

On Women's Health and Women's Power: A Feminist Appraisal of *Humanae Vitae*

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Abstract

Catholic feminism has flourished in the decades following *Humanae Vitae*. Still, Catholic women do not speak with one voice on the issue of birth control. I argue that *Humanae Vitae* has had far-reaching damaging effects on many Catholic women and their spirituality, moral agency, and fertility. Nevertheless, any feminist critique of the document must also take seriously the experiences of Catholic women who express that practicing natural family planning has brought empowerment, good health, and increased spousal intimacy. Further ecclesial discernment is needed, with special attention to women's leadership on this issue.

Keywords

birth control, conscience, condoms, contraception, family, feminism, *Humanae Vitae*, marriage, #metoo, natural family planning, sexual violence

When *Humanae Vitae* was promulgated in 1968, Pope Paul VI acknowledged that important changes were taking place in society and that those changes necessitated a close reexamination of church teachings. Among the changes highlighted, the pope noted population growth and hardship among the poor in developing countries, changes in working and housing conditions that made it more difficult for parents to support a large family, “a new understanding of the dignity of woman

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and her place in society,” and the “value of conjugal love in marriage.”¹ The recognition of these sweeping changes was an important step in the right direction; but as many others have documented, *Humanae Vitae* did not reform church teachings on family planning in light of the sweeping changes in society that Pope Paul described. His “new understanding of the dignity of woman” did not seem to challenge the pope’s understanding of a woman’s place in the church, workplace, or family life, nor did it lead the pope to initiate significant reforms of the church’s ecclesial structure to enable women to participate more fully in the crafting of church teachings.

Fifty years later, the women’s movement has had considerable positive effects in culture, law, and church. But whether one takes a domestic or global perspective, much remains to be accomplished. Gender inequality denies women their voices, devalues their work, and perpetuates gender socialization that leads some men to feel entitled to women’s bodies. In the developed world, gender pay gaps persist, and women of color face an even wider gap. Women are substantially underrepresented in leadership roles in all sectors. Whether in corporate boardrooms, government agencies, or diocesan deaneries, women around the world continue to find themselves excluded from conversations that have direct impacts on their lives and well-being. Despite important progress in recent years, in no country have women achieved economic equality with men, and women are still more likely than men to live in poverty. The United Nations Population Fund (UNFPA) reports that persistent gaps in income inequality, combined with gender inequalities, mean that many women and girls remain caught in vicious cycles of poverty, diminished capabilities, unfulfilled human rights, and unrealized potential—especially in developing countries, where gaps are widest.²

While recent popes have made significant steps forward in advancing church teaching on climate change,³ globalization,⁴ labor justice,⁵ and migration⁶—church teachings on birth control have not received in-depth treatment or reevaluation in any open, dialogical format, not even in the synodal process for the Synod on the Family.⁷

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1. Paul VI, *Humanae Vitae* (July 25, 1968), 2, https://w2.vatican.va/content/paul-vi/en/encyclicals/documents/hf_p-vi_enc_25071968_humanae-vitae.html (hereafter cited as *HV*).
 2. United Nations Population Fund (UNFPA), *Worlds Apart: Reproductive Health and Rights in an Age of Inequality* (New York: UNFPA, 2017), 5–6, <https://doi.org/10.18356/b19523c6-en>.
 3. Francis, *Laudato SI'* (May 24, 2015), http://w2.vatican.va/content/francesco/en/encyclicals/documents/papa-francesco_20150524_enciclica-laudato-si.html. (hereafter cited as *LS*).
 4. Benedict XVI, *Caritas in Veritate* (June 29, 2009), http://w2.vatican.va/content/benedict-xvi/en/encyclicals/documents/hf_ben-xvi_enc_20090629_caritas-in-veritate.html.
 5. John Paul II, *Laborem Exercens* (September 14, 1981), http://w2.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_14091981_laborem-exercens.html.
 6. Francis, Messages for World Days of Migrants and Refugees, <http://w2.vatican.va/content/francesco/en/messages/migration.index.html>; Benedict XVI, Messages for World Migration Days, <http://w2.vatican.va/content/benedict-xvi/en/messages/migration.index.html>.
 7. For documents on the Synod, see http://www.vatican.va/roman_curia/synod/documents/rc_synod_doc_20131105_iii-assemblea-sinodo-vescovi_en.html.

Humanae Vitae has been restated and its norms applied anew in every decade since 1968, even in cases that could not have been foreseen by the papal commission more than fifty years ago, including the AIDS crisis⁸ and the perceived scandal of Catholic universities providing contraceptive coverage in their healthcare plans for employees.⁹ Meanwhile, a majority of Catholics continue to voice disagreement with magisterial teachings on contraception,¹⁰ leading some scholars to declare that *Humanae Vitae* is a teaching that has not been “received” by the faithful.¹¹

The main purpose of *Humanae Vitae* was to examine and pronounce on acceptable methods of birth regulation set within the context of a sacramental view of marriage. As scholars have debated the claims and impact of the encyclical during the last fifty years, a range of moral and ecclesial themes have surfaced. *Humanae Vitae* is about married life, sexual norms, the competency of the magisterium to teach, the contested nature of conscience, natural law methodology, and the church’s response to societal changes more broadly. What I will argue here is that *Humanae Vitae* has huge implications for women’s health and women’s power. The thorny nature of these interconnected issues in a patriarchal ecclesial context makes examination of the issue of birth control even more vexing, while at the same time reinforcing the need for a clear feminist method.¹²

In this article I use the term “feminist” to refer to a person who believes in the equality of all human persons and who seeks to resist patriarchy by creating social attitudes, policies, and ecclesial structures that empower women and men in egalitarian and

8. See Aline H. Kalbian, “Sex: HIV/AIDS, Condoms, and Sexual Morality,” in *Sex, Violence, and Justice: Contraception and the Catholic Church* (Washington, DC: Georgetown University Press, 2014), 60–94.

9. John I. Jenkins, CSC, “Letter on Health Care Coverage” (February 7, 2018), <https://president.nd.edu/writings-addresses/2018-writings/letter-on-health-care-coverage/>.

10. For example, a YouGov survey from February 13–18, 2018, with a margin of error of +/-3.6 indicated 67% of respondents reportedly disagree with the Vatican’s ban on birth control. See “2018 National Survey of Catholic in the United States,” *Conscience* 39:1 (2018), 20–21. Lawler and Salzman describe findings of a Univision study that indicates 85% of Catholics worldwide use a form of contraception prohibited by Catholic teaching. Michael G. Lawler and Todd A. Salzman, “The End of the Affair? *Humanae Vitae* at 50,” *National Catholic Reporter* (May 18–31, 2018), 11–14 at 14.

11. Lawler and Salzman, “The End of the Affair?” 14. See also Joseph A. Komonchak, “*Humanae Vitae* and Its Reception: Ecclesiological Reflections,” *Theological Studies* 39 (1978): 221–57, <https://doi.org/10.1177/004056397803900201>.

12. I write with sensitivity to my power and privilege on this issue. As a tenured lay faculty member writing in a US context, I have more freedom to speak and write on contested issues of sexuality and the church than many women theologians in other parts of the world and in other kinds of positions. But I also know that there may be risks to writing on this issue. Rosemary Radford Ruether and Tina Beattie have both been “uninvited” from my university because of the positions they have taken publicly as Catholic feminists on issues related to women’s reproductive health. When I speak and write about women’s reproductive health in Catholic settings, I consider the risks and wonder if I will have fewer opportunities to participate in my local church as a result of my publications.

mutual relationality. To be feminist is to be part of an ongoing, messy struggle. To be a feminist-identifying woman in the Catholic Church is to defend one's human dignity in the face of oppressive forces that constantly demean, belittle, and undermine one's sense of voice, agency, and power in a patriarchal ecclesial structure.

