

CO-OPERATION IN CONTRACEPTION?

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I have, on several occasions in the past, detailed the Church doctrine on present day ethical problems, to the priests and Catholic associations of my diocese. This has been, amongst others, in relation to contraception.

Today I feel it necessary to resume certain elements of this doctrine and to add to it a number of considerations on the campaign conducted by the Ministry of Health and Family Welfare for the benefit of contraception.

I. The public authority campaign for contraception

Since 1973 the public authorities have been conducting a campaign in favour of contraception.

The first important step was made when the First and Second Chambers adopted the Act of 9 July 1973, by which the three last paragraphs of Article 383 of the Penal Code, concerning contraceptives, were abolished. From that date on, the displaying, distributing and advertising of contraceptives, as well as the profit motivated manufacturing, displaying, selling and publishing of articles promoting or recommending contraceptives, has been legally permitted. This was formerly prohibited and punishable by law.

A Royal Decree of 9 July 1973, however, ruled that contraceptives would from that date on be identified with pharmaceutical products, as far as registration, control, quality, efficiency, scientific responsibility, etc., are concerned. Contraceptives (with the exception of condoms and diaphragms) may only be dispensed by a chemist under doctor's prescription.

A Royal Decree of 12 July 1973 allows the centres for premarital, marital and family consultations to hold a stock of contraceptives, under the responsibility of a doctor who is a member of the consultative board.

A short time after that the Government made public a supplementary decision: 25 million Belgian Francs would be spent on an information campaign for contraceptives. This decision went further than the Act of 9 July: whereas this Act only legally permitted the publication of articles on contraceptives and their

advertising, the Government now decided to actively participate in the instruction of the population. The Secretary of State for Family Welfare started organizing an ambitious information campaign; she therefore appealed for the co-operation of doctors, nurses, women's associations and the modern mass-communication media.; she even envisaged the co-operation of the army and the schools.

This campaign in favour of contraception has since then been continued by the Ministry of Health and Family Welfare. In February 1974 this Ministry started widespread distribution of a brochure entitled *Anticonceptie en Verantwoord Ouderchap* ("Contraception and Responsible Parenthood")¹, destined for the population. At the beginning of April 1975 the Ministry sent a second document with almost the same title to doctors, chemists, midwives, female nurses and social workers.² According to the accompanying letter this working-document aims at "giving scientific information about contraceptives"; it also intends paying special attention to "the psychological aspects of contraception"; the Ministry intends having this document supplemented with information about "new scientific improvements or studies on contraception". For that purpose an appeal is being made to the above-mentioned groups, asking them to co-operate in the contraception campaign by supplying information and by giving efficient contraceptive assistance to all who need it: married people, and if necessary unmarried people, or even minors.

In connection with this campaign several priests, almoners in hospitals and maternity clinics, as well as doctors, chemists and nurses asked us the question: may doctors, chemists and nurses participate in the campaign for a generalized and more efficient use of contraceptives? For the persons concerned, and certainly for the faithful catholics, the Ministry's request will indeed pose serious questions of conscience, and "conscientious objections", the brochure itself says, "should never be lightly waived" (p. 28). The conscientious objections of faithful Catholic doctors, chemists or nurses are, however, not mentioned in the brochure.

We consider it our duty to inform the believing community about the attitude they have to adopt with regard to the propaganda for generalized contraception. And we more particularly want to

¹ *Anticonceptie en Verantwoord Ouderchap*, Brussels, 1974, 28 pages
 † Introduction (2 pages) by The Right Honourable J. De Saeger, Minister for Public Health, Environmental Problems and Family Welfare.

² The second document is titled: *Anticonceptie — Verantwoord Ouderchap*, Brussels, 1975. This, like the first brochure was drawn up by a 'multi-disciplinary committee' comprising a number of people with divergent ideologies. The letter accompanying this second brochure was signed by Minister J. De Saeger.

outline which attitude those of the sick-nursing sector concerned — who consciously want to carry out their duties as faithful Catholics — should adopt.

II. The Church doctrine on contraception

Catholic ethics teach that birth control is morally justified in particular cases, or is even an obligation. Catholic married people are not obliged to build up a large family, although this kind of family deserves all respect and admiration. They do well to limit their fertility with a view to rational family planning, or where the wife's or husband's health, low income, suitable education for their children demand it. But such limitation must not be achieved by means of any contraceptive method. Conception may only be prevented by abstaining from fertile intercourse by periodic or, if necessary (in rather exceptional cases), prolonged complete abstinence. Abstinence is wrongly classified under the heading of real contraceptives; as a true to nature method it is essentially different from the unnatural methods. We use the word "contraceptives" exclusively to indicate the artificial methods of contraception, and not the rhythm method.

The use of a real contraceptive method or means is not just merely prohibited by the Church, it also runs counter to a principle of natural and Christian ethics. This is apparent from the traditional doctrine of the Church, amongst others from its condemnation of the so-called onanism, explicitly detailed in the doctrine of Pius XI (encyclical letter *Casti Connubii*), Pius XII, John XXIII, Paul VI (encyclical letter *Humanae Vitae*). Those who wish to behave as faithful Catholics, have to take this doctrine of the Church into account, in spite of the differing or contradictory statements of some moralists and their followers who disrupt Catholic marriage ethics.

The above-mentioned brochures of the Ministry of Health and Family Welfare talk in terms that do not at all correspond to the doctrine of the Church; they seem to take it for granted that everyone, the faithful as well as those of different belief, uses contraceptives in many instances and gives assistance, if necessary, in matters of contraception.

III. Contraception and responsible, conscious parenthood

The title of the two brochures ("contraception — responsible Parenthood") raises important questions. What is meant by "responsible parenthood? The title plainly suggests that an efficient use of the contraceptive described is useful to or necessary for the achievement of responsible parenthood. The fact that contracep-

tives are also widely used outside or before marriage — in contradiction to responsible parenthood — is completely overlooked in the brochures.

1. The expression "responsible parenthood" in fact means a limitation of parenthood, of the fertility of both parents, a limitation that can be justified. To the faithful Catholic it is a conscientious justification before God of a limitation (as described above), based on a morally acceptable method in accordance with the doctrine of the Church.

