

*Catholic Church. National Conference of Catholic Bishops
Pastoral guidelines for...
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**PASTORAL
GUIDELINES
for the
CATHOLIC HOSPITAL
and
CATHOLIC HEALTH CARE
PERSONNEL**

**AD HOC COMMITTEE ON
PRO-LIFE ACTIVITIES
NATIONAL CONFERENCE OF
CATHOLIC BISHOPS**

April 11, 1973

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The decision of the U.S. Supreme Court on January 22, 1973, in regard to the abortion laws of Texas and Georgia radically changed the legal and political discussion of the past decade. For practical purposes, the Court has given its approval to abortion on request, and the sweeping opinion of the Court has left many states in legal disarray regarding abortion.

Legally, the question of responsibility has been made ambiguous by the Court's opinion. The Supreme Court held that the right of privacy encompasses a woman's decision to obtain an abortion. The Court also stated that the abortion decision is "primarily a medical decision and basic responsibility for it must rest with the physician." In its opinion, during the first three months, once the woman has decided to abort and the physician has been consulted, anyone may perform the abortion procedure. Thus according to the Court, in such a case the physician is primarily and basically responsible, though he may have the least to do with the abortion itself.

In terms of moral teaching, the American Bishops have declared that the "opinion of the Court is wrong and is entirely contrary to the fundamental principles of morality. . . . Whenever a conflict arises between the law of God and any human law we are held to

follow God's law." Catholics then, may not obey laws that require them to act in violation of their conscience.

Catholic hospitals cannot comply with laws requiring them to provide abortion services, and Catholic physicians, nurses and health care workers who work in facilities that provide abortions and sterilizations may not take part in such procedures in good conscience. Thus, in light of the legal safeguards respecting the moral responsibilities of Catholic hospitals and health care personnel, there is reason for a specific application of moral principles.

In this analysis, the application of the moral principles on conscientious objection to abortion is approached in terms of the *responsibilities* of Catholic hospitals and health care personnel to give witness to their faith and moral convictions, and the *restrictions* imposed by moral convictions on policies and behavior. Sterilization is treated separately, and a special section is added on excommunication.

I. *Principles of Responsibility for Catholic Hospitals*

1. Catholic hospitals must witness to the sanctity of life, the integrity of the human person and the value of human life at every stage of its existence.

2. Catholic hospitals should commit themselves to a special effort in providing compassion and care for pregnant women and their unborn children. This would include providing a full range of pre-natal, obstetric and post-natal services. It would also involve spiritual assistance and sacramental administration. In this regard, the designation of sisters or nurses as special ministers of the Eucharist in keeping with the latest norms of the Holy See might be especially helpful in making it possible for women to receive the Eucharist frequently during their stay in the hospital. (Cf. *Immensae Caritatis*. Sacred Congregation of the Sacraments, January 29, 1973.)

3. Catholic hospitals should show a willingness to extend privileges to physicians and health care workers who share this commitment to serving life, particularly in situations where such health care workers find that their opposition to abortion or sterilization procedures places them at a disadvantage in other hospitals or facilities.

4. Catholic hospitals must give public notice of their commitment to the sanctity of life and their refusal to provide abortion or sterilization services.

5. The Catholic hospital has a responsibility to clearly enunciate its policies for all physicians holding privileges and for all health care personnel employed by the hospital.

II. *Responsibilities of Physicians, Nurses and Health Care Workers*

1. Physicians, nurses and health care workers should give public witness to their belief in the sanctity of life, the integrity of every person and the value of human life at every stage of its existence by their compassion and care for their patients.

2. Physicians, nurses and health care workers should provide encouragement and support for women and their children. They should be especially attentive to the tensions created for women by society's depreciation of the value of life. When advisable, they should seek the assistance of the chaplain in making available the Church's spiritual assistance and sacramental administration.

3. Physicians, nurses and health care workers who work in hospitals that provide abortion or sterilization services should notify the hospital in writing of their conscientious refusal to participate in such actions. When efforts are made to compel participation in these procedures, health care personnel should protest this violation of conscience to their superiors and to the administrator.

