

SB0891 testimony.pdf

Uploaded by: Deborah Brocato

Position: FAV

SB0891
FAVOR
Deborah Brocato
Harford County Respect Life Coordinators
3206 Gloucester Drive
Fallston, MD 21047

Dear Senators,

As a nurse, volunteer and mother to 4 daughters, I support Senate Bill 891 which seeks to restore a certain amount of parental rights.

Last year, this legislature passed the Mental Health Access Initiative which lowered the age of consent from 16 to 12 for minors seeking mental healthcare, and, undermines parental rights. While I understand the law sought to address problems that arise when there is not a healthy relationship in the home, those cases are exceptions.

Instead of finding solutions for those minors that may need distance from their parents, the Mental Health Access Initiative obfuscated the rights of all parents leaving potentially life-altering decisions in the hands of strangers.

This is from the NIH website:

“Adolescence is a tumultuous time, full of changes and transformations. . . The adolescent population is highly vulnerable to driving under the influence of alcohol and social maladjustments due to an immature limbic system and prefrontal cortex. . . Adolescents may become involved with offensive crimes, irresponsible behavior, unprotected sex, juvenile courts, or even prison. According to a report by the Centers for Disease Control and Prevention, the major cause of death among the teenage population is due to injury and violence related to sex and substance abuse. . . Pharmacological interventions to regulate adolescent behavior have been attempted with limited success.” (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3621648/>)

The article is very detailed regarding the development of the brain and the effect that biological chemicals and hormones and external factors have on that development.

Parents are the ones who know their children best and, in most cases, will have the best interest of those children in mind. We know that the teenage years are challenging for the parent/child relationship. The article does a good job of explaining why. We also know too well, from the case of the gymnasts and Larry Nassar, what can happen when trust is misplaced.

Parental rights need to be respected especially in healthcare decisions for minors. If a minor daughter is seeking an abortion, the minor girl has engaged in sexual intercourse. As the article points out, teenagers make impulsive decisions. Parents need to know what’s happening in their children’s lives to effectively minister to them and provide proper care and counseling.

Having sex as a minor is serious, having an abortion is serious and poses risks of injury and death. A minor does not have the reasoning ability to consider all of the consequences of a permanent action for a temporary condition. A relative stranger cannot accurately assess the needs of this minor girl.

Teenagers often exaggerate and say, “my parents will kill me if. . .” but this is an exaggeration. Most often, parents are upset when learning of unpleasant information but they love their children and, ultimately, want to help them navigate difficult situations.

I urge you to rightfully prioritize parental rights and vote in favor of Senate Bill 0891.

Thank you.

Maryland Testimony.pdf

Uploaded by: Eileen Roberts

Position: FAV

My name is Eileen Roberts and I am the Founder and President of Parents for Life. Parents for Live serves as a collective voice for parents, educates the public, and informs state legislators of the need for public policy that protects minors and the rights of their parents.

The Orwellian nightmare began when we wondered why my daughter was severely depressed, and discovered she had a secret abortion a life and death decision which she made alone, along with her boyfriend. While in the hospital for follow-up care for depression, it was discovered that her abortion was done incomplete and she had to have follow-up surgery to repair the damage done by the abortionist. But she could not have the surgery unless I signed a consent form for the abortion I did not even have to know about.

To add insult to injury, my husband and I were responsible for the follow-up costs of surgery and care for depression amounting to \$27,000.

Maryland parents deserve better. This bill DOES NOT in any way, restrict women from having an abortion. Instead, it protects parents from what happened to me from happening to their daughter, common sense legislation.

I would ask those of you on the committee, especially those who are parents, don't you want to know that your teen daughter is having a secret abortion? Wouldn't you want to put your arms around your daughter and say "I love you, we can work this out together". Rights that every parent has in this country with every other medical or surgical procedure.

I am not naïve knowing many teens are from abusive homes. However, what clinics are doing, not only in Maryland, but throughout this country, is giving our teens secret abortions and sending them home to the abuser. Not reporting abuse against the laws of this country and our teens need protection from predators.

Please pass this SB891, which would protect teens, ensure parental rights, and restore family dignity.

