February 16th, 2023

Honorable Chair Wayne MacDonald
House Health, Human Services and Elderly Affairs Committee
Legislative Office Building 201-203
33 N State St., Concord, NH 03301

RE: NAMI NH Support for HB 114

Dear Chair and Committee Members:

Thank you for the opportunity to testify today. My name is Sam Hawkins, and I am the Public Policy Assistant at NAMI NH, the National Alliance on Mental Illness. NAMI NH is a non-profit, grassroots organization whose mission is to improve the lives of all people impacted by mental illness and suicide through support, education and advocacy. On behalf of NAMI NH, I am here today to speak in support of HB 114, relative to the age at which a minor may receive mental health treatment without parental consent.

Over the past decade, already-high suicide rates have been rising in the United States and New Hampshire. According to Health Affairs, between 2007 and 2018, suicide increased 57.4 percent in 10–24-year-olds. In one survey of high school students, one in three youth reported persistent feelings of sadness or hopelessness and one in five had seriously considered suicide.¹ More precisely, 2019 New Hampshire data indicated that 18.8% of high school students seriously considered suicide, and 8.9% attempted suicide. In New Hampshire, suicide is the second leading cause of death for individuals ages 10-24.

New Hampshire needs to look at new ways to address the youth mental health crisis and reduce barriers to care. HB 114, which would allow youth 16 and older to receive treatment without parental consent, is one important measure in doing so.

Many factors impact an individual’s willingness to seek care for their mental health. Concerns over personal privacy, social stigma, and the fear of rejection have the potential to leave someone struggling alone and in silence. For teenagers, these possible consequences can seem even more intimidating, and without care, their mental wellbeing will likely continue to decline, pushing them towards crisis.

¹ “Understanding Suicide Risk And Prevention,” Health Affairs Health Policy Brief, January 29, 2021.
Rates of mental health symptoms, including suicidal thoughts and attempts, are higher for LGBTQ individuals. According to the Trevor Project, in 2022, 72% of LGBTQ youth in NH reported experiencing symptoms of anxiety, 55% reported experiencing symptoms of depression, 39% seriously considered suicide, and 10% attempted it. Within that population, 52% wanted mental health care but were not able to receive it. Of those who were not able to receive treatment, 37% reported that this was due to not wanting to have to get their parent’s or caregiver’s permission.

Where possible, we believe that familial support and involvement can make a huge positive impact on a minor’s path through mental health treatment. In NAMI NH’s experience, providers who are proficient in their practice will focus on helping a child get to a point where they feel comfortable reaching out to their parent or guardian for support. For those minors who would be unsafe disclosing their condition or would feel more comfortable taking their first steps towards treatment privately, access to care without parental consent is crucial and could be potentially lifesaving.

For these reasons, NAMI NH urges the committee to recommend Ought to Pass for HB 114.

Sincerely,

Samuel C. Hawkins