

A RESOLUTION SUPPORTING THE PRINCIPLES OF INFORMED CONSENT AND A PATIENT’S FUNDAMENTAL RIGHT TO COMPLETE AND ACCURATE MEDICAL INFORMATION AND FREEDOM FROM COERCION IN THE DELIVERY OF REPRODUCTIVE HEALTH SERVICES (2012-01-14/R-4)

WHEREAS, it is a patient’s fundamental right to medical counseling that is free of intimidation, coercion, harassment, and manipulation;

WHEREAS, it is a patient’s fundamental right to receive the comprehensive, objective, and medically and factually accurate information necessary to give full and informed consent to safe health care;

WHEREAS, “medically and factually accurate and objective” information is that which is recognized as such by accepted scientific methods and professional organizations and agencies with relevant expertise in the field;

WHEREAS, the American Medical Association (AMA) recognizes that “the patient’s right to self-decision can be effectively exercised only if the patient possesses enough information to enable an intelligent choice;”¹

WHEREAS, the President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research concludes, "A choice that has been coerced, or that resulted from serious manipulation of a person's ability to make an intelligent and informed decision, is not the person's own free choice;”²

WHEREAS, the American College of Obstetricians and Gynecologists (ACOG) Committee on Ethics includes in its definition of informed consent the recognition of “a patient’s moral right to bodily integrity, to self-determination...and the patient’s freedom to make decisions within caring relationships;”³

WHEREAS, federal family planning guidelines define nondirective counseling as helping “clients resolve uncertainty, ambivalence, and anxiety in relation to reproductive health and to enhance their capacity to arrive at a decision that reflects their considered self-interest;”⁴

WHEREAS, a growing number of facilities in North Carolina that claim to offer comprehensive pregnancy counseling are connected to a national movement whose mission is to disseminate reproductive health information that does not meet the principles of informed consent;

WHEREAS, a 2011 investigation of 66 such facilities in North Carolina found intentionally deceptive practices—including disseminating inaccurate information regarding family planning, infertility, breast cancer, mental health risks, and pregnancy termination,⁵ findings confirmed in a subsequent academic review by a leading researcher at the University of North Carolina at Chapel Hill;⁶

WHEREAS, in 2011, the City Council adopted a resolution representing its members’ commitment to defending comprehensive reproductive-health care options in the local community;⁷

WHEREAS, in 2011, the North Carolina General Assembly passed the so-called “Women’s Right to Know Act,” a law that forces the North Carolina Department of Health to maintain registries of, and refer women to, ideologically driven facilities that often use misinformation to advance an anti-abortion, anti-contraception opinion or bias, and separately passed a law channeling funding to such facilities through the sale of “Choose Life” license plates, essentially conferring legitimacy on their deceptive practices.⁸

NOW, THEREFORE, BE IT RESOLVED by the Council of the Town of Chapel Hill that the Town Council

- 1) Recognizes that patients have the fundamental right to the comprehensive, unbiased, and medically and factually accurate information they need to make informed decisions about their full range of health-care;
- 2) Considers deception and misinformation to undermine this right; and
- 3) Urges the North Carolina General Assembly to protect this fundamental right by pursuing and upholding public policies that ensure these principles are applied to pregnancy-related counseling.

This the 14th day of January, 2013.

¹ Council on Ethical and Judicial Affairs, *American Medical Association (AMA), Informed Consent, Ethical Opinion E-8.08, Code of Medical Ethics*, at <http://www.ama-assn.org/ama/pub/category/print/8488.html> (last updated July 22, 2002).

² President's Commission for the Study of Ethical Problems in Medicine and Biomedical and Behavioral Research, “Making Health Care Decisions: A Report on the Ethical and Legal Implications of Informed Consent in the Patient Practitioner Relationship”

³ ACOG Committee on Ethics, *Maternal Decision Making, Ethics, and the Law*, Num. 321, Nov. 2005 at <http://www.acog.org/~media/Committee%20Opinions/Committee%20on%20Ethics/co321.pdf?dmc=1&ts=20121213T1119223371>

⁴ Office of Population Affairs (OPA), U.S. Department of Health and Human Services (HHS), *Program Guidelines for Projects for Family Planning Services* §§8.2 (2001) at <http://www.hhs.gov/opa/title-x-family-planning/title-x-policies/program-guidelines/2001-ofp-guidelines-complete.html>

⁵ NARAL Pro-Choice North Carolina Foundation; *The Truth Revealed: North Carolina’s Crisis Pregnancy Centers* (2011) at http://www.prochoicenc.org/assets/bin/pdfs/2011NARAL_CPCReport_V05_web.pdf (last visited Aug. 17, 2012).

⁶ Amy G. Bryant & Erika E. Levi, *Abortion misinformation from crisis pregnancy centers in North Carolina* CONTRACEPTION 1 Dec. 2012 (Vol. 86, Issue 6) 752-756l.

⁷ See *A Resolution in Opposition to House Bill 910* defending the ability of civil servants in Chapel Hill to obtain full reproductive-health coverage . 2011-06-13/R-12 at http://chapelhill.granicus.com/MediaPlayer.php?view_id=7&clip_id=1047&meta_id=58046.

⁸ N.C. Gen. Stat. § 90-21.80.