

Is there a place for 'Conscientious Objection' in Reproductive Health?

Christian Fiala, MD, PhD

www.conscientious-objection.info

Museum of Contraception and Abortion

www.muvs.org

Karolinska Institutet
Department of Women's and Children's Health
Stockholm, Sweden

Gynmed Clinic
Vienna, Austria
www.gynmed.at

Personal implications

- I am a Conscientious Objector > certified by a commission of the Austrian military and was granted to do civil service due to my personal beliefs
- I step in to overcome the problems caused by 'CO' in abortion care and provide abortions on weekends in Salzburg because all OB/Gyn in the county refuse (except 1)

'CO' in Reproductive Health, C. Fiala

Abortion and society

- Definition
- Impact of 'CO'
- The solution

'CO' in Reproductive Health, C. Fiala

'Conscientious Objection' or Conscious Oppression



Refusal to offer a legal medical service or treatment by a Health Care Professional, institution, region or whole country. The HCP is in a position of power, protected by law and paid to perform the service which he/she is qualified to perform.

'CO' in Reproductive Health, C. Fiala

Terminology

CO is a misleading and inappropriate term:

- CO in it's original application is refusal of dependent soldiers to obey orders to kill
- CO in RH is refusing from a position of power to perform a beneficial or even life saving service which the patient requests
- May be claimed by clinicians who do not have moral or religious objections (Harris 2016)
- There is no consensus about criteria for refuser status and no standardized definition of the practice (Chavkin 2013)

„Anarchy is the condition of a society, entity, group of people, or a single person that rejects hierarchy.“

Wikipedia

'CO' in Reproductive Health, C. Fiala

Fundamental misunderstanding

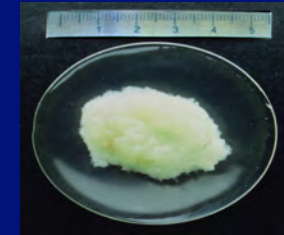
Killing a living person

≠

Stopping the development of a gestational sac or fetus and saving the health and life of the woman



≠



Gestational sac at 6 weeks gestation

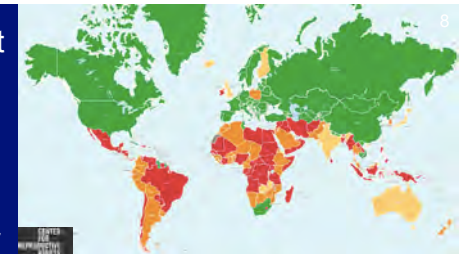
'CO' in Reproductive Health, C. Fiala

Fundamental misunderstanding

Soldiers are drafted into service	Health care professionals (HCP) apply for their position voluntarily, competing for jobs
Soldiers are powerless	HCPs are in a position of authority and trust.
Soldiers' duty is to obey military orders	HCPs' duty is to serve the interests of patients, who are dependent on their services
Soldiers conquer (and kill) for financial or other political benefits	HCPs improve health and save lives of patients

'CO' in Reproductive Health, C. Fiala

Abortion was legalized to prevent the terrible consequences of illegal abortion. However, the application of the law is frequently prevented because of



'Conscientious Objection'

that is health care professionals refuse to apply a democratically decided law, which preserves women's health and prevents maternal mortality.

'CO' in Reproductive Health, C. Fiala

The problem with CO

- ‘CO’ is faith based and in contradiction to rational thinking, human rights and evidence based medicine. Therefore these arguments can not be brought forward to limit ‘CO’.
- Consequently it is impossible to regulate ‘CO’ so that it would not harm women. Not a single country that has achieved this.
- CO is the only legal way to refuse to provide abortions that are permitted by law (Harris et al. 2016)
- CO is used an excuse for refusing legal medical service, which individual health care professionals do not agree with.

Abortion and society

- Definition
- Impact of ‘CO’
- The solution

Consequences of CO in abortion, Europe

CO has resulted in limited access to abortion in several European countries, and can prevent women from accessing the services sought: it comes down to a refusal to treat.

