



The Kelsey Coalition

Working to change the systems that failed our kids

The Myth of Informed Parental Consent and the Medical Transition of Minor Children

Despite claims to the contrary, physicians do not always obtain parental consent before they medically transition minor children. And when parents do consent, their consent is not based on complete or accurate information about the potential harms or likelihood that their children will grow up to regret these irreversible medical interventions.

Elaine Davidson describes how she was powerless to stop surgeons from removing the breasts, ovaries, and uterus of her 17-year-old daughter. As she explains in her [written testimony](#) and [heartbreaking radio interview](#), these surgeries were conducted without any extensive mental health assessment or after-care, were not medically necessary, and were funded by Medicaid.

Plastic surgeons [admit](#) they are performing these surgeries on minor children with the backing of government funding. Yet the pediatric transition business is based on junk science, as detailed in [this in-depth investigation](#) by Kelsey Coalition's Katherin Kirkpatrick. And this is all perfectly legal in Oregon where state law allows doctors to perform life-altering surgeries on [children as young as 15 years old](#) without any parental consent.

But Oregon is not the only state where children can receive transition services without their parents' involvement. [Washington State](#) mandates that parents are not to be informed when children as young as 13 years old seek gender transition services because legislators have decided this is a "sensitive condition" that must be kept secret from parents.

Even in socially conservative states, minor children may access medical services without their parents' consent. In Alabama, any minor who is at least 14 years old may ["give effective consent to any legally authorized medical, dental, health or mental health services for himself or herself, and the consent of no other person shall be necessary"](#). In addition, physicians may provide any authorized medical service to minors of any age without the consent of a parent or legal guidance if the physician determines that ["an attempt to secure consent would result in delay of treatment which would increase the risk to the minor's life, health or mental health."](#)

Minors may also gain access to surgeries and hormones without their parents under state provisions for parental neglect. Attorneys have produced legal memoranda arguing that “gender -affirming” interventions, including [vaginoplasties](#) and [mastectomies](#) for children under 18 years old, are medical necessities. Therefore, any parent who does not consent to these interventions may be found guilty of child neglect. Journal articles such as [this](#) provide physicians with explicit guidance on how to perform these interventions on minor children when their parents refuse to give permission.

How can hormonal interventions and high-risk irreversible surgeries be deemed “lifesaving treatment” when [there is not one single rigorous study or objective diagnostic criteria to support their use](#)? How can it be that parents risk losing legal custody of their children if they do not comply?

These are not theoretical concerns. This is already happening. The Kelsey Coalition has received several requests for assistance from parents who have been reported to Child Protective Services, including one mother who was reported by her 13-year old daughter’s pediatrician. Some parents have lost temporary or permanent legal custody of their children simply because they refused to allow doctors to perform risky and unproven medical interventions on their children.

Just as tragically, many well-meaning and caring parents are also being misled into providing consent to these interventions on behalf of their minor child. They are often told that if they do not support their children’s medical transition, they will be at great risk of suicide. They are not fully informed of the risks involved, nor are they encouraged to pursue non-invasive treatments. They are not told that their child is likely to regret these interventions when they grow up as [this growing community of young people can attest](#).

But instead of protecting children from these life-altering interventions, many states and local jurisdictions are passing “[conversion therapy](#)” bans that legally prohibit therapists from helping gender-confused and dysphoric children with non-invasive talk therapy. And If this [federal bill](#) becomes law, this will be the case in all 50 states. By legally restricting the ability of therapists to help children, these local laws help ensure that medical transition is the only legal option for these vulnerable children.

The medical transition of children is not “life-affirming,” it is life-altering. And it certainly should not be compelled by the state.