Respectfully submitted,

Eileen Roberts, President

Parents for Life

SB 0891 - Parent Notification - SUPPORT.pdf

Uploaded by: Ella Ennis

Position: FAV



Ella Ennis, Legislative Chairman
Maryland Federation of Republican Women
PO Box 6040, Annapolis MD 21401
Email: eee437@comcast.net

Senator Dolores Kelley, Chairman
and Members of the Finance Committee
Senate of Maryland
Annapolis, Maryland

RE: **SB 0891** Public Health Medical Procedures – Parental Involvement – **SUPPORT**

Dear Chairman Kelley and Committee Members,

The 1,480 members of the Maryland Federation of Republican Women support SB 0891 to require notice to a parent or guardian of a minor girl when an abortion, which is an invasive medical procedure, is to be performed on the minor. Parents are responsible for the care and protection of their children and need to be involved in decisions affecting their children's health and well-being. Ensuring that the clinic and physician performing this procedure is competent is important. Minors do not have the knowledge or experience to judge the competency of the clinic and physician providing the abortion. SB 0891 provides for a court waiver procedure for a situation where there is a safety issue if the parent or guardian were notified.

If something goes wrong with a minor's abortion, the parents will be responsible for follow-up care needed to heal that child. That includes the physical and emotional care and the financial cost of follow up care. Parents need to be involved upfront in the process. A minor does not have the life experience or knowledge about what can go wrong to make these decisions unaided. They are easily pressured into decisions that may not be in their best interest.

Please give SB 0891 a **FAVORABLE** Report.

Sincerely,
Ella Ennis
Legislative Chairman
Maryland Federation of Republican Women

FAVORABLE.SB891.MDRTL.L.Bogley.pdf

Uploaded by: Laura Bogley

Position: FAV



Favorable
SB 891 – Maryland Parental Involvement Enhancement Act

Laura Bogley, JD
Director of Legislation, Maryland Right to Life

On behalf of the Board of Directors for Maryland Right to Life, I support this legislation and respectfully request your favorable report. Laws requiring parental consent or notice for a minor's abortion are among the most accepted regulations in the United States.¹ These laws boast a 71 percent nationwide approval rating,² protect the health and wellbeing of minors, respect parental rights, and save the lives of unborn children.

Several important factors support the need for parental involvement laws:

- The medical, emotional, and psychological consequences of abortion are often serious and can be lasting, particularly when the patient is immature.
- Parents usually possess information essential to a physician's exercise of his or her best medical judgment concerning the minor.
- Parents who are aware that their daughter has had an abortion may better ensure the best post-abortion medical attention.
- Minors who obtain "secret" abortions often do so at the behest of the older men who impregnated them and then return to abusive situations. Studies estimate that at least one in five girls is sexually abused before the age of 18.³ Teens are routinely taken to abortion clinics without the consent or even the knowledge of their parents. Minors are at risk in every state in which parental involvement laws have not been enacted or are easily circumvented.

¹ Thirty-nine state parental involvement laws are currently in effect.

- Twenty-six states require parental consent for minors seeking abortions: AL, AZ, AR, ID, IN, KS, KY, LA, MA, MI, MS, MO, NE, NC, ND, OH, OK, PA, RI, SC, TN, TX, UT, VA, WI, and WY.
- Ten states require parental notice for minors seeking abortions: CO, DE, FL, GA, IL, IA, MD, MN, NH, SD, and WV.
- Two states permit an abortion provider to override parental consent or notification: DE and MD.
- One state law requiring parental notice for minors seeking abortion is in effect while in litigation: MT (MT also has a parental consent law that is enjoined while in litigation).

Five states have parental involvement laws that are enjoined, in litigation, or not enforced:

- Two states have parental consent laws that are enjoined or the state's Attorney General has issued an opinion against enforcement: CA and NM.
- Three states have parental notice laws that are enjoined or not enforced: AK, NV and NJ.

² Lydia Saad, "Common State Abortion Restrictions Spark Mixed Reviews," Gallup, July 25, 2011, available at <http://www.gallup.com/poll/148631/Common-State-Abortion-Restrictions-Spark-Mixed-Reviews.aspx> (last visited July 25, 2017).

³ See National Association of Children's Hospitals and Related Institutions ["NACHRI"], *Child Sexual Abuse Fact Sheet* (2004); E.M. Saewyc et al., *Teenage Pregnancy and Associated Risk Behaviors Among Sexually Abused Adolescents*, PERSP. ON SEXUAL & REPROD. HEALTH 936(3):8, 99 (May/June 2004); Stop It Now, *Commonly Asked Questions: Answers to Commonly Asked Questions About Child Sexual Abuse* (2005) (citing R.F. Hanson et al., *Factors Related to the Reporting of Childhood Sexual Assault*, CHILD ABUSE & NEGLECT 23:559, 559-69 (1999)); C.E. Irwin & V.I. Rickert, Editorial: Coercive Sexual Experiences During Adolescence and Young Adulthood: A Public Health Problem, 36 J. ADOLES. HEALTH 359 (2005); V.I. Rickert et al., *Disclosure of Date/Acquaintance Rape: Who Reports and When*, 18 J. PED. ADOLES. GYN. 17 (2005).

