



A Legal Guide for
HEALTHCARE PROFESSIONALS

CONSCIENCE PROTECTIONS FOR PEOPLE OF FAITH



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INTRODUCTION

Conscience.

It is a significant and necessary piece in the mosaic of contemporary medicine. It plays a vital role in your thoughts and behavior as a healthcare professional, and it guides your ethical approach to the way you treat those entrusted to your care.

This understanding of the freedom of conscience dates back to the founding principles of our country. As Thomas Jefferson declared, “No provision in our Constitution ought to be dearer to man than that which protects the rights of conscience against the enterprises of the civil authority.”¹ And James Madison called conscience “the most sacred of all property.”²

Within the medical realm, conscience has an even more ancient pedigree. Medicine is called a “profession” largely because of the Hippocratic Oath, traced to the fifth century BC. The Oath elevated the practice of medicine to a sacred calling where the physician was bound to satisfy divine obligation to reverence human life. And America’s respect for conscience has allowed the full application of the Hippocratic Oath to thrive.

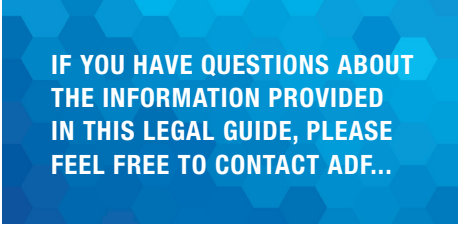
Just as healthcare professionals and institutions seek to serve their patients, the freedom of conscience serves to protect not only the integrity of the professional but the ability of their patients to access healthcare that unconditionally respects human life.

Historically, the Hippocratic Oath was not an imposition on patients but the acknowledgement of a life-affirming obligation for patients who were otherwise poor and vulnerable, a duty that was not previously embraced. Anthropologist Margaret Mead, who could hardly be considered a pro-life/pro-family advocate, explained that by the Oath, “for the first time in our tradition there was a

complete separation between killing and curing,” so that physicians in at least one branch of medical practice “were to be dedicated completely to life under all circumstances, regardless of rank, age, or intellect...” “But,” Mead warned, “society always is attempting to make the physician into a killer.”³ Many would agree that Mead’s grim observation is particularly relevant today.

Perhaps you have experienced a trend of increasing pressure to conform to more “socially accepted” beliefs within your own practice. Unfortunately, if the healthcare freedom of conscience is denied and the healing profession is compelled to become an industry hostile to human life, it will restrict the choices, health, and lives of patients—particularly the most vulnerable.

The good news is: You are not alone. Just as you have the God-given right to carry out your work with a reverence for human life, procreation, and the image of God, there are many patients who want to choose a healthcare professional who shares these guiding values. For this reason, Alliance Defending Freedom has prepared this manual to outline the legal landscape for healthcare freedom of conscience. Our assistance is available to aid health professionals, organizations, policy makers, and all Americans who wish to preserve this most sacred property of citizenship: the right of conscience.



**IF YOU HAVE QUESTIONS ABOUT
THE INFORMATION PROVIDED
IN THIS LEGAL GUIDE, PLEASE
FEEL FREE TO CONTACT ADF...**

By phone at **1-800-TELL-ADF**,
by email at **info@ADFlegal.org**,
or on our website at **ADFlegal.org**.

UNDERSTAND THE RIGHT OF CONSCIENCE

1 What is freedom of conscience in healthcare?

Conscience isn't just about doing what you want. In fact, following your conscience often involves doing what you might prefer not to do. Conscience is a guide to doing what you ought to do, and it imposes a duty for you to fulfill as you seek to carry out your profession with excellence and integrity. Accordingly, protecting your freedom of conscience matters greatly.

Freedom of conscience means you are free to carry out your moral duty without fear of government coercion or punishment. As a result, you are free to live a life of integrity, where moral duties guide your whole life and not just those times when you are at church or in prayer.

Your work is a calling, and it is a sacred one. For millennia, healthcare personnel and institutions have adhered to a duty to “do no harm”; a duty to heal rather than to maim or kill. This obligation is affirmed by the Hippocratic Oath, which many still profess.

Importantly, the Hippocratic Oath and the healthcare conscience in general exist not just to protect your integrity as a healthcare professional, but also to protect your patients and enable choice and autonomy. For example, many women want to choose a doctor who treats all preborn children as patients, not blobs of tissue. Many cancer patients want a doctor who would never consider euthanasia a “treatment option.” Many couples want marriage counseling from someone who shares their view about what marriage is, and who considers their emotional and spiritual health.

Thus, protecting healthcare professionals and institutions from attacks on their freedom of conscience in turn protects these patient choices—especially for the weak and the vulnerable. It gives patients the option of seeing a professional like you who shares their unconditional respect for human life.

2 Does freedom of conscience deny patients access to healthcare?

You may have heard those who oppose freedom of conscience claim that these rights deny patients access to healthcare. In reality, the opposite is true. Conscience rights enable patient choice, because they allow patients to choose a healthcare professional who shares their beliefs and values.

To again reference the findings of Margaret Mead, she observed that the “do no harm” idea originated as a radical commitment to give patients a real choice of a healing option. This was a contrast to the pro-death approach in the health field, Mead explained, because “throughout the primitive world the doctor and the sorcerer tended to be the same person. He with power to kill had power to cure.” Therefore, patients seeking healthcare were at the mercy of someone who might just as well use his skills to kill.

Although we have come a long way from this line of thinking, Mead calls the ability to adhere to unconditional respect for life “a priceless possession which we cannot afford to tarnish.... For the first time in our tradition there was a complete separation between killing and curing.”

Thankfully, the value of healthcare conscience persists today.

The following scenarios of ethical choice likely ring true for you or your colleagues: pregnant women who want to have their babies delivered by a doctor and facility that treat all preborn children and their mothers as patients, and would never target the child for “termination”; parents trying to plan their families that want assistance from healthcare professionals who respect the God-given gift of procreation; patients and families facing cancer or other life-threatening illnesses who desire care from a physician that considers it proper treatment to preserve life, relieve pain, treat depression, and facilitate spiritual peace, but would never suggest a treatment that involves deliberately ending the patient’s life.

3 Does freedom of conscience impose beliefs on patients who hold different views?

No. In fact, it is those who oppose freedom of conscience who seek to impose their views. These opponents often force healthcare professionals and institutions to participate in activities that violate their healing mission, such as requiring them to perform or assist with abortions. In some cases, healthcare professionals who insist on following their conscience are wrongfully forced out of their professions. As a result, millions of patients lose their right to choose doctors, counselors, and health institutions that share their pro-life and religious values.