By using all kinds of contraceptives many "church-goers" (just like people of different belief) control their fertility in a wrong way. Objectively speaking they act immorally; subjectively speaking they can be more or less excused. This is amongst others the case with many "superficial believers" who eagerly accept the new theories on the importance of sexuality, on modern partner-marriage, on the unacceptability of the condemnation of contraceptives by *Humanae Vitae*. We immediately think of the many whose main concern is for an easy, comfortable life and justify it to themselves by thinking: everybody does it, so it cannot be that wrong. It also occurs to more serious believers who miss the religious inspiration and the moral vigour to live in abstention under difficult circumstances.

For irreligious people, the humanist and his lay ethics, "responsible parenthood" may have a rather different signification. In this case it signifies a limitation of fertility he can justify to himself, to his surroundings, and also to public opinion. Such limitation can be taken too far, namely in the case where marriage is regarded and experienced as a community of partners in which the child is only of second importance or even an interfering element. Here fertility can be controlled by all contraceptive means and methods that are efficient, that are not very harmful to health and that please the two partners.

2. Among Catholics too, "conscious parenthood" has for some time regularly been a subject for discussion. One properly stresses that creating and educating a child is a very important and heavy task. Can a serious married couple just leave this to chance? It is said that the partners can only assume parenthood consciously and willingly. They have the right and the duty to prevent unwanted pregnancy, more particularly by using the contraceptives modern science puts at their disposal. Conscious parenthood is represented and propagated as responsible parenthood because a wanted child is supposed to be accepted with more love and to be educated with more devotion than an unwanted, accidentally conceived child; moreover, it does not lead to the temptation of abortion.

many different diseases by using the appropriate medicine. He holds the course of his life in the palm of his hand in many fields, and to a greater extent than in earlier days, and controls it independently according to plan and at his own will.

That is what he also has been doing over the last few years in the field of procreation of human life. His fertility appears to him to be an ill-regulated natural force that has to be dominated and controlled. Modern man no longer accepts accidental pregnancy that is thrust upon him against his will. Whereas he formerly, and sometimes reluctantly, accepted an unwanted pregnancy, he now uses some contraceptive that has been created by advanced biological knowledge. He controls and dominates his fertility at his own will, just like another natural force, using technical intervention that does not demand self-control or moral effort.

The modern believer eagerly makes use of technical progress, just like his unbelieving fellow-man, but he does it in a morally justified way, according to the prescriptions of natural and Christian ethics. He does not simply consider fertility an ill-regulated natural force that has to be dominated by technical means, but as a gift from God facing him with the problem of becoming God's collaborator in the secret of procreation of human life. He knows that nobody holds his future, more particularly the course of his married life, in their hands; that fertility according to God's teaching can make married people face unforeseen situations, even hard trials. He knows that he may not manipulate and disturb the sources of human life by technical intervention, thus rendering infertile what the Creator wished, in love, to be fertile. He puts his trust in Divine Providence, in God's merciful help, in order to overcome the possible difficulties and to bear the burdens that a morally responsible control of fertility often involves.

The large family of former times undoubtedly did not always deserve the praise it was given in sermons. A useful or necessary limitation of fertility was too often overlooked. But in many cases the parents showed a deep concern to serve God and to bestow members on his Church and their people by building up a large family, rather than giving way to their love of ease. Although a child could be unwanted in such a family and increase the burdens to a high degree, it nevertheless was willingly accepted and educated with much unselfish devotion. A child that is wanted only for the satisfaction of its parents and as only child, or one of a very small family, is spoilt, stands less chance of getting a solid education than an unwanted child that is nevertheless accepted with a Christian sense of duty and without reluctance. It may be noted in passing that Catholic married people who generously pro-

create a large number of children and assume the burden of educating them, will ask whether they have to be ashamed and have to regard themselves as parents without a sense of responsibility.

IV. Generalized contraception and its consequences

"A sociological study by R. L. Cliquet and colleagues (1972) showed that 88% of married women make more or less regular use of a contraceptive method... One also notices that sexual intercourse between unmarried people, and more particularly between unmarried minors, is frequent, and that these persons often do not use contraceptives or only employ unreliable methods."³ It gives the authors of the brochure concern "that the methods used for birth control are very often insufficiently reliable or that they disturb sexual intimacy and, in some cases, also the relationship between married couples."⁴ The brochures do not discuss certain aspects and consequences of generalized contraception that are more serious and alarming.

1. We cannot close our eyes to the statistics of the last years that point to a rapid and considerable fall in the number of births: the birth rate in our country is among the lowest in the whole world. And by specifying the average number of births per one thousand inhabitants, one disguises the real situation: this rate is only achieved by the falling number of large families in our own country and by the generally large families of the immigrated foreign workers.

What are the social and economic implications of an ageing population; the consequences for school attendance and education; and the changing relationship between the rich countries, poor in children, and the developing countries, rich in children, who are becoming increasingly independent? Our economy and our wavering level of prosperity are not longer mainly supported by the vitality and natality of our own people, but largely by the presence of foreign labour. One can deduce from recent statistics that in the near future about 600 classrooms per year will become empty in primary schools, which will pose many problems to the educational sector and its personnel).

³ *Anticonceptie — Verantwoord Ouderschap*, Introduction (not paged; p. 1).

⁴ *Anticonceptie — Verantwoord Ouderschap*, Introduction (p. 1).

It is strange that the Ministry, on circulating its brochures, is conducting a campaign that promotes contraception, and more efficient contraception which will result in a further decrease in the birth rate.

2. The objections of the faithful Catholic to contraception are mainly of a moral and religious nature. Contraceptive methods are sometimes used by married people for whom further children would result, as mentioned above, in specially heavy burdens or difficulties. But in most cases use is in fact made of them out of a desire for ease and pleasure: "modern" partner-marriage in our affluent society wants, in the first place, an easy, agreeable and comfortable existence "together". Marriage is no longer considered, even by many religious milieus, as being directed towards the foundation of a normal (though not necessarily large) family by assuming really responsible parenthood. The "modern" married couple undertakes parenthood, or rather a limitation of children, at will. To maintain that only the parents are competent to decide, in the last resort, whether an enlargement of their family is justified in their case, may also readily be accepted by a Catholic. But the "modern" married couple goes further: they decide at will whether or not they will remain childless, whether or not they will accept one or more children. They moreover want the freedom to choose and employ the methods and means limiting the number of children.

