

# RELIGIOUS AMERICANS SPEAK OUT

Pro-Choice

## Barriers to Abortion Are Barriers to Justice for Women

Since 1973, the Religious Coalition for Reproductive Choice has supported a woman's right to choose abortion based on her own conscience and religious beliefs. We are religious Americans who have confidence in women to make moral decisions about when to have, and when not to have, children.

Representing a diversity of faiths, we recognize that there is no single religious position on abortion. We oppose laws and regulations that dictate any one position, forcing women to act according to others' religious beliefs, rather than follow their own religious and moral principles. In addition to outright bans on abortion, such laws include:

- Mandated parental involvement, which cannot ensure healthy family communication and can increase health risks for teenage women; and
- State-scripted lectures and enforced waiting periods, which disregard women's consciences and ignore the moral authority women exercise in deciding to seek abortions.

To reduce the need for abortion, the Religious Coalition calls for access to accurate information and full reproductive health care services for all families, regardless of age, race, nationality, marital status, or financial ability.

### Mandated Parental Involvement Is No Solution

Laws that require physicians to notify or gain consent of parents before performing an abortion on a minor serve no useful purpose. Instead, they harm teens who are already most at risk.

75 percent of minors under the age of 16 already involve one or both parents in their decision about abortion. Teens who cannot involve their parents often do so for compelling reasons—emotional or physical abuse, incest, feelings of shame and guilt for being raped. According to the American Academy of Pediatrics, one third of teenagers who do not tell their parents about a pregnancy have already been the victims of family violence—physical, emotional, and sexual abuse—and fear it will recur.

Young women subjected to abuse are particularly vulnerable when they are pregnant, a time when family

violence increases. Among minors who did not tell a parent of their abortions, 30 percent had experienced violence in their family or feared violence or being forced to leave home.

Rather than talk to their parents, teens may travel to another state, resort to unsafe, illegal abortions, try to perform the abortion themselves, harm or kill the baby after it is born, or commit suicide. The desire to maintain secrecy has been a leading cause of deaths from illegal abortion since 1973.

No law can create family harmony for these young women—nor deter them, if they feel desperate, from taking their abortions into their own hands and risking their health, their future child-bearing, even their lives.

Judicial bypass—often touted as the solution for such cases—is hardly a reasonable option for young women who (like most adults) have no experience with the legal system, or who live in small towns where it is impossible to ensure privacy. Even worse, the need to go to court creates further delay and increases health risks.

### Teens and Their Families Need Education and Affordable Services

A more hopeful direction for public discussion and policy is to correct the conditions that underlie the high rate of unintended teen pregnancy. What teens really need is:

- Accurate information about sexuality and reproduction, beginning at a young age;
- Skills to negotiate with prospective sexual partners about whether and when to have intercourse; and
- Affordable family planning services, whenever they are needed.

Currently, these requirements are rarely met in the U.S. In other developed countries, where such information and services are freely offered, the rates of teen pregnancy and abortion are significantly lower than in the U.S.

### State-Scripted Lectures Are an Insidious Intrusion into the Examining Room

Special laws requiring informed consent for abortion are unnecessary. Medical professionals who provide

abortion are already subject to laws, regulations, and ethical standards for safe practice. They are already obliged to explain the procedure, its risks, and its alternatives. When they encounter a woman who seems unsure of her decision or its implications or who is being coerced, they are obliged not to proceed.

So-called "informed consent" laws ignore these obligations and override the medical professional's own training and judgment. They require health professionals to do such things as:

- Show misleading pictures of advanced-stage fetuses;
- Describe risks associated with abortion at stages of pregnancy that may be well beyond the woman's stage, or risks that have not been proven—ignoring the far greater risks associated with childbirth; and
- Promote alternatives—such as prenatal care and child support—that may not be realistically available.

Proponents of such laws—who oppose abortion in general—hope that the woman who is given such "information" will reconsider her decision and change her mind. Their goal is not to better inform women but to intimidate and manipulate them into not having an abortion.

### **Waiting Periods Discriminate Against Young, Rural, Low-Income, and Working Women**

Some people claim that it is reasonable to ask women who seek abortion services to wait 24 to 48 hours to reconsider their decision. Such claims discount the soul-searching women have already gone through before seeking abortions and the ethical responsibility of physicians not to proceed with any procedure if the patient is unsure. Such claims also deny the reality of women's experience:

- Only 17% of U.S. counties have an abortion provider. Unless a woman lives in a large city, she must travel—sometimes hundreds of miles—for services that may be offered once a week or less often.
- Delays impose additional out-of-town expenses, child care costs, and loss of income—all of which can quickly place abortion out of reach.
- Most women have made up their minds by the time they arrive for medical care.

Waiting periods provide opportunities for invasions of family privacy and outright harassment. Opponents of legal abortion use waiting periods to trace women's identities, inform their parents, boyfriends, or

employers, and otherwise interfere with these women's actions.

### **We Continue to Call for Affordable Reproductive Health Care for All Americans**

Considering the unjust and inequitable conditions in which many women live—poverty, underemployment, abandonment by spouses or partners, physical and sexual abuse, exploitation, and discrimination—many women feel that abortion is not so much a choice as a necessity.

Rather than denying this reality, the religious community calls on all Americans to join us in creating a just and compassionate society in which women have real options and every child is truly welcomed. To do that, we need to create a society in which families can choose when to have children and a woman who becomes pregnant will know that:

- She is physically, emotionally, and economically able to welcome and nurture a child in whatever ways the child needs.
- Her community will help her ensure that she and this child will have adequate food and clothing and be safely housed, well educated, and free from violence.

As we strive toward these goals, we also trust women to make moral decisions, to do what is right for themselves and their families, based on their own religious or spiritual understandings, without government interference.

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The Religious Coalition for Reproductive Choice, founded in 1973, is the national organization of pro-choice people of faith. The Religious Coalition—comprising Protestant, Jewish, and other denominations and faith groups, the Clergy for Choice Network, and state affiliates throughout the country—works to ensure reproductive choice through the moral power of religious communities. All programs seek to give clear voice to the reproductive health issues of people of color, those living in poverty, and other underserved populations.

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