

**Religion, Reproductive Health and
Access to Services:
A National Survey of Women**

**Conducted for
Catholics for a Free Choice**

**By
Belden Russonello & Stewart**

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This survey was conducted by Belden, Russonello & Stewart for Catholics for a Free Choice.

Belden Russonello & Stewart is an 18-year-old Washington, DC-based public opinion research firm specializing in surveys and focus groups for non-profit organizations and political campaigns.

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Catholics for a Free Choice shapes and advances sexual and reproductive ethics that are based on justice, reflect a commitment to women's well-being, and respect and affirm the moral capacity of women and men to make sound decisions about their lives. Through discourse, education, and advocacy, CFFC works in the United States and internationally to infuse these values into public policy, community life, feminist analysis, and Catholic social thinking and teaching.

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I. Introduction

As health care in the United States continues to evolve, takeovers and mergers involving community and non-religious institutions and Catholic institutions, and the influence of Catholic church teachings on health care, are growing. Reproductive health services, the extent and type of referrals and counseling given to patients, the filling of prescriptions, and other aspects of health care—especially for women—may feel the impact of religious dictates in medical settings. Catholics for a Free Choice asked Belden Russonello & Stewart to conduct public opinion research to document the views of American women regarding health services that are important to safeguard in this environment. The survey results reported are based on a probability sample of 1,000 women nationwide. Interviewing was conducted from February 22 to March 5, 2000.

II. Executive Summary

American women want and expect a wide range of health services to be available to them, regardless of the religious affiliation of the hospitals, pharmacies, or insurance companies they rely on in their communities. Women strongly believe that Catholic religious teachings should not be allowed to influence the kinds of health services that are available. Likewise, women strongly oppose potential legislation allowing hospitals or pharmacists the right to refuse to perform or supply medical services because of religious beliefs.

Large majorities disapprove of hospitals not permitting doctors to provide certain procedures, but they are divided in their opinions regarding a doctor's right to deny services based on the doctor's own religious beliefs.

Women's expectations regarding access to reproductive health services in Catholic and community hospitals:

- The Belden Russonello & Stewart national survey reveals that American women of all religious backgrounds believe that access to health care is a *right* to which all people are entitled.
- If they entered a hospital, many would *expect* to find the full range of reproductive health services regardless of the religious affiliation of that hospital. A plurality of women (45%) say that if they were admitted to a Catholic hospital, they believe they would be able to obtain medical services that may go against Catholic religious teaching.

- They believe a broad range of reproductive health services *should* be provided by community hospitals where they live. Whether or not an institution is affiliated with the Roman Catholic church, the great majority of women want their hospital to offer medically indicated abortions (87%), birth control pills (91%), sterilization procedures (85%) and morning-after pills for rape victims (78%). Nearly six in ten (57%) want their hospital to provide morning-after pills to prevent any other unplanned pregnancies.
- A smaller percentage—but still half (50%)—expressed a preference for a community hospital that performs elective abortions when the health of the woman is not at risk, over a hospital that does not provide this service.

Insurance:

- The survey also shows that over eight in ten (84%) women believe that their health insurance policies should continue to cover reproductive health care services no matter what the religious affiliation of the insurance company providing them.

The doctor-patient relationship and exemptions based on conscience:

- Women are extremely protective of their relationships with their doctors. Three in four (75%) insist that hospitals should not forbid for religious reasons any woman's medical treatment legitimately prescribed by a doctor.
- The survey also discloses broad opposition to any legislation giving hospitals or pharmacists the right to refuse to provide medical services or medication that conflicts with a religious belief (79% hospitals and 83% pharmacists).
- Women are closely divided on whether an *individual* physician should be permitted to deny a patient medical services that violate the doctor's personal religious beliefs. Nearly five in ten (49%) of the women support such an exemption, while 46% oppose it.

Obligation to refer:

- Even when a hospital or pharmacy refuses to provide reproductive health services, women say owners of these institutions have an obligation to provide referrals to another hospital or pharmacy where abortions, birth control pills or other reproductive health services can be readily obtained (88% hospitals and 90% pharmacies).

Government funding:

- Over eight in ten (85%) women believe that any Catholic hospital that receives government funds—and almost all do—should be required to provide women's reproductive health services.

Guarding against the negative impact of mergers:

- Nearly three out of four (74%) women would oppose a merger of a Catholic and a non-Catholic hospital if that would mean women were denied reproductive health services. Similarly, 68% of women say they would disapprove if a Catholic institution became the only hospital in their community and prohibited reproductive health services.

