

Testimony for Public Hearing
House Committee on Behavioral Health Care
February 21, 2021
Oregon State Legislature
House Committee on Behavioral Health Care
900 Court St. NE
Salem Oregon 97301

Re: House Bill 3139 – Requiring parental disclosure

Dear Chair Sanchez, Vice Chair Moore-Green, Vice Chair Nosse, and members of the Committee:

My name is David Dalton and I am the Assistant Director of Quality Assurance at Lines for Life. This morning I am testifying in opposition to HB 3139, in its current form. HB 3139 would mandate disclosure by certain professionals when they speak with a minor about suicide. We all want to protect youth from suicide; indeed it is the very mission of Lines for Life to do so. Lines for Life's mission is to prevent substance and suicide and promote mental wellness. We are an Oregon affiliate for the National Suicide Prevention Line. We operate YouthLine which received over 20,000 texts, calls, and chats last year. We provide postvention responses in communities after a death by suicide and, we provide education around suicide prevention. We believe that more youth, and more people in general, should receive suicide risk assessments. We believe this to such an extent that we ask many, if not most, callers if they've had recent thoughts of suicide, or going to sleep and not waking up. This is the beginning of a common suicide risk assessment. Performing an assessment does not mean that someone is at risk of attempting suicide. We are concerned that this bill which suggests that professionals who do not to disclose to a minor's parents that a suicide assessment has occurred risk being sued.

In evaluating this bill, it is important to understand that helping relationships rely on trust. Having to break that trust can be traumatic for the person receiving help and may cause an individual to stop seeking help. There are no doubt times when it is the best interest of a minor for a professional to share clinical information about them with their parent or guardian.

Indeed, the Oregon Revised Statute which the language of this bill modifies allows for, but does not mandate, disclosure "whenever the disclosure is clinically appropriate and will serve the best interests of the minor's treatment." The ORS exists to ensure that professionals understand that they are not precluded by HIPAA or other laws from sharing information if it will be helpful.

Unfortunately, the unintended consequences of further modifying the ORS with the current language of HB 3139 may cause minors to not disclose their thoughts of suicide and professionals to not ask about thoughts of suicide.

It is with this in mind that we recommend modifying the language under Section (1)(b) from "Shall advise" to "May advise". This will allow professionals who perform suicide risk assessments and determine minors to be at risk of suicide to disclose the information to parents when appropriate while not being put in a position of having to risk breaking the therapeutic relationship each time they perform a risk assessment. We believe this will lead to more, not fewer assessments and that it will lead to more frequent appropriate interventions and lives saved.

Thank you for considering this request as we all work together to bring down the number of suicides among Oregon youth.

Sincerely,

David Dalton, LPC
Assistant Director Quality Assurance
Lines for Life