Under the wider umbrella of liberationist methods in Christian theology, Christian feminist methods seek to uncover sources of sexism in order to transform them. This method involves explicit attention to women's experiences of patriarchy, criticism of sexism within the Christian tradition, retrieval of empowering stories of women's agency within the tradition and of the liberating message of the gospel that continues to enliven Christian feminism today, and collaboratively developed strategies for transformative action to reconstruct a more just church and world.¹³ Analysis of power, language, and implications for those most marginalized are especially important areas of concern in feminist methodology. Adopting a "hermeneutics of suspicion" is necessary as a tool of both critical analysis and pastoral self-care for a woman working in a tradition dominated by male voices.¹⁴

A reexamination of the norms of *Humanae Vitae* is necessary in our own time for many reasons, first among them that Catholic theologians continue to disagree about whether contraception contributes to, or violates, good healthcare for women. By contraception, I mean any action undertaken to prevent conception or fertilization.¹⁵ Contraception can include hormonal methods (pill), Long-acting reversible contraceptives (LARC) such as devices (IUD) and implants, prophylactic methods (condoms), and natural family planning (NFP) or fertility awareness methods (FAM) when used with the intent of preventing pregnancy. Should all women have access to the full range of contraceptive methods as part of basic healthcare rights for women? Catholic women do not have a single, simple answer to this question. But as we will see, the major issues that arise with reference to *Humanae Vitae* for women today are the interconnected issues of women's health and women's power.

In order to demonstrate the range of perspectives on this complex issue, I will first highlight the wisdom of women who find that NFP fosters good health and empowerment for women, in alignment with the norms of *Humanae Vitae*. When these women reject hormonal birth control methods, they do so precisely because of feminist commitments to women's bodily health and women's power as sexual subjects (and not objects of male desire or servants of male interests). But as we will see, critics of this

13. Anne M. Clifford, *Introducing Feminist Theology* (Maryknoll: Orbis, 2001), 35.

14. Elisabeth Shussler Fiorenza, *Bread Not Stone: The Challenge of Feminist Biblical Interpretation* (Boston: Beacon, 1984), 15–20.

15. Vincent Genovesi, *In Pursuit of Love: Catholic Morality and Human Sexuality*, 2nd ed. (Collegeville: Liturgical, 1996), 184. Genovesi and other Catholic moralists have long held that it is important to make a distinction between contraception and abortion. The Centers for Disease Control and Prevention publish recommendations for the use of contraceptives for patients with particular medical conditions, which includes a figure comparing effectiveness of family planning methods. See Kathryn M. Curtis et al., "U.S. Medical Eligibility Criteria for Contraceptive Use, 2016," *Morbidity and Mortality Weekly Report* 65.3: 1–104, <https://doi.org/10.15585/mmwr.rr6503a1>.

position will argue that contraceptive methods beyond NFP foster female bodily health and empowerment. Teasing out the overlapping concerns in these women's arguments will prove helpful in charting a way forward that is sensitive to the sheer diversity of women's experiences around the globe.

Natural Family Planning as Healthy and Empowering

If feminism is about empowering women, then these women argue that the best way to empower women is to educate them to understand how their bodies work so they can make responsible decisions about when to engage in sexual activity or when to abstain from sexual activity. This position is aligned with the norms of NFP as promoted in *Humanae Vitae*. Many women have found that practicing NFP is empowering. A woman learns to interpret her signs of fertility and can grow in self-awareness and self-love as she comes to appreciate her own dignity. When a woman is valued and treated with respect in a relationship, and her body is cared for by her partner, this deepens her own sense of inherent dignity and reaffirms her understanding of herself as created in the image and likeness of God.

While a variety of methods exist, the practice of NFP in most methods require that a woman record her daily waking temperature, daily patterns of cervical fluid (from menstrual flow through "dry" days to "sticky" patterns, "wet/slippery" patterns, and "dry" days), cervical position, and intercourse days. Most charts also offer sections for recording life events, stressors, illnesses, and medications that could impact the way that a woman interprets her signs of fertility.¹⁶ Additional tests could be administered at home for ovulation prediction and/or pregnancy confirmation. While NFP charting used to require pencil and paper at one's bedside, many women now prefer to use smartphone applications to record their fertility data.¹⁷ As a woman reviews her cycle

16. Irregular sleep patterns can make it difficult to interpret waking temperature; many different medications (including medications taken for pain, antihistamines, diuretics, and sleep aids) can change patterns of cervical fluid; stress can delay ovulation or lead to anovulation. It is important for couples who plan to use NFP/FAM to study the method and seek advice from trained professionals. Women who are breastfeeding or in premenopause may struggle with additional challenges, as it is common for cycles to be irregular during these times. Various models exist to teach and promote NFP and each have different points of emphasis. For more on the Creighton Model, see Pope Paul VI Institute for the Study of Human Reproduction, "Creighton Model Fertility Care System," <https://www.creightonmodel.com/>. For information on the Marquette Model, which encourages urine testing, see Marquette University School of Nursing Institute for Natural Family Planning, "Efficacy of the Marquette Model," <https://nfp.marquette.edu/efficacy.php>. The Couple to Couple League promotes the Sympto-Thermal method. Their website contains more information. Couple to Couple League, <https://ccli.org/>. The Billings Ovulation Method Association website contains information about their method, which focuses on analysis of cervical mucus patterns. See Billings Ovulation Method Association, "About the Billings Ovulation Method," <https://www.boma-usa.org/about.html>.

17. Popular examples of smartphone applications for charting include OvaGraph (<http://www.ovagraph.com/>) and Lily Fertility (<http://whimsicallily.com/lily/en/>). The Fertility

chart, she interprets the data in order to determine whether intercourse is likely to lead to pregnancy or not; she and her partner thus decide whether or not it would be responsible to engage in sexual activity.

Many women have been drawn to NFP because it is free of the chemicals associated with hormonal methods of birth control. They see this as part of a well-rounded approach to a healthy lifestyle. The Couple to Couple League promotes NFP in this way:

Practicing NFP is 100% natural—there are no drugs, chemicals or devices involved, which is one reason many today find it to be a positive and refreshing alternative to contraceptive methods. NFP honors our dignity as persons by respecting the natural rhythms and functions of the body. It is very common to hear couples who use NFP speak of an increased awe and respect for femininity and their mutual fertility, and a greater sense of empowerment through self-knowledge.¹⁸

This sense of empowerment through greater awareness of and appreciation of one's body is a common theme that emerges in NFP testimonials.¹⁹ Feminists who advocate for natural, female-controlled birth control methods envision a world in which girls learn about the sacred power of female fertility in a way that fosters self-esteem and connection with God and nature. After criticizing the medical community for perpetuating offensive terms to describe female fertility that scare women and drive a wedge between them and their medical providers (e.g. "luteal phase defect, hostile cervical mucus, incompetent cervix, inadequate pelvis, senile gravida, and habitual aborter") Toni Weschler offers this vision:

Imagine growing up being told that your body is a marvel of biological beauty that will orchestrate amazing changes every cycle. Rather than thinking that you keep producing infectious discharges, you'd know to identify healthy cervical secretions as a reflection of the remarkable hormonal system working within. Imagine going to the doctor and feeling knowledgeable rather than vulnerable. And instead of succumbing to douche commercials that diminish self-confidence by implying that women are dirty, you could simply disregard them, knowing that just showering with soap and water will keep you clean and feminine. What if teenagers acquired practical knowledge about their cycles and fertility even before the first day they menstruated? Not only would it increase their self-assurance, but it would

Awareness Method (FAM) for which Toni Weschler is an advocate (author of *Taking Charge of Your Fertility*) is not exactly the same as NFP, since NFP users who intend to avoid pregnancy will abstain during fertile times, while FAM users may choose to use a barrier method like a condom during fertile times. But both NFP and FAM users follow the same guidelines for charting and interpreting the signs of female fertility.

