

Commission on Population and Development

Forty-sixth session

22-26 April 2013

Item 4 of the provisional agenda*

General debate on national experience in population matters: new trends in migration —
demographic aspects

Statement submitted by Catholics for Choice,
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The human rights and dignity of migrants are of great concern to Catholics globally. Our religious tradition instructs us to exercise a preferential option for the poor, inspired by the words and deeds of Jesus Christ, who taught that “as you did it to one of the least of these my brothers, you did it to me.”¹ This preferential option for the poor is also reflected in our church’s internal code, known as canon law, which states, “The Christian faithful are also obliged to promote social justice and, mindful of the precept of the Lord, to assist the poor.”² According to the United States Conference of Catholic Bishops, “The moral test of a society is how it treats its most vulnerable members. The poor have the most urgent moral claim on the conscience of the nation. We are called to look at public policy decisions in terms of how they affect the poor.”³ Church teaching instructs us that the preferential option for the poor includes all those who are marginalized in any society, including migrants, victims of trafficking and all those who have suffered injustice and oppression.

Catholics, driven by our faith and compassion for others, are on the front lines of advocacy for the human rights of migrants, as well as providing them with critical services. It is regrettable, however, that in Catholic-run institutions and aid programs, the hierarchy has instituted protocols that block the provision of urgently needed sexual and reproductive healthcare, as well as services that would help protect migrants who are at risk for contracting HIV. The hierarchy’s stance reflects the most conservative possible interpretation of Catholic teachings on sexual and reproductive issues, one that is substantially more conservative than that of most Catholics, and it makes no room for people of other faiths or no faith. Unfortunately, the Catholic hierarchy’s objections to legal, evidence-based care have diluted public policy commitments. In some instances, UN member state governments have expressed their commitment to upholding the human rights of migrants and to providing migrants in their territory with the services and assistance needed to recover from exploitation and abuse, yet

have lamentably permitted the Catholic hierarchy and its affiliated organizations to deny migrants access to critical sexual and reproductive health services.

According to the International Organization for Migration, there are 214 million migrants in the world today, and 49 percent are women. Caritas Internationalis, the confederation of 164 Roman Catholic relief, development and social service organizations operating in more than 200 countries and territories worldwide, includes “women and migration” among its six programmatic priorities. According to a report published in 2010 by the Pontifical Council for Pastoral Assistance to Healthcare Workers, Catholic institutions manage 26 percent of healthcare facilities in the world. In real numbers, this translates to 117,000 healthcare facilities, including hospitals, clinics and orphanages, as well as 18,000 pharmacies worldwide. Catholic-affiliated organizations constitute the largest percentage of providers of care to HIV & AIDS patients in the world, with one-quarter of HIV & AIDS care globally being provided by Catholic organizations and medical facilities. Precise data on the proportion of healthcare services provided by Catholic groups and facilities to migrants is difficult to obtain, but given the sizable presence of these groups in the provision of healthcare services to the neediest people globally, we can assume it is significant.

Catholic providers are often the first source of healthcare for migrants who otherwise lack access to such services, but if a migrant should happen to seek help from a Catholic hospital, clinic or organization, she will find her options for sexual and reproductive healthcare severely limited. As UNFPA has noted, “Women migrants are particularly vulnerable to human trafficking for the purposes of sexual exploitation.... Trafficked women are exposed to sexual violence and sexually transmitted infections, including HIV....”⁴ Due to the directives of the Catholic hierarchy, women and girls who become pregnant as a result of sexual assault may not terminate a pregnancy safely with the help of healthcare providers at Catholic institutions, and they are frequently denied emergency contraception which could prevent an unwanted

pregnancy. Moreover, they are denied counseling about comprehensive family planning options and the information and methods most useful for preventing infection with sexually transmitted diseases. The denial of these basic reproductive and sexual healthcare services is one example of the unfair application of the most conservative interpretations of Catholic teachings on entire populations, with devastating effects for women and girls.

As the International Organization for Migration has found, “migrants and mobile populations are at particularly high risk of HIV infection all over the world, as they frequently face marginalization, exclusion and various barriers to accessing health promotion and care.”⁵ The Catholic hierarchy’s refusal to accept and promote the use of condoms in the fight against HIV & AIDS places migrants further at risk of becoming infected. Catholic officials have repeatedly spread misinformation about the safety and efficacy of condoms, and Catholic healthcare workers are officially prohibited from distributing condoms or encouraging their use. Of course, many do so anyway, but the fact remains that the official policy for one-quarter of the HIV/AIDS services provided globally is to prohibit and condemn condom use.

Finally, the Catholic hierarchy’s current practice is to exclusively privilege the conscience of some healthcare providers above the needs of patients. This leaves many women and girls without access to emergency sexual and reproductive healthcare services. As a result of this policy, the Catholic hierarchy argues that medical personnel who personally disagree with the provision of certain services, particularly abortion care and emergency contraception, should be permitted not to provide the service, even in emergency situations—including public hospitals and non-Catholic settings. In contrast to the relatively small number of people who comprise the hierarchy of our church, many more Catholics globally believe that privileging the personal beliefs of one healthcare provider over the urgent health needs of a woman or girl who has suffered sexual violence is cruel, and that doing so contradicts Catholic teaching regarding respect for the individual conscience and compassion for others. Furthermore, providers

working for Catholic institutions who would willingly perform services prohibited by the Vatican are restricted from following the dictates of their own conscience by policies which do not allow them to provide these services. States continue the violation of the human rights of women and girls who are victims of violence when they allow hospitals and clinics to refuse to provide comprehensive reproductive healthcare services in favor of protecting the religious beliefs of some medical personnel who may object to certain procedures without also guaranteeing patient access to these services, either through other staff or at another facility.

Access to comprehensive reproductive and sexual healthcare is vital to the health and human rights of migrants. It is the responsibility of governments to enact and implement the appropriate social, legal and policy frameworks that make it possible for migrants to be healthy and enjoy their human rights. Catholics for Choice calls on governments to immediately address the deficiencies in their provision of sexual and reproductive healthcare services and to reject any and all influence by the Catholic hierarchy and its affiliated organizations that would limit access to these critical, life-saving services.

¹ Matthew 25:40.

² 1983 CIC, canon 222 §2.

³ Option for the Poor, Major themes from Catholic Social Teaching, Office for Social Justice, Archdiocese of St. Paul and Minneapolis.

<http://web.archive.org/web/20060216183419/http://www.osispm.org/cst/themes.htm>

⁴ UNFPA, "Linking Population, Poverty and Development: Migration: A World on the Move."

<http://www.unfpa.org/pds/migration.html>

⁵ International Organization on Migration, "World AIDS Day: Migrants Disproportionately Affected by HIV and AIDS in High-Income Countries, Says IOM," November 30, 2012.

<http://www.iom.int/cms/en/sites/iom/home/news-and-views/press-briefing-notes/pbn-2012/pbn-listing/world-aids-day-migrants-dispropo.html>