

POLICY BRIEF

PARENTAL NOTIFICATION LAWS: INTERFERENCE WITH MINORS' ACCESS TO ABORTION MAY BE UNCONSTITUTIONAL IN ABORTION SUPPORTIVE STATES

BACKGROUND

The legal framework governing minors' ability to consent to healthcare and particularly reproductive care reflects ongoing tension between the rights of parents to direct the upbringing of their children and minors' rights to bodily autonomy and privacy.¹ This tension between parental rights and minors' rights is particularly pronounced in the context of reproductive and sexual health, including abortion care, contraception, and gender-affirming care.

The Supreme Court has long recognized that parents possess a fundamental interest in the care, custody, and upbringing of their children. Foundational cases include finding a parental right to control their children's education,² including the decision to forego public school in favor of private school³ and the decision to stop formal education at age 16 for religious reasons.⁴ Parents' rights prevailed over a statute that allowed Washington courts to order visitation for people who are not a child's parents when doing so would be in the child's best interest.⁵ The unpinning of these decisions is the presumption that parents are best situated to determine their children's needs and to promote their well-being, and that government interference should be limited only when necessary to protect the child's health or safety. The scope of the exception is narrow, but the Court has found that the government's interest in protecting children may override the parental rights even when First Amendment Free Exercise rights dovetail with the parental rights.⁶

At the same time, minors possess a constitutional right to privacy and bodily autonomy. In 1979, the Supreme Court recognized this right with respect to access to abortion care, holding that state laws requiring parental involvement in abortion decisions must provide an exception for mature minors if both parents refuse to allow an abortion.⁷

“The tension between parental rights and minors’ ability to advocate for themselves has significant implications for their broader access to reproductive and sexual health care.

State laws survive challenge if they provide for a process called judicial bypass, through which a minor may request a court to order that they have agency in abortion decision making over their parents’ objection or without notification to their parents. Under these laws, minors must prove to the court that they are mature enough to make the decision to obtain an abortion.⁸ However, at least one court⁹ has diverged from this standard in the shadow of

the Supreme Court’s decision in *Dobbs v. Jackson Women’s Health Organization*,¹⁰ which overturned *Roe v. Wade*¹¹ and found no federal constitutional right to abortion.

The tension between parental rights and minors’ ability to advocate for themselves has significant implications for their broader access to reproductive and sexual health care. In many states, minors’ access to services such as STI/HIV testing, contraception, prenatal care, and abortion are subject to legal barriers that do not apply to adults.¹² Some states recognize exceptions to consent requirements, including exceptions for emergency care, STI testing, and sexual assault examinations; some include an exception for “mature” minors seeking abortion care.¹³

Recent Supreme Court decisions have buttressed parental rights to some extent in this space. In 2025, the Court held that parents have a right to opt their children out of components in school curricula that include LGBTQ+ themes, relying at least in part on the parents’ assertion that the instruction conflicted with their religious beliefs.¹⁴ At the same time, the Court subjugated parental rights when upholding a Tennessee law that prohibits parents from providing their children access to gender-affirming care for the treatment of gender dysphoria.¹⁵

As the legal landscape continues to change with respect to reproductive health care rights and parental rights at the federal level, states have engaged in the protection or restriction of reproductive health care rights through changes to statutes and state constitutions. Examining whether a state’s laws regarding minors’ access to abortion care comport with the state’s laws regarding reproductive rights reveals some inconsistencies that reflect the continuing impact of parental rights. States with broad protection for abortion care should consider whether their laws regulating minors’ access are consistent with the broad protections.

STATE LAWS REGULATING MINORS’ ACCESS TO ABORTION CARE

Most states have passed legislation setting standards for parental involvement in minors’ access to abortion

care. The Supreme Court decision mandating the availability of judicial bypass as an option for minors seeking abortion care applies in all states, however, not all states have passed laws detailing implementation of that right.