Life-affirming healthcare professionals also often work in communities that have healthcare shortages. You may be one of these professionals, and may be very familiar with the challenges that already face those in more underserved demographic areas. Attacks on freedom of conscience will only serve to exacerbate those shortages by driving Christian and pro-life personnel from the health profession.

4 How do I defend my freedom of conscience if those rights are challenged?

In order to protect your freedom of conscience, you must know what that freedom encompasses, as well as the legal rights and options available to you. There can be a variety of ways to enforce your freedom of conscience, and they can vary depending on which federal or state laws apply to your particular circumstance.

We encourage you to talk with an attorney, such as those at Alliance Defending Freedom, who can help you identify what rights are applicable to your specific situation, and advise you on the ways in which you may be able to protect those rights.

Knowing your rights makes it possible for you to explore other options. Some or all of these options might not be appropriate in every case. But in general, defending your conscience rights might include activities such as:

- ▶ Discussing your conflict with your employer or the regulating entity to resolve the issue, as appropriate.

- › Sending a letter asking formally that your rights be respected, in consultation with legal counsel.
- › Seeking to defend your legal rights in court. Some laws expressly allow this avenue, some do so implicitly, and some are unclear whether your freedom of conscience can be enforced in court.
- › Utilizing a complaint procedure that allows you to file with a government body tasked with enforcing conscience laws.

You cannot know which actions might be the best course in your legal situation without advice from your attorney, just as a patient cannot know what might be the best course of treatment without advice from a healthcare professional.

5 What can I do to expand or strengthen freedom of conscience?

This is a great question. Start by sharing what you've learned with other healthcare professionals. You may also choose to engage in local efforts by supporting proposed laws that protect conscience, and by advocating for your protection as a healthcare professional.

We encourage you to be an advocate for strong protections for the rights of conscience in your state and with your representatives in the United States Congress. Call, write, and visit your two United States senators and your representative in the United States House of Representatives. Tell them how important the right of conscience is to you and your patients. Urge them to co-sponsor a bill that would strengthen conscience rights.

IF YOU ARE UNSURE ABOUT YOUR LEGAL RIGHTS AND HOW TO PROTECT THEM, PLEASE CALL US AT 1-800-TELL-ADF OR VISIT ADFLEGAL.ORG.

Calling ADF for information is entirely confidential and free of charge. It does not commit you to take any particular legal action, or any action at all. Perhaps we can provide information to help you discuss the conflict with your employer. Or, you might decide to pursue other action, such as sending a letter to appropriate authorities, or undertaking legal action. We are here as a resource so that you may know your rights and have assistance available to you if those rights are violated.

By the same token, many states are in need of laws that explicitly protect freedom of conscience, and many citizens—including healthcare professionals—would benefit greatly from conscience protection or from the strengthening of existing laws. Just as you have representation in the United States Senate and House of Representatives, you likely have a state senator and house or assembly member. Contact and meet with them to discuss the importance of conscience rights. Find out if your state needs a conscience protection law by looking at existing laws online. In particular, Alliance Defending Freedom recommends that existing state conscience laws be amended to add an explicit “right to sue.” For example, if your state has a law saying you can’t be forced to perform an abortion, it should also explicitly say you have a right to bring a case in court if you are coerced into performing an abortion.

Both the federal and state legislatures also need medical doctors who are willing to testify in legislative hearings in favor of good conscience laws, and against laws that attack conscience rights.

And perhaps most important in our culture, the movement to protect conscience rights needs to be able to tell compelling stories. Healthcare professionals like you can help greatly by coming forward to help people because of the strength you draw from your ethical and religious convictions. We also need to hear the stories of healthcare professionals who have been victims of discrimination and punishment because of their commitment to the dignity of human life. And we also need to hear the stories of patients. Where appropriate, you may encourage your patients to share their story as someone who wants the freedom to be able to choose a healthcare professional who shares their pro-life values. These stories are often the most powerful forms of testimony. All of these kinds of stories can be told in written form and in video and audio productions. You can do that on your own, or by contacting one of the several healthcare professional organizations that exist to support you in being a religious and ethical healthcare professional.

CLIENT STORY



Rhonda Mesler, Margo Thelen, and the Stormans Family

PHARMACISTS AND PHARMACIES

Both Rhonda Mesler and Margo Thelen have been pharmacists for a number of years—Rhonda for more than 20 years and Margo for over 40.

But it's not just their shared profession and their dedication to it that makes them similar—it's a common experience they each had before either of them became pharmacists. An experience that shaped their values and beliefs.

As a teenager, Rhonda faced an unplanned pregnancy. Similarly, Margo became pregnant with her first child at 18 years old. While Rhonda chose to put her baby up for adoption, Margo's mother sent her to a doctor whom she hoped would convince Margo to have an abortion. Instead, the doctor encouraged Margo to keep it—and she did.

Shaped by these experiences,

Rhonda and Margo are unapologetically pro-life, and they do not stock or dispense abortifacients, such as Plan B. It is a common pharmaceutical practice to not carry certain drugs and for patients to get them from one of many nearby pharmacies.

"When a customer comes to the counter and requests Plan B, if she's conceived, I'm essentially looking at two patients: the mother and her unborn child. And I'm being asked to sell her medication that will take the life of that unborn child, and I can't do that," said Margo.

The Stormans family, who own and operate a fourth-generation grocery store,

were asked to provide abortifacients at their pharmacy. Like Rhonda and Margo, they opposed doing so, knowing that there were 33 surrounding pharmacies who offered those items for patients that wanted them.

But in 2007, the state of Washington decided that pharmacists were no longer able to refuse to stock such drugs for reasons of conscience, and not even able to refer patients to a nearby pharmacy that does stock such drugs. The state said that while drugs could still not be stocked for economic reasons, conscience was no longer an acceptable justification for declining to dispense these drugs.

"This meant either leaving the profession or leaving the state or something drastic," said Rhonda.

Margo was fired soon after this law was passed. Thankfully, she was able to secure another job through a friend, though in a different town with a significant pay cut. And while Rhonda's employers support her beliefs for now, they have warned that they will have to follow the law's final decision.

The Stormans faced boycotts and riots outside of their grocery store and had to make difficult decisions to keep their family business afloat.

Rhonda, Margo, and the Stormans reached out to Alliance Defending Freedom for help, and ADF will continue to fight for their right to work according to their convictions.

"We're talking about our Constitution," said Lynn Stormans, "about the freedoms that were guaranteed to us, first by God, then our country and our state. And we decided, 'Yes, our country means enough to us, our God means enough to us, that we're going to do this. We're going to stand.'"

