

## Presbyterian Church (U.S.A.) General Assembly Resolution on Reproductive Health

### On Providing Just Access to Reproductive Health Care (Item 21-03)

The 220th General Assembly (2012) approved the following resolution, as amended, with comment and original rationale (not policy) after the adopted policy in bold:

**Recognizing that women and men deserve full access to health care as a basic human right, whether or not medical insurance is available, the 220th General Assembly (2012) of the Presbyterian Church (U.S.A.) seeks to protect all women's and men's access to comprehensive health care, including access to health services that enable responsible family planning and honor the exercise of individual conscience and the gift of human life, by**

**1. encouraging the church, its members and councils, and directing the Office of Public Witness to support full access to reproductive health care for both women and men in both private and public health plans and directing the Presbyterian Ministry at the United Nations to support similar access through international aid organizations and programs;**

**2. protecting the integrity of individual conscience by affirming the ability of women and men to make good moral decisions in matters of reproductive health, including decisions about infertility, parenthood, and responses to problem pregnancies, in consultation with their families, pastors, health-care professionals, and scientifically accurate medical information;**

**3. affirming the position of the 204th General Assembly (1992) Majority Report "Response to the Report of The Special Committee on Problem Pregnancies and Abortion," Item 3, pages 14–15, Items a. through h.:**

- (a) **The state has a limited legitimate interest in regulating abortions and in restricting abortions and in restricting abortions in certain circumstances.**
- (b) **Within this context of the state's limited legitimate interest, no law should impose criminal penalties against any woman who chooses or physician who performs a medically safe abortion.**
- (c) **Within this same context of the state's limited legitimate interest, no law should deny access to safe and affordable services for the persons seeking to terminate a problem pregnancy.**
- (d) **No law or administrative decision should provide for a complete ban on abortion.**
- (e) **No law or administrative decision should**
  - (i) **limit access to abortions;**
  - (ii) **limit information and counseling concerning abortions; or**
  - (iii) **limit or prohibit public funding for necessary abortions for the socially and economically disadvantaged.**
- (f) **No law should prohibit access to, nor the practice of contraceptive measures.**
- (g) **No law should sanction any action intended to harm or harass those persons contemplating or deciding to have an abortion.**
- (h) **No law should condone mandatory or forced abortion or sterilization. Such laws should be abolished where they do exist.**

**And further affirming that no state or federal law should be enacted to defund or criminalize family planning for the purpose of denying or delaying access to family planning services;**

## Presbyterian Church (U.S.A.) General Assembly Resolution on Reproductive Health

**4. supporting effective and full public disclosure of information regarding reproductive health care and opposing public funding of any organizations shown to provide misinformation concerning reproductive health issues;**

**5. encouraging the church, its members and councils, and directing the Office of Public Witness to advocate for more generous paid family and medical leave policies and corresponding policies that provide quality childcare and preschool programs in order to strengthen the family life of working parents and promote the development of children.**

**6. encouraging the church, its members and councils, and directing the Office of Public Witness to identify and support programs that research shows to be effective in reducing unintended pregnancies and teenage pregnancy, thereby reducing the number of abortions in the U.S.**

**Comment:** The 220th General Assembly (2012) expresses its appreciation to the Presbytery of Albany for raising this matter in such a thorough and compassionate manner.

### Rationale

Women's access to health care, generally, and to reproductive health care in particular, is one of the bases of women's equality, especially as women have entered the workforce. Since the 1970s, equal and adequate access to reproductive health care has been repeatedly supported by Presbyterian General Assemblies as essential to the exercise of our God-given responsibilities for family life. The church has encouraged marriage and parenthood as part of God's covenant of life and family planning as integral to family wellbeing. It has understood that couples are better prepared and more likely to choose parenthood when there are adequate medical and economic bases for family life.

The PC(USA) has consistently sought the reduction of unplanned pregnancies and unmarried and often underage pregnancies because they too often result in abortion or child poverty, undermine women's life opportunities and create additional family stress. The fact that the U.S. has the highest rates of abortion and child poverty of all modern nations is connected to the fact that almost half of the pregnancies in the U.S. are unintended and over 40 percent of them end in abortion.

However, the challenge of unplanned pregnancies and the difficult circumstances that may lead to consideration of ending a pregnancy are not experienced in the same way by all women. The rate of unintended pregnancies has plummeted for higher income women who are college educated and married: from 34 per 1,000 women in 1994 to 24 per 1,000 women in 2006. However, the rate of unintended pregnancies has sky rocketed for poor and low-income women: from 88 per 1,000 women in 1994 to 132 per 1,000 women in 2006. Among the factors accounting for this tragic escalation is poor women's unequal access to health care.<sup>1</sup>

In recent years, increased legislative action at both the federal and state levels has restricted women's access, especially that of poor women, to comprehensive reproductive health care. Most of this legislation intends to limit women's access to abortion. However, since almost all abortion providers also

## Presbyterian Church (U.S.A.) General Assembly Resolution on Reproductive Health

provide family planning and contraception education, the result is an attack on women's and men's access to a full range of reproductive health care. Such recent legislation includes:<sup>2</sup>

- Laws dictating women's medical treatment in order to alter her decision to terminate her pregnancy or to delay its implementation, such as lengthening mandated waiting periods, requiring expanded medical counseling, and requiring a woman to undergo ultrasound;
- Laws treating health-care clinics that also provide abortions as surgery centers, requiring expensive reconstruction and surgical equipment;
- Laws denying coverage of abortion services in either private or public insurance plans, including through the state health exchanges anticipated under the 2010 Affordable Care Act, unless the woman's life is at stake;
- Laws to exclude emergency contraception from Medicaid coverage;
- Laws permitting pharmacies to refuse emergency contraception to women; and
- Laws to restrict state and federal monies from funding reproductive health providers if they also provide separately funded abortion services.<sup>3</sup>

At the national level, legislation was introduced to simply end Title X funding—the federal program that serves more than five million low-income women and men with annual exams, cancer screenings, and contraception. This was followed by the attempt to specifically defund Planned Parenthood, half of whose patients are Medicaid patients receiving annual physicals, mammograms, pap tests, family planning information and contraception, and cancer screenings.

The PC(USA) has wisely recognized that people of good faith can differ in their interpretation of Scripture, their understanding of when human life begins, and their decision about the morality of abortion. It has called upon Presbyterians to seek to decrease the number of unplanned pregnancies and, thus, to decrease the number of abortions through effective access to contraception for women and men and through medically accurate sex education that includes education about contraception. And it has opposed efforts to criminalize those seeking or providing abortions. Understanding the tragic dimensions that can accompany our reproductive lives, the church has stood for the freedom of adults to choose among hard choices with the best possible information and support. To restrict access to reproductive health care for individuals and families, especially to target the most vulnerable women and families, is an unjust exercise of governmental coercion. Such actions unjustly expose poor women and men and their families to a greater likelihood of unplanned pregnancies, serious illness detected too late, increased suffering, and earlier loss of life.

### Endnotes

1. <http://www.gutmacher.org/media/nr/2011/08/24/>
2. <http://www.ncbi.nlm.nih.gov/pubmed/20851226>
3. <http://www.gutmacher.org/media/inthenews/2011/04/12/index.html>