

FORUM

Diocesan Activity Report

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The Holy Father to Participants in a Study Week on Marriage and the Family

In comparison with 18 years ago... the challenge posed by the secular mentality regarding the truth about the person, marriage and the family has in a certain sense become even more radical. It is not only a question of debating the individual

founded on the indissoluble marriage of a man and a woman as the natural and basic cell of society, is critically challenged. Fatherhood and motherhood are conceived only as a private project, which can even be accomplished with the application of biomedical tech-



A deeper reflection on God's plan for the person, marriage and the family is the task that should engage you with renewed vigor at the beginning of the third millennium.

moral norms of sexual and family ethics. The image of man/woman proper to natural reason and, in particular, to Christianity is opposed with an alternative anthropology. The latter rejects the fact, inscribed in corporeity, that the sexual difference is an identifying characteristic of the person; consequently the concept of the family

nology, without the exercise of conjugal sexuality. This attitude presupposes an unacceptable "division between freedom and nature," which are instead "harmoniously bound together, and each is intimately linked to the other" (*Veritatis splendor*, #50).

In fact, the sexual aspect of corporeity is an integral part of the original divine

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plan, in which man and woman are created in the image and likeness of God (*Gn. 1:27*) and called to create a communion of persons that is faithful and free, indissoluble and fruitful, as a reflection of the riches of Trinitarian love (cf. *Col 1:15-16*).

Therefore, before being a project of human freedom, fatherhood and motherhood represent a vocational dimension inscribed in conjugal love, to be lived as a unique responsibility before God, by accepting children as a gift from Him (*Gn 4:1*), in the adoration of that divine fatherhood "from whom every family in heaven and on earth is named" (*Eph. 3:15*).

To eliminate the corporeal mediation of the conjugal act as the place where a new human life can originate means at the same time to degrade procreation from cooperation with God the Creator to the technically controlled "reproduction" of an exemplar of the species, and thus to lose the unique personal dignity of the child (cf. *Donum vitae*, II B/5). Indeed, only when there is integral respect for the essential charac-

teristics of the conjugal act as a personal gift of the spouses, at once corporeal and spiritual, is the person of the child also respected and expression given to his origin in God, the source of every gift.

When the body itself, the sexual difference inscribed in it and its proper procreative faculties are treated instead as merely inferior biological elements to be manipulated, one ultimately denies the limit and the vocation present in corporeity and shows a presumption that, beyond subjective intentions, indicates a misunderstanding of one's own being as a gift from God. In the light of these problems which are so current today, I reaffirm with even greater conviction what was already taught in . . . *Familiaris consortio*: "The future of humanity passes by way of the family" (#86). . . .

A deeper reflection on God's plan for the person, marriage and the family is the task that should engage you with renewed vigor at the beginning of the third millennium.

Here I should like to suggest a few

perspectives for this reflection. The first concerns the foundation in the strict sense . . . the Mystery of the Most Holy Trinity, the very source of being and, therefore, the ultimate foundation of anthropology. In the light of the mystery of the Trinity, the sexual difference reveals its complete nature as an expressive sign of the whole person.

The second perspective which I intend to submit for your study concerns the vocation of man and woman to communion. It is also rooted in the Trinitarian mystery, is fully revealed to us in the Incarnation of the son of God—in which the human nature and the divine nature are united in the Person of the Word—and is historically inserted into the sacramental dynamism of the Christian economy. The nuptial mystery of Christ, Bridegroom of the Church, is expressed in a singular way through sacramental marriage, the fruitful community of life and love.

In this way the theology of marriage and the family—this is the third point that I would like to offer you—is inscribed in the contemplation of the mystery of the Triune God, who invites all people to the wedding feast of the Lamb accomplished in the paschal mystery and eternally offered to human freedom in the sacramental reality of the Church.

In addition, reflection on the person, marriage and the family is deepened by devoting special attention to the person-society relationship. The Christian response to the failure of individualistic and collectivistic anthropology calls for an ontological personalism rooted in the analysis of primary family relationships. The rationality of the human person, unity and difference in communion and the constitutive polarities of man-woman, spirit-body and individual-community are coessential and inseparable dimensions. Reflection on the person, marriage and the family can thus be ultimately integrated into the Church's social teaching and become one of its strongest roots. ■

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As many readers know, Bishop James T. McHugh underwent surgery in mid-August for cancer of the gall bladder. He recuperated very well from the surgery and is now receiving follow-up therapy. On his behalf, we want to thank the many, many people in the NFP community for their well wishes and prayers, and ask as well, for continued prayers as he continues therapy. For your information, we'd like to share excerpts from Bishop McHugh's own comments which appeared in his diocesan newspaper, *The Long Island Catholic* (Diocese of Rockville Centre) on September 15, 1999.