In addition, parental involvement laws save the lives of unborn children by reducing the demand for abortions by minors. For example, a 1996 study revealed that “parental involvement laws appear to decrease minors’ demands for abortion by 13 to 25 percent.”⁴ A 2008 study showed that parental consent laws reduce the minor abortion rate by 18.7 percent.⁵ With the loving support of their parents, many young women are able to bring their babies into the world and not face the physical risks and emotional devastation that abortions can bring.

Tragically, it is often easy for abortion providers to sidestep a law requiring parental consent or notice by claiming they were “duped” into accepting consent from or providing notice to individuals fraudulently representing themselves as the parents or legal guardians of minor girls. Other potential loopholes in parental consent or notice statutes include the inappropriate use of a “medical emergency” exception by an abortion provider; exploitation of the judicial bypass system through “forum shopping;” a low burden of proof for a minor to show that she is mature enough to make an abortion decision on her own or that parental consent or notice is not in her best interest; and a lack of guidance to courts on how to evaluate a minor’s maturity or best interests.

To better protect minors and parental rights, states may reinforce existing parental involvement laws with enhancements to their laws. The *Maryland Parental Involvement Enhancement Act* provides several possible enhancements for states to consider including requirements that important documents are notarized, mandates for proof of identification and relationship, and evidentiary and other standards for judicial bypass proceedings.

For these reasons, we respectfully request your favorable report on the *Maryland Parental Involvement Act*. We appeal to you to respect parental rights and to restore to all people, born and preborn, our natural and Constitutional rights to life, liberty, freedom of speech and religion.

⁴D. Haas-Wilson, *The Impact of State Abortion Restrictions on Minors' Demand for Abortions*, J. HUMAN RESOURCES 31(1):140, 155 (1996).

⁵Michael J. New, *The Effect of Parental Involvement Laws on the Incidence of Abortion Among Minors*, INSIGHT 16-18 (Sept 24, 2008).

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Uploaded by: Michael Finegan

Position: FAV



PENINSULA MENTAL HEALTH SERVICES
MICHAEL B. FINEGAN, Ph.D., Executive Director

102 West Market Street
Salisbury, Maryland 21801
Telephone: (410) 860-2673
Fax: (410) 860-0450

Michael B. Finegan, PhD, ABPP
102 West Market Street
Salisbury, Maryland 21801
March 15, 2022

To: Maryland Senate Finance Committee

Subject: Senate Bill 891

I am writing to express my support for Senate Bill 891 concerning Medical Procedures and Parent or Guardian Notice. The contingencies for not informing a parent or guardian when that notification would not be in the best interest of the minor protects all parties involved as it relates to minors looking to undergo an abortion procedure. An abortion particularly in a minor has a high likelihood of producing profound emotional distress that can lead to other serious behavioral health challenges. Having a responsible parent or guardian informed of a pending abortion in a minor provides, in most cases a valuable resource to the minor navigating a significant emotional challenge.

Please vote in favor of Senate Bill 891. Thank you for the great work you are doing to protect Maryland's minors. Should you have questions, I can be reached at my office at (410) 860-2673.

Very Respectfully,

Michael B. Finegan, Ph.D., ABPP
Board Certified Clinical Psychologist
MD Lic. 1935

MTalkington_Testimony_SB0891 .pdf

Uploaded by: Michelle Talkington

Position: FAV

Senate Finance Committee

3 East

Miller Senate Office Building

Annapolis, Maryland 21401

March 16, 2022

Greetings Chair, Vice Chair, and Committee Members,

For the record, my name is Michelle Talkington, and I am a proud mother of six children. Thank you for allowing me the opportunity to speak in support of Senate Bill 891- Public Health – Medical Procedures – Parent or Guardian Notice (Maryland Parental Involvement Enhancement Act). This Bill will ensure the very basic rights of parents and guardians of children of our great state, and is my strong desire that you give it a favorable report.

I am the mother of six children, three sons and three daughters. From the day that I delivered each one, I knew that I would do all that I could to raise, care for, and protect them through to adulthood. At the core of the issue in SB891 is the question of whether these are my children? At what point is a child “an adult” capable of making permanent life altering medical decisions without notice to their parents?

As parents, guardians, and concerned adults, we witnessed SB41 alter the minimum age of a minor consent to consultation, diagnosis, and treatment of a mental or emotional disorder by a healthcare provider, from 16 to 12. I have raised three of my children past the age of 12 and I can assure you that they are extremely different in their personalities and cognitive abilities. It is frightening to consider this ever being applied to other non-emergency medical treatments, especially as dangerous or life-altering as an abortion.

