

No totalitarianism here, please! Why human conscience must be respected

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by Stephen Goundrey-Smith

Once again, recently, there has been a spate of letters in *The Pharmaceutical Journal* concerning the sale of emergency hormonal contraception (EHC) and the conscience clause in the Royal Pharmaceutical Society's Code of Ethics for Pharmacists and Pharmacy Technicians allowing pharmacists to decline to sell EHC on the grounds of religious belief.

Some pharmacists have expressed strident and explicitly Christian views about EHC, on the basis of the Christian prohibition of abortion. Others have stated that pharmacists' personal views and opinions should not influence the services that they are expected to provide, pointing to the role that pharmacists might have in safeguarding the sexual health of the nation.

A recent letter has expressed the view that pharmacists should actually be compelled to supply EHC against their consciences, threatened with disciplinary action by the Society, and, understandably, there has been an immediate and angry response to this view.

However, the issue of the conscience clause and supply of EHC has been discussed in *The Journal* on a regular if not frequent basis since the introduction of EHC in 2001. This suggests that the issue of conscience and religious belief has never been far away from public debate and that this issue is likely to remain with the profession.

There is, therefore, benefit in exploring the question of conscience in religious belief, with reference to professional practice in general and supply of EHC in particular.

Conscience might be defined as the inner aspect of a person's life where a sense of right and wrong is developed. Moral theologians will claim that conscience is a universal human attribute, not limited to individuals with a specific religious faith, and is, therefore, a gift of God to all human beings as part and parcel of their being created by God.

Conscience is a guardian of the integrity of a person and, therefore, is to be valued as part of our personhood.

However, it is recognised that the conscience needs to be educated, so that it can alert us to things that are genuinely right or wrong. To stifle a person's conscience — whether that person has explicit faith in a deity or not — is a dangerous thing because it dulls his or her senses to the actual moral currency of any given course of action.

This has a number of implications for the debate on EHC and the conscience clause. First, some respondents state that pharmacists should not allow their personal views and opinions to interfere with their work. However, conscience is not about personal opinion; it is about the commitment of the individual to determining that which is objectively and universally right or wrong.

Christians do not object to the active supply of EHC because of their personal opinion; they object because of their belief in the objective reality that all living things are created by God, and that God does not permit the deliberate taking of a life — a reality that applies equally to the end of life (euthanasia) as to the beginning of life (abortion).

Secondly, the conscience has to be educated. This happens when a person learns to listen to, and obey, the call of their conscience. But the conscience can also be stifled. If a person is repeatedly made to engage in an act that is contrary to their conscience, then in time the act will begin to feel morally neutral to them, even if objectively it is a morally repugnant act.

This scenario has, of course, been played out in the organisational psychology of totalitarian regimes throughout history, and the calls for pharmacists to be required to supply EHC smacks of such totalitarianism.

Thirdly, conscience is a ubiquitous human attribute and so there will always be a proportion of healthcare

professionals who hold implicit or explicit positions of conscience relating to ethical issues. It is, therefore, divisive to impose a universal ethical position on the profession.

In the EHC debate, this might well cut both ways: there are some pharmacists who, because of their religious beliefs, cannot in conscience supply EHC, but equally there may be some pharmacists who, because of their beliefs about the consequences of unwanted pregnancies on the lives of individual women, cannot in conscience withhold EHC.

Nevertheless, the profession should ask itself the question: what will happen if conscientious pharmacists are coerced or manipulated by the political or professional establishment to take a course of action which they believe to be wrong?

One possible response might be disengagement. Pharmacists with a strongly conscientious position, perhaps as a result of a personal religious faith, might choose not to be part of a profession that forces them to act against their conscience and might actively seek alternative employment. This would be a high price to pay for the pharmacists concerned, but would also be a sad loss for the profession and the public, as pharmacists of faith bring a strong social ethic to the profession.

However, we each have only one life and it is better to live it with a clear conscience. It is better surely to stack supermarket shelves or build dry stone walls for the glory of God.

The other situation might be where pharmacists reluctantly remain in the profession, but are forced on a daily basis to act in a way that goes against their conscience. This situation is far more disturbing, as it would lead to a stifling of the conscience for these pharmacists. It would be a dehumanising process, leading to a spiritual poverty and a loss of moral conviction.

These pharmacists, and indeed the profession as a whole, would then be in a worse situation if confronted with harder ethical decisions, which should, rightly, be addressed with a robust conscience.

So what is the solution for the pharmacy profession and the supply of EHC? The answer is not for conscientious pharmacists to be coerced into supplying EHC against their will, because ultimately, they do not have to do so. But nor can pharmacists with strong religious views expect widespread concurrence with their views across the profession.

Despite the fact that it will lead to uncertainties and inconsistencies in service provision with the supply of EHC, it is essential that all pharmacists act according to their conscience, because conscience is one of the most important human attributes that we have. It should be respected.

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