Differences in opinions:

- *Catholics:* Even though the numbers are lower than for other women surveyed, a majority (usually a large majority) of strongly religious Catholic women still take the right-to-choice position on all the questions we posed. Two exceptions are the provision of legal abortions in hospitals, which gets support from only 38%, and the exercising of exemptions based on conscience (so called conscience clauses) by doctors, which wins the support of six in ten strongly religious Catholic women.
- *Age:* Middle-aged (45-59) and younger women (18-29 and 30-44) reflect almost identically high degrees of enthusiasm for access to all categories of reproductive health services. Women over 60, meanwhile, also believe in full access to reproductive health services, but by smaller majorities and with less intensity than younger women.
- *Political party:* Democrats and independents show the strongest support for making sure that hospital-based reproductive health services are fully available; Republican women indicate somewhat less support. But taken together, there are wide majorities for access to women's medical services among all political categories.
- *Socio-economic factors:* Similarly, there is a slight drop-off of support for wide access to reproductive health services among women who have not been to college and for women whose family incomes fall below \$25,000.

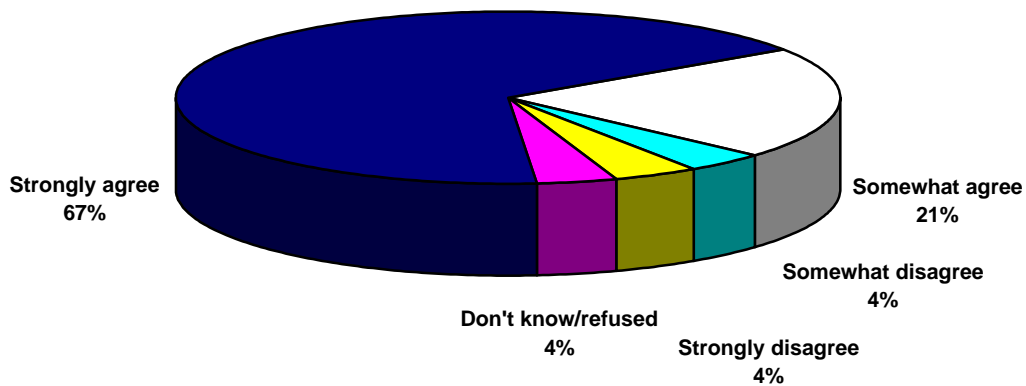
However, these modest differences only emphasize the widespread agreement among all demographic groups that women should have access to reproductive health care at community hospitals whatever the hospitals' religious affiliation.

III. Detailed Findings

1. Health care as a right

The BRS national survey reveals a strong belief among women that hospitals of all types are obligated to deliver the full range of women's reproductive health services. We first asked the respondents if they agreed with the proposition that access to health care should be a right in this country. Two of every three strongly agreed.

