

## Pregnancy Resource Center Code of Conduct

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## **Preamble**

Pregnancy Resource Centers (PRC) are a key component in the ability for Western civilization to provide ethical service and support to women facing unplanned pregnancy. Because the existence of elective pregnancy termination (abortion) requires that traditional medical ethics be ignored or changed to the detriment of the woman, the child in utero, and the medical profession in general, medical PRCs play an essential role in the protection of all three of those categories of person. Due to the depth of importance which medical PRCs represent in this increasingly hostile political, educational, and medical environment it is incumbent upon PRC leadership to both protect and advance their essential life affirming work. A key way to do this is to embrace an objective code of conduct which will allow a PRC to consistently demonstrate to all interested constituents that it has secured the moral high ground in patient service and as a category of service organization stands as a national model for others to follow.

PRCs have been under extreme scrutiny through regulation as well as informal and formal investigations for years. For the PRC movement to sustain its status as an independent and self-governing body of service organizations it will need to clarify the beliefs and behavior that define good service organizations for women's reproductive health. This code internal to PRC organizations defines those organizations that attempt to intentionally think and act according to a comprehensive moral code of conduct. This code of conduct exists in order to assist and encourage PRCs to protect the patient and her true autonomous decision-making ability specifically for women facing unplanned pregnancy. PRCs, their executives, board, staff and volunteers are invited to use this code as a tool designed by PRC professionals to protect the PRC's integrity, the movement's credibility, and above all the dignity of both patients—the mother and child. The following duties in some way should be made into objective policy in the PRC with matching procedures that are followed the same way with every patient in a step by step or linear fashion to ensure they have been respected on a per patient basis.

## I. Duties to the Patient

Much of the PRC's duty to the patient requires ensuring clear, consistent, and accurate communication. Most patients seek out the services of a PRC to help them understand their condition, their pregnancy options, and access community support for that pregnancy. As such the patients are typically at a loss as to what to expect or know even what questions to ask regarding pregnancy or pregnancy related options. PRCs often act as umbrella agencies acting as clearing houses for various community resources from material assistance, to counseling after abortion, to limited pre-natal medical care. To safeguard the patient from the violation of her dignity and self-determination three traditional medical ethics concepts must be utilized by the organization ensuring that all the services being delivered are done so without the intentional or unintentional manipulation of a patient in a vulnerable life crisis.

a. Patient Autonomy: Patient Autonomy does not mean the facilitation of any legal choice of medical services on-demand. Patient autonomy carries with it the notion of self-determination and dignity which informs the manner and depth of communication between the clinician (any medical provider participating in the process of patient diagnosis, education, or treatment) and the patient. Thus a PRC should seek to ensure that:

- -All who work directly with a patient hold the highest regard for the nature and purpose of humanity represented in the form of a single human being (dignity).
- -All who work directly with a patient hold as a primary aim the facilitation of the patient's informed self-rule (self-determination).
- -All clinicians and advocates must always attempt to understand a patient and attempt to insulate her from coercive pressure.
- -The PRC and patient care team must ensure that information about a patient's condition as well as all treatment options are presented.
- -All clinicians must never manipulate or knowingly withhold information including downplaying the remotest side-effects of the various treatment options.
- -Non medical team members must never provide medical information beyond documents or scripts previously approved for appropriate patient circumstances by the organization's medical director.
- b. *Beneficence*: To act solely for the benefit of the patient. Continuity of care, and conflict of interest disclosure are key concerns in upholding this commitment.
  - -All patient care team members including non-medical staff must be dedicated to seeing the patient as a whole person by understanding a patient's past health history, current socio-economic circumstances, personal beliefs, and future health goals.
  - -A PRC facilitating limited medical care under the supervision of a medical director must view itself as a specialist and attempt whenever possible to refer each patient back to and work in conjunction with the patient's primary care provider.
  - -Anytime a woman is requesting medical care and NOT referred by her physician the PRC should take it as a cue that the patient's circumstances are coercive.
  - -All patient team members should be careful to reiterate to the patient the importance of the basic medical standard care which always encourages the least invasive treatment options first.
  - -All members of the patient care team must be committed to protecting the patient from any intentional or unintentional self-interest.
- c. *Non-maleficence*: Avoiding any act or treatment plan that would harm the patient or violate the patient's trust.
  - -All members of the patient care team must be committed first to prevention through good health and avoidance of behaviors leading to deteriorating conditions. Examples of reproductive health preventive care would be encouraging abstinence and/or mutual monogamy as well as STD testing and treatment safe-guarding the patient's future reproductive health.
  - -All members of the patient care team must be committed to maintaining patient confidentiality in an effort to safe-guard the dignity of the individual and the trust required for effective patient communication.
  - -All members of the patient care team must be committed to facilitating free and open communication with the patient which alone will yield appropriate prevention and treatment plans informed and freely chosen by the patient.

