

## The church's war on women's health and child welfare

Jamie Manson | Aug. 16, 2011 Grace on the Margins

Just when you thought the Roman Catholic hierarchy's relationship with women and children couldn't get grimmer, a number of U.S. bishops spent their summer continuing to undermine the health and welfare of both.

The first strike against women's health arose when Bishop Leonard Blair of Toledo, Ohio, banned all institutions within his diocese from fundraising for Susan G. Komen for the Cure, an organization dedicated to finding a cure for breast cancer and supporting women who are battling the disease.

The reason? The Komen Foundation does not exclude the *possibility* of using embryonic stem cells to treat the cancer, which is the second leading cause of cancer deaths among women. The bishop did acknowledge that the foundation has not and does not currently fund research that involves embryonic stem cells.

Apparently one of Blair's staffers probed the Komen Foundation's bylaws to find this footnote. One wonders if prostate cancer foundations were equally scrutinized.

Blair may have taken a page out of the playbook of North Dakota Bishops Samuel J. Aquila and Paul A. Zipfel, who, back in March, devised a "do not donate" index. In addition to the Komen Foundation, Aquila and Zipfel also recommended that Catholic entities not support the March of Dimes, UNICEF, the CROP Hunger Walk (of Church World Service) and Amnesty International. They rounded out the list with an intriguingly incongruous pick: the American Association of University Women.

Of these seven organizations, two of them exist to empower women and fight women's diseases. One helps to prevent birth defects and infant mortality while another one feeds and cares for children facing global poverty. The other two organizations fight hunger and human rights violations.

The agencies were cited for one of three reasons: for supporting stem cell research, for adopting a pro-choice position, or for offering contraception to poor women and men.

The hierarchy continued to target contraception two weeks ago when Kathleen Sebelius, the Secretary of the Department of Health and Human Services, accepted the Institute of Medicine's recommendation that would require insurance companies to provide women, without co-pay, certain preventative services, including "FDA-approved contraceptive methods, sterilization procedures, and patient education and counseling for all women with reproductive capacity."

Cardinal Daniel N. DiNardo of Galveston-Houston immediately cried foul, insisting that the recommendation revealed that "there is an ideology at work ... that goes beyond any objective assessment of the health needs of women and children."

DiNardo, it seems, would prefer that the Roman Catholic hierarchy's ideology and its moralistic assessment of the health needs of women and children be written into federal law.

The Cardinal fought for a "conscience clause," which would free church institutions from having to provide

equal access to medical care to women employees. He was rewarded with a clause that could be applied to parishes and other diocesan offices, but not to hospitals and charitable organizations that exist primarily to provide social services.

While the Cardinal ardently fought to preserve the church's freedom of conscience, he neglected to consider the same freedom of conscience of thousands of non-Catholic, female employees of Catholic institutions who would face discrimination based on religious morality of their employer. He also did not consider the Catholic female employees who have chosen to exercise the primacy of their consciences by using contraception. Recent polls reveal that this could involve as many as 98 percent of these women.

The failure to provide contraceptive services also discriminates against women who require birth control pills to remedy medical conditions rather than for contraception. For decades, millions of women in the U.S. have relied on the pill to alleviate severe menstrual cramps, to reduce prolonged and/or excessive menstrual bleeding, to treat endometriosis and polycystic ovary syndrome, and to lower their risk of endometrial and ovarian cancers.

It's remarkable how the hierarchy conveniently forgets that *Humanae Vitae* sanctions the use of the birth control pill for such therapeutic purposes.

On average, most employees of Catholic organizations earn significantly less than employees working in comparable public and private agencies. Most employees of Catholic institutions do not earn enough to support the unplanned children that would likely come with natural family planning.

Many women, both Catholic and non-Catholic, sacrifice higher salaries to dedicate their lives to the unique Catholic mission of serving the poor, sick, and vulnerable in hospitals, charities, and schools. In return for their devotion, they are expected to pay out of their own pockets for certain preventative services and medical treatments.

There are at least two ironies to observe in the hierarchy's war on contraception and in its prohibition on supporting charitable organizations that adopt pro-choice or pro-stem cell research positions.

While the hierarchy vehemently battles people and organizations that aren't pro-life, they also ban contributions to organizations like March of Dimes, which is dedicated to fighting the sufferings of birth defects and infant death.

At the same time that the hierarchy is fighting contraception, they are also shutting down their adoption agencies out of fear that a child in their care might be adopted by a same-sex couple. As Brian Cahill, former CEO of Catholic Charities San Francisco, wrote last week in a post on the *NCR* Web site, "based on a poorly conceived, disrespectful and harshly written Roman policy, San Francisco Catholic Charities joined Boston, New York, Chicago, Washington and other dioceses [in] abandoning a hundred-year tradition and thousands of needy children."

But the real tragedy behind all of these cultural wars is that there will be no greater victims than poor women and children.

Wealthy and middle-class women typically have good insurance that can afford them the best doctors and medicines when they fight breast cancer or give birth to premature or sick babies. They can afford to pay for contraceptives out of pocket. They can even afford to have an unplanned child.

Poor women need organizations like the March of Dimes to give them life-saving grants to pay for infant care or to give them resources for navigating a breast cancer diagnosis. They are the least likely to be able to afford contraceptives out of pocket, but the most in need of contraception to prevent pregnancies that would only

deepen their poverty and deprive their children of basic necessities.

The majority of children who end up in foster care come from poor families. Many women who give birth while caught in the cycle of poverty also suffer from addiction and mental illness and, as a result, often must surrender their children to foster care. Without being placed in a stable home, these children often face futures of choosing between life in a homeless shelter and a life of prostitution.

In its compulsion to uphold its teaching on certain social issues, the hierarchy is undermining its commitment to equally crucial issues of social justice. Church leaders would rather invest their energy in their self-protection and self-aggrandizement, than have the courage and humility to listen to the impact that their policies have on poor women and suffering children.

What good is having freedom of conscience when it is used to defend the unconscionable deprivation and neglect of some of our most vulnerable communities?

[Jamie L. Manson received her Master of Divinity degree from Yale Divinity School where she studied Catholic theology and sexual ethics. Her columns for *NCR* earned her a first prize Catholic Press Association award for Best Column/Regular Commentary in 2010.]

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