It's a sentiment they all share.



LAWS THAT PROTECT CONSCIENCE

1 What federal laws protect the right of conscience?

There are a wide variety of laws that protect healthcare conscience rights. The Constitution, federal laws and regulations, and state laws all function in different ways to protect healthcare professionals' rights.

When the Supreme Court imposed abortion on the nation in *Roe v. Wade* and its companion case *Doe v. Bolton*, the opinions nevertheless observed that the “right” the court was creating in no way required participation by any person or entity who objected to abortion, and that laws protecting conscience were entirely appropriate.⁴ Consequently, the federal government and most states enacted a flurry of laws protecting freedom of conscience for healthcare workers.

It is important to note that federal pro-life conscience laws (and most similar state laws) prohibit coercion even in so-called “emergencies.” They require full respect for the practice of pro-life medicine, which does not view the killing of a patient as being a legitimate treatment in any circumstance. This is important because a government or employer wishing to require someone to participate in abortions will often claim that there is a very important and even medical reason to prohibit pro-life personnel from opting out. Pro-life conscience laws unequivocally protect the freedom to practice Hippocratic medicine that unconditionally respects human life.

The three most important federal laws to be aware of:

The Church, Coats-Snowe, and Weldon amendments are the most notable laws to consider with regard to freedom of conscience. They are the main federal laws protecting healthcare workers from coerced participation in activities such as abortion. There are many other laws applying similar protections in much more specific contexts, such as Medicaid-managed care plans; however, we do not address those laws here.

1. The Church Amendment

The Church Amendment to the Public Health Service Act (named after its sponsor Senator Frank Church (D-Idaho)),⁵ enacted in 1973, provides a wide range of protections to healthcare professionals, including doctors, nurses, midwives, and other personnel, as well as hospitals. This is of particular significance for professionals like yourself, because it is one of the most important federal protections for healthcare personnel who object to performing abortions, sterilizations, and other procedures on the basis of religious beliefs or moral convictions.

The Church Amendment is quite detailed, with several sections, but the following is a broad overview of the amendment:

- › The Church Amendment only applies to entities that receive certain federal health-related funds.
- › It prohibits entities from discriminating against healthcare personnel because they refuse to assist in the performance of an abortion or sterilization for religious or moral reasons.
- › The language is framed broadly as a non-discrimination provision, which Congress has labeled as protecting “individual rights.”⁶
- › The Amendment states that entities receiving *research* funds are not allowed to discriminate against healthcare personnel who object to performing or assisting with *any* lawful health service based on a person’s religious beliefs or moral convictions, including birth control, assisted suicide, or other services.
- › The Amendment protects individuals applying for internships or residencies from discrimination because they are reluctant to participate in abortions or sterilizations based on their religious beliefs or moral convictions.
- › The Amendment provides that individuals in a program funded in whole or in part by the federal Health and Human Services Department (HHS) may not be required to perform or assist in any part of the program to which they have religious or moral objections.

- › It states that if an individual or entity (such as a hospital) receives federal funding, the receipt of that federal money does not authorize governments, courts, or public officials to force those individuals or entities to perform or assist with abortions or sterilizations, or to make their facilities or personnel available for the same.
- › Notably, the Church Amendment protects all individuals' rights when it comes to abortion. Whether someone chooses to perform abortions or not, they are protected from discrimination under this law.

This is a summary of the amendment; we encourage you to review the entire amendment.

2. The Coats-Snowe Amendment

Another important federal amendment is the Coats-Snowe Amendment. This law broadly protects any healthcare entity or individual physician from being forced to perform, refer for, or even make arrangements to refer for an abortion. The Coats-Snowe Amendment applies to any government entity—federal, state, or local—that receives any federal financial assistance.

This law particularly adds protections for the pro-life beliefs of medical schools, residency programs, and medical residents. It was passed in part as a reaction to several private accrediting agencies that were taken over by pro-abortion doctors who tried to force medical schools and students to train on abortions. It is still commonly but incorrectly claimed today, in ignorance of this law, that medical schools and residencies must train participants on abortion. The Coats-Snowe Amendment prohibits governments from adopting such standards. As a result, the public education and licensing system cannot discriminate against pro-life healthcare professionals, schools, residency programs, and other entities.

Simply put, medical students and residents at government institutions cannot be required to be involved in abortions, and private medical institutions do not need to participate in abortion training or procedures.

3. The Weldon Amendment

The Weldon Amendment has been a part of the appropriations acts passed by Congress every year since 2004. It prohibits federal agencies and programs, and state and local governments receiving certain federal funding from discriminating against any healthcare entity, professional, or insurance plan, due to their decision not to provide, pay for, provide coverage of, or refer for abortions.⁷

Other important federal laws:

The Religious Freedom Restoration Act (RFRA)

Under the federal Religious Freedom Restoration Act (RFRA),⁸ the federal government cannot require you to do things that substantially burden your religious exercise. The only exception is what courts call a reason “of the highest order.” To show this, the government would have to prove (1) that enforcing such a burden would further a “compelling government interest,” and (2) that they cannot accomplish this goal in a way that does not burden your religious beliefs to a lesser extent.

RFRA may be especially important to health personnel working at federal health entities, or in defense against federal agencies that attempt to impose a requirement that violates individuals’ religious convictions.

RFRA has also been successfully used in some cases regarding Obamacare mandates involving religious objections to dispensing or paying for abortion pills. But notably, this law only applies to actions of the federal government itself, as opposed to state or private entities. Some, but not all, states have similar laws or constitutional rules that operate against state government coercion.

The Free Exercise Clause

The Free Exercise Clause of the First Amendment guarantees your right to practice your religion without government intrusion. The Supreme Court has issued many confusing rulings about how the Free Exercise Clause actually works. The bottom line for the present is that the Free Exercise Clause may

protect you if you can show the government singled out religious beliefs for penalty in a way that was not neutral to religion. But, because of the 1990 Supreme Court case *Employment Division v. Smith*, if the government can show that its law applies generally across the board, the Free Exercise Clause might not be a strong defense even if a law burdens your religious beliefs. This is why federal and state RFRAs are important to ensure the government must meet a higher standard whenever it forces you to violate your religious beliefs.

Employment Anti-Discrimination Protections

Title VII of the federal Civil Rights Act of 1964 forbids discrimination in employment on the basis of religion. This means that an employer with more than 15 full-time employees cannot fire, discipline, or discriminate against you simply because of your religious beliefs. Please note that Title VII does not automatically justify any religious objection to job conditions or requirements. Generally, Title VII requires that employers reasonably accommodate your religious beliefs, but if the accommodation unduly burdens the employer, it might not be required to accommodate you.

