

The Linacre Quarterly

Volume 67 | Number 1

Article 3

February 2000

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Kevin E. Schmidt

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Recommended Citation

Schmidt, Kevin E. (2000) "Statement on the Draft Agreed Conclusions on Women and Health," *The Linacre Quarterly*: Vol. 67: No. 1, Article 3.

Available at: <http://epublications.marquette.edu/lnq/vol67/iss1/3>

Statement on the Draft Agreed Conclusions on Women and Health

by

Kevin E. Schmidt, M.D., F.A.C.M.Q.

The author is Senior Clinical Instructor at Tufts University School of Medicine. In March, 1999, he spoke on behalf of the Holy See before the UN Commission on the Status of Women. The following is his statement.

Thank you Madame Chairperson.

Let me begin by introducing myself. I am a practicing physician, specializing in community-based and internal medicine. As a member of the Delegation of the Holy See, I am here to react to the presentation given yesterday by the representative of the World Health Organization, and to respond to what my Delegation sees as the deficiencies regarding the provision of holistic health care in the document before us.

With regard to access to holistic health care, the position of my Delegation is that adequate food, water, education, economic opportunity and personal safety are prerequisites to any discussion on health care. Truly holistic health care treats body, mind and spirit.

The draft document before the Commission this morning, as written, is too narrow with a disproportionate emphasis on reproductive issues. This is not, however, to deny the importance of reproductive health care. The Holy See recognizes the historical and biological role of woman as mother and the long cultural and religious heritage of that role.

However, women's lack of equal access to all necessary health care is a major problem, even in developed countries. Recent articles in the medical literature reflect the unfortunate fact that even when matched in social and economic status, women do not get medical attention in as

timely a manner as do men. The treatment for women is not as intensive as that for men, nor as aggressive. And that treatment is often incomplete.

With regard to sexual and reproductive health, the Holy See urges that the final document include strong language supporting the importance of the concept of "informed consent." This is the foundation of trust between physician and patient. Truly informed consent is an interactive discussion, not a lecture, between physician and patient, in language familiar to and understood by the patient. Use of medical jargon and parsing phraseology does not result in informed consent.

There can be misunderstandings even, for instance, in the use of such terms as "abortion" and "pregnancy." The current usage of these terms by the Western scientific establishment does not accurately reflect a lay person's understanding of these terms. Hence, there is real potential for miscommunication and misinformation. This leaves open the door to manipulation and exploitation.

The Holy See would hope the final draft would include language on the term conception. The medical definition states that conception occurs at the time of fertilization – the joining of egg and sperm. From that point onward, life has begun.

At conception – the joining of the egg and the sperm – all the necessary genetic material for the lifelong development of the unique person is already present. Implantation provides the environment for growth and development, but does not add any genetic material. Therefore, any intervention that may block implantation, such as so-called "emergency contraception," is an abortifacient and ends a life.

The medical community also recognizes that "emergency contraception" has no effect on HIV/STD transmission. It can be argued, in fact, that contraception in general encourages promiscuity and hence the spread of STDs.

It must also be pointed out that the condom is by no means a foolproof barrier to the transmission of blood and bodily fluids. Condoms do not provide protection from those inguinal diseases that may result in open sores, resulting in pathways for secondary parasitic, bacterial and viral infection, including HIV.

As a physician, I would hope that the final document will include language to the effect that abstinence outside of marriage is the only reliable check on the spread of these diseases. There is also a positive impact on family, community with their fidelity.

The draft document also supports the use of "emergency contraception" after rape. As a physician, I have cared for many rape victims. Rape is a cowardly, brutal act with a multitude of terrible effects. The holistic medical approach is necessary. The body, the mind and the

spirit must all be healed. However, it is immoral to attempt to remediate the violent act of rape with another violent act – abortion.

The United Nations is based on over 50 years of history of non-violent resolution of intranational, international and interpersonal conflict. Therefore, my delegation encourages this Commission to take the entire health and life span of women into account before finalizing this document.

Thank you, Madame Chair.