18. Couple to Couple League, "What is NFP?" <https://ccli.org/what-is-nfp/>.

19. For example, see testimonials from the United States Conference of Catholic Bishops NFP Website: "Couples' Stories," <http://www.usccb.org/issues-and-action/marriage-and-family/natural-family-planning/what-is-nfp/couples-stories/index.cfm>. Additional testimonials can be found on the Couple to Couple League website: <https://ccli.org/what-is-nfp/real-couples-real-stories/>.

enable them to identify both medical problems and normal biological occurrences, sparing them so much of the fear and confusion that comes with adolescence ... Imagine being able to utilize your body's own fertility signs to provide you with a completely natural, safe, and effective method of birth control that promotes shared responsibility and communication between you and your partner ... Knowledge is power.²⁰

Part of the problem that NFP/FAM advocates see is that few people are curious enough to spend time learning about human reproduction and the potential benefits of these empowering methods of family planning. They see high levels of contraceptive use as a desire for a quick fix or technical solution to a more complex problem of human responsibility. In this way, the practice of NFP can be likened to broader social movements around food justice and environmentalism that are suspicious of a consumerist mentality.

In this vein, some women reject hormonal contraceptives as part of a "green lifestyle" in order to respect the natural world and their place within it.²¹ And they find reassurance in the writings of Pope Francis, who has urged Catholics to adopt a posture of care and concern for the natural world in his 2015 encyclical *Laudato Si'* (On Care for Our Common Home). For Pope Francis, this mindset requires that Christians recognize human interdependence with other species and adopt an attitude of care and solidarity with the natural world and nonhuman species. The pope mourns that "the earth, our home, is beginning to look more and more like an immense pile of filth"²² and rejects what he calls the "throwaway culture" in which consumers care more about convenience than long-term cost to the planet and its inhabitants.²³ Pope Francis links environmental action and social justice as he encourages readers to adopt lifestyle

20. Toni Weschler, *Taking Charge of Your Fertility*, rev. ed. (New York: Harper Collins, 2006), 286–87. The effectiveness of NFP/FAM is contested and depends on many factors. The Couple to Couple League claims that the method is "99% effective" (<https://ccli.org/what-is-nfp/>), but critics argue that effectiveness with "typical use" is far lower. The Marquette Method efficacy rate for typical use is 89–90%, which means 10–12 pregnancies per 100 within a 12-month period for couples with typical use. Marquette University School of Nursing Institute for Natural Family Planning, "Efficacy of the Marquette Model," <https://nfp.marquette.edu/efficacy.php>. The Centers for Disease Control and Prevention (CDC) locates NFP/FAM among the "least effective" methods of contraception in their recommendations for medical providers. CDC, "Effectiveness of Contraceptive Methods," https://www.cdc.gov/reproductivehealth/contraception/unintendedpregnancy/pdf/Contraceptive_methods_508.pdf. See also Cristina Traina, "Papal Ideals, Marital Realities: One View from the Ground," in Patricia Beattie Jung with Joseph Andrew Coray, eds., *Sexual Diversity and Catholicism: Toward the Development of Moral Theology* (Collegeville, MN: Liturgical, 2001), 277. For more information, see the Red Tent Sisters blog: <http://www.redtentsisters.com/blog/how-effective-is-fertility-awareness-examining-the-research-on-natural-birth-control>.

21. Couple to Couple League, "Safe, Healthy, Green," <https://ccli.org/what-is-nfp/benefits/>.

22. *LS*, 21.

23. *LS*, 22.

choices that are responsible in terms of environmental impact as well as concern for the poor and those most often excluded.²⁴

The pope encourages readers to adopt practices in which nature is to be valued, treasured, and cared-for, not manipulated and controlled through technological means for monetary gain.²⁵ This vision aligns with NFP's vision of treasuring and caring for the female body, instead of manipulating and controlling it through technological means. Further, hormonal contraceptives have been shown to have damaging impacts on the natural world, including fish populations.²⁶ In *Laudato Si*, the pope insisted that "nature cannot be regarded as something separate from ourselves or as a mere setting in which we live. We are part of nature, included in it and thus in constant interaction with it."²⁷ Thus consumers of medicines need to be vigilant about avoiding negative impacts to the natural world that may come from their use of pharmaceuticals. As with all complex problems, there is not an easy solution to the environmental crisis; the pope encourages readers to seek "comprehensive solutions which consider the interactions within natural systems themselves and with social systems."²⁸ For many, this includes a rejection of hormonal contraception.

Some women reject hormonal contraceptives because they are suspicious of the claims of pharmaceutical companies, which are structured according to a profit motive. They see how profitable contraceptives are for pharmaceutical companies, and do not trust that these multinational corporations have women's health as their highest priority. In contrast to the cost of contraceptive medications, NFP/FAM is inexpensive. Angela Franks argues that the contraception industry encourages women to be at war with their bodies, saying that "contraception must be the only case in which a person takes a pill solely in order to thwart the natural purpose of a bodily system, all in the name of 'health.'"²⁹ Other women argue that the contraception industry unfairly burdens women over men. Toni Weschler asks,

24. *LS*, 14.

25. *LS*, 67–105.

26. Sophie Jamieson, "Fish Becoming Transgender," *The Telegraph* (July 2, 2017), <https://www.telegraph.co.uk/news/2017/07/02/fish-becoming-transgender-contraceptive-pill-chemicals-flushed/>; Darryl Fears, "Fish Don't Want Birth Control," *The Washington Post* (March 30, 2015), https://www.washingtonpost.com/news/speaking-of-science/wp/2015/03/30/fish-dont-want-birth-control-but-scientists-say-they-get-it-from-your-pill/?utm_term=.73de845ac267.

27. *LS*, 139.

28. *LS*, 139.

29. Angela Franks, "The Gift of Female Fertility: Church Teaching on Contraception," in *Women, Sex, and the Church: A Case for Catholic Teaching*, ed. Erika Bachiochi (Boston: Pauline, 2010), 97–119 at 103. Angela Franks does not identify as feminist. Neither does Mary Eberstadt, Janet E. Smith, Christopher West, Mary Shivanadan, authors of articles on the Couple to Couple League website, or the USCCB website. But their advocacy for NFP methods can still be articulated in terms that align with feminist methods, as I've tried to make clear.

Why is the vast majority of birth control designed for women to use even though it is men who are fertile every single day? Wouldn't it make more sense for birth control to be developed for the gender that is the most fertile? Given that women are fertile only a few days per cycle, it's ironic that they're the ones who risk the vast array of side effects and physical ramifications of birth control ... to protect themselves from a man, who produces millions of sperm per hour!³⁰

Angela Franks argues that "reproductive health" ought to refer to having a healthy, fertile, reproductive system, not the prevention of normal reproductive functioning.³¹

Finally, but perhaps most importantly, women who write in support of NFP highlight that it fosters growth in virtue and deeper marital intimacy. Angela Franks explains from her experience that "periodic abstinence heals and integrates one's desires."³² Citing low divorce rates among couples who practice NFP, Franks argues that "openness to life and spousal bonding do go hand in hand. In fact, the bonding is so powerful precisely because sex is meant to be total surrender to the other person, including surrender to the possible fruitfulness of one's mutual love. It is this openness to the future, to something greater than just 'us,' that actually makes sex so thrilling."³³ Franks here emphasizes the importance of self-mastery in the moral life, which is a point made also by Mary Shivanadan in her support for *Humanae Vitae*.³⁴ Julie Hanlon Rubio's research has documented that couples who practice NFP have long held that they achieve deeper intimacy in part because of the way that they must communicate about their fertility.³⁵ She argues, in her book *Family Ethics: Practices for Christians*, that "faithful sexual practice in marriage requires an ongoing, regular commitment to pursue the goods of vulnerability, self-sacrifice, self-love, and bodily belonging with one's spouse."³⁶ Rubio explains that couples who practice NFP "find peace in doing

30. Weschler, *Taking Charge of Your Fertility*, 11–12.

31. Franks argues that "reproductive health" should not include access to contraception or abortion because these are inherently unhealthy; rather, fertility is a good gift from God. See Franks, "The Gift of Female Fertility," 103.