Conscientious objection and induced abortion in Europe, Heino et al. 2013

CONSCIENTIOUS-OBJECTION.INFO

Origin and meaning of "conscientious objection"
 Current policies and laws
 Abuse
 Impact

Victims of CO

Victims of CO – Introduction
 Andrea (2017) – Costa Rica
 Valentina Milluzzo (2016) – Italy
 Ana (2014) – Spain
 Immigrant rape victim (2014) – Ireland
 Savita (2012) – Ireland
 Paula (2012) – Spain
 Nicola (2012) – Spain
 Aurora (2012) Costa Rica
 Kathleen (2011) – USA
 Pordenone victim (2010) – Italy
 Tamesha (2010) – USA
 Valentina Magnanti (2010) – Italy
 Mindy (2009) – USA
 Laura (2008) – Italy
 Ana (2007) – Costa Rica
 Irena (2007) – Spain
 L.C. (2007) – Peru
 X (2007) – Colombia
 LMR (2006) – Argentina
 Ms B † (2004) – New Zealand
 Edyta (2004) – Poland
 Severina (2004) – Brazil
 Rosa (2003) – Nicaragua
 R.R. (2003) – Poland
 K.L. (2001) – Peru
 Alicja (2000) – Poland
 Paulina (2000) – Mexico

Victims of ‘Conscientious Objection

[read more](#)

Andrea (2017) – Costa Rica

[read more](#)

Valentina Milluzzo † (2016) – Italy

[read more](#)

Ana (2014) – Spain

[read more](#)

Immigrant rape victim (2014) – Ireland

[read more](#)

Savita † (2012) – Ireland

[read more](#)

Paula (2012) – Spain

[read more](#)

Nicola (2012) – Spain

[read more](#)

Aurora (2012) Costa Rica

[read more](#)

Kathleen (2011) – USA

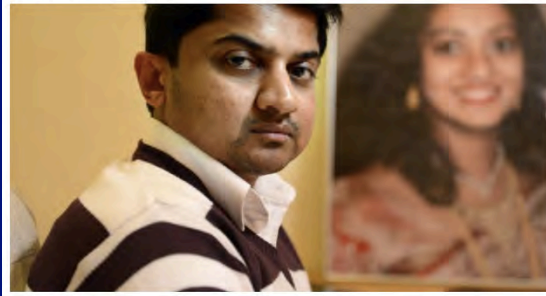
[read more](#)

Pordenone victim (2010) – Italy

Women dying in Europe because of 'CO': Ireland

Savita Halappanavar died in an Irish hospital 28 October 2012 due to an untreated septicemia — she had an open cervix because of a threatened abortion at 17 weeks and was refused an abortion

Savita Halappanavar death report finds foetus, not mother, was main focus
Galway hospital staff underemphasised miscarrying woman's worsening health, HSE draft report finds



Praveen Halappanavar: "you lose your rights basically when you are pregnant"

'CO' in Reproductive Health, C. Fiala

Women dying in Europe because of 'CO': Italy

Valentina Milluzzo died in an Italian hospital 16 October 2016 due to an untreated septicemia — she had an open cervix because of a threatened abortion at 15 weeks and was refused an abortion



'CO' in Reproductive Health, C. Fiala

CO is a risk for women: Italy

70.5% of Italian doctors invoke OC for their refusal to perform abortions

Tabella 28 - Obiezione per categoria professionale nel servizio in cui si effettua l'IVG, 2006

