

Open Letter to Religious Leaders on Maternal Mortality and Reproductive Justice

As religious leaders, we envision a just and inclusive world, where the rights of every woman to life, health, and safe childbirth will be protected.

Maternal mortality is the leading cause of death for women and girls of reproductive age. We mourn the more than 340,000 women and girls who die every year as a result of preventable complications from pregnancy and childbirth. Whether across the world or in our own communities, the preventable death of any woman diminishes the humanity of all. As religious leaders, we are called to see, hear, and respond to this crisis.

We invite you to consider the religious foundations for reducing maternal mortality and promoting universal access to reproductive health services. We seek to create a just world where all families not only survive, but thrive. No woman should lose her life to create a new one.



ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH

Access to sexual and reproductive health services is a matter of life and death. Beginning at puberty, women and men must have access to comprehensive, high-quality sexual and reproductive health services, including lifespan sexuality education; contraception; STI/HIV prevention; ante-, pre-, and post-natal care; emergency obstetric care; newborn care; and safe abortion and post-abortion care. Hospitals and health services, regardless of religious affiliation, must provide or refer clients to this full range of reproductive health services. Services must be culturally specific and competent, and offered without regard to sex, income, race, religion, marital status, gender identity, or sexual orientation. The rights of both women and men to sexual pleasure and intimacy should be recognized and respected.



RESPECT FOR LIFE—WOMEN, CHILDREN, AND FAMILIES

Our religious traditions affirm that humanity is created in the divine image and that life is sacred. Our faiths celebrate the divinely bestowed blessings of generating life and assuring that life can be sustained and nurtured. It is a moral outrage that nearly 1,000 women die each day of preventable, pregnancy-related causes. The sacredness of human life is best upheld when women and men create human life intentionally and women are able to have healthy pregnancies and childbirths. We affirm women and men as moral agents who have the capacity, right, and responsibility to make their own decisions about procreation, including family size and the spacing of their children.

SACRED TEXTS AND TRADITIONS SUPPORT MOTHERS AND FAMILIES

Our sacred texts and traditions can be rich sources of support for creativity, generativity, and family formation. They call us to love our neighbor, promote healing and wholeness, challenge injustice, and be faithful stewards of creation. They compel our commitment to the poor, the most marginalized, and the most vulnerable among us. Religious leaders have a moral obligation to challenge the use of scriptural texts to support cultural practices that harm or subjugate women and girls, including female genital mutilation, early marriage and coerced childbearing.



COMMITMENT TO REPRODUCTIVE JUSTICE

The lack of sexual and reproductive health services in many parts of the world is an affront to moral agency and a threat to justice and equality. For women and families to thrive, they must be free from oppressions. Our commitment to reproductive justice demands that we work to ameliorate poverty, social inequalities, ignorance, sexism, environmental degradation, and racism. There must also be a societal commitment to full and equal educational and employment opportunities for women and girls.

Women and men must have the right to accept or reject the principles of their own faith without legal restrictions. We oppose any attempt to make specific religious doctrine concerning pregnancy, childbirth, or abortion the law in any country in the world.



CALL TO ACTION

Too many people of faith, particularly in the developed world, are simply unaware of the tragic scale of maternal mortality. We call on leaders of all faiths to raise a prophetic voice to address maternal and reproductive health—globally and in their own communities.

We urge religious leaders to:

- Educate themselves and their faith communities about the crisis of maternal mortality and the urgent need for sexual and reproductive health services worldwide.
- Seek training to competently address the sexuality and reproductive health needs of individuals and families within their own congregations.
- Publicly advocate for increased support for maternal health and reproductive health services, domestically and globally.
- Call on faith-based health delivery organizations to ensure access to the full range of sexual and reproductive health care services.

- Work within their traditions to make the reduction of preventable maternal mortality a social justice priority.
- Speak out against restrictions on access to sexual and reproductive health services.
- Support women's and girls' access to education and employment.
- Join in multifaith dialogue and coalitions to promote women's and families' health and well-being in the United States and around the world.



IN CLOSING

We are called to bear witness to the harsh reality that, without comprehensive sexual and reproductive health services, women and girls around the world suffer illness, violence, and death. Our mission as faith communities compels us to work together to assure that all may flourish. We renew our call to sexual and reproductive justice. We make a solemn commitment to help create a just and equitable world where no woman will die giving birth to the next generation.

