

FAMILY PLANNING POLICY AND PROCEDURES

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I. INTRODUCTION

A. Definition

Family planning encompasses an array of educational, medical, and social services designed to assist individuals with freely determining the number and spacing of children.

B. Purpose

This policy has been developed to provide child welfare staff with guidance on their role when individuals request information and assistance with contraception and pregnancy options.

C. Individuals Appropriate For Family Planning Services

Individuals appropriate for family planning services include females of childbearing age (normally between ages 10 and 55 years) and males of any age who may be sexually active.

II. GENERAL GUIDELINES

Individuals of a certain age or legal status have the right to make their own decisions regarding family planning, and child welfare staff must recognize and respect this right. Child welfare staff shall provide **information and referral services only**, unless otherwise ordered by the court, when individuals request information and/or assistance with family planning. This includes:

- communicating information to appropriate individuals on available family planning resources;
- participating in discussions with ISP team members when family planning has been identified as an appropriate service to meet a child's/family member's needs; and
- making referrals to agencies that provide family planning services.

A. Consent Of Minors (Code of Alabama, 1975 § 22-8-4, 22-8-5,22-8-6, 22-8-9, 22-8-10, 22-8-12,-22-8-13 and 22-8-14)

Generally, minors who meet any of the following criteria may consent to their own legally authorized medical, dental, health, or mental health services for himself or herself, and the consent of no other individual shall be necessary:

- They are age sixteen (16) or older; or
- They have graduated from high school; or
- A minor who is pregnant; or
- A minor who is emancipated or
- A minor who is (i) not dependent on a parent or legal guardian for support
(ii) living apart from his or her parents or other individual in loco parentis.

Minors may also consent to legally authorized medical, health or mental health services without the consent of any other person in order to determine the presence of or to treat the following conditions:

- Prevent or determine the presence of pregnancy;
- Determine the presence of or treat sexually transmitted infections; drug dependency or alcohol toxicity; or
- Determine the presence of any reportable disease.

B. Family Planning Services

Contraception, a personal choice, can be addressed through a wide variety of methods. Child welfare staff shall refer individuals to medical personnel (e.g., Health Department, private physician, family planning clinic) for specific information on family planning services so an informed decision can be made with respect to family planning. It is not appropriate for child welfare staff to explain how various methods work or to recommend a particular family planning service. If there are further questions related to family planning, it should be addressed by a medical professional.

When birth control is needed or requested by minor children in foster care, parental consent is desirable, but not necessary when criteria noted under section A. Consent Of Minors are met. If the child in foster care is under age fourteen (14), parental consent must be obtained or the Juvenile Court motioned for a decision regarding consent.

Child welfare staff must file a motion with the Juvenile Court for a decision regarding consent when:

- Parental consent cannot be obtained (e.g., parent's whereabouts are unknown) for the child in foster care who is under age 14; or
- A parent is unwilling to provide consent and contraception is medically indicated for the child in foster care who is under age 14; or

- A parent is unwilling to provide consent and the ISP team has identified that the child in foster care is under age 14 and the child's physical and/or emotional health and safety may be compromised without birth control; or
- Minors of any age have a mental limitation which renders them incapable of providing informed consent.

C. Payment

Many family planning services are covered by Alabama Medicaid. County Health Departments base the cost of their services, when an individual is not Medicaid eligible, on ability to pay as determined by a sliding fee scale. Services may also be paid for through individuals' private insurance.

If children in foster care are not Medicaid eligible, their personal income may be used to pay for family planning services. Local and state funds may not be used to pay for sterilization or abortion. Refer to the Administrative Manual, Chapter 5, for policy and procedures on use of local and state funds. Regardless of the funding source, the ISP must identify the need(s) that family planning services will address.