Executive Summary

Catholics for Choice (CFC) is pleased to submit this paper to the UK All Party Parliamentary Group on Population, Development and Reproductive Health for your consideration on the occasion of your hearings on Maternal Morbidity. We hope our comments provide a progressive Catholic perspective that is often absent in discussions such as this.

Few areas have been more contentious or difficult than the question of reproductive health, which embodies differing, deeply embedded political and religious views of women’s rights, gender and sexuality. The impact of the lack or illegality of basic reproductive health services is well-documented, and leads to the death of some 500,000 women a year.

Our primary area of concern is how the institutional Catholic church, the hierarchy, responds to this crisis, and how its response impacts the work of governments around the world.

In illuminating our case, we outline examples of how the Catholic hierarchy seeks to both influence public policy and how others view Catholic social teachings.

In addition, we outline the core values we would like to see infused into public policy on issues related to reproductive health and rights, contraception, HIV/AIDS and safe abortion. Finally, we suggest some concrete steps policymakers can take to mitigate the negative impact of Vatican policies on reproductive health.

Yours sincerely,

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President
Submission to the
UK All Party Parliamentary Group on Population, Development and Reproductive Health
on behalf of Catholics for Choice
for the hearings on Maternal Morbidity.

Background
CFC shapes and advances sexual and reproductive ethics that are based on justice, reflect a commitment to women’s well-being and respect and affirm the capacity of women and men to make moral decisions about their lives. Through discourse, education and advocacy, CFC works with a global network of prochoice Catholics in Europe and the rest of the world, including sister organizations throughout Latin America.

CFC supports policy making and governing structures that make a clear separation between church and state. At the same time, we also recognize that religion can make a positive contribution to law and policy making, particularly in relation to social justice and the dignity of the human person. We strongly support the right of religious institutions to participate in the life of nations, to express their values, and even to attempt to influence public policy but do not feel that religious organizations should be granted special dispensation merely because they are religious.

Introduction
Over the past two decades, the United Nations has, through a series of international conferences and plans of action, addressed a number of serious problems facing the world and its people: human rights, the environment, population and development, social development, housing and women’s rights. Few areas have been more contentious or difficult than the question of reproductive health, which embodies differing, deeply embedded political and religious views of women’s rights, gender and sexuality.

At the UN International Conference on Population and Development, held in Cairo in 1994, a Programme of Action was adopted by the world’s governments. The next year, the Fourth World Conference on Women in Beijing continued this work. More recently, the Millennium Declaration in 2000 outlined a series of goals (the Millennium Development Goals or MDGs) to improve the lives of the world’s poor and marginalized. Goals 3-6 were the ones which are most relevant to our work:

Goal 3 Promote gender equality and empower women
Goal 4 Reduce child mortality
Goal 5 Improve maternal health
Goal 6 Combat HIV/AIDS, malaria & other diseases

We are not experts in service delivery or program evaluators. Rather, we review the Programme of Action and the MDGs from the perspective of values and principles enlightened by the Catholic social justice tradition. The agreements reached at the Cairo conference represented what has been called by many a “paradigm shift” in the world’s approach to development. In this shift, an emphasis on demographic targets gave way to an emphasis on human needs and the common good. In the new paradigm, we see hope, a reverence for life, health and well-being, and an impulse toward respect for human dignity, social justice and equality among all people. Especially evident in the Programme of Action is a new-found respect for the moral agency of women. This paradigm shift was continued in the MDGs.

Reality vs. Rhetoric
As articulated in the UN’s 1995 Beijing Platform for Action:
Reproductive health implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this...condition are the right[s] of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice.
However, approximately 500,000 women die each year from pregnancy-related causes, and many times that number suffer illnesses and injuries associated with pregnancy and childbirth. Ninety-nine percent of those deaths occur in developing countries. Whereas only 1 in 3,000 women in developed nations dies from maternal causes, 1 in 19 African women does.

Eighty thousand women die each year from abortion-related causes. Unintended pregnancies can lead to unsafe abortions, which can lead to severe health impairment and death. Women often are unable to negotiate sex and therefore are unable to insist on condoms for HIV prevention, effective contraception to prevent unwanted pregnancy, as well as abstinence. Young girls are forced to marry older men and experience early pregnancy. The lack of maternal and child care also contributes to health problems. It is estimated that almost 50 percent of those living with HIV and AIDS are now women. Lack of access to comprehensive sexuality education and information increases vulnerability to disease and unwanted pregnancy.

Our primary area of concern is in how the institutional Catholic church, the hierarchy, responds to these crises, and how its response impacts the work of governments around the world.