For example, Louisiana nurse Toni Lemly was fired by a hospital where she had worked for many years because she objected to a new requirement that she distribute the morning after pill. After an ADF Allied Attorney sued on her behalf under Title VII, the courts ruled that Lemly had a right to present her case to a jury: She had raised enough facts to try to convince a jury that the hospital had failed to take steps to accommodate Lemly's objections in a reasonable way.⁹

To learn more about her case, visit ADFLegal.org.

2 What state laws protect the freedom of conscience?

There are several laws that states have enacted that protect the freedom of conscience, which we provide a broad overview of here. Of course, we recommend that you research exactly what laws are in place in your specific state, or contact us for assistance.

State Pro-Life Conscience Laws

After *Roe v. Wade*, many states passed their own versions of conscience clauses such as the ones found in parts of the Church Amendment. These are important, because while the Church Amendment only applies to entities receiving certain federal health funds, state conscience laws tend to apply more broadly.

Generally, these laws protect health personnel and institutions from penalties and liability because they object to being involved with abortions. They usually protect objections not only to performing abortions but also to assisting or participating with abortion in other ways. Some, but not all, of the laws also apply to objections to sterilization or similar practices. Many of the laws ban not only government discrimination but also discrimination imposed by private employers, like hospitals.

State RFRA and Free Exercise Clauses

After the federal government passed the federal RFRA in 1993, a little more than half of the states went on to enact similar laws providing conscience protections to state entities, either by a state RFRA statute or a state constitutional clause. These laws protect the exercise of religion by prohibiting the state or local government from burdening your religious beliefs unless it serves an extremely important interest in the least restrictive way. This is called “strict scrutiny,” and is discussed on page 12 in describing the federal RFRA. Importantly, not all states have these laws, and they generally do not apply to private employers.

State Employment Discrimination Laws

Like Title VII of the federal Civil Rights Act, most states and some counties or cities have their own laws banning employment discrimination based on religion and requiring reasonable accommodations for religious objections. Depending on their wording and judicial interpretations, these laws might apply more broadly than Title VII, such as by applying to smaller companies, or by requiring somewhat more significant levels of accommodation of religious beliefs. In other words, they might not let an employer off quite as easily if it claims accommodating your religion would have been too much of a burden on the business. But in general, businesses are given a significant amount of leeway to claim that religious accommodations would be too

burdensome, so that issue can be a significant matter of dispute in court. If this situation ever arises, it can be helpful for you to have specific examples of how the business has accommodated employees in situations parallel to yours, but still refuses to respect your religious objection.



Does the Constitution protect my healthcare conscience freedom?

Yes, but not in every specific case. One of the many blessings of living in America is our bedrock of constitutional rights. Every citizen possesses constitutional conscience freedom. Unfortunately, courts often do not protect these freedoms as diligently as they should. Moreover, constitutional rights generally only protect you from government coercion, not from penalties imposed by your boss if you work at a private entity. If you are the victim of discrimination from a private entity, there may be conscience protections through various statutes that would protect you, since the Constitution does not generally protect you against private institutions.

In court, the Constitution provides a baseline of protection against the government targeting your religious beliefs, and it informs and inspires our society to respect religious freedom. A disappointing number of courts, however, have ruled that the government can pass laws that generally apply to coerce everyone, and that you as a religious believer might not be able to succeed in calling it a violation of your constitutional religious freedom.

It is for this reason that additional conscience laws, mentioned throughout this manual, are a helpful way to recognize and guard the constitutional and cultural principle of freedom of conscience.

- › The Free Exercise of Religion Clause of the First Amendment of the United States Constitution protects your legal right to exercise your religion without government intrusion or burden. In most cases, however, courts will limit its protection to laws that the court views as directly targeting religion.
- › Recognizing these as-applied limitations, Congress passed the federal RFRA to restore rigorous protections when the federal government burdens religious

activity. Some states have similar protections in their state constitutions, or have statewide RFRA-style laws, which would protect you if the state or local government violated your rights. But other states have no RFRA and their constitutional religious liberty protections are not vigorously enforced by state courts. We encourage you to find out where your state stands in this regard.

› The First Amendment’s Freedom of Speech Clause could protect you if the government requires you to speak a message related to healthcare to which you object. However, recent years have seen unprecedented attacks on free speech in the healthcare profession, such as with pro-life pregnancy help centers, and that area of law is still developing.



Does Obamacare eliminate the protections of conscience laws?

The Affordable Care Act, commonly referred to as “Obamacare,” does not claim to contradict any existing healthcare conscience protections, such as laws protecting people from being required to assist with abortions. There was controversy surrounding the law when it was passed in 2010 because it did not explicitly declare that Obamacare was subject to those conscience laws. Since 2010, the Obama administration has claimed that conscience laws still apply to *some* actions taken under Obamacare. Indeed, some provisions of Obamacare explicitly protect conscience rights. For example, section 1553 of the act prohibits discrimination against individuals or institutional healthcare entities that do not provide help for assisted suicides.

However, such provisions have not eliminated the uncertainty as to the impact of Obamacare on conscience laws, as demonstrated most notably by the large number of lawsuits related to the abortion pill mandate. Other expected bureaucratic mandates pursuant to Obamacare likely will bring further ambiguity. But the enactment of Obamacare does not mean healthcare conscience laws no longer exist or are without import. They can—and should—still be used in the effort to protect freedom of conscience.

CLIENT STORY



Trinity Health

CATHOLIC MEDICAL ORGANIZATION

Trinity Health operates more than 90 hospitals in multiple states across the U.S. One of its purposes is to carry out the mission of Catholic health ministries on behalf of and as an integral part of the Roman Catholic Church. In accordance with Catholic doctrine, Trinity Health follows an Ethical and Religious Directive issued by the United States Catholic Bishops that states: “Abortion (that is, the directly intended termination of pregnancy before viability or

the directly intended destruction of a viable fetus) is never permitted.”

While

prohibiting direct and intentional abortion, the Directive nevertheless allows Catholic hospitals to take steps to save the life of the mother, even if that may unintentionally and indirectly result in harm to her unborn baby.

In October 2015, the American Civil Liberties Union (ACLU) sued Trinity Health, claiming that the Catholic hospitals’ convictions presented a threat to women in the area who might, for elusive “health reasons,” need an abortion and might only have access to a hospital in the Trinity Health network. The ACLU asked the court to rule that Trinity Health’s refusal to intentionally perform abortions violates the Emergency Medical Treatment and Active Labor Act, and the Rehabilitation Act, which protects people with disabilities. The ACLU asked the court to enter an order forcing Trinity Health to reject its Catholic beliefs and commit abortions.

