



Office of the General Secretary

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February 23, 2005

Dear Senator:

A legislative advance of great interest to our three organizations was the enactment in December of the Hyde/Weldon Conscience Protection Amendment, approved as part of the Consolidated Appropriations Act, 2005 (Sec. 508(d) of Division F, Pub. L. 108-447). However, this important safeguard for rights of conscience is expected to be under renewed attack in the weeks to come.

Senator Boxer intends to offer a motion to rescind this important law before the end of April. We urge the Senate to defeat that motion.

The Hyde/Weldon Conscience Protection Amendment protects the rights of health care providers, both individual and institutional, from governmental discrimination because they decline to provide, pay for, provide coverage of, or refer for abortions. This matter of conscience rights should be an area of common ground among Senators who disagree on the issue of abortion itself. Surely, if "pro-choice" has any meaning, it encompasses protection for a choice *not* to be involved in abortion against one's will.

The appropriateness of laws protecting conscientious objection to abortion was acknowledged in the Supreme Court's *Doe v. Bolton* decision, the companion case to *Roe v. Wade* (*Doe v. Bolton*, 410 U.S. 179, 197-198 (1973)). This right of conscience is recognized by the laws of forty-seven states, and in many federal laws as well.

In particular, since 1996 a federal law has protected "health care entities," including individual physicians and medical residents as well as residency programs, from discrimination at the hands of federal, state or local government when they decline to provide or refer for abortions or abortion training (42 U.S.C. §238n). Some have suggested, however, that this law covers *only* the entities it explicitly mentions, and only in the context of the training program -- that is, the law protects a residency program, but not the hospital or health care system managing the program; it covers physicians but not nurses.

The consequences of such a reading are absurd. Does a physician have conscience protection on one day when she teaches residents, but not the next day when she is on hospital rounds? Should the government respect the right of physicians not to perform abortions, but force nurses to assist in them? Can it say that a physician need not be trained in how to do abortions, but must nonetheless perform them untrained?

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These supposed loopholes in current law have underscored the need for a more inclusive national policy protecting all health care providers who choose not to participate in abortions. Closing these irrational loopholes is what the Hyde/Weldon amendment does – and despite exaggerated charges by opponents, that is *all* it does.

Current law, of course, already allows individual and institutional health care providers to freely choose to provide abortions, and the Hyde/Weldon Conscience Protection Amendment does not alter this reality. All the amendment does is help “level the playing field” for those who decline to provide abortions.

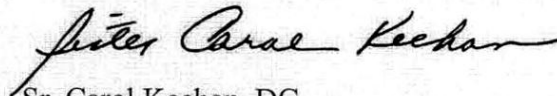
For our part, we hold that the protection of human life at all stages, not its destruction, is at the core of the healing ethic of medicine. Others hold that abortion is a decision appropriately made “between a woman and her doctor.” But they must realize that this phrase makes no sense unless both the woman and the doctor have the option of saying “no.”

If you hold a pro-life position, this will be an easy vote. If you see yourself as “pro-choice,” this is an opportunity to affirm that your commitment to “choice” includes respect for everyone’s choices on abortion. We hope for an overwhelming Senate vote against rescinding the Hyde/Weldon Conscience Protection Amendment.

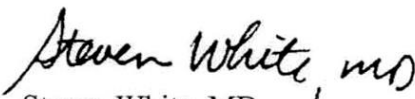
Sincerely,



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General Secretary
United States Conference of Catholic Bishops



Sr. Carol Keehan, DC
Chairperson of the Board of Trustees
Catholic Health Association of the United States



Steven White, MD
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