Currently 38 states require some form of parental involvement in minors' access to abortion care: 22 states require only parental consent; 9 states require only parental notification; and 7 states require parental notification and consent.¹⁶ Laws in 36 of these states provide an exception for minors to obtain judicial bypass eliminating the parental consent and/or notification requirement.¹⁷

As set out in the table below, 12 states (Alaska, California, Connecticut, Hawaii, Illinois, Minnesota, Nevada, New Jersey, New Mexico, New York, Vermont, Washington) and D.C. do not impose parental consent or notification requirements. While many of these states have laws or constitutional amendments protecting the right to abortion generally, only California and Connecticut have laws that provide minors with the explicit right to consent to an abortion.¹⁸ Three states (Alaska, Minnesota, New Jersey) have statutory notice and/or consent requirements in their state code, but each was held unconstitutional under their respective state constitutions.¹⁹

Table 1: State Laws – Minor Consent to Abortion²⁰

State	Parental notice/consent required for abortion care? Age other than 18?	Relevant Law ²¹ & Exceptions
Alabama (abortion ban)	Yes, consent*	Ala Code §§ 26-21-1 to 26-21-8 . *Medical Emergency Exception.
Alaska	No	Alaska Stat. § 18.16.020 (notice/consent requirement) was held unconstitutional by <i>Planned Parenthood v. Alaska</i> , 375 P.3d 1122 (Alaska 2016)).
Arizona	Yes, consent*	Ariz. Rev. Stat. Ann. § 36-2152 . *Medical Emergency Exception & Abuse, Assault, Incest, or Neglect Exception.
Arkansas (abortion ban)	Yes, consent*	Ark. Code Ann. §§ 20-16-801 to 20-16-817 . *Medical Emergency Exception but physician must still notify parent within 24 hours. Court can grant judicial bypass on the basis of the minor having experienced abuse from parent(s) or guardian(s), but requirements for bypass not waived.
California	No	Cal. Fam. Code § 6925 .
Colorado	Yes, notice*	Colo. Rev. Stat. §§ 13-22-701 to 13-22-708 . *Medical Emergency Exception & Abuse, Assault, Incest, or Neglect Exception.

State	Parental notice/consent required for abortion care? Age other than 18?	Relevant Law ²¹ & Exceptions
Connecticut	No*	Conn. Gen. Stat. § 19a-601 . *Counseling requirement for those under 16.
Delaware	Yes, notice for those under 16*	Del. Code Ann. tit. 24, §§ 1780 to 1789b . *Medical Emergency Exception.
D.C.	No	D.C. Code § 7-2086.01 .
Florida	Yes, consent and notice*	Fla. Stat. §§ 390.01114, 390.01116, 390.01118 . *Medical Emergency Exception. Court can grant judicial bypass on the basis of the minor having experienced abuse from parent(s) or guardian(s), or after they are deemed unfit, but requirements for bypass not waived.
Georgia	Yes, notice*	Ga. Code Ann. §§ 15-11-680 to 15-11-688 . *Medical Emergency Exception.
Hawaii	No	Haw. Rev. Stat. § 453-16 ; Haw. Rev. Stat. § 457-8.7 .
Idaho (abortion ban)	Yes, consent*	Idaho Code § 18-609a . *Medical Emergency Exception & Abuse, Assault, Incest, or Neglect Exception.
Illinois	No	775 Ill. Comp. Stat. 55/1-5 ; 775 Ill. Comp. Stat. 55/1-20 .
Indiana (abortion ban)	Yes, consent*	Ind. Code § 16-34-2-4 ; Ind. Code § 16-34-2-4.2 . *Medical Emergency Exception. Abuse, Assault, Incest, or Neglect Exception only if the pregnancy is the result of rape by a parent, legal guardian, or custodian of the unemancipated minor.
Iowa	Yes, notice*	Iowa Code § 135L.3 ; Iowa Code § 232.5 . *Medical Emergency Exception & Abuse, Assault, Incest, or Neglect Exception.
Kansas	Yes, consent of both parents*	Kan. Stat. Ann. § 65-6704 ; Kan. Stat. Ann. § 65-6705 . *Medical Emergency Exception.
Kentucky (abortion ban)	Yes, consent*	Ky. Rev. Stat. Ann. § 311.732 . *Medical Emergency Exception but physician must notify parent within 24 hours. Court can grant judicial bypass on the basis of the minor having experienced abuse from parent(s) or guardian(s), but requirements for bypass not waived.
Louisiana (abortion ban)	Yes, consent*	La. Stat. Ann. § 40:1061.14 ; La. Stat. Ann. § 40:1061.14.1 ; La. Stat. Ann. § 40:1061.23 . *Medical Emergency Exception.
Maine	Yes, consent*	Me. Rev. Stat. Ann. tit. 22, § 1597-A . *Health care provider can waive consent requirement for Medical Emergencies and/or situations involving Abuse, Assault, Incest, or Neglect.
Maryland	Yes, notice*	Md. Code Ann., Health-Gen. § 20-103 . *No explicit Medical Emergency Exception but health care providers may waive requirement under specific circumstances if not in the best interest of the minor. Abuse, Assault, Incest, or Neglect Exception.
Massachusetts	Yes, consent for those under 16*	Mass. Gen. Laws ch. 112, § 12R . *Medical Emergency Exception.