Alliance Defending Freedom (ADF) represents three medical organizations that the judge allowed to intervene in the case on behalf of Trinity Health and healthcare

conscience rights: Catholic Medical Association, Christian Medical and Dental Associations, and the American Association of Pro-Life Obstetricians and Gynecologists. ADF is defending the freedom of the doctors who are members of these organizations to practice medicine in accordance with their deeply held religious belief that abortion is murder.

Thankfully, in April 2016, a federal court threw out the ACLU lawsuit. In the dismissal, the court called their claim “dubious” and “speculative,” and said pregnancy is not a condition that inherently requires abortion, which is encouraging. No one should ever be forced to commit an abortion, and the federal court’s dismissal of the case preserves that truth and protects the staff of Trinity Health from having to make the terrible choice between pursuing their God-given calling in the workplace and living according to their conscience. But the ACLU quickly asked the judge to reverse his decision, and is expected to appeal or file more lawsuits.

“No American should be forced to commit an abortion,” says ADF Senior Counsel Kevin Theriot, “least of all faith-based medical workers who went into the profession to follow their faith and save lives, not take them. No law requires religious hospitals and medical personnel to commit abortions against their faith and conscience, and, in fact, federal law directly prohibits the government from engaging in any such coercion. As we argued in our brief to the court, the ACLU had no standing to bring this suit and demand this kind of government coercion.”

ADF will continue to defend conscience rights that have been on the books in the United States for decades, ensuring the freedom to practice pro-life medicine.



Trinity Health

OBJECTIONS TO SPECIFIC SERVICES

1 Should professionals be required to provide every service that is “legal”?

Many opponents of conscience rights assert that healthcare professionals should offer every “legal” service. In so arguing, they ignore the fact that life-affirming healthcare is itself legal, having been protected by a vast array of laws and constitutional rights for many years. Yet the anti-conscience movement wants to limit or even prohibit such care in certain instances. It has no respect for the legality of conscience, only for the demanded legality of killing activities such as abortion. The ability of patients to choose healthcare that follows the Hippocratic Oath has been not only “legal” but the standard health philosophy for millennia. Healthcare professionals that affirm life, marriage, and fertility are and should remain a legal option for all patients. Maintaining and strengthening healthcare conscience laws are vital steps in protecting such freedom.

2 Is pro-life healthcare a sub-standard way to practice medicine?

In no way! Pro-life medicine is the positive practice of healthcare that unconditionally values human life—the lives of mothers, children in the womb, persons facing life-threatening conditions, and others. It is not simply medicine minus abortion. As this guide sets forth, medicine following the Hippocratic Oath is a longstanding and ethics-based model of practicing medicine.

As Margaret Mead explained, the advent of the Hippocratic Oath created for the first time “a complete separation between killing and curing.” This provided patients, especially the disenfranchised, with the opportunity to choose healthcare professionals who were “dedicated completely to life under all circumstances, regardless of rank, age, or intellect—the life of a slave, the life of the Emperor, the life of a foreign man, the life of a defective child.” Opponents of the freedom of conscience fail to recognize—or to acknowledge—

that their approach to healthcare functionally eliminates the Oath's protection for millions, in the process stripping away freedom of conscience for professionals and patients alike. Such a system would represent an enormous step *backwards* for healthcare.

3 Do I have a right not to perform or assist with abortions?

Yes, you have the right not to perform or assist with abortions. *Roe v. Wade* itself acknowledged the legitimacy of objecting to participation in abortion. After *Roe v. Wade*, the federal government and most states enacted laws that explicitly protect healthcare professionals from being required to participate in abortions and even in some other activities such as sterilizations. The application of such laws varies by situation and employers, and the laws have different enforcement mechanisms. Other laws, like those protecting religious freedom and restricting religious employment discrimination, can provide additional protections that prevent the government from requiring assistance in abortion.

To read more about the specific federal and state laws that protect this right, see page 9.

4 Do I have a right not to assist, aid, or refer patients for abortions, or for other activities that I object to performing?

Yes, depending on the activity. Laws that protect against performing abortions often specify that they protect against other kinds of participation, such as assistance, facilitation, or referral for abortions. For example, multiple federal laws declare you cannot be penalized for refusing to perform, assist, or refer for abortions. Fortunately, pro-life conscience laws apply to healthcare personnel generally, not just physicians.

We understand that healthcare professionals in various situations might have differing views on referring a patient to another practitioner for an activity they will not provide themselves. The extent to which laws protect your right not to refer for an abortion—or other objectionable service—depend on a variety of

factors, including what activity you object to, what participation you are being asked to take, and what other facts apply to your particular situation.

We encourage you to call someone on our legal team for guidance with your specific situation at 1-800-TELL-ADF or contact us online at [ADFlegal.org](https://www.adflegal.org).

5 Do I have a right not to participate in assisted suicides?

Yes, though this area of law is still developing.

First, the possibility of being asked to participate in assisted suicides likely would occur only in the few states that have legalized assisted suicide. Each state statute legalizing assisted suicide varies in the clarity of its language, but some explicitly state that healthcare professionals and entities have the right to decline participation. However, while some have interpreted such laws as protecting persons who wish not to participate, other interpretations argue physicians may need to take such actions as informing patients of assisted-suicide options. Recently, the representative of a prominent assisted-suicide advocacy organization declared that even though Oregon’s law contains conscience protections, he considers it “unjust” to exercise those conscience rights.¹⁰

At the federal level, section 1553 of the Affordable Care Act prohibits the federal government or any state or local government or healthcare professional that receives federal financial assistance under the Affordable Care Act from discriminating against individuals or institutional healthcare entities on the basis that they do “not provide any healthcare item or service furnished for the purpose of causing, or for the purpose of assisting in causing, the death of any individual, such as by assisted suicide, euthanasia, or mercy killing.” Additionally, religious freedom laws could protect you against government requirements to be involved in assisted suicides depending on which laws apply in a particular situation.

Alliance Defending Freedom recently filed a groundbreaking lawsuit in Vermont to stop state agencies there from forcing doctors to tell their patients that one “treatment” option is to assist in ending their life.¹¹ You can learn more about this case on our website at [ADFlegal.org](https://www.adflegal.org).

CLIENT STORY



Cathy DeCarlo,
Surgical Nurse

NEW YORK CITY

Cathy was inspired to become a nurse in high school, when the Philippines were rocked with an earthquake and the school she was attending collapsed around her. She witnessed the doctors and nurses perform life-saving work on those around her, and knew then that she wanted to save lives.

