



Religious Coalition *for* Reproductive Choice
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Religious leaders resist efforts to impose sectarian religious beliefs that limit health care

Reverend Carlton W. Veazey, President and CEO of the Religious Coalition for Reproductive Choice, announces ethical guidelines that balance the beliefs and rights of patients and providers

The Religious Coalition for Reproductive Choice (Religious Coalition) recently released principles that will help health care institutions balance the beliefs of patients and the beliefs of providers as a larger number of health care institutions come under control of religious organizations that restrict services based on their religious beliefs. Increasingly, reproductive health care in America is being restricted to conform to narrow religious beliefs. Our new ethical guidelines, *In Good Conscience: Guidelines for the Ethical Provision of Health Care in a Pluralistic Society*, ensure that sectarian religious beliefs are not imposed on millions of America who may not share those beliefs.

The Religious Coalition for Reproductive Choice, representing mainstream denominations and faith traditions, is calling for all health care providers to implement these principles. “A growing number of doctors, nurses, and pharmacists, are refusing to provide, refer, or even tell their patients about care options that they feel are not in keeping with their own personal religious beliefs,” said Barbara Kavadias, Director of Field Services at the Religious Coalition, who led the three-year project to develop the guidelines. *In Good Conscience* is grounded in long standing religious and ethical traditions, and helps individuals, care providers, and institutions navigate the difficult and complex intersection between religion and medicine.” The new guidelines provide an alternative to sectarian restrictions imposed on health care, such as the Ethical and Religious Directives for Catholic Health Care of the U.S. Conference of Catholic Bishops, among others.

As an increasing number of health care institutions fall under the control of religious organizations that restrict services based on their religious beliefs, guidance is needed for providers and patients. For example, all Catholic hospitals, where 1 in 5 Americans receive their care, refuse to provide a range of reproductive and end-of-life service. The implications for patients are enormous: they are denied treatment or medication even when it is legal and they can pay for it. There are also implications for the doctors and nurses at such hospitals. “When the

religious directives of a sectarian hospital dictate the care that doctors can provide their patients, they tie the hands of doctors – we can no longer use our training and professional medical judgment to take the best care of our patients,” said Dr. Debra Stulberg, a family physician in Chicago, who was on an interfaith working group that drafted the guidelines. “When I was a resident, my hospital was acquired by a large sectarian hospital system. All doctors and nurses had to practice within the directives of the church, which meant we could not provide essential services such as routine birth control and voluntary sterilization. The guidelines also address service "refusals," which means that individual doctors, pharmacists, and nurses are also exercising a “religious or moral objection,” refusing to provide essential services and often leaving patients without other options. To learn more, please go to <http://www.rcrc.org/programs/ingoodconscience.cfm>