

Elimination of non-medical vaccine exemptions ranked top priority at Annual Leadership Forum

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AAP leaders have called for elimination of non-medical* exemptions to vaccination to be the top priority for the year, ranking it first among the top 10 resolutions during the Annual Leadership Forum (ALF).

“Given the measles outbreaks, prioritizing the elimination of non-medical vaccine exemptions is a timely undertaking,” said AAP President Kyle E. Yasuda, M.D., FAAP.

The resolution asks the Academy’s Board of Directors to advocate for the “development of a toolkit that highlights successful chapter strategies for the purpose of helping chapters work with their state legislatures to eliminate/reduce non-medical* exemptions that have allowed immunization refusals.”

Top 10 resolutions:

1. Eliminating Non-medical* Exemptions to Vaccinating Children
2. Family Separations at the Border: Safeguarding Children’s Health
3. Limitation of Prior Authorization Requirements for Medications
4. Continuity of Medicaid Benefits When Recipients Move
5. Access to Evidence-Based Treatment for Children and Adolescents With Neurodevelopmental Disorders Beyond Autism
6. Affordable Insulin Access for all Children With Diabetes
7. Revising the AAP Bright Futures Guidelines on Gun Safety Anticipatory Guidance
8. Drowning Prevention Recommendation Statement and Education
9. Providing Guidance on School Response to E-cigarette Use by Students
10. Public Education About Intramuscular Vitamin K Administration at Birth

*The title and resolved were revised to include other kinds of exemptions.

The ALF brings together chapter, committee, council and section leaders from across the U.S. and Canada, drawing on their diverse perspectives and expertise to advise the AAP Board of Directors. The event also provides leadership education and promotes networking and understanding of AAP priorities.

Prior to the forum, AAP groups and members submitted resolutions for consideration, and members were able to comment on them online.

Look to <http://bit.ly/2JhLDXI> and the May issue of *AAP News* for more on the top 10 resolutions and the 2019 ALF.



News Release

American Academy of Pediatrics Applauds CDC Advisory Committee's Approval of Safe, Effective COVID-19 Vaccine for Children Ages 5-11

Pediatricians are eager to help protect children and families by administering the vaccine, the most effective prevention tool available since the start of the pandemic

ITASCA, IL—The American Academy of Pediatrics supports today's recommendation by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) to recommend the use of a COVID-19 vaccine in children ages 5-11. The AAP urges families to check with their pediatrician and community health care providers about how to get their eligible children vaccinated, pending a final recommendation from the CDC.

Vaccinating children will protect children's health and allow them to fully engage in all of the activities that are so important to their health and development. Parents can enjoy greater peace of mind gathering with family members this winter and sending their children to school, sports and other events that were paused during the height of the pandemic.

"Sharing this life-saving vaccine with our children is a huge step forward and provides us all with more confidence and optimism about the future," said AAP President Lee Savio Beers, MD, FAAP. "Pediatricians are eager to participate in the immunization process and talk with families about this vaccine. We want to ensure that access to this vaccine is equitable, and that every child is able to benefit."

Immediately after the ACIP vote to recommend the Pfizer-BioNTech COVID-19 vaccine for children ages 5 to 11, the AAP

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Media Contact:

Lisa Black

630-626-6084

lblack@aap.org

published its updated recommendations for COVID-19 vaccine, including a strong recommendation for children in this age group to receive the vaccine pending the final decision by the CDC. The AAP recommends COVID-19 vaccination for all children and adolescents 5 years of age and older who do not have contraindications using a vaccine authorized for use for their age. Children with prior COVID-19 infection or disease should receive a COVID-19 vaccination to prevent a second infection and to lower the risk of severe illness and hospitalization.

The Academy also updated its [interim school guidance](#), which calls for the continued use of layers of protection including universal mask-wearing in schools to protect all students and adults. AAP strongly advocates for in-person learning, which can happen safely with adherence to recommended policies and procedures. The guidance revision emphasizes the importance of immunization and masking as the most important risk mitigation strategies, as supported by new evidence.

“We know from our experience with the Delta variant that this virus is unpredictable, and we cannot afford to be complacent. It is critical to use science and data to guide our decisions about the pandemic and school COVID-19 plans,” Dr. Beers said. “We have also entered flu season, and now have an opportunity for children to receive vaccinations for both the flu and COVID-19, which can be done during a single visit.”

The AAP recognizes that disparities in school funding, quality of school facilities, educational staffing, and resources for enriching curricula among schools have been exacerbated by the pandemic. Ongoing federal, state, and local funding should be provided for all schools so they can continue to implement all the COVID-19 mitigation and safety measures required to protect students and staff.

