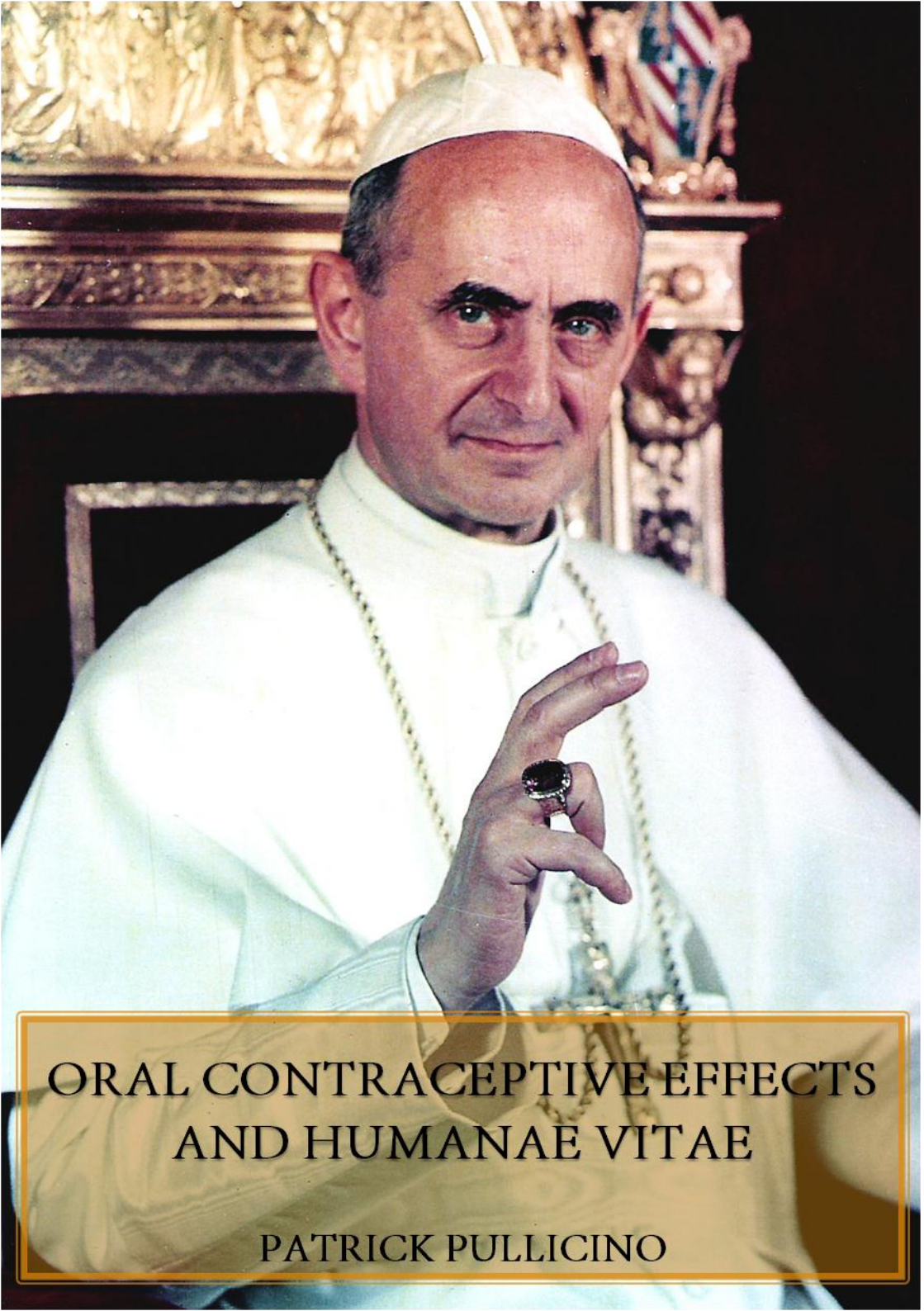




ORAL CONTRACEPTIVE EFFECTS
AND HUMANAЕ VITAE

PATRICK PULLICINO

ORAL CONTRACEPTIVE EFFECTS AND HUMANAЕ VITAE

ORAL CONTRACEPTIVE EFFECTS AND HUMANAЕ VITAE

**The Effects of Oral Contraceptives on Persons, Marriage,
Society and the Church in the Perspective of *Humanae Vi-
tae***

**A dissertation submitted in partial fulfilment of the requirements
for the degree of Bachelor of Divinity**

Patrick Michael Pullicino

Maryvale Institute,
Higher Institute of Religious Sciences
Affiliated to the
Ecclesiastical Theology Faculty
Notre Dame De Paris
2015

First Printing: 2016

Dedication and Prayer

To the Most Holy Trinity, the fount of all marital love, and to Our Lady, Queen of conception. We humbly pray to you, in your Mercy, to rid us of the plague of the contraceptive pill.

Contents

1.INTRODUCTION.....	1
a) Humanae Vitae1	
b) The view of marriage in Humanae Vitae.2	
c) The view of the human person in Humanae Vitae.2	
2.CONTRACEPTIVES.....	3
a) 3	
response.3	
b) Worldwide usage of oral contraceptives.6	
c) Known and accepted medical side effects of the oral contraceptive.6	con-
d) Psychological and Neurobiological changes7	
e) Condoms, Long acting depot preparations and gency “contraception”9	emer-
3. THE MORAL DECISION TO CONTRACEPT AND THE SION TO TAKE THE PILL.....	DECI-9
a)The Anthropology and Moral Methodology of trapection.10	Con-
b) Governments/Organisations12	
c) Women’s movements13	
d) Pharmaceutical industry13	
e) Women	14
4. EFFECTS OF ORAL CONTRACEPTIVES ON THE ITAL ACT AND ON MARRIAGE.....	MAR-14
a) Effects on the marital act14	
b) Effects on marriage stability, divorce15	
c) Abortion16	
5. EFFECTS OF ORAL CONTRACEPTIVES ON SOCIETY.....	17
a) Status of women in society17	
b) Change in women’s sexual behaviour18	
c) Feminist Movement19	
d) Work role changes21	
d) Homosexuality21	

e) Gender role interchangeability	21
f) Effects on men in society	22
g) Effects on children	23
i) By their effects on reshaping the ethos of marriage, have damaged the structure of the family	OCs 23
ii) Contraception for the under 16s	24
iii) Children are being increasingly born into and brought up in single parent families	24
iv) The effect of the feminized society on boys	24
v) The idea that conception can be controlled by the	will 25
6. ORAL CONTRACEPTIVES AND SOCIETY'S CONCEPT OF AUTONOMY	25
7. EFFECTS OF ORAL CONTRACEPTIVE USE ON THE CHURCH	28
a) Usage of oral contraceptives among Catholics	28
b) Non-adherence to Church teaching on contraception and confession.	29
c) Increase in autonomy in relation to obedience to the Magisterium.	30
d) Effects on clergy	31
8. CONCLUSION	...33
a) Pope Paul's prediction of many of the problems and these have been fulfilled.	33
b) The Split in the Church after Humanae Vitae.	36
BIBLIOGRAPHY	37
FIGURES	39

Preface

It is now almost fifty years since Blessed Pope Paul VI wrote *Humanae Vitae*, which was subtitled “On the Regulation of Birth”. Pope Paul showed great courage in going against the recommendations of “The Majority Report to The Papal Commission on Population, the Family and Natality,” who concluded that there was moral justification for contraception. The encyclical was to become a watershed in the life of the Catholic Church: never before had there been such wide public opposition by Catholic academics to an authoritative papal document. *Humanae Vitae* was, and still is, ignored by many Catholics.

I chose the subject of this dissertation because firstly, I had met Pope Paul during a private family audience in the late 1960s and I still feel a personal connection with him. Secondly, as a stroke neurologist, I started to see strokes in young women as a complication of the oral contraceptive pill and I became interested in the wider effects of the “pill” on the brain. Thirdly, I had not come across any attempt to bring together all the consequences of the widespread use of the “pill” and to link these to *Humanae Vitae*.

Apart from minor alterations, this manuscript is the same as that originally submitted as my final year dissertation for the BDiv at Maryvale Institute. In recent years there is apparent, an increasing realization among the Catholic faithful, that the teachings of *Humanae Vitae* need to be accepted and put into practice. I hope that by reviewing how Pope Paul has been thoroughly vindicated in his predictions about the effects of contraception, this short text will assist in the full acceptance by Catholics of *Humanae Vitae*.

Acknowledgements

I would like to thank Rev. Dr. Michael Cullinan, M.A., M.A. St., Ph.D., S.T.D for his help and support throughout the course of the B.Div. programme and in the selection of this dissertation.

I would also like to thank Rev. Dr. John Berry BA (Dunelm), PhD. for his help and advice and for reviewing this dissertation.

I thank Dr Helen Watt BA, PhD (Edin), Senior Research Fellow at the Anscombe Bioethics Centre, Oxford, England for reviewing and commenting on the manuscript.

1. INTRODUCTION

a) *Humanae Vitae*

Pope Paul VI wrote *Humanae Vitae* in 1968 primarily in response to the increasing use of the new oral anovulant contraceptive pill (which started to be used in 1960) and to settle whether it fell under the traditional condemnation of contraception in the Church.¹ Paul VI did not specifically mention the anovulant pill but focused *Humanae Vitae* on the transmission of human life. Paul VI however, expressed particular concern about the dangers of “becoming accustomed” to contraceptive methods,² a danger that is particularly associated with the oral contraceptive (OC) pill. Paul VI rejected all forms of contraception without exception, and he reaffirmed the Magisterial teaching³ that there is an unbreakable link between the unitive and procreative meaning of the conjugal act.⁴ The teachings of Paul VI in *Humanae Vitae* meet criteria for infallible teaching.⁵

Paul VI foresaw several dangers with the use of contraceptives: 1) Conjugal infidelity and a devaluation of wives by husbands, who might make their wives instruments of their own desires.⁶ 2) That by obtaining power over their own bodies’ functions, men or women might start to violate normal moral limits with respect to their own bodies and treat their bodies or those of others as objects.⁷ 3) That there would be a general weakening of morals, particularly among the young.⁸ 4) That governments might make contraception obligatory if this suited the national purpose.⁹ Paul VI stated that it is clear that there is a need for self-denial

¹ Woodall GJ (2008) *Humanae Vitae* Forty Years on. A New Commentary. Family Publications. Oxford. p. 105.

² HV 17.

³ HV 12 §1.

⁴ “The violation of the Principle of Inseparability of the unitive and procreative dimensions of conjugal love represents a disordering of conjugal love itself”: Woodall GJ (1996) The principle of the indissoluble link between the dimensions of unity and fruitfulness in conjugal love : a hermeneutical investigation of its theological basis and of its normative significance : Excerpta ex Dissertatione ad Doctorum in Facultate Theologiae Pontificiae Universitatis, Gregorianae. Rome. p. 139.

⁵ Crean T. (2012) The Infallible Teaching of *Humanae Vitae*. Catholic Medical Quarterly. 62:4.

⁶ HV 17 §1

⁷ Woodall GJ (2008) *Ibid.* p. 131.

⁸ HV 17 §1

⁹ HV 17 §2

when using reason and free will to respond to the urges of nature.¹⁰ The development of the virtue of chastity is essential as this fosters an authentic freedom rather than a licence which demeans our dignity.¹¹ The aim of this review is to present evidence from science, society and the Church to attempt to confirm Paul VI's concerns, focussing principally on the anovulant contraceptive pill.

b) The view of marriage in *Humanae Vitae*.

