

*Background & Literature Review*

## The Impacts of Parental Involvement Laws in Cases of Minors Seeking Abortion

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### *Introduction*

Since *Roe v. Wade* legalized abortion in 1973, state and federal policies have continued to limit women's access to the procedure. For example, on the federal level, the Hyde Amendment prevents federal funding of abortions, meaning federal government health care resources such as Medicaid cannot offer abortion coverage [1]. Other state policies target providers and clinics to prevent them from providing care. In 2011, 89 percent of U.S. counties did not have an abortion clinic and 38 percent of women lived in those counties [2].

Still another form of government abortion regulation is parental involvement legislation, which specifically targets minors' abortion access. These laws, which are currently in place in 38 states, prevent minors from acquiring an abortion without some form of parent-communication. Typically, these laws require either parental notification or consent from one or both parents, and can only be avoided via judicial bypass. That is to say, a minor may petition to a judge so as to acquire an abortion without informing their parent [3]. Given that 18 percent of abortions are for teenagers [4], it is important to consider the impact of mandating this choice for minors.

### *Abortion Effects on Mental Health and Well-Being*

To evaluate the health impact of abortion parental involvement laws, it is important to first consider the health outcomes related to abortion. In the 1979 *Bellotti v. Baird* Supreme Court case, the judges determined that parental involvement was constitutional because adolescents lack the maturity to decide to undergo an abortion independently, and that adult guidance could help relieve this burden and ensure psychological well-being [5]. However, research has shown that among adolescents seeking an abortion, those who were pressured into the decision had the most difficulty coping following the procedure. Participants most often reported that their mothers had pressured them into the decision. Furthermore, of girls who did not tell their mothers, approximately 65 percent anticipated feeling relieved after the abortion and 37 percent reported feeling confident in their decision; for adolescents who told supportive mothers, values were similar, at about 59 percent and 39 percent respectively [6]. Because external pressure from a mother was the main predictor of difficulty coping and evidence that girls who do not tell their parents do not struggle with coping, these findings suggest that minors are capable of making a confident decision regarding abortion without parent involvement.

Research has also considered the mental health outcomes for minors who undergo abortion. In one review, however, researchers evaluated 21 articles on the mental health impacts of abortion and found no effect. Moreover, they rated the different studies based on overall quality and found that those with the poorest research designs were most

likely to suggest that abortion was linked to negative mental health outcomes, whereas the strongest studies found no relationship between abortion and mental health. It is worth noting that this review did not focus exclusively on adolescents, but that several of the studies did include minors, so it would seem that their results stand for young populations [7].

### *Parental Involvement's Effects on Abortion Access*

Several studies reveal that parental involvement laws are linked with decreased abortion access. In Massachusetts shortly after a parental consent law was implemented, about one third of pregnant teens left the state for an abortion [8]. Similarly, following the introduction of a parental consent law in Mississippi, minor abortion fell 14.3 percent and yet out of state abortions for Mississippi residents rose by 16.9 percent [9]. In another study on minors seeking abortions in Mississippi directly after the implementation of parental consent, researchers found that as in-state abortion rates fell 13 percent, second trimester abortion rates increased by 32 percent [10].

These findings suggest that parental involvement laws limit abortion access, leading minors to seek care in other states or to delay the procedure. What is more, they seem to raise the overall cost of abortion care. One study reported that 67 percent of patients had to pay an average of \$44 in travel costs in addition to the procedure costs. In that study, six percent had higher travel costs with an average of \$140 to afford hotel stays [11]. In considering adolescents seeking out of state abortion care, it is likely that additional travel costs such as hotels contribute to total costs. The delay of abortion services also leads to added costs, as

second trimester abortions are typically more expensive than earlier procedures. On average, women seeking a second trimester abortion paid \$854, compared to the \$397 paid by women requesting a first-trimester procedure [11]. Based on previous findings that suggest parental involvement laws delay abortions to the second trimester, such laws produce greater financial burden for minors seeking care.