3. This generalized, arbitrary contraception and the use of various contraceptive methods are profoundly undermining the Catholic doctrine on marriage, as well as Christian marriage and family life. The notion of unchastity in marriage, the reluctance to the scheming thrust upon people by the use of contraceptives, is slowly diminishing and is repressed into the subconscious. The supporters of contraceptives break the docility of the great mass of the common believers and their respect of the highest church authority. The faithful can only excuse contraception by assuming that the Church has been mistaken for centuries in its doctrine on chastity in and outside marriage; that the last four popes, and in particular Pius XI and Paul VI, have solemnly taught a false doctrine on contraception and that they have prescribed a strict obligation to the believing married people which does not even exist. Do those who justify contraception to the believers, realize the escalation they have experienced: first of all it was the pill in its earliest form, and only the pill that was represented as morally justified, more particularly because it purported to resemble the

safe period method; now they already agree with irreversible sterilization, a serious mutilation, and with a pill that is more probably abortive than merely contraceptive.

4. Contraception as a means of realizing an enjoyable, easy and comfortable existence has secularized and desecrated the Christians marriage and family life. To married people who recognized the foundation of a family (the assuming of responsible parenthood before God and their conscience) as a task coming from God and who undertook it to the best of their ability, the living together of husband and wife, of parents and children, was a daily schooling in religiousness, performance of their duties according to God's Holy Will, chastity by self-control, benevolence, obligingness, helpfulness, unselfish affection and real love. Motherhood and fatherhood were still honoured. One experienced that fatherhood is a reliable means of turning someone of male sex into a man; that responsible motherhood turns someone of female sex into a woman. The development of the human personality — widely treated by modern writers, but usually very superficially dealt with — has found the required atmosphere and necessary inspiration in such family life. One was taught to carry the burdens and to enjoy the pleasures brought about by a regulated Christian family life; one could learn to be indulgent and tolerant, to take account of somebody else's personality, to settle differences and to feel united in deep-rooted togetherness in good and bad times. One could, so to speak, spontaneously assume the social disposition that turns the family into a part of human co-existence.

5. Through contraception, eroticism (that is reigning unchallenged in our society) was given the possibility of being introduced into married life too, and to bereave it of its creative power and durable influence on the style of living of the married couple, on the behaviour of the parents, and on the life development of each newly coming generation.

Generalized contraception has attained an important place in the misunderstood emancipation of the woman, which attempts to make both sexes as equal as possible in a kind of sex-neutralized society. As Christianity has, in the course of its history, taken a stand against misjudgment and subordination of the woman in society, there is no reason why it should not continue contributing to the promotion and fostering of her rights in the future. But Christians must not allow themselves to be led into a participation in female emancipation which overlooks the nature of both sexes and their physical and psychic constitution, and which entirely undervalues the meaning of motherhood.

The role of motherhood is further reduced in modern marriage by the use of contraceptives. Personality development is sought by both the man and the woman for the most part outside the family circle and family life: by participation in society life. People no longer realize that the sound experience of motherhood, with the enrichment that this brings for the spirit and the mind, is especially advantageous for the development of the essence of a woman. The appreciation for the spouse and housewife, for the "queen in the kingdom of a thousand small matters", who makes of a house, no matter how modest, a cosy home and human shelter, is set aside as outdated romanticism. People are blind to the fact that contraception, instead of promoting the liberation of the woman, greatly contributes to her degradation as the object of dominating erotic self-indulgence.

We can in passing, ask ourselves why contraceptives, which can be used by the man just as well as by the woman, are nearly always employed by the woman.

6. Modern eroticism that is, amongst others, expressed in generalized contraception, also affects the younger generation.

A married couple that regularly and consistently employs contraceptives out of a mutual egotism, is not in a position to bring up the child or the couple of children they accept, in a sound way. The child in such a family unconsciously picks up the love of ease and self-indulgence from its parents. It does not see a consistent setting of good examples — to control its base feelings, to devote itself with effort to what is good and beautiful, to grow up as a man not living for himself but approaching others with willing sincerity and affection.

The young generation of today, from its school years onwards, is misinformed and incorrectly instructed as far as sex is concerned. Even in primary schools children learn about intimate matters which they cannot yet assimilate, and even get information on contraceptives! Masturbation is set forward not only in the "Red Booklet for Pupils", but sometimes also by Catholic instructors as something which does no harm as long as it is not too frequent, and therefore damaging to health. On the street, in advertisements, and through the mass media, the youth in our permissive society is inundated by erotic expression, as refined as it is vulgar. What formerly was branded as pornography is now freely displayed in word and picture and sometimes presented in our own schools as having literary value. Sexual intercourse amongst the young before marriage is lightly regarded; they obtain the necessary instruction, and the recommendation for the use of efficient contraceptives. Homosexuals are assisted in the establishment of unna-

tural relationships and in the exercise of these practices: everyone is supposed to have the right to experience sexuality according to his own inclinations.

With all this in mind serious people will ask themselves: is broad-based public information on contraceptives for married and unmarried, youth and adults, which in the final analysis must be called propaganda, really responsible? Do those who make propaganda for contraception take account of the damage caused to the spiritual life of those who use contraceptives, in their marital and family life, and in their entire social life?

In many circles the use of contraceptives is recommended as a means of preventing abortion, as a lesser evil by means of which a greater evil is avoided. Is it in fact true that generalized contraception with all its harmful consequences, is a lesser evil than abortion? Isn't this recommended means of preventing abortion merely putting one (smaller?) devil to work in order to drive out another (bigger?) devil? Contraception and abortion, as actually practised, are both destructive elements that thoroughly undermine the life of the individuals and families, and the whole of society. They are both examples of incorrectly expressed sexuality arising from the same easy-going, pleasure-loving and immoral attitude to life, against which a mature sense of responsibility, self-control, respect for human life, and for the source of that life, have to be set.

Western society is being destroyed by the pernicious consequences of an egoistic pleasure-seeking attitude to life which our consumption society has built up, and in which sex is a sought-after commodity. Our society is spiritually and morally very sick. This sickness cannot be cured through technical and easy solutions such as contraception and medically controlled abortion. To allow these evils can only aggravate the sickness. It is high time that the Catholic conscience reassumes its role as a world conscience in these matters.

V. Questions and observations on some of the remarks made in the brochures

In the brochures remarks are made to which we have no objection, and others against which a true Catholic would protest.