We know, for example, the bilateral treaty the Vatican negotiated with the government of Slovakia was an effort to merge Catholic teaching and public policy. The Vatican has also intervened in a number of European countries in recent months—in Poland and Spain, to support political candidates, and in the UK in response to the Human Fertilisation and Embryology bill. In these and other instances, the hierarchy has taken the problematic stance that its views reflect not only its own opinion, but also those of millions of ordinary Catholics who do not, in fact, agree.

While we could provide many detailed examples of Vatican interference, we have chosen to outline two that we feel reflect the reality of the Catholic hierarchy’s positions on these matters and the urgency for action to stem its influence in public policy decisions.

**Curtailing Support for the Millennium Development Goals, 2005**

In September 2005, Catholics for Choice initiated an interfaith religious statement supporting the Millennium Development Goals (MDGs) and calling for the inclusion of reproductive health.

The broad-based statement, “A Faith-filled Commitment to Development Includes a Commitment to Women’s Rights and Reproductive Health: Religious Reflections on the Millennium Development Goals,” was focused on the MDGs and poverty eradication. It was an initiative of the International Interfaith Network for Development and Reproductive Health, a project sponsored by Catholics for Choice.

However, high-ranking Vatican officials instructed Catholic bishops to ensure that “no ‘religious leader’ of the Catholic church and subject to our jurisdiction agree and sign” the statement.

A memo issued by Cardinal Angelo Sodano articulating the Vatican’s orders resulted in bishops’ conferences warning bishops throughout Latin America against signing the declaration. The Vatican’s order put forward oft-repeated misinformation regarding UN definitions of reproductive health, insisting that they include abortion, and mischaracterized the religious leaders’ declaration as a statement promoting abortion. The memo was leaked to the Latin American press and was widely seen as part of an ongoing effort by the Vatican to eliminate any references to reproductive health in UN documents.

In fact, the religious leaders’ statement broadly supported the overarching aim of the MDGs, which is poverty alleviation, and held that women’s equality and reproductive health are key elements of achieving those goals.
The statement urged, inter alia, government leaders and policy makers:

- To ensure that women and men have access to food, shelter, education and comprehensive health care;
- To promote gender equality and eliminate violence and discrimination against women;
- To provide prenatal care and access to adequate nutrition, medicines and education, and clean water for mothers and their children in order to reduce child mortality;
- To provide information and services to women in order to prevent unplanned pregnancies, which often lead women to abortion, and to address illegal and unsafe abortion as a public health concern;
- To ensure that sexual and reproductive health care and services include prevention of HIV/AIDS and other sexually transmitted infections; and
- To ensure livable wages for all and demand that wealthier countries cancel the debts of developing countries.

It is clear from the Vatican’s actions that an overemphasis on abortion has permeated Vatican relations with the UN and is an obstacle to the achievement of UN goals that are consistent with the values of most of the world’s faith traditions.

**US Government Funding to Mitigate the Impact of the HIV and AIDS Pandemics, 2008**

We have serious concerns about the Vatican’s continued and active lobbying around the world and at the United Nations to restrict people’s access to condoms, claiming that condoms cause AIDS, not prevent it. An excellent example of this took place in the US Congress earlier this year.

The Lantos/Hyde HIV/AIDS Global Leadership Act was gutted of several practical, life-saving programs as a result of lobbying by the US Conference of Catholic Bishops.

Despite increasing funding overall, the US Congress:

- decoupled vital family planning services that can prevent mother-to-child transmission of HIV;
- expanded the “conscience clause” that enables organizations receiving US funding to pick and choose the prevention and treatment services they wish to provide;
- retained the anti-prostitution pledge, further marginalizing an extremely at-risk group; and
- imposed a complex formula that calls for at least fifty percent of prevention funding to be spent on abstinence and faithfulness programs, rather than allowing experienced agencies to decide how best to spend the funds depending on local circumstances.

The US bishops, in partnership with Catholic Relief Services (CRS), lobbied hard for these damaging measures from a self-serving perspective that few Catholics share, let alone those of other and no religious preference. Catholics in the United States and elsewhere support aid for international family planning and reject abstinence-only programs. Studies show that properly directed funding for international family planning programs saves women’s lives and the lives of their children when those women have HIV/AIDS. Many studies, including some sponsored by the US Congress, show that abstinence-only programs do not work. The bishops ignored this evidence to ensure that their own narrow, out-of-the-mainstream beliefs held sway.

These examples are not isolated. It is interesting to note that as reproductive rights become more accepted throughout the world, and significant moves have been made to legalize abortion in regions (such as Latin America) that the Catholic hierarchy once considered to be its own backyard, the bishops are speaking out more and more vehemently. The recent outbreak of Catholic bishops attacking pro-choice Catholic politicians is a real sign that the Vatican may recognize that it is fighting a losing battle. After decades of the hierarchy’s being able to rely on Catholic politicians to bend the knee when bishops told them how to vote, times are changing. After a bishop in Mexico City threatened to excommunicate politicians who voted in favor of relaxing the city’s abortion laws, the pope himself endorsed that pronouncement at a press conference en route to Brazil. The pope’s spokesman was forced to backtrack not once but twice before Pope Benedict’s remarks on the matter were miraculously expunged from the record entirely. There are real signs of panic emanating from the Vatican, which might just, and none too soon, be losing the public war with politicians.
Moving Forward
These are the core values we would like to see infused into public policy.

