

RESOLUTION NUMBER: C- 04

REFERRED TO: Reference Committee on Public and Occupational Health

SUBJECT: Contraceptive Access is an Integral Component of Health Care

SUBMITTED BY: Angela Dempsey, MD, MPH, FACOG and Dawn Bingham, MD, MPH, FACOG

1 **WHEREAS;** physicians have a professional and ethical obligation to act in the best interest
2 of their patients by following evidence-based practices and to respect their patients' autonomy to
3 make their own decisions about which health care interventions they will receive; and

4 **WHEREAS;** the practice of medicine is centered around patient autonomy. Patients have
5 the right to take into account their own personal calculus of the risks and benefits of any clinical
6 situation, option, treatment, and have the right to make decisions that are in their own personal
7 interest regarding their own health and welfare; and

8 **WHEREAS;** the physician-patient relationship relies on a physician's ability to use his or
9 her medical judgment and expertise to provide information and treatment that is in the best interest
10 of a patient; and

11 **WHEREAS;** the South Carolina Medical Association takes all reasonable and necessary
12 steps to ensure that its members can exercise medical decision-making and treatment in good faith,
13 and in concert with informed consent and patient autonomy; and

14 **WHEREAS;** South Carolina state laws should support physicians to practice within the
15 accepted standard of medical care and within the scope of training for their specialty, and with
16 respect to medical subject matter authority and expertise; and

17 **WHEREAS;** contraception is a common, safe medical intervention associated with
18 multiple benefits to the health of mothers, newborns, families, and communities including
19 facilitation of pregnancy spacing for improved maternal and child health, reduced maternal
20 mortality, improved female engagement in the work force, and increased economic self-
21 sufficiency for women; and

22 **WHEREAS;** more than 99% of sexually experienced women in the United States have
23 used at least one contraceptive method; and

24 **WHEREAS;** many factors inform a patient’s decision to use contraception including, but
25 not limited to, the desire to time and space pregnancy to optimize physical, emotional, and financial
26 well-being; the need to avoid pregnancy in the setting of medical conditions that make pregnancy
27 and/or child-bearing high risk to the mother’s health; and the need to treat a variety of medical
28 conditions such as polycystic ovary syndrome, endometriosis, and abnormal uterine bleeding; and

29 **WHEREAS;** many contraceptive methods offer health benefits in addition to
30 contraceptive effectiveness including cancer prevention, reduced frequency of ovarian cysts,
31 treatment of menstrual bleeding, decreased anemia, and treatment of menstrual pain; and

32 **WHEREAS;** laws and policies that restrict access to a full range of contraceptive options
33 violate long-established and widely accepted medical ethical principles of beneficence,
34 nonmaleficence, justice, and respect for patient autonomy; and

35 **WHEREAS;** barriers to contraceptive access and adverse reproductive health outcomes
36 are experienced inequitably by low-income women and black, indigenous, and other women of
37 color; and

38 **WHEREAS;** pregnancy is not a benign condition, and access to contraception allows
39 patients to decide whether and when to take the risks associated with pregnancy; and

40 **WHEREAS;** government or other third parties that seek to restrict a physician's ability to
41 use his or her professional medical judgment as to the treatment that is in the best interest of a
42 patient compromise the trusted nature of the physician-patient relationship and diminish patient
43 safety and autonomy; now, therefore, be it

44 **RESOLVED;** that the South Carolina Medical Association affirms that there is broad
45 medical consensus as articulated by the American College of Obstetricians and Gynecologists that
46 access to comprehensive contraceptive care and contraceptive methods is an integral component
47 of reproductive health care; and

48 **RESOLVED;** that the South Carolina Medical Association affirms that government and
49 other third-party interference in evidence-based medical care, including contraception,
50 compromises the sanctity of the physician-patient relationship and undermines the provision of
51 quality health care; and

52 **RESOLVED;** that the South Carolina Medical Association affirms that reproductive
53 autonomy is a key determinant of one’s overall health and affirms the autonomy of adolescents to
54 obtain contraception as mature minors; and be it further

55 **RESOLVED;** that the South Carolina Medical Association opposes any government
56 regulation or legislative action which would criminalize or restrict physicians who provide
57 evidence-based medical care, including contraceptive care, within the accepted standard of care
58 according to nationally recognized professional practice guidelines, and the scope of a physician's
59 training and professional judgment.

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