1. In the first brochure it is mentioned that "we live in a pluralistic society", that "it is not the job of the government to specify a common programme of sex education for all its citizens. Sex education, ideologies and love are subjects that are not treated in the brochure"; the brochure merely wishes to "supply correct scien-

tific information which can be used as a basis for discussion or personal decisions" concerning contraception. The information offers associations and groups the chance to organize "state subsidized meetings where people can integrate the problem of contraception into their own philosophical conviction". "Ideological opinions", continues the first brochure, "can also influence the choice of the (contraceptive) method".⁵

It does not escape the notice of the authors that contraception poses problems to which divergent or even conflicting answers exist according to the various ideologies which people advocate and practise in our pluralistic society. In matters of contraception, the public authorities should not put forward any opinions or measures that run counter to the philosophic or religious convictions of faithful Catholics or people of different belief. Correct technical-scientific information cannot, strictly speaking, serve as a basis for moral personal decisions concerning the use of contraceptives. Contraception, as rightly mentioned in the first brochure, is not merely a medical-technical problem. It is, in the first instance, an ethical problem, and for true Catholics a moral-religious problem. It surprises us that both brochures give opinions and suggest practices concerning contraception, which a faithful Catholic cannot integrate into his ideology or ethics; that the brochures speak as if everything acceptable to a non-believing humanist is also acceptable to a true Catholic. This is inconsistent: on the one hand the brochures wish to remain on the side of so-called correct scientific information which respects everyone's ideologies; on the other hand the information boils down to a thinly disguised recommendation and incentive for the use of whatever means of contraception, according to the preference of the user, in conflict with Catholic ethics.

2. We have, according to the first brochure, to regard conscious parenthood by using contraceptives "as a chance that is offered to us" to improve "the health of mother and child, and the happiness of the whole community, thus building a society in which every child will be lovingly welcomed."⁶ We do not understand how the authors have been able to state an opinion which people with a serious moral awareness, and in particular faithful Catholics, cannot accept. They are eagerly looking for families and a society in which only wanted children will be born; and they think that this so-called "happy" society can be established by general and efficient use of all kinds of suitable contraceptives. In the light of what was said earlier about conscious parenthood and the modern trend towards technical control not only over nature but also over human

⁵ The quotations are taken from the Introduction to the brochure *Anticonceptie en Verantwoord Ouderschap*, 1974.

⁶ Cfr. *Anticonceptie en Verantwoord Ouderschap*, Foreword.

life, we must ask whether they were not unconsciously under the spell of a pernicious utopia. Up to now there are still very many children being born that were not wanted and who are accepted with some reluctance or with kind-hearted resignation. Let us suppose for a moment that within the foreseeable future only planned wanted children are born. Let us immediately bear in mind that our society is very disinclined to have children and that love of ease and pleasure results in a general reduction in the number of children through the use of contraceptives. How many children would then be born? Are we really going to promote the creation of a happier society through further restrictions on the number of children and through employing ease-loving technical means which are, objectively speaking, immoral? Those who do not shut their eyes to the previously mentioned pernicious consequences of generalized contraception will give a firm "no" in answer to this question.

3. In the introduction to the second brochure, the following views are expressed. There is a great need amongst our people for contraceptive help: 88% of married women make more or less regular use of a contraceptive method or device; the method employed is very often insufficiently reliable is more often than not incorrectly used, sometimes interferes with the sexual intimacy or with the relationship between a married couple. This need has up to now not been properly remedied by the appointed competent authorities and in particular by doctors, chemists, midwives, nurses and social workers. The second brochure wants to demonstrate to these people that it is an important task for them to render contraceptive assistance. They were up to now insufficiently prepared for this task, had insufficient understanding of the necessity for this assistance or were refrained because of conscious or unconscious objections.

It is a fact that the use of all kinds of contraceptives has recently shown a sharp increase and has also found acceptance with many "church-goers." A considerable number of the convinced faithful Catholics continue to employ the rhythm method for appropriate birth control. It is also a fact that incorrect use of contraceptives often results in unwanted pregnancy, that their use often has somewhat disturbing physical or psychic side effects, and that contraceptives are used by the faithful Catholics often with an uneasy conscience. One can speak of the great "need" for contraceptive assistance in the sense that the many users of contraceptives require help in order to prevent, as far as possible, every unwanted pregnancy and to avoid disturbing side effects.

The question of whether faithful Catholic doctors or others in the medical profession should also help alleviate this need and consider it one of their uppermost tasks, remains. As faithful Cath-

lics, they must ask themselves whether they may promote these practices which are, objectively speaking, immoral and extremely harmful to one's personal spiritual life, to married and family life, and to one's general well-being. May they give the impression to those seeking contraceptive assistance, church-goers or people of different belief, that there are no moral objections to these practices? The reasons given in the second brochure in order to obtain the co-operation of those in the medical profession, Catholics included, are far from convincing.

4. We read in the second brochure: "A large proportion of the doctors were convinced that they were under no obligation to administer contraceptive assistance. It has, however, become obvious that contraceptive assistance lies in the area of medical responsibility and even occupies a prominent place. The ovulation inhibitors, a very widely used method of contraception, can only be obtained by a doctor's prescription. Various other methods can only be applied with medical help".⁷

It is further pointed out in the brochure that psychosomatic medicine embraces the person as a whole, not only the person himself, but also his diverse relationships; and experience has taught us that a satisfactory sex-life, which is very important for the relationship between a married couple, is in many families hindered for want of good contraceptive assistance. For other reasons too, continues the brochure, doctors should have offered their patients contraceptive assistance much sooner. "Indeed, one regularly comes up against cases where another pregnancy is inadvisable for the woman, or where another pregnancy should be delayed for a time. It is not always sufficient, as too often happens, that the patient or her husband are told that a further pregnancy must be avoided. On the contrary, one must allow oneself the time to discuss with the couple which contraceptive method would be the most appropriate in their situation, what their moral views are, and what their psychic situation is. In such cases, the granting of contraceptive assistance is an important form of preventing medicine".⁸

We must make several important observations on these texts. There are still very many Catholic doctors who feel bound by their conscience to refuse to co-operate in generalized contraception. Are ovulation inhibitors, i.e. the Pill in its various forms, really "medicines", as the brochure maintains? An ovulation inhibitor is a medicine as far as it can remedy more or less unhealthy symptoms, such as, for instance, an irregular menstrual cycle. An ovulation inhibitor employed to prevent pregnancy, as is usually the case,

⁷ *Anticonceptie — Verantwoord Ouderschap*, Introductiono (p. 1).