State	Parental notice/consent required for abortion care? Age other than 18?	Relevant Law ²¹ & Exceptions
Michigan	Yes, consent*	Mich. Comp. Laws §§ 722.901 to 722.908 . *Medical Emergency Exception.
Minnesota	No	Minn. Stat. § 144.343 (notice requirement) - held unconstitutional by <i>Doe v. Minnesota</i> , No. 62-CV-19-3868, at *1 (Minn. Dist. Ct. 2022), <i>aff'd</i> , 2024 WL 545185 (Minn. Ct. App. Feb. 12, 2024).
Mississippi (abortion ban)	Yes, consent of both parents*	Miss. Code Ann. §§ 41-41-51 to 41-41-63 . *Medical Emergency Exception.
Missouri	Yes, consent of one parent and notice of the other*	Mo. Rev. Stat. § 188.028 . *Medical Emergency Exception.
Montana	Yes, notice for those under 16*	Mont. Code Ann. §§ 50-20-201 to 50-20-235 . *Medical Emergency Exception. Court can grant judicial bypass on the basis of the minor having experienced abuse from parent(s) or guardian(s), but requirements for bypass not waived.
Nebraska	Yes, consent*	Neb. Rev. Stat. §§ 71-6901 to 71-6911 . *Medical Emergency Exception. For instances involving Abuse, Assault, Incest, or Neglect, the minor can obtain consent from a grandparent or the court can grant judicial bypass on the basis of the minor having experienced abuse from parent(s) or guardian(s), but requirements for bypass not waived.
Nevada	No*	Nev. Rev. Stat. §§ 442.255, 442.2555 *notice requirement was struck down in <i>Planned Parenthood Mar Monte, Inc. v. Nevada</i> , 590 P.3d 481 (Nev. 2026) as unconstitutionally vague.
New Hampshire	Yes, notice*	N.H. Rev. Stat. Ann. §§ 132:32 to 132:36 . *Medical Emergency Exception.
New Jersey	No	N.J. Rev. Stat. §§ 9:17A-1 to 9:17A-1.12 (notice requirement) - held unconstitutional by <i>Planned Parenthood of Cent. N.J. v. Farmer</i> , 762 A.2d 620, 638-39 (N.J. 2000).
New Mexico	No	N.M. Stat. Ann. § 30-5-1 (consent requirement) - repealed by S.B. 10, 55th Leg., Reg. Sess. (N.M. 2021).
New York	No	N.Y. Pub. Health Law § 2599-AA .
North Carolina	Yes, consent*	N.C. Gen. Stat. §§ 90-21.6 to 90-21.10 . *Medical Emergency Exception.
North Dakota (abortion ban)	Yes, consent of both parents*	N.D. Cent. Code §§ 14-02.1-03, 14-02.1-03.1 . *Medical Emergency Exception
Ohio	Yes, consent*	Ohio Rev. Code Ann. §§ 2919.121, 2919.122, 2151.85 . *Medical Emergency Exception
Oklahoma (abortion ban)	Yes, consent and notice*	OK Stat. tit. 63, §§ 1-740 to 1-740.5, 1-744 to 1-744.6 . *Medical Emergency Exception but physician must notify parents within 24 hours.

