



Youth Healthcare Alliance

Champions for Colorado School-Based Clinics
Formerly known as Colorado Association for School-Based Health Care

Minor Consent & School-Based Clinics

Strategies & Messages

Clarifying Minor Consent Laws

School-based clinics' goal is to treat patients as a whole person, which often means including the parents/guardians and family members; however, there may be situations where the patient wishes to keep their use of specific services confidential. Each school-based clinic differs in their approach to consent forms for different services offered at the clinic. Ultimately, school-based clinics must and do follow federal and state law in their policies and practices.

This [document](#) outlines the different ages and circumstances where a minor may consent to their own care (note though that not all services outlined in this document are even offered at the school-based clinic). Additionally, [this document](#) is helpful for understanding minor consent laws for vaccinations. **Laws change often so it is critical to stay up to date on this.**

Minors accessing healthcare at the school-based clinic learn to become their own advocates and learn how to navigate the healthcare system to gain what they need. They can build close relationships with a trusted adult who is a well-educated professional who can provide scientifically supported information for their health. There are a few reasons why a minor may consent to their own care within the bounds of the law, including a discomfort or a lack of safety in sharing this information with their families. In these situations, providers will strive to have supportive conversations with their patients about how to involve their families, when possible and safe.

Creating Productive Messages

Communicating messages in a negative way may heighten the issue. Instead, create positive messages and discuss how youth are part of the solution, not the problem. Focus on what can be accomplished by providing comprehensive services to adolescents, such as increased academic success. Understand how to frame your messages as a benefit to the community, while being sensitive to community culture and values to generate a productive conversation. [FrameWorks Institute](#) has great resources on how to best frame challenging messages, especially this [one resource](#) focused on framing the narrative about kids in caring for all children in the community, rather than just your own. It is unlikely that you will convince those who adamantly oppose your

approach; however, it is important to focus on the legal aspect (state law gives minors the right to consent for specific services) and the reasons why (young people learn to be agents of their own health) and we want to provide access to *all* children in the community, while acknowledging some may opt out or may not need/want services.

It is important to remember that not everyone is a health professional. Keep messages simple and use accessible non-technical language. Involve youth in the creation of your messages and focus on the larger context, rather than small details.

Concern/Myth	Tailor Message
Offering confidential services at the SBHC undermines my rights and role as a parent.	The SBHC follows state confidentiality and consent laws and is bound to the same standards as community providers. Our clinic follows the policy of making every attempt to include parents and family members in treatment plans; however, there are some occasions where the student's safety is at risk and confidentiality is critical. We see our roles as not replacing the parents but being your best allies in ensuring your child's health and development.
My child will access information about gender-affirming care at the clinic.	Colorado requires parental consent for hormone therapy, and this is a service that is not in the scope of practice for school-based clinics. It is also not in the scope of the clinic to provide gender transition surgeries. We provide inclusive, patient-centered care to all patients, regardless of identity. (Frameworks has a great resource specifically around trans youth.)
The SBHC provides abortions.	Federal law and state law prohibit school-based clinics from providing abortions, therefore, no SBHCs provide abortions.
My child will access contraception or STI tests/treatment without my knowledge.	The school-based clinic is here to provide age-appropriate services to support youth health and development. STI testing is a critical component of staying healthy, to avoid infections and worse health. We do our best to provide evidence-based information to all patients about next steps concerning contraception and STIs. Our SBHCs must comply with state law, which allows anyone of any age to consent to reproductive healthcare. When providing contraception, our providers talk to youth about how and when they could involve their parents in their reproductive health care.

<p>My child will access mental health services without my consent or knowledge.</p>	<p>Our SBHC must follow state law, which allows youth aged 15 and over to consent for their own mental health services. It also allows for youth aged 12-14 to consent to care, though requires that if a parent is not involved, the reason for why is documented. Any patient under the age of 12 must have parental consent for mental health services. We encourage parental involvement of all ages when possible and will always notify the appropriate adult if there is concern for a patient's safety.</p>
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Strategies When Encountering Resistance

Build Strong Community Advisory Committee

Most school-based clinics have a Community Advisory Committee. Make sure the committee includes people who support age-appropriate and evidence-based programs and young people themselves.

Create and Prepare Materials

Concerns will vary, so create a variety of materials for specific audiences. Parents, the press, legislators, community businesses, and teens will be interested in and/or concerned by different aspects of offering confidential services in the SBHC.

Ideal educational materials are:

- Be short, easy to read and to the point
- Explain the need for minor-consented health services and normalize those while also drawing attention to other services that require parental consent as part of comprehensive care
- Address common questions, concerns, and misinformation about providing services
- Contain research, references for best practices, and other facts that rebut expected criticisms
- Include supportive media coverage of the issue such as a newspaper clipping or editorials
- Avoid words such as “should” that suggest judgment
- Rephrase “students” into “patients” as not all students are clinic patients
- Caution using words such as “belief” or “believe”
- Keep language as general as possible
- Include how parents/guardians are involved in care
- Present minor consent in the context of any provider/location type rather than specific to school-based clinics

Additional Resources

- School-Based Health Alliance [resources](#) on sexual health and California affiliate [resources](#) on school-based clinics’ impact and resources
- [The Community Toolbox](#)
- [The Guttmacher Institute](#)
- [The National Campaign to Prevent Teen and Unplanned Pregnancy](#)

- [Research article](#): "School-based sex education is associated with reduced risky sexual behavior and sexually transmitted infections in young adults"
- [Research article](#): "California Parents' Preferences and Beliefs Regarding School-Based Sex Education Policy"