Cathy's dream led her to New York City, where she began working as a surgical nurse at a major hospital which receives a significant amount of federal health funding.

Cathy was committed to her career, but she was also committed to her faith, and when she was hired, Cathy expressed her unwillingness to participate in abortions. She signed the documents that enabled her to opt out of ever having to perform an abortion, and the hospital agreed that they would uphold that

right and assured her that she would never be forced to violate those beliefs.

Five years later, this right was challenged when she was scheduled to participate in what was initially described as a procedure common after miscarriages. When she began to prep the O.R., however, she noticed that the medical instruments being brought in were those needed for an abortion procedure. In looking over the charts, she realized that she had been scheduled for an abortion procedure on a 22-week preborn baby.

The resident on call confirmed, and Cathy called her supervisor. The chart had not indicated that the procedure was an emergency, and so there should have been ample time to schedule a replacement.

Her supervisor called her back, however, and claimed that she had no choice but to participate. If she did not, she could lose her

job and potentially her career.

When she entered the O.R., it was evident that the situation was not an emergency. Yet Cathy was forced to serve as the circulating nurse on the case as the doctor dismembered and killed the baby.

"You can tell me that I was forced into doing this, but that doesn't remove the pain," Cathy said. "I was a part of hurting that child." Cathy had nightmares following this incident, and it took years for her to heal.

The day of this terrible event, Cathy found Alliance Defending Freedom. Two days later, she filed a formal complaint with her supervisor and the nurse's union.

A few weeks later, hospital management cornered Cathy, brought her into a meeting room, and locked the door, trying to force her to sign an agreement stating she would perform abortions. Cathy stood firm and refused to sign the statement. On Cathy's behalf, ADF filed two lawsuits in court and a complaint with the federal Health and Human Services Department. She alleged her rights were violated under the federal Church Amendment, a significant conscience statute.

After an investigation initiated by Cathy's complaints, the hospital changed its policies to allow medical personnel to work according to their convictions and to provide them with an opportunity to opt out of abortions even in situations that are deemed "emergencies."

"Nurses have come to me, telling me that [until this incident], they didn't know they could refuse to do an abortion," Cathy said.

Because of Cathy's stand, she and other healthcare professionals at her hospital won't have to experience what she went through. They will not be forced to violate their convictions and then live with the aftermath.



6 Do I have a right not to provide birth control or sterilization?

In some cases, yes, but maybe not in others. Many, but not all, laws that protect objections to abortions also specify that providing sterilizations cannot be required for health personnel or groups, though not as many laws specify birth control as something to which persons may object. Unfortunately, the legal standard is unclear whether laws protecting objections to abortion also apply to objections to specific drugs and devices that prevent or terminate pregnancy.

This lack of clarity is likely a result of politically edited definitions. In the 1970s, when many pro-life conscience laws were enacted, both conception and pregnancy were defined by medical dictionaries as occurring when the sperm and ovum combine. Under that common understanding, a law protecting freedom of conscience not to assist an abortion should protect against distribution of items destroying embryos in the earliest stages after conception. Many of those laws, however, provide no clarity on this issue, and there is often no court ruling resolving the question. At the federal level, certain regulations not explicitly connected with pro-life conscience laws define pregnancy as beginning at implantation of the embryo in the uterus rather than at the combination of sperm and ovum at conception. Some abortion advocates or courts might seek to use these regulations to deny that a pro-life conscience statute protects objections to abortifacient birth-control methods.

Despite the uncertainty, the following laws may protect your right not to provide birth control or sterilizations:

- › As mentioned previously, some conscience laws explicitly address sterilization.
- › Other laws protect objections to any lawful health service. For example, the Church Amendment contains such a protection, though only if your employer receives federal funds for biomedical or behavioral research.
- › Religious freedom laws may also protect you if the government is attempting to require your participation in the distribution or administration of birth control, though not all states have strong religious freedom protections.

We invite you to contact ADF to speak to an attorney who can assess your specific situation and provide guidance.

7

Do I have a right to refuse to provide transgender-related healthcare services such as sex reassignment surgery and hormone replacement therapy?

Yes, protections do exist for those who object to providing certain procedures, therapies, and surgeries on the basis of religious belief. However, this type of healthcare is still developing, and there are pending regulations that, if passed, might make it harder for healthcare professionals to refuse to participate in these types of services. Contact ADF with any questions related to these types of services.

First, religious freedom laws should serve to protect you from participating in hormone replacement therapies for transgender individuals. As one example, the federal RFRA prohibits the federal government from ever requiring people of faith to participate in such therapy. Likewise, state RFRA may provide similar protection. The Free Exercise Clause of the First Amendment, which applies to both federal and state governments, also prohibits the government from requiring you to violate your religious beliefs by participating in transgender-related healthcare.

Next, Title VII may protect your refusal to participate in hormone replacement therapy and sex reassignment surgery when such refusal is based on religious beliefs. Title VII can prevent your employer from taking adverse employment action against you on the basis of your beliefs rising to the level of religious discrimination.

However, you should be aware of pending regulations in this area of the law. The federal government has enacted new rules that place limits on the ability of healthcare entities and insurance companies to refuse to provide sex reassignment surgery and other therapies aimed at the transgender community. In May 2015, the federal government finalized rules that attempt to forbid any health program or activity receiving certain federal funding from discriminating against transgender-related healthcare, such as hormone therapies and sex reassignment surgery.¹² The Obamacare statute itself contains no language imposing this rule, but the Obama administration has decided to reinterpret statutory language banning “sex” discrimination as if it bans discrimination against sexual orientation and gender identity.

While the proposed rules discuss some conscience protections, the proposed rules could have detrimental effects on healthcare professionals, organizations, and insurers, as they may be interpreted to require that such individuals and entities provide transgender-related healthcare under some circumstances. For example, a doctor who provides therapies for individuals born with both female and male sex organs might be forced to provide sexual reassignment surgery for someone who claims to identify as a gender of their choosing. Such a rule would violate the freedom of conscience of individuals and organizations, contrary to federal law, and would trample on the rights of those who do not wish to provide such therapies on the basis of sincerely held religious beliefs. Lawsuits have been filed to challenge this and other bureaucratic interpretations of the executive branch inside and outside Obamacare, and more are expected.

Suffice it to say, this area of the law continues to develop at a rapid pace, and emerging legislation and litigation in this area will likely have an impact on the way you seek to live out your beliefs in your patient care. If you have concerns or questions, please call ADF to speak to an attorney about your rights.