32. Franks, "The Gift of Female Fertility," 115.

33. Angela Franks, "The Gift of Female Fertility," 116. For a critique of this use of divorce statistics in the argument against contraception, see Lawler and Salzman, "The End of the Affair?" 12.

34. Mary Shivanadan, "Natural Family Planning and the Theology of the Body," *National Catholic Bioethics Quarterly* 3 (2003): 25. See also Janet E. Smith, "Self-Gift: The Heart of *Humanae Vitae*," *National Catholic Bioethics Quarterly* 16 (2016): 449–74; Janet E. Smith, "Self-Giving and Self-Mastery: John Paul II's Interpretation of *Humanae Vitae*," in *Humanae Vitae: A Generation Later* (Washington, DC: Catholic University of America Press, 1991), 230–65.

35. Julie Hanlon Rubio, "Beyond the Liberal/Conservative Divide on Contraception: The Wisdom of Practitioners of Natural Family Planning and Artificial Birth Control," *Horizons* 32 (2005): 270–94 at 282, <https://doi.org/10.1017/S0360966900002553>.

36. Julie Hanlon Rubio, *Family Ethics: Practices for Christians* (Washington, DC: Georgetown University Press, 2010), 99.

what they believe God asks of them and take joy in nurturing neglected aspects of their relationship (both spiritual and emotional) when sex is not an option."³⁷

Christians who adopt NFP are still practicing the regulation of birth, but they do so without reliance on hormonal contraceptive pills, devices like the IUD, or barrier methods like condoms. The women cited here affirm this choice as the best choice for women's health, even when they do not themselves self-identify as feminist. Christians who adopt this birth control method argue that NFP facilitates female flourishing, a core value of Christian feminism as I have presented it. While their practices are in alignment with the norms of *Humanae Vitae*, their argument is not a simplistic application of magisterial norms. Rather, they seek to identify a method of birth control that seeks the good for women. While the method depends on the cooperation and support of one's partner, and requires personal effort to record and interpret one's signs of fertility, they argue that NFP is empowering for women and that it resists a consumeristic culture and the harmful side effects of other possible birth control methods.

Contraception as Healthy Choice for Women and Children

Many women who have practiced NFP at some point in their lives find it ineffective, difficult, or so damaging to their intimate relationships and sense of self that they seek out other morally good options.³⁸ Today, many Christian feminists hold the position that contraception is good for women because it enables women to have greater control over their fertility so that they can participate as subjects in the family and workplace while balancing multiple commitments. LARC and hormonal methods are often more female-controlled than barrier methods (condoms), but LARC and hormonal contraceptives have the potential for more side effects (an issue that must be weighed carefully by each individual woman as she considers what method would suit her needs best). Christian feminists are making the point that sometimes saying "yes" to sexual union with one's partner while simultaneously saying "no" to pregnancy is a life-affirming decision that fosters love for God, self, and others. They are asserting that honoring women as subjects in their own right—capable of making decisions, worthy of respect as fully human persons—means placing trust in women and supporting them in the decisions they make. When male clerical leaders instead instruct women on God's will for them, this undercuts women's discernment process and is ultimately dehumanizing and paternalistic.

37. Rubio, *Family Ethics*, 110. See also Paul Murray, "The Power of *Humanae Vitae*: Take Another Look," *Commonweal* (July 15, 1994): 14–18; Gregory J. Popcak, *Holy Sex: A Catholic Guide to Toe-Curling, Mind-Blowing, Infallible Loving* (New York: Crossroad, 2008).

38. An excellent series on this issue is the one led by Katie Grimes at Women in Theology. The first post in the series can be found at "Women Speak about Natural Family Planning: Tell Us Your Stories" (February 19, 2012), <https://womenintheology.org/2012/02/19/women-speak-about-natural-family-planning-tell-us-your-stories/>.

To name contraception as a good is to find oneself in direct contradiction to the norms of *Humanae Vitae*, which teaches that “each and every marital act must of necessity retain its intrinsic relationship to the procreation of human life.”³⁹ *Humanae Vitae* goes on to claim that there is an “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.”⁴⁰ Direct contraception is said to frustrate God’s design and “contradicts the will of the Author of life.”⁴¹ Revisionist and feminist critiques of the encyclical’s arguments have been analyzed in the past five decades within this journal. Richard A. McCormick, Charles E. Curran, Norbert Rigali, and others raised serious questions about the natural law methodology employed, the appropriate roles of bishops, theologians, and priests, and the appropriate method of engagement during decades of “impasse” on this issue.⁴² But for all of the ink spilled on contraception in the past fifty years, it is remarkable how rare the actual lived experiences of women and their experiences of contraception surface as sources for theological reflection in these pages.⁴³ In part this is because of the self-silencing that happens when feminist theologians choose not to write about their own experiences, either to maintain healthy privacy, or to protect themselves from job loss or status loss in professional/ecclesial circles.⁴⁴

39. *HV*, 11.

40. *HV*, 12.

41. *HV*, 13.

42. Richard A. McCormick, “Notes on Moral Theology,” *Theological Studies* 29 (December 1968): 725–41, <https://doi.org/10.1177/004056396802900404>. See also Norbert J. Rigali, “Artificial Birth Control: An Impasse Revisited,” *Theological Studies* 47 (1986): 681–90, <https://doi.org/10.1177/004056398604700406>; Daniel Callahan, ed. *The Catholic Case for Contraception* (New York: Macmillan, 1969); Robert McClory, *Turning Point: The Inside Story of the Papal Birth Control Commission, and How Humanae Vitae Changed the Life of Patty Crowley and the Future of the Church* (New York: Crossroad, 1995); Richard A. McCormick, *The Critical Calling: Reflection on Moral Dilemmas since Vatican II* (Washington, DC: Georgetown University Press, 2006); Todd A. Salzman and Michael G. Lawler, *The Sexual Person: Toward a Renewed Catholic Anthropology* (Washington, DC: Georgetown University Press, 2008); Charles E. Curran and Richard A. McCormick, eds., *Dissent in the Church*, Readings in Moral Theology, No. 6 (New York: Paulist, 1988); Charles E. Curran and Richard A. McCormick, eds., *Dialogue about Catholic Sexual Teaching* (New York: Paulist, 1993); Charles E. Curran, *The Catholic Moral Tradition Today: A Synthesis* (Washington, DC: Georgetown University Press, 1999).

43. Notable exceptions include Lisa Sowle Cahill, “Catholic Sexual Ethics and the Dignity of the Human Person: A Double Message,” *Theological Studies* 50 (1989): 120–50, <https://doi.org/10.1177/004056398905000106>; Lisa Sowle Cahill, “Feminist Ethics,” *Theological Studies* 51 (1990): 49–64, <https://doi.org/10.1177/004056399005100104>; Lisa Sowle Cahill, “Marriage: Developments in Catholic Theology and Ethics,” *Theological Studies* 64 (2003): 78–105, <https://doi.org/10.1177/004056390306400134>. See also Rubio, “Beyond the Liberal/Conservative Divide on Contraception.”

44. Emily Reimer-Barry, “How to Be Fired From Your Job at a Catholic Institution: It is Easier Than You Think!” (June 18, 2013), Catholic Moral Theology Blog, <https://catholicmoraltheology.com/how-to-be-fired-from-your-job-at-a-catholic-institution-it-is-easier-than-you-think/>.