I want to share two of my personal experiences to better illustrate the importance of establishing SB891 as to requiring parental notification with stipulations provided. As a mother, I sought treatment from a well-known medical HMO establishment to address feminine issues that my oldest daughter experienced. Her condition was uncomfortable, but we took the word of the Doctor as to her treatment. After the first treatment failed, we listened to the Doctor, and attempt it again with another medication. Following the increased pain that my child experienced after the second appointment, I challenged the Doctor in their knowledge of the issue and sought another opinion. The new physician treated my child appropriately and noted that the previous Doctor misdiagnosed the issue and gave medication that in fact made it worse. As a parent I was angry and relieved to get my child the help she needed. What I must emphasize is that as an Adult, I knew to ask the right questions, I knew that I could challenge the opinion of the authority who was in front of me. This happened on my watch, what could have happened if I were not even made aware? Would my daughter have long-term complications? A teenager, or younger child will not have that knowledge, instinct, our courage to take the action that a parent or guardian would take to ensure their wellbeing.

I have been on the other side of SB891 when, at the age of 16, I found myself pregnant in a situation where neither of my parents lived in the state that I resided in. I understand, first-hand, the thoughts and emotions that run through a young woman’s mind when faced with extraordinary circumstances. It was critical that I spoke to an adult who knew my personality, my circumstances, my medical conditions, and all that typically comes with being a parent or guardian. My mother was made aware, and I was able to discuss my options with the person who would ensure that my physical and emotional needs were met. I want to remind you all that parents, not physicians, are responsible for their children before and after they leave the medical facility. If we

are not made aware, how then can we be held responsible for the consequences that may follow. If we are not made aware, as parents, who do we go to as recourse if a tragic mistake is made when the State or Physician acts as the temporary guardian without our consent? I am my child's first line of defense. We, as parents are the ones accountable, so please ensure that we have that option. Once Again, I ask you to consider are these our children?

Respectfully, I ask you for a favorable report of SB891.

Sb 891 Naleppa.pdf

Uploaded by: Peggy Naleppa

Position: FAV

March 15, 2022

TESTIMONY OF Dr. MARGARET (PEGGY) NALEPPA

Dear Senate Finance Committee Members,

As a retired CEO of a complex tertiary medical system; a previous surgical nurse who managed the informed consent process for minors, as a mother of two daughters and nana to two granddaughters, I am infinitely aware of the dynamic and challenging decisions minors are exposed to daily. I SUPPORT SB 891 based on the following principles and logic:

The tenants of the health care domain are based on the principles of confidentiality, *do no harm* and to provide access to professionally trained physicians who have knowledge of treatment options related to physical and mental needs. Further, the needs of the patient should always come first.

As such, my support of SB 891 is based on elements of the law, the clinical practice and the ethics related to the proposed legislation and its relationship to existing legislation and standards.

LAW

Double Standard and adolescent brain development factors

The Maryland Health General Article 20-102, 20-104 states that minors who are (a) married or are a parent, live separately, are self-supporting -may consent to medical treatment independently. Additionally, all minors (with exception) have the same capacity to independently consent as an adult based on specific treatment for conditions 1-8. Thus, one notes that in all other conditions (surgery, medical treatment, neurology disorders, etc., except an emergency) the minor is required to obtain parental/guardian consent. Why is it that a minor can independently consent to have a medical/surgical procedure (1-8) without informing a parent/guardian and conversely for hundreds of medical/surgical procedures the minor is required to obtain parental authorization? From my perspective, the current legislation is a double standard as it authorizes a minor to self-consent under certain conditions and does not authorize the minor to self-consent for other treatment options. I am sure there are various arguments to support the Why. Regardless, a primary factor associated with who can authorize and decide is based on mental acuity and level of maturity.

In general, research supports that individuals under a certain age are not sufficiently mature to make clinical decisions. In my opinion, the reality is the adolescent brain is inconsistent and decisions are often done with little consideration of both short- and long-term effects. [This letter of support does recognize that not all adolescents demonstrate these adverse behaviors, and some do have the maturity to work through difficult, life changing decisions].

The factors that impact the adolescent brain are consistently present – they do not exit when certain medical /surgical conditions are under consideration and the minor can decide independently. They don't "turn on" rationale problem solving skills for given decisions. Further, any of the currently approved self-consent conditions (1-8) create strong emotions and challenges. In my opinion, adult wisdom, experience and "lessons learned" are impactful variables when considering a medical

procedure for any minor. This important discussion requires a parent/ guardian to be informed prior to a final clinical decision.

