.O. Box 1329, Bangor, ME 04402-1329.

Grow nursing ranks

Recently, on a news-talk radio show, Gov. Paul LePage pointed out that our health care system should shift from treating disease to keeping people well. At the Maine Public Health Association, we could not agree more, which is why we believe that a strong public health nursing core is critical to public health safety in our state.

For example, during the 2009 H1N1 flu pandemic, 50 public health nurses, employed by the state, got to work. The nurses organized and staffed vaccination clinics. They educated providers. They advised about safe vaccine handling and storage. By mobilizing public health nurses, Maine managed to vaccinate high-risk populations, such as children and seniors, at the highest rates in the nation, reducing risk of infection across the state.

This is why we are especially concerned that Maine's public health workforce has been cut in half, resulting in increased duties and reduced presence, particularly in our rural communities. If another H1N1 outbreak or similar event occurs, will Maine fare as well? We urge the Maine Center for Disease Control to fill vacant public health nursing positions and restore the public health workforce to its full staffing potential so that we may continue to keep Mainers well.

Rebecca Boulos
Interim executive director
Maine Public Health Association
South Portland

Positive Muslim news

I extend my thanks to the Bangor Daily News for including the Aug. 17 article from MPBN, "Teacher makes Muslim students 'comfortable.'" I thank the paper first because of all the negative news connected to the Islamic faith and this is a very positive story. I thank the paper again because this is about Maine, and a teacher who is Muslim who believes she can and is making a difference in how Muslim people and persons of color are understood in our state. Keep up this good work.

Bruce Burnham
Old Town

Net metering policy

As the debate around the pros and cons of "rooftop solar" energy continues in Maine, it is critical to point out that the net metering policies originally designed to spur on a fledgling industry are in fact creating a system of cross-subsidies that transfer wealth from less affluent households to more affluent ones.

Net metering is the product of an era of primitive technology, high cost solar panels and little competition. The result for solar customers is high priced solar installation costs and less than optimal technology, even in the face of declining panel costs and availability of efficient technological accommodations. For nonsolar customers, net metering compels them to pay retail prices for wholesale energy, to pay for services to solar vendors they do not and, in some cases, cannot provide to subsidize the system costs incurred to serve solar customers.

Those are excellent reasons why it is a good thing that Maine is reconsidering its net metering policies. The state has an opportunity, in pending proceedings before the Maine Public Utilities Commission, to enable rooftop solar to take its place among our mainstream energy and clean energy resources. This can be accomplished without all of the adverse consequences of net metering. Solar panel costs are declining and customers should be able to take advantage of that opportunity.

Updating net metering policies along these lines will lead to a more sustainable growth for solar energy as well as more choices for and fairness among Maine customers.

Ashley Brown
Executive director
Harvard Electricity Policy Group
Denmark

DOONESBURY



GARRY TRUDEAU