

WisconsinWatch – CHA STATEMENT – Nov 26, 2019

Please attribute to:

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Catholic health care believes that health care is a human right and that everyone, regardless of religious belief, race, or any other category, should have access to the health care they need. There is no one who is not welcome in our hospitals and every individual seeking care should always be treated with kindness and respect.

Catholic hospitals and health care facilities across the U.S. offer a wide range of life-saving procedures and are accredited and held to the same standards as non-Catholic hospitals. Catholic hospitals consistently rank among the highest performing hospitals in the U.S. according to data collected by the Centers for Medicare and Medicaid and have the highest percentage of “likely to recommend” scores from patients completing the federal HCAHPS survey that assess patient satisfaction.

In the area of maternal-fetal health, Catholic hospitals across the country provide safe and effective prenatal, obstetric and postnatal services for women and their babies, with more than 528,000 babies born in our hospitals last year alone. Many Catholic facilities are designated as high-risk maternity centers to treat the most challenging pregnancies and moms at the highest risk. Catholic health care is also actively engaged with initiatives around the country to reduce race-based disparity in maternal deaths and is a strong advocate for equity of care within the U.S. health care system.

Within this context, we feel it’s important to address certain misconceptions about Catholic health care.

For example, Catholic hospitals provide a wide range of services to assist women who are unable to conceive a child. These include prescriptions, hormone therapy, and natural family planning to foster conception. In addition, physicians working in Catholic facilities can and do prescribe contraceptives to treat a variety of underlying medical conditions. Catholic hospitals also provide emergency contraception to victims of rape or sexual assault. In many Catholic emergency departments across the U.S., there are nurses who receive special training to take immediate steps and follow accepted protocols in treating these victims. The training also ensures that victims receive the appropriate psychological support to promote healing.

Catholic health care respects the expertise and high standards of care of our medical providers and we respect the sanctity of the clinician-patient relationship. The relationship between caregiver and patient is based on mutual trust, honesty and appropriate confidentiality. This allows for a free and transparent flow of information between the patient and physician/clinical team that results in a diagnosis and treatment plan best suited to the particular needs, circumstances, and preferences of the patient. Nearly all medical procedures require professional judgment that involves morality and ethics. Our providers are trained to respond to routine issues. In more complex cases, clinicians and other hospital staff may consult the ethics professionals in their organizations to help apply our ethical principles in ways that best serve the needs of patients and families. The health and well-being of our patients is always our top

priority.

There are certain procedures that Catholic health care will not perform in accordance with our belief in human dignity and the sacredness of human life as set forth in a set of principles known as the Ethical and Religious Directives (ERDs), which help Catholic health care to reconcile ever advancing medical care and technology with long standing beliefs rooted in faith. Catholic hospitals do not perform elective abortions. In fact, the vast majority of hospitals in the U.S. do not provide elective abortions as 95% are performed in clinics. In tragic situations where the mother suffers from an urgent, life-threatening condition, Catholic hospitals provide all medically-indicated treatment, even if it poses a threat to the child or may result in the unintended death of the child. Catholic hospitals also do not provide elective procedures where the sole intention is to cause the sterilization of the patient.

We in Catholic health care define ourselves by what we do rather than what we don't do. For hundreds of years, we have provided health care to people of all ages, races, ethnic groups, genders, faith traditions and no faith traditions for the sole reason of serving the needs of everyone, with particular attention to the poor and vulnerable. The ERDs likewise call us to distinguish ourselves through service to and advocacy for those who are economically challenged and socially marginalized.

This long tradition of focusing on care for the vulnerable and underserved, whether in cities or remote rural areas, continues as other providers have left these communities while Catholic health care has chosen to stay. Without that commitment, people in these areas would have no access to vital medical services for illness, injury, preventive and long-term health.