**Doctors for Choice UK Position Statement**

**Conscientious objection**

The 1967 Abortion Act allows medical staff to opt out of participating in abortion care on grounds of conscientious objection, unless an abortion is required in an emergency to save a woman’s life or prevent grave permanent harm.Doctors for Choice support this right to conscientious objection. However, opting out of legally sanctioned, clinically appropriate medical treatment is a serious moral decision for doctors and should only be taken:

* When they have a sincere and deeply held belief that the treatment is morally wrong
* After they have carefully considered the potential outcomes/impact of opting out of care on, for example, women who request abortions, their colleagues and the health service

If doctors do decide to opt out of a particular treatment they should do everything they can to mitigate against any adverse impact on the above. Most importantly, women requesting abortions must never suffer in any way because of the personal beliefs of a doctor.

If a situation arises where a woman who needs and abortion ends up consulting with a doctor who has a conscientious objection:

* The doctor should not share their personal views about abortion unless explicitly invited to do so by the woman
* The doctor should ensure that the woman can access an abortion without delay

Doctors for Choice UK believes:

* Doctors with a conscientious objection should be open with their employers and colleagues about their beliefs whenever doing so might lead to an improvement in care.
* Doctors with a conscientious objection should not take a job where a substantial/significant part of their workload involves the treatment they object to.
* Doctors must not try to influence women’s decision about the treatment they object to. For example, telling women that it is not in their interests to have an abortion, or putting them off having an abortion by e.g. giving false information about the risks, telling them abortion is wrong. These are serious breaches of professionalism and should be reported to the GMC.
* A respectful discussion about conscientious objection should form a part of annual appraisals with a focus on how the individual doctor and their team can ensure care is never compromised by a doctor’s personal beliefs.

Doctors for Choice UK agrees with the BMA , that if a conflict arises between the interests of a patient and a doctor’s freedom to exercise a conscientious objection, the conflict must be resolved in favour of the patient.

We note that conscientious objection relates to any clinical activities involved in the provision of abortion care and not related activities such as administration, supervision, planning, delegating and supporting. Doctors for Choice UK are opposed to extending the activities to which a healthcare professional could claim a conscientious objection to, as this could have a hugely adverse effect on provision of abortion care in the UK.

Furthermore, despite recognising the fact that some doctors have strongly held views about abortion being morally wrong and supporting their right to object to participation in treatment based on reasons on conscience, we also acknowledge that doctors choosing to work in abortion care commonly do so from positions of conscience and have a 'conscientious commitment' to providing abortion care. Many are advocates for sexual and reproductive rights and have an acute awareness of the vital need for legal, accessible and safe abortion care and the dire consequences to women when this is not available.