REGIONE	GINECOLOGI		ANESTESISTI		PERS. NONMEDICO	
	N	%	N	%	N	%
ITALIA SETTENTRIONALE	1665	65.2	1441	41.8	2838	26.2
Piemonte	285	62.9	227	41.8	341	23.3
Valle d'Aosta	2	16.7	8	44.4	0	0.0
Lombardia	578	65.6	523	46.4	831	31.2
Bolzano	20	74.1	26	43.3	163	68.8
Trento	16	64.0	20	37.7	301	14.8
Veneto	292	79.1	274	49.7	779	56.8
Friuli Venezia Giulia	76	59.8	53	40.2	153	37.1
Liguria	98	56.3	128	38.1	98	6.8
Emilia Romagna	198	53.5	182	29.1	172	14.5
ITALIA CENTRALE	854	71.0	822	54.8	4025	57.0
Toscana	189	55.9	138	28.2	398	32.7
Umbria	73	70.2	72	62.6	717	72.1
Marche **	149	78.4	169	70.7	492	52.9
Lazio ***	443	77.7	443	67.6	2418	61.8
ITALIA MERIDIONALE	917	71.5	766	59.3	4135	46.4
Abruzzo	81	45.5	122	39.9	1592	33.4
Molise	24	82.8	28	77.8	73	82.0
Campania	332	83.0	235	73.7	500	74.0
Puglia	321	79.9	224	63.5	787	76.0
Basilicata	62	44.0	64	45.1	210	33.0
Calabria	97	73.5	93	68.9	973	57.0
ITALIA INSULARE	444	76.3	405	70.1	1104	69.1
Sicilia	346	84.2	334	76.4	842	84.3
Sardegna	98	57.3	71	50.4	262	43.7
ITALIA	3780	69.2	3434	50.4	12102	42.6

Minister of Health Italy annual report on Conscientious Objection

'CO' in Reproductive Health, C. Fiala

Women dying in Europe because of 'CO': Poland

Doctors Let Woman Die Rather Than Harm Her Fetus

A Polish woman died because doctors kept refusing to treat her colon condition. The reason: they were worried she might miscarry.

She couldn't find a doctor whose morals matched up with her needs, and this mismatch ended up being fatal. - 2004

<http://jezebel.com/5659150/doctors-let-woman-die-rather-than-harm-her-fetus>

'CO' in Reproductive Health, C. Fiala

CO is a risk for women: Spain

“The doctors’ right to object nearly cost me my life”

A congenital fetal anomaly “incompatible with life” was diagnosed at the seventh month at a hospital in Spain because of delays in the prenatal screening. The public health service refused to perform the necessary termination, invoking the doctor’s right to objection on moral grounds, referring her instead to a clinic in Madrid, 800km away. As soon as she arrived in a hospital in Madrid, she was transferred to the emergency ward where her uterus was removed in order to save her life. - 2016



http://elpais.com/elpais/2016/11/09/inenglish/1478684798_963851.html

'CO' in Reproductive Health, C. Fiala

CO is a risk for women: Spain

While working on Paula's case I met two other women to whom the Health Service had hidden the malformations of their fetuses in order to prevent them to have a legal abortion.

One of them, Valdirene, a brazilian immigrant, single mother with no economic resources finally delivered a child with cardiopathy, Goldenhar syndrome and Fallot's tetralogy. Her story shows that CO is many times linked to a deep misogyny.

Lawyer Francisca Fernández Guillén from Spain, 2012

'CO' in Reproductive Health, C. Fiala

CO is a risk for women: Germany

German rape victim 'turned away by Catholic hospitals over pregnancy fears'

A rape victim in Germany was turned away by two Catholic hospitals because they might have to advise on what to do with an unwanted pregnancy, a doctor has claimed.

According to Dr Maiworm, the hospital's ethics committee, following consultation with Archbishop of Cologne Cardinal Joachim Meisner, had decided not to conduct examinations of sexual assault victims to avoid having to be in the position to recommend options such as the morning-after pill, which run contrary to Catholic teachings.



The Telegraph

By Matthew Day
3:29PM GMT 18 Jan 2013

'CO' in Reproductive Health, C. Fiala

CO is a risk for women: Austria

“No abortion in the hospital in the city of Schwarzach

The medical community and the regional government is divided whether abortions should be performed in public hospitals. If a doctor would perform an abortion he would be licensed in the hospital in Schwarzach.”

