## Congress of the United States Washington, DC 20515

April 3, 2009

President Barack Obama The White House 1600 Pennsylvania Avenue, NW Washington, DC 20500

Dear President Obama.

We are deeply concerned to learn that your Administration is moving to rescind the rule implementing the series of federal laws that protect health care professionals, hospitals, and health care plans from discrimination on the basis of their refusal to participate in abortion. This is not a partisan issue. Right of conscience provisions have long been supported by Republicans and Democrats alike.

These laws, first enacted in 1973, provide a broad layer of civil protections for medical professionals, allowing health care workers to practice their professions in a manner consistent with their deeply held convictions. The regulations, finalized in January 2009, ensure compliance among states, local governments and other organizations that receive federal funds. This rule also offers much needed guidance and education for health care professionals about their rights under the law and the mechanisms in place at the Department of Health and Human Services for redress against actual cases of discrimination.

The threat of discrimination is real. In the name of increasing access to abortion, some abortion advocates have assembled state-wide campaigns to compel private hospitals, including Catholic hospitals, to provide abortion services in spite of their strong religious opposition. Some hospitals force their employees to sign affidavits promising to participate in abortion if asked. This is a clear violation of the law, and the Administration has an obligation to provide mechanisms for enforcing the law.

<sup>&</sup>lt;sup>1</sup>In 2002, the Abortion Access Project, operating in twenty-four states, had the stated goal of "increasing access to abortion services by expanding... the number of hospitals offering abortion services." The project admits that its tactics include "pressuring hospitals" and it does so through both political and legal pressure. The "Hospital Access Collaborative" division reports on the state projects' legal and regulatory interventions challenging mergers. See www.abortionaccess.org/AAP/campaigns/hospital/hospital.htm (accessed 09/07/03).

<sup>&</sup>lt;sup>2</sup> In 2002, the Maryland NARAL Hospital Provider Project stated on its website: "The goal of the *Hospital Provider Project* is to increase access to abortion services by requiring Maryland hospitals to provide abortion..." www.mdnaral.org/initiatives.htm (accessed 04/05/2002).

The perception of discrimination is also widespread. In an informal survey among its members, the Christian Medical and Dental Association found that over 40% reported feeling pressured to violate their personal ethical standards. In 2007, the American College of Obstetrics and Gynecology issued an ethics opinion stating that the so-called right of a woman to have unfettered access to abortion trumped the right of the doctor to refuse to participate in abortion.<sup>3</sup> Obstetricians who object to abortion on the basis of their moral or religious convictions may feel that in such an environment their careers are in jeopardy.

We disagree that the rule "created confusion about the scope and original intent of the law." Fears of women being denied access to contraception are inconsistent with the language of the rule. Contrary to the assertions of many abortion advocates, the language of the finalized rule faithfully implemented the spirit and letter of the conscience laws Congress has enacted over the last 30 years. Many of the opponents to the rule continue to oppose the underlying federal statutes. Yet these legislative provisions have been renewed year after year, and there is broad popular support for conscience protection for health care professionals with respect to abortion.

Physicians are trained to "first do no harm." We believe the requirement to perform or assist in an abortion violates the most basic tenet of the medical profession, and we strongly urge you to preserve the existing conscience protection rule. In the absence of guidance and education, cases of discrimination may go unchecked and professionals may continue to leave their fields, exacerbating the health care workforce crisis that is already plaguing our country. No one should be forced to participate in abortion.

Sincerely

John Fleming, M.D.

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<sup>3</sup> "The Limits of Conscientious Refusal in Reproductive Medicine," American College of Obstetric and Gynecology Committee Opinion, Committee on Ethics, November 2007. http://www.acog.org/from home/publications/ethics/co385.pdf

<sup>&</sup>lt;sup>4</sup> "Conscience Rule on Abortions May be Overturned," *Los Angeles Times* by Noam N. Levey February 27, 2009.

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