In *Humanae Vitae* Paul VI states that spouses should recognise and value the true goods of life and of the family and that they should become accustomed to controlling themselves and their passions. The meanings of love proper to conjugal life should be in keeping with the right moral order. The practice of continence should be observed and this discipline fills spousal love with greater human meaning. It helps spouses put aside what is unduly selfish and opposed to authentic charity, builds up an awareness of their responsibilities and confers on parents an efficacious authority in the upbringing of their children.¹² In his interpretation of *Humanae Vitae*, Pope John Paul II has highlighted self-mastery and self-giving. The critics of *Humanae Vitae* wrongly emphasize control of biological processes using science rather than self-mastery through chastity.¹³ Pope John Paul says that the meaning of the body is a sexual meaning, one that is truly expressed through a nuptial union. Male and female by giving themselves to each other complete and fulfil each other.¹⁴ When couples use contraception they manipulate and degrade human sexuality by altering its value of "total" self-giving.¹⁵

c) The view of the human person in *Humanae Vitae*.

¹⁰ HV 21 §1

¹¹ HV 22 § 1

¹² HV 21

¹³ Smith JE (1991) *Humanae Vitae: A generation later*. Catholic University of America Press, Washington DC. p. 231.

¹⁴ Wojtla K (1981) *Love and Responsibility*. Ignatius Press. San Francisco. p. 126

¹⁵ FC 51-52.

Paul VI states that there are moral limits that individuals should not violate in respect of their own bodies.¹⁶ The altered view of human freedom and autonomy that was presupposed by those who felt that man had the authority to use contraception was rejected by Paul VI in his rejection of the Majority Report to the Papal Commission.¹⁷ Paul VI explains that spousal love is human, and it is both bodily and spiritual at the same time.¹⁸ The emotional drives and the biological processes are integrated by coming under the control of reason, integrating them into a personal, spiritual unity. Human sexuality is never simply biological, nor is it just procreative.¹⁹ Paul VI appreciates that “our understanding has changed of the person of woman and of her role in human society”.²⁰ He says however that in the responsibility of transmitting life, the spouses cannot act in a completely free and autonomous fashion on the basis of their own will.²¹

2. CONTRACEPTIVES

a) History of contraception to 1960 and the Church’s response.

¹⁶ HV 17 § 3

¹⁷ “In the matter at hand, there is a certain change in the mind of contemporary man. He feels that he is more conformed to his rational nature, created by God with liberty and responsibility, when he uses his skill to intervene in the biological processes of nature so that he can achieve the ends of the institution of matrimony in the conditions of actual life, than if he would abandon himself to chance” Hoyt R (ed.) (1969) *The Majority Report to The Papal Commission on Population, the Family and Natality*. In “The Question is not Closed” *The National Catholic Reporter*, Kansas. p. 76. Translated from original French: Paupert J-M (ed) (1967) *Contrôle des naissances et théologie: le dossier de Rome*. Seuil, Paris.

¹⁸ This dual approach had been anticipated by Pope Pius XII: Pio XII. (1951) *Discorso di Sua Santità Pio PP. II alle partecipanti Congresso della Unione Cattolica Italiana Ostetriche*. “Perciò chi si appressa a questa culla del divenire della vita e vi esercita la sua azione in uno o in altro modo, deve conoscere l’ordine che il Creatore vuole vi sia mantenuto e le leggi che ad esso presiedono. Poichè non si tratta qui di pure leggi fisiche, biologiche, alle quali necessariamente obbediscono agenti privi di ragione e forze cieche, ma di leggi, la cui esecuzione e i cui effetti sono affidati alla volontaria e libera cooperazione dell’uomo.”

¹⁹ Bristow P (2013) *Christian Ethics and the Human Person. Truth and Relativism in Contemporary Moral Theology*. Gracewing, Leominster. p. 339.

²⁰ HV 2 §2

²¹ HV 10 §5

There are records of contraceptive unctions being used in Egypt as far back as 1900 BC.²² The story of Onan in Genesis attests to the practice of *coitus interruptus* among the Hebrews,²³ but other methods were also used by the Jews.²⁴ Condoms were introduced in the middle of the seventeenth century but did not start to be used widely until after 1843 when vulcanized rubber was invented.²⁵ Toward the end of the eighteenth century birth control began to be put forward as a desirable practice in England and the United States. The spread of contraception was probably responsible for a 17% drop in the birth rate in France in the early nineteenth century and coincided with the rise of Rationalism.²⁶ Men, using *coitus interruptus*, were predominantly responsible for contraception.²⁷ Men often use this method to protect the woman who is usually assenting.²⁸ It became clear that Christians were contracepting on a wide scale. Although individual bishops spoke out against it,²⁹ contraception was tolerated as a “lesser evil” by Rome and not mentioned in Leo XIII’s major encyclical on marriage, *Arcanum Divinae Sapientiae* in 1880. Birth control had become a European phenomenon by this time but penitents often failed to mention it and priests were not uniform in its condemnation. Although the French bishops decided against direct preaching against contraception, the Belgians called for action. The German bishops in 1913 issued a pastoral letter at Fulda decrying the practice. Catholics practicing contraception were told they could not receive the sacraments.³⁰ This culminated in the Encyclical *Casti Connubii* by Pius XI, published in 1930 just after the Lambeth

²² Noonan JTJr. (1986) *Contraception. A History of its treatment by the Catholic Theologians and Canonists*. Harvard University Press. Cambridge, Mass. p. 9.

²³ Gen 38:9.

²⁴ Noonan JTJr. (1986) *Ibid.* p. 11.

²⁵ Noonan JTJr. (1986) *Ibid.* p. 394.

²⁶ Noonan JTJr. (1986) *Ibid.* p. 389.

²⁷ Noonan JTJr. (1986) *Ibid.* p. 394.

²⁸ Wojtla K (1981) *Love and Responsibility*. Ignatius Press. San Francisco. p.283.

²⁹ “You have rejected God and God has struck you. You have by hideous calculation made tombs instead of filling cradles with children” Cardinal Mermillod quoted in Deppe B (1899) *Nouvelle Revue Théologique*, 31, 455-456.

³⁰ Quoted in Laurentius SJ (1914) “Das Bischofswort zum Schutze der Familie.” *Theologisch-praktische Quartalschrift*, 67, 517-528.

Conference had approved limited birth control for Anglicans. *Casti Connubii* was clear in its condemnation of contraception.³¹

The next major chapter came when the first oral contraceptive (OC) pill was produced in the early 1950s. These new agents were taken in pill form and their primary effect was to suppress ovulation. They also made the uterus hostile to implantation, so that if the “pill” failed to suppress ovulation it could act as an abortifacient. In 1960 the progesterone pill, Enovid was approved in commercial form for marketing in the United States after minimal field trials of less than three years in Puerto Rico.³² The “pill” was different from any prior method of contraception. “Positive” aspects for those seeking contraception were: a) It was highly effective (99% if taken correctly); b) very easy to use; c) no need to interrupt the conjugal act to use it; d) for women, nobody, not even your partner, knew you were contracepting. “Negative” sides to the “pill” were: a) it had to be taken daily. It could therefore become a regular habitual, or almost reflex activity that diminished the appreciation of the immorality of the act; b) it was a synthetic chemical hormone whose primary action was on brain pathways but which spread all over the body. It had multiple side effects including nausea, headaches, dizziness and it was doubted that women would continue to take it. There was no knowledge of what medium or long term side effects might be when it was marketed.³³ What was not appreciated was the huge effect on society that OCs were going to have, changing contraception from an individual occasional ad-hoc decision into a mass societal “state-of-contraception”. Paul VI’s voiced concerns showed that he appreciated that this could happen through coercion,³⁴ but even he did not appreciate the extent to which individuals would voluntarily choose this indefinite state-of-contraception voluntarily.

³¹ “Any use whatever of marriage in the exercise of which the act by human effort is deprived of its natural power of procreating life, violates the law of God and nature and those who do such a thing are stained by a grave and mortal flaw.” CC 56.

³² Watkins ES (1998) *On the Pill. A Social History of Oral Contraceptives 1950-1970*. Johns Hopkins University Press. Baltimore. p32.

³³ “Never in history have so many individuals taken such potent drugs with so little information as to the actual and potential hazards. We are embarking on a massive endocrinological experiment on millions of healthy women” Nelson Senator G. (1969) United States Congress, Senate. Select Committee on Small Business. Parts 13-16. US Government Printing Office. Washington DC. p.5925.

³⁴ HV 17

b) Worldwide usage of oral contraceptives.

Within five years of marketing, the “pill” became the most popular form of birth control in the United States and over six million women had obtained a prescription. 26% of married women and 80% of non-Catholic college graduates aged 20-24 had used the “pill” by 1965.³⁵ This had risen to an estimated 660 million women or about 11% of the global population using contraceptives by 2009³⁶ In the United Kingdom, initially prescribing by general practitioners was slow. After family planning clinics were allowed to prescribe to single women in 1974, this increased. There are now about two million women in the UK on the “pill”.

c) Known and accepted medical side effects of the oral contraceptive.

The anovulant pill acts on the hypothalamo-posterior pituitary complex in the brain and prevents secretion of gonadotropin releasing hormone by the pituitary gland that causes the ovary to release an ovum. Many OCs pose a threat to the health and wellbeing of the women who use them, sometimes even resulting in sterility after they are stopped.³⁷ OCs have been shown to double the risk of breast cancer if a woman starts the “pill” before age 20.³⁸ OCs give a two-fold risk of uterine cervical cancer³⁹ and increase the risk of liver cancer.⁴⁰

All combined (progestin and oestrogen) OCs increase the risk of venous thrombosis or pulmonary embolism by a factor of 3.5x.⁴¹ Combined OC users who are current smokers have 10-fold increased risk of myocardi-

³⁵ Watkins ES (1998) *On the Pill. A Social History of Oral Contraceptives 1950-1970*. Johns Hopkins University Press. Baltimore. p. 34.

³⁶ Reading F. (2012) *Growth in World Contraceptive Use*. Earth Policy Institute. http://www.earth-policy.org/data_highlights/2012/highlights26

³⁷ Seaman B. (1969) *The Doctor's Case against the Pill*. PH Wyden, New York. p. 117

³⁸ Beaber EF. (2014) Recent Oral Contraceptive Use by Formulation and Breast Cancer Risk among Women 20 to 49 Years of Age. *Cancer Research*, 74; 4078.

³⁹ La Vecchia C (2014) Oral contraceptives, human papillomavirus and cervical cancer. *Eur J Cancer Prev.* 2014 Mar; 23(2):110-2.

⁴⁰ La Vecchia C (2009) Oral contraceptives and neoplasms other than breast and female genital tract. *Eur J Cancer Prev.* 18:407-11.

