

AB 665 Youth Fact Sheet

Problem: California is facing a long-standing youth mental health crisis that has been exacerbated by the economic, political, and health stressors of the global pandemic. There are systemic barriers to accessing care, particularly for low-income children of color and LGBTQ+ youth. Current California law creates two different standards for when youth ages 12 and older can access care based on their own consent, making it harder for youth on Medi-Cal to get help.



- In 2020, youth, particularly Black, Latinx, and girls, all showed disproportionate increases in suicide.
- A shocking 78% of LGBTQ+ youth who were surveyed shared they had considered suicide.
- Roughly half of California's children are covered by Medi-Cal - the vast majority of whom are BIPOC.
- Less than 19% of low-income teenagers on Medi-Cal received screenings for depression and a follow-up plan in 2020.
- Less than 9% of Indigenous youth on Medi-Cal received a screening and plan - the lowest of any racial/ethnic group.

Sources:



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Solution: AB 665

- AB 665 would align the standards of mental health care consent for all young people in the state -- significantly removing barriers to care, especially for young people on Medi-Cal
- By aligning the standards in the mental health care codes for Medi-Cal and non-Medi-Cal users, AB 665 would allow all youth, including those on Medi-Cal, to get the help they need before things escalate to a crisis situation.
- AB 665 would ensure all young people ages 12 and older to consent to their own outpatient mental health treatment when they are mature enough to participate intelligently in the services, while still allowing providers, after consulting with the youth, to involve the youth's parent(s) when appropriate.