Health care should be a right



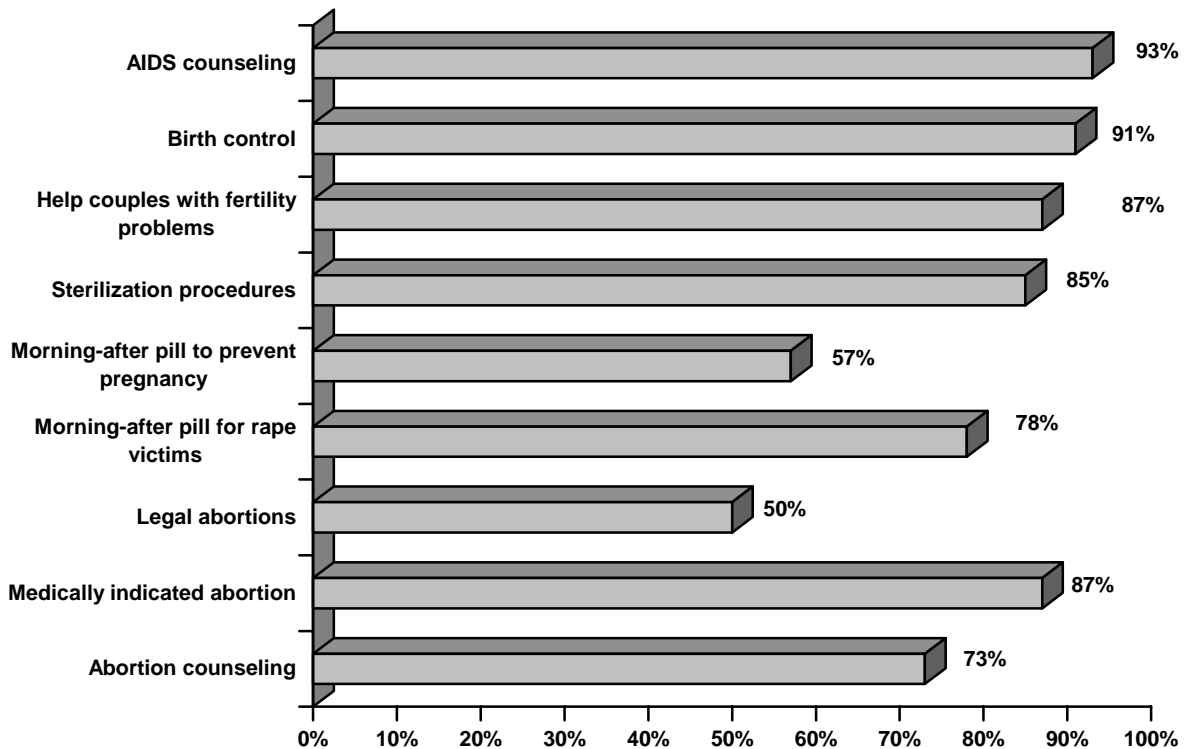
2. Do you agree or disagree with people who say access to health care should be a right in this country? Is that strongly or somewhat?

2. Demand for a variety of services

Then, we posed a series of questions about specific types of services women would prefer to have at a hospital in their community regardless of whether they may actually use any particular service themselves. The results were overwhelming. Large majorities emerged in support of access to sterilization procedures for men and women, fertility treatment, AIDS counseling, abortion counseling, birth control, and abortions when the woman's life or health are threatened.

Women of all religions, ages, educational backgrounds and income groups voiced broad support for a variety of services.

Services desired in hospitals



5-13. Now I'd like to ask you about the types of services you would prefer to have at a hospital in your community, regardless of whether you personally would use the particular services. Which of these two types of hospitals would you prefer to have as your community hospital: One that offers ____ or one that does not?

Specifically:

- AIDS counseling, including condom use, is very much in demand. Fully 93% prefer a hospital that provides AIDS counseling over one that does not.
- Hospitals providing birth control are preferred by over nine in ten (91%) American women. Efforts to help the infertile have children and the provision of sterilization procedures are equally important. Close to nine in ten (87%) would like their community hospital to provide services for fertility treatment and 85% say they would prefer that their community hospital provide sterilization procedures for men and women.
- Nearly four of every five of those questioned (78%) say their hospital should provide the morning-after pill for anyone who has been raped. Support is high among all groups, but especially among single and politically independent women.
- Over half of American women (57%) want a hospital that offers morning-after pills to prevent unplanned pregnancies. Support here is strongest among less religious, single, young, low-income and Democratic women. Broken down by religious belief, one in two strongly religious Catholic women (52%) supports the provision of morning-after pills, and 41% do not. Just 49% of women of all faiths who consider themselves to be strongly religious think hospitals should provide morning-after pills to prevent unplanned pregnancies.

Abortion has been and continues to be one of the most divisive issues of our time and the percentage of women who want their community hospital to provide legal abortion is just 50%, while 42% would prefer their hospital not provide this service.

- Among religious women of all faiths who are strong believers, 37% want a hospital that provides elective abortions, compared to 66% of those who are less religious who prefer access to elective abortions.
- In spite of the high-profile Roman Catholic church opposition to all abortions, just under four of every 10 women (38%) who consider themselves to be strongly religious Catholics prefer a hospital that offers abortions, while a small majority of Catholics (52%) who are less religious want this service.

There is also a split on this question among women of different incomes or educational achievement.

- Only two in five (41%) women who have not been to college prefer a hospital offering elective abortions, as opposed to almost identical majorities (57% and 56%) among women who have some college education or who have earned a bachelor's degree.
- Similarly, three of every five women (60%) who earn more than \$50,000 want abortion available in their community hospital, while 38% of those who earn less than \$25,000 want this service.

There is strong support for abortion when the life or health of the woman is endangered. Fully 82% of women want their local hospital to offer abortion procedures in such cases.