Perhaps it is obvious to say, but contraception is a women's health issue because pregnancy and childbirth are women's health issues. Pregnancy transforms a woman's body like no other medical condition. Nourishing new life in the womb is a sacred power, but it is also exhausting, scary, expensive—and for some women—deadly. The World Health Organization reports that 830 women die every day from pregnancy or childbirth-related causes, most of those deaths preventable except that the medical complications occurred in resource-constrained settings.⁴⁵ Despite the enormous toll to women's health and well-being, there is not the political will power domestically or globally to address these long-standing inequalities, and donor countries have even scaled back their funding for urgently needed maternal and child health programs.⁴⁶ Racism persists in the invisibility of this problem in the US context. Women in the USA are more likely to die from childbirth or pregnancy-related causes than other women in the developed world, and according to the CDC half of these deaths are preventable.⁴⁷ The risk of pregnancy-related deaths for black women is three to four times higher than those of white women.⁴⁸ Facing head-on the risks of death in pregnancy is important for faith communities who wish to both honor the self-giving love of women who choose to become mothers and also respect the choices of women who avoid the dangers of pregnancy through contraceptive choices.

Contraception can also be framed as a social good. Enabling women to make informed decisions about whether and when to have children reduces unintended pregnancies as well as maternal and newborn deaths.⁴⁹ Catholic philanthropist Melinda Gates has called voluntary family planning access a "moral imperative" because it demonstrates that women's lives matter and that the world is serious about reducing a "needless death of a woman or a child."⁵⁰ Voluntary family planning access also increases educational and economic opportunities for women and leads to healthier families and communities. Gates explains that spacing the births of children increases the likelihood of child survival rates; when women space the births of their children by at least three years, their babies are twice as likely to survive their first year of life—and 35% more likely to live to see their fifth birthday.⁵¹ In the US

45. World Health Organization, "Maternal Mortality, February 16, 2018, <http://www.who.int/news-room/fact-sheets/detail/maternal-mortality>.

46. President Trump ordered the USA to withdraw support from the United Nations Population Fund (UNFPA) in 2017, which is the United Nations body responsible for programming in maternal and child health services. See Feliz Solomon, "U.S. Ends Funding for U.N. Reproductive Health Agency, Claiming Links to Abortion," *Time* (April 4, 2017), <http://time.com/4724227/unfpa-funding-trump-mexico-city-policy-abortion/>.

47. Centers for Disease Control and Prevention, *Meeting the Challenges of Measuring and Preventing Maternal Mortality in the United States* (November 2017).

48. *Ibid.*

49. Bill and Melinda Gates Foundation, "Family Planning Program: At A Glance," <https://www.gatesfoundation.org/What-We-Do/Global-Development/Family-Planning>.

50. Celia W. Dugger, "For Melinda Gates, Birth Control Is Woman's Way Out of Poverty," *New York Times* (November 1, 2016), <https://www.nytimes.com/2016/11/01/health/melinda-gates-birth-control-poverty.html>.

51. Melinda Gates, "I Wouldn't Be Where I Am Today without Contraceptives," *Fortune* (February 14, 2017), <http://fortune.com/2017/02/14/melinda-gates-annual-letter-contraceptives/>.

context, the Institute of Medicine recommends providing contraceptive coverage at no cost to women because clinical data shows that including birth control, AIDS and diabetes screenings, and annual well-women visits improves the overall health of women.⁵²

For a tradition that claims to uphold the equal dignity of women and men, disregard for the health of women is anathema to good ethics and good public policy. But the norms of *Humanae Vitae* have been problematic for the church's social missions because for fifty years they have pitted the church against the best data from medical and social sciences. To remain consistent with *Humanae Vitae* and subsequent teachings, Caritas Internationalis,⁵³ Catholic Relief Services,⁵⁴ and Catholic healthcare providers⁵⁵ have had to implement restrictions to contraceptives that are recommended by medical providers. This has had far-reaching damaging effects, especially for women vulnerable to HIV infection, as it has crippled the church's response to the HIV pandemic, giving the false impression that the church is anti-science and anti-medicine.⁵⁶

52. Institute of Medicine, *Clinical Preventive Services for Women: Closing the Gaps* (Washington, DC: National Academies, 2011).

53. Caritas Internationalis provides "value-based prevention education" in addition to advocacy for increased medical infrastructure and medications. Caritas, "Health and HIV," <https://www.caritas.org/what-we-do/health-hiv/>.

54. Catholic Relief Services has twenty-five HIV programs worldwide that align with Catholic teachings. See Catholic Relief Services, "Our Catholic Values," <https://www.crs.org/media-center/crs-upholds-catholic-teaching-and-values>. See also Catholic Relief Services, "HIV and Tuberculosis," <https://www.crs.org/our-work-overseas/program-areas/hiv-and-tuberculosis>.

55. Drawing on *HV 14*, the USCCB medical directives say that the church cannot approve contraceptive interventions that either in anticipation of the marital act or in its accomplishment or in the development of its natural consequences, have the purpose, whether as an end or a means, to render procreation impossible. United States Conference of Catholic Bishops, *Ethical and Religious Directives for Catholic Health Care Services*, 5th ed. (2009), <http://www.usccb.org/issues-and-action/human-life-and-dignity/health-care/upload/Ethical-Religious-Directives-Catholic-Health-Care-Services-fifth-edition-2009.pdf>. For how this teaching is lived out in practice, see Catholic Health Association, "Catholic Identity," <https://www.chausa.org/catholicidentity/overview>.

56. Often the argument is framed thusly: condom use is forbidden by church teaching because condoms are contraceptives. But moral theologians have pointed out that church teaching bans contraception, and that condoms could be used as a method of disease prevention. For one example, see Bishop Kevin Dowling, "Let's Not Condemn Condoms in the Fight Against AIDS," *US Catholic* (November 2003), 20–22. The Centers for Disease Control and Prevention asserts that when used consistently and correctly for every sexual act, condoms are highly effective in preventing the spread of HIV and some other sexually transmitted infections. See Centers for Disease Control and Prevention, "Condom Effectiveness Fact Sheet for Public Health Personnel," <https://www.cdc.gov/condomeffectiveness/latex.html>. Paul Farmer is among the scholars who have noted that women bear disproportionate burdens with regard to HIV and AIDS. See Paul Farmer, Maureen Connors, and Janie Simmons, eds., *Women, Poverty, and AIDS: Sex, Drugs, and Structural Violence* (Monroe, ME: Common Courage, 1996).

Women's health encompasses not just physical but also mental and spiritual health. But the emotional and spiritual toll on women who want to follow church teachings but have good reasons not to be open to pregnancy can be emotionally crippling.⁵⁷ Some defenders of *Humanae Vitae* accuse women who use contraception of being selfish⁵⁸ and unloving.⁵⁹ To be sure, if a woman's motivations were purely selfish and unloving, this would be problematic. Perhaps my own experience can shed some light on this issue. When I consider my motivations for completing graduate school and then working in a tenure-track position, the way I work hard for my students and with colleagues while trying to have a healthy marriage relationship, and the complications I experienced during and after childbirth that would likely make additional pregnancies more dangerous, the description of contraceptive intercourse as "selfish" and "unloving" does not ring true to my experience. I have recognized and accepted my own limits as a working mom who cannot handle the work and emotional caregiving involved in parenting any more than two children with my professional commitments. While my professional work is often demanding of my time and energy, it is also where I am living out my public vocation, and where my character is every day being formed (for better or worse): where I am challenged to learn and grow and be patient and kind and generous. Family life stretches me in different ways, no less important. Sometimes, being a "good worker" is in direct tension with being a "good parent" or "good spouse."⁶⁰ There are only so many hours in each day. But often, the living out of my dual vocations fosters self-giving love.⁶¹