Furthermore, as another example of legislation recognizing that a minor is more vulnerable and subject to inappropriate decision making is the structure and design of the juvenile justice system. It recognizes the immature cognitive state of many juveniles as they are trialed differently than adults. A case in point- juveniles have less impulse control, increased susceptibility to peer influence and a lack of good reasoning (critical thinking) skills making them less culpable than adults [(Graham vs Florida) 8/7/13)

The proposed SB 891 provides a consistent informed consent process, honors the important role of the parent/guardian responsibilities, supports the values of trust, transparency, and parent/minor rights.

CLINICAL PRACTICE:

Physician can use his/her professional judgment and advocate for a minor if the need arises to address adverse parental behavior concerns

The proposed bill contains a provision [14-c-1] Physician may perform the procedure (abortion) without notice to a parent IF in the judgement of the physician notice to a parent /guardian may lead to physical and emotional abuse of minor. This is an important element and authorizes the physician to apply his/her professional training and judgement- they are the expert in medical/surgical field and should be so authorized. I find this a high reliability factor as it addresses the concern that a minor could be subject to physical/mental abuse by a parent/guardian IF the minor was required to inform parent/'guardian PRIOR to a given procedure.

Further, as a registered nurse with 45 years of experience, I have on numerous occasions personally witnessed or have been informed by a minor of a decision he/she made independently, without parental discussion and consent. Their narrative is often- *if only I had known* -of both short- term and long-term unintended consequences, I would have chosen a different outcome. These comments beg the question of why didn't informed consent act to advise the minor at the time of a procedure? Yes, the informed consent process should address this; however, in my opinion, I am reminded of the reality of the adolescent brain- motivated by self- serving behaviors, a sense of urgency, and emotional reactions that contribute to potentially regrettable decisions. This is my personal experience and observations. It is acknowledged that others may have experienced different scenarios and support an opposing viewpoint.

ETHICS

Advocate for parent inclusion

I am unable to support legislation that does not include parent/guardians in a minors decision making process. Society recognizes the characteristics of the adolescent brain and subsequent behaviors through various systems that manage minors and their needs. Noteworthy as an example are 1.)-the regulations that govern our juvenile system and 2)-the general informed consent process that currently requires a minor to obtain authorization from a parent/guardian for most medical/surgical procedures/ treatments. In my opinion, this #2 inclusion provides a platform for important parent/guardian discussions- a valued and important component to building family relationships. Transparency and

honesty are important values that I hold dearly. Keeping secrets – undermines trust and can negatively impact the parent-child relationship. We have many other issues crippling out families today and we do not need to add to the dynamic by keeping parent/guardians uninformed. I respect the concern that a minor may experience adverse repercussions from immature, abusive parents. If indicated, the physician's judgement and authorization to act independently does addresses this concern in the proposed legislation.

In summary, we do not live in a world of absolutes. Each decision/action is determined based on degree of risk, values, and the duty of no harm. I vote YES to SB 891 as it supports my principles as a FAITH based parent /grandparent. Further, the bill intent fosters my values as a role model ... to provide, protect, guide, model, encourage and love. This requires transparency, honesty, and an inclusionary mindset. I **believe** in our parents and their ability to appropriately act as guardians and protectors of their children and the family unit. This proposed legislation honors their fundamental rights and provides exemptions when indicated to protect the minor .

Respectfully submitted,

Dr. Margaret (Peggy) Naleppa

253 Charleston Road

Berlin, Maryland 21811

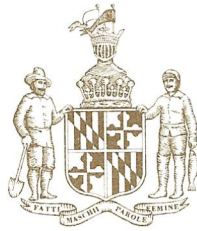
SB 891 Senator Carozza Testimony.pdf

Uploaded by: Senator Mary Beth Carozza

Position: FAV

MARY BETH CAROZZA
Legislative District 38
Somerset, Wicomico,
and Worcester Counties

Education, Health, and Environmental Affairs
Committee



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THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

March 16, 2022
The Senate Finance Committee
SB 891 Maryland Parental Involvement Enhancement Act
Statement of Support by Bill Sponsor Senator Mary Beth Carozza

Thank you, Chair Kelly, Vice Chair Feldman, and members of the Senate Finance Committee for this opportunity to present Senate Bill 891: The Maryland Parental Involvement Enhancement Act. This bill would require parental notification of non-emergency medical procedures including abortion and would allow physicians to waive the requirement during a medical emergency or if the minor requests a judicial waiver.

