

Secular Medical Forum, 25 Red Lion Square, London WC1R 4RL

<http://www.secularmedicalforum.org.uk>

Registered Company No. 7237231

Response from the Secular Medical Forum (SMF) to the consultation:

Equality in Developing Surgical Curricula

Deadline for submissions 15th Feb 2016

Submitted 12th February 2016

Thank you for contacting the SMF seeking our response to the above consultation.

Before addressing the four questions directly, we would like to make a few comments and observations.

The SMF is a non-profit organisation working to ensure that patients are neither harmed nor disadvantaged by the imposition on them of other people's personal religious beliefs.

As a general rule we recommend that trainees be taught that the overriding principle is that there should be no exception to general ethical principles.

The SMF wishes to ensure that colleges and curricula are not unduly influenced by considerations of religious dogma or acquiescence with religious privilege.

We have no objections to patients or doctors peacefully expressing their personal beliefs. Nevertheless, the expression of those beliefs must necessarily be limited by the impact this has on other people's rights. We are concerned that patient autonomy and choice of reasonable legal appropriate treatment should not be limited by a doctor's religious beliefs.

The SMF is particularly concerned where the expression of a doctor's religious beliefs has a harmful impact on a patient who might not share those beliefs.

In the surgical setting, two such examples are:

- i) where the refusal by a trainee to refer or perform an abortion obstructs a patient's necessary treatment
- ii) where the decision to operate on a healthy non-consenting child for religious reasons such as ear piercing or forced genital cutting results in non-therapeutic, non-consenting permanent bodily modification; this constitutes a violation of that person's fundamental human rights. Our experience has been that such human rights violations are frequently justified by some parents and some doctors as somehow 'necessary' to the expression of the child's parent's religious belief.

We recommend that the surgical curriculum should include teaching to trainees that they may encounter a few specific areas where children are submitted to surgical procedures, such as genital surgery, ear piercing etc. which are not medically required. Trainees should be encouraged to consider these matters from an open secular viewpoint and should be taught that requests or demands for exceptions from ethical principles and practice citing religious belief should be no more valid than for any other reason and that such practices are unethical.

We note that refusal by some surgeons to perform abortions can sometimes result in a disproportionate workload falling on those surgeons who do not (initially) conscientiously object. Whilst we support the principle of conscientious objection in those areas specified in law, we recommend that appropriate safeguards are put in place to guarantee continuity of service provision irrespective of the religious beliefs of surgical trainees.

Further, we recommend that where a surgical rotation includes such work, the onus should be on the applicant to ensure that they declare any unwillingness or conscientious objection during the application process.

In more general terms our members sought clarification as to what equalities are being considered.

Addressing the specific questions:

1. What sort of barriers to successful careers within surgery, do your members face?

Specifically as a result of their secular position – no additional barriers to those already stated.

2. How are your members discriminated against, if at all, when they undertake a surgical career?

As a result of their secular ‘orientation’ there is no evidence of any discrimination.

3. How can we help your members to feel included and supported when making curricula changes?

All members of SMF will reasonably be expected to be represented by their professional associations such as the BMA, ASIT, BOTA. Inclusion will be achieved if there is meaningful consultation with those bodies. Issues of race, gender, orientation are catered for by all these and by legislation.

4. What are the sorts of things that you think we should consider and implement for the benefit of your members when we make any changes.

Our members will benefit if there is meaningful consultations with those other bodies. Please see our earlier comments.

If you wish to discuss any of the points raised in more detail or if you wish to arrange a meeting please contact:

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