State	Parental notice/consent required for abortion care? Age other than 18?	Relevant Law ²¹ & Exceptions
Oregon	Yes, consent for those under 15*	Or. Rev. Stat. § 109.640 . *No explicit Medical Emergency Exception but health care providers may waive requirement under specific circumstances if not in the best interest of the minor.
Pennsylvania	Yes, consent*	18 Pa. Cons. Stat. § 3206 . *Medical Emergency Exception.
Rhode Island	Yes, consent*	23 R.I. Gen. Laws §§ 23-4.7-1 to 23-4.7-6 . *Medical Emergency Exception.
South Carolina	Yes, consent for those under 17*	S.C. Code Ann. §§ 44-41-10, 44-41-30 to 44-41-37 . *Medical Emergency Exception & Abuse, Assault, Incest, or Neglect Exception.
South Dakota (abortion ban)	Yes, notice*	S.D. Codified Laws §§ 34-23A-1 , 34-23A-7 , 34-23A-7.1 , 34-23A-10.1 , 34-23A-10.2 . *Medical Emergency Exception but physician must notify parents within 24 hours.
Tennessee (abortion ban)	Yes, consent*	Tenn. Code Ann. §§ 37-10-301 to 37-10-308 . *Medical Emergency Exception.
Texas (abortion ban)	Yes, consent and notice*	Tex. Fam. Code Ann. §§ 33.001 to 33.014 ; Tex. Occ. Code Ann. § 164.052(a)(19) . *Medical Emergency Exception but physician must notify parents within 24 hours.
Utah	Yes, consent and notice*	Utah Code Ann. §§ 76-7-304, 76-7-304.5 . *Medical Emergency Exception. Abuse, Assault, Incest, or Neglect Exception – parental notification required, if possible, unless abuse perpetrated by parent.
Vermont	No	Vt. Stat. Ann. tit. 18, §§ 9493 to 9498 ; VT. CONST. Declaration of Rights, ch. I, art. 22 .
Virginia	Yes, consent and notice*	Va. Code Ann. §§ 16.1-241, 54.1-2969(J) . *Medical Emergency Exception & Abuse, Assault, Incest, or Neglect Exception.
Washington	No	Wash. Rev. Code § 9.02.100 .
West Virginia (abortion ban)	Yes, notice*	W. Va. Code §§ 16-2F-1 to 16-2F-9 . *Medical Emergency Exception but physician must notify parents within 24 hours.
Wisconsin	Yes, consent*	Wis. Stat. § 48.375 . *Medical Emergency Exception. Abuse, Assault, Incest, or Neglect Exception – requires minors to sign statement regarding abuse, unless it is perpetrated by a caregiver.
Wyoming (abortion ban – currently enjoined by Wyoming v. Johnson, 582 P.3d 380 (Wyo. 2026))	Yes, consent and notice*	Wyo. Stat. Ann. § 35-6-118 – repealed in 2023; H.B.126, 68th Leg., Budget Session (Wyo. 2026) (Human Heartbeat Act) ; Wyo. Stat. Ann. § 35-6-507 . *Medical Emergency Exception before ban was enjoined.

IMPACT OF PARENTAL NOTIFICATION LAWS

Relative to parental consent laws, parental notification laws are less restrictive and generally allow a minor to receive an abortion, but the notification requirement causes significant delays in receiving care and may deter some minors from seeking care. In a 2023 study, researchers performed a systematic review of published research on the impact of parental involvement laws on minors seeking abortions.²² For states with parental notification laws, the study identified mixed results.²³ This is partly because some states with parental notification laws also have parental consent laws, which contribute to higher access barriers. The study concluded that “five out of [six] studies showed a decrease in abortions associated with these notification laws and both studies that reported on delays in accessing abortion care found significant delays.”²⁴

In an April 2025 study, researchers explored the experience and narrative of adolescents and young adults navigating Colorado’s parental notification law.²⁵ The Colorado law requires physicians or other healthcare providers to notify a parent of a minor’s scheduled abortion at least 48 hours before the procedure.²⁶ The study focused on two main prongs of the minor’s experience: disclosing a pregnancy to a parent and engaging with the law itself.²⁷ The results described a varied and complicated experience for adolescents navigating family dynamics, legal compliance, and their own preferences.²⁸ One individual reported changing her mind and ultimately keeping the pregnancy after her parents threatened “to cut her and her existing child off emotionally and financially.”²⁹ Those who sought judicial bypass were not sheltered from unwanted disclosure when parents of the minor learned of the proceedings.³⁰ Taking pains to hide the process while at home and school added additional stress and even impacted the pregnant minors’ academic achievement.³¹ The bypass hearing itself caused anxiety, fear, and panic with some minors reporting feeling embarrassed and stigmatized by attorneys and judges.³² Further, the bypass process caused delays in care, forcing one minor to continue an unwanted pregnancy due to the gestational age.³³ Overall, the notification law in Colorado added harmful burdens and delays to an already time sensitive and high stakes decision.³⁴

In a report by Human Rights Watch, reproductive rights advocates argue “that, in practice, parental notification laws effectively grant parents veto power over a young person’s abortion decision.”³⁵ Because parents can restrict financial support, transportation, and communication, “they can effectively block young people’s access to abortion care even if the law requires only notice and not consent.”³⁶ Further, not all minors live with or are in contact with their parents, which can cause additional delays in receiving necessary care if providing notice is cumbersome.³⁷ Delay in abortion care changes the types of procedures available to the individual, with later gestational stages requiring more invasive and expensive procedures. In addition to physical impacts, “any type of delay causing obstacle to abortion care was significantly associated with more symptoms of stress,

anxiety, and depression and higher risk of anxiety and depressive disorders.”³⁸ Requiring minors to notify parents can have serious consequences including alienation, loss of housing, physical and/or emotional abuse, and being forced to carry an unwanted pregnancy.³⁹

