

**House Health Committee  
Opponent Testimony to HB 172  
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**November 19, 2025**

Chair Schmidt, Vice Chair Deeter, Ranking Member Somani and honorable Members of the House Health Committee, thank you for allowing me to testify as a licensed independent social worker on behalf of youth in Ohio. I have serious concerns about the implications of House bill 172 as it puts access to immediate mental health care for youth in Ohio at risk.

Within my 20 years as a behavioral health social worker, in private practice for the past five years, I have countless times with evidence that the existing Ohio law of the Ohio Revised Code 5122.04 has protected youth from exacerbated mental health symptoms, helped parents know how to help their child, and potentially saved two teen lives. Eliminating this law would effectively withdrawal positive impacts like this for youth in the future and no longer provide protection to them as this law has shown to do.

On a Tuesday morning in 2020, I answered a call from an emotionally frantic teen who said they were calling me for help because their friend said I could help them, too. They described that they learned that morning of the sudden death of a close friend and while they were unsure of why they died, the teen I was speaking to had been suicidal themselves and the friend who died had been a support to them and they didn't know where to turn now that the friend had died. After assessing for safety, I encouraged them to talk with their parents about their feelings and how to do so. After that call, I saw the teen in-person a few times under the protection of this law and helped them develop a narrative for how to talk with their parents about their mental health. I soon received a call from one of their parents acknowledging my discussion with their teen and then asking for me to continue to meet with them to process the death of their teen's friend, which also lead to working through the internal issues that had previously resulted in suicidal thinking—all under parental consent. That teen is now a sophomore in college studying psychology.

In 2021, at the request of a teacher at a high school, I spoke with a group of kids on the topic of coping skills for stress. After the group engagement, a student approached me asking to talk about something he was facing and needed help figuring out how to talk with his friend about it. We scheduled time to meet in my office after school, where he described a heartfelt concern for his friend who had been depressed and suicidal and he wasn't sure how to help him. Of compounding concern for the teen I was speaking was the family history of suicide and this is why he hadn't approached his parents to talk about his friend—to protect his parents from the pain of remembering the family tragedy. Together, we discussed the options for helping his friend, which included talking with his parents and that navigating that together was an option. He called his father in our session, told him he was meeting with me because of his friend and wanted us to meet jointly to talk about it. The father agreed and we met the next day. Both parents attended, the teen felt supported and more certain about how to help his friend, meanwhile, the adults contacted his friend's parents. The depressed teen was connected to the help he needed. This experience created a ripple effect between the two boys, and what it meant to be a friend. I always wonder how

many other youth were impacted by the situation as it gave power to each of them on talking about mental health and acting when mental health help is needed.

Lastly, in the summer of 2023, I walked into the lobby of my practice to find nine teen girls congregating and swiftly turning my direction with one saying “can you help us?” One girl breaking down crying as another shared their beloved coach had died over the weekend and it had been said it was by suicide. Consequentially, many of the students were questioning their own mental health ability to get through the loss and were concerned about one of their teammates (who was not present that day) as they known to have chronic suicidal thoughts. Together, we spent the next hour processing the grief and loss that they collectively are experiencing and discussed ways to move forward, that included engaging support systems. I had several parents contact me over the next days, asking for me to work with their youth to continue to process the loss. I provided guidance to the parents on how to support their youth through a sudden loss of a mentor, and as it was determined that this person did complete suicide, we reconvened as a group again and continue to provide guidance to the parents. Ultimately, none of this would’ve been possible had I needed consent in those immediate moments when access to mental health care was needed.

The time I was able to spend under the protection of the current law changed the trajectory of the lives of each of these youth. House bill 172 aims to take that away. I ask you to vote no on house bill 172 so that youth access to immediate mental health care continues in the moments that they needed the most.