

Case 1

On August 6, 2003 the Board of Trustees of the Roseville Joint Union School District (Cal.) voted 3-1 for a policy that would require students to obtain parental consent for all medically related absences. This policy would have been uncontroversial were it not for the fact that it makes no exception for students seeking medical guidance or treatment for reproductive or sexually related matters. Many disagree with the policy, and argue that such exceptions are warranted. Indeed, some critics interpret California state law as permitting high school students to leave school without parental consent under these circumstances.

This controversy stems from a common exception in state law. While ordinarily any medical procedure performed on a minor requires parental consent and full disclosure of the minor's medical information to the parent, all states make some kind of an exception for medical advice or treatments that relate to sexual or reproductive issues or conditions, such as sexually transmitted diseases (STDs), abortion, contraception, and so on. Many adolescents are relieved that they can seek treatment for such reasons without having to tell their parents. 14-year-old Armijo High School (California) student, Erica Powers, explains that "From a teen point of view, some of us feel like we can't talk to our parents... We feel that parents will judge us and stuff." This point speaks to one of the main justifications for allowing such treatment without parental consent. If parental consent were required to treat, for example, STDs, minors would be far less likely to seek necessary medical attention. Those who oppose Roseville's policy point out that a child's pursuit of medical treatment may require her to keep doctor's appointments during school hours. If the exemption regarding sensitive sexual or reproductive is to accomplish its purpose, adolescents must know that they can seek medical attention for such sensitive issues during school hours without the knowledge and consent of their parents.

Nonetheless, there may be good reasons to make a student's parents aware of their child's condition or reason for treatment. Mary Smith, a mother of a student at Fairfield High School in California objects to allowing teens to seek medical attention or counseling for sensitive sexual or reproductive issues. "If you're a parent, you want to be there for your child... You don't want a stranger going through this with your child." Moreover, many medical decisions are complicated and may have profound consequences. Sexually related treatments and procedures, such as abortion, are invasive and come with risks and side effects. Furthermore, many treatments require ongoing compliance with medication and follow-up treatment. Indeed, parents have the right to make treatment decisions for their children precisely because minors tend to lack the requisite decision-making capacities to make treatment decisions. Finally, even if one grants that adolescents should be able to pursue treatment for sexual or reproductive conditions, one trustee of the Roseville Joint Union School District notes that "revoking the confidential medical appointment policy would not affect students' ability to seek

medical attention without parental consent because they could receive such care outside school hours.”

Currently, the Board of Trustees of the Roseville Joint Union School District has no plans to reconsider or revisit the policy.

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