The past few weeks have been a salutary time in my life. After having been diagnosed with cancer, I have been reminded of the sanctity and fragility of human life, the dedication and expertise of the medical profession and health care personnel and, most importantly, the power of prayer.

Over the years I have written and lectured about the sanctity of human life, especially in regard to abortion and euthanasia. But sudden awareness of a life-threatening disease prompted a reflection on health, on the body's ability to fight disease and of the need to follow medical advice. It also called forth humility, trust in others and prayer.

The medical expertise began with my personal physician . . . and his assistance in calling on the specialists at Memorial Sloan-Kettering Cancer Center in New York. The doctors and health care personnel were experts in their field and also compassionate, personally supportive and cheerful people. Everyone was generous with time and effort to help my recuperation.

By far, however, the most significant aspect of these past weeks has been the spontaneous outpouring of prayer and

the messages of support and encouragement from the people of the Diocese of Rockville Centre. Had it not been for the illness, many people would not have known who I was—perhaps even for some years. But the news reports awakened a true spiritual response, and I am immensely grateful. I cannot personally respond to every card or note, but I have read them all and keep them in my residence to remind me of my spiritual support system.

What for the future? The doctors were highly pleased with the success of the surgery. I am now scheduled for follow-up therapy which will further arrest the spread of the disease and enable me to work at full capacity.

These past weeks have also been a time of personal prayer and meditation. I have reflected on the gift of priesthood, the wonderful experiences of priestly life and ministry during these past 42 years, the other priests and bishops who have inspired and encouraged me. I have thought about the people with whom I worked in the Archdiocese of Newark, the National Conference of Catholic Bishops and the Diocese of Camden. Many have become close personal friends. And though I

Request for Prayers for Bishop McHugh

have only been in Rockville Centre slightly over six months, I already feel at home with our priests, deacons, religious and our people. There is only one high priest, Jesus Christ, and those of us called to ordination share in His priesthood. It is a deep mystery and a tremendous challenge.

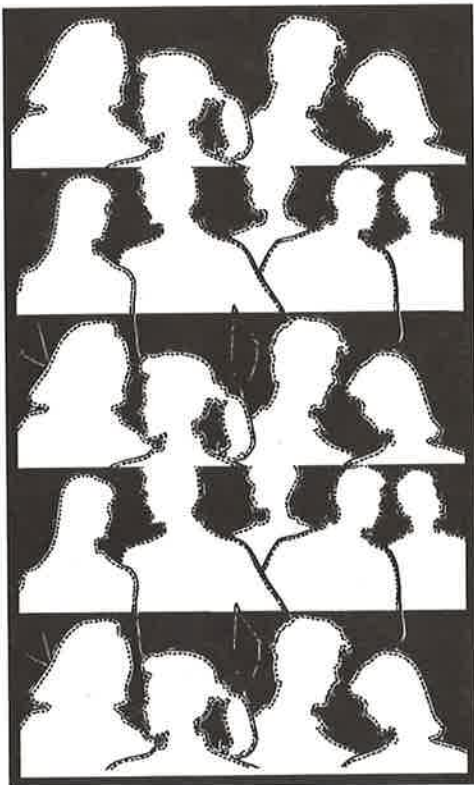
But sharing in Christ's priesthood also involves sharing in His suffering. No one of us can expect to be free of suffering and, while it is not a good in itself, we have the privilege and opportunity to offer it up in union with Christ the Redeemer. I often wonder how people with no faith can deal with disease, mental anguish and suffering.

In the midst of all this, my close friend Cardinal O'Connor was also diagnosed with cancer. During my days in the hospital, the Cardinal came each morning and we concelebrated Mass in my room. One day after my release, he became the patient. He also had surgery and is now undergoing follow-up treatment. We have spoken together frequently but we are also joined in prayer and spiritual solidarity. We are able to talk about and appreciate all who are praying for us. Certainly, I am grateful for Cardinal O'Connor's friendship and support as well as that of Bishop McGann who also faced and overcame a serious disease just a few years ago. Our Vicars in

Rockville Centre and my other bishop and priest friends throughout the country have also been a source of encouragement.

Through all of this, I have thought frequently of, and prayed to Cardinal Terence Cooke for both Cardinal O'Connor and myself. Cardinal Cooke was also a close friend, and he fulfilled all his responsibilities while under treatment for cancer for more than 10 years.

