To: Senate Committee on Human Services

Date: February 14, 2024

Re: Support SB 1547 (2024)

Please pass SB 1547.

Adolescent substance use is a serious public health concern. Many Oregon families are affected by teens struggling with substance use, especially during the much-publicized post-pandemic era mental health crisis that has had a particularly devastating effect on adolescents. Someone in your neighborhood, at your workplace, at your church, or at your child's school is silently grappling with a loved teen's substance use. There is a tremendous need for resources and treatment opportunities for teens. SB 1547 will provide parents with a meaningful opportunity for intervention and treatment.

A well-known adage is that recovery is only possible when someone struggling with addiction hits rock bottom and wants to change. That's true enough. However, with Oregon's streets now awash with fentanyl-laced drugs that can be ordered and delivered with a few swipes on a cell phone, the new reality is that a child may not survive long enough to have a rock bottom.

And yes, we're talking about *children*. The adolescent brain is still a work in progress. Executive functioning and critical thinking skills are not fully developed until young adulthood, while novelty-seeking, risk-taking, and impulsivity are at their peak during adolescence. Drug use further impairs executive functioning and decision making. Asking a child who is neurodevelopmentally ill-equipped—and probably in the intoxicated throes of active use—to make a rational decision about their healthcare does that child a disservice.

SB 1547 is narrowly drawn to simply provide parents the ability to initiate substance use treatment for their child. It is not an absolute or unilateral power and *does not* enable long term forced treatment against the child's will. SB 1547 allows up to 14 days of inpatient treatment, if a qualified professional—not the parents—determines that specific criteria exist. If the child is not willing to continue treatment after the 14-day period, or even sooner if the treatment provider determines the child is not benefiting from treatment, the child will be released. 14 days can provide a teen's brain with a break from use and a chance to engage with therapeutic interventions. 14 days isn't forever, and it could be the start of a recovery process that the teen is able to embrace. It provides a space for buy-in to the recovery process.

I am the parent of a teen who did agree to voluntary inpatient treatment after two overdoses during a 1week period in 2023. They were reluctant, and later reported that when they started treatment, they weren't actually very interested in recovery—but by the time they left the inpatient program, they had regained an interest in life and in recovery. What made the difference? According to my child, *time away from drugs and exposure to treatment*. I am grateful my child survived and agreed to go to inpatient treatment. But all parents should be given the ability to create an opportunity for wellness for their child, even (or especially) when the child is debilitated and unable to discern their own best interests.

Thank you for your consideration.

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