⁴¹ de Bastos M et al. (2014) Combined oral contraceptives: venous thrombosis. *Cochrane Dbase Syst. Rev.* (2014) Mar 3;3:CD010813.

al infarction, and stroke increases nearly 3-fold.⁴² The risk of haemorrhagic stroke rises 15-fold.⁴³ OCs are risk factors for cerebral venous thrombosis.⁴⁴

Some of the side effects of combined OCs may be due to the progestin component. Three new combined OCs were introduced by Bayer in 2006. The new progestin used, drospirenone, has a strong anti-androgen effect and cured acne. The drugs (Yasmin, Yaz and Ocella) were heavily marketed on their ability to cure acne and reduce premenstrual syndrome. Many women switched to them because of this and because these medications increased breast size. Major side effects including death soon became apparent, however,⁴⁵ and a class-action law suit is in progress against Bayer.⁴⁶

d) Psychological and Neurobiological changes

Adverse mood symptoms occur in up to 10% of OC users in trials.⁴⁷ Functional magnetic resonance imaging shows decreased emotion-induced activity in several brain areas in women that have adverse mood with OCs, including the frontal lobes and insula.⁴⁸ Partnered

⁴² Seaman B. (2003) The greatest experiment ever performed on women. Exploding the estrogen myth. Hyperion. New York. p. 223.

⁴³ Kaminski P. (2013) Cardiovascular risk and the use of oral contraceptives. *Neuro Endocrinol Lett.* 34:587-9.

⁴⁴ Bousser MG (2012) Cerebral venous thrombosis, pregnancy and oral contraceptives. *Thromb Res.* 130 Suppl 1:S19-22.

⁴⁵ The U.S. Food and Drug Administration (FDA) Adverse Events reporting system indicated serious side effects such as heart arrhythmias, electrolyte imbalance, hyponatremia, hyperkalemia, stroke, gallbladder problems, blood clots, embolisms and sudden death following the use of Yaz and Yasmin in some cases. Dinger JC. (2007). The safety of a drospirenone-containing oral contraceptive: final results from the European Active Surveillance Study on oral contraceptives based on 142,475 women-years of observation. *Contraception* 75, 344-354.

⁴⁶ Bayer made a reported \$1.8 billion dollars worldwide from sales of Yasmin and Yaz. Despite over a hundred deaths being linked to these drugs, there has not been a recall of the products, only a rewording of the package insert that outlines the side effects. *NY Times*, Sept 25th 2009.

⁴⁷ Poromaa IS (2012) Adverse mood symptoms with oral contraceptives. *Acta Obstet Gynecol Scand.* 91:420-7.

⁴⁸ Gingnell, M. (2013) Oral contraceptive use changes brain activity and mood in women with previous negative affect on the pill. *Psychoneuroendocrinology.* 38, 1133-1144.

women report higher levels of jealousy when on the “pill” than when having normal cycles.⁴⁹

Research has shown that female mate choice preference varies through the menstrual cycle. Women prefer more masculine and genetically unrelated men during the mid-cycle ovulation phase. OCs appear to remove the mid-cycle preference bias⁵⁰ and women on OCs show a preference for less masculine facial appearance in their partners than those not on OCs.⁵¹

Neurobiological research is beginning to reveal that OCs produce alterations in fundamental brain processes. For example, fear learning, which is part of the body’s defence is normally reduced by cortisol, a hormone produced under stress conditions. In women on OCs however, fear learning is enhanced.⁵² Combined OCs alter sexual desire in 23% of users (15% decreased and 8% increased).⁵³ OCs also alter neural reward processing and the changes in mate preferences on OCs may relate to differences in stimulus-dependent excitability of reward-related regions of the brain.⁵⁴ OCs also alter motor learning in the brain.⁵⁵

This data is beginning to show that suppression of a women’s normal cycle has potentially far-reaching negative psychological effects. Direct effects of OCs on neurobiological pathways are also being discovered. These findings are not surprising given the importance of sex hormones in biology and neurobiology. Further studies are urgently needed to confirm and extend our knowledge, given the huge number of women taking OCs daily.

⁴⁹ Cobey K. (2012) Reported jealousy differs as a function of menstrual cycle stage and contraceptive pill use. *Evolution and Human Behavior*, 33, 395-401.

⁵⁰ Alvergne A (2010) Does the contraceptive pill alter mate choice in humans? *Trends Ecol Evol*, 25:171-9.

⁵¹ Little A. (2013) Oral contraceptive use in women changes preferences for male facial masculinity and is associated with partner facial masculinity. *Psychoneuroendocrinology*, 38, 1777-1785.

⁵² Merz C. (2012) Oral contraceptive usage alters the effects of cortisol on implicit fear learning. *Hormones and Behavior*, 62, 531-538.

⁵³ Pastor Z. (2013) The influence of combined oral contraceptives on female sexual desire: A systematic review. *The European Journal of Contraception and Reproductive Health Care*. 18, 27-43.

⁵⁴ Bonenberger M. (2013) Oral contraception alters neural reward processing. *NeuroReport*, 24, 951.

⁵⁵ Holloway J. (2011) Facilitated acquisition of the classically conditioned eyeblink response in females is augmented in those taking oral contraceptives. *Behavioural Brain Research*. 216, 301-307.

e) Condoms, Long acting depot preparations and emergency “contraception”

Male condoms are second to OCs as a form of contraception. Although their use is widespread, unlike OCs, they are used as-needed and do not have effects throughout the body so are less likely to lead to a contraceptive “dependence”.⁵⁶ Pope Benedict allowed their use in extreme circumstances to prevent HIV transmission.⁵⁷ The most recent developments in contraception are the long acting depot implants which provide contraception for three years. In Africa, the Melinda Gates foundation is giving out subcutaneous injectable depot-provera, rebranded as “Sayana Press”, but which has not been approved by the US FDA. Levonelle (Plan- “B”) or emergency “contraception” is a progestin taken after sexual intercourse that prevents pregnancy. It is said to work by preventing ovulation but there are significant concerns that it could prevent implantation of a fertilized ovum, and in this way cause abortions. “Post-coital contraception” is also being increasingly distributed by non-governmental organizations to women in war zones by international organisations to be used in case of rape.

⁵⁶ See Section 3b below

⁵⁷ Congregation for the Doctrine of the Faith.(2010) Note on the banalization of sexuality. Regarding certain interpretations of "Light of the World" at http://www.vatican.va/roman_curia/congregations/

3. THE MORAL DECISION TO CONTRACEPT AND THE DECISION TO TAKE THE PILL

a) The Anthropology and Moral Methodology of Contraception.

The anthropological argument given by the more radical secular proponents of contraception, distinguishes the “person” (the conscious subject of experiences) from the body that the person uses. If the person is not his or her own body, then “sexuality” which is experienced by the person can be separated from the body’s biological fertility mechanism.⁵⁸ This is a dualistic anthropology which holds that it is proper for human beings to use science to control the mechanisms of the body so that the consciously experienced, unitive or personal aspects of sexuali-

⁵⁸ May WE. (2008) Catholic Bioethics and the Gift of Human Life. Our Sunday Visitor, Huntington. p. 136

ty are not inhibited by the chance of conception.⁵⁹ This same dualistic anthropology has led to the justification of abortion and euthanasia and conflicts with the concept of the person in *Humanae Vitae*. Humans are not body-persons and human fertility is not a sub-personal aspect of sexuality however and Grisez says that the essential point about the decision to take a contraceptive is that each time a “pill” is taken, it is an unambiguous deed designed to accomplish a definite effect, and this intentional act is immoral.⁶⁰

The leading moral methodology in the justification of contraception distinguishes between individual marital acts and the totality of marriage.⁶¹ It is seen to be justified to “order some marital acts to the expression of the union of love by rendering them infertile”. By this reasoning, “Infertile marital acts and fertile acts have a single moral specification.”⁶² This reasoning is however consequentialistic and tries to justify individual chosen contraceptive acts by the hoped-for benefits of uniting the couple.

Pope John Paul sees the self-giving love of the sexual act as emerging from the unitive or spousal meaning of the body.⁶³ The inseparability of unity and fecundity of the sex act is therefore also imbedded in the anthropology of the individual.⁶⁴ Regularly taking the “pill”, even without participating in sexual intercourse, is in conflict with a woman’s anthropological makeup and the vocation to self-giving love. Since a woman’s biology is central to her sense of her femininity⁶⁵ a negation

⁵⁹ Hoyt R (1969) The Majority Report to The Papal Commission on Population, the Family and Natality. In “The Question is not Closed” The National Catholic Reporter, Kansas. P69. Translated from original French: Paupert J-M (ed) (1967) Contrôle des naissances et théologie: le dossier de Rome. Seuil, Paris.

⁶⁰ Grisez GG (1964) Contraception and the Natural Law. The Bruce Publishing Company, Milwaukee. p. 175.

⁶¹ May WE. (2008) Ibid. p. 137.

⁶² Hoyt R (1969) Ibid. p. 72.

⁶³ John Paul II (1997) Catechesis on Human Love, The Theology of the Body. Pauline, Boston p. 63.

⁶⁴ Woodall GJ (1996) The principle of the indissoluble link between the dimensions of unity and fruitfulness in conjugal love: Excerpta ex Dissertatione ad Doctorum in Facultate Theologiae Pontificiae Universitatis Gregorianae. Rome. p. 115.

⁶⁵ Phillips M. (1999) The Sex-change society. Feminized Britain and the Neutered Male. Profile Books, London. p. 9.

of this through habitual OC use is a negation of her femininity in both an objective and in a subjective sense.

There appear to be multiple sources of pressure on women to take the “pill”:

b) Governments/Organisations

Paul VI raised the issue of fear that the population might grow more quickly than could be sustained.⁶⁶ As he predicted, countries such as China have put into place national programmes of forced contraception.⁶⁷ The idea of controlling the population grew from the Rev Thomas Malthus⁶⁸ who wrote in 1798 that the population could outstrip the food supply. After World War I through contraceptives, affluent families had fewer children and started to perceive the large families of the poor classes as a demographic threat. The Population Council that was set up in the USA in 1952 had a eugenic motivation for controlling population. It was from its origin very closely linked to Planned Parenthood and supported contraception.⁶⁹

Birth control organisations like Planned Parenthood and Marie Stopes are the major financial forces in spreading contraception globally. The motivation of Planned Parenthood, initiated by Margaret Sanger, was principally eugenic and sought to keep the birth rate of the “fit” above that of the “unfit”.⁷⁰ Planned Parenthood received \$540 million from the US government in 2013⁷¹ and Planned Parenthood International, a huge, powerful organisation, received over £28 million of British taxpayer money between 1983 and 1988.⁷² It is difficult to exclude a eu-

⁶⁶ HV 2, 1

⁶⁷ HV 17, 2

⁶⁸ Malthus T. (1970) *An Essay on the Principle of Population*. Penguin. London. p. 110.

⁶⁹ Watkins ES (1998) *On the Pill. A Social History of Oral Contraceptives 1950-1970*. Johns Hopkins University Press. Baltimore. p.18.