### *Other Effects of Parental Involvement Laws*

Parental involvement laws may also risk the health or well-being of the adolescent. Minors seeking abortions often note fear of a negative parent reaction, and at times do not tell them for this reason. In some cases, young women are concerned of physical or emotional abuse and therefore do not tell their parents for their own safety. Another worry expressed by teens seeking an abortion was that parents may pressure them to have the baby, which they felt was an unjustified encroachment on their own capacity to make the decision and could lead to resentment later on [12]. Thus, for adolescents with unsupportive parents, mandating that they tell them about their pregnancy and desired abortion may risk emotional and physical harm.

Moreover, in a survey of minors seeking abortion, 45 percent had not told their parents and 21 percent said that if there were a parental notification or consent law, they would have told their parent. Still, 23 percent reported that they would not tell a parent, with the following break down: nine percent would self-induce an abortion, nine percent would carry the unwanted pregnancy to term and two percent said they would leave home [13]. All of these responses represented unwanted outcomes with potentially dangerous long-term consequences to both physical and mental health.

All that being said, some minors did acknowledge the benefits of communicating with a parent about their pregnancy. In particular, they spoke to the “value of outside support,” because facing an abortion alone can be difficult. In general, however, these benefits did not dissuade minors of their skepticism toward mandated parental involvement. As previously mentioned, they expressed concern for adolescents without a supportive parent, and they felt that the judicial bypass as an alternative to telling parents was an unfair system [12].

In regards to judicial bypass, there were three trends in minors’ reactions. Firstly, teens felt uncomfortable regarding the prospect of disclosing personal information to a judge. For some, this would be a deterrent to using the system. Many adolescents also expressed concern about the how complicated the process would be to manage. From legal fees to coordinating with the courts, adolescents felt that the entire process would add unnecessary pressure and delay the procedure. To that end, minors were also worried the judicial bypass was a means to limit teens’ abortion access [12].

### *Policy Implications and Recommendations*

Research suggests that when minors seek abortion, they are capable of making the decision without parental support and they do not suffer negative mental health outcomes. Thus, it seems that parental involvement laws for minors seeking abortion do not serve any positive health outcomes. Rather, they predominantly seem to have negative outcomes, particularly as they limit abortion access and increase the financial cost for minors seeking care. Finally, mandating parental involvement

and offering only judicial bypass can have severe consequences for adolescents with unsupportive parents. Though these groups are the minority, their conditions should not be ignored.

The dangers these laws create without any evidence of positive health outcomes renders them unjustified. Admittedly, many minors recognized the benefits of communicating with parents regarding their pregnancy, yet the consequences for those without supportive parents are not worth mandating this communication. On this basis, I would recommend that states eliminate parental involvement laws.

Instead, resources should focus on facilitating supportive relationships between parents and their children, particularly on issues of reproductive health. In this way, more teens may benefit from a supportive parent in the face of teen pregnancy, but those who lack that relationship will not be unduly burdened. Because the goal of such policies would be to promote communication between children and parents, that should also be the intention of interventions.

An educational program that provides parents and teens with information on the reproductive rights of minors would be an effective intervention to foster stronger family relationships. Not only would this program offer information, but it would also include workshops wherein parents and their teens can build communication skills on sex and sexuality. In this way, if the teen faces an unintended pregnancy, they will have built a solid foundation for talking about sex with their parents. While such a program would certainly be useful for some families, a caveat is the probability of self-selection of participants, which would limit the scope of the intervention. Thus, further research must be done on how to promote healthy adolescent-

parent communication more widely without the use of government mandates.

### *Links of Interest*

Guttmacher Institute:

<https://www.guttmacher.org/sections/abortion.php>

Planned Parenthood:

<https://www.plannedparenthood.org/learn/abortion>

CDC Sexual Health:

<http://www.cdc.gov/sexualhealth/>

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