

SB 2265 – Relating to allowing unaccompanied homeless minors to access health care without parental consent

SUPPORT

**Hearing of the House Human Services Committee, March 8, 2021
Testimony of Patricia Julianelle, SchoolHouse Connection**

SchoolHouse Connection is a national non-profit organization dedicated to overcoming homelessness through education and responding to the needs of students experiencing homelessness on a federal, state, and local level. We are experts in the public policies necessary to help youth experiencing homelessness access safe and appropriate services, graduate from high school and college, and find stable housing to end their homelessness permanently.

SchoolHouse Connection strongly supports SB 2265, which would allow unaccompanied homeless youth 14 and older to consent for routine health care, including behavioral health care— but not abortion. Unaccompanied homeless youth lack stable housing and are not in the physical custody of a parent or guardian. Unaccompanied homeless youth have no parental support to meet their most basic needs, including shelter, health care, food, and clothing. These young people are homeless on their own for various reasons, primarily related to poverty and family instability/dysfunction, and are striving to survive in unsafe or unstable environments.

In the 2018-2019 school year, North Dakota’s schools served 285 unaccompanied homeless youth.¹ The Youth Risk Behavior Survey administered to high school students across North Dakota found that unaccompanied youth are:

- 10.9 times more likely to use methamphetamines than housed students
- 9.5 times more likely to engage in binge drinking
- 3.4 times more likely to abuse prescription medication
- 4.2 times more likely to be raped
- 3.6 times more likely to attempt suicide
- 3.4 times less likely to see a dentist

Obviously, unaccompanied youth desperately need access to basic health services and behavioral health treatment. Currently, North Dakota law allows youth under age 18 to access only a limited scope of health services: STD and substance abuse treatment, prenatal and pregnancy care, and emergency care. Unaccompanied homeless minors cannot access basic health care (including physicals and dental care), or behavioral health care, without parental consent. Lack of basic treatment can lead to routine problems becoming dangerous, and even can lead to death by suicide, overdose, or illness. **SB 2265 would remove these barriers, in a narrowly focused way that will**

¹ National Center for Homeless Education (2021).
<http://profiles.nche.seiservices.com/StateProfile.aspx?StateID=34>.

only impact the small but very vulnerable population of unaccompanied homeless youth in North Dakota.

SB 2265 also would align North Dakota with 30 states that already allow unaccompanied youth to access basic health and behavioral health services without a parent. The American Academy of Pediatrics also supports these measures.² Although I have been working on minor medical consent issues for over a decade, I am not aware of any legal issues or unintended consequences of these policies. On the contrary, schools and service providers report that allowing unaccompanied youth to access basic health services helps keep them safe, healthy, and able to attend school and work consistently, so they can end their homelessness.

For these reasons, SchoolHouse Connection strongly urges the committee to pass SB 2265. I am happy to respond to any questions or concerns.

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² See, e.g., Rhonda Gay Hartman (December 2002). "Coming of Age: Devising Legislation for Adolescent Medical Decision-Making." *Am. Journal of Law & Medicine*. Pittsburgh: U. of Pittsburgh School of Medicine.