

The proposed takeover by St Vincent's of the National Maternity Hospital will deny women their human rights in sexual, reproductive and maternal health care

The bid by a private Catholic entity, St Vincent's Healthcare Group (SVHG), for the National Maternity Hospital (NMH), will, if it succeeds, create the biggest maternity hospital in Europe, paid for by taxpayers, to be governed by Catholic teaching.

The integration of the new NMH into a strongly Catholic environment

In November 2016, Kieran Mulvey issued a report¹ outlining the agreement reached between SVHG and the NMH on its move to the campus of St Vincent's University Hospital, attached by connecting corridor. Under this agreement, the new maternity hospital is to become a wholly owned subsidiary of SVHG, like the other hospitals it owns: St Vincent's University Hospital (Elm Park), St Vincent's Private Hospital (Elm Park), and St Michael's Hospital (Dun Laoire). It also owns Our Lady's Hospice at Harold's Cross.

Wholly owned subsidiaries are owned and controlled by their parent company. The Mulvey report confirms the SVHG is to retain "*corporate unitary oversight*", and carry "*overall responsibility for the effective and efficient operation of the totality of the hospital campus*", that is, including the new NMH.

To facilitate the takeover, a new company, 'The National Maternity Hospital at Elm Park DAC', is to be set up. The board of this company is to comprise nine directors, four nominated by SVHG, four by NMH, and a so-called independent expert. The selection of this expert, an obstetrician-gynaecologist, will effectively be controlled by SVHG. The chair of the board is to be rotated between SVHG and NMH on a three-yearly basis. Sealing the integration for overall corporate and clinical governance by SVHG, the agreement makes provision for two NMH directors to sit on the SVHG board. The NMH master is to report to the clinical director of SVHG, and a single system of clinical governance is to operate for the provision of obstetrics and gynaecology across the new NMH and St Vincent's University Hospital.

In accordance with the Mulvey report, the Minister for Health Simon Harris confirmed to the media in April 2017 that the Religious Sisters of Charity (RSOC) – which ran some of the infamous Magdalene laundries – were to own the new NMH. Widespread public protest against this Church-State arrangement led to a statement issued on 29 May 2017 by Sr. Mary Christian, RSOC Congregational Leader, stating that the Sisters of Charity would

¹ 'Strictly Private and Confidential. Report to the Minister for Health, Simon Harris, T.D. on the Terms of Agreement between the National Maternity Hospital (Holles St.) and St. Vincent's Hospital Group regarding the Future Operation of the New Maternity Hospital – The National Maternity Hospital at Elm Park DAC.' Kieran Mulvey, Mediator, November 21st 2016. Released to the public on 25th April 2017.

“withdraw” from the operations of SVHG, and relinquish their 100 per cent shareholding in the Group to a new company to be called “St Vincent’s”.² As of today, this new company has yet to be incorporated.

The nuns’ withdrawal was successfully spun across government and media as a win-win for the public, who wish to see the development of secular healthcare and, as evidenced by the more recent repeal of the 8th amendment, in the field of reproductive health. Warmly welcoming the announcement, Simon Harris said the new NMH *“would be free from any religious or ethnic influence”*, and that this decision by the Sisters of Charity *“directly addresses concerns regarding the question of religious influence in the new National Maternity Hospital”*. Closer examination of the terms of withdrawal by the nuns shows a different picture.

The conditions of withdrawal by the Sisters of Charity

In her statement, Sr. Mary Christian confirmed the mission of the SVHG hospitals to offer a ministry of healthcare. She reaffirmed the nuns’ dedication to *“preserving the legacy of Mary Aikenhead”*, adding that the future directors of the new St Vincent’s would be *“true to the values of our Foundress”*. She also made it clear that under the new company, the SVHG board (on which two NMH directors are to sit), and its management and staff would continue *“to provide acute healthcare services that foster Mary Aikenhead’s core values of dignity, compassion, justice, quality and advocacy.”* This was confirmed in a statement by the chairman of SVHG, James Menton, who said that the SVHG board, management and 4,000 staff would continue to provide acute healthcare services in line with these values.

Sr. Agnes Reynolds, a leading member of the Sisters of Charity and member of SVHG, told the Irish Times that the new NMH would *“always respect the rights of the mother and the baby”*. Like Menton, she was evasive on the subject of the nuns’ influence over reproductive services to be provided by the new NMH, declining to make *“a judgement”* on that.

These statements were warmly welcomed by the NMH, a Catholic voluntary hospital. More recently, a spokesperson reiterated the hospital’s approval of the values of Mary Aikenhead to the Sunday Times on April 29 2018, stating that the NMH hoped these values *“would form part of the ethos underlying the new hospital, alongside best clinical practice.”*

The religious mission of the SVHG is based on the philosophy and code of ethics of the Religious Sisters of Charity. The code states: *“In our healthcare facilities any such procedures in which we do not respect the life and physical integrity of each human being from conception onwards violate the mission of safeguarding life and health.”*³ Staff attend

² <https://static.rasset.ie/documents/news/statement-by-sr-mary-christian.pdf>

³ <https://www.irishtimes.com/news/social-affairs/religion-and-beliefs/ivf-sterilisation-and-morning-after-pill-banned-by-sisters-of-charity-1.3064123>

courses in this religious mission. By 2005, more than a thousand staff of SVHG had attended this course.

