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Testimony for the House State Affairs Committee on House Bill 1035 and House Bill 3172

NAMI Texas is a nonprofit 501(c)3 organization founded by volunteers in 1984. We are part of the nation’s largest grassroots mental health organizations and we exist to help improve the quality of life for individuals with mental illness and their families. Around the state, we have 27 local NAMI affiliate organizations and approximately 2,000 members.

House Bill 1035 and House Bill 3172 limit access to mental health services.
Texans with mental illness already face serious obstacles to receiving mental health services.
- Texas is ranked second to last nationally in access to mental health care.\(^1\)
- Twelve million Texans live in areas designated as mental health care health professional shortage areas.\(^2\)

With our serious mental health provider shortages, being denied access to one or more providers could mean traveling hours to find a provider who will accept an LGBTQ person with mental illness or other impacted individual. If the entire agency or area of the state decides they do not want to serve a specific population based on religious beliefs, that may eliminate this vulnerable person’s ability to receive any critical services. The mere threat of this possibility will have a chilling effect on their ability to receive services, as stigma discourages individuals from seeking out help.

House Bill 1035 and House Bill 3172 specifically limit access to mental health services for LGBTQ Texans.
- Stigma and discrimination contribute to adverse health outcomes for LGBT people such as major depressive disorder, binge drinking, substance use, and suicidality.\(^3\)
  - Bullying and family rejection, as well as social stigma more broadly, have been linked to increased likelihood of school dropout, suicide, and substance use among LGBT youth.\(^3\)
- 43.8% of gay and lesbian high school students in Texas reported attempting suicide in the past year in 2017, almost five times as high as heterosexual students in Texas.\(^4\)
  - 12.3% of Texas high school students overall reported attempting suicide.\(^4\)
- 58.8% of gay and lesbian high school students reported feeling sad or hopeless to a degree of reduced functioning for at least two weeks in the past year, which is almost twice as high as heterosexual students.\(^4\)
- LGBTQ Texans are significantly more likely to be living in poverty, which further limits their access to mental health treatment and other necessary services.\(^3\)
- Indiana saw a dramatic spike in reported health issues, including mental health issues, amongst LGB adults, shortly after the passage of a similar law in Indiana, the Religious Freedom Restoration Act.\(^5\)
House Bill 1035 and House Bill 3172 do not guarantee protections for the individual being denied service.
There is no mechanism in place in this bill for an individual who has been denied necessary mental health treatment to guarantee they will receive treatment elsewhere. As an organization, we regularly interact with and advocate on behalf of people who struggle to receive basic services without this law in place. People who are often marginalized and discriminated against because of their mental illnesses, much less other identities they may have. Without robust protections in place for the individuals being denied important treatment under this law, especially guaranteed access to mental health services, we strongly believe this will harm the few protections certain groups of vulnerable individuals with mental illness may have in guaranteeing they receive vital treatment.

House Bill 1035 and House Bill 3172 violate the code of ethics for every major licensed mental health provider in Texas.

**National Association of Social Workers**
4.02 Discrimination - Social workers should not practice, condone, facilitate, or collaborate with any form of discrimination on the basis of race, ethnicity, national origin, color, sex, sexual orientation, gender identity or expression, age, marital status, political belief, religion, immigration status, or mental or physical ability.

**American Counseling Association**
C.5. Nondiscrimination - Counselors do not condone or engage in discrimination against prospective or current clients, students, employees, supervisees, or research participants based on age, culture, disability, ethnicity, race, religion/spirituality, gender, gender identity, sexual orientation, marital/partnership status, language preference, socioeconomic status, immigration status, or any basis proscribed by law.

**American Psychological Association**
3.01 Unfair Discrimination - In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.

**NAMI opposes any legislation that denies any health treatment or supports based on identity.**
“…THEREFORE, BE IT RESOLVED that NAMI strongly opposes any policy or legislation that has the effect of impeding, limiting or denying access to medical, mental health or substance use care, employment, education, housing, public accommodations, or other life activities based on an individual’s health or mental health status, disability, age, gender, race, ethnicity, national origin, religion, language proficiency or sexual or gender orientation.”

**References**