Dear Chair Hartman, Vice-Chair Scharf, and members of the committee,

My name is Elizabeth Marx, and I am a resident of Multnomah County. I work as a licensed clinical social worker in children and family behavioral health. I am writing to express my strong support for HB 3835, which I believe represents a crucial step toward improving behavioral health care for youth in Oregon. While I draw from my professional experience, I am writing as a public citizen and not as a representative of my current employer.

As a social worker with experience supporting youth across the continuum of behavioral health care in our state, I have witnessed firsthand the urgent need for increased resources and more effective interventions to address the complex challenges faced by children and adolescents struggling with behavioral dysregulation and mental health crises.

In my current work in crisis intervention at a community hospital, I face enormous barriers in accessing life-saving care for youth who struggle with externalizing behaviors such as aggression. These youth are often met with inadequate resources, long wait times, and a lack of specialized care options. Without appropriate support, these behaviors frequently escalate, putting both the youth and those around them at greater risk of harm and further entrenching patterns of distress and instability.

Youth with behavioral challenges, often stemming from trauma and complex co-occurring diagnoses, have been long underserved in this state. I became passionate about working with this population during my time in residential and day treatment, where a large majority of our clients displayed these behaviors to get their needs met. I worked in these programs before the implementation of SB 710 and used restraints and seclusion only as a very last measure to prevent harm. I cannot imagine managing those high-risk situations while constantly worrying that my actions to ensure safety for all involved could jeopardize my future in this field.

My commitment to this issue is also deeply personal. I came to my family through adoption, and my biological siblings were placed in the care of ODHS and involved in the foster system. As someone with lived experience who struggled as a child with behavioral dysregulation and aggression, I understand how critical it is for young people to receive compassionate, traumainformed care. Access to appropriate behavioral health support can make the difference between a child feeling abandoned or feeling empowered to heal and thrive.

I want to be clear that I believe regulatory measures are necessary to ensure the safety of children and youth. However, I am deeply concerned about the downstream implications of SB 710. While I believe it was well-intentioned, the reality is that it has had enormous unintended consequences that have ultimately harmed the very individuals it aimed to protect. The increased difficulty in securing placements for youth with high behavioral needs and the lack of flexibility in care options have left many vulnerable children without the support they desperately need.

There are many examples I could provide from the last nine years working in local emergency departments where Oregon has fallen short of getting children and youth the treatment they need. Just this week alone, I was unable to access appropriate community-based and inpatient psychiatric care for youth because they are currently or have a history of aggressive behaviors. When children and adolescents are turned away from care due to behaviors directly linked to

their trauma and mental health conditions, they are left to cycle through emergency departments, short-term placements, and sometimes even the juvenile justice system — further compounding their distress and diminishing their chances for recovery.

As Oregon continues to fall short in offering appropriate treatment for individuals with complex co-occurring medical, developmental, and psychiatric conditions, out-of-state care has become a necessary but deeply concerning option. When we recommend out-of-state care, it is always a last resort and a reflection of the lack of appropriate programs within Oregon. It is never our goal to send individuals out of state, and frankly, there are significant barriers that often make this option inaccessible — particularly for youth in foster care and those covered by Medicaid. HB 3835 will allow out-of-state care to be an option once again, but only as a last resort. More importantly, it proposes necessary changes so that our current programs can return to effectively caring for youth with high acuity needs, reducing the need for out-of-state placements altogether.

As a provider in the mental health field, I am disheartened by how difficult it has become to navigate these systems. Youth and families in crisis need Oregon to step up and provide better pathways to care that are easier to access and navigate. When families are already in crisis, they should not have to fight through complex systems just to receive basic care and support. HB 3835 represents an opportunity to simplify and strengthen these systems so that youth receive timely, appropriate care without unnecessary barriers.

I believe HB 3835 acknowledges the egregious situations that have occurred in the past and implements appropriate safeguards to ensure these situations do not occur again. This bill represents a balanced and thoughtful approach to improving care while protecting both youth and the professionals tasked with supporting them in moments of crisis.

HB 3835 offers a meaningful opportunity to strengthen Oregon's behavioral health system by expanding access to care, improving service coordination, and ensuring that youth in crisis are met with understanding and evidence-based interventions. Investing in these services is not only a moral imperative but also a smart strategy for reducing long-term costs associated with untreated mental health issues and improving overall community well-being.

I urge you and your colleagues to support HB 3835 and help create a future where all Oregon youth have access to the behavioral health services they need to succeed. Thank you for your attention to this critical issue. I am happy to provide further insights from my professional and personal experience if that would be helpful.

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