YProfessional Association

MULTI-SPECIALTY MENTAL HEALTHCARE
Jacqueline R. Pfeifer, Ph.D. W.A. Moffitt, III, Ph.D.
Leif E. Leaf, Ph.D. Everett D. DeHaven, Ph.D. Deborah Weidinger, PhD

3515 S. Fourth Street, Suite 101 Leavenworth, KS 66048 Voice: (913) 651-8415

Fax: (913) 772-8580

Answering Service: (800) 600-4200 www.professionalassociation.phd.com

101 East Cedar Street Olathe, KS 66061 Voice: (913) 393-3828 Fax: (913) 768-1143

January 21, 2020

Dear Chairmen Barker and Wilborn, Members of the Joint Committee:

My name is Dr. Jacque Pfeifer, I am a licensed psychologist working in a multi-specialty mental health private practice which I am the CEO and owner. I would like to thank you for the opportunity to express my support for the "Value Them Both Constitutional Amendment" and to share professional empirically based evidence and clinical observations about why I believe that it is critical that the legislature pass this Amendment onto Kansas voters.

I am a doctoral level psychologist with 27 years of experience in the mental health field. I have had 10 years of formal university education along with multiple practicum sites, a full year internship, and two years of post-doctoral supervision before I was considered prepared to work independently with clients. I have worked in a myriad of jobs including in-home family therapy for DFS, Adjunct Professor at three universities, Intern at the Substance Abuse Comprehensive Treatment Center at a community mental health center, Psychometrist at Osawatomie State Hospital, Staff Psychologist at Rainbow Mental Health Center, Neuropsychologist at two private neuropsychological hospitals, and my current position as owner of Professional Association (dba Care of the Soul) with offices in Leavenworth and Olathe I see over 40 clients per week. I have completed two years of post-doctoral work in psychopharmacology preparing for a time when psychologists will prescribe medication, and I am currently enrolled in post-doctoral training with the Kansas City Psychoanalytical Institute.

I feel very passionate about the need for parental consent and notification regarding youth pursuing abortions. I have worked with children and teens for 27 years and have much to say about their cognitive, social, emotional, and moral development. People of sound mind and sound morals have and will debate abortion. For me, our discussion today is about family and the State. Without parental notification and consent, our state will be facing inconsistent laws regarding the governing of youth. Currently in Kansas, minors are not allowed to consent to sexual intercourse until they are 16-years-of-age, they cannot join the military or vote until 18-years-of-age and they cannot buy cigarettes until they are 21-years-of-age. A child under the age 18 cannot receive a piercing or tattoo without parental consent. These laws were made with logic and reason based on cognitive, emotional and moral developmental theories. I believe these theories can assist legislators in the matter being discussed today.

Minors are simply not prepared to make long-term decisions due to their lack of mental capacity to reflect, synthesize, integrate, and project their thinking into the future. Minors will change their minds frequently due to their lack of life experience. We should not promote quick answers to serious decisions that will impact them in their wholeness, mind, body, and spirit. One technique we use in therapy is to help them kids make decisions by projecting themselves into a

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five-year plan. We also have them visualize their future self and to image talking it out with this more mature version of themselves.

Another imperative point is that of secret keeping. If minors are allowed or encouraged to keep secrets from their parents who have birthed and parented them, how can we expect normal communication and healthy attachment? The chasm that develops is equivalent to minors who have kept secrets for fear of parental rejection or abuse. These minors develop mental health problems over their lifetime resulting in Post-Traumatic Stress Disorder, Dissociative Disorder, and personality disorders. Secrets put neurological strain on the brain to perform its biological and instinctual tasks, causing stress to the prefrontal cortex. The bigger the secret the greater the anxiety and the flight or fight response. Secrets lead to sustained mental stress and have the power to manifest in a physiological way to include digestive problems, high blood pressure, insomnia, thyroid conditions, and a weakened immune system. Suicide attempts and death by suicide are also highly correlated to secrets.

Our job as therapists is to provide a non-judgmental, accepting and supportive environment so that minors can learn to use logical problem solving to derive the best solutions for their circumstance. I believe that parents who have been their first teachers are a significant benefit to this agenda. In the case of minors reporting fears of parental abuse or abandonment, we as protective adults and mandated reporters should act in the same manner we would with any emergency. We should contact the Division of Family Services so that a safe and healthy environment is available and family counseling can begin.

I am speaking today as both a veteran clinician but also a volunteer rights to maintain their pregnancies. My husband and I were consultants and psychological volunteers for years with a nonprofit called Nativity House. The women who were given services and shelter were homeless and had high risk factor including mental health disorders, substance abuse, parental alienation, and low education. We offered housing, counseling, education, and guidance. As volunteers we accompanied the residents through their pregnancies and the first year of the child's life in order to support and guide them. We continue to act as Shepherding Family to several of these women and their children five years later.

In closing, I want to thank you for hearing my testimony as a clinical psychologist, volunteer, mother of two daughters, and lifetime Kansas resident who believes there are better ways to assist pregnant teens when they have an unplanned pregnancy. It is so sad that any young teen faced with a crisis pregnancy would have to make such a major decision that could negatively impact the rest of her life without the support of those individuals who know and love her the best. Instead, we should be addressing the root problem making abortion less necessary. We need a comprehensive approach that promotes adolescent health, disease prevention,

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reproductive education, the value of abstinence, along with readily available mental health services. Viable alternatives to abortion need to be presented and accompaniment and wraparound services for the teen as she journeys through the pregnancy so that we can affirm young womanhood and prevent teen pregnancies.

Bottom line, whenever a child is faced with a major life decision, they need the support, guidance and input from adults who know them best, their family. No matter how intimate the relationship, educators and health care professionals are temporary influences, wherever family remains forever.