

Opponent Testimony on House Bill 172
House Health Committee
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Chair Schmidt, Vice Chair Deeter, Ranking Member Somani, and Members of the House Health Committee, thank you for the opportunity to provide testimony on House Bill 172.

My name is Davina Blanton, and I am Senior Director of 24/Hr Programming at Women Helping Women (WHW). WHW is a community-based agency that provides prevention and education services to empower the community, along with 24/7 crisis support, advocacy, and rape crisis services to survivors of Intimate Partner Violence, Sexual Assault, Teen Dating Violence, and Stalking in Adams, Brown, Butler, Clermont, and Hamilton Counties. Each year, our advocates support more than 8,000 survivors through our 24/7 hotline, hospital advocacy, legal advocacy, and other trauma-informed services. I am here today to express strong opposition to House Bill 172.

HB 172 would eliminate the currently allowed 6 sessions or 30 days of crisis counseling without parental consent for minors 14 and older. For survivors of sexual violence, this bill creates new barriers to safety, undermines recovery, and increases the likelihood of long-term harm. Survivors are already navigating a system that is deeply challenging, retraumatizing, and often lacking the skills to their needs, holistically. HB 172 adds yet another obstacle, forcing survivors to weigh their physical safety, their economic stability, and their fear of retaliation when seeking help.

The bill would increase barriers to reporting and accessing services. Policies that reduce local protections or weaken support structures deepen the fear and isolation that survivors often face. This legislation undermines our local efforts to serve survivors. One of the 24-Hour programs I am responsible for is our Rural Program. Many of Ohio's rural counties are mental health professional deserts, with few or no child therapists available locally. Adams & Brown Counties are two of the counties we serve in Southern Ohio, and they are no exception. Families often travel long distances, have limited transportation, and incur month-long waitlists for care. This is where free & confidential services like our 24/hr crisis line become life-changing for young victims of abuse.

In low-resource areas, schools often serve as the primary point of contact for health and safety interventions. In 2024, Women Helping Women provided prevention services to more than 4,000 students in our 5-county service area. This service creates a safe space for disclosures of abuse and quick initiation of intervention services which includes connecting children to additional care. House Bill 172 would exacerbate these gaps by imposing an additional parental consent requirement. For children in unsafe homes, this could mean no safe pathway to disclosure or treatment anywhere nearby.

Our agency works with survivors every day who face immense trauma and barriers to safety. We hear from survivors who hesitate to seek help because their options feel unpredictable or unsafe. Many rely on stable, accessible community support, like advocacy crisis intervention, to begin healing. Survivors repeatedly tell us that policies removing local autonomy or reducing protection make them feel less safe, not more. As you consider HB 172, I urge you to focus on the real children and families who will feel the impact of this legislation.

Child victims do not need more obstacles; they need stability, safety, and the assurance that their communities will support them. As an advocacy agency, WHW is charged with ensuring that when those needs aren't met, we bring it to the people who can make change. On behalf of the survivors we serve every day, including those ages 14 and older, I respectfully encourage the House Health Committee to oppose the passage of House Bill 172.

Thank you for your time and the opportunity to testify in opposition of this legislation. I am happy to answer questions currently or via email at dblanton@womenhelpingwomen.org.