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RELIGIOUS SUPPORT FOR MATERNAL HEALTH AND REPRODUCTIVE JUSTICE

The following religious denominations and institutions have policies or programs that support the Millennium Development Goals and/or international family planning:

American Baptist Churches USA • Christian Church (Disciples of Christ)
The Episcopal Church (USA) • Evangelical Lutheran Church in America
National Council of the Churches of Christ in the USA • Presbyterian Church (U.S.A.)
United Church of Christ • The United Methodist Church

Union for Reform Judaism • Unitarian Universalist Association Universal Fellowship of Metropolitan Community Churches

The Open Letter was developed at a colloquium in 2010, sponsored by the Religious Institute and funded by the United Nations Foundation. Participants included Rev. Debra W. Haffner, Religious Institute; Dr. Mary E. Hunt, Women's Alliance for Theology, Ethics and Ritual (WATER); Ruth Messinger, American Jewish World Services; Dr. Fulata Moyo, Circle of Concerned African Women Theologians; Dr. Maria José Rosado-Nunes, Católicas pelo Direito de Decidir-Brasil; Jon O'Brien, Catholics for Choice; Dr. Mercy Oduyoye, Institute of African Women in Religion and Culture; Dr. Kate Ott, Religious Institute; Daniel Pellegrom, Pathfinder International; Rev. Dr. Rebecca Todd Peters, Elon University; Rabbi Mychal Springer, The Jewish Theological Seminary; Katey Zeh, General Board of Church & Society of The United Methodist Church.

MATERNAL HEALTH AND REPRODUCTIVE JUSTICE

Global leaders from 192 countries have agreed to achieve eight Millennium Development Goals by the year 2015. Goal Five calls for improved global maternal health by reducing maternal mortality by three quarters and achieving universal access to reproductive health.¹

Maternal Mortality

- Every 90 seconds, somewhere in the world a woman dies from complications related to pregnancy or childbirth—approximately 343,000 women every year. The top five causes of maternal death are severe bleeding, infections, eclampsia (a form of toxemia), obstructed labor and unsafe abortion.²
- Ninety-nine percent of pregnancy-related deaths occur in developing countries.³
- Pregnancy is the leading cause of death for girls ages 15–19 worldwide.⁴
- Forty nations have a lower risk of maternal death than the U.S.⁵

Maternal Health

- Of the 123 million women living in developing countries who give birth each year, only about half receive the maternal and newborn care they need. Almost one-fifth of these women will have obstetric complications that go untreated. Pregnancy and childbirth leave millions of women and girls with short- or long-term injuries, infections or disabilities.
- An estimated 19 million unsafe abortions occur each year in developing countries.⁸ Unsafe abortions account
 for at least 13 percent of all maternal deaths and claim 50,000–70,000 women's lives each year.⁹

International Family Planning

- Worldwide, 215 million women have an unmet need for modern contraception. If the unmet need for modern methods were fully satisfied, an additional 53 million unintended pregnancies would be averted each year, resulting in 22 million fewer unplanned births, 25 million fewer induced abortions, and seven million fewer miscarriages. Doubling current global investments in family planning and pregnancy-related care (to approximately \$24.6 billion) could save the lives of 400,000 women and 1.6 million infants every year. ¹⁰
- Maternal mortality could be reduced by more than 70 percent by improved access to reproductive health services, including contraception, treatment for pregnancy and birth complications, and strategies to prevent or manage abortion-related complications.¹¹

References

① United Nations, "End Poverty 2015: Millennium Development Goals," http://www.un.org/millenniumgoals/ (accessed June 9, 2010). ② Hogan, Margaret C. et al., "Maternal Mortality for 181 Countries, 1980–2008: A Systematic Analysis of Progress Towards Millennium Development Goal 5," *The Lancet* Vol. 375, no. 9726 (2010): 1609–23, https://www.who.int/pmnch/topics/maternal/20100402_ihmearticle.pdf. ③ Cohen, Susan, "Family Planning and Safe Motherhood: Dollars and Sense," *Guttmacher Policy Review* Vol. 13, no. 2 (2010): 12–16. ④ Population Action International, "Fact Sheet: How Family Planning Protects the Health of Worner and Children" (May 1, 2006), http://www.populationaction.org/Publications/Fact_Sheets/FS2/Summary.shtml. ⑤ World Health Organization, *Maternal Mortality in 2005: Estimates Developed by WHO, UNICEF, UNFPA, and The World Bank* (2007), http://whqlibdoc.who.int/publications/2007/9789241596213_eng.pdf. ⑥ Cohen, Susan, "Family Planning and Safe Motherhood: Dollars and Sense," *Guttmacher Policy Review* Vol. 13, no. 2 (2010): 12–16. ④ Human Rights Watch, "No Tally of the Anguish: Accountability in Maternal Health Care in India" (October 7, 2009), http://www.hrw.org/en/node/85773/section/6. ⑥ United Nations Population Fund (UNFPA), "Contraceptives Save Lives: Women are Dying Every Day," http://www.unfpa.org/rh/planning/mediakit/docs/new_docs/sheet2-english.pdf (accessed June 9, 2010). ② Cohen, Susan, "Family Planning and Safe Motherhood: Dollars and Sense," *Guttmacher Policy Review* Vol. 13, no. 2 (2010): 12–16. ⑥ International Planned Parenthood Federation and Guttmacher Institute, "Facts on Satisfying the Need for Contraception in Developing Countries" (April 2010), http://www.guttmacher.org/pubs/FB-Unmet-Need-Intl.pdf. ⑥ Singh, Susheela et al., *Adding It Up: The Costs and Benefits of Investing in Family Planning and Maternal and Newborn Health*, New York: Guttmacher Institute and United Nations Population Fund (2009), 4, http://www.guttmacher.org/pubs/AddingItUp2009.pdf.