I consistently have supported policies that increase parental involvement. Many of you will recall the extended debate we had on Senate Bill 41 which lowered the “Age of Consent” from 16 to 12 years old for children in need of mental health services. At that time, many parents, medical experts and health organizations opposed lowering the age to 12 and noted that children simply are not able to safely make medical decisions without their parents or guardians.

My purpose in introducing Senate Bill 891 is to protect our children and to let parents be parents. Many well-respected medical organizations like the Maryland Psychological Association and the Maryland Board of Nursing, to name a couple, agree that most pre-teen and teen age children do not have the cognitive capacity to make medical decisions without parental involvement, and it is not developmentally appropriate to expect them to do so.

Senate Bill 891 allows parents and guardians to be involved in assessing the risks, benefits, and impact of non-emergency medical procedures performed on their children.

Today, you will hear from Michelle Talkington, a mother of six children, who will share two personal experiences that makes the case for strengthening parental involvement and protecting our children. You also will hear from Debra Brocato, a Registered Nurse, who will further explain the importance of this legislation, especially at this time coming out of the COVID-19 pandemic.

I encourage my friends and colleagues on the Senate Finance Committee to work with me on the Maryland Parental Involvement Enhancement Act and respectfully ask for a favorable report on Senate Bill 891. Thank you for your kind attention and consideration.

2022 sb891 testimony pdf.pdf

Uploaded by: Debi Jasen

Position: UNF

Finance - SB891 - UNFAVORABLE

Chair Kelley, Vice Chair Feldman, and the Finance Committee;

Please give Senate Bill 891 an Unfavorable Report.

I don't know why the sponsors consider children to be women. Honestly, it's a bit creepy.

Most minors already tell their parents when they want to have an abortion,¹ but it should be noted that laws that forced parental involvement can harm minors.²

The current parental notification law³ is a compromise between a person's right to bodily autonomy and parental concerns. There's no need to change it for the worse.

I urge an Unfavorable Report for SB891. Thank you for your consideration.

Sincerely,
Debi Jasen
Pasadena, MD

¹<https://pubmed.ncbi.nlm.nih.gov/24332398/>

²<https://www.guttmacher.org/article/2020/02/parental-involvement-mandates-abortion-harm-young-people-policymakers-can-fight-back>

³<https://www.plannedparenthood.org/planned-parenthood-maryland/client-resources/maryland-minor-laws>

SB 891 - UNF - Women's Law Center of MD.pdf

Uploaded by: Laure Ruth

Position: UNF

BILL NO: Senate Bill 891
TITLE: Public Health – Medical Procedures – Parent or Guardian Notice
COMMITTEE: Finance
HEARING DATE: March 16, 2022
POSITION: **OPPOSE**

Senate Bill 891 repeal existing parental notification law for minors and disabled adult seeking abortion care and would require a litany of process that is unnecessary and invades a pregnant person's ability to make decisions in consultation of their medical care provider. The Women's Law Center of Maryland, Inc. opposes Senate Bill 891 because our current laws are adequate and because decisions about pregnancy are and should remain a matter between a pregnant person and their doctor.

Maryland law already has parental notification laws. In many situations, parents are involved in the decisions of the minor. But not in all families. For those pregnant minors, requiring a judicial waiver can be an unsurmountable obstacle to receiving the care they need. Sadly, if they are the minors who can't go to their parents for support, they will also have no assistance in accessing the judicial waiver system put in place by this bill. The process by which to receive a judicial waiver is complicated for anyone, much less a minor who is seeking relief. This process, in addition, will delay care. If SB 891 passed, individuals would be forced to carry pregnancies to term against their will.

Maryland has supported a woman's right to choose at least since Question Six in 1992, and there is no support that the citizens of this state want this type of change in our public policy.

For these reasons, the Women's Law Center urges an unfavorable report on Senate Bill 891.

The Women's Law Center of Maryland is a private, non-profit, membership organization that serves as a leading voice for justice and fairness for women. It advocates for the rights of women through legal assistance to individuals and strategic initiatives to achieve systemic change.

SB0891 Witness statement.pdf

Uploaded by: N Finnegan

Position: UNF

Natasha Finnegan
1411 Frederick Ave,
Salisbury, MD 21801

Dear Senate Finance Committee,

I am disappointed that this bill SB 0891 Maryland Parental Involvement Enhancement Act, has come up for consideration of this committee. Knowing that there are mentally unsound parents in the world has not deterred the submitters of this bill to require parental notification for medical topics that concern only the patient.