4. In their professional associations and contacts, Catholic physicians, nurses and health care workers should candidly and charitably explain their convictions to their colleagues when called upon to do so. Charity also requires that they refrain from judging the motives of their colleagues or patients who do not agree with or will not accept their conscientious convictions. Catholics must expect that their faith and moral convictions on the sanctity of life may result in their being misjudged, treated unfairly or alienated. Such is the price of Christian witness in today's world.

5. An aborted fetus showing signs of life, at any stage of pregnancy, is entitled to Baptism.

III. *Restrictions that Follow from Moral Convictions*

1. No Catholic hospital may provide abortion services, nor may any Catholic hospital make its facilities or personnel available for abortions.

2. A Catholic hospital should make it clear to all staff and health care workers that abortions and sterilizations are prohibited, and that agreement to this policy is a condition for privileges.

3. Abortion, the deliberate expulsion of the fetus from the womb of its mother to terminate the pregnancy, is a serious and immoral action. Catholics who perform or obtain abortions, or persuade others to do so, commit a serious sin. Among those who assist the woman, primary responsibility for the abortion procedure rests with the doctor who advises and/or assists the woman to have an abortion.

4. All who willingly and deliberately assist in abortion procedures share the sinfulness of the abortive act. This is particularly true of the attending surgeon and the health care personnel who administer abortifacient drugs or other abortion procedures.

5. Nurses and health care personnel may not assist in abortion procedures.

Particular questions of conscience should be taken up with a confessor.

6. Cooperation in the sinful act of abortion would not ordinarily extend to preparing patients for the procedure or providing after-care. However, because in many instances abortion is promoted as an alternate method of birth control and thus a denial of the value of the child, the cooperation of the Catholic health care worker may be interpreted as agreement that the unborn child is of subordinate value and has no right to life. Christian witness may well require Catholic nurses to avoid even those actions that—although not necessarily evil—may be interpreted as a compromise of Christian values.

Sterilization

1. Sterilization, though it does not destroy the life of the unborn child as does abortion, may not be used as a means of contraception.

2. Doctors, nurses and health care workers in hospitals that permit sterilization procedures should not perform or assist in such procedures. They should declare their unwillingness to participate in a letter to the administrator.

3. Nurses may be called upon to prepare a patient or provide after-care when the sterilization is attendant on delivery of a baby. The nurse's role is complicated and difficult. She should provide support and encouragement to the mother in regard to delivery of the child, and emphasize the positive aspect of giving birth. At the same time, the nurse should refrain from agreeing with the decision to terminate the reproductive function by means of sterilization.

Excommunication

1. Because abortion is a serious evil, both for those who take part in it and for society, the Church has sought to dissuade people from utilizing it by placing it in a special moral category. Under Church

law, those who perform or obtain an abortion or deliberately persuade others to do so, place themselves in a state of excommunication. Ordinarily this involves the woman who obtains an abortion, the doctor who performs the abortion, the person who persuades a woman to have an abortion, and any person who cooperates to the extent that the abortion would not otherwise take place without his or her cooperation.

2. Excommunication is a special penalty, and conditions under which it applies must be strictly interpreted. Generally it does not apply to nurses and other assistants, nor can it be extended to legislators. It does not apply in any way to sterilization procedures.

Conclusion

Human life exists in a person, who must be respected and cared for, and at times, reconciled to God and the community. Catholic hospitals and health care workers have distinguished themselves in the past in the provision of competent medical care motivated by respect for the person and Christian charity. Along with the added responsibilities they will face in an increasingly permissive abortion atmosphere there are also opportunities for Christian witness, for competent care based on charity, for encouraging women and health care workers who refuse to take part in abortions, and for reconciling and showing mercy to those who have failed. Now, more than in the past, Catholic health care workers, and perhaps especially those in hospitals not under Catholic auspices, will be ministers of God's word and mediators of His grace. They deserve the support and assistance of the entire Church.

Finally, though these guidelines have attempted to cover a wide range of problems, there are many cases that do not fall within the specified categories. In these cases, the standard principles of moral theology need to be applied. Parish priests, hospital chaplains and sisters involved in the ministry to

the sick should be available to explain and apply the principles and to encourage and support doctors, nurses and health care workers.

AD HOC COMMITTEE ON PRO-LIFE
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(These guidelines are intended to correlate with the pastoral statements of NCCB and of individual Bishops. They do not replace diocesan policies, but are supplementary to them.)

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