

CONTRACEPTION REVISITED

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CONTRACEPTION has contributed to more than a little distress for Catholics who find the Church's teachings regarding the immorality of artificial means of contraception contrary to responsible sexual practice and parenthood within sacramental marriage. Since Pope Paul VI's encyclical *Humanae Vitae* of 1968, which reaffirmed the teaching on contraception, there has been ever decreasing adherence to it by the catholic lay community. Many surveys have suggested that up to 80% of nominal Catholics disagree with the teaching.

The Church's teaching on contraception is by no means new. Indeed, the Old Testament condemns contraception as contrary to God's law and all Christianity had done so until the Anglican Conference of Lambeth in 1930 when the Anglican Church formally permitted artificial contraception. Some Western Christian societies banned contraception under Civil Law until as recently as the mid-twentieth century. Other Protestant denominations soon followed the Anglican position after the Lambeth Conference, leaving the Catholic Church as the sole adherent to the concept of the fundamental immorality of frustrating God's creative purpose and intention through contraceptive measures, all considered to be contrary to the natural moral law.

Human life and the family form an important part of the considerations to be addressed later this year and next in synods established by Pope Francis. Since the processes surrounding contraception were not fully understood scientifically until the mid twentieth century, perhaps the time has come for the teaching on contraception to be revisited and either affirmed yet again or modified.

The question, '*When does life begin?*'

dictates the moral and ethical debate on such matters as contraception and abortion. The answer has always been '*at conception*'.

It was not until the twentieth century, however, when medical science advanced through microscopy and a knowledge of hormones and their effects on human tissues that the processes involved in conception were accurately identified. It is now known that pregnancy results from first, fertilisation of an ovum; second, the fertilised ovum's development to the blastocyst stage; third, the successful implantation of the blastocyst in a receptive lining of the womb. Each of these three stages, although wonderfully coordinated in one seamless process, is in fact separate in its individual implication for the inevitable formation of human life. The fertilised ovum faces a perilous journey of some 6-7 days, which it may or may not survive, during which the single fertilised ovum repeatedly divides to form the multicellular blastocyst before it is implanted in the womb.

Human life is not inevitable with fertilisation of an ovum, neither is it inevitable with development to the blastocyst stage, both of which processes take place outside the womb in the abdominal cavity and in the Fallopian tube. Thus, although the fertilised ovum is living and identifiably human in its cellular characteristics, for at least 6-7 days from the time of fertilisation it does not represent the established *inevitability of human life* but rather the *potential for human life* which might never come to pass because of natural attrition, the fate of many fertilised ova.

The implanted, living, human embryo is in the earliest stages of an evolutionary journey which will continue for many years through intrauterine life, infancy, childhood and a variable portion of adulthood. At all

stages of its evolutionary journey following implantation in the womb the developing cellular mass is identifiably human, is alive, and possesses the inevitability to realise 'that unitary and integrated whole that is the human self'. (In an address to *The 18th International Congress of the Transplantation Society* in Rome on the 29th of August, 2000, Pope John Paul II clarified the Catholic teaching on death in the words, 'the death of a person is a single event consisting in the disintegration of that unitary and integrated whole that is the personal self'. This statement, in defining death, also defined human life). The *inevitability of human life* can only exist with the advent of the spiritual component of the human being, bestowed by God the Creator, since human life does not exist without both a mortal human and an immortal spiritual element (the soul). That inevitability comes with implantation of the blastocyst in the womb. Thus, it can be genuinely argued, that *human life does begin at conception*, specifically at that time during the conception process when successful implantation of the blastocyst in the womb occurs and not at fertilisation of the ovum or during its journey to the womb.

With a fuller appreciation of the physiological processes associated with the establishment of pregnancy, the American College of Obstetricians and Gynaecologists in 1972 formally defined conception as implantation of a fertilised ovum in the womb. If this definition of conception is accepted, the implication for contraception is that the moral position should take account of the *inevitability of human life* with implantation rather than the *potential for human life* that attends the processes preceding implantation, namely, fertilisation and the development of the blastocyst. If any immorality, then, is to attach to preventing fertilisation by contraceptive measures, it is reasonable to suggest that such immorality is different from that which attaches to preventing implantation or destroying an already im-



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planted embryo by contraceptive measures.

