

RELIGIOUS AMERICANS SPEAK OUT

Pro-Choice

Conscience Violated

'Religious Exemptions' Deny Reproductive Health Care to Women

In the name of conscience, women are being denied basic reproductive health care services that are constitutionally guaranteed. So-called "conscience clauses" are being enacted into law that exempt health care institutions receiving public funds, managed care organizations, and health care insurers from providing or covering certain services, even if their patients or those they insure want these services. The right of patients to exercise their own conscience and moral convictions in decisions about abortion, sterilization, and even contraception is being eclipsed by institutions demanding that their "conscience" take precedence.

After years of anti-choice activism, "conscience clauses" today exempt huge numbers of health care organizations, insurance plans, and employers—in addition to individual health care providers—from liability for refusing to:

- provide abortion, sterilization, and family planning services (including contraception),
- provide referrals or even discuss these services with patients, and
- fund these health care services.

Opposing An Injustice

"Conscience clauses" became popular soon after the Supreme Court's 1973 Roe v. Wade decision, as religiously affiliated institutions and individual health care providers sought to opt out of providing newly legal abortion services. That same year, Congress passed the Church Amendment, named for Senator Frank Church, which allowed institutions and individuals with moral and/or religious objections to certain services to refuse to provide these services, even though they received public funds. By late 1978, most states had passed similar laws.

The newly founded Religious Coalition for Abortion Rights—now the Religious Coalition for Reproductive

Choice—quickly pointed out the injustice of religious exemptions for institutions that, although religiously affiliated, serve the general public. These institutions employ a diverse workforce, serve a diverse population, have a secular purpose, receive public funds, and are major service providers. The Religious Coalition insisted that institutions such as these be held to their responsibility to serve the public rather than restricting services to conform with their own religious beliefs. Continuously since 1973, the Religious Coalition has opposed religious exemptions for public institutions as a violation of both the separation of church and state and the right of individual conscience.

Expanding Exemptions

In the quarter-century since Roe v. Wade, reproductive health care services have been steadily diminished by federal and state restrictions, mergers and acquisitions involving Catholic hospitals, and the dominance of managed care and medical conglomerates. At the same time, religious exemptions are being introduced in new areas including insurance coverage for contraception and access to prescription medications.

Twenty states currently have contraceptive coverage laws that require employers to offer coverage. However, these are very weak requirements with numerous loopholes allowing employers, healthcare providers, insurance companies, and pharmacists to refuse to provide contraceptive services. At least six states have introduced legislation that would grant individual pharmacists the right to refuse to dispense medications that conflict with their beliefs, "Conscience clauses" also are being introduced in numerous Medicaid managed care plans administered by Catholic health systems. The plans are allowed to refuse to provide coverage for counseling or referrals for abortion, family planning, and other reproductive health services. They are even allowed to prohibit physicians from discussing such services with their patients.

Blurring Distinctions

In keeping with our constitutional right to practice our religious beliefs without government interference, individuals should have the right to opt out of performing health care services to which they are religiously or morally opposed—provided patients' rights to these services is not affected. Truly religious institutions—a church, a monastery, a seminary—should also be able to act in accordance with their belief systems. But the proliferation and expansion of “conscience clauses” is blurring the distinctions between religious and secular institutions.

Institutions operating with public funds and serving the public should not be allowed to impose beliefs about health care on entire communities and all of their patients. This is especially critical in communities where a religiously affiliated institution is the only or main service provider. Such is the case in geographically isolated areas where a growing number of Catholic hospitals have been federally designated as “sole providers,” even though Catholics constitute a minority of the population. Nevertheless, Catholic restrictions on reproductive health care apply to all patients, regardless of their beliefs.

What You Can Do

When hospitals, managed care plans, and insurers refuse to provide or cover reproductive health services, pro-choice people of faith must take action and make their voices heard.

- Request hospitals to post prominent signs identifying the services they exclude. Ask plans and insurers to identify excluded services in writing.
- Check whether your local pharmacies—chain and independent—fill prescriptions for emergency contraception. If not, complain to the American Pharmacists Association, the pharmacies' headquarters, state and federal officials, and medical groups. Suggest rules that require pharmacists to post a sign indicating which medications they do not dispense or to phone doctors and inform them of their refusal to fill certain prescriptions.
- Make alliances with other groups opposed to exemptions. Work with hospitals, plans, and

insurers on ways to provide services and reduce or eliminate exemptions for public institutions.

Sources

American Civil Liberties Union Reproductive Freedom Project: www.aclu.org/ReproductiveRights
Reproductive Health Technologies Project: phone 202-530-2900 www.rhtp.org

The Alan Guttmacher Institute State Policies in Brief—Insurance Coverage of Contraceptives and Refusing to Provide Health Services, April 1, 2004.

The Guttmacher Report on Public Policy, August and December 1998, June 1999, August 1999, December 2000, April 2001.

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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