8 Do I have the right to refuse to participate in capital punishment?

Yes. You cannot be forced to attend or to participate in death penalty executions. Many states and the District of Columbia have outlawed capital punishment altogether, and in the remaining states, there are conscience protections to protect those who object to participation on religious grounds.

The following are a few of the relevant laws and protections:

- › Federal law states that no employee of any state department of corrections, the Federal Bureau of Prisons, the United States Department of Justice, or the United States Marshals Service, and no employee who provides services to that department, bureau, or service under contract can be forced to attend or to participate in a federal execution.¹³ This law also protects those who are providing services to such departments, but are not actual employees. For example, this would apply to contract doctors and would prevent these federal agencies from forcing them to administer lethal injection in violation of their religious beliefs.

- › State laws protect physicians, though they vary in their protections. Several states, such as Arizona, require that individuals participating in an execution must do so on a voluntary basis. California explicitly protects physicians in this way, providing that “no physician or any other person invited pursuant to this section, whether or not employed by the Department of Corrections, shall be compelled to attend the execution, and any physician’s attendance shall be voluntary.”¹⁴ Other states, such as Connecticut, forbid compelling anyone to participate in an execution. These laws appear to allow objections for any reason, religious or not. Still other states protect objectors who rely on religious or moral grounds for refusing to participate in capital punishment, much like the federal protections.
- › Religious freedom laws protect you from participating in capital punishment. The federal RFRA protects against the federal government ever requiring people of faith to participate in executions. Likewise, state RFRA’s may also provide this protection. The Free Exercise Clause of the First Amendment, which applies to both federal and state governments, prohibits the government from requiring you to violate your religious beliefs by participating in capital punishment.
- › Title VII also protects your refusal to participate in capital punishment when such refusal is based on religious beliefs. Title VII can prevent your employer from taking adverse employment action against you on the basis of your beliefs rising to the level of religious discrimination.

LEGAL PROTECTIONS FOR DIFFERENT FIELDS

1 Are medical students, residents, and applicants protected by conscience laws?

Yes, particularly with regard to abortion. There are several pro-life conscience laws that explicitly mention the conscience rights of students or applicants to a health school or residency. Medical residents are employees, so any conscience protection that applies to an employee or applicant for employment would apply to them. Some of these laws include:

- › The Church Amendment, which protects applicants to training, study, internship, and residency programs from discrimination because they are reluctant to counsel, suggest, recommend, assist, or in any way participate in the performance of abortions or sterilizations, as applicable in programs receiving certain federal health funding.
- › The Coats-Snowe Amendment, which declares that governments or government schools cannot require students or residents to train, perform, or refer for abortions, or arrange for any of those activities.
- › State conscience laws regarding abortion can protect medical students by mentioning them specifically or by applying to “any person” who might be required to assist.
- › Religious freedom laws, which generally prevent the government from burdening your religious beliefs absent a compelling interest, would likewise protect medical students in various contexts.

As discussed previously, laws vary in the extent to which they would protect objections to practices besides abortion, such as birth control. General religious accommodations, if applicable in the situation, might be of assistance for those objections.

2 Are pharmacists protected by conscience laws?

Yes, although the results vary in different legal cases, pharmacists are protected under various conscience protection laws. As discussed previously, the laws and their protections vary depending on the state the pharmacist practices in, the employer he or she works for, and the activity they object to performing. Some healthcare conscience protections explicitly include pharmacists, while others do not:

- › Religious freedom laws such as the Religious Freedom Restoration Act or state equivalents thereof can be used to shield pharmacists from some government mandates that require them to stock or dispense certain items.
- › The Free Exercise Clause of the First Amendment is also used in efforts to protect pharmacists' right to refuse to dispense objectionable medications. Different cases have led to varying results in this context. Pharmacists in Illinois were able to use state healthcare conscience and religious freedom laws to protect themselves from a state mandate to carry the morning-after pill, while pharmacists in Washington state were less successful in front of several federal courts.
- › Employment accommodation laws might also assist a pharmacist whose employer requires staff to be involved in certain procedures.

3 Do psychological counselors and social workers have a right to practice consistently with their beliefs?

Yes, they do. The areas of counseling and social work are an important part of the larger health profession. It is estimated that one in five citizens experiences a mental health difficulty each year.¹⁵ As most would agree, to many patients, utilizing an individual, marital, or family counselor who shares their faith and deeply held values about fundamental issues like marriage is vital to their healing. Therefore, it is of increasing importance that professionals working in the mental health field have the ability to offer guidance that stems from their values.

The First Amendment of the U.S. Constitution has protected counseling professionals from government universities or licensing boards that seek to

eliminate them from the profession for their Christian views. As just one example, consider Julea Ward’s story on page 29.

Some states, such as Mississippi and Tennessee, have passed specific laws protecting counselors from discrimination based on their beliefs about marriage as a union between one man and one woman. Religious freedom protections, to the extent they are applicable, might also protect a counselor facing government discrimination based on their core beliefs. As you research the applicable law in your state, don’t hesitate to contact ADF for assistance.

4 As a member of the healthcare community serving in the military, do I have conscience rights?

Yes. The federal RFRA applies to members of the military (you can read more about the federal RFRA on page 12). Congress strengthened the specific conscience protections for those serving in the military under the National Defense Authorization Act (NDAA) for the fiscal year 2014. They did this by specifying that, generally:

“...[T]he Armed Forces shall accommodate individual expressions of belief of a member of the armed forces reflecting the sincerely held conscience, moral principles, or religious beliefs of the member...” and “...may not use such expression of belief as the basis of any adverse personnel action, discrimination, or denial of promotion, schooling, training, or assignment.”¹⁶

Individual armed services might have additional conscience protections in their own rules. All of these protections should be utilized to enable those serving in the military as a healthcare professional to assert conscientious objections to medical procedures and therapies without suffering adverse employment action.

You should be aware that under federal law, no medical facility or any other facility operated by the Department of Defense, such as military bases, can be used for elective abortions, though they can and sometimes are used for abortion in cases alleging rape, incest, or a threat to the life of the mother. By extension, a person serving at a Department of Defense facility—either domestic or abroad—should have a right not to participate or assist in elective abortions. Even in situations involving rape, incest, or danger to the life of the mother, military

CLIENT STORY



Julea Ward,
Counseling Student

EASTERN MICHIGAN
UNIVERSITY

As a high school teacher, Julea found that she enjoyed talking to and counseling her students more than the academic side. So, even though she already had two master's degrees, she went back to Eastern Michigan University to pursue her master's in counseling.