In her statement, Sr. Mary Christian also confirmed that reference to the requirement to conduct and maintain the SVHG facilities in accordance with The Religious Sisters of Charity Health Service Philosophy and Ethical Code would be removed from the SVHG constitution, after their hospitals had transferred to St Vincent's, and *"replaced to reflect compliance with national and international best practice guidelines on medical ethics and the laws of the Republic of Ireland."*

However, the Aikenhead commitment is consistent with 'The Vatican Charter for Healthcare Workers', which promotes *"authentic faith"* and *"a true sense of morality"*.⁴ It is also in line with the 'Code of Ethical Standards for Healthcare', notably published for the first time in May 2018, by the Irish Catholic Bishops' Conference.⁵ The proposed change in text is thus consistent with the requirement for compliance with Catholic medical ethics. Speaking to the Sunday Times on 29 April 2018, Vincent Twomey, emeritus professor of theology at Maynooth, said that *"If they [St Vincent's] are going to be committed to a Catholic ethos, that would have to include Catholic ethics,"* adding that *"The core of the Catholic ethos is respect for human life."*

A Catholic ethos

Defining the Catholic ethos for healthcare facilities and practitioners, the Irish bishops' code, like that of the nuns, prohibits offering or referring a woman for abortion. Crisis pregnancy counselling with information on abortion contravenes the code; likewise counselling for families going through a fatal fetal abnormality diagnosis that refers to termination as an option. It also states that there can be no tests carried out by a Catholic facility that *"unjustly risk the life or health of the unborn"*, or if the result leads to *"the immoral procedure"* of abortion. This points to Catholic hospitals breaking the code by offering blood tests, scans or amniocentesis to identify anomalies, or dating scans, should their results inform decision-making on abortion.

With the exception of counselling on natural family planning, contraception is banned in all circumstances, including the contraceptive pill, IUDs, tubal ligation and vasectomy. These procedures were also banned under the nun's code. Emergency contraception, otherwise known as the morning-after pill, is defined by the bishops' code as an abortion that destroys *"an already existing human life"*, and is therefore prohibited, including in cases of rape.

⁴ 'The Charter for Healthcare Workers.' Vatican City, 1995. Available at: http://www.academyforlife.va/content/dam/pav/documents/papi/documentisantasede/ENGLISH/charter_for_health_care_workers_ENG.pdf

⁵ The Irish Catholic Bishops' Conference (2018). 'Code of Ethical Standards for Healthcare'. Veritas Publications, Dublin

Most fertility treatments contravene the code. It also states that any “*morally appropriate*” assisted human reproduction should only be available to heterosexual married couples, out-ruling unmarried women and LGBT couples. Assisting a woman to conceive if she is going to be a surrogate is not permissible either. Banning gender reassignment surgery, the code states that transgender people should instead be helped to “*come to terms with his or her bodily nature*”. All procedures which “*unnecessarily damage or destroy any part or function of the body*”, including “*some kinds of cosmetic surgery*”, are prohibited.

Reflecting the commitment of the nuns to promote the Catholic ethos of their hospitals through staff training, the bishops’ code also stipulates: “*When employing staff, particularly in executive positions, Catholic healthcare organisations must ensure that those employed are familiar with and supportive of this Code of Ethical Standards*”.

The obligation to adhere to the code is not limited to Catholic healthcare institutions and their practitioners. Confirming the influence that the Catholic ethos of St Vincent’s is set to have on the new NMH, the bishops’ code states: “*In some cases, independent healthcare practitioners, consultants, groups and companies may be attached to, or may operate under the auspices of, a Catholic institution or organisation. To the extent that their practice and presence is identified as part of, or as linked with, the Catholic entity, these practitioners, groups and companies should agree to abide by this Code of Ethical Standards.*”

As the government prepares legislation for the introduction of abortion services, the bishops’ code dictates that Catholic institutions cannot be compelled by legislation to provide services that contravene Catholic teaching. It states: “*The ethos of a healthcare institute has the character of an ‘institutional conscience’. It contributes to the formation of policy and the making of judgements in a manner which is consistent with reason. The ethos of the institution guides the institution in identifying both its operational priorities and the activities in which it cannot participate with integrity.*”

In the event that the legislation makes no provision for institutional conscientious objection to abortion, the code stipulates that Catholic values trump the law: “*If a particular law conflicts with the fundamental and inalienable rights of the human person, however, it conflicts with the common good and with reason and does not command obedience.*”

NMH State control and ownership

Plans for the new NMH are proceeding on the basis of the Mulvey report, confirmed by Minister Simon Harris to the Dáil on 13 June 2018. The State is therefore set to invest €300m in a new maternity hospital prohibited by a Catholic ethos from providing the full range of sexual, reproductive and maternal health care. While numerous essential services are excluded, the proposed funding directly vitiates the result of the recent referendum. Put

mildly, it is astonishing that Minister Harris should do this, given his public support of the Repeal movement.

The proposed takeover by SVHG of the NMH, a voluntary (i.e. private) Catholic hospital, is incompatible with women's fundamental rights and freedoms. Respecting the human rights of women and girls demands secular maternity hospitals that are publicly owned and publicly controlled. Instead of handing over the NMH to a Catholic healthcare entity, the State should now seize the opportunity to make the "National Maternity Hospital" a reality by taking it into State ownership.

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