⁷⁰ Perry M. (1992) *The History of Planned Parenthood*. The Catholic Resource Network. Manassas, VA at <http://www.ewtn.com/library/prolife/pphistry.txt>

⁷¹ Planned Parenthood Annual Report 2012-2013. http://www.plannedparenthood.org/files/7413/9620/1089/AR-FY13_111213_vF_rev3_ISSUU.pdf

⁷² Hansard, Written Answers, 14.11.88.

genic motivation for the spread of these organisations to developing countries.⁷³

In Britain take up of OCs was slow until they became available to single women at family planning clinics in 1974.⁷⁴ The government took the case of providing contraception to under-age children to the Law Lords and established the legal precedent for breaching parental rights. Planned Parenthood International have fought in many countries to exclude parents from the decision to give contraceptives to under-age children.⁷⁵

c) Women's movements

Feminist movements see OCs as central in women's equality struggle although early Victorian feminism was against contraception and saw it as just another form of sexual abuse.⁷⁶ Katherine

McCormick, a wealthy women's activist and suffragist provided nearly \$2million to develop the first "pill".⁷⁷ Contraceptives were seen as part of women's "reproductive rights" that would help women be financially independent from men. Melinda Gates, wife of Microsoft founder, Bill Gates, has a foundation with a goal to bring contraception to 120 million young women and girls in the poorest countries by 2020. Gates, who is a baptised Catholic, states that the motivation for this is "to enable women to make informed decisions...and to improve opportunities for them."⁷⁸

d) Pharmaceutical industry

The development, promotion and distribution of OCs represents a \$22 billion industry with about sixty market brands. Bayer made \$1.8 billion from the sale of Yaz and Yasmin by aggressive marketing of their acne reduction effect. Bayer adopted the "Virginia Slims" model of advertis-

⁷³ Laing JA (2012) The Background and Consequences of the Reproductive Revolution. *Catholic Medical Quarterly*, 62: 24-30.

⁷⁴ Riches V. (1989) Who cares for children? The implications of providing birth control for under-sixteens. *Family & Youth Concern*, Milton Keynes. p. 10.

⁷⁵ Riches V (1989) *Ibid.* p. 23.

⁷⁶ Farmer A (2002) *Prophets and Priests*. Saint Austin Press. London p19.

⁷⁷ Watkins ES (1998) *On the Pill. A Social History of Oral Contraceptives 1950-1970*. Johns Hopkins University Press. Baltimore. p. 26.

⁷⁸ Melinda Gates Foundation at <http://www.gatesfoundation.org/What-We-Do/Global-Development/Family-Planning>

ing that co-opted the language of women's liberation movement to appeal directly to young women.⁷⁹

e) Women

Women may be started on OCs by their mothers.⁸⁰ When the "pill" was first marketed, people doubted that women would be prepared to take a pill every day, just to contracept. However, the "pill" was so skilfully marketed in the USA that peer pressure pushed many women to start taking it. Many feel it a right-of-passage to adulthood.⁸¹ The "pill" becomes assimilated into a young woman's sense of self, whether she is sexually active or not. In effect many young women become psychologically "dependent" on the "pill".⁸²

4. EFFECTS OF ORAL CONTRACEPTIVES ON THE MARITAL ACT AND ON MARRIAGE.

a) Effects on the marital act

The Church holds that sexuality is "a fundamental component of personality, one of its modes of being, of communicating with others, of expressing and of living human love"⁸³ The attraction between man and woman may be initially sensual. Carnal concupiscence is closely linked with sensuality and powerfully impels towards sexual intercourse.⁸⁴ In marriage, the possibility that children may be conceived through any sexual act and carry a lifetime commitment of care, tempers this sexual drive. Contraception within marriage takes away this natural counter-balance⁸⁵ (as, for men, does sexual intercourse outside of the marriage bond).

⁷⁹ Grigg-Spall H. (2013) Sweetening the Pill or how we got hooked on hormonal birth control. Zero Books, Alresford. p. 23.

⁸⁰ Grigg-Spall H.(2013) Ibid. p.19.

⁸¹ Grigg-Spall H.(2013) Ibid. p20.

⁸² Grigg-Spall H.(2013) Ibid. p21.

⁸³ Sacred Congregation for Catholic Education, (1983) 4. Educational Guidance in Human Love. Outlines for sex education.

⁸⁴ Wojtla K (1981) Love and Responsibility. Ignatius Press. San Francisco. p. 148.

⁸⁵ Anscombe GEM. (1977) Contraception and Chastity. CTS, London. p. 21.

Sexuality is complementary in character and reflects the “nuptial” aspect of the body.⁸⁶ The person becomes a gift which fulfils the very meaning of his or her being and existence.⁸⁷ It also gives a mystical and holy significance to the union between spouses in marriage.⁸⁸ The sexual body language of the conjugal act is only “true” when both the unitive and procreative meanings of the conjugal act are respected. It is a “lie” when these meanings are violated as in contraception. This is a contradiction of love itself,⁸⁹ and removes the mystical and holy significance of the marital conjugal act.

Paul VI has said: The inseparable connection, established by God which man on his own initiative may not break between the unitive significance and the procreative significance which are both inherent in the marriage act.⁹⁰

The sexual act leaves the way open to God to perform his act of creating new life.⁹¹ Spouses become “co-operators with the Creator and co-administrators in the work of creation”⁹² John Paul II says that through contraception, married couples remove the procreative capacity and claim a power which belongs to God alone. This makes contraception profoundly unlawful. To think or say otherwise is in effect to claim that in human life, situations arise when it is lawful not to recognize God as God.⁹³

b) Effects on marriage stability, divorce

Extramarital sex has always occurred in society, but before the “pill” there was an implied promise that if the woman became pregnant the man would marry her. Since the “pill” was introduced it is assumed the woman will “protect herself” from becoming pregnant. Marriage be-

⁸⁶ John Paul II (1997) *Catechesis on Human Love, The Theology of the Body: Human Love in the Divine Plan*. Pauline, Boston. Catecheses 9 (14 November 1979), 10 (21 November, 1979), 14 (9 January 1980), 45-51, 60-63. (translation from *Uomo e donna lo creo: catechesi sull'amore umano*. Citta Nuova, Roma, Libreria Editrice Vaticana, Vatican, 1985) p.63.

⁸⁷ John Paul II. (1981) *Original Unity of Man and Woman*. St Paul Editions, Boston. p115

⁸⁸ *Casti Connubii*, 80, 129.

⁸⁹ Cf. John Paul II (1997) *Ibid.* p. 63.

⁹⁰ HV 12

⁹¹ Smith JE (1991) *Humanae Vitae: A generation later*. Catholic University of America Press, Washington DC. p. 261.

⁹² *L'Osservatore Romano*, (1983) Oct 24, 3.

⁹³ *L'Osservatore Romano*, (1983) Oct 10, 7.

came more difficult for women as relationships were not directed towards marriage. Many people started cohabiting. In the early 1960s about 1% of couples in the UK were cohabiting this has progressively risen to 11.7% or 5.9 million people in 2012.⁹⁴ The proportion of births outside of marriage in the UK rose to 36% in 1996 compared with 9% in 1976 for women in their 20s.⁹⁵ For teenagers, it is 90%.⁹⁶

In the USA, the divorce rate started to increase in the late 1960s (Figure 1) and doubled from 25% to 50% between 1965 and 1975. Robert Michael of Stanford University has statistically linked 45% of this increase in divorce to contraceptive use.⁹⁷ The link between OCs and divorce has therefore not only been shown statistically but is highly plausible,⁹⁸ and was predicted by Paul VI, who said that contraceptives would lead to marital infidelity.⁹⁹ The UK has one of the highest divorce rates in the world with almost half of all marriages since 1999 forecast to break down.¹⁰⁰ In the same year 89% of women aged 20-49 were using contraception.¹⁰¹

c) Abortion

Pope John Paul has linked abortion to contraception: “the pro- abortion culture is especially strong precisely where the Church’s teaching on contraception is rejected”¹⁰² The contraceptive culture encourages sex out of marriage. Sex with contraceptives is assumed to be protected from pregnancy and the relationships that are set up with this assumption are not well-bonded. Figure 2 shows how abortion increased dramatically in the 1970s and the increase paralleled the increase in contraception. There have been 1.3 billion abortions in the world since 1980.

⁹⁴ Office for National Statistics. (2012) Short Report. Cohabitation in the UK. At <http://www.ons.gov.uk/ons/rel/family-demography/families-and-households/2012/cohabitation-rpt.html>

⁹⁵ Haskey J. (1998) One-Parent Families and their Dependent Children in Great Britain. Population Trends. Spring.

⁹⁶ Teenage Pregnancy. (1999) Report by the Social Exclusion Unit presented to Parliament by the Prime Minister by the command of Her Majesty at <http://dera.ioe.ac.uk/15086/>

⁹⁷ Michael RT. (1978) The Rise in Divorce Rates 1960-1974: Age Specific Components. Demography, 15;177-182. At <http://www.nber.org/papers/w0202>

⁹⁸ Lawler R. (1998) Catholic Sexual Ethics. One Sunday Visitor Inc. Huntington, Indiana p. 157.
⁹⁹ HV 17 §1

¹⁰⁰ Population Trends 95. (1999) Office of National Statistics.

¹⁰¹ Dawe F, Meltzer H. (1999) Contraception and Sexual Health. Office for National Statistics. p.4.

¹⁰² Evangelium Vitae,13.

Abortion is seen as a way out of an unexpected pregnancy,¹⁰³ and it has become a method of contraception.¹⁰⁴ In the UK in 2012, 37% of abortions were repeats, 4,500 women had at least four abortions and 33 women had terminated 9 or more pregnancies.¹⁰⁵ The harm done to women as well as their children is incalculable.

5. EFFECTS OF ORAL CONTRACEPTIVES ON SOCIETY.

In *Humanae Vitae* Paul VI warned that birth control would lead to a general lowering of moral standards.¹⁰⁶ The ever-growing use of contraceptives especially OCs has altered the demographics of Western society worldwide. The global birth rate was 37 per 1000 people in 1950-55 and came down to 19.5 per 1000 in 2010-2015.¹⁰⁷ In the view of Carl Djerassi one of the co-inventors of the “pill”, OCs have led to a demographic catastrophe.¹⁰⁸ The implications of this are that in many, particularly Western countries, the birth rate is so low that as the population ages there will not be enough young people to run the economy.

a) Status of women in society

The effect of the “pill” on the status of women must be set in the context of changes that were already present in the role of women in society. Women’s movements gathered momentum in the late nineteenth century, but not all supported contraception. A demand had already been made in the United States in 1918 for women to be able to control the size of their families through contraception. Crystal Eastman (1881-1928), lawyer and feminist, wrote: “I don’t believe there is one woman within the confines of this state who does not believe in birth con-

¹⁰³ Smith JE (1991) *Humanae Vitae: A generation later*. Catholic University of America Press, Washington DC. p.321

¹⁰⁴ Doherty P. (1983) *Is the Contraceptive Experiment Over?* Faith Pamphlets, Wallington. p24.

¹⁰⁵ Donnelly L. (2013) NHS figures disclose 33 women have had at least nine abortions. The Telegraph, 11 July.

¹⁰⁶ HV 17

¹⁰⁷ United Nations. Department of Economic and Social Affairs. *World Population Prospects: 2012 Revision*. June 2013.

¹⁰⁸ CathNews (2009) Pill inventor slams...pill 5th January. <http://cathnews.com/archives/cath-news-archive/9710-pill-inventor-slams-pill>

trol!”^{109,110} Pope Paul recognized in 1968 that “the person of woman” and “her role in human society” had changed.¹¹¹ Women had won the vote in the West and were showing that they could do jobs that traditionally only men did.