Two years before *Dobbs v. Jackson Women’s Health Organization*, legislators in Massachusetts passed the ROE Act, removing parental consent requirements for minors seeking abortion care.⁴⁰ Using data from 2017 to 2022, researchers measured the impact of the ROE Act on timeliness of care for minors seeking abortion care.⁴¹ The study found that minors between the ages of 16 and 17 received their abortion care 5.46 days earlier after the removal of the parental consent requirement.⁴² Further, “the use of medication abortion increased from 39.3% to 51.1%,” illustrating a tangible change in the kind of abortion care given to minors.⁴³ At least in Massachusetts, data support the conclusion that parental consent laws delay access in abortion care for minors and impact the kind of care available to them and removal of the notification requirement improves outcomes.⁴⁴

CONSTITUTIONALITY OF PARENTAL NOTIFICATION LAWS IN STATES WITH A CONSTITUTIONAL RIGHT TO ABORTION

There is constitutional conflict in states that have enshrined the right to abortion in their state constitution yet continue to impose parental consent or notification. For example, in January 2025, Maryland established a constitutional right to reproductive freedom: “[E]very person, as a central component of an individual’s rights to liberty and equality, has the fundamental right to reproductive freedom, including but not limited to the ability to make and effectuate decisions to prevent, continue, or end one’s own pregnancy.”⁴⁵ Although the provision does not explicitly apply to minors, it applies to “every person,” which in the ordinary course includes minors. This constitutional glitch led courts in similar states to strike down the parental notification or consent laws. The constitutional right to abortion in Alaska and Minnesota is based solely on a broad right to privacy enshrined in their respective state constitutions.⁴⁶ These constitutional rights to abortion were the basis of cases holding parental notice/consent requirements for minors’ abortions unconstitutional.⁴⁷

The Supreme Court of Alaska held that the state’s parental notification requirement for minors seeking abortion care violated the equal protection clause of the state constitution.⁴⁸ The equal protection clause of the Alaska Constitution prohibits the state from treating similarly situated groups of people differently with respect to a fundamental right unless a compelling governmental interest justifies the discrimination and the means of achieving the interest is the least restrictive approach.⁴⁹ In Alaska, the right to abortion is a fundamental right and the right extends to minors.⁵⁰ The court determined that two classes of pregnant minors, those seeking termination and those seeking to carry to term, were treated differently under state law because the parental

notification law applies only to those seeking abortion care, infringing on the fundamental right to abortion.⁵¹ As a result, the court engaged in an analysis of whether the state has a compelling interest in treating the groups of minors differently. Although the court acknowledged that the state has a compelling interest in “encouraging parental involvement in minors’ pregnancy-related decisions,” that interest applies to all pregnant minors, not just those seeking abortion care. The parental notification law, however, applies only to the latter group. The court concluded that the parental notification law imposed a “discriminatory barrier to those minors seeking to exercise their fundamental privacy right to terminate a pregnancy” in violation of Alaska’s equal protection guarantee.⁵² Because of this decision, there is no parental notification law in Alaska.

A Minnesota trial court reached the same result, on a similar but more expansive basis.⁵³ Like in Alaska, the right to abortion in Minnesota was determined to be a fundamental right under the state constitution’s right to privacy.⁵⁴ Because the right to abortion is a fundamental right in Minnesota, the parental notification law could survive challenge only if the law is “narrowly tailored to serve a compelling government interest.”⁵⁵ The court weighed the evidence, including that showing real harms to children forced to notify their parents of their intent to seek an abortion and showing that minors often possess maturity necessary to make reproductive health care choices. “[M]inors can correctly predict parental responses to the minor seeking abortion, which may include violence and abandonment, whether financially, emotionally, or removing access to housing.”⁵⁶ Minors who have a good family support system will likely seek out guidance regardless of any legal requirements. Roughly “60–70% or more of adolescents seek support from parental figures or other trusted adults, including involving at least one parent, when making abortion decision.”⁵⁷ The court found that the state lacked a compelling interest. Further, the court found that even if the state’s articulated interest was compelling, the state failed to demonstrate that the parental notification law served that interest.⁵⁸ Consistent with the Alaska court, the Minnesota court also found that the disparate treatment of similarly situated pregnant minors imposed by the parental notification law resulted in the law violating the equal protection clause of the Minnesota constitution.⁵⁹ Because of this decision, there is no parental notification law in Minnesota.