- Even though there are variations in levels of support by religiosity, age and party, support for medically indicated abortion never drops below eight in ten in any of these groups.

Furthermore, 73% prefer a hospital that offers abortion counseling and referral.

- Support is highest among less religious women, but even among strongly religious Catholic women a majority (54%) would choose the institution that provides abortion counseling and referral.

**Desired services in hospitals
by key segments of women**

	Birth control (Q12)	Help couples with fertility problems (Q8)	Sterilization procedures (Q6)	AIDS counseling (Q9)	Morning after pill for unprotected intercourse (Q13)	Morning after pill for rape victims (Q5)	Legal abortion (Q7)	Abortion when woman's life/health in danger (Q10)	Abortion counseling (Q11)
Women	91%	87%	85%	93%	57%	78%	50%	87%	73%
Catholic	90%	87%	77%	89%	57%	76%	48%	86%	65%
Other	91%	87%	88%	94%	56%	80%	49%	87%	76%
Strongly religious									
Catholics	82%	84%	67%	80%	52%	68%	38%	82%	54%
Less religious Catholics	93%	89%	81%	94%	59%	80%	52%	87%	70%
Strongly religious (all)	88%	83%	83%	90%	49%	74%	37%	82%	64%
Somewhat religious	92%	89%	84%	94%	55%	80%	51%	88%	76%
Less religious	94%	89%	88%	96%	71%	85%	66%	93%	84%
18-29	98%	98%	85%	100%	63%	81%	50%	88%	77%
30-44	95%	92%	93%	95%	58%	81%	54%	85%	76%
45-59	93%	88%	89%	96%	57%	81%	54%	91%	79%
60+	77%	72%	71%	83%	52%	70%	40%	84%	63%
<HS/HS	89%	86%	81%	91%	59%	76%	41%	84%	69%
Some College	94%	86%	89%	97%	53%	81%	57%	89%	77%
College grad +	92%	89%	88%	94%	57%	79%	56%	81%	78%
<\$26K	88%	83%	80%	91%	64%	80%	38%	87%	68%
\$26-\$49K	91%	88%	88%	95%	54%	80%	53%	87%	75%
\$50K+	95%	91%	92%	95%	59%	80%	60%	90%	82%
Married	90%	88%	86%	82%	54%	76%	47%	85%	73%
Not married	92%	85%	83%	94%	62%	83%	52%	89%	75%
Democrat	91%	87%	83%	94%	64%	81%	52%	90%	76%
Republican	89%	87%	87%	91%	46%	72%	41%	81%	68%
Independent	93%	88%	89%	95%	57%	89%	64%	91%	80%

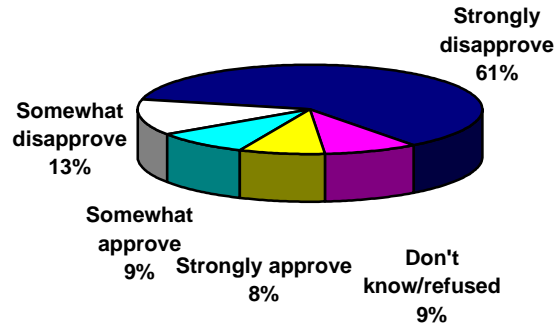
Q5-13. Now I'd like to ask you about the types of services you would prefer to have at a hospital in your community, regardless of whether you personally would use the particular services. Which of these two types of hospitals would you prefer to have as your community hospital: One that offers _____ or one that does not?

3. Catholic and community hospitals and reproductive health services

American women believe that Catholic religious teaching should not be allowed to influence the kinds of services available in community and college clinical settings.

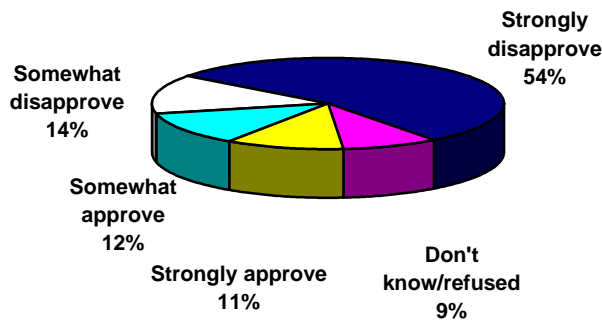
Fully three-quarters (74%) of women would object if a Catholic hospital and a non-Catholic hospital in their community merged and the surviving institution stopped offering birth control or other reproductive health services. Almost identically, women said they would disapprove (68%) of circumstances in which a Catholic hospital became the only medical institution in the community and halted birth control and other reproductive health services on religious grounds.

Attitudes about mergers leading to elimination of reproductive health services



26. Would you approve or disapprove if a Catholic institution and a non-Catholic hospital merged in your community and the newly formed hospital stopped offering birth control and other reproductive services forbidden by the Catholic church? (Is that strongly or somewhat?)

Attitudes about sole hospital in community prohibiting reproductive health services



25. Would you approve or disapprove if a Catholic institution which became the only hospital in your community prohibited some birth control and other reproductive services on the basis of Catholic belief? [Is that strongly or somewhat?]

Likewise, according to 82% of American women, all hospitals that deliver babies should be required to offer sterilization services requested by women patients. There is strong agreement among all groups, including 80% of Catholic women, on this issue.

Availability of sterilization services for women

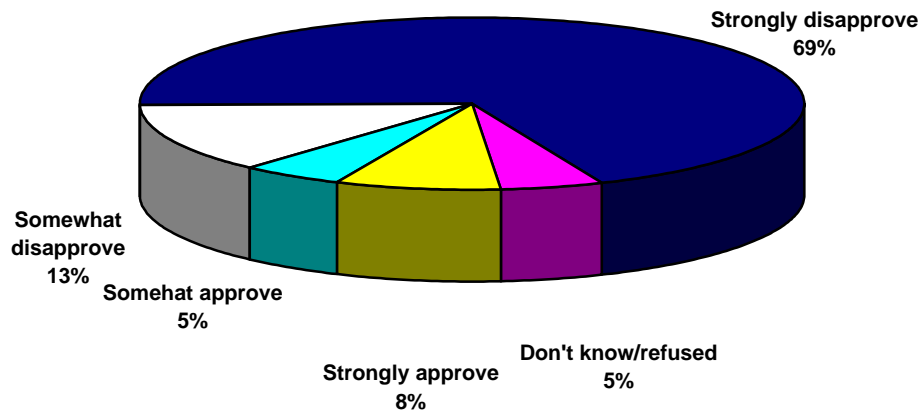
Some doctors and other health professionals are opposed for religious reasons to providing some women's health services. I'd like to read you a few policies that hospitals, pharmacies or others might adopt, and ask you to tell me in each case if you would approve or disapprove. (Is that strongly or somewhat approve/disapprove?)

24. Hospitals where babies are delivered should be required to permit doctors practicing there to perform sterilizations requested by women.

	Approve	Disapprove	Strngly app	Smwt app	Smwt disapp	Strngly disapp	DK/ refuse
Women	82%	12	64%	18	5	7	6
Catholic	80%	17	62%	18	9	8	4
Other	85%	10	66%	19	3	7	6
Strongly religious	80%	14	59%	21	6	8	6
Somewhat religious	85%	10	65%	20	4	6	5
Less religious	85%	12	74%	11	4	8	5
18-29	82%	16	63%	19	3	13	2
30-44	93%	5	77%	16	2	3	1
45-59	85%	12	66%	19	8	4	3
60+	68%	19	48%	20	8	11	13
<\$25K	79%	17	59%	20	5	12	5
\$25K-\$49K	86%	9	69%	19	4	5	3
\$50K+	89%	9	72%	15	4	5	3

Attitudes are also clear about what access to reproductive health services young women attending state universities should have. More than four of five women say they would disapprove if a Catholic organization took over health services at a state university and stopped providing birth control, counseling about using condoms, or referrals for young women seeking abortions.

Discontinuation of health services at state universities



28. Student health services at state universities generally provide access to birth control, counseling about safe sex to prevent diseases, and abortion referrals, among other health services. Would you approve or disapprove if a state university stopped offering these specific services because it contracted with a Catholic organization to provide its student health program? [Is that strongly or somewhat?]

4. Entitlement to services versus Catholic teaching

Overwhelmingly the investigation shows that women do not believe that the views of the Roman Catholic church should block their access to reproductive health services and procedures. Three of four (75%) believe a hospital owner's religious objections should not be permitted to overrule a doctor's decision about treatment for a patient. Among Catholic respondents, 71% say the doctor's decision should be final, and among strongly religious Catholic women, 68% agree.

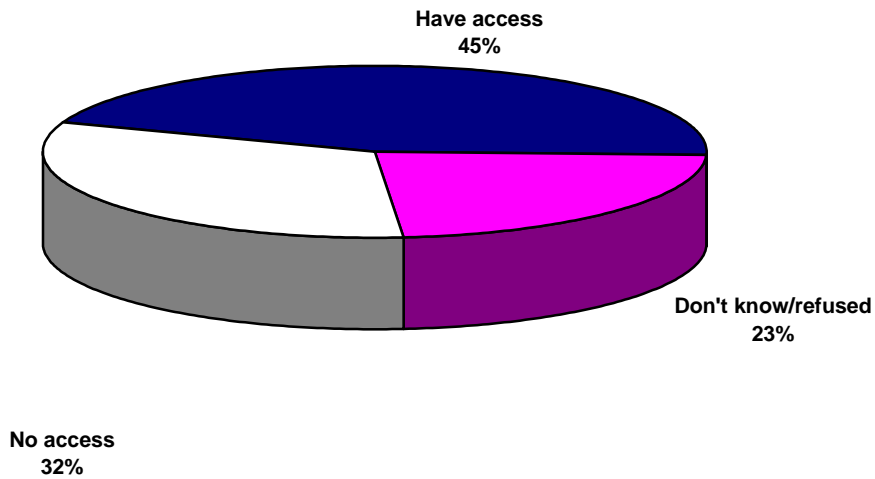
Doctors to decide on medical services in hospitals

14. Do you agree more that a doctor's decision about medical treatment should not be overruled by a hospital owner's religious beliefs; or more that a hospital owner should be able to decide what medical treatment can be performed in its hospital?

	Doctor's Decision final	Owner to decide	DK/ Refuse
Women	75%	19	6
Catholic	71%	23	5
Other	76%	18	6
Strongly religious Catholics	68%	24	9
Less religious Catholics	73%	23	4
Strongly religious	73%	19	8
Somewhat religious	74%	20	5
Less religious	77%	18	5

American women expect a hospital, even if it is a Catholic hospital, to provide a full range of reproductive health services. A plurality (45%) say if they were treated at a Catholic hospital, they would expect to receive reproductive health care services or procedures that are contrary to Catholic teaching. Fully 23% say they do not know whether they should expect access to all services in a Catholic hospital.

Expectations regarding Catholic hospitals limiting access to medical services



17. Do you think going to a Catholic hospital would mean you would not have access to medical services or procedures that are contrary to Catholic religious beliefs?

Among the one in three (32%) who say they expect reproductive health services to be limited, the services that women think are most likely to be restricted are abortion (62%) and birth control (43%).

Perceived restrictions on medical services

(Based on N=318 respondents who said that going to a Catholic hospital would mean no access to medical services contrary to Catholic teaching.)

18. What are those restrictions? [MULTIPLE RESPONSE ADDS TO MORE THAN 100%]

No abortion	62%
No birth control	43%
No “morning-after” pill	6%
No physician-assisted suicide	1%
No genetic testing	1%
No sterilization	3%
No treatment for infertility such as artificial insemination and in vitro fertilization	4%
Other	2%
Don’t know/refuse	21%

5. Exemptions from service provision based on conscience

American women reject the idea of exemptions from service provision based on conscience for institutions. They believe that hospitals and pharmacies that refuse to provide reproductive health services need to refer patients to other places that will provide these services. Women are mixed in their opinions of exemptions based on conscience for individual physicians, with half believing that a doctor has an obligation to provide services even if they conflict with his or her religious beliefs, and half disagreeing.

Hospitals and pharmacists: There have been legislative efforts to provide hospitals and pharmacists with the right to refuse to provide medical care that conflicts with their religious beliefs. However, women oppose such proposals by substantial majorities—83% for pharmacists and 79% for hospitals. Most oppose exemptions based on conscience for hospitals and pharmacists strongly.

Exemptions based on conscience for pharmacists opposed

15. Thinking about potential legislation, how would you feel about legislation giving pharmacists the right to refuse to fill prescriptions or provide medications that they disagree with because of religious or moral objections—do you strongly support, somewhat support, somewhat oppose or strongly oppose this type of legislation?

Strongly support	6%	
		} 14%
Somewhat support	8	
Somewhat oppose	14	
		} 83%
Strongly oppose	69	
Don't know/refuse	4	

Exemptions based on conscience for hospitals opposed

16. How would you feel about legislation giving hospitals the right to refuse to provide medical services or medications that they disagree with because of religious or moral objections—do you strongly support, somewhat support, somewhat oppose or strongly oppose this type of legislation?

Strongly support	7%	
		} 16%
Somewhat support	9	
Somewhat oppose	14	
		} 79%
Strongly oppose	65	
Don't know/refuse	5	

Specifically, American women feel strongly about the obligation of pharmacies to fill prescriptions for birth control pills. More than four of every five women (83%) say that if an individual pharmacist opposes filling such prescriptions, the pharmacy has an obligation to assign another employee to provide the pills. Similarly, if the pharmacy declines to fill prescriptions for birth control pills or the morning-after pill, 90% agree that the pharmacy should be required to *refer* customers to other pharmacies willing to provide these services.

The same is true of hospitals or clinics that decline to provide birth control, sterilization or the morning-after pill. Almost nine of every ten women (88%) agree that these institutions should be required to refer patients to other hospitals or clinics that do offer these services.

Religious beliefs should not affect medical services

Some doctors and other health professionals are opposed for religious reasons to providing some women's health services. I'd like to read you a few policies that hospitals, pharmacies or others might adopt, and ask you to tell me in each case if you would approve or disapprove. (Is that strongly or somewhat approve/disapprove?)

	App	Disapp	Strngly app	Smwt App	Smwt disapp	Strngly disapp	DK / refuse
19. If a particular pharmacist was opposed on religious grounds to filling a doctor's prescription for birth control pills, the pharmacy should make another employee available to fill the prescription.	83%	15	68%	15	5	10	3
20. No doctor or other health professional should be required to provide services that go against his or her religious beliefs.	49%	46	33%	16	11	35	5
21. Any hospital or clinic that does not provide patients with birth control, sterilization or the morning-after pill should be required to refer patients seeking these things to others who will provide them.	88%	10	72%	16	5	5	2
22. Any pharmacy that does not want to fill customer's prescriptions for birth control or the morning-after pill should be required to refer the customers to other pharmacies that will provide them.	90%	8	77%	13	3	5	1

Government-funded institutions: Our survey also shows that women (85%) overwhelmingly believe that doctors who work in Catholic hospitals that receive government funds should be permitted to provide any legal, medically sound service he or she thinks is needed. Such a requirement would cover nearly every Catholic medical institution, almost all of which accept public funds.

Government funding of Catholic hospitals

23. Some doctors and other health professionals are opposed for religious reasons to providing some women's health services. I'd like to read you a few policies that hospitals, pharmacies or others might adopt, and ask you to tell me in each case if you would approve or disapprove. (Is that strongly or somewhat approve/disapprove?)

If a Catholic hospital receives government funds, it should be required to allow doctors working there to provide any legal, medically sound service the doctors believe is needed.

	App	Disapp	Strngly app	Smwt app	Smwt disapp	Strngly Disapp	DK / refuse
Women	85%	10	71%	14	3	7	6
Catholic	82%	14	65%	17	3	11	4
Other	88%	8	74%	14	3	5	6
Strongly religious	80%	13	65%	15	3	10	6
Somewhat	88%	7	73%	15	3	4	5
Less	89%	7	78%	11	1	6	3
<HS/HS	88%	7	72%	16	1	6	4
Some college	85%	8	74%	11	2	6	8
College grad+	82%	14	68%	14	6	8	4

Insurance coverage: American women’s attitudes about insurance are similar to their opinions about hospitals and pharmacies. For example, American women think by almost identical margins (86% and 83%) that insurance policies that cover prescription drugs and women’s health services should be required to cover birth control services and birth control pills. More than four of five (84%) say they would disapprove if a Catholic institution bought their health insurance plan and eliminated coverage for women's reproductive health services. These views are critical because just under 70% of those surveyed said they are covered by private health insurance, as opposed to Medicare or Medicaid.

Insurance plans should cover all of women’s health needs

Q3 – Q4. Do you agree or disagree with each of these statements?

	Agree	Disagree	Strngly agree	Smwt agree	Smwt disagree	Strngly disagree	DK/ ref
Insurance plans that cover prescription drugs should be required to cover birth control pills, just as they do other prescriptions	83%	13	65%	18	6	7	3
Insurance plans that cover women’s health should be required to include birth control services.	86%	11	67%	19	5	6	3

However, many believe insurance companies are in the driver’s seat. About half of American women who have health insurance believe they would be captive to their insurance plan if it began to deny certain services. If their present coverage no longer paid for certain services like reproductive health care, 46% say they would be stuck with their current plan, while 45% say they would have the option of shifting to a new plan at a similar cost.

Ability to change insurance plans

(Based on N=897 respondents who have health insurance.)

31. If your insurance plan, HMO or PPO declined to pay for certain services, would you have the option of changing—at the same or similar cost to you—to a plan that will cover what you want, or would you be pretty much stuck with the plan you have?

Option of changing plans	45%
Stuck with plan	46
DK/refuse	10

Individual physicians: Women were almost evenly divided in their attitudes about exemptions based on conscience for doctors called upon to deliver reproductive health services to which they object for religious reasons. Those surveyed were asked if they approve of the view that no doctor or health professional should be required to provide reproductive health services that go against his or her religious beliefs. Forty-nine percent say they approve, either strongly or somewhat, of such a policy, while 46% disapprove.

Support for exemptions based on conscience is strongest among highly religious Catholics and non-Catholics, as well as among highly educated and upper-income women. Sixty percent of strongly religious Catholic women strongly or somewhat support the idea that a doctor may not be required to provide a service that he or she believes violates his or her religious beliefs, compared to 48% of less religious Catholic women who say the same thing. Among those who have no college education, 45% support a doctor's right to adhere to his or her religious principles in treating women, while 58% of those who graduated from college support this right.

Doctors to provide services regardless of religious beliefs

Some doctors and other health professionals are opposed for religious reasons to providing some women's health services. I'd like to read you a few policies that hospitals, pharmacies or others might adopt, and ask you to tell me in each case if you would approve or disapprove. (Is that strongly or somewhat approve/disapprove?)

20. No doctor or other health professional should be required to provide services that go against his or her religious beliefs.

	App	Disapp	Strngly app	Smwt app	Smwht disapp	Strngly disapp	DK/ refuse
Women	49%	46	33%	16	11	35	5
Strongly religious							
Catholics	60%	40	54%	6	9	31	--
Less religious Catholics	48%	47	32%	16	11	36	6
Strongly religious	56%	41	42%	14	9	32	3
Somewhat religious	48%	47	31%	17	11	36	6
Less religious	41%	53	23%	18	14	39	6
<HS/HS	45%	50	29%	16	11	39	4
Some College	46%	46	31%	15	11	35	8
College Grad +	58%	38	42%	16	11	27	3
<\$25K	43%	51	29%	15	11	40	4
\$25K-\$49K	56%	40	35%	21	12	28	3
\$50K+	48%	32	36%	12	10	37	6
Married	51%	44	37%	14	10	34	5
Not married	46%	50	27%	19	13	37	5

IV. Methodology

Sample

The universe for this study is women 18 and older in the continental U.S. living in telephone-equipped households. The sample was selected in two stages. In the first stage, the sampling frame was a list of randomly created phone numbers (a technique known as random digit dial or RDD) for telephone exchanges in the U.S. created by Survey Sampling, Inc. Telephone numbers were selected at random from this frame.

The second stage of sampling was selection at the household level. In residences where working telephones were reached, the survey respondents were selected using a random probability method, *i.e.*, interviewers requested to speak with the woman 18 years or older in the household who had the most recent birthday.

The survey consists of a total of 1,000 completed telephone interviews. All sample surveys are subject to possible sampling error; that is, the results may differ from those which would be obtained if the entire population under study were interviewed. The margin of sampling error for the entire survey is plus or minus 3.1 percentage points at the 95% level of confidence. This means that in 95 out of 100 samples of this size the results obtained in the sample would fall in a range of plus or minus 3.1 percentage points of what would have been obtained if every individual adult in the U.S. had been interviewed. Other non-sampling errors may also contribute to total survey error.

Questionnaire and Interviewing

The questionnaire used in this study was designed by BRS in collaboration with staff from Catholics for a Free Choice.

A draft of the questionnaire was subjected to a pretest, resulting in modifications both in terms of question wording and length.

The fieldwork was conducted by telephone using a computer-assisted telephone interviewing (CATI) system from February 22 to March 5, 2000 by a team of professional, fully trained and supervised telephone interviewers. A briefing session familiarized the interviewers with the sample specifications and the instrument for this study. The interviews averaged 14 minutes in length. BRS monitored the interviewing and data collection at all stages to ensure quality.

The full questionnaire and the demographic characteristics of the sample are available on the Catholics for a Free Choice website at www.catholicsforchoice.org.