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A Child Rights and Equity-Based Framework to Advance Policy and Practice Related to Adolescent Consent to Vaccines

To the Editors:

Ensuring minors can legally consent to vaccines, as discussed in the recent position paper on adolescent consent for vaccination [1], is critically important. However, the paper's sole focus on ethical and legal arguments will constrain our capacity to advance such enlightened public policies. The principles of child rights and equity provide a complementary approach to analyze and revise policies and practice. As rights-bearers, children have the right to access vaccines that will optimize their survival and development. As duty-bearers, physicians and advocates are responsible to ensure those rights are fulfilled.

The United Nations Convention on the Rights of the Child (CRC) [2] provides the framework to support a child rights and equity-based approach to advance policy and practice related to youth consent to vaccines. In particular, the CRC:

- Article 2 defines obligations to protect children from discrimination.
- Article 3 requires that all societal decisions consider their best interests.
- Article 6 obligates the State to ensure a child's optimal survival and development.
- Articles 12/13 ensure rights to express opinions freely.
- Article 16 ensures the child's right to privacy.
- Article 17 ensures children have access to information.
- Article 24 ensures the child's right to the highest standard of health and healthcare.

Despite the United States' failure to ratify the CRC, it is nevertheless as relevant to American children as to other children across the globe.

Human papilloma virus vaccine provides an example of the paradox of contemporary vaccine policy and adolescent consent

laws. Current policy fulfills the rights of minors to seek diagnosis and treatment of sexually transmitted infections independently but does not fulfill their right to prevention.

Fulfilling adolescents' rights does not subvert parental rights or responsibilities. Child rights principles emphasize the role of parents as primary caregivers and protectors of the rights of their children. Ideally these should be informed joint decisions. Increasing a child's autonomy according to their evolving capacities is not a threat to parental authority but an opportunity for communication between the parent and child.

Applying rights and equity-based principles to address adolescents' rights to consent to immunization will expand our capacity for advocacy. Physicians can begin by (1) establishing rights-respecting practices; (2) posting a children's rights charter; (3) routinely obtaining children's assent to immunization; (4) developing vaccine information sheets that reflect children's evolving capacities; and (5) implementing rights and equity-based approaches and policies that secure the ability of adolescents to consent to vaccines.

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