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**Bill:** HB132  
**Title:** Health – Mental and Emotional Disorders – Consent (Mental Health Access Initiative)  
**Date:** February 16, 2021  
**Committee:** Health and Government Operations  
**Position:** Support

To the Honorable Delegate Shane E. Pendergrass and Esteemed Members of the Committee:

FreeState Justice is a statewide legal advocacy organization that seeks to improve the lives of low-income lesbian, gay, bisexual, transgender, and queer ("LGBTQ") Marylanders. FreeState Justice advocates for LGBTQ youth, and we represent hundreds of LGBTQ youth clients each year. We consistently see the impacts of LGBTQ youth being denied affirming mental health care and the often long-lasting damage that can occur as a result. LGBTQ youth must have access to affirming mental health care.

Anti-LGBTQ bias and structural, systemic oppression lead to a disproportionate incidence of mental health disorders in LGBTQ youth. Research shows that lesbian, gay, and bisexual (LGB) youth are four times more likely, and questioning youth are three times more likely to attempt suicide than their straight peers.<sup>1</sup> Nearly half of young transgender people have seriously thought about taking their lives, and one-quarter report having made a suicide attempt.<sup>2</sup> Young people who experience family rejection based on their sexual orientation, including being subjected to conversion therapy, face severe health risks. Research reveals that LGB young adults who report higher levels of family rejection during adolescence are 8.4 times more likely to report having attempted suicide, 5.9 times more likely to report high levels of depression, 3.4 times more likely to use illegal drugs, and 3.4 times more likely to report having

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<sup>1</sup> CDC, "Sexual Identity, Sex of Sexual Contacts, and Health-Risk Behaviors Among Students in Grades 9-12."

<sup>2</sup> Arnold H. Grossman & Anthony R. D'Augelli, *Transgender Youth and Life-Threatening Behaviors*, 37(5) *SUICIDE LIFE THREAT BEHAV.* 527 (2007).

engaged in unprotected sexual intercourse compared with peers from families that reported no or low levels of family rejection.<sup>3</sup>

In addition to this disproportionate incidence, LGBTQ youth similarly lack access to quality and affirming mental health care, further exacerbated by poverty and racism. The COVID-19 pandemic has only entrenched these barriers to access.<sup>4</sup> Last year, The Trevor Project reported that overall, more than half (54%) of LGBTQ youth have reported wanting mental health services but were unable to obtain it within the past year.<sup>5</sup> That same report highlighted that the second most common barrier was concerns around obtaining parental permission or consent, with over one-third fearing needing parental consent, including half of Asian American or Pacific Islander LGBTQ youth.<sup>6</sup>

To this effect, HB132 and its decrease of the age of consent for mental health services to 12, as well as the discretion of a health care provider in disclosing information to a parent or caregiver, would reduce barriers to mental healthcare for LGBTQ youth as they seek support on sensitive issues such as coming out, relationship issues, rejection, or even abuse.

**FreeState Justice strongly urges the Committee to issue a favorable report on HB132.**

Thank you for the opportunity to comment on this critical legislation, and please do not hesitate to contact us if we can be of further assistance.

Sincerely,



Jeremy LaMaster (he/they)  
Executive Director

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<sup>3</sup> Caitlyn Ryan et al., "Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and Bisexual Young Adults," 123 *PEDIATRICS* 346 (2009).

<sup>4</sup> Bowleg, L. (2020). *We're Not All in This Together: On COVID-19, Intersectionality, and Structural Inequality.* *American Journal of Public Health*, 110 (7), 969-970.

<sup>5</sup> Green, A.E., Price-Feeney, M. & Dorison, S. (2020). *Breaking Barriers to Quality Mental Health Care for LGBTQ Youth.* New York, New York: The Trevor Project.

<sup>6</sup> *Ibid*