## II. <u>Duties to Society</u>

Because most PRCs represent the trust of the resources of the community to which they belong it is imperative that those resources be managed in a manner consistent with the clearly articulated objective of the organization. The community resources to be managed are largely made up of human and financial and must be distributed with integrity and justice.

- a. *Integrity*: A PRCs commitment to integrity is essential for the local PRC as well as its State and national counterparts to maintain its credibility with the society it serves.
  - -A PRC and the patient care team recognize that a patient's lack of knowledge places her in a position of extreme vulnerability to manipulation.
  - -Each member of the leadership and patient care team is dedicated to virtuous personal character if only to protect their patients from exploitation and victimization which comes with a lack of personal character.
  - -The leadership and all members of the patient care team are dedicated to understanding and practicing wisdom, empathy, temperance, courage, and justice both privately and professionally.
  - -The PRC leadership and patient care team are dedicated to holding both themselves and other members of the PRC movement accountable to these high moral standards even with the use of this code of conduct.
  - -A PRC and its various team members must maintain integrity to personal convictions in the face of increased government regulation, as well as encroaching consumerism in the form of on-demand request for abortion services.
  - -A PRC and its various team members is committed to maintaining integrity through the exercise of a right to refuse or recommend treatment that may be at odds with its stated positions of belief or moral convictions.
- b. *Justice:* Since there are limited resources available to address all the needs of women facing unplanned pregnancy, PRC leadership must make decisions about how to spend those resources day by day in a way that is not only equitable but most appropriate for the stated objective of the organization to reverse the abortion trend in their community.
  - -The PRC leadership must be committed to understanding the true needs of the community that the organization serves (those needs that cause a woman to be a victim of coerced decision-making) taking care to invest its resources in the places where it alone can have the most impact to reach and effectively serve women at risk for abortion.
  - -A PRC must be committed to resisting government regulation since government is not an expert in either medical care generally or assisting women facing unplanned pregnancy specifically. The medical community and PRCs are alone best suited to distribute resources to women facing unplanned pregnancy. Increased regulation will only serve to hinder excellent care.
  - -A PRC and patient care team must be committed to placing the health needs of a single patient over general notions of regulated care to a population.
  - -A PRC and the patient care team are committed first to serving the best interest of the patient and secondarily the policy and regulation of overly ambitious States, or Federal government.
  - -A PRC and the patient care team are committed to protecting society's most vulnerable: the sick, dehumanized, and disenfranchised.
- c. Education: Education involves both informing society at large as to how women facing unplanned pregnancy should be served and also showing them how they can invest their resources in the process.
  - -A PRC is committed to educating patients, individuals, churches, the media, legislators, medical providers, educators, and others regarding abortion and its impact on women and society.

-A PRC is committed to professional accountability willing to educate and be educated on the various managerial and legislative matters involved in operating non-profit organizations.

<u>Reference Notes</u>: This code of conduct is published in conjunction with the Commission for Reproductive Health Service Standards and is indebted to the following authorities for the general framework and philosophy:

American College of Physicians. Ethics Manual. 4<sup>th</sup> ed. Ann Intern Med. 1998; 128(7):576-94.

- Hippocrates. The Hippocratic Oath. Trans. in Kass, L. R. Toward a More Natural Science. New York: Simon and Schuster; 1988:228-9.
- Percival T. Medical Ethics; Of a Code of Institutes and Precepts Adapted to the Professional Conduct of Physicians and Surgeons. Manchester: S. Russel; 1803.
- President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research.

  Making Health Care Decisions: The Ethical and Legal Implications of Informed Consent in the Patient-Practitioner Relationship. Vol. 1. Washington: GPO; 1982.