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57. Katie Grimes reminds readers of the Women in Theology blog series on NFP that the heart-breaking stories recounted in her readers' responses follow a long-standing pattern, going back even to the speech given by Patty Crowley to the Papal Birth Control Commission that investigated the question of the morality of the regulation of birth prior to the promulgation of *HV*. NFP users complained then and now that prolonged abstinence in marriage felt unnatural, that logging one's signs of fertility can produce anxiety and stress, and that abstaining during the time of the month that women are most likely to experience sexual pleasure can lead to resentment, frustration, anger, and deep suffering. Katie Grimes, "Women Speak about Natural Family Planning: Patty Crowley's Speech to the Papal Birth Control Commission," February 23, 2012, <https://womenintheology.org/2012/02/23/women-speak-about-natural-family-planning-patty-crowleys-speech-to-the-papal-birth-control-commission-2/>.
58. Angela Franks describes contraceptive sex as "self-centered," adding, "if we act selfishly in our sexual life, we become selfish, and no amount of wrangling about the church's teaching on contraception can change that." Angela Franks, "The Gift of Female Fertility," 116–17.
59. Janet E. Smith tells readers "If one is not willing to share one's life-giving power, one's fertility, with another, one is not giving totally of oneself: by negating the procreative meaning of sexual intercourse, one is also negating the unitive meaning of marriage, the meaning of total self-giving." Janet E. Smith, *Humanae Vitae: A Generation Later* (Washington, DC: Catholic University of America Press, 1991), 256.
60. Emily Reimer-Barry, "Labor Day Confessions of a Working Mom" (September 6, 2016), Catholic Moral Theology blog. <https://catholicmoraltheology.com/labor-day-confessions-of-a-working-mom/>.
61. I credit Julie Hanlon Rubio with the phrase "dual vocation." Julie Hanlon Rubio, "The Dual Vocation of Christian Parents," *Theological Studies* 63 (2002): 786–812, <https://doi.org/10.1177/004056390206300406>.

A feminist analysis of *Humanae Vitae* today requires that we recognize that women can contribute to church and world beyond their childbearing capabilities. But in the everyday realities of women balancing multiple commitments, we must recognize also that women are human and bound by limitations of body and time. Scripts promoting unlimited maternal self-sacrifice must be replaced by messages affirming women's capacities to make good choices rooted in their deepest values and within the circumstances in which they find themselves.

Contraception should be recognized as a moral good for some women because sexual expression in loving, intimate relationships is a moral good in itself;⁶² because procreation takes a toll on women's bodies and creative energies; because women are human, not superheroes with limitless capacity for self-gift; because increasingly women have other good opportunities that are demanding of their time, body, and emotional energy; because advances in medical sciences make such choices possible and can be wisely applied to individual circumstances with the help of a knowledgeable physician; and because contraception offers women greater power in sexual relationships that remain embedded in a world of structural violence. Too often, this latter point is overlooked in magisterial pronouncements about the illicit use of contraception. But until magisterial pronouncements demonstrate deep understanding of the constraints in which many women make choices about their fertility, and until they acknowledge the patriarchal worldview that has so informed church teachings through the centuries, church teachings will not be persuasive to feminists in the tradition. We must turn, then, to the question of women's agency in the debate over birth control methods.

Women's Power in the Debate about Birth Control Choices

Rosemary Radford Ruether has rightly noted that much of the controversy over some types of contraception in Catholicism is about women's agency and a desire for women to make decisions about their own fertility. Ruether criticizes the church for the "inability of a patriarchal Christianity to deal with women as autonomous persons and moral agents in their own right."⁶³ Ruether was responding to arguments that asserted male control over female fertility as part of the natural ordering of God's plan for human relationships. As but one example, writing in *Theological Studies* in 1961, Paul M. Quay argued that contraception was evil because contraceptive intercourse is inconsistent with the proper headship of the husband over his wife in marriage:

The woman who uses a diaphragm has closed herself to her husband. She has accepted his affection but not his substance. She permits him entrance but does not suffer him to be master. So, also, by any form of sterilization a woman deprives her husband's seed of its

62. Patricia Beattie Jung, *Sex on Earth as It Is in Heaven: A Christian Eschatology of Desire* (New York: State University of New York Press, 2018).

63. Rosemary Radford Ruether, "Crises and Challenges of Catholicism Today," *America* (March 1, 1986), 152–58 at 155.

power over her body. She accepts his headship only in so far as she can subject it to her own will. The sign and symbol of wifely submission, of patriarchal authority, is made over covertly to serve the purposes of a weakly uxorious male and a domineeringly feminist wife.

Sometimes the man will use a condom for the same reasons; sometimes for more characteristically masculine reasons of selfishness. In either event he no longer dominates his wife as person, he does not permit his activity to penetrate her; he takes no responsibility for her ... Such mates perform what appears to be the act of love but is only a sham.⁶⁴

Here, Quay is unapologetic in his presentation of patriarchal marriage and the implicit power relations that he finds healthy for Christian spouses: husbands are to dominate like masters, and wives are to submit. Contraception cannot be tolerated because it empowers women to make choices about their fertility. Quay's assertions are in alignment with the theology of marriage presented by Pope Pius XI in *Casti Connubii* (1930), in which wifely duties included "ready subjection" and "willing obedience." She is described as the "heart" in comparison to her husband, who is "the head."⁶⁵ This kind of language is deeply problematic for Christian feminists because of its stereotyping of gender roles and the resulting unequal distribution of power in the marital relationship as symbolized, and makes it difficult to trust that church leaders have women's best interests at stake when they promulgate teachings that reinforce male power and control over female bodies. Did *Humanae Vitae* depart from this view of male headship?

When *Humanae Vitae* was promulgated in 1968, Paul VI's description of married love as fully human, total, faithful, exclusive, fecund, and responsible did not contain explicitly patriarchal assumptions of wifely submission to male authority.⁶⁶ But neither did *Humanae Vitae* affirm women's explicit control over their fertility. On the contrary, it asserted that women were "not free to act as they choose in the service of transmitting life, as if it were wholly up to them to decide what is the right course to follow." Rather, they "are bound to ensure that what they do corresponds to the will of God the Creator. The very nature of marriage and its use makes His will clear, while the constant teaching of the church spells it out."⁶⁷ In other words, women are not in control of their fertility, but are called to submit to God whose divine will is known and communicated by clerics (all men) through the official means of promulgating magisterial teaching. This twisting together of natural law, ecclesial power, and sexual norms creates a web of confusion for women who seek to make decisions about their bodies and reproduction in an empowering church environment.

64. Paul M. Quay, "Contraception and Conjugal Love" *Theological Studies* (1961): 18–40 at 35, <https://doi.org/10.1177/004056396102200102>. The idea that contraceptive intercourse is unloving later became a central aspect of Pope John Paul II's argument of "total self-giving" in *Familiaris Consortio*, 51–52.

65. Pope Pius XI, *Casti Connubii* (December 31, 1930), 26–29: https://w2.vatican.va/content/pius-xi/en/encyclicals/documents/hf_p-xi_enc_19301231_casti-connubii.html.

66. *HV*, 910. Julie Hanlon Rubio describes this section of *HV* as "positive and personalist language." Rubio, *Family Ethics*, 100.

67. *HV*, 10.

The problem with describing marriage as an egalitarian partnership is that many experience this as an unrealized ideal. While in an earlier section we saw that there are good feminist arguments for supporting NFP, some women have raised concerns that NFP is not safe for women when egalitarian marriages cannot be guaranteed. Martha Mapasure and Susan Rakoczy conducted a study of African Catholic married women in which several respondents indicated that it would not be possible for them to practice periodic abstinence because their husbands would not comply; Mwayi from Malawi said, “I cannot tell *amunaanga* (my husband) that I am waiting for when I won’t get pregnant; it will be war in that house.”⁶⁸ Mapasure and Rokoczy demonstrate how many women in the African context lack relational power in their marriages that would enable them to practice NFP. One woman in the study recommended instead that the church continue to promote procreation and NFP while also “leaving other options” for women who cannot manage NFP.⁶⁹ Melissa Browning’s study of Christian marriage in East Africa has identified gender inequality as a barrier to right relationship.⁷⁰ She cites Obed Kealotswe, a pastor and theologian from Botswana who says “the general nature and belief is that women are made for men, and they have to satisfy the sexual desires of men.”⁷¹ Browning also identifies practices such as child marriage, female circumcision, and marital rape.⁷² The pervasiveness of gender violence, even in Christian marriage, may speak to the ways in which church teachings on the human dignity of women have not been “fully received” by the faithful. Until they are, sexual norms must be presented in a way that recognizes the reality of the constraints in which women act.