My energy and stamina have returned and the future looks promising. . . . Meanwhile, as my health improves and the disease is overcome, I remain in need of prayer . . . remember me at Mass and in the Eucharist and in the recitation of the Rosary and other prayers. And I promise that each day as I celebrate the Eucharist, I will beg the Lord bless all our people, to strengthen their faith, hope and charity and draw them more closely to Himself. It is our Catholic heritage—that we pray for one another. ■



Bishops' Committee Offers Resource Paper on Marriage Preparation and Cohabitation

Sheila Garcia

Ken and Diane were looking forward to their appointment with Deacon Bob. The couple had just announced their engagement and were anxious to begin the preparation process required for marriage in the Catholic Church. Their excitement, high hopes, and expectations were typical of engaged couples. They were typical in another way, too. Like many engaged couples, Ken and Diane were already living together.

Today a little more than half of all first marriages are preceded by cohabitation. When second and subsequent marriages are included, researchers estimate that 60% to 80% of couples coming to be married are cohabiting.

The rapid rise in cohabitation over the past twenty-five years has posed a difficult challenge to priests, deacons, and lay pastoral ministers who prepare couples for marriage in the Catholic Church. How do they address a situation that is contrary to the Church's moral teaching yet still work with the couple to sanctify their relationship through the sacrament of marriage?

Recognizing the difficulty, the Bishops' Committee on Marriage and Family recently issued a report entitled *Mar-*

riage Preparation and Cohabiting Couples. While not an official statement of the Committee or the Bishops' Conference, the report summarizes the most recent research about cohabitation and marriage and reflects on some of the difficult pastoral issues raised by cohabitation. It draws on *Familiaris Consortio, Faithful to Each Other Forever: A Catholic Handbook of Pastoral Help for Marriage Preparation*, diocesan marriage preparation policies, and pas-

toral experience to offer helpful information to those who prepare couples for marriage in the Church.

Ken and Diane thought that living together would help them to decide if marriage was right for them. The divorce of Ken's parents and the painful break-up of married friends had caused them to wonder if a faithful, permanent commitment is possible. Unfortunately, Ken and Diane's decision to cohabit had actually jeopardized their hopes for a stable marriage. Couples who cohabit before marriage divorce at a rate 50% higher than couples who do not. Moreover, cohabitators report less satisfaction with their marriage than non-cohabitators.

What factors put cohabitators who

Today a little more than half of all first marriages are preceded by cohabitation.

marry at risk? According to the report, the research suggests two reinforcing sources. First, cohabitators bring to the marriage certain predisposing attitudes and characteristics. As a group they are less committed to the institution of marriage and more accepting of divorce. They tend to value individualism rather than interdependence and they have inappropriately high expectations of marriage. Second, experiences from the cohabitation itself create patterns and behaviors that can lead to divorce. For example, cohabitators have more conflict over money after they marry; domestic violence is more common; and cohabitators who marry are less effective at conflict resolution.

Still, in choosing to move from cohabitation to marriage Ken and Diane are at the low end of a high risk group; they have fewer risk factors than those cohabitators who choose not to marry. At this point the role of the Church minister becomes crucial. Ken and Diane's desire for marriage in the Church has created a "teachable moment." Over the next few weeks, Deacon Bob and those who work with him will have the opportunity to explain the Church's teaching about marriage and sexuality. Diane and Ken will have the opportunity to understand this teaching more fully, to pray about it, and to make a personal response to what they have heard. They may decide to separate or, if continuing to live together, to live chastely. The report notes that pastoral ministers can fruitfully pose the challenge to separate after the Church's teaching about marriage and sexuality has been carefully explained.

Knowing these possibilities, and following the advice of *Faithful to Each Other Forever*, Deacon Bob avoids two extremes. He does not immediately confront Ken and Diane and condemn

their behavior, nor does he ignore their cohabitation. When Deacon Bob notes that the couple has given the same address, he asks matter-of-factly if they are living together. When Ken and Diane answer yes, Deacon Bob flags this as an issue to be discussed.

Knowing that their cohabitation has put their impending marriage at risk, Deacon Bob encourages Ken and Diane to reflect on why they decided to cohabit. He also provides insights into possible consequences. He will raise such questions as: Why did you originally choose to live together? What have you learned from this experience? Why do you wish to marry now? Why do you wish to marry in the Catholic Church? As the report notes: "Without creating 'self-fulfilling prophecies,' those preparing cohabiting couples for marriage can help them identify and work with issues around commitment, fidelity, individualism, pressure, and appropriate expectations."

