



## **OHIO PSYCHOLOGICAL ASSOCIATION TESTIMONY ON HB 172 OHIO HOUSE HEALTH COMMITTEE**

*November 19, 2025*

Chair Schmidt, Vice Chair Deeter, Ranking Member Somani and members of the Ohio House Health Committee, thank you for the opportunity to provide testimony in opposition to House Bill 172. My name is Dustin McKee, and I am the CEO of the Ohio Psychological Association (OPA). OPA represents the more than 3,500 psychologists who currently practice in Ohio and is the voice of the profession of psychology in our great state.

### **Bridge to Family Support**

As others have pointed out, ORC 5122.04 was enacted in 1989 to provide a safe avenue for young people like the ones I am referring to here. For 36 years, this statute has provided a safe path to psychological support for the young Ohioans. It has also helped entire families in complicated circumstances to become engage in holistic, family centered therapy to improve the quality of life and relationships of every family member connected to the youth.

For many parents, the six-session window is the difference between a teen who seeks help and a teen who hides symptoms until the crisis is unavoidable. This law facilitates family involvement by providing young people access to a mental professional in whom they can confide things like feelings of anxiety, depression, bullying, trauma, or emerging suicidal ideation when they simply cannot bring themselves to tell a parent or guardian. The trained professional can then apply their knowledge of best practices to build enough rapport with the young person that they can then bring the parent into the support and treatment process in a safe and constructive way.

This process- what clinicians call a "warm handoff"- is not about excluding parents. It's about timing the inclusion appropriately for therapeutic success. Mental health professionals use these sessions to assess safety, build trust, and create the conditions where family involvement will strengthen rather than fracture the therapeutic relationship.

### **Reinforcement to Mandated Reporting Law**

In more extreme circumstances where a young person is experiencing abuse from a parent or guardian and is seeking support from a mental health professional, 5122.04 provides a temporary period of time where they can access care to help them survive the abuse and receive guidance about how to escape that abuse.

## **The Cost of Delay: Crisis Escalation & Emergency Intervention**

It is increasingly common for youth in this age group to be experiencing suicidal thoughts and be at an elevated risk of acting on those suicidal thoughts. Sometimes, these thoughts and feelings are ones they cannot share with their parents, intensifying their isolation and elevating their risk of dying by suicide. At a time when Ohio has seen a surge in youth suicide - the second leading cause of death for people in this age group -eliminating this law will further isolate teens in such a scenario.

Passing HB 172 would create circumstances that would leave the parent unaware of their child's suffering and/or the acute risk of suicide their child faces—because the child never sought help in the first place.

Without this law, the teen will not have that bridge of support during the sometimes-extended time it can take to substantiate a report or allegation of abuse. Psychologists will tell you firsthand that when early help becomes harder to access for Ohio youth, emergencies will become more common for our loved ones in this age group.

In circumstances like these, 5122.04 acts as a helpful supplement to the mandatory reporting statutes, temporarily allowing for immediate access to confidential care while the child protective services authorities take the necessary time to complete the information gathering process required when a report of abuse is filed. The current mandated reporting statutes do not address this vital issue and would also suffer from the elimination of it due to its complimentary function.

Again, this bill would eliminate the current law providing a path to immediate care and support for the young person. They may have no other place to turn to help them survive and begin to heal from any number of threats to their life and mental wellbeing.

## **Impact on Rural Communities**

In rural Ohio, where mental health resources are already scarce, eliminating this pathway could mean no access at all for vulnerable youth. School counselors, school psychologists, and community mental health centers—often the only resources available in these areas—rely on this provision to provide initial crisis intervention and connect youth to ongoing care.

For families in these communities, the nearest mental health professional may be an hour away. If a teen knows that calling that provider means immediate parental notification before they're ready, they simply won't make the call. The result is isolation, deterioration, and eventual crisis.

## **Gender Related Conditions**

OPA believes that it is important to note that - although some proponents of this legislation have cited concerns about professionals discussing gender-related issues with a young person without a parent's consent – the Ohio General Assembly recently carved out an exception to 5122.04 in HB 68 that specifically requires a mental health professional to obtain parental consent before discussing any gender related issues.

In short, the General Assembly has already addressed these concerns. Thus, striking this entire statute from the code will only further erode protections that exist in current law to help young people experiencing abuse, neglect, suicide and other significant threats to their health and wellbeing.

## **Conclusion**

HB 172 would repeal a 36-year-old, narrowly tailored, safety valve designed to prevent tragedies and to help families reconnect in moments of profound distress. It was originally enacted as part of a series of mental health reforms passed by the Ohio General Assembly aimed at providing more local dollars, local control and support for families and young people navigating mental health challenges.

OPA supports efforts to increase family involvement with young people. It is a long-established best practice in psychotherapy and is just the simply the right thing to do for young Ohioans and their families. Unfortunately, HB 172 il not serve this end, and will only keep young people from the mental health and family support they desperately need. Thank you for this opportunity to testify before you today, I welcome any questions at this time.