Do I think that abortion is awful? Yes. Even worse when the person requesting it is under the age of 18? Absolutely. However, that is that person's choice whether or not to carry a child to term, or to disclose it to their parents.

Mental issues in minors are likely caused by the very parents this bill seeks to inform! It would render the original legislature a joke.

I know some truly awful parents. I also know twelve-year-olds who I would trust to watch my children. I am for respecting a persons' bodily autonomy, and that includes keeping notification of medical issues in the control of that person, unless they are indeed younger than 12. Making the patient jump through hoops like a psychological evaluation and negating "financial reasons" puts an onerous burden on the patient and is much like anti-abortion bills passed all too often in other states in order to make healthy medical choices out of reach for the people who need them most.

Please vote against Bill SB0891 Maryland Parental Involvement Enhancement Act.

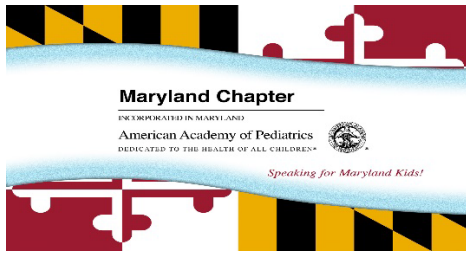
Thank you,

Natasha Finnegan

SB0891_UNF_MDAAP_PH - Medical Procedures - Parent

Uploaded by: Pam Kasemeyer

Position: UNF



TO: The Honorable Delores G. Kelley, Chair
Members, Senate Finance Committee
The Honorable Mary Beth Carozza

FROM: Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Christine K. Krone

DATE: March 16, 2022

RE: **OPPOSE** – Senate Bill 891 – *Public Health – Medical Procedures – Parent or Guardian Notice (Maryland Parental Involvement Enhancement Act)*

The Maryland Chapter of the American Academy of Pediatrics (MDAAP) is a statewide association representing more than 1,100 pediatricians and allied pediatric and adolescent healthcare practitioners in the State and is a strong and established advocate promoting the health and safety of all the children we serve. On behalf of MDAAP, we submit this letter of **opposition** for Senate Bill 891.

Senate Bill 891 repeals existing provisions relating to parental or guardian notification for abortions sought by minors and institutes much more prescriptive notification requirements. It also establishes new requirements regarding notification of a parent or guardian before performing a medical procedure. The bill repeals existing provisions of law specifying that a physician is not liable for civil damages or subject to criminal penalties for a decision not to give required notice.

Minor consent for health care services has generally been granted for services that a minor may be ashamed, scared, or otherwise unlikely to discuss with a parent or guardian. It includes substance use, sexually transmitted diseases, and other similarly challenging health care needs. With respect to abortion, current law requires a physician to make a reasonable attempt to notify the parent or guardian, unless in the physicians' judgement notification may not be in the minor's best interest. Furthermore, under current law, a health care provider retains full authority to determine whether the minor has the capacity to understand what is being consented to and the implications of consent. In addition, even if a minor consents to care, a health care provider retains full authority to discuss the care with the parent or guardian if the provider believes it is in the best interest of the child.

Retention of a physician's authority to make a professional judgement about whether notification of a parent or guardian is in the minor's best interest is especially critical in circumstances when a parent or guardian of a minor may have caused the pregnancy, notification may lead to physical or emotional abuse, or there are other factors that may indicate notification is not in the best interest of the minor. Senate Bill 891 has the potential to create significant negative implications for the health and safety of the minor. An unfavorable report is requested.

For more information call:

Pamela Metz Kasemeyer
J. Steven Wise
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Christine K. Krone
410-244-7000

2022 ACNM SB 891 Senate Side 2.pdf

Uploaded by: Robyn Elliott

Position: UNF



Committee: Senate Finance Committee

Bill: Senate Bill 891 – Public Health – Medical Procedures – Parent or Guardian

Hearing: March 16, 2022

Position: Oppose

The Maryland Affiliate of the American College of Nurse-Midwives (ACNM) opposes *Senate Bill 891 – Public Health – Medical Procedure – Parent or Guardian*. By requiring parental notice for abortion care for minors as well as notice of guardians for certain disabled adults, the bill would create health risks for minors and disabled adults. The only way to bypass the notice requirement would be through a judicial waiver. If a parent or guardian disagreed with the minor’s decision, the minor or disabled adult could be pressured to carry pregnancies to term even if that was not their decision. If they sought a judicial bypass, which may be almost impossible to navigate, it would delay care. The Maryland Affiliate of ACNM is opposed to legislation designed to interfere with an individual’s autonomy in making reproductive health decisions. In 2019 after state legislatures introduced a record-breaking number of anti-reproductive health measures, ACNM – National issued a statement that “reaffirms its commitment to individual patient autonomy across the spectrum of reproductive health, including abortion.”ⁱ Therefore, we oppose this legislation and ask for an unfavorable report. If we can provide any additional information, please contact Robyn Elliott at relliott@policypartners.net.