“Reproductive rights” became a central focus of the women’s movement as women felt that birth control was key for talented women to become successful in society. The “pill” was initially distributed to married women in the early 1960s; however, young unmarried women very quickly started using it and the great majority of non-Catholics in US colleges used the “pill” by 1965.¹¹² Women were now able to have sex when they wanted and not be worried about pregnancy. The very rapid and almost universal uptake among women in colleges suggests, however, a strong peer-driven effect rather than a sudden increase in women’s sexual proclivities. Once on the “pill”, many young women became psychologically addicted to it¹¹³ and the high uptake in colleges was likely a principal driver of the “sexual revolution” among the young.¹¹⁴ Feminism seized on the new sexual freedom as a key to the emancipation of woman from all the constraints that previously bound them.¹¹⁵ A woman’s “freedom to choose” became the rallying cry of the women’s movement and this was centred on “reproductive rights” including contraception and abortion. It is clear that the “pill” has given a major impetus to the feminist movement.

b) Change in women’s sexual behaviour

¹⁰⁹ Eastman, Crystal. (1978) "Birth Control in the Feminist Program." In Blanche Wiesen Cook: Crystal Eastman on Women and Revolution. Oxford University Press. p. 46.

¹¹⁰ "I am 30 years old have 6 children, oldest little over 7, youngest a few days. My health don't seem to make it possible for me to go on this way. We have tried to be careful but I get pregnant anyway. When I read this article I couldn't help but cry for I thought there is my ray of hope" Watkins ES (1998) On the Pill. A Social History of Oral Contraceptives 1950-1970. Johns Hopkins University Press. Baltimore. p50.

¹¹¹ HV 1 §2

¹¹² Watkins ES (1998) Ibid. 34.

¹¹³ Grigg-Spall H.(2013) Sweetening the Pill or How we got hooked on hormonal birth control. Zero Books, Winchester. p. 21.

¹¹⁴ Morgan P. (2014) The Marriage Files. Wilberforce Publications, London. p. 64.

¹¹⁵ Phillips M. (1999) The Sex-change society. Feminized Britain and the Neutered Male. Profile Books, London. p. 129.

Women are the pivot of sexual relationships, with men competing for their favours. Men are more likely than women to have an attitude of seeking enjoyment out of sexuality.¹¹⁶ Women used to confine sex to within marriage, but the separation of the procreative and unitive aspects of sex has meant that women have used sex more and more for physical gratification and recreation.¹¹⁷ Freer sexual habits have shattered the delicate equilibrium between the sexes on which stable loving relationships depend. Women are behaving with the sexual opportunism that was characteristic of men. As a result, there has been a collapse of conduct which is largely driven by women themselves.¹¹⁸ Women's behaviour is also driven by male expectations that they be freely sexually available. Changed attitudes to sexuality have transformed women's feelings about themselves and their lives and have given many women a new sense of autonomy and power.¹¹⁹ Some women however, have found these new attitudes damaging to their self-esteem. There is an increasing realization that women are suffering unique harms, particularly the poorest, most vulnerable groups.¹²⁰ Far more women than men report that they regret casual sexual encounters and express negative opinions about cohabitation.¹²¹ Abortion has brought with it the post abortion syndrome and traumatic grief.¹²² The question about whether the "pill" has altered women's and society's concept of freedom and autonomy is discussed in Chapter 6.

c) Feminist Movement

The first phase of the feminist movement before the mid-twentieth century, was "equity feminism" that sought to establish equality between the sexes. The new wave of feminism that started in the campuses in the 1960s and 1970s, coinciding with the introduction of the "pill", was "gender feminism". Gender feminism was hostile to both the family and

¹¹⁶ Wojtla K (1981) *Love and Responsibility*. Ignatius Press. San Francisco. p. 111.

¹¹⁷ Ehrenreich B, Hess E, Jacobs G. (1986) *Re-making Love*. The feminization of sex. Anchor Books. p.2.

¹¹⁸ Phillips M. (1999) *Ibid*. p. 28.

¹¹⁹ Phillips M. (1999) *The Sex-change society*. Feminized Britain and the Neutered Male. Profile Books, London. p. 160.

¹²⁰ Alvare H. (2011) *Abortion, Sexual Markets and the Law* in Napier S. (editor) *Persons, Moral Worth and Embryos*. Springer, Dordrecht. p.268.

¹²¹ Alvare H. (2011) *Ibid*. p. 263.

¹²² http://www.academiavita.org/_pdf/documents/pav/post_abortion_trauma.pdf

men and portrayed women as victims of male oppression across the board. Key goals were women's independence from men, men taking on more of the family work and

the destruction of the "patriarchal" family.¹²³ For many, independence from men is not sufficient and there is now a major movement to obliterate sexual differences and to make men and women sexually interchangeable. Feminism has now mutated into a project to promote androgyny through public policy.¹²⁴ Many feminists seek to bring about "equality" on women's terms alone and the desire is for men to become peripheral in family life. It has been argued that at the centre of this kind of feminism is a disturbing hostility towards men,¹²⁵ towards whom many women are being "horrendously ungenerous."¹²⁶ The reasons for this anti-male hostility are complex and difficult to understand. Edith Stein (St Teresa Benedicta of the Cross) says that in woman there is an innate tendency to become a complete human being, fully developed in every way and by the same token she would like others to fulfil the same destiny.¹²⁷ Feminists may see the patriarchal male as standing in the way of this goal if the "pill" has affected their capacity for self-giving love and men are excluded from their vision of "completeness". It seems likely that the "pill" has fostered the emergence of a form of feminism that seeks to side-line men from the family. Melanie Phillips columnist for the Sunday Times¹²⁸ wrote: "It is hard to exaggerate the corrupting effect that feminism has had upon academic integrity in general and the social sciences in particular... The belief that gender roles are plastic and adaptable because there are no intrinsic differences between men and women is now central to British Social Policy".¹²⁹

¹²³ Phillips M. (1999) Ibid. p. 123.

¹²⁴ Phillips M. (1999) Ibid. p. 160.

¹²⁵ Phillips M. (1999) Ibid. p. 175.

¹²⁶ Coward R. (1999) Sunday Times, June 20th.

¹²⁷ Stein E (1959) *Essays on Women*. ICS Publications. Washington.

¹²⁸ This section of this dissertation draws heavily from "The Sex-Change Society" by Melanie Phillips has been described as a timely wake-up call about gender feminism and its anti-family and anti-male goals. Her arguments are well supported by data and ample references. The book throws a badly needed lifeline to men in modern society.

¹²⁹ Phillips M. (1999) Ibid. p173.

Pro-life Feminism is a welcome and growing exception to the feminist movement as portrayed above. The movement started in the 1970s and sees abortion as a symptom of, not a solution to, the continuing struggles women face in society.¹³⁰ Feminists for life support the role of mothers and values the role of fathers.

d) Work role changes

The full effect of the “pill” on women is difficult to assess. The proponents of the “pill” state that it has allowed women to start a career and to put off marriage and having children. Women are having fewer children and have taken up many more traditionally male roles in the workplace. There has been an increase in representation of women in professional occupations and an increase in women’s earnings.¹³¹ For feminists, improving opportunities for women is one of the main stated reasons for strongly advocating contraceptives for developing nations.

d) Homosexuality

The premise of the OC lifestyle, that sex can be removed from procreation, directly supports the homosexual lifestyle. The decreasing social meaning of marriage and decreasing support of women for men and vice-versa are likely dissuading men from seeking lasting heterosexual relationships.¹³² For those men so predisposed, homosexuality may be seen to be an easier option for sexual partnership than marriage.¹³³ The unstable marital environment due to contraception paradoxically has encouraged gay “marriage”.¹³⁴ It has been said that “the homosexualization of our culture and law is the most ominous result of the acceptance of contraception”.¹³⁵

¹³⁰ <http://www.feministsforlife.org/our-mission-organization/>

¹³¹ Hock H. (2005) *The Pill and College Attainment of American Women and Men*. Population Association of America, Princeton University.

¹³² Morgan P. (2014) *The Marriage Files*. Wilberforce Publications, London. p. 95

¹³³ Macedo S. (2003) *Homosexuality and the Conservative Mind* in (eds) Wardle LD et al. *Marriage and Same Sex Unions. A Debate*. Praeger. p. 101.

¹³⁴ Linker D. (2013) *How gay marriage’s fate was sealed more than 50 years ago*. *The Week*, March 29.

¹³⁵ Rice CE. (2014) *Contraception and Persecution*. St Augustine’s Press, Chicago. p. 80.

e) Gender role interchangeability

The blurring of the roles of men and women in society and the enlarged understanding of “freedom” has resulted in the concept that the male and female sex is interchangeable. Some theorise that the brains of men and women are initially identical, but develop differently because of hormonal and environmental factors. Proponents of the view that sexual differentiation is malleable rather than fixed want individuals to be able to use hormones and surgery to change sex if they feel they have the “wrong” sex.¹³⁶ It has been found however, that magnetic resonance diffusion tensor imaging can distinguish male and female brains with an accuracy of 93%, just using brain images. The researchers found no interactions with age between the ages of 7 to 22 (the ages of the persons studied) showing that these changes are not due to different cultural or hormonal exposure.¹³⁷

f) Effects on men in society

Men’s sense of their own masculinity is much more vulnerable than women’s sense of their femininity. Childbearing is the most important role in society and women’s cyclical changes ensure women have a continuing sense of their femininity and its connection with maternity. Men have to construct a role of social value and have to “prove themselves” to others and themselves repeatedly. For this reason unemployment is devastating to men.¹³⁸ The male provider role is anathema to many feminists since it is the centre of a perceived patriarchy and it is being aggressively attacked. The government has bowed to feminist pressures to give tax incentives for women to work and they have entered the workforce in unprecedented numbers. Male employment has in contrast collapsed.¹³⁹ At the same time modern man is being told to share the work in the home to allow the woman to go out to work.

¹³⁶ A recent law In Malta allows any individual to change their legal sex by public deed simply by filling out a form. <http://www.washingtonblade.com/content/files/2015/04/Bill-70-Gender-Identity.pdf>

¹³⁷ Duarte-Carvajalino JA. (2012) Hierarchical topological network analysis of anatomical human brain connectivity and differences related to sex and kinship. *Neuroimage* 59, 3784–3804.

¹³⁸ Phillips M. (1999) *The Sex-change society. Feminized Britain and the Neutered Male*. Profile Books, London. p. 9.

¹³⁹ Phillips M. (1999) *The Sex-change society. Feminized Britain and the Neutered Male*. Profile Books, London. p.211.

Many men find this threatening to their masculinity. Malinowsky, one of the most important twentieth century anthropologists, found that fathers do not naturally have a drive to look after children.¹⁴⁰ Faced with pressure to conform to a feminized culture, some men turn to hooliganism.¹⁴¹

Women initiate 70% of divorces. There is evidence of a “blatant and far-reaching application of a profound hostility towards men” in the divorce courts.¹⁴² Men are commonly stripped of their children and their assets. In legal judgments men have repeatedly been portrayed under the influence of feminism, as being intrinsically violent. This is accepted by the courts and is now generally accepted in society. This is however a grave distortion and much research actually shows that women are at least as aggressive as men and have become more violent towards men as they have become more independent of them.¹⁴³ Women also pose the main threat of physical violence to children.¹⁴⁴ Men are more vulnerable when marriages end in divorce with a risk of suicide five times that of married men whereas divorced women have a threefold risk,¹⁴⁵ both of which are a matter of serious concern.

g) Effects on children

Perhaps the greatest negative effect of the widespread and routine recourse to OCs has been on children. This has been at multiple levels:

i) By their effects on reshaping the ethos of marriage, OCs have damaged the structure of the family in society and children suffer as a result of this, particularly through divorce. The birth rate in unmarried women in the USA went up from 14.1 per 1000 in 1950 to 43.8 per 1000 in 1990.¹⁴⁶ This does mean that there are many more women who

¹⁴⁰ “the necessity for imposing the bond of marriage is practically and theoretically due to the fact that a father has to be made to look after his children” Malinowski B. (1970) *Sex and Repression in Savage Society*. Routledge and Kegan Paul, London. p167

¹⁴¹ Football hooliganism has been described as “a quick way to fill a previously empty trolley in the masculinity supermarket” Hornby N. (1992) *Fever Pitch*. Gollancz.