By all accounts, she was an excellent student with high grades and was well-respected by her professors.

Julea was not shy about her Christian beliefs, however. In class discussions, she made it clear when she did not agree, and did not back down, which did not cause her any problems until her practicum, one of the final courses Julea needed to complete her degree.

As part of the practicum, Julea would meet with actual clients along with her adviser, who would observe how she used the techniques learned in her other classes. Julea explained to her adviser

that she was a Christian, which led to a discussion regarding homosexual behavior.

"I explained that I was a Christian, and that I could not [endorse] homosexual behavior," Julea said. "That had nothing to do with the person, because I can respect every person, but in terms of affirming that behavior, I would not be able to do that."

It is not uncommon in the counseling profession for there to be a "value-based conflict," which is what this was for Julea. And most clinics and academic institutions make allowances for that.

A few days later, Julea arrived at the clinic early to review a new client's file where she saw that he was seeking counsel about his homosexual relationship, which the previous counselor had affirmed.

She knew she would not be able to affirm the relationship because of her faith, so she called her adviser to ask if she should refer the case to another counselor, or if she should wait until an issue came up. Her adviser told her to refer the client, and she did.

However, her adviser let her know a few days later that she would be launching an informal investigation of Julea for refusing to counsel homosexuals—even though Julea had never refused to counsel the client. She had simply made it clear she would not affirm his same-sex relationship.

The informal investigation concluded and gave Julea three options: she could (1) go through "remediation" so she could be shown the error of her beliefs, (2) voluntarily withdraw from the program, or (3) request a formal investigation.

Julea refused to abandon her beliefs, so she decided to request a formal investigation. The school responded by expelling her from the program. She reached out to Alliance Defending Freedom for help, and ADF filed a lawsuit against Eastern Michigan University on her behalf.

The school eventually settled, paid Julea \$75,000, and removed her expulsion from her records.

Julea's actions made a difference for Christian students at EMU and other universities, so that they are free to hold on to their convictions. And ADF will continue working toward a culture that protects freedom of conscience, even when your beliefs don't conform with the government's favored view.



doctors should rely on conscience protections requiring religious accommodations to protect your ability to refuse to participate in or perform abortion procedures.

For an objection to prescribing birth control, doctors serving in the military should utilize the NDAA and religious freedom laws. Additionally, specific branches of the military have created their own rules for pharmacists or healthcare professionals who object to providing certain contraceptives. Here are some examples:

- › The Air Force has a policy for healthcare personnel who object to dispensing emergency contraception or engaging in “family planning services” for “moral, ethical, religious, personal, or professional reasons,” and those individuals “will not be required to engage or assist in such procedures unless the refusal poses a life-threatening risk to the patient.”¹⁷
- › The Navy and the Marine Corps require that Navy healthcare facilities develop policies that ensure patients receive emergency contraception promptly if their healthcare professional and pharmacist has “moral or ethical beliefs that conflict with prescribing, dispensing, or distributing emergency contraception.”¹⁸
- › The Army has a substantially similar policy, discussed in an October 2013 memo, describing that patients should receive emergency contraception but recognizing “moral or ethical beliefs that conflict with prescribing, dispensing, or distributing” them.

Importantly, these service-specific policies can vary regarding whether they apply to birth control in general or emergency contraception specifically. The more general religious accommodation policies and laws would apply to any procedure and even outside the healthcare context.

IF YOU WOULD LIKE ADDITIONAL GUIDANCE AFTER READING THROUGH THIS MANUAL, PLEASE DON'T HESITATE TO CONTACT ALLIANCE DEFENDING FREEDOM AT 1-800-TELL-ADF OR VISIT ADFLEGAL.ORG.

Calling ADF for information is entirely confidential and free of charge. We are here to help you protect your rights of conscience as you uphold your values and deeply-held beliefs in your calling to serve the healthcare needs of others.

CONCLUSION

As you work to provide the best possible healthcare for your patients, know that there are a great number of protections for healthcare professionals who wish to live by their faith and by the guiding principles of the Hippocratic Oath.

It may not always be easy to protect and defend life in your profession. Pressure from shifting culture and law may seem intimidating and discouraging. But whatever your specific healthcare profession, we can work together so you can feel secure in your right to live and work according to your conscience.

If you ever run into a situation at work where your right to opt out of certain situations or procedures is taken away, don't hesitate to call Alliance Defending Freedom at **1-800-TELL-ADF** or **contact us on our website at ADLegal.org**. Even if you have general questions about your rights, you can call ADF. You will never be charged for our legal services.

Visit www.ADFlegal.org/Resources to
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End Notes

- ¹ *The Writings of Thomas Jefferson*, H. A. Washington, editor (New York: Biker, Thorne, & Co., 1854), Vol. VIII, p. 147, to the Society of the Methodist Episcopal Church at New London, CT on February 4, 1809.
- ² The Federalist Papers No. 10 (James Madison).
- ³ Psychiatry and Ethics (1972), Maurice Levine, M.D., George Braziller, pub., ISBN 0807606421 ISBN 9780807606421, pp. 324-325.
- ⁴ *Roe v. Wade*, 410 U.S. 113, 144 n.38 (1973); *Doe v. Bolton*, 410 U.S. 179, 197-98 (1973).
- ⁵ Found at 42 U.S.C. § 300a-7.
- ⁶ Public Law 93-348, § 214 (1973).
- ⁷ See, e.g., Div. G, § 508(d) of the Consolidated and Further Continuing Appropriations Act 2015, Pub. L. 113-235, 128 Stat 2130, 2515 (Dec. 16, 2014).
- ⁸ Beginning at 42 U.S.C. § 2000bb.
- ⁹ <http://www.adfmedia.org/News/PRDetail/2292>.
- ¹⁰ <http://www.usnews.com/news/articles/2016-08-26/a-complicated-prognosis-for-medicine-and-religious-liberty>.
- ¹¹ <https://www.adflegal.org/detailspages/press-release-details/vermont-health-professionals-don-t-force-us-to-help-kill-our-patients>.
- ¹² See 45 C.F.R. 92 (Sept. 8, 2015).
- ¹³ 18 U.S.C. § 3597(b).
- ¹⁴ Cal. Penal Code § 3605(c).
- ¹⁵ <https://www.nami.org/Learn-More/Mental-Health-By-the-Numbers>.
- ¹⁶ H.R. 3304 (2014).
- ¹⁷ Air Force Instruction 44-102, Chapter 9.4.6.8.
- ¹⁸ Navy Medicine Policy Memorandum 14-001 (Apr. 24, 2014).

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