The lack of attention in official church teachings to violence against women remains a source of concern for feminists working in this area and a stumbling block to further feminist engagement with ecclesial leaders on this issue. The reality of domestic violence was not addressed sufficiently in *Humanae Vitae*. While it is good that the document condemns marital rape as unloving (13), it failed to address patterns of gender inequalities sacralized by marriage teachings. It also did not satisfactorily address other forms of wife abuse include verbal abuse and physical violence. *Humanae Vitae* contributed to the sense of the invisibility of violence against women by writing about marriage in such a way that assumed home was safe for women and that marriage relationships were loving.

Statistics tell a very different story. Global estimates published by the World Health Organization indicate that 35 percent of women worldwide have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence in their

68. Martha Mapasure and Susan Rakoczy, “African Catholic Women Engage with *Humanae Vitae*,” in “Families,” ed. Susan A. Ross, Lisa Sowle Cahill, Erik Borgman, and Sarojini Nadar, *Concilium* 2 (2016): 74–86 at 80.

69. Mapasure and Rakoczy, “African Catholic Women Engage with *Humanae Vitae*,” 83.

70. Melissa Browning, “Reimagining Christian Marriage in the Midst of a Pandemic,” in *Risky Marriage: HIV and Intimate Relationships in Tanzania* (Lanham, MD: Lexington, 2014), 135–88.

71. Browning, *Risky Marriage*, 141.

72. Browning, *Risky Marriage*, 21–78.

lifetime. When people are socialized to think that men should have power over women and that women should be subordinate to men, they are more likely to approve of male violence against women.⁷³ To the extent that magisterial teachings present the natural law in a way that identifies males as authorities and females as servants of men, church teachings contribute to this socialization.⁷⁴ With the rise of the #metoo movement, the prevalence of violence against women is becoming more widely known. Such statistics challenge any claims to “safety” in the home or in community for women.

Sexual violence has been overlooked in church teachings because *Humanae Vitae* does not view sexuality in terms of relationship justice but in terms of classicist natural law norms.⁷⁵ This is perhaps the greatest flaw of *Humanae Vitae* and the way it has been applied since 1968. Had the document lifted up relationship justice as a normative framework for discussing reproductive choices, it would have been a more helpful resource for women facing abuse in sexual relationships otherwise sanctified by the church through the sacrament of marriage.⁷⁶

The absence of violence in a relationship does not necessarily mean that the relationship is equal. Women bear the majority of the burden for unpaid household and care work; women do on average about 2.5 times more of this work than men.⁷⁷ Because women continue to bear disproportionate burdens in reproduction, child rearing, and household tasks, and given the lack of social supports for those additional burdens women face, many Christian feminists argue that access to safe and reliable methods of birth control is essential to the promotion of women's health. This position is not anti-male or anti-family, but is reflective of Christian feminist concerns that gender inequality is pervasive in culture and society—and even in Christian marriages—and so a preferential option for women in unequal relationships requires special concern for women's health and power. While NFP literature assumes that heterosexual marriages are egalitarian and that women should have equal power in relationships, sexist power dynamics influence human culture and socialization to such a large extent that feminists insist that gender inequalities must influence pragmatic, everyday choices for women and policies.

Most readers would be appropriately horrified to read Fr. Quay's description of marriage from 1961. We recognize, in 2018, that “wifely submission” to male headship is incoherent with the claim that females have full human dignity. We recognize that men who seek control over female bodies are dangerous. We recognize that male control over female fertility is dehumanizing and unethical. But embedded within our ecclesial structures, liturgical rites, marriage practices, and ethical teachings are assumptions that are deeply suspicious of whether women can be trusted to make good

73. WHO, “Violence against Women,” November 29, 2017, <http://www.who.int/news-room/fact-sheets/detail/violence-against-women>.

74. Pope Francis contributes to this gendered reading of roles in *AL* 174–77.

75. Richard Gula, *Reason Informed by Faith* (Mahwah, NJ: Paulist, 1989), 220–49.

76. Margaret Farley has developed a framework for normative sexual ethics rooted in relationship justice in her book *Just Love: A Framework for Christian Sexual Ethics* (New York: Continuum, 2006).

77. UNFPA, 54.

decisions about their fertility. For some women, this worldview fosters self-doubt, shame, and toxic guilt that can be difficult to name and even hard from which to heal. What is needed is a profound call to respect the moral reasoning and ethical capacities of women who face challenging discernments about how to regulate their fertility, and trust that they have the means to discern the call of the Spirit even in their female embodiment.

Moving Forward

Some areas of common ground between Christian feminists who promote NFP and Christian feminists who promote contraception can be identified. Christian feminists on both sides of this debate share the assumption that female fertility is a good in itself even if in particular circumstances some women have discerned that the responsible decision is to abstain from potentially procreative sex or use a form of contraception to prevent pregnancy. Christian feminists on both sides of the debate demand respect for women as subjects and affirm that sexual relationships should be equal, mutual, noncoercive, and pleasurable for both partners. Feminists on both sides of the debate bemoan the lack of social support for childbearing women, and call all Christians to work for wage justice, workplace safety, parental leave policies, healthcare coverage, affordable day care, adequate breaks for pumping breastmilk, adequate time off from work for prenatal visits and access of essential healthcare, scaled-up medical infrastructure in resource-constrained settings that would enable all women to have skilled birth attendants at childbirth, and sexual education programs that explicitly affirm the equal dignity of women and men. Neither side believes that women only contribute to the church and world by bearing children. Neither side accepts the claim that coerced sex or coerced pregnancy is consistent with the vision of a God who is love. And it should be said that women on both sides of the debate recognize the sacrifices that are sometimes required in order to make responsible decisions about one's fertility (whether abstaining from sexual activity, spending time charting one's cycle, taking a daily pill, or accepting unpleasant side effects of hormonal medications).

It is not enough to point out this common ground. The church must be a place where women with different viewpoints and lived experiences can enter into respectful dialogue with one another in a context of discernment. We must seek a new way forward that supplements the legacy of *Humanae Vitae* with the far richer body of wisdom in our tradition focusing on the exercise of prudence. The time has come for the church to reject the teaching methodology employed by *Humanae Vitae*, in which moral norms were stated as if they could be deductively applied in any new setting. Instead, it is time for an approach to sexuality that fosters appreciation of the sacred power of female fertility and that locates control over fertility choices in the bodies of the women who bear the burdens of those choices. In short, it is time for a "both/and" approach that celebrates the cases in which NFP is life-affirming for women, while simultaneously holding out the possibility that contraceptive sex could be similarly life-affirming for other women. Instead of fostering top-down pronouncements, the

church should affirm an invitation to all believers to discern in their own contexts what the virtue of prudence requires.

In her essay, "Contraceptive Use and the Authority of the Church," Jean Porter has helpfully pointed out that the issue of contraceptive use provides an opportunity to reflect on the scope and limits of authoritative judgments and of the church's teaching authority. Porter recovers a scholastic understanding of the natural law that is concerned "in its primary sense with our basic capacities for moral judgment, or with the basic principles through which that judgment operates."⁷⁸ She rejects the claim that the norms within *Humanae Vitae* have been taught infallibly and that ongoing debate is fruitless and/or counterproductive. Instead, we must continue forward in an ecclesial natural law discernment process through which the whole church undergoes an "extended process of rational discernment" that combines scriptural warrants, theological reflection, analysis of history, and reflection on current practices.⁷⁹ In such a communal discernment, Porter notes that the Christian tradition has upheld "a normative link between sexuality and procreation," at the same time that "other ideals and considerations" must be taken into consideration.⁸⁰ Porter writes,

There is a case to be made that some acceptance of contraceptive use, within the context of an institutional commitment to both marriage and procreation, is actually necessary to safeguard other natural law commitments, which are arguably even more central to Christian moral practices, and which have also progressively transformed our understanding of marriage.⁸¹

The full equality of women both within marriage and within society as a whole, Porter concludes, is itself a natural law ideal, and one that is central to Christian belief and practice. The fact that it is thus far not realized wholly in Christian ecclesial practices, sexual norms, and marriage practices, means that more work must be done to foster

78. Jean Porter, "Contraceptive Use and the Authority of the Church: A Case Study on Natural Law and Moral Discernment," in *A Just and True Love, Feminism at the Frontiers of Theological Ethics: Essays in Honor of Margaret A. Farley*, ed. Maura A. Ryan and Brian F. Linnane (Notre Dame, IN: University of Notre Dame Press, 2007), 369–405 at 376.