ⁱ<https://www.midwife.org/acnm/files/cclibraryfiles/filename/000000007327/ACNM%20Opposition%20Statement%20to%20Threats%20to%20Abortion%20Care%20March%202019.pdf>

2022 PPM SB 891 Senate Side 2.pdf

Uploaded by: Robyn Elliott

Position: UNF

Senate Finance Committee

Senate Bill 891 - Public Health – Medical Procedures – Parent or Guardian Notice

March 16, 2022

Oppose

Planned Parenthood of Maryland opposes *Senate Bill 891 – Public Health – Medical Procedures – Parents or Guardian Notice*. The bill would require the notice of a parent or guardian before a minor or a disabled adult with a guardian could receive abortion care. The only exceptions would be in medical emergencies or with a judicial waiver. Maryland law already provides for physicians to notify a parent. The law allows the physician to waive the notice in certain circumstances, including when the notice might cause harm to the minor.

Most minors involving a parent when making a decision about abortion care.ⁱ PPM supports parental involvement if it is the best interests of the minor. However, as stated by the American Academy of Pediatrics, “legislation mandating parental involvement does not achieve the intended benefit of promoting family communication, and in increases the risk of harm”.ⁱⁱ

This bill would endanger minors and disabled adults because:

- **Forced to Carry a Pregnancy to Term:** If a parent or guardian disagreed with a minor or disabled adult’s decision regarding abortion care, the minor or disabled adult could be pressured or even coerced to carry a pregnancy to term. Pregnancy is a major health condition with significant medical risks, and it completely changes the course of an individual’s life, whether they decide to raise a child or go through an adoption process.
- **Delays Care:** Concerns about confidentiality can delay minors in seeking pregnancy care, either prenatal or abortion care. The evidence shows that judicial bypass provisions are difficult for minors to navigate and delay care in many circumstances up to 6 weeks.ⁱⁱⁱ

We ask for a unfavorable report on this legislation. If we can provide any additional information, please contact Robyn Elliott at (443) 926-3443 or relliott@policypartners.net.

ⁱ Ralph L, Gould H, Baker A, Foster DG. The role of parents and partners in minors' decisions to have an abortion and anticipated coping after abortion. *J Adolesc Health*. 2014 Apr;54(4):428-34. doi: 10.1016/j.jadohealth.2013.09.021. Epub 2013 Dec 12. PMID: 24332398.

ⁱⁱ <https://publications.aap.org/pediatrics/article/139/2/e20163861/59961/The-Adolescent-s-Right-to-Confidential-Care-When>

ⁱⁱⁱ Cartoof VG, Klerman LV. Parental consent for abortion: impact of the Massachusetts law. *Am J Public Health*. 1986; 76 (4): 397–400.

sb891.pdf

Uploaded by: Sara Elalamy

Position: UNF

MARYLAND JUDICIAL CONFERENCE
GOVERNMENT RELATIONS AND PUBLIC AFFAIRS

Hon. Joseph M. Getty
Chief Judge

187 Harry S. Truman Parkway
Annapolis, MD 21401

MEMORANDUM

TO: Senate Finance Committee
FROM: Legislative Committee
Sara Elalamy
410-260-1561
RE: Senate Bill 891
Public Health - Medical Procedures - Parent or Guardian Notice
(Maryland Parental Involvement Enhancement Act)
DATE: March 8, 2022
(3/16)
POSITION: Oppose

The Maryland Judiciary opposes Senate Bill 891. This legislation would make it illegal for a doctor to conduct an abortion on a juvenile or an adult under guardianship without prior consent from a parent or guardian. The law establishes a procedure for an individual seeking an abortion to petition a circuit court for a waiver of the obligation to provide notification. Before deciding on the petition, the court must consider specific facts and perform certain measures according to the statute.

Additionally, the bill requires the court to appoint counsel for the individual, but it does not mention how this will occur or the funding mechanism for said counsel. In addition, the bill does not define "medical emergency." A clear definition would be helpful to ensure that courts apply the bill appropriately and consistently.

Moreover, the procedures outlined on pages four through five of the bill are both complicated and unclear. It is hard to understand how to implement these provisions.

cc. Hon. Mary Beth Carozza
Judicial Council
Legislative Committee
Kelley O'Connor