Reproductive Health and Rights
Reproduction is one of the most important and profound aspects of human life and relationships. Through reproduction, we express our hope in the future of humanity. Reproduction is both private and public. It has undeniable consequences for the community and society at large. It is also a matter of public health, religious teachings and government policy. It is an area in which women are the central protagonists, for it is women who bear the risks and consequences of childbearing and the greater responsibility for childcare. In the just world we work toward, these risks and responsibilities will be equally shared by men and better supported by society.

An ethically based approach to reproductive health and rights has several underlying principles. First, it must be voluntary rather than coercive. The imposition of external limits on family size is unacceptable. Couples must have the right to decide when, whether and how to bring new life into the world. Second, it must be comprehensive rather than focused on family planning alone. Women’s reproductive health cannot be extricated from their health, and programs must provide a wide range of services. Third, it must be seen as an integral aspect of human rights. Reproductive rights are grounded in previously recognized human rights. This right was first recognized in 1968 at the International Conference on Human Rights in Teheran, Iran. Fourth, it must be tied irrevocably to respect for the rights of conscience and free will. Couples consider a range of concerns in making the decision whether to have a child. The community, family, religious teachings and social conventions will play a role in reproductive decisions, but in each decision, the individual conscience has the ultimate say.

Contraception
Catholics around the world believe that contraception is a moral option. Bringing children into the world is a major responsibility. Safe and effective contraception not only makes responsible procreation more possible, it also allows for a satisfying, pleasurable sexual life with diminished fear of unintended pregnancy. Furthermore, the control over fertility that contraception offers has allowed women to develop aspects of their lives beyond motherhood and prevents the need for abortion.

The Vatican supports, in fact encourages, the practice of family planning, for it recognizes the moral imperative of responsible parenthood. However, only “natural family planning,” a set of methods that involve periodic abstinence, is allowed. Making only one method available—and one that does nothing to protect against sexually transmitted diseases—cruelly ignores the reality of people’s lives. Women and men must freely decide not only whether they wish to use contraception, but which method is best for them.

Couples worldwide have indicated that they need and want to use contraception. We endorse a commitment to voluntary family planning programs that include a full range of safe, effective and affordable contraceptive choices.

HIV/AIDS
Society’s and individuals’ responses to AIDS must be rooted in compassion, responsibility and a commitment to life. These principles require that efforts to prevent the spread of HIV must include condoms and condom instruction. Couples should be encouraged to use them to prevent transmission of HIV. We reject the Vatican’s opposition to condom use, and we stand with a science- and compassion-based approach to treating and preventing this tragic disease.

Safe Abortion
Abortion is a complex moral and social issue. The Vatican’s opposition to abortion is compromised by its unwillingness to accept contraceptive services and devices even though they reduce the need for abortion. Even taking into account Vatican opposition to abortion, we remain puzzled by Vatican objections to abortion being safe where legal. This dismissal of safe abortion by the church hierarchy is insensitive to the realities women face and to the number of women who die from unsafe abortions every day. Because women everywhere resort to abortion, the alternative to safe abortion is, of course, unsafe abortion.
The hierarchy’s preoccupation with eliminating abortion from the world prevents the real issues of justice and health for women being addressed. Such an absolutist position fails to acknowledge the ambiguity and doubt regarding fetal life and ignores the range of moral complexities surrounding each situation.

In countries where abortion is illegal, it is the poor who are left to face abortions under the worst types of conditions. And in countries where abortion is legal, but safe abortions are costly, it is again poor women who shoulder the burden. Having failed to convince Catholics to adhere to its narrow dictates on sexual and reproductive health, the hierarchy has invested an inordinate amount of time and energy in lobbying governments throughout the world.

In conclusion, we would like others to join us in bringing pressure to bear on the church hierarchy to:

- Work with women’s organizations to incorporate into its life-education programs instruction not only about responsible parenthood, but also on the goodness of sexual pleasure and importance of informed choice;
- Educate Catholics about the church’s teachings on primacy of conscience, so they can understand how these apply to women and men faced with personal decisions regarding their reproductive health and lives;
- Introduce comprehensive health care and education programs into the teachings, prevention programs and care and treatment of patients in Catholic health-care facilities so that the people they serve can make informed choices about their health and lives; and
- Recognize and address the health impact of unsafe abortion as a major public health issue.