States that provide a constitutional right to abortion, whether explicitly or as interpreted by the state courts under a privacy right, should consider whether their parental consent or notification law would survive judicial scrutiny given the outcomes in Alaska and Minnesota. For example, in Maryland, abortion is an explicit fundamental right.⁶⁰ Like Alaska and Minnesota, Maryland courts apply the strict scrutiny test to a law that interferes with a fundamental right.⁶¹ If challenged, Maryland’s parental notification law would be subject to the same analysis set out in the Alaska and Minnesota decisions. Policy options consistent with a fundamental right to abortion exist for states like Maryland.

POLICY OPTIONS THAT RESPECT A FUNDAMENTAL RIGHT TO ABORTION

States interested in protecting minors' access to abortion should look to California and Connecticut for legislative approaches to accomplish that goal.

California law states that “[a] minor may consent to medical care related to the prevention or treatment of pregnancy.”⁶² This applies to any hospital, medical, or surgical care, along with contraception, abortion, pelvic exams, pregnancy testing, family planning, and prenatal care.⁶³ California’s minor consent laws also extend to other areas of healthcare for minors over 12 years of age, including healthcare for STI prevention, mental health treatment, sexual assault care, and substance abuse care.⁶⁴

Connecticut's law, by contrast, requires that physicians or counselors first provide information about pregnancy, abortion, birth control, adoption, and the possibility of involving the minor’s parents.⁶⁵ The statute provides an exception for when there is a medical emergency that requires immediate action.⁶⁶ Connecticut’s statute was passed in 1990 and was intended to act as a compromise between individuals who wanted a parental consent requirement and individuals who wanted a law like California’s.⁶⁷ Moreover, Connecticut expanded its minor consent laws to other areas of healthcare in 2025, passing House Bill 7213, “An Act Concerning Access to Reproductive Health Care.”⁶⁸ This law allows minors to consent to reproductive healthcare treatments and services, contraceptive counseling and services, prenatal care, and pain management during labor.

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CONCLUSION

The Supreme Court upended federal constitutional protections for abortion in the 2022 *Dobbs* decision. In the aftermath, many states have extended their constitution or statutes to provide a right to abortion. In some states, court decisions have found that the right to abortion exists pursuant to the state constitution. Yet some of these states continue to impose antiquated parental notification laws, significantly interfering with minors' access to abortion. Close examination of existing laws may reveal not only policies that are inconsistent with legislative intent to protect reproductive autonomy but also with the state constitution. Taking legislative action will not only prevent a challenge to parental notification laws, but it will also benefit the health of pregnant minors.

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¹ In most states, a minor in this context includes anyone who is under the age of 18. *Parental Consent and Notification Laws*, PLANNED PARENTHOOD, <https://www.plannedparenthood.org/learn/teens/stds-birth-control-pregnancy/parental-consent-and-notification-laws> (last visited September 11, 2026). In Delaware, Massachusetts, and Montana, however, a minor in this context is anyone under the age of 16; and in Oregon, it is anyone under the age of 15. Del. Code Ann. tit. 24, § 1782(6) (West 2026); Mass. Gen. Laws Ann. ch. 112, § 12R (2026); Mont. Code Ann. § 50-20-224 (West 2026); Or. Rev. Stat. Ann. § 109.640 (West 2026).

² *Meyer v. Nebraska*, 262 U.S. 390 (1923).

³ *Pierce v. Soc’y of The Sisters*, 268 U.S. 510 (1925).

⁴ *Wisconsin v. Yoder*, 406 U.S. 205 (1972).

⁵ *Troxell v. Granville*, 530 U.S. 57 (2000).

⁶ *Prince v. Massachusetts*, 321 U.S. 158 (1944) (parents’ right to have children distribute religious literature limited by child labor laws).

⁷ *Bellotti v. Baird*, 443 U.S. 622 (1979).

⁸ Sarah Horvath & Susan Frietsche, *Judicial Bypass for Minors Post-Dobbs*, 19 WOMEN’S HEALTH 1, 2 (Nov. 2023).

⁹ *Doe v. Uthmeier*, 407 So.3d 1281, 1291–92 (Fla. Dist. Ct. App. 2025) (holding the statutory scheme permitting unemancipated minors to seek judicial bypass violates parents’ due process rights).

¹⁰ 597 U.S. 215 (2022).

¹¹ 410 U.S. 113 (1973).