More resources are available here:

- AAP COVID-19 [Vaccine](#) in Children and [Adolescents](#) Policy Statement
- [School interim guidance update](#)
- For parents: [Ask the Pediatrician: COVID-19 Round-Up - HealthyChildren.org](#)



The Adolescent's Right to Confidential Care When Considering Abortion

COMMITTEE ON ADOLESCENCE

In this statement, the American Academy of Pediatrics reaffirms its position that the rights of adolescents to confidential care when considering abortion should be protected. Adolescents should be encouraged to involve their parents and other trusted adults in decisions regarding pregnancy termination, and most do so voluntarily. The majority of states require that minors have parental consent for an abortion. However, legislation mandating parental involvement does not achieve the intended benefit of promoting family communication, and it increases the risk of harm to the adolescent by delaying access to appropriate medical care. This statement presents a summary of pertinent current information related to the benefits and risks of legislation requiring mandatory parental involvement in an adolescent's decision to obtain an abortion.

INTRODUCTION

Ensuring that adolescents have access to health care, including reproductive health care, has been a long-standing objective of the American Academy of Pediatrics (AAP).¹ Timely access to medical care is especially important for pregnant teenagers because of the significant medical, personal, and social consequences of adolescent childbearing. The AAP strongly advocates for the prevention of unintended adolescent pregnancy by supporting comprehensive health and sexuality education, abstinence, and the use of effective contraception by sexually active youths. For 2 decades, the AAP has been on record as supporting the access of minors to all options regarding undesired pregnancy, including the right to obtain an abortion. Membership surveys of pediatricians, adolescent medicine specialists, and obstetricians confirm this support.²⁻⁴

In the United States, minors have the right to obtain an abortion without parental consent unless otherwise specified by state law. State legislation that mandates parental involvement (parental consent or notification) as a condition of service when a minor seeks an abortion has generated considerable controversy. US Supreme Court rulings, although upholding

abstract

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Where We Stand: Gun Safety

The most effective way to prevent firearm-related injury (</English/safety-prevention/all-around/Pages/Reduce-the-Risk-of-Gun-Injury.aspx>) to children is to keep guns out of homes (</English/safety-prevention/all-around/Pages/Handguns-in-the-Home.aspx>) and communities.

The American Academy of Pediatrics strongly supports gun-safety legislation. We believe that assault weapons and high-capacity ammunition magazines should be banned.

We recommend further that handguns and handgun ammunition be regulated, that restrictions be placed on handgun ownership, and that the number of privately owned handguns be reduced.

Firearms should be removed from the environments where children live and play, but if they are not, they must be stored locked and unloaded. Safe storage practices can reduce the risk of death or injury, but loaded firearms and unloaded firearms and ammunition represent a serious danger to children.



More information:

- [Guns in the Home \(/English/safety-prevention/all-around/Pages/Reduce-the-Risk-of-Gun-Injury.aspx\)](/English/safety-prevention/all-around/Pages/Reduce-the-Risk-of-Gun-Injury.aspx)
- [Is There an Unlocked Gun Where Your Child Plays? \(/English/safety-prevention/at-play/Pages/Is-There-A-Gun-Where-Your-Child-Plays-Asking-Can-Save-Lives.aspx\)](/English/safety-prevention/at-play/Pages/Is-There-A-Gun-Where-Your-Child-Plays-Asking-Can-Save-Lives.aspx)
- [Talking to Children About Tragedies and Other News Events \(/English/family-life/Media/Pages/Talking-To-Children-About-Tragedies-and-Other-News-Events.aspx\)](/English/family-life/Media/Pages/Talking-To-Children-About-Tragedies-and-Other-News-Events.aspx)
- [Firearm-Related Injuries Affecting the Pediatric Population \(http://pediatrics.aappublications.org/cgi/doi/10.1542/peds.2012-2481\)](http://pediatrics.aappublications.org/cgi/doi/10.1542/peds.2012-2481)(AAP Policy Statement)

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Source Caring for Your Baby and Young Child: Birth to Age 5 7th Edition (Copyright © 2019 American Academy of Pediatrics)

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AAP continues to support care of transgender youths as more states push restrictions

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Alyson Sulaski Wyckoff, Associate Editor

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As a record number of state bills targeting the rights of transgender youths were introduced in 2021, the AAP and other medical groups have stepped up efforts to protect them.

States introduced legislation to ban **transgender youths** from participating on **athletic teams** according to their gender identity, restrict access to **school restrooms** that align with students' gender identity and prohibit health care professionals from providing or referring patients for **gender-affirming care**. Bills also seek to ban changes to birth certificates and uphold the right of religious refusal — allowing **providers to refuse care based on claims of religious or moral beliefs**.

The AAP has partnered with chapters and other entities to file amicus briefs in support of legal challenges brought by the American Civil Liberties Union (ACLU) in several states. AAP members and leaders also have been [reaching out](#) to state lawmakers to express concerns about harmful legislation.

“It is critically important for every child to have access to quality, comprehensive and evidence-based care — transgender and gender-diverse youth are no exception,” said AAP Immediate Past President Lee Savio Beers, M.D., FAAP. “As pediatricians, we will continue to speak up and advocate for our patients. We also want transgender and gender-diverse youth to know that not only do we care for them, we care about them, we value them and we will do all we can to ensure they have access to the care they need and deserve.”

Here is a look at state legislation on gender-affirming care bans and sports participation bans in 2021.

