

ISSUE BRIEF #1, JUNE 2014

Religious restrictions and reproductive health

Over the past decade, Catholic hospitals have merged with and purchased nonsectarian hospitals around the United States, becoming leading players in the nation's health care industry. Catholic hospitals receive billions of taxpayer dollars each year and have a combined gross patient revenue of \$213.7 billion.¹ The standards of medical care put forth in the Ethical and Religious Directives for Catholic Health Care Services differ from those generally recognized in other medical settings, particularly regarding reproductive health care. These variances do not only restrict choices about abortion and contraception, but reduce access to evidence-based reproductive health services as a whole.²

Here are six commonly held misconceptions about the breadth and depth of Catholic hospital care in the United States. Below we dispel these myths:

Myth #1: Catholic health care is provided by and for Catholic people.

Fact: Catholic health care employees are religiously diverse.

- Health care employees in Catholic hospitals share similar religious and demographic characteristics with employees at non-Catholic facilities.
- 52% of obstetricians and gynecologists working in Catholic facilities report conflict with religiously based policies about care.³

Fact: Catholic health care patients are diverse.⁴

Myth #2: Catholic health care doesn't affect many people.

Fact: Catholic hospitals serve a large and increasing number of Americans.

- 1 in 6 patients in the United States receive care in a Catholic institution.⁵
- 10 of the 25 largest hospital systems in the United States are Catholic.
- From 2001 to 2011, Catholic hospitals increased in number by 16%, while other non-profit and public hospitals declined in number.⁶

Myth #3: Catholic patients want care that adheres to Catholic doctrine.

Fact: Catholic patients utilize contraception and abortion at equal and higher rates than the general population.

- Only 14% of U.S. Catholics agree with the Vatican's position that abortion should be illegal in all cases.⁷
- 98% of Catholics use contraception.⁸

Myth #4: The charity care provided by Catholic hospitals justifies a few omissions.

Fact: Catholic hospitals provide charity care at a rate below the average for all hospitals.

- Catholic hospital charity care accounts for 2.8% of total patient revenue.
- For-profit hospitals provide charity care at 2% and public hospitals at 5.6%.⁹

Myth #5: Catholic doctrine only affects a few aspects of reproductive health care.

Fact: In addition to contraception and abortion, the following procedures are restricted by Catholic doctrine:

- Postpartum and direct sterilization
- Elimination of an ectopic pregnancy
- Medical assistance with a miscarriage or other perinatal loss
- Screening for fatal fetal anomalies
- Artificial reproductive technologies involving donor gametes¹⁰

Myth #6: Patients can choose to go to non-Catholic facilities for care.

Fact: Patients and physicians who work at Catholic hospitals are often unaware of the scope of restrictions.¹¹

Fact: Catholic hospitals are often a community's only choice for health care.

- 30 Catholic hospitals are sole-provider hospitals, meaning they are located more than 35 miles from a similar hospital or provider.
- These hospitals receive more money from the federal government for being sole providers in a region.¹²

References

- ¹ *Miscarriage of Medicine*. 2013. ACLU and MergerWatch, www.aclu.org/files/assets/growth-of-catholic-hospitals-2013.pdf.
- ² *The Ethical and Religious Directives for Catholic Health Care Services*. 2009. USCCB. www.ncbcenter.org/document.doc?id=147.
- ³ Stulberg 2012a; Yoon et al. 2010.
- ⁴ USCCB 2009.
- ⁵ "Catholic Provided by Catholic Hospitals: Fast Facts." 2012. Edited by the Catholic Health Association. www.chausa.org/pages/newsroom/fast_facts.
- ⁶ ACLU and MergerWatch 2013.
- ⁷ BRS 2009.
- ⁸ Jones 2011.
- ⁹ ACLU and MergerWatch 2013.
- ¹⁰ *Ibid.*
- ¹¹ Freedman, Lori R. and Debra B. Stulberg. 2013. "Conflicts in Care for Obstetric Complications in Hospitals." *AJOB Primary Research* 4(4):1-10.
- ¹² ACLU and MergerWatch 2013.

For more information and resources on religious restrictions and reproductive health, please visit www.ansirh.org/research/refusals