⁸ *Ibid.*

is in no way a medicine. Fertility is surely not a sickness? It is not the task of the doctor to prescribe an ovulation inhibitor or another contraceptive simply because his patients wish to use contraceptives. The fact the law classifies most contraceptive as medicines, because their use sometimes demands medical assistance to ensure their "efficiency" or to prevent harmful side effects is in no way sufficient to label them as a medicine and to burden the doctor with the task of ensuring their correct use. The majority of contraceptives can legally only be obtained on a doctor's prescription; it in no way follows that every doctor, Catholics included, must be prepared to hand out a prescription on demand.

A doctor has not only to advise in the case where, in the interests of the health of the mother and/or child, a pregnancy is better delayed or avoided; he has also to give help that he, following his conscience, considers responsible. A Catholic doctor who takes account of the traditional doctrine, in particular of *Humanae Vitae*, cannot recommend any artificial contraceptive. In discussions with his patients he must, in the first place, take account of their moral views, and their religious convictions. For Catholic patients, a Catholic family doctor is often also a trusted adviser in the area of morals. To young married couples who put off the first pregnancy for pure financial advantage or in order to remain free from child problems for a while, he will not only positively discourage the use of contraceptives, but also point out the dangers of an ease-loving start to married life. To married couples desirous of a legitimate spread between children, he will recommend the rhythm method and will provide the necessary explanation and instructions for proper use of the calendar method and temperature method. He will not, as so often happens, declare that a (further) pregnancy must be absolutely avoided, if he has no serious, positively definable motive for saying so. It will more often occur that a prescription is requested by patients, who have no objection to the use of contraceptives, who have already decided on the use of one or other contraceptive and who merely ask for advice about the best method or who wish to change from one method to another. Why shouldn't a doctor, known to be a faithful Catholic, inform such patients that according to his beliefs the general use of contraceptives is, objectively speaking, immoral and has serious consequences, also for society, and that for these reasons he cannot co-operate in artificial contraception? The modern person will come out with "respect the convictions of others". Can he blame the faithful Catholic who wishes to act in accordance with his moral and religious convictions? Shouldn't the faithful Catholic be prepared to act in accordance with his convictions, if necessary against the stream?

We read further in the second brochure: "Chemists appear to have had few objections concerning the dispensing of oral or injectable contraceptives, because they can only be given on a doctor's prescription and because some of these products have not only a use as contraceptives, but are also prescribed for other reasons. Many chemists still carry no stock of mechanical contraceptives such as condoms or diaphragms. This can be blamed in large part on the fact that they are not convinced that many people need contraceptive assistance; or possibly also on a conscious objection to supplying mechanical contraceptives. Perhaps they simply chose to carry no stock of mechanical contraceptives in order not to have to supply them to unmarried people or to unmarried minors".⁹

A Catholic chemist can without objection, on prescription from a doctor, dispense a "pill" which is sometimes used as a medicine, sometimes as a contraceptive. But it is not sufficient that one or other contraceptive is prescribed by a doctor or that it is frequently used, for a faithful Catholic chemist to have it in stock or to dispense it with no conscientious objection. He will shy away from supplying contraceptives for which a doctor's prescription is not required, such as condoms, to everyone who asks for them, to the married and unmarried, especially to minors.

6. The above-quoted brochure continues: "One can be of the opinion that it is better for unmarried people not to have sexual intercourse. When an unmarried person is really of another opinion and asks for a means of contraception, it unquestionably shows a greater sense of responsibility than if he omitted to take contraceptive precautions".¹⁰

The faithful Catholic is firmly convinced, not that it is better for unmarried people to desist from having sexual intercourse, but that these relations are, objectively speaking, immoral, and therefore to be absolutely disapproved of. A permissive society which does not regard such behaviour as bad, and excuses it, accepts that for young people from the age of puberty onwards the path that leads to thorough moral corruption is opened. Through self-control before marriage, the young are trained in the practice of chastity, one of the virtues that sustains a dignified married and family life, and that makes high-principled celibacy possible. The girls and boys who give in to their passions from an early age and occasionally have sexual intercourse, make themselves less prepared for stable fidelity in marriage and wrap themselves up in egoistic self-indulgence. We see a growing number of young people setting sexual taboos aside and having sexual intercourse before marriage,

⁹ *Anticonceptie — Verantwoord Ouderschap*, Introduction (p. 2).

¹⁰ *Ibid.*

obviously without any serious conscientious objection. Nobody may ask us, faithful Catholics, to accept this opinion as well-founded and to approve of, or encourage, this kind of behaviour. We must, as Catholics, firmly reject ideas that contravene Christian and natural moral principles, and that lead to the decadence of society.

The immorality of pre-marital intercourse is more often than not combined with the immorality of contraception. Such double immorality cannot be excused by saying that the use of contraceptives shows a certain sense of responsibility. A real sense of responsibility demands self-control, avoidance of frivolous relationships and immoral behaviour, practice of chastity. Contraceptives are mostly used by married and unmarried couples, not to prevent a moral evil, but to escape the awkward consequences of self-indulgent behaviour.

VI. May a Catholic co-operate in contraception?

Now we ask the key question in more explicit terms: may a Catholic promote and co-operate in contraception?

We will deal with this problem mainly from the objective point of view; but we will also say something in passing about the subjective side of this matter.

It mainly concerns participation and co-operation in artificial contraception, which the encyclical letter *Humanae Vitae* states as "indecent from the inside" or "intrinsically bad".

Formal or material co-operation

In ethics a distinction is being made between formal and material co-operation. We can define these expressions as follows.

a. There is formal co-operation when someone promotes immoral behaviour or activity by his attitude or by his collaboration, thus more or less taking part in this immoral action.

This can be the case for example by open approval, by advice, by encouragement, by conscious and willing collaboration making possible and promoting such action.

Formal co-operation makes someone participate in the objective evil, and generally renders him guilty. The degree of guiltiness varies according to the seriousness of the immoral act participated in, the importance of the assistance given and the degree of involvement in the activity. It becomes highly important when the immoral act is possible only with this participation.

b. We speak of material co-operation when the assistance rendered is a neutral and good act in itself, but which is, however, misused by the person mainly responsible in order to commit evil. The act or moral state of the co-operator does not include anything that will induce the other to commit evil. He can foresee that misuse will perhaps be made of his assistance, but this will happen against his own will, so that he does not do anything that helps the other in any way to commit evil.

Material co-operation is usually not to be blamed. The co-operator should, however, ensure that his acts do not offend third persons.