¹² Abigail English & Rebecca Gudeman, *Minor Consent and Confidentiality: A Compendium of State and Federal Laws*, NAT’L CTR. FOR YOUTH L. (Aug. 2024), <https://youthlaw.org/wp-content/uploads/ncylminorconsentcompendium2024.pdf> (discussing state laws on minor healthcare).

¹³ *Id.*

¹⁴ *Mahmoud v. Taylor*, 606 U.S. 522, 530 (2025) (“[G]overnment burdens the religious exercise of parents when it requires them to submit their children to instruction that poses ‘a very real threat of undermining’ the religious beliefs and practices that the parents wish to instill.”).

¹⁵ *U.S. v. Skrmetti*, 605 U.S. 495 (2025).

¹⁶ *Minors’ Access to Abortion Care*, GUTTMACHER INST., <https://www.guttmacher.org/state-policy/explore/minors-access-abortion-care> (last updated August 1, 2026).

¹⁷ *Id.*

¹⁸ See Cal. Fam. Code § 6925 (West 2026); Conn. Gen. Stat. § 19a-601 (2026).

¹⁹ *Planned Parenthood v. Alaska*, 375 P.3d 1122 (Alaska 2016); *Doe v. Minnesota*, No. 62-CV-19-3868, at *1 (Minn. Dist. Ct. 2022), *aff’d*, 2024 WL 545185 (Minn. Ct. App. Feb. 12, 2024); *Planned Parenthood of Cent. N.J. v. Farmer*, 762 A.2d 620, 638-39 (N.J. 2000).

²⁰ Unless otherwise specified, minor age for the purposes of this chart is anyone under the age of 18. Parental involvement requirements are subject to various statutory exceptions, including exceptions for medical emergencies and, in some states, circumstances involving abuse, assault, incest, or neglect. Some exceptions permit an alternative adult to provide consent or notification, while others provide a basis for judicial bypass rather than eliminating the requirement outright.

²¹ See also English & Gudeman, *supra* note 12.

²² See Alisha Kramer et al., *The Impact of Parental Involvement Laws on Minors Seeking Abortion Services: A Systematic Review*, HEALTH AFFS. SCHOLAR, Sep. 2023, at 1. [10.1093/haschl/qxad045](https://doi.org/10.1093/haschl/qxad045).

²³ *Id.*

²⁴ *Id.*

²⁵ See Kate Coleman-Minahan, Mar G. Seminario & Lauren J. Ralph, *Exploring Adolescents’ and Young Adults’ Abortion Disclosure and Adolescents’ Experiences Navigating Colorado’s Parental Notification Law*, 76 J. ADOLESCENT HEALTH 665 (2025). <https://doi.org/10.1016/j.jadohealth.2024.12.013>.

²⁶ *Colorado’s Parental Notification Law*, PLANNED PARENTHOOD, <https://www.plannedparenthood.org/planned-parenthood-rocky-mountains/learn/abortion-care/colorados-parental-notification-law> (last visited September 4, 2026).

²⁷ Coleman-Minahan, Seminario & Ralph, *supra* note 25, at 666.

²⁸ *Id.* at 667–669.

²⁹ *Id.* at 668.

³⁰ *Id.* The minor’s partner, the purported parent of the fetus, may also become aware of the pregnancy and planned abortion because of the judicial bypass process.

³¹ *Id.* at 669.

³² *Id.*

³³ *Id.*

³⁴ *Id.*

³⁵ *Whose Abortion Is It? The Harms of State-Mandated Parental Notification for Abortion and Judicial Bypass in the United States*, HUMAN RIGHTS WATCH, Oct. 2025, at 42, https://ifwhenhow.org/wp-content/uploads/2025/10/us_abortion1025-web.pdf.

³⁶ *Id.*

³⁷ *Id.* at 45. Note that although Maryland law ordinarily requires parental notification before a minor obtains an abortion, the requirement may be waived when the physician concludes that the minor is: (i) sufficiently mature to provide informed consent; (ii) that notification would be contrary to the minor's interests; (iii) that it could expose the minor to abuse; (iv) that the minor does not live with a parent or guardian; or (v) that reasonable attempts to notify a parent or guardian have failed. Md. Code Ann., Health-Gen. § 20-103 (West 2026).

³⁸ *Whose Abortion Is It?*, *supra* note 35, at 44.

³⁹ *Id.* at 42.

⁴⁰ Isabel Fulcher et al., *Changes to Parental Consent Requirements for Abortion in Massachusetts and Impact on Timeliness of Care for Adolescents Aged 16 to 17 Years*, 115 AM. J. OF PUB. HEALTH 397, 398 (2025), <https://doi.org/10.2105/AJPH.2024.307918>.