79. Porter, "Contraceptive Use," 380.

80. Porter, "Contraceptive Use," 388. Todd A. Salzman and Michael G. Lawler argue that procreation is a good of marriage but not an essential good without which marriage could not exist. But the loving and just union of the spouses is a necessary good of marriage. They conclude, "the demands of the good of marriage, the good not only of the couple but also of their existent children, can on occasion take priority over the good of procreation . . . Our answer is that, when spouses have a serious, just, and weighty marital or familial reason to prevent procreation in a specific concrete circumstance, procreation can be prevented by any means that does not damage their complementary, just, loving marital or parental relationships, and is not otherwise immoral." See *Sexual Ethics: A Theological Introduction* (Washington, DC: Georgetown University Press, 2012), 114–15.

81. Porter, "Contraceptive Use," 394. Porter cites Lisa Sowle Cahill's *Sex, Gender, and Christian Ethics* (Cambridge: Cambridge University Press, 1996), 201, in this section of her argument.

deeper appreciation of this more expansive understanding of the natural law. Porter concludes that “a judicious use of contraceptives, which respects the overall openness of the marital relation to children, can actually be a way of safeguarding and expressing natural law principles in a contemporary context.”⁸²

Needless to say, this kind of moral reasoning has not had a perceptible impact on church leaders and on the pastoral programs run by the Catholic Church.⁸³ Instead I am calling for a wider ecclesial deliberation on the contested issue of contraception as Porter envisions a robust natural law ecclesial discernment process. This should be an ecclesial deliberation that takes seriously the experiences of all believers. It should be an open-ended and dialogical discernment process, not one that prematurely shuts down dialogue for fear of scandal or that begins with the end already in mind.⁸⁴

It is not enough for women theologians to simply have a voice in responding to church documents that are promulgated from the Vatican. Women need to be at the table—advising, consulting, engaging as equals with church leaders who construct the theological teachings for the faith community. Papal documents should be citing the published work of women. But for this to happen, church leaders must recognize that they have something to learn from women. For many, the idea seems to be unreasonable. Emmanuel Katongole has recently argued that “the major challenge facing the church is not simply pastoral, namely whether the church can recognize, affirm, and defend the dignity of women, but ecclesiological, namely whether the church can be the space and community where women feel particularly at home, and where their voices and gifts of leadership are welcomed and nurtured.”⁸⁵ In paving the way for Vatican III scholars from Africa have identified key issues that must be addressed for the church to move forward;⁸⁶ to theirs we need to add voices from Asia, Latin America and the Caribbean, Indonesia, and so forth. The challenge will be how to speak in such

82. Porter, “Contraceptive Use.”

83. The lobbying efforts of the United States Conference of Catholic Bishops provide an indication of their priorities, and they seek to limit women’s access to contraception through workplace healthcare plans. Often the moral argument employed is simply a restating of *HV*’s norms without attention to other moral goods at stake. See Heidi Schlumpf, “Contraception Mandate Debate,” *National Catholic Reporter* 54 (November 3–16, 2017), 1, 8–9. In this piece, Sister Simone Campbell of NETWORK raises the question of whose conscience matters in these debates, asking if the religious liberty of female employees is being ignored in favor of the so-called religious liberty of the institutional church.

84. In most dioceses in the US context, a female employee at a parochial school or Catholic parish could have her employment terminated if it becomes public that she uses artificial birth control for the purposes of avoiding pregnancy. This hardly encourages open discourse about such an important question by lay members of the people of God.

85. Emmanuel Katongole, “The Church of the Future: Pressing Moral Issues from Ecclesia in Africa,” in *The Church We Want: African Catholics Look to Vatican III*, ed. Agbonkhanmeghe E. Orobator (Maryknoll: Orbis, 2016), 161–173 at 172. See also Tina Beattie, “Maternal Well-being in Sub-Saharan Africa: From Silent Suffering to Human Flourishing,” in *The Church We Want*, ed. Orobator, 175–88.

86. Orobator, ed., *The Church We Want*.

a way that both names universal human values and norms while also satisfactorily addressing the diversity of experiences in particular contexts.

Perhaps what is needed most of all is to adopt the recent developments by moral theologians in our understanding of conscience. Many have recognized the problem with church ministers commanding blind obedience and training people to simply listen and obey. Instead Richard Gula argues that the church's contribution to a believer's moral discernment is far richer than the "overly restrictive" understanding of a conscience formed by magisterial teachings.⁸⁷ We need to expand our understanding of conscience from a judgment about a particular act to the formation of the moral agent in her complexity, or what Anne E. Patrick describes as the "formation of the creatively responsible moral agent."⁸⁸ Kathryn Lilla Cox invites readers to consider conscience within the call of discipleship and character formation, writing that conscience "directs our considerations more carefully to the interplay of grace and sin ... conscience's judgments require proper seeing, watchfulness, a willingness to revise, patience, and wisdom as a means for discussing human cooperation with grace in the nitty-gritty of finite existence as we grow as disciples."⁸⁹

Pope Francis, without changing authoritative church teachings, has nevertheless signaled in *Amoris Laetitia* a willingness to recognize the difficulties that many couples face in trying to live the call of the gospel in the midst of their everyday struggles. His is an approach that on the one hand challenges "certain forms of feminism" while also writing that he sees "in the women's movement the working of the Spirit for a clearer recognition of the dignity and rights of women."⁹⁰ He encourages pastors to focus on "concrete realities,"⁹¹ to privilege mercy and compassion instead of "rules that only lead people to feel judged and abandoned by the very Mother called to show them God's mercy,"⁹² to be "humble and realistic,"⁹³ and to avoid simply "stressing doctrinal, bioethical and moral issues, without encouraging openness to grace."⁹⁴ He writes, "We also find it hard to make room for the consciences of the faithful, who very often respond as best they can to the Gospel amid their limitations, and are capable of carrying out their own discernment in complex situations. We have been called to form consciences, not to replace them."⁹⁵

For many women readers, this rings true. Perhaps the pope is signaling a new chapter in the church's reception of *Humanae Vitae* in which the formation of consciences

87. Gula, *Reason Informed by Faith*, 199–200.

88. Anne E. Patrick, *Women, Conscience, and the Creative Process: 2009 Madeleva Lecture in Spirituality* (New York: Paulist, 2011), 52–53.

89. Kathryn Lilla Cox, *Water Shaping Stone: Faith, Relationships, and Conscience Formation* (Collegeville: Liturgical, 2015), 160.

90. *AL*, 54.

91. *AL*, 31.

92. *AL*, 49.

93. *AL*, 36.

94. *AL*, 37.


95. *AL*, 37.

will receive greater attention. If so, this might be an indication that the magisterium is catching up to the lived wisdom of the people of God. As we consider how to move forward fifty years after *Humanae Vitae*, we must consistently reaffirm appreciation for women's capacity to discern in conscience how the Spirit is calling them to act in particular circumstances and trust that the Spirit continues to breathe new life into the ecclesial community through our striving for holiness in our unique contexts.

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