A few general considerations

First of all we wish to give a few, more general considerations concerning co-operation.

As we mentioned above, eroticism is reigning in our society: a hedonistic, selfish experience of sexuality inside and outside marriage.

As the Pope recently said: "Nor do we wish to forget the attacks that are currently carried out, in the name of a wrongly understood freedom and that offend God and humiliate man, by a community which does not accept any other ethics except its own self-satisfaction and self-confirmation. We mention here artificial birth control, abortion, euthanasia, as well as all forms that manipulate man."¹¹

Contraception is more particularly regarded (even by many Catholics) as a practice which can be employed without conscientious objections, and also by married people who have no serious reasons to refuse children.

How is it possible that a great part of the Christian community has adopted such a hedonistic way of life and acceptance of contraceptives, in such a short time?

Some present day moralists bear a heavy responsibility for this. Even before *Humanae Vitae* was published, they started to disseminate theories that deviated from traditional church ethics. After the encyclical letter had been published, some of them openly made a stand against the Pope's pronouncement. They disseminated their opinions in vulgar articles, some of them edited by Catholic associations. Many priests, and even bishops, did not sufficiently realize or assume their responsibility at that time. Although it is their duty to explain and to defend Christian ethics, some of them did

¹¹ Address by Pope Paul VI to the Cardinals on the occasion of his name-day feast on 22 June 1975, partly reproduced in the newspaper.

not correct the ambiguous and misleading representations and concealed the real doctrine of the Church. They probably gave way to the defeatist thought: the mass of the believers are not likely to follow the Pope's thesis; so why not leave them in peace?

This mentality and way of living are in the mean time becoming a pest. It is high time that the believing community and in particular its leaders, reacted firmly and even refused implicit cooperation. "We must not allow the expression of opinions, or even more important, the expression of feelings which consider fertility a misfortune, to be propagated, without speaking out against it".¹² The believing community and every Christian should firmly dissociate themselves from a mentality that accepts hedonistic contraception without objections.

b. As we explained above, many responsible people, without doubt also in the Ministry of Health and Family Welfare, think that they can prevent many abortions by promoting the use of contraceptives and that in this way they are doing a good job. It has, however, not at all been proved that the number of abortions decreases as the use of contraceptives increases. It is a fact that the generalized use of contraceptives promotes an attitude to life in which one looks as much as possible for sexual and erotic satisfaction and as little as possible for burdens, and in which one considers sexual intercourse an indispensable food and abstinence a superhuman task. Thus one gradually develops a state of mind where one would not even shrink away from abortion should an undesired pregnancy occur.¹³

c. The Catholic doctors — the same is more or less true for chemists and others in the medical profession — are in a delicate position.

It is clear on the one hand that they can never, even when exercising their profession, evade the question of the ethical import of their acts. The doctor cannot waive aside his responsibility by thinking: it is up to the patient to examine his conscience and to decide whether or not he will use contraceptives. One cannot just say: the only thing that concerns me is the question of whether the patient's or client's acts will be harmful or no to his health. The chemist cannot say: it is the doctor who is responsible for his prescription; I only dispense what he prescribes. Doctors, chemists

¹² *Verklaring van de Congregatie voor de Geloofsleer over Abortus provocatus* ("Statement of the Congregation for Dogmatics on *Abortus provocatus*"), n. 27; translated in *Monita ad Clerum*, vol. IV, p. 129.

¹³ Ph. Delhayé, *Nouvelle prise de position du Magistère*, I. *Aspects théologiques de la question*, in *Esprit et Vie*, 1975, n. 20, p. 317, footnote 26.

and others in the medical profession must now allow themselves to prescribe, dispense or apply contraceptives on any one's demand, whether married or not.

On the other hand, It is not the duty of the above-mentioned persons, however ethically motivated they should be, to continually point out the immoral character of artificial contraception: this is the task of the spiritual adviser. The patient or client also have their own ethical responsibility. Nobody, however, can blame the faithful Catholic doctors, chemists and nurses who make their ideas known when contraception is mentioned; their opinions deserve as much attention and respect as those of people of different belief. If they are known as faithful Catholics and are spoken to by a faithful Catholic, their testimony should not be omitted, certainly when they are asked for advice in ethical matters. They mustn't lose sight of the fact that they are, as we mentioned above, in many cases called on as valued and faithful Catholic advisers. In this position they cannot in any circumstance conceal their opinion concerning the principles of Catholic ethics and they cannot act against their conscience.

d. Chemists as well as doctors are often led to dispense or prescribe contraceptives because they think: "Many colleagues do it; if I refuse to prescribe or to sell this contraceptive, I will disappoint my patient or client and he will go and look for aid or medicine elsewhere". A moral obligation has to be fulfilled, even when this can result in financial loss.

Some particular cases

After these general considerations we wish to examine some more practical, particular cases.

A. It is mostly doctors who are called on for advice and help in matters of contraception.

1. It occurs that somebody goes to see a doctor and asks for an ovulation inhibitor for therapeutic use. If the doctor considers that the patient requires the medicine, he can prescribe it without conscientious objection: he is only materially involved when his prescription is to be misused for contraceptive aims. He cannot be responsible for the misuse, contrary to his intention, of this ovulation inhibitor.

2. The doctor can also receive a patient or client who wants a medicine whose exclusive use is as a contraceptive. The problem can be approached in various ways.

a. The doctor knows the patient as someone who has been using contraceptives for a long time. She now wants to use another contraceptive for the sake of her health or for other reasons (e.g. more efficiency, less interference in intimacy, less moral evil). The doctor must not prescribe the medicine asked for: by doing so he would formally co-operate in contraception. He is nevertheless allowed to give the desired information on the disadvantages and advantages of contraceptives.

b. During the consultation the doctor discovers that a patient has come to him for advice and that she wants to solve a problem of conscience concerning contraceptives. In such a case the doctor must not make out that the use of a contraceptive is entirely acceptable. He must follow his Christian conviction. He must not prescribe a contraceptive. It is his duty, as we made clear above, to show the way and to propose his assistance in the use of the rhythm method, and in particular the temperature method.

3. The following case deserves special attention: an unmarried minor comes to see the doctor and asks for a contraceptive that cannot be used as a medicine. It is obvious that the doctor must refuse the prescription in this case. He should be well aware that he is not only formally co-operating in an immoral act, but also contributing to a thorough deterioration of youth if he agrees to such a request; he promotes an attitude to life and behaviour that corrupts the youth morally and endangers the worthiness of some later marriage.