¹⁴² Phillips M. (1999) *Ibid.* p. 272.

¹⁴³ Archer J. (2000) Sex differences in Aggression between Heterosexual Partners. A Meta-Analytic review. *Psychol Bull.* 126: 651.

¹⁴⁴ Phillips M. (1999) *Ibid.* p. xvii.

¹⁴⁵ Mc Allister F. (1995) *Marital Breakdown and the Health of the Nation*. One Plus One. July.

¹⁴⁶ De Parle, J. (July 14, 1993). Big rise in births outside of wedlock: census reports 60 percent increase in last decade. *New York Times*, A-1, A-14.

are bringing up children without the stability and security of marriage. Adults have become less caring of children- as adults started to behave as they wanted without having to answer for the consequences. Children have been turned from dependents into empowered family members with adult responsibilities.¹⁴⁷ Children have been scarred as marriages collapsed and this has resulted in a fear of commitment to marriage.¹⁴⁸ Children who are brought up in father-absent households are at greater risk of behavioural and educational problems including violence and criminality with boys more severely affected than girls.¹⁴⁹ Closeness to fathers is very important for happiness and wellbeing of both sons and daughters.¹⁵⁰

ii) Contraception for the under 16s was introduced by stealth through a Department of Health and Social Security (DHSS) memorandum in 1974. Making children grow up too early by sexualising them is one of the most damaging tendencies of modern society, and has been linked to the rise in suicide and para-suicide amongst the young.¹⁵¹ Pregnancy in the 13 to 15 year olds has increased from 6.9 per 1000 in 1969 to 8.7 per 1000 in 1986, with abortion rates increasing almost three fold.

iii) Children are being increasingly born into and brought up in single parent families or by homosexual partners. In 2013, 24% of children were living with a lone parent in the UK and nearly half of 15 year-olds had experienced parental separation.¹⁵² There is an increasing literature that children fare badly in these setups.^{153,154,155}

iv) The effect of the feminized society on boys has been disastrous.¹⁵⁶ Boys are particularly being affected as distinctive male characteristics

¹⁴⁷ Phillips M. (1999) Ibid. p. 55.

¹⁴⁸ Phillips M. (1999) Ibid. p. 62.

¹⁴⁹ McAllister F. (1995) Marital Breakdown and the Health of the Nation. One Plus One, July.

¹⁵⁰ Father-Child Relations, Mother-Child relations and Offspring Psychological Well-Being in Early Adulthood. Journal of Marriage and the Family. (1994) 56, 4.

¹⁵¹ Riches V. (1989) Who Cares for Children? Nightingale Press, Royston. p17.

¹⁵² Morgan P. (2014) The Marriage Files. Wilberforce Publications, London. p.46

¹⁵³ Marks L. (2012) "Same-sex Parenting and Children's Outcomes: A Closer Examination of the American Psychological Association's Brief on Lesbian and Gay Parenting." Social Science Research 41:4.

¹⁵⁴ Regnerus M. 2012. "How Different Are the Adult Children of Parents Who Have Same-Sex Relationships? Findings from the New Family Structures Study." Social Science Research 41:4

¹⁵⁵ Potter D. 2012. "Same-Sex Parent Families and Children's Academic Achievement." Journal of Marriage and Family 74: 556-571.

are not recognised or said to be anti-social. Boys have low self-esteem and performance¹⁵⁷ and those without fathers are more likely to be in trouble with police.¹⁵⁸ Boys view the school system as oppressively feminine with downplaying of mechanical skills in favour of reading and writing for example.¹⁵⁹

v) The idea that conception can be controlled by the will has led to a loss of respect for early human life with artificial reproduction, donor conception, embryo freezing, pre-implantation genetic diagnosis, human cloning and human-animal hybrids. 1.7 million embryos have been discarded up to 2012 and in the course of IVF 840,000 embryos currently frozen.¹⁶⁰ “The moral justification for these techniques come from the same intellectual stable as those that support contraception.”¹⁶¹ The logic that the most vulnerable stage of human life should be given most protection has been

turned on its head.¹⁶² The widespread loss of respect for vulnerable life at its earliest stages has been accompanied by and contributed to a loss of respect for vulnerable life at all stages of life exemplified by poor care of the elderly, the disabled and euthanasia. All of these constitute what John Paul II has called “The Culture of Death”.¹⁶³ The anthropological argument supporting contraception that distinguishes the “person” from the body, is central to the Culture of Death.¹⁶⁴

¹⁵⁶ Phillips M. (1999) *The Sex-change society. Feminized Britain and the Neutered Male*. Profile Books, London. p.187.

¹⁵⁷ Phillips M. (1999) *Ibid*. p16.

¹⁵⁸ Morgan P. (2014) *The Marriage Files*. Wilberforce Publications, London. p 60.

¹⁵⁹ Phillips M. (1999) *Ibid*. p189.

¹⁶⁰ Telegraph (2012) 31st December.

¹⁶¹ Laing JA (2012) The Background and Consequences of the Reproductive Revolution. *Catholic Medical Quarterly*, 62: 24-30.

¹⁶² Pullicino P. (2004) Ethics of embryonic stem cells. *New England Journal of Medicine*;351:1688.

¹⁶³ EV 28

¹⁶⁴ Grisez G. (1977) “Dualism and the New Morality” *Atti del congresso internazionale Tommaso d’Aquino nel suo settimo centenario*, vol 5. L’agire morale. Edizione Domenicanae Italiane, Napoli. p. 325.

6. ORAL CONTRACEPTIVES AND SOCIETY'S CONCEPT OF AUTONOMY.

The subjugation of the intellect to the will by the late mediaeval Oxford Philosophers meant that by their reckoning, the will was not guided by alternatives set by the intellect. Because the will was totally free it did not automatically seek what is good. Beneath the drive to free will lay the human will to self-affirmation, and an assertion of a radical difference between itself and all else that exists, even God.¹⁶⁵

Individual freedom has come to mean that humans may validly make choices between opposites, solely based on their will. Individual freedom (or "Freedom of Indifference") started to invade society at the time of the Enlightenment, and has continued to make inroads. Modern society has exalted freedom to the extent of making it an absolute, and then made itself the source of values.¹⁶⁶ Over the last half century, this radi-

¹⁶⁵ Pinckaers S. (1995) Sources of Christian Ethics. T and T Clark, Edinburgh. p338.

¹⁶⁶ VS 32

cal concept of the complete autonomy of an individual has progressively invaded areas like marriage, the concept of gender and respect for vulnerable life that were previously sacrosanct and contraception has been a major force in this invasion. Our age has a corrupt sense of freedom and the freedom to choose is valued above all other goods,¹⁶⁷ and so freedom has become synonymous with unfettered licence. Since *Humanae Vitae*, conscience has been degraded to a subjective certainty, and a mechanism of providing excuses for conduct,¹⁶⁸ which may in fact be morally culpable as well as morally mistaken. With the ascent of secularism and scientism, there has been unrelenting societal pressure to apply whatever is found to be achievable in science, particularly in manipulation of the embryo.¹⁶⁹ This has been

facilitated by a disregard for virtue as a context for moral reflection and of the importance of the passions in revealing true rather than spurious conscience.¹⁷⁰ We should not assume that what becomes possible should be used to do what we want ('I want, I can, I do') but ask the properly moral question: "ought I to do that?"¹⁷¹ The scientist who disregards any moral boundaries in pursuit of academic goals, bears a key responsibility for the consequences.¹⁷²

At the beginning of the twenty-first century there exists a widespread cultural decadence and a stark decline in personal morality in the formerly Christian West that appear to be undermining the "very moral foundation of a free society based on the rule of law".¹⁷³ John Paul II has stated that the danger with contraception is that it puts personal fulfilment at the centre of life's meaning and fosters a self-centeredness divorced from truth.¹⁷⁴ In this way contraception has encouraged the

¹⁶⁷ Smith JE (1991) Life Issues in a Pluralistic Culture. in May WE and Whitehead KD. (2001) (editors) The Battle for the Catholic Mind. St Augustine's Press, South Bend, Indiana. p.434

¹⁶⁸ Fisher A (2012) Catholic Bioethics for a New Millenium. Cambridge University Press. P. 61.

¹⁶⁹ Woodall GJ (2008) *Humanae Vitae* Forty Years on. A New Commentary. Family Publications. Oxford. p.19.

¹⁷⁰ Twomey DV. (2010) Moral Theology after *Humanae Vitae*. Four Courts Press, Portland. p. 87.

¹⁷¹ Tettamanzi D. (1987) Bioetica: nuove sfide per l'uomo. Piemme, Casale. p. 31.

¹⁷² Populorum Progressio, 1967, 34.

¹⁷³ May WE and Whitehead KD. (2001) The Battle for the Catholic Mind. St Augustine's Press, South Bend, Indiana. p. ix

¹⁷⁴ EV 19

encroachment of unfettered autonomy into sex, marriage and even gender definition and law.¹⁷⁵ Family Law progressively codified this move towards autonomy and freedom of indifference. The law holds that it should not impose any values except for equality, individual liberty and tolerance, so that Family Law no longer holds that the family serves society but that family serves to develop the individual fully.¹⁷⁶ The Supreme Court in the USA has recently shown that it has been affected too by disregarding the constitutional limits on its jurisdiction in a judgment against the California State Defence of Marriage Act.¹⁷⁷

7. EFFECTS OF ORAL CONTRACEPTIVE USE ON THE CHURCH.

a) Usage of oral contraceptives among Catholics

The widespread use of contraceptives among Catholics can be linked to the decline of the Catholic community.¹⁷⁸ The percentage of US Catholics who attend Mass once a week dropped from 47% in 1974 to 24% in 2012.^{179,180} In a poll on religion in Latin America, the Pew Center in the USA found that between 33% (in Guatemala) and 83% in Chile (66% median for Latin America) supported changes to the Church's teaching on contraception.¹⁸¹ Hispanic Catholics who attend church at least once a week are, however, less likely to support any changes. It has been said:

“The Church cannot move forward until it honestly confronts the paradox of *Humanae Vitae*: that most Catholics use modern contracep-

¹⁷⁵ Phillips M. (1999) *The Sex-change society. Feminized Britain and the Neutered Male*. Profile Books, London. p. 253.

¹⁷⁶ The unintentional effect was to realise the dream of the French revolutionaries: ‘that citizens would one day stand in direct relation to the state, without intermediaries’. Glandon, MA.(1989) *The Transformation of Family Law*. University of Chicago Press, Chicago.

¹⁷⁷ U.S. v. Windsor, 133 S. Ct. 2675 (2013)

¹⁷⁸ Rice CE. (2014) *Contraception and Persecution*. St Augustine's Press, Chicago. p.78.

¹⁷⁹ Rice CE (2014) *Ibid*. p. 97.

¹⁸⁰ Data from America is given as well as from the UK. What is going on in society and the Church in the USA appears in many ways identical to the position in the UK with regards OCs which is an global phenomenon . Much more data is available from the USA and supports the data we have from the UK.

¹⁸¹ Pew Research (2014) *Poll on Religion in Latin America*.