As Deacon Bob attempts to support the couple's plans for the future rather than chastising them for the past, Ken and Diane will experience marriage preparation as a time of evangelization. They will begin to understand the Church's compelling vision of married love and learn how to make it a reality in their life. With God's grace and under Deacon Bob's guidance, they can be led to a deeper relationship with God and a more active involvement in Church life. ■

Sheila Garcia is the Assistant Director of the NCCB Secretariat for Family, Laity, Women and Youth. To obtain a copy of Marriage Preparation and Cohabiting Couples call the NCCB Secretariat for Family, Laity, Women and Youth (202-541-3040). The report is also available on the web: www.nccbuscc.org/laity/marriage.

Third International Meeting of Families with the Holy Father, Rome

October 12-15, 2000

A highlight of the Jubilee Year 2000 will be the Third International Meeting of Families with the Holy Father in Rome on October 12-15, 2000.

The program consists of a Theological Pastoral Congress on October 12-13 and two large-scale gatherings with the Pope for celebration, testimony, teaching, prayer (October 14) and Mass on October 15 in St. Peter's Square. The theme is "Children: Springtime of the Family and Society."

In the past, the first two meetings have proven informative and inspiring for leaders in NFP, marriage and family ministries.

The NCCB Committee on Marriage and Family is organizing a U.S. group to participate and has arranged with Catholic Travel Centre to provide a travel and accommodations package. Group size is limited to 44 and some spaces are already filled.

You can learn more about the meeting by visiting the Marriage and Family website at www.nccbuscc.org/laity/marriage. Committee staff can send you a brochure about the travel package if you call 202-541-3043 or you can contact Catholic Travel Centre directly at 800-553-5233. Deadline for initial deposits is December 1999.

Compromise, Consistency and Christianity, One Physician's Journey Toward the Truth

William Toffler, MD

Physicians Healed—*Excerpts*

By now most NFP supporters know that One More Soul is a very resourceful organization which exists for the development and promotion of materials which articulate the Church's teachings on conjugal love, responsible parenthood and NFP. We have them to thank for pulling together the many lists of doctors who promote NFP only in their practices, and organizing them into an important national directory. Well, they have done it again. They have managed to publish a very inspiring collection of stories from some of these doctors.

Entitled Physicians Healed (1998), this 100 plus page book offers the personal stories of fifteen doctors who made the decision to not prescribe contraception in their practices. It is a "must read" for all Catholic doctors who need encouragement to follow Church teachings in their professional lives. The following is an example of one such story.

While I was raised a Catholic and had never openly rejected my Christian heritage, I was also clearly a product of our American culture. In our diverse society, I was taught to avoid judgments and that I had no right to assert my own moral views on others. On the other hand, as a Christian I knew that the taking of innocent life was unacceptable. Specifically, I knew that abortion was wrong. Yet as a medical student in the early '70s, I hadn't really thought much about how my own beliefs would interface with actual medical practice. As such, I wasn't really prepared for the dilemma that I would face in my third year while on an obstetrics rotation.

One day on that rotation, my classmate Marian (not her real name) and I were assigned to the East Hospital, where indigents received care. Our resident had been assigned the task of performing saline abortions and several women in their second trimester lay on gurneys lined up like airplanes taxiing on a runway before takeoff. Marian

and I watched the resident as neither of us had ever previously witnessed the procedure. It seemed pretty simple The whole process took less than three minutes. I stood in silence as the mother was taken away by an attendant. My classmate Marian, who was always eager to learn new procedures, was more animated. She asked the resident, "Can I do one?" The resident paused momentarily, then nodded affirmation. Marian cautiously repeated the simple steps under the watchful eyes of the resident. Everything went smoothly. After Marian was done, she seemed even more energized. She was smiling and, after a brief moment, Marian turned to me. "Bill, why don't you do one?" The question took me off-guard. While I knew where I stood personally, I didn't want to appear judgmental. After all, wasn't the woman going to have the abortion anyway? What difference would it make who actually did the procedure? What would they think if I declined? Without further delay, I responded, "Sure, why not?" Over the

next few minutes, I completed the same steps as readily as had the resident and my classmate. I didn't think much about what I had done at the time. I don't remember even talking about it. If I had any feelings then, I must have pretty well stuffed them. No one else seemed bothered and thus why would I? I simply blended in.

As confused as I was in my thinking about abortion at the time, