

# Pharmacist Conscience Clause

The Texas Catholic Conference **supports a pharmacist conscience clause** so that pharmacists are not required to sell morning after pills to minors.

The citizen is obliged in conscience not to follow the directives of civil authorities when they are contrary to the demands of the moral order, to the fundamental rights of persons or the teachings of the Gospel. Refusing obedience to civil authorities, when their demands are contrary to those of an upright conscience, finds its justification in the distinction between serving God and serving the political community. (*Catechism of the Catholic Church, 2242*)

## *A Texas Bishop Speaks:*

"Efforts to ensure that our health care system truly serves the life, health and conscience of all will be a legislative goal of the Catholic bishops in the months to come."



*-Cardinal Daniel DiNardo, Archdiocese of Galveston-Houston*

## Church Teaching

- ★ We object to a government mandate for contraceptive coverage generally. At a time when tens of millions of Americans lack even the most basic health coverage, efforts to mandate elective drugs and devices which raise serious moral problems and can pose their own health risks are misguided... We believe contraceptive mandates should not be imposed on private organizations. But if some form of mandate is adopted, effective protection for conscientious objection on both moral and religious grounds should be ensured. (*USCCB, Letter to Congress on Mandated Contraceptive Coverage and Conscience Protection*)
- ★ Moral conscience, present at the heart of the person, enjoins him at the appropriate moment to do good and to avoid evil. It also judges particular choices, approving those that are good and denouncing those that are evil. It bears witness to the authority of truth in reference to the supreme Good to which the human person is drawn, and it welcomes the commandments. When he listens to his conscience, the prudent man can hear God speaking. (*Catechism of the Catholic Church, 1777*)
- ★ It must in any case be clearly understood that whatever may be laid down by civil law in this matter, man can never obey a law which is in itself immoral, and such is the case of a law which would admit in principle the liceity of abortion. Nor can he take part in a propaganda campaign in favor of such a law, or vote for it. Moreover, he may not collaborate in its application. It is, for instance, inadmissible that doctors or nurses should find themselves obliged to cooperate closely in abortions and have to choose between the law of God and their professional situation. (*Congregation for the Doctrine of the Faith, Declaration on Procured Abortion*)

## Resources

- ★ **Abortion page** - US Conference of Catholic Bishops ([www.USCCB.org/prolife/issues/abortion/](http://www.USCCB.org/prolife/issues/abortion/))
- ★ **Second Look Project** ([www.SecondLookProject.org](http://www.SecondLookProject.org))
- ★ **National Catholic Bioethics Center** ([www.NCBCenter.org](http://www.NCBCenter.org))
- ★ **Pontifical Academy for Life** ([www.AcademiaVita.org](http://www.AcademiaVita.org))

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The Texas Catholic Conference (TCC) is the association of the 15 Roman Catholic dioceses of the State of Texas, and is the Official Public Policy Voice of the Catholic Bishops of Texas.

**Andrew Rivas, Executive Director • Jennifer Carr Allmon, Associate Director • Margaret McGettrick, Education Director**

1600 N. Congress Ave. Suite B • Austin, TX 78701 • PO Box 13285 • Austin, TX 78711 • (512) 339-9882 • FAX (512) 339-8670 • [www.TXcatholic.org](http://www.TXcatholic.org)

# Pharmacist Conscience Clause<sup>i</sup>

We object to a government mandate for contraceptive coverage generally. At a time when tens of millions of Americans lack even the most basic health coverage, efforts to mandate elective drugs and devices which raise serious moral problems and can pose their own health risks are misguided. In addition, any such mandate will cause needless injustice if it does not provide full protection to those who object for reasons of conscience. This is so for several reasons:

- **Moral Concerns and Abortifacient Drugs.** Aside from specifically religious concerns, there is broad agreement that [prescription drugs and devices approved by the FDA for contraception, including what the FDA calls "postcoital emergency contraception"] often work by destroying an early human embryo. This raises moral concerns about early abortion which transcend any particular religion. Congress itself bans federal funding of experiments that harm or destroy human embryos in the first two weeks of life -- a sound moral decision based on no one religious belief. Congress should not deny the same right of morally based decision making to others. Most recently, in June 2010, Cardinal Daniel DiNardo of Galveston-Houston, the chairman of the U.S. bishops' Committee on Pro-Life Activities, voiced "grave concern" to the U.S. Food and Drug Administration (FDA) over its move toward approving a new drug that may induce early abortions as an "emergency contraceptive." In a June 17 letter to Dr. Margaret Hamburg, Commissioner of the FDA, Cardinal DiNardo criticized the FDA's move to hold an advisory committee meeting on the drug Ulipristal "without broad public input or a full record on the drug's safety for women or their unborn children." The Cardinal raised concerns that Ulipristal is more similar in effect to the drug RU-486, which can cause abortions several weeks into pregnancy, than it is to other emergency contraceptives, which are believed to have no post-implantation effects. On August 13, 2010, the U.S. Food and Drug Administration approved ella™ (ulipristal acetate) tablets for emergency contraception.<sup>ii</sup>
- **Federal Precedent on Rights of Conscience.** Numerous conscience clauses in federal law protect conscientious objection based on both religious and moral grounds, in contexts ranging from capital punishment to abortion and sterilization. Many state laws are similarly broad. These are based on a sound understanding that forcing someone to engage in activity that violates his or her deeply held conscientious beliefs is a violation of human rights and an abuse of government. Clearly, not all conscientious moral convictions are based on religious belief. Indeed, Congress protects medical residency programs from being forced to provide abortion training regardless of whether their opposition is morally based, because abortion is simply not the kind of practice which anyone should be forced to participate in for any reason. Current protections against forced participation in abortion and sterilization also extend to organizations as well as individuals. To retreat from this tradition now in favor of narrower and more grudging protection restricted to religious belief alone would send an ominous signal regarding the U.S. government's respect for rights of conscience.
- **Protecting Individuals' Conscience Rights.** Even without a government mandate, pharmacists' careers have been endangered when they refuse on moral grounds to fill prescriptions for abortifacient "emergency contraception" (see J. Allen, "'Morning-after pill' battles flare: Patients, doctors, druggists in birth-control tug of war," Washington Times, May 27, 1997, p. A3). In light of such cases, the American Pharmaceutical Association and other organizations have urged respect for rights of "conscientious refusal" which they do not confine to religious grounds. Codes of medical ethics, as well, generally speak of physicians' right to refuse participation in activities they find immoral or unethical. The federal government has already enacted conscience protection based on both religious and moral convictions for health care personnel in health plans providing coverage to federal employees. It should do no less here, attending as well to employees who could be forced by government to purchase morally objectionable contraceptive coverage or forgo prescription drug coverage altogether.

*(Last updated July 26, 2010, 82<sup>nd</sup> Legislative Session)*

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<sup>i</sup> "Letter to Congress on Mandated Contraceptive Coverage and Conscience Protection." 25 July 2000. USCCB Pro-Life Activities. <[www.usccb.org/prolife/issues/abortion/conscience.shtml](http://www.usccb.org/prolife/issues/abortion/conscience.shtml)>.

<sup>ii</sup> "FDA Approves Ella™ Tablets for Prescription Emergency Contraception." *US Food and Drug Administration Home Page*. 3 Aug. 2010. Web. 17 Aug. 2010. <[www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm22428.htm](http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm22428.htm)>