The physiological processes of conception raise the question, 'If fertilisation does not lead inevitably to human life, is the prevention of fertilisation immoral?' The prevention of fertilisation and implantation are fundamentally different, fertilisation representing *potential human life*, not possessing an individual soul, and implantation representing *inevitable human life* possessing an immortal soul. This implies that neither a single spermatozoon or a single ovum possess an individual spiritual component or soul, a concept analogous with taking an organ from one living person, the donor, and transplanting it in another, the recipient. The organ itself does not embody the soul of the donor, neither does it bestow a new or additional spiritual component on the recipient. The implications of this concept are that fertilisation which bestows only *potential life* does not include the genesis of an individual spiritual element or soul, while implantation which bestows *inevitable life* does.

Thus, the fundamental difference between the deliberate frustration of fertilisation and the deliberate frustration of implantation may imply a different gravity of immorality in such actions. In Catholic moral teaching, degrees of gravity in immoral action are expressed in the concepts of venial and mortal sin. The prevention of fertilisation which does not destroy an inevitable human life might properly fit into the venial category, the immorality related to the deliberate attempt to deny the *potential for procreation* implicit in the

sacramental marriage covenant. Once implantation has occurred, however, to terminate that life as a form of contraception equates with abortion and fits the grave or mortal category of sin. Clearly there exists a great difference between the two and perhaps Catholic teaching on contraception should reflect that.

The prevention of fertilisation involves a number of well documented artificial means while the artificial prevention of implantation relies on an intrauterine device (IUD) which prevents implantation by producing hormones and by physically damaging the womb lining, both of which render the womb unreceptive to the fertilised ovum. Surgical sterilisation of either man or woman as a contraceptive is an anti-fertilisation measure and thus attracts the same moral consideration as other anti-fertilisation methods. However, it does involve the abandonment of responsible moral stewardship of one's own life in the deliberate risking of that life and in the mutilation of one's own body in unnecessary surgery. It thus incurs a degree of moral transgression elevated above the venial level. None of the anti-fertilisation methods interfere with an already implanted ovum and thus do not influence the *inevitability of human life*. Once implantation has occurred the *inevitability of human life* now exists and this is patently no longer a matter of contraception but a matter of deliberately terminating human life *in its inevitable fullness which includes an immortal soul*, albeit in the very earliest phases of its inevitable journey to that *unitary and integrated whole that is the human self*.

Some IUDs have been modified to carry abortifacient drugs such as ellaOne and orally administered abortifacient drugs such as RU486, both of which are available under the guise of contraceptives when indeed they are abortifacients. Following implantation, deliberate abortion is the only option to avoid the eventual birth under normal circumstances of a human being. The IUD and the abortifacient

drugs must be considered the gravest form of artificial contraception.

Any method of contraception within marriage must be evaluated in the light of the Creator God's purpose for sexual union of man and woman. That purpose is the creation of human life through the intermediary of man and woman and is the basis of the sacramentality of Catholic marriage, a covenant (or contract) between the married couple and God for the purpose of creation of human life. Sexual union within marriage, if it is in accord with the moral natural law, must, in Catholic teaching, be open to the creation of human life. Thus any conspiracy to defeat that purpose is contrary to Catholic teaching.

Prevention of fertilisation by natural means enjoys moral approval in Catholic teaching, and represents perhaps the greatest of all paradoxes. Natural means of birth control (the Billings method) demands very concentrated intent and cooperation by both partners in a sexual relationship with the express purpose of identifying ovulation and by avoiding sexual intercourse for some days before and after ovulation occurs. Such conspiracy to defeat God's purpose of creation is equally as contrived as other means of contraception with the sole aim of deliberately preventing pregnancy. To assume a favourable moral position for the Billings method flirts with fallacy or, more explicitly, embraces it. Indeed, acceptance of a moral position for the Billings method represents a simple Aristotelian syllogistic fallacy. (All contraception [A] is deliberate prevention of pregnancy [B] — All deliberate prevention of pregnancy [B] is immoral [C] — therefore, All contraception [A] is immoral [C].) The Billings method should logically be considered in the same light as other means of contraception, since the immorality exists in the intention to prevent God's creative covenant with the married couple, not the means whereby that intention is achieved.

Within marriage, in view of the sacramen-

tal nature of the marriage covenant, contraception must of necessity take account of the responsible procreation of human life and acceptance of the stewardship of any life for which the marriage partners are responsible. That stewardship involves the care for the moral, spiritual and temporal well-being of all children in the family, those living and any future children conceived. This is a responsibility which must be part of the consideration of parents in the decision to use anti-fertilisation forms of contraception balanced against the ability to provide the moral stewardship of parenting.