Gender-affirming care

Last April, Arkansas became the first state to pass a bill banning gender-affirming care for transgender youths and prohibiting health care providers from referring them for gender-affirming care. The law also prohibits public funding for such services and the state Medicaid program from covering it for those under age 18 years; private insurers could refuse to cover gender-affirming care for any youth.

The state legislature overrode the governor's veto of this bill.

In May, the ACLU filed suit challenging the law, followed by a request for a preliminary injunction. The AAP's amicus brief with 18 medical, mental health and educational organizations supported the injunction request. After a federal judge granted the injunction on July 21 halting implementation of the law, the state appealed.

The AAP and partners plan to submit a second amicus brief later this month.

Legislation in several states is being carried over to 2022 legislative sessions, and new bills have been filed in additional states.

In Texas, the governor requested and received a determination from the commissioner of its Department of Family and Protective Services that gender-affirming surgery for youth constitutes child abuse and neglect.

The AAP's 2018 policy statement *Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents* defines gender affirmation as developmentally appropriate, nonjudgmental, supportive care provided in a safe clinical space.

The policy states that pediatric providers, often the first medical professionals to discover a child's gender identity concerns, have a special role in caring for these patients who have a high risk of depression, anxiety and suicide.

The care model is not one-size-fits-all, said Brittany Allen, M.D., FAAP, a member of the AAP Section on LGBTQ Executive Committee. It recognizes the wide spectrum of normal, healthy gender identities.

"As I often tell families, gender-affirming care is creating space for children to be able to tell us their gender story, rather than filling in the end of the story for them. In that journey, gender-affirming care may draw on evidence-based medical tools — such as puberty blockers or hormone therapy — at developmentally appropriate ages. These tools have been shown to help reduce gender dysphoria and improve mental health for many transgender, nonbinary and gender-diverse youth.

"In my care of more than 200 transgender youth, I've seen the incredible relief and affirmation that these tools can provide," said Dr. Allen, associate professor of pediatrics at University of Wisconsin School of Medicine and Public Health and co-director of a transgender clinic at American Family Children's Hospital.

In 2021, a pediatrician submitted a resolution as part of the annual AAP Leadership Conference titled “Addressing Alternatives to the Use of Hormone Therapies for Gender Dysphoric Youth.” It was not endorsed by any chapter, committee, council, section or district.

While any member can submit a resolution and any member can comment on submitted resolutions, only 57 out of the AAP's 67,000 members commented in support of the resolution. Ultimately, the resolution was soundly defeated by the voting members at the AAP Leadership Conference.

Unfortunately, some reports inaccurately reported this as reflecting “80% of the AAP membership,” and this figure is cited by proponents of the Arkansas law and similar efforts to ban gender-affirming care.

Debbie Greenhouse, M.D., FAAP, oversaw the resolution process as chair of the Chapter Forum Management Committee. She said that after discussion, the resolution “was overwhelmingly voted down in a clear statement that the majority of AAP leaders and experts believe that gender-affirming care is evidence-based, medically necessary care.”

Sports participation bans

Eight states enacted legislation to prohibit transgender youths from participating on athletic teams according to their gender identity in 2021. Laws in Alabama, Tennessee and Texas apply only to interscholastic athletics, while those in Arkansas, Florida, Mississippi, Montana and West Virginia apply to both interscholastic and collegiate athletics.

In South Dakota, the governor issued executive orders prohibiting transgender youths from participating on athletic teams according to their gender identity at the interscholastic level and recommending that only cisgender females play on female athletic teams at the collegiate level.

Idaho enacted a law in 2020 that banned transgender girls from playing on girls' and women's sports teams. The law has been on hold since the ACLU filed a legal challenge, which the AAP and other groups supported in an amicus brief.

The ACLU challenged a sports participation restriction law in West Virginia and a preliminary injunction was granted.

Laws also are being challenged in Florida, Montana and Tennessee.

In addition, pending legislation is being carried over in several states while new legislation has been introduced in other states.

Medical groups collaborate

In a March 2021 news release, Dr. Beers [spoke out](#) about how these bills threaten the health and well-being of transgender patients and interfere in the physician-patient-family relationship. She said the bills are dangerous, could leave transgender teens in certain areas without health care and criminalize pediatricians who try to care for them.

A [joint statement](#) in April 2021 from [six major medical associations including the AAP](#) noted the following: “Our organizations are strongly opposed to any legislation or regulation that would

interfere with the provision of evidence-based patient care for any patient, affirming our commitment to patient safety.”

The patchwork nature of current laws protecting LGBTQ people leaves many youths subject to uncertainty and potential discrimination that impacts their safety, their families and their day-to-day lives, according to experts.

To address this, the Equality Act would provide explicit, permanent protections for LGBTQ people under the nation’s existing civil rights laws with regard to housing, education, federally funded programs and more. Such protections will help to protect LGBTQ youth from discrimination that threatens their health and well-being. The legislation passed the House of Representatives in spring 2021 and is currently awaiting a vote in the U.S. Senate.

The AAP led a [sign-on letter](#) of 140 organizations in support of the Equality Act and submitted [testimony for the record](#) supporting the legislation.

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