<http://www.pewforum.org/2014/11/13/religion-in-latin-america/> This Pew research poll showed that about 10% US persons raised Catholic left. Among Hispanics 56% of those that left Catholicism and did not join another religion say that they were dissatisfied with church teachings on birth control which were too strict.

tives, believe it is a moral choice to do so and consider themselves Catholics in good standing”¹⁸² con-

The popular appeal, that contraception must be right because the majority of Catholics in the West practise it, is a sociological fact, not a universal sense of the faithful (*sensus fidei*) with bishops in matters of faith and morals.¹⁸³ It is clear that the fruit of contraception is not from God.¹⁸⁴

b) Non-adherence to Church teaching on contraception and confession.

In 1973, 66.4 of married Catholic women of childbearing age used contraception.¹⁸⁵ This number had purportedly increased to 98% ever having used contraception by 2011,¹⁸⁶ although this statistic was criticized as being overstated.¹⁸⁷ Nearly 70% of Catholics use sterilization, the “pill” or an intrauterine device. Only 62% of Catholics that attend mass at least weekly go to confession at least once a year. 63% of those that attend mass once a month go to confession less than once a year or never.¹⁸⁸ Use of contraception, may well have been a major factor in the drop in the numbers of Catholics going to confession.¹⁸⁹

Catholic Baptism and Marriage have decreased progressively and started to fall from a peak in 1964, just after contraceptives were released. Baptisms are now 50% as frequent in 2010 than in 1964. Reception into the Church are a third of those in 1959. The figures “show unambiguously that something went seriously wrong in the Church in Eng-

¹⁸² Catholics for Choice (2008) Truth and Consequence: A Look behind the Vatican’s Ban on Contraception. Catholics for Choice. Washington DC. p. 18.

¹⁸³ “I write these words after having been told by a priest that the sense of the faithful means that if the majority of Catholics refuse to accept the teachings of a papal document like *Humanae Vitae*, the teaching of the document will eventually have to be changed”: Olsen GW *Transcendental Truth and Cultural Relativism* (1979) in May WE and Whitehead KD. (2001) *The Battle for the Catholic Mind*. St Augustine’s Press, South Bend, Indiana. p143.

¹⁸⁴ Austriaco, NPG. (2011) *Biomedicine and Beatitude*. Catholic University of America Press. Washington. p. 89.

¹⁸⁵ NSFG Survey. DHEW Publication PHS 79-1978.

¹⁸⁶ Reuters Life (2011) National Survey of Family Growth 2006-2008. April 14th.

¹⁸⁷ Kessler G. (2012) The claim that 98 percent of Catholic women use contraception: a media foul. Washington Post. February 17th.

¹⁸⁸ Zuhlsdorf J. (2010) Some Catholic Stats and surprises. <http://wdtprs.com/blog/2010/01/some-catholic-stats-and-surprises-fr-z-rants/>

¹⁸⁹ Shaw R. (2011) Catholic Lane. Contraception: The reason Catholics have abandoned confession. March 24th.

land and Wales in the 1960s and 1970s.”¹⁹⁰ Although it was speculated that Vatican II was the cause, this drop also coincides with the introduction of contraception.¹⁹¹

c) Increase in autonomy in relation to obedience to the Magisterium.

Humanae Vitae was promulgated at a time of increasing confusion and “private judgment” on the part of Catholics. Paul VI had however clearly previously reaffirmed the duty of the Christian faithful to follow the doctrine of the Church in the formation of their consciences.¹⁹² Under the guise of being “in the spirit of Vatican II” many modern secular ideas were embraced particularly by Catholic intellectuals but how this happened is unclear.¹⁹³ The “contraceptive issue” is not a single issue but a “mixed bag” of many Catholic issues that were the subject of fierce attack before, during and after Vatican Council II. Although confrontations seemed to focus on the “pill”, the fundamental controversy was over more basic questions: What is the law of God? What is the will of Christ? Who says so and with what authority?¹⁹⁴ The Catholic faithful learned “that virtually everything in the Church was questionable: doctrine, morals, the priesthood, the episcopate, the lot”. It was often suggested that it was an exercise in maturity to decide for yourself, which doctrines to follow.¹⁹⁵ Theologians for the first time ever ques-

¹⁹⁰ Shaw J. (2011) Latin Mass Society quoted in Catholic Herald. May 17th.

¹⁹¹ The drop off in Catholic belief has coincided with increased use of contraception. Since there was open defiance to the Church’s teaching on this matter the link appears likely. Communities in which the Church’s teaching against contraception is embraced are morally and spiritually robust.

¹⁹² “In the formation of their consciences, the Christian faithful ought carefully to attend to the sacred and certain doctrine of the Church. The Church is by the will of Christ the teacher of truth. It is her duty to give utterance to and authoritatively to teach that Truth which is Christ himself.” DH #14

¹⁹³ May WE, Whitehead KD (2001) *The Battle for the Catholic Mind*. St Augustine’s Press, South Bend, xvii.

¹⁹⁴ Kelly GS (2001) *The Bitter Pill the Catholic Community Swallowed*. (1978) in May WE and Whitehead KD (editors) *Ibid*, p.40.

¹⁹⁵ Rice CE. (2014) *Ibid*. p94.

tioned the fundamental principles of moral theology in their dissent to *Humanae Vitae*.¹⁹⁶ The logic of this dissent was very insidious and it soon started to be applied to dissent about other Church doctrines.¹⁹⁷ “Much of the logic of the dissent to *Humanae Vitae* does not rest on its specific teachings but rather the logic involves an ecclesiological shift and a revision of the very nature of sacred theology.”¹⁹⁸ For example, dissent from *Humanae Vitae* and *Persona Humana*¹⁹⁹ leads to a rejection of *Humani Generis*²⁰⁰ and a distortion of *Dignitatis Humanae*.²⁰¹

d) Effects on clergy

Shortly after it came out, a statement against *Humanae Vitae* was issued by over 600 Catholic theologians, canonists and scholars, including many priests.²⁰² This statement gained widespread media publicity. Ordinations in the US peaked in 1965 at 994 and then progressively fell to a low in 2000 of 442, a drop of 56%. In Britain the drop was even worse, starting from a peak of 233 ordinations in 1965, just after contraceptives were marketed, to a low of 16 in 2011.²⁰³ There are strong indications that contraceptives were a major factor both in the reduction of clergy and in the effect on the sacraments. The fact that couples had smaller families meant fewer men available to become priests. Secondly, parents who practised contraception (and had fewer children) were biased against recommending religious life to their children as they were at odds with the Church teachings.²⁰⁴ It has been reported that most priests in the UK oppose the teaching of the Magisterium of the

¹⁹⁶ Twomey DV. (2010) *Moral Theology after Humanae Vitae*. Four Courts Press, Portland. p. 67.

¹⁹⁷ Smith WB (1978) *Catholic Theology, Morality and Conscience* in May WE and Whitehead KD. (2001) *Ibid* p.37.

¹⁹⁸ “The decade of dissent first fuelled by the rejection of *Humanae Vitae* could not be contained or limited to dissent on abortion, sterilization and artificial contraception (HV#14) Smith WB (1978) *Catholic Theology, Morality and Conscience*. in May WE and Whitehead KD. (2001) *The Battle for the Catholic Mind*. St Augustine’s Press, South Bend. p.37.

¹⁹⁹ Congregation for the Doctrine of the Faith, *Persona Humana* (December 29, 1975)

²⁰⁰ Pope Pius XII *Humani Generis* (August 12, 1950)

²⁰¹ Vatican Council II, *Dignitatis Humanae* (December 7, 1965)

²⁰² May WE, Whitehead KD (2001) *Ibid*. xviii

²⁰³ Catholic Herald, (2013) New figures show stark decline in Catholic baptisms, ordinations and marriages. 17th May.

²⁰⁴ Bean D. (2010) Contraception caused the priest shortage. *National Catholic Register*, March 5th.

Catholic Church on contraception,²⁰⁵ and priests in general have shied away from preaching about contraception apart from a few exceptions.²⁰⁶ The Vatican did not require priests who had dissented publicly to retract publicly: something known as the Truce of 1968.²⁰⁷ Bishops also have not spoken out about contraception. The Church's sex abuse scandal has made it difficult for bishops or priests to have any credibility in talking about chastity and sexual morality.²⁰⁸

²⁰⁵ Loudon S. (2003) *Naked Parish Priest: A Survey among Roman Catholic Parish Clergy in England and Wales*. Bloomsbury, London.

²⁰⁶ Buckley JC. Contraception: A Challenge to Catholic Preaching at <http://www.national-coalition.org/marriage/contrace.html>

²⁰⁷ In the USA Cardinal O'Boyle penalized nineteen priests for their public dissent from HV but three years later the Vatican ordered the penalties lifted. Rice CE. (2014) *Contraception and Persecution*. St Augustine's Press, Chicago.p. 93.

²⁰⁸ Rice CE. (2014) *Contraception and Persecution*. St Augustine's Press, Chicago. p91.

8. CONCLUSION.

a) Pope Paul's prediction of many of the problems and how these have been fulfilled.

Some of the problems noted above can be directly related to the increased use of contraceptives since *Humanae Vitae*, while others have a probable link which cannot be definitively proven. A statistical association between contraceptive use and increase in divorce has been established. Most of the family-related social problems mentioned above relate to divorce and therefore have a strong indirect link to the "pill". Contraception has also been statistically linked to psychological and neurobiological changes in women showing that the effects of the "pill" are not restricted to anovulation but multiple brain pathways are altered. The cause of the increase in divorce has not been researched sufficiently to reach firm conclusions, but must in some way be caused by an over-emphasis on autonomy and an undermining of the stable marital relationship by an alteration of the subtle balance between man and woman in marriage. Other problems mentioned above including an increase in "homosexualization" of the culture, are unproven but highly plausible. The negative effects on the Church are again little researched, but given the open rejection of Church teaching on *Humanae Vitae*, the link is hard to dispute. The current use by governments of contraceptive programmes to control the population for economic reasons is one of the strongest confirmations of the prophetic voice of Paul VI.

It is clear that Pope Paul's predictions have been amply fulfilled and the effect of contraceptives has been even much more far reaching than he envisaged. Contraceptives have greatly damaged marriage and the family and have been deeply damaging to children. They have altered the natural balance between man and woman ordained by God. Contraceptives have led to a total disrespect for nascent life and have paved the

way for euthanasia and the Culture of Death. Their negative effects have so penetrated society that they have helped to unleash an idolatry of the supremacy

of autonomy in decision making. This has significantly and principally affected women, but has also significantly affected men.

b) The Split in the Church after *Humanae Vitae*.

Catholic faithful are obliged to give religious assent of soul to the sources of Sacred Scripture, Sacred Tradition and Magisterium. Never before *Humanae Vitae* had there had been such wide public opposition by Catholic academics to an authoritative papal teaching. In the Church, an alternative morality appears to have established itself amongst the faithful and even to some extent within the Church hierarchy. The rejection of these truths that had been so bravely proclaimed by Paul VI was and continues to be a catastrophe for the Church and for the world.²⁰⁹

Contraception has profoundly altered society, affecting almost every aspect from psychological, social, moral and legal and even extending to sacred theology. There is also no let-up in sight with over 600 million women on the “pill” and increasing numbers of women in developing countries contracepting. The “pill’s” effect on autonomy has totally changed the character of male/female relationships and has caused it to seem not only allowable but necessary to question Church teaching. The American social scientist Steve Mosher said in 2014, “The fruits of contraception were undeniably bad. Contraception was merely the ante-room to an abyss of horrors the depths of which we still have not completely plumbed.”²¹⁰

²⁰⁹ May WE and Whitehead KD. (2001) *The Battle for the Catholic Mind*. St Augustine’s Press, South Bend, Indiana. xvii.

