People ought to have autonomy: they ought, that is, to be able to govern their lives in accordance with values they themselves choose. This plausible principle provides a strong case in favor of technology allowing women more control over their reproductive choices. But at the same time, it leads some to believe that pharmacists ought to have the right to refrain from participating in or facilitating any action that they believe constitutes a serious moral wrong. Is it really true, though, that requiring Luke Vander Bleek to fill a prescription for Plan B would constitute an unacceptable violation of his autonomy?

The idea that professionals in occupations that serve the public should always have the right to refuse to perform any action to which they morally object must surely be rejected. In taking one’s place as a professional, one commits to abiding by the obligations and standards of one’s profession, and conflicts between these standards and obligations and one’s own moral views must at least sometimes be decided in favor of the former. The following example may help illustrate this.

Mr. R, a pharmacist, believes certain racial minorities to be inherently inferior, and objects to interracial marriages on (what he takes to be) moral grounds. C and D, an interracial couple who are trying to have children, bring to Mr. R a prescription for a fertility treatment. Due to his beliefs, Mr. R does not want to fill this prescription. Indeed, he believes that it would be immoral, and inconsistent with his integrity, to do so.

Even if Mr. R’s “moral” objections to miscegenation give him reason to refuse to fill this prescription, they give society no reason to protect his ability to do so. Why don’t they? One obvious fact about Mr. R’s moral sentiments here is that they express a deplorable moral view, and
society could not protect Mr. R’s right to act on these sentiments without in some sense endorsing this racist view (or at least appearing to do so, which is objectionable enough). Obviously, though, Mr. R himself does not find his sentiments deplorable at all. Since there will be disagreement, in any particular case, over what constitutes an objectionable or deplorable moral view, we need something a bit firmer than this if we are going to find a way of distinguishing the two sorts of cases — that is, cases in which the individual’s right to conscientiously object should be protected, and cases in which it should not.

What we need to focus on is the grounds for the moral view in question. What relieves society of the obligation to treat Mr. R’s sentiments as worthy of legislative protection — indeed, what obligates society not to do this — is Mr. R’s inability to provide any sort of objective grounds for taking these sentiments seriously. Mr. R’s racist views, that is, are merely private preferences with no objective backing of any sort. Of course, some people have thought that it was possible to give objective grounds — biological grounds, for instance — for views of this sort: that the children produced by interracial marriages would be genetically flawed, for example. We now know, however, that such views cannot withstand scientific scrutiny.

What this suggests is that Mr. R has no publicly acceptable justification to provide for his racist sentiments — he is unable, that is, to give people who do not already share his views any reason to take them at all seriously. And while individuals do of course possess the right to hold such views, and even to act in them in the context of their private lives, such views are not entitled to legislative protection in public contexts — including the very public context of such individuals’ professional performance. For in public contexts it is essential that we be able to justify our behavior to one another.

Like Mr. R’s racist views, Vander Bleek’s views about the moral status of pre-implantation embryos are at least partially based on factual claims (here regarding the point at which pregnancy begins) that are at best questionable. Of course Vander Bleek could give up the claim that pregnancy begins with conception while continuing to maintain that the fetus possesses full moral status from the moment of conception: he could just claim this as one of his basic beliefs. Similarly, Mr. R could give up any factual claims about the alleged inferiority of various racial minorities, the health effects of interracial couplings, etc., while continuing to maintain that individuals with divergent racial backgrounds should not marry. He could continue to hold his views, that is, while refusing to pro-
vide any objective grounds at all. But to admit that he had no objective grounds whatsoever for his views would hardly strengthen his case that his ability to act on them ought to be protected by legislation!

Of course, Mr. R’s position need not be that he has no grounds whatsoever for his views. Perhaps, like Luke Vander Bleek, he has religious grounds for, in his case, thinking some people inherently inferior to others. But to the extent that they can be considered grounds at all, religious grounds must be considered private and subjective: because different people differ in their religious views, and no impartial method exists for selecting between them, no particular set of religious views can form a legitimate basis for legislation in a pluralist society.

Again, this is not to deny that the right of the individual to accept and act on such views in her private life is crucial and ought to be protected. But to adopt legislation protecting professionals from the consequences of enacting such views in the context of their profession, even when it amounts to their refusing to fulfill the obligations of their profession, would represent an intolerable incursion of religious belief into public life. Although they may not feel groundless to the individuals who hold them, religious beliefs, like any other beliefs based on purely private reasons, must be treated as ungrounded for the purposes of legislation, and for all other public purposes.

Note that, because religious beliefs are not answerable to evidence or rational criticism, there are in principle no limits on their content. Thus there is nothing to prevent a given pharmacist from holding, on religious grounds, that an unfertilized egg possesses full moral status even prior to conception. Such a pharmacist would presumably object to being asked to fill prescriptions not only for Plan B, but for regular birth control as well, since he would regard the prevention of fertilization as the termination of a human life. Or consider a pharmacist whose religious beliefs prohibited her from abetting the destruction of any form of life whatsoever. Such a pharmacist would presumably feel obligated to refuse to fill prescriptions for antibiotics (the purpose of which is, as the name indicates, the destruction of life — in this case, bacterial life).

What is crucial to realize is that (1) such behaviors are deeply incompatible with the responsible fulfillment of a pharmacist’s professional duties, and (2) the beliefs which motivate these behaviors, no matter how apparently outrageous, are just as well-grounded as are Luke Vander Bleek’s — or, to put it the right way around, Vander Bleek’s beliefs are no better grounded than the others. For the appeal to one’s religion does not provide any sort of public or generally acceptable grounds for one’s
beliefs, of the sort that would be necessary to justify enacting legislation on the basis of those beliefs. I have argued that society is not obligated to protect Vander Bleek’s right to refuse to dispense Plan B. Indeed, it is obligated not to do so. It is important to understand that this is a conclusion about society’s moral obligations, not those of the pharmacist. In fact, it is difficult to know just what Vander Bleek is morally obligated to do here. Partly this is because it is difficult to know whether, and to what extent, an unsupported moral view (i.e. one for which no publicly acceptable rationale can be given) can generate moral obligations. Indeed, given his moral beliefs and the grounds on which he holds them, it is at least possible that no morally praiseworthy action is available to Luke Vander Bleek: he has no legitimate grounds for refusing to fill a prescription for Plan B, but if he did fill such a prescription he would be going against his own values and could be accused of hypocrisy. Perhaps in the latter case his motivation would make a difference: a felt duty to meet the obligations of his profession, or a respect for the right of the customer to hold values that differ from his own, might render his action morally praiseworthy in a way that the simple fear of losing his job would not. What is essential, at any rate, is to avoid the error of thinking that a view of society’s obligations in this matter must entail, in any direct or straightforward fashion, a conclusion regarding how the individual pharmacist is morally obligated to behave.