B. Chemists are often asked to dispense one or other contraceptive. Dispensing them is sometimes merely material co-operation, but is often formal co-operation.

1. An obvious case of material co-operation is the following. A client asks, on a doctor's prescription, an ovulation inhibitor which can either be employed as a medicine or as a contraceptive. The fact that ovulation inhibitors are often misused by the clients (and that the chemist is well aware of this), does not necessarily mean that dispensing them is morally unjustified. The chemist's act is in fact not motivated by evil, as it can be considered co-operation in a medical act; nor is this act meant as such by him. The chemist is under no obligation to determine whether or not the doctor's prescription is justified, — that would in any case be almost impossible, — nor whether or not the client is going to misuse the medicine.

2. The problem is completely different in the case of the chemist who is selling from a stock of "medicines" whose exclusive use is as contraceptives or even as abortifacients: e.g. condoms, diaphragms,

loops, abortive pills, morning-after-pills, shortly prostaglandin, etc. Dispensing such "medicines" is a conscious and intended, thus a formal co-operation in artificial contraception, or even in abortion, and consequently a formal complicity.

We cannot, therefore, agree with the request in the Ministry's second brochure: "For this reason the chemists should help by keeping the whole range of contraceptives at the population's disposal, so that the fear which restrains people from crossing the threshold and buying particular methods of contraception, be removed as much as possible".¹⁴

C. Women and girls can ask doctors and others in the medical profession (in particular midwives) for assistance in adjusting mechanical contraceptives, such as loops and diaphragms, or in giving the quarterly injection of ovulation inhibiting progestative substance. Doctors can ask nurses to give this assistance to their clients who employ contraceptives. In the Ministry's second brochure, doctors, and in particular midwives and nurses, are requested to give the necessary information to the above-mentioned women and girls, to teach them the efficient use of contraceptives and to assist them in their application.¹⁵

It is obvious that this is an aspect of formal co-operation in contraception to which Catholic doctors or nurses cannot, in conscience, lend themselves.

D. Doctors and others in the medical profession are sometimes faced with very difficult cases, for example, when married people on the one hand have to limit the number of children for serious and non-egoistic reasons (e.g. insufficient income, inadequate living accommodation, the education of an already large number of children, the parents' health) and on the other hand cannot find relief in employing the rhythm method. The difficulty is that prolonged abstinence is very hard for married people.

For these people too, artificial contraception is and remains, objectively speaking, intrinsically wrong. It is hard to determine the degree of subjective guiltiness in each particular case, because of the mitigating circumstances of the situation: one has to take into account the "don't know any better" and/or "cannot do any better". Some married people can think in good faith that they may employ contraceptives, for example, because a priest told them so or because "Catholic" publications or the mass media assured them so. Others are not able to do any better, for example, be-

¹⁴ *Contraceptie — Verantwoord Ouderschap*, Introduction (p. 2).

¹⁵ *Ibid*

cause the teaching of chastity or self-control was entirely, or for the most part, lacking.

As far as these "difficult cases" are concerned, we judge it proper to make the following remarks.

1. In our society we speak too lightly of "difficult cases" (e.g. for material or financial reasons), that are in fact no difficult cases at all. Those cases that have been wrongly represented as "difficult," should be reduced to their real dimensions.

It is conspicuous that the problem of having children is found too heavy a burden in our affluent society, whereas it found to be tolerable to our less favoured ancestors.

There are many doctors who too quickly find a reason for birth control because of the danger to the mother's health.

A lot of difficulties of a material and financial nature can be resolved by suitable family policy, amongst others in the matter of house-building for larger families, relief and facilities for families with many children, allowances for the wife who stays in and takes care of the children.

But all this does not mean that there are no difficult cases at all. They cannot just be overlooked.

2. In the case where suitable birth control is required, too little attention is being paid to the rhythm method which, combined with the calendar and temperature methods, offers to many married people a relief that also gives moral satisfaction. Its exact application is too seldom taught. Even in Catholic circles the rhythm method is too often rejected, because it is seen as an interference in regular, so-called "recreative" sexual intercourse.

Particular and difficult situations can be or could have been resolved by adequate use of the rhythm method.

3. In the case where the rhythm method cannot be employed due to an irregular cycle, the doctor may without conscientious objections, as mentioned above, prescribe a therapeutic ovulation inhibitor. Whether or not a woman has to be prescribed an ovulation inhibitor that acts therapeutically, is a problem that must be solved by the doctor.

The encyclical letter *Humanae Vitae* explicitly says: "The Church does . . . not consider the use of therapeutic means that are necessary to cure the ailments of the body, in any way unpermitted, even

when one can foresee that these will lead to the inhibition of procreation, unless such inhibition is, for any reason, directly aimed at".¹⁶

4. In the most difficult cases extraordinary, and sometimes almost heroic efforts are required. In such cases one has sometimes — also in Catholic milieus — been admitting the use of contraceptives as an "evil" to be used as a last resort in emergencies. But one then forgets that Christianity is a religion of the Cross, which will keep on rejecting a "humanae" solution for difficulties by the adoption of an, objectively speaking, immoral attitude.

In these cases it is not the doctor, but the spiritual adviser who has to assist in the first place. On the one hand, he should be mild in his judgment when he sees that the basic attitude of these people has remained more or less morally sound, and that they would be willing to avoid contraceptives if they could find another solution to their problems, but that they are still too weak in their present situation to get through their difficulties in the morally correct way. On the other hand, he cannot tell those who are using contraceptives in good faith-misled as they are by the deviating ethical conception — that contraception is acceptable in their situation. He has to convey the notion that, in their situation, contraception, considered on its own, must, objectively speaking, be rejected on moral grounds. But he may nevertheless tell them that they do not always have to regard themselves as badly guilty, when they, in spite of their goodwill, do not succeed in their weakness to avoid what is, objectively speaking, morally wrong. By doing so, he will prevent their resignation to, and persistence with, an objectively wrong attitude. He will encourage them to gradually change their attitude.

