

RELIGIOUS HEALTH RESTRICTIONS

FACT SHEET SERIES
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Religious Restrictions on the Care of Women With Chronic Mental Illness

How do hospitals' religious restrictions affect women with chronic mental illness?

Women with chronic mental illness are at an increased risk of being sexually abused or raped. When receiving treatment for mental illness, these women may need information about reproductive health care options and timely access to such services as emergency contraception, contraception, abortion

Psychiatric units in religiously-affiliated hospitals may have rules barring physicians and nurses from counseling women about family planning services.

and HIV/AIDS prevention counseling. Hospitals with religious restrictions may prevent staff from telling patients about such options and providing needed reproductive care.

Reproductive health statistics of women with mental illness:

- Nearly one in four women will suffer from some form of mental illness during her lifetime. Women are at greatest risk for mental health problems immediately following childbirth.¹
- Estimates of the proportion of women with severe mental illness who have been sexually abused range from 25% to 51%.²

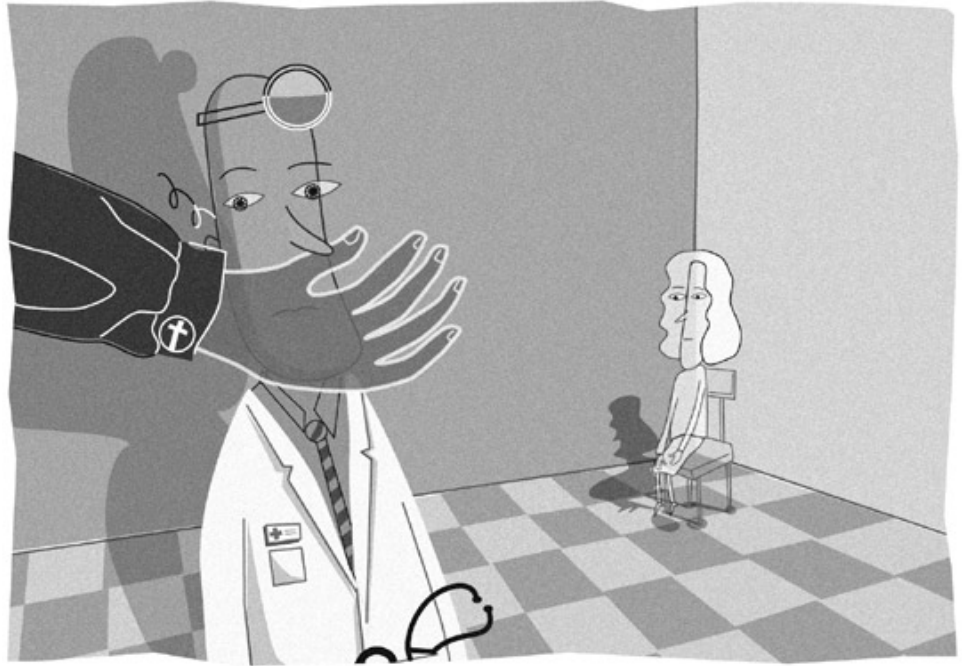


Illustration: Bruce Rosch

- A study found that 33% of women with chronic mental illness stated that they did not want to become pregnant. Nonetheless, they did not use contraception the last time they had intercourse.³ Women with mental illness often do not receive information about contraception or “safer sex” from their health care providers.
- Women with schizophrenia experience more unplanned births and more abortions than women who do not suffer from chronic mental illness.⁴
- Because many women with chronic mental illness are poor, and some are homeless, they do not have access to routine health care, and therefore may not receive information about contraceptive options.⁵

How do religious health restrictions affect inpatient psychiatric care?

Reproductive health care for women with chronic mental illness is a neglected area of health care. There is no basic standard of reproductive health care for psychiatric inpatients. Hospital religious restrictions may limit the information that providers can give to patients, as well as the manner in which they do so. In some religiously-operated hospitals, if a clinician wants to give a psychiatric patient comprehensive family planning counseling, the counseling might have to take place in a secretive manner. This situation can exacerbate the patient's symptoms, such as paranoia.

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How much psychiatric care is subject to religious restrictions?

Nationally, 308 religiously sponsored acute care hospitals provide psychiatric care, according to an analysis of 2001 hospital data performed by Empire Health Advisors. These hospitals operated 18.3 percent of the psychiatric care beds located in the nation's acute care hospitals and provided 2,977,102 days of care (19.8% of total psych days in acute care hospitals) in 2001. In some states, this percentage was alarmingly high. In South Dakota, for example, 40 percent of all psychiatric care was in religious hospitals.

How are patients and doctors being affected?

- *Case Example:* One doctor practicing in Chicago under hospital religious restrictions discussed the plight of "Molly," who is 40 years old and has six children. Molly has a history of severe post-partum depression and depression

at other times, as well. When she arrived at the outpatient clinic for services, she revealed that she was pregnant, and stated that if she had to have another baby she would kill herself. Although abortion was a legal option for Molly, her doctor was forbidden to discuss this option because of institutional religious restrictions imposed by the hospital.

How could this doctor care for Molly without discussing her reproductive options?

- *Case Example:* Another doctor practicing in Boston under hospital religious restrictions stated that she had a patient, "Sally," who was pregnant and diagnosed with schizophrenia. Because the medications that could be used to stabilize Sally would cause birth defects in her developing fetus, the doctor could not prescribe them unless Sally terminated the pregnancy. Due to institutional religious restrictions, the doctor was not allowed to counsel Sally about the option of pregnancy termination, making it impossible to discuss her treatment choices. How could a doctor obtain informed consent when the hospital forbids the doctor to discuss all options with a patient?

What can be done to protect patients' access to care?

- *Case example:* When the Fletcher Allen Health System in Vermont proposed building a psychiatric facility on a campus bound by religious restrictions, patient advocates organized to oppose the plan. Advocates testified

about the increased rate of sexual abuse and assault among female psychiatric patients, and the need to counsel patients about contraception, emergency contraception and sometimes abortion. Advocates also testified about the detrimental effects many psychiatric medications have for developing fetuses, necessitating careful pregnancy planning.

A physician offered testimony about how difficult it can be to obtain informed consent from a patient who may come in and out of lucidity. The advocates emphasized that plans to send patients to another campus for reproductive services and counseling would be detrimental to the well-being of seriously ill patients.

The proposal was unanimously rejected by the state agency reviewing the proposal.

To find out more about this issue, contact the MergerWatch project at 212-261-4314 or lois@mergerwatch.org



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