



NARAL
Pro-Choice America

National Medical and Public-Health Organizations Support Confidential Health Services for Young People

American Medical Association: “[A]ssurance of confidentiality may be critical to ensuring that minors are not deterred from seeking medical care.”

“With respect to parental involvement when minors seek an abortion, the AMA believes that the following guidelines constitute good medical practice: (1) Physicians should ascertain the law in their state on parental involvement...(2) Physicians should strongly encourage minors to discuss their pregnancy with their parents...(3) Physicians should not feel or be compelled to require minors to obtain consent of their parents before deciding whether to undergo an abortion. The patient – even an adolescent – generally must decide whether, on balance, parental involvement is advisable. Accordingly, minors should ultimately be allowed to decide whether parental involvement is appropriate. (4) Physicians should try to ensure that minor patients have made an informed decision...Minors should be urged to seek the advice and counsel of those adults in whom they have confidence, including professional counselors, relatives, friends, or the clergy.”¹

American Academy of Pediatrics: “The AAP reaffirms its position that the rights of adolescents to confidential care when considering an abortion should be protected. Genuine concern for the best interests of minors argues strongly against mandatory parental consent and notification laws. Although the stated intent of mandatory parental consent laws is to enhance family communication and parental responsibility, there is no supporting evidence that the laws have these effects... There is evidence that such legislation may have an adverse impact on some families and that it increases the risk of medical and psychological harm to the adolescent. Judicial bypass provisions do not ameliorate the risk.”²

American Public Health Association: APHA “urges that...confidential health services (be) tailored to the needs of adolescents, including sexually active adolescents, adolescents considering sexual intercourse, and those seeking information, counseling, or services related to preventing, continuing or terminating a pregnancy.”³ APHA “urges... that minors’ access to abortion services not be made conditional on parental involvement... and that policymakers and courts cease to mandate parental involvement in minors’ abortion decision making.”⁴

Society for Adolescent Health and Medicine: “Confidentiality protection is an essential component of health care for adolescents because... without it, some adolescents will forgo care. Participation of parents in the health care of their adolescents should usually be encouraged, but should not be mandated.”⁵ “While it is helpful for a young woman to have the support of a

parent, other trusted adult, or peer when considering her options, the ultimate decisions about social support and pregnancy outcome rest with the pregnant adolescent.”⁶

American Medical Women's Association: “We feel that abortion is a decision that should be reached between patients and physicians, and we believe that forced parental involvement will have a negative impact on the doctor-patient relationship.”⁷

American College of Physicians: “If a patient who is a minor requests termination of a pregnancy, advice on contraception, or treatment of sexually transmitted diseases...the physician...should be aware that a conflict may exist between the legal duty to maintain confidentiality and the obligation toward the parent or guardian. Information should not be disclosed to others without the patient’s permission. In such cases, the physician should be guided by the minor’s best interest in light of the physician’s conscience and responsibilities under the law.”⁸

American Psychological Association: “[E]fforts need to be undertaken to promote open, meaningful communication between parents and adolescent children. In the absence of such communication (e.g., as in the case of abusive families), parental notification and consent laws place the health of adolescents in jeopardy.”⁹

The American Congress of Obstetricians and Gynecologists: “It is imperative to discuss issues of confidentiality with both the adolescent and her parent. Lack of confidentiality is often a barrier to the delivery of health care services, especially reproductive health care, for adolescents.”¹⁰

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Notes:

¹ American Medical Association, Council on Ethical and Judicial Affairs, “Opinions on Social Policy Issues: Mandatory Parental Consent to Abortion,” E-2.015, *PDA Code of Medical Ethics*, Issued June 1994; AMA, Report H-A92, *Mandatory Parental Consent to Abortion* adopted June 1992. (*JAMA*. 1993; 269: 82-86) at <http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/opinion2015.page> (last visited Dec. 7, 2015).

²American Academy of Pediatrics, “The Adolescent's Right to Confidential Care When Considering Abortion” (RE9614), Vol. 97, *Policy Statement Number 5*, May 1996).

³ American Public Health Association, “Adolescent Access to Comprehensive, Confidential Reproductive Health Care” Policy 9001, *Policy Statement*, (1990).

⁴ American Public Health Association, *Ensuring Minors' Access to Confidential Abortion Services*, Policy 20115, *Policy Statement* (2011).

⁵ Society for Adolescent Medicine, "Confidential Health Care for Adolescents," Position Statement, (2004).

⁶ Society for Adolescent Health and Medicine, "Sexual and Reproductive Health Care: A Position Paper for Adolescent Health and Medicine," Position Paper, (Jan. 2014).

⁷ Letter from AMWA President Clarita E. Herrera to Rep. Ileana Ros-Lehtinen expressing opposition to the Child Custody Protection Act (April 22, 1999).

⁸ Lois Snyder, JD for the American College of Physicians, *American College of Physicians Ethics Manual Sixth Edition*, 156 *Ann Internal Med.*, 73-104 (2012).

⁹ American Psychological Association, "Parental Consent Laws for Adolescent Reproductive Health Care: What Does the Psychological Research Say?" *Fact sheet* (Feb. 2000).

¹⁰ The American College of Obstetricians and Gynecologists, Committee of Adolescent Health Care, *Committee Opinion: The Initial Reproductive Health Visit*, 598, (2014).