His assistance should be such that he encourages the goodwill of these married people, urges them to wholehearted effort, and helps them to achieve an experience of marriage that will gradually and increasingly conform to objective and moral standards. He has to teach them to supercede themselves, through success and failure, to draw their attention to the vigour of prayer and sacraments. Here one speaks of "growing morals". The Pope also, appeals to married couples when he says: "We moreover do not at all wish to disguise the sometimes heavy difficulties which are encountered in the life of Christian married people; because for them, just as for each of us, "the gate, and the path that leads to life, are narrow". But the hope for that life must brightly light up their path, while they bravely exert themselves to "live consciously, fairly and piously, in complete awareness of the fact that the world we

¹⁶ Paul VI, *Humanae Vitae*, 1968. n. 15.

live in shall pass". Let the married therefore joyously accept the difficulties dealt out to them, strengthened by their faith, as well as by that hope which is not disappointed . . .; let them implore the help of God in incessant prayer and let them above all draw mercy and love from the eternal source of the eucharist. If they are however, still under the ban of sin, let them not despair, but humbly and persistently have recourse to God's mercy, which is abundantly granted in the penitential sacrament".¹⁷

As far as the doctor is concerned, he may be inclined — out of an understandable, but thoughtless pity and out of helpfulness — to approve the use of a contraceptive in such an "emergency", or even to prescribe it. He can think to himself: the acts of the married are not badly guilty in this case; why should I be acting wrongly in procuring for in procuring for them a contraceptive? But in this case he does not take into account that the acts of those married people are and remain, objectively speaking, immoral. He is not allowed to promote this immoral attitude by granting his formal co-operation.

VII. Pluralistic Advice Bureaus

Married and unmarried people with questions concerning the experience of sexuality: marriage problems, family planning, sexual relations before marriage, prevention of pregnancy, etc., now have the opportunity to seek advice from advice bureaus.

Such bureaus can handle very useful work. But it can also be that advice and assistance is given which a faithful Catholic must disapprove of and refuse. We know that even in Catholic marriage preparatory courses opinions are sometimes advanced that run counter to Catholic ethics.

The question is thus raised of whether a pluralistic advice bureau in which counsellors with varying views of life receive people who advocate divergent or even contradictory philosophical and religious ideas, is capable of giving a good service to faithful Catholics. In this respect suitable guidance for a pluralistic public is almost impossible to realize.

Shouldn't Catholics urgently provide advice bureaus which present themselves to the public as Catholic, offering assistance and advice to faithful Catholics according to the principles of Christian ethics, and which if required give people of different belief information about Catholic views, referring them if necessary to a bureau in which they can get advice and assistance from people of the same belief?

¹⁷ Paul VI, *Humanae Vitae*, 1968, n. 25.

Shouldn't the Catholic advice bureaus give more information on the application of the rhythm method, in particular on the calendar method combined with the temperature method? The Ministry's brochure says of the "properly used temperature method" that it is "very reliable".¹⁸ And Doctor Rendu has said: "Its effectiveness in preventing pregnancy has been recognized and known for years as being as effective as the Pill".¹⁹ If this is so, then it is difficult to understand why this method is not recommended and taught more frequently by Catholic doctors.

VIII. Appeal for radical reform

The brochures issued by the Ministry that gave rise to this article, are further proof that the society and the Christian community in our country have reached an alarming situation.

The authors and publishers of the brochures implicitly postulate that each married couple have the right to regular sexual intercourse and to a greater or lesser extent should employ contraceptives. They state that young unmarried couples also have sexual intercourse and judge that for these people the use of contraceptives is advisable. In short, they are like advocates for a permissive society that doesn't oppose contraception, but rather promotes it. They shut their eyes to harmful effects on the personal life of the youth and adults, on married and family life, and on social life in general.

It has not escaped our notice that the moral decline in our society deeply concerns many serious-minded people, especially the convinced faithful Catholics. This is repeatedly said and written to us. But it remains too often an exchange of complaints in small, limited circles. The courage to make a public accusation and to form united opposition is generally missing. Where is the testimony and public stand of our Catholic associations, in particular of doctors, chemists, and the rest of the medical profession? Their silence is all the more surprising for the fact that there are still many doctors and chemists in our community known for their high-principled Christian family life.

¹⁸ *Contraceptie — Verantwoord Ouderschap*, p. 29.

¹⁹ "Son efficacité dans la prévention de la grossesse est reconnue et publiée depuis plusieurs années comme égale à celle de la pilule bien prise" (Dr. Ch. Rendu, *La contraception est-elle la solution au problème de l'avortement?* ("Contraception — The Solution to the Problem of Abortion?"). Report to the Congress "Laissez-les vivre", Strasbourg, 5-6 May 1973, published in: *Supplément aux Fiches Documentaires du C.L.E.R.*, n. 80, p. 6).

Is it not high time that we frankly admit that the modern affluent society, with its ideal of a pleasant, easy and comfortable life, has us all more or less, rather more than less, in its clutches? Is it not high time we did something to bring about a change-over to the return to a sincere Christian life?

"It strikes us how often the Pope's word in the last few months has orientated the Church towards an existential change, in thoroughly honest terms: the undisguised need for conversion and reform at all levels, the inevitable meeting with the Lord who states his conditions, alert awareness at all times, sincerity for everything that is positive, wherever in the world, and also the rejection of everything that Christ rejects, especially in ourselves".²⁰

Since the Vatican's Council, our church community has been continually concerned with the much-needed "aggiornamento", the radical reform. We spend a lot of time on adaptations in the area of catechesis, liturgy, pastoral matters and sacraments. And we rejoice at all good results. We seriously ask ourselves whether the decline in morals and beliefs does not overshadow these improvements.

A thorough, integral change in Christian existence demands the true experience of natural and Christian ethics. What is the use of spending time and trouble on the strictly religious aspects of our Christian community life, when our moral life is being undermined by worldly thoughts.

It is precisely the concern for this total and integral change that leads me to make clear once again the Christian doctrine. I would like to recall the words of St. Peter: "We cannot possibly give up speaking of things we have seen and heard" (Acts 4, 20). I cannot remain deaf to St. Paul's appeal: "Proclaim the message, press it home on all occasions, convenient or inconvenient, use argument, reproof, and appeal, with all the patience that the work of teaching requires. For the time will come when they will not stand wholesome teaching" (2 Tim. 4, 2-3).

May our repeated appeal retain the full attention of the whole of Christian society, especially doctors, chemists, and the rest of the medical profession, and may it contribute to the integral renewal of a moral life amongst the young, the married and all serious faithful Catholics in our church community.

Ghent, 7 July 1975.

²⁰ *Laten we eerlijk zijn* ("Let us be honest"), editorial article in *Emmentis*, 1975, n. 3, p. 98.

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