Keine Abtreibung im Krankenhaus Schwarzach

Pongauer Nachrichten
Do., 19.8.2004

Ob an den Landeskrankenanstalten Abtreibungen durchgeführt werden können, spaltet Ärzteschaft und Landesregierung. Im Kardinal Schwarzenberg'schen Krankenhaus wäre ein entsprechender Eingriff durch einen Arzt ein Entlassungsgrund. Dort tritt man für

'CO' in Reproductive Health, C. Fiala

CO is a risk to women's health and life

When society protects embryos and fetuses by law, or allows doctors to exercise CO...

women's lives are endangered.

Abortion is an essential, ethical health service that preserves a woman's health and life.



Gerri Santoro, 27, mother of two children, died from an unsafe abortion in a motel room, 1964, www.abortionfilms.org

'CO' in Reproductive Health, C. Fiala

Consequences of CO in abortion

The public health system has the responsibility and duty to guarantee to citizens all the safe and beneficial treatments they are entitled to request. After all, a public health system is largely supported by taxation of people who, in turn, are entitled to have access to treatments they need and pay for.

Francesca Minerva 2015

- 'CO' is mainly a problem of public institutions or private institutions who benefit from a monopoly or are paid by the state.
- 'CO' is not an issue (and not a problem) in institutions exposed to competition.
- 'CO' is misuse of taxpayers money

'CO' in Reproductive Health, C. Fiala

CO and the provision of danger for the woman's life

Most countries have the provision that CO is not allowed if the life of the woman is in danger.

But that can not work.

Because one can know this only afterwards, when the woman is dead or still alive.

'CO' in Reproductive Health, C. Fiala

CO and Maternal mortality

"Women are not dying because of diseases we cannot treat. They are dying because societies have yet to make the decision that their lives are worth saving."

Professor M.F. Fathalla

Former President of the International Federation of Gynaecology and Obstetrics
Professor of Obstetrics and Gynaecology, Assiut University, Egypt

'CO' in Reproductive Health, C. Fiala

Abortion and society

- Definition
- Impact of 'CO'
- The solution

The solution for the many problems caused by 'CO'

The practitioner who claims status
as a conscientious objector
should not work in abortion care

(Lertxundi 2016)

The solution for the many problems caused by 'CO'

Yes we can! Successful examples of disallowing 'conscientious objection' in reproductive health care

Christian Fiala, Kristina Gemzell Danielsson, Oskari Heikinheimo, Jens A. Guðmundsson & Joyce Arthur

- Sweden, Finland, and Iceland – do not generally permit HCPs in the public health care system to refuse to perform a legal medical service for reasons of 'CO' when the service is part of their professional duties.
- disallowing 'CO' is workable and beneficial. It facilitates good access to reproductive health services because it reduces barriers and delays.
- Other benefits include the prioritisation of evidence-based medicine, rational arguments, and democratic laws over faith-based refusals.
- It protects women's basic human rights, avoiding both discrimination and harms to health.
- Holding HCPs accountable for their professional obligations to patients does not result in negative impacts.

Conclusion

Health care professionals need to hold personal beliefs, but they should wear the consequences themselves. They should not be allowed to put the consequences on others.

'Doctors are not there to judge patients but to treat them. It would not be appropriate or ethical for a doctor to refuse to help a patient because their own personal beliefs were in conflict with how an individual patient led their life.'

Dr Tony Calland, chairman of the British Medical Association Medical Ethics Committee
BBC on 28 September 2007

Technological progress
may bring the solution for
the many problems
caused by 'CO'

Why should women
ask for something
that is already theirs?

Jeniffer Lee, 2003



www.abortionfilms.org/en/show/3555/riveter-keep-it-legal/

I dream of the day when all children are wanted,
when men and women are equal and when
sexuality is considered to be the expression of
love, happiness and closeness.

Elise Ottesen Jensen
Sweden, 1896-1973

Abortion in Europe, C. Fiala

“Removing restrictions – Liberating women“

Next FIAPAC conference
September 2018 in the very nice French city of Nantes

FIAPAC

International Federation of Professional Abortion and Contraception Associates

Next conference:
14 - 15 September 2018, Nantes (France)

