

To the members of the Behavioral Health & Health Committee:

As a psychiatrist board certified to administer care to both adults and children and as a practitioner who has served many in Roseburg, OR since 1982, I am strongly opposed to SB 2002. This bill would, if passed, give minors 15 years old and above the right to make health care decisions for themselves in the areas of reproductive health care and gender affirming health care services.

Giving teens medical autonomy in any area of health care would put them in the position of being extremely vulnerable to manipulation and coercion by well-meaning professionals who may not know the underlying circumstances of the young person in front of them. Such pressure may also be promoted by others who have a political agenda in mind rather than what's best for the individual requesting such care.

Parental permission is required in almost every other medical decision for valid reasons. Teens have neither the emotional maturity nor the awareness to ask questions about the benefits, risks, or alternatives to the procedures used in both reproductive & gender affirming care. We now know that the brain does not stop maturing until at least age 25.

For the last sixteen years, I've been working in the Emergency Department of our local hospital and have seen many children, teens, and young adults as well as older adults.

Many of today's children and teens are really struggling emotionally. Day after day in every Emergency Dept. in OR and in most states, teens and younger children come in for treatment of attempted suicide, suicide ideation or threats, self-mutilation, major depression, anxiety, etc.

Some of the underlying factors include: no father in the home, physical, emotional &/or sexual abuse, coming home to an empty house because mom is at work, smoking marijuana + taking other harmful drugs, truancy or doing very poorly in school.

Loneliness is a common factor due to isolation and, ironically to having unfettered access to smart phones & social media. Several teens & young adults who have entered the ED have told me & the nurses that social media is "my only friend".

Parents who come into the ED with their children or teens are desperate and want help for their children. Once I understand the underlying factors which contributed to a patient's problems, I can help connect their parents with community resources to help their child, sometimes prescribe needed medication, and sometimes hospitalize the child or teen.

We as citizens, health care providers, and law makers need to ask, "Is what we're proposing actually getting to the root of the problems, or will our actions cause more serious, irreversible, and possibly lifelong issues for those we are trying to help?" Most parents are competent and loving and really want to help their teen, and most children and teens need the input of their parents.

Thank you:

George Middlekauff, MD PhD