



## DENIAL OF CARE AT CATHOLIC HOSPITALS

*Catholic hospitals are a large part of the U.S. healthcare system, but they limit reproductive health and end-of-life care well beyond what many patients and providers may expect. This reality raises important issues regarding health discrimination and patient access to services.*

### Catholic hospitals are large and growing.

- Catholic health facilities are the **largest group of nonprofit healthcare providers in the nation**, where one in six patients in the United States is cared for in a Catholic hospital.<sup>1</sup>
- Between 2001 and 2016, the **number of Catholic hospitals increased by 22%**, while public and secular nonprofit hospitals decreased.

### As a rule, Catholic hospitals deny critical health services.

- Catholic hospitals, clinics, and offices **do not allow contraception**. Instead, they provide “instruction...in methods of natural family planning.”<sup>2</sup> This results in care that goes against best practices on birth control.<sup>3</sup>
- Catholic hospitals **prohibit postpartum tubal ligation** (female sterilization at time of delivery), even if a woman’s doctor advises it for her health.<sup>4</sup>
- Catholic institutions **do not permit abortion, even for patients with life-threatening complications**. Patients are expected to carry to term, despite risks to the mother and in cases of fatal fetal anomalies.
- Catholic hospitals **are known to deny transgender patients a hysterectomy procedure** if the reason is gender-confirmation. Catholic bishops have publicly spoken out against gender dysphoria as a legitimate diagnosis.
- Catholic doctrine **can also restrict end-of-life care**. A Catholic hospital “will not honor an advance directive that is contrary to Catholic teaching.”<sup>2</sup> This may mean that patients are forced to accept feeding tubes against their will. Legal physician aid to ease the process of dying would be withheld.

## Patients are often unaware of restrictions or unable to switch to another hospital.

- Catholic hospital patients are religiously diverse, and **most are unaware of the restrictions Catholic hospitals place on care**. Many hospitals have rebranded with non-religious names, making it difficult for patients to know that a hospital is Catholic and could deny services. In fact, 37% of women surveyed whose hospital is Catholic did not know that it was.<sup>5</sup>
- When surveyed about what services they would expect at a hospital named St. John's, which women later learned was Catholic, **77 percent of women expected to receive birth control pills, 70 percent expected tubal ligation (sterilization), and 42 percent expected abortion provision for a serious fetal anomaly - all of which are prohibited at the hospital.**<sup>6</sup>
- Catholic hospitals are **sometimes the only healthcare option for miles around** and may not disclose which services they prohibit.

## Catholic hospitals block doctors from providing standard care.

- Doctors working in U.S. Catholic hospitals have described harrowing situations – where **policies stop them from treating pregnant women with life-threatening complications** or forbid treatments that are safe, effective, and follow the standard of care used in secular hospitals.
- In fact, **the majority of obstetrician-gynecologists working in Catholic hospitals have had at least one conflict with their hospital** over religious restrictions on patient care.<sup>7</sup>

## Patients must be protected.

*With the spread of Catholic hospitals, limits are becoming more serious for patients and providers and the potential for discriminatory health practices has increased. As Catholic hospitals continue to market themselves to new patients, safeguards must be implemented to protect patients from being deceived and denied the appropriate standard of care.*

### References:

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3. Marston C, Church K. Does the evidence support global promotion of the calendar-based Standard Days Method® of contraception? June 2016. *Contraception*, 93(6):492-497.
4. Chan LM, Westhoff CL. Tubal sterilization trends in the United States. June 2010. *Fertility and Sterility*, 94(1):1-6.
5. Wascher, JM., Hebert LE, Freedman LR, Stulberg DB. Do women know whether their hospital is Catholic? Results from a National Survey. May 2018. *Contraception*, 98(6):498-503.
6. Stulberg et al. Women's Anticipation of Reproductive Health Care at Catholic and Non-Catholic Hospitals. September 2019. *Perspectives on Sexual and Reproductive Health*, 51(3):TK, doi:10.1363/psrh.12118
7. Stulberg DB, Dude AM, Dahlquist I, Curlin FA. Obstetrician-gynecologists, religious institutions, and conflicts regarding patient-care policies. July 2012. *American Journal of Obstet Gynecology*, 207:73.e1-5.

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