

Measure Title:	RELATING TO AGE OF CONSENT FOR ADOLESCENT MENTAL HEALTH SERVICES.
Report Title:	Mental Health Services; Age of Consent
Description:	To reduce barriers in accessing mental health care for adolescents by lowering the age of consent to receive treatment from 18 years old to 12 years old.
Companion:	<u>HB2357</u>
Package:	Governor
Current Referral:	CPH/HMS, JDL
Introducer(s):	KOUCHI (Introduced by request of another party)

DAVID Y. IGE GOVERNOR OF HAWAII



VIRGINIA PRESSLER, M.D. DIRECTOR OF HEALTH

STATE OF HAWAII DEPARTMENT OF HEALTH P. O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov

## Testimony in SUPPORT of SB2886 RELATING TO AGE OF CONSENT FOR ADOLESCENT MENTAL HEALTH SERVICES

## SENATOR ROSALYN BAKER, CHAIR SENATE COMMITTEE ON COMMERCE, CONSUMER PROTECTION AND HEALTH

SENATOR SUZANNE CHUN OAKLAND, CHAIR SENATE COMMITTEE ON HUMAN SERVICES

Hearing Date: February 4, 2016

Room Number: 016

Fiscal Implications: None to State of Hawaii, though private providers may experience a
 negligible impact.

3 Department Testimony: The Department of Health (DOH) strongly supports this bill, which is
4 part of Governor Ige's Administrative Package.

5 The State of Hawaii has already recognized that requiring parental consent for minors to receive

6 substance abuse treatment and family planning services poses a barrier to health care. Hawaii

7 along with many other states has therefore allowed for the consenting minor to access these

8 services. Similarly, minors often find desired mental health services inaccessible due to the

9 discomfort and, in rare circumstances the opposition, of the current required parental consent.

10 SB2886 allows for the access of mental health services to consenting minors. It does not out-

11 right exclude parental involvement. If, in the treating provider's clinical opinion, parental

12 involvement would not be detrimental to care, the clinician must work with the youth to

13 appropriately include the parent in treatment. This bill does not compel any private or public

14 provider to afford such a service, but simply allows for the provision of the service should both

15 parties agree, thereby no mandated cost is associated with this bill. It is reasonable to believe that

- 1 more accessible mental health services would improve emotional wellbeing, increase earlier
- 2 intervention and decrease serious negative outcomes such as addiction and suicide.

Offered Amendments: The DOH respectfully request that the typographic error on Page 3,
Line 7 be amended to: "A person designated as a licensed mental health counselor pursuant to
section 453D-1".

6 Thank you for the opportunity to testify.

## HAWAII YOUTH SERVICES NETWORK

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Web site: <u>http://www.hysn.org</u> E-mail: <u>info@hysn.org</u>

**Rick Collins**, President

Judith F. Clark, Executive Director

Big Brothers Big Sisters of

Hawaii

Bobby Benson Center

Central Oahu Youth Services

Association

Child and Family Service

Coalition for a Drug Free Hawaii

Domestic Violence Action Center

EPIC, Inc.

Family Programs Hawaii

Family Support Hawaii

Hale Kipa, Inc.

Hale 'Opio Kauai, Inc.

Hawaii Student Television

Hui Malama Learning Center

Kokua Kalihi Valley

Life Foundation

Marimed Foundation

Maui Youth and Family Services

P.A.R.E.N.T.S., Inc.

Parents and Children Together

(PACT)

Planned Parenthood of the Great Northwest and

Hawaiian Islands

Salvation Army Family

Intervention Services

Sex Abuse Treatment Center

Susannah Wesley Community

Center The Catalyst Group Uhane Pohaku Na Moku

O Hawai`i Waikiki Health February 1, 2016

To: Senator Suzanne Chun Oakland, Chair, And members of the Committee on Human Services

> Senator Rosalyn Baker, Chair And members of the Committee on Commerce, Consumer Protection, and Health

## TESTIMONY IN SUPPORT OF SB 2886 RELATING TO AGE OF CONSENT FOR ADOLESCENT MENTAL HEALTH SERVICES

Hawaii Youth Services Network, a statewide coalition of youth-serving organizations, supports SB 2886 Relating to Age of Consent for Adolescent Mental Health Services.

Whenever feasible, parents and other family members should be involved in mental health services for their children. Yet there are times when adolescents need to be able to talk to a mental health professional without parental involvement. For example, this could include child abuse situations where the youth may find it difficult to address issues with the abuser present; when the family is not willing to discuss issues around sexual identity and the youth identifies as gay, lesbian, bisexual, or transgender; or when the parent him or herself has an unresolved mental health or substance abuse problem. The youth who participated in the 2015 Children and Youth Summit identified age of consent for mental health services as one of their top priorities for legislative action.

HYSN would note, however, that setting the age of consent at twelve is not consistent with the age of consent established in other Hawaii laws. Consent for primary and preventive health care and entry into an emergency youth shelter are both set at fourteen. The Legislature may want to consider amending the bill to make the age of consent consistent with other statutes.

Thank you for this opportunity to testify.

Sincerely, Juditho F. Clark

Judith F. Clark, MPH Executive Director