²¹⁰ Mosher SW. in: Rice CE. (2014) *Ibid.* p.xiv.

Bibliography

Fathers of the Church

St. Augustine, De Bono Coniugali

Documents of the Magisterium

Leo XIII (1880) Arcanum Divinae Sapientiae

Pius XI (1930) Casti Connubii

Pius XII (1950) Humani Generis

Pio XII. (1951) Discorso di Sua Santità Pio PP. XII alle partecipanti
Congresso della Unione Cattolica Italiana Ostetriche.

Paul VI (1965) Dignitatis Humanae (Vatican II)

Paul VI (1967) Populorum Progressio.

Paul VI (1968) Humanae Vitae.

John Paul II (1981) Familiaris Consortio

John Paul II. (1987) Sollicitudo Rei Socialis

John Paul II (1993) Veritatis Splendor

John Paul II (1995) Evangelium Vitae

Sacred Congregation for Catholic Education.

(2005) Instruction Concerning the Criteria for the Discernment of Vocations with regard to Persons with Homosexual Tendencies in view of their Admission to the Seminary and to Holy Orders.

(1983) Educational Guidance in Human Love.

Catechism of the Catholic Church (2nd edition), (1994) Libreria Editrice Vaticana.

Congregation of the Doctrine of the Faith.

(1975) Persona Humana. Declaration on Certain Questions Concerning Sexual Ethics,

(2003) Considerations regarding proposals to Give Legal Recognition to Unions Between Homosexual Persons. No 9.

(2010) Note on the banalization of sexuality. Regarding certain interpretations of "Light of the World"

Books, Commentaries and other Documents

1. *Humanae Vitae*

- Bristow P (2013) *Christian Ethics and the Human Person. Truth and Relativism in Contemporary Moral Theology*. Gracewing, Leominster.
- Paupert J-M (ed) (1967) *Contrôle des naissance et théologie: le dossier de Rome*. Seuil, Paris.
- Smith JE (1991) *Humanae Vitae: A generation later*. Catholic University of America Press, Washington DC.
- Wojtla K (1981) *Love and Responsibility*. Ignatius Press. San Francisco.
- Woodall GJ (1996) *The principle of the indissoluble link between the dimensions of unity and fruitfulness in conjugal love : a hermeneutical investigation of its theological basis and of its normative significance : Excerpta ex Dissertatione ad Doctorum in Facultate Theologiae Pontificiae Universatis Gregorianae*. Roma.
- Woodall GJ (2008) *Humanae Vitae forty years on. A New Commentary*. Family Publications. Oxford.

2. Oral Contraceptives

- Noonan JTJr. (1986) *Contraception. A History of its treatment by the Catholic Theologians and Canonists*. Harvard University Press. Cambridge, Mass.
- Seaman B. (1969) *The Doctor's Case against the Pill*. PH Wyden, New York.
- Seaman B. (2003) *The greatest experiment ever performed on women. Exploding the estrogen myth*. Hyperion.
- Watkins ES (1998) *On the Pill. A Social History of Oral Contraceptives 1950-1970*. Johns Hopkins University Press. Baltimore.

3. Decision to take the “pill”

- Grigg-Spall H. (2013) *Sweetening the Pill or how we got hooked on hormonal birth control*. Zero Books, Alresford.
- Grisez GG (1964) *Contraception and the Natural Law*. The Bruce Publishing Company, Milwaukee.

May WE. (2008) *Catholic Bioethics and the Gift of Human Life*. Our Sunday Visitor, Huntington.

- Malthus T. (1970) *An Essay on the Principle of Population*. Penguin. London.
- Phillips M. (1999) *The Sex-change society. Feminized Britain and the Neutered Male*. Profile Books, London.
- Riches V. (1989) Who cares for children? the implications of providing birth control for under-sixteens. Family & Youth Concerns, Milton Keynes.
- Watkins ES (1998) *On the Pill. A Social History of Oral Contraceptives 1950-1970*. Johns Hopkins University Press. Baltimore.
- 4. Effects of Oral Contraceptives on the marital act and marriage**
- Anscombe GEM. (1977) *Contraception and Chastity*. CTS, London.
- Doherty P. (1983) *Is the Contraceptive Experiment Over?* Faith Pamphlets, Wallington
- Giovanni Paulo II (1985) *Uomo e donna lo creo: catechesi sull'amore umano*. Citta Nuova, Roma, Libreria Editrice Vaticana,
- John Paul II. (1981) *Original Unity of Man and Woman*. St Paul Editions, Boston.
- John Paul II (1997) *Catechesis on Human Love, The Theology of the Body: Human Love in the Divine Plan*. Pauline, Boston.
- Lawler R. (1998) *Catholic Sexual Ethics*. One Sunday Visitor Inc. Huntington, Indiana
- Macedo S. (2003) Homosexuality and the Conservative Mind in (eds)Wardle LD et al. *Marriage and Same Sex Unions. A Debate*. Praeger.
- Rice CE. (2014) *Contraception and Persecution*. St Augustine's Press, Chicago.
- Smith JE (1991) *Humanae Vitae: A generation later*. Catholic University of America Press, Washington DC.
- Wojtla K (1981) *Love and Responsibility*. Ignatius Press. San Francisco.

5. Effects of Oral Contraceptives on Society

- Eastman, Crystal. (1978) "Birth Control in the Feminist Program." In Blanche Wiesen Cook: *Crystal Eastman on Women and Revolution*. Oxford University Press.

- Ehrenreich B, Hess E, Jacobs G. (1986) *Re-making Love. The feminization of sex*. Anchor Books.
- Farmer A. (2002) *Priests and Prophets. The Hidden Face of the Birth Control Movement*. The Saint Austin Press. London.
- Grigg-Spall H. (2013) *Sweetening the Pill or how we got hooked on hormonal birth control*. Zero Books, Alresford.
- Grisez G. (1977) "Dualism and the New Morality" *Atti del congresso internazionale Tommaso d'Aquino nel suo settimo centenario, vol 5. L'agire morale*. Edizione Domenicanae Italiane, Napoli.
- Malinowski B. (1970) *Sex and Repression in Savage Society*. Routledge and Kegan Paul, London.
- Morgan P. (2014) *The Marriage Files*. Wilberforce Publications, London.
- Phillips M. (1999) *The Sex-change society. Feminized Britain and the Neutered Male*. Profile Books, London.
- Riches V. (1989) *Who Cares for Children?* Nightingale Press, Royston
- Stein E (1959) *Essays on Women*. ICS Publications. Washington.
- Watkins ES (1998) *On the Pill. A Social History of Oral Contraceptives 1950-1970*. Johns Hopkins University Press. Baltimore
- Wojtla K (1981) *Love and Responsibility*. Ignatius Press. San Francisco.
- 6. Oral contraceptives and society's concept of autonomy.**
- Fisher A (2012) *Catholic Bioethics for a New Millenium*. Cambridge University Press.
- Glandon, MA.(1989) *The Transformation of Family Law*. University of Chicago Press, Chicago.
- May WE and Whitehead KD. (2001) *The Battle for the Catholic Mind*. St Augustine's Press, South Bend, Indiana.
- Smith JE (1991) Life Issues in a Pluralistic Culture. in May WE and Whitehead KD. (2001) (editors) *The Battle for the Catholic Mind*. St Augustine's Press, South Bend, Indiana.
- Pinckears, S. (1995) *Sources of Christian Ethics*. T and T Clark, Edinburgh.
- Tettamanzi D. (1987) *Bioetica: nuove sfide per l'uomo*. Piemme, Casale.

7. Effects of Oral Contraceptives on the Church

Austriaco, NPG. (2011) *Biomedicine and Beatitude*. Catholic University of America Press. Washington.

Catholics for Choice (2008) *Truth and Consequence: A Look behind the Vatican's Ban on Contraception*. Catholics for Choice. Washington DC.

Kelly GS (2001) *The Bitter Pill the Catholic Community Swallowed*. (1978) in May WE and Whitehead KD (editors) *The Battle for the Catholic Mind*. St Augustine's Press, South Bend, Indiana.

Louden S, Francis LJ. (2003) *Naked Parish Priest: A Survey among Roman Catholic Parish Clergy in England and Wales*. Bloomsbury, London.

May WE and Whitehead KD. (2001) *The Battle for the Catholic Mind*. St Augustine's Press, South Bend, Indiana.

Rice CE. (2014) *Contraception and Persecution*. St Augustine's Press, Chicago

Twomey DV. (2010) *Moral Theology after Humanae Vitae*. Four Courts Press, Portland.

Figures source: Taken from: Contraception Correlations from <http://www.thatmarriedcouple.com/2013/02/contraception-correlations.html>

FIGURES.

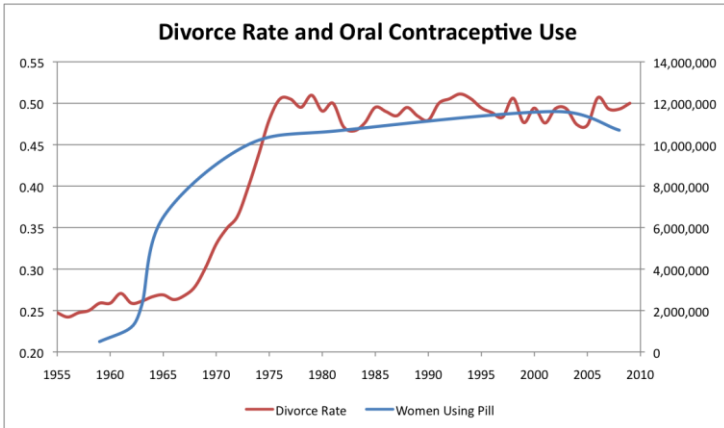


Figure 1. Divorce Rate and Oral Contraceptive Use.

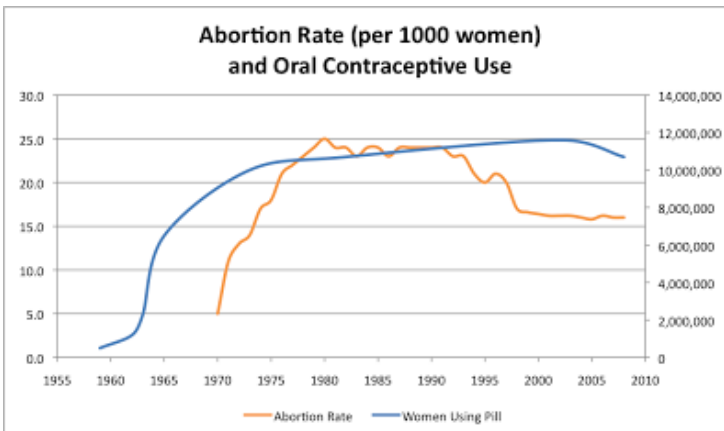


Figure 2. Abortion Rate and Oral Contraceptive Use.

Maryvale Institute,
Higher Institute of Religious Sciences
Affiliated to the
Ecclesiastical Theology Faculty
Notre Dame De Paris

2015