Indeed, it can be argued that the responsibility of parenthood in the interests of the moral wellbeing of the children is a greater moral imperative than producing a child in circumstances wherein the moral steward-

ship of the child is not possible, when such an event could be prevented by anti-fertilisation means of contraception carrying a lesser moral imperative. The same balance, however, can never be justified if the contraceptive measure used involves abortion of an implanted embryo regardless of the duration or tenure of that embryo in the womb. God will judge the decision that the morally responsible and informed parent has made in a non-contrived conscience.

So that conscience on this matter can be informed, there is an urgent need for review and clarification of the Church's teaching on the nature of human life and its conception and the establishment of an education commitment to the Catholic laity. Pope Francis' upcoming synods on the family provide the opportunity to do this.

SYNOD OF BISHOPS INSTRUMENTUM LABORIS:
*The Pastoral Challenges of the Family in the Context of
Evangelisation, Vatican City 2014*

Pastoral Recommendations

128. From the pastoral point of view, the responses, in very many cases, see the need to make better known what was stated in *Humanae Vitae* and to propose a coherent anthropological vision in revitalized language, not only in pre-marriage preparation but also in instructional courses on love in general.

Some responses suggest that the presentation of the methods of the natural regulation of fertility be done in collaboration with well-qualified people from both the field of medicine and the parish. For this purpose, the responses insist on collaboration with academic institutions engaged in study and research on these methods and in the promotion of a more ecologically-minded approach to human living.

VATICAN CITY, June 27, 2014. In the lead up to the forthcoming Synod on the Family, the Vatican has released the results of a worldwide consultation addressing a variety of pastoral topics, such as same-sex ‘marriage,’ reception of the sacraments for divorced and remarried couples, and the promotion of openness to life.

The *Instrumentum Laboris* (working document), which has been made available on the Vatican website, is based on questions in a Preparatory Document which was sent out to dioceses around the world about a month after Pope Francis called for the Synod on the family. [...]

The working document notes that many responses were ‘submitted by the synods of the Eastern Catholic Churches *sui iuris*, the episcopal conferences, the departments of the Roman Curia and the Union of Superiors General. In addition, other responses—categorized as *observations*—were sent directly to the General Secretariat by a significant number of dioceses, parishes, movements, groups, ecclesial associations and families, not to mention academic institutions, specialists, both Catholic and non-Catholic, all interested in sharing their reflections.’

Convoked by Pope Francis on 8 October 2013, the Extraordinary General Assembly of the Synod of Bishops, which will take place October 2014, will focus on the theme: *The Pastoral Challenges of the Family in the Context of Evangelization*. [...]

The 75 page document is divided into three parts, reflecting the eight primary subjects addressed the questionnaire. Part one, the Gospel of the Family, ‘treats the divine plan and the vocation of the person in Christ’.

‘Within this perspective, the section gives indications—positive as well as negative—of the faithful’s knowledge and acceptance of pertinent teachings on the family from the Bible and the documents of the Church’s Magisterium as well as the faithful’s understanding of the natural law.’

The second part of the document, entitled ‘The Pastoral Program for the Family in Light of New Challenges’, addresses ‘various chal-

lenges and actual situations related to the pastoral care of the family.’

Finally, part three is dedicated to the topic of an openness to life and the responsibility of parents in the upbringing of their children—characteristic of marriage between a man and a woman—with particular reference to difficult pastoral situations.

Included among the themes which the working document addressed are the issues pertaining to homosexual partnerships, the reception of the sacraments for divorced and remarried couples, cohabitation, and the promotion of openness to life.

The document also addresses the issue of diversified acceptance of Church teaching on matters pertaining to the family and sexual morality.

‘A good number of episcopal conferences mention that, when the teaching of the Church is clearly communicated in its authentic, human and Christian beauty, it is enthusiastically received for the most part by the faithful,’ the document reads, adding: ‘Church teaching is more widely accepted, when the faithful are engaged in a real journey of faith and are not just casually curious in what might be the Church’s thinking in the matter of sexual morality’.

In the converse, the document notes that many respondents to the questionnaire ‘confirmed that, even when the Church’s teaching about marriage and the family is known, many Christians have difficulty accepting it in its entirety.’ Examples of this difficulty pertain to acceptance of Church teaching on contraception, divorce and remarriage, homosexuality, *etc.* ‘However, many responses recount how Church teaching on the dignity of human life and respect for human life might be more widely and readily accepted, at least in principle.’

In the follow-up to October’s Synod on the Family, an Ordinary General Assembly will be held in 2015, ‘representing a great part of the episcopate and continuing the work of the previous synod, will reflect further on the points discussed so as to formulate appropriate pastoral guidelines.’

—Ann Schneible