⁴¹ *Id.*

⁴² *Id.* at 397.

⁴³ *Id.* at 399.

⁴⁴ *Id.* at 397–99.

⁴⁵ MD. CONST. Declaration of Rights, art. 48 (West, Westlaw through June 1, 2026).

⁴⁶ ALASKA CONST. art. 1, § 22; MINN. CONST. art. 1, § 2.

⁴⁷ *Planned Parenthood v. Alaska*, 375 P.3d 1122, 1145 (Alaska 2016); *Doe v. Minnesota*, No. 62-CV-19-3868, at *1 (Minn. Dist. Ct. 2022), <https://lawyeringproject.org/wp-content/uploads/2022/09/2022-07-11-Summary-Judgment-Order-Memorandum.pdf>.

⁴⁸ *Planned Parenthood*, 375 P.3d at 1139–40.

⁴⁹ *Id.* at 1134.

⁵⁰ *Valley Hosp. Ass'n v. Mat-Su Coal. for Choice*, 948 P.2d 963, 968–69 (Alaska 1997) (establishing fundamental privacy right for pregnant women); *State v. Planned Parenthood*, 35 P.3d 30, 40–41 (Alaska 2001) (extending fundamental privacy right to pregnant minors).

⁵¹ *Planned Parenthood*, 375 P.3d at 1134–41.

⁵² *Id.* at 1145.

⁵³ *Doe v. Minnesota*, No. 62-CV-19-3868, at 95, 99.

⁵⁴ *Doe v. Gomez*, 542 N.W. 2d 17 (Minn. 1995). In 2023, Minnesota buttressed this decision by passing the Protect Reproductive Options Act, affirming the fundamental right to abortion. Minn. Stat. § 145.409.

⁵⁵ *Doe v. Minnesota* at 95.

⁵⁶ *Doe v. Minnesota* at 24.

⁵⁷ *Id.*

⁵⁸ *Id.* at 103.

⁵⁹ *Id.* at 106.

⁶⁰ MD. CONST. Declaration of Rights, art. 48 (West, Westlaw through June 1, 2026).

⁶¹ *Pizza di Joey, LLC v. Mayor of Baltimore*, 470 Md. 308, 346, 235 A.3d 873, 895 (2020).

⁶² Cal. Fam. Code § 6925 (West 2026).

⁶³ *2024 Consent Law Seminar: Minors' Consent*, CAL. HOSP. ASS'N (2024), https://calhospital.org/wp-content/uploads/2024/05/Minors-Consent-Sac_1up.pdf.

⁶⁴ Cal. Fam. Code §§ 6924 (Mental Health), § 6926 (STI and Communicable Disease Prevention), § 6927 (Sexual Assault Care), § 6929 (Substance Use Care).

⁶⁵ Conn. Gen. Stat. § 19a-60 (2026).

⁶⁶ Conn. Gen. Stat. § 19a-60(e) (2026).

⁶⁷ J.M. Healey, *Connecticut's New Abortion Statute*, 54 CONN. MED. 473 (1990), <https://pubmed.ncbi.nlm.nih.gov/2225814/>.

⁶⁸ H.B. 7213, 2025 Gen. Assemb., Jan. Sess. (Conn. 2025), <https://www.cga.ct.gov/2025/TOB/H/PDF/2025HB-07213-R00-HB.PDF>.

⁶⁹ Cal. Fam. Code § 6925 (West 2026).

⁷⁰ *2024 Consent Law Seminar: Minors' Consent*, CAL. HOSP. ASS'N (2024), https://calhospital.org/wp-content/uploads/2024/05/Minors-Consent-Sac_1up.pdf.

⁷¹ Cal. Fam. Code §§ 6924 (Mental Health), § 6926 (STI and Communicable Disease Prevention), § 6927 (Sexual Assault Care), § 6929 (Substance Use Care).

⁷² Conn. Gen. Stat. § 19a-60 (2026).

⁷³ Conn. Gen. Stat. § 19a-60(e) (2026).

⁷⁴ J.M. Healey, *Connecticut's New Abortion Statute*, 54 CONN. MED. 473 (1990), <https://pubmed.ncbi.nlm.nih.gov/2225814/>.

⁷⁵ H.B. 7213, 2025 Gen. Assemb., Jan. Sess. (Conn. 2025), <https://www.cga.ct.gov/2025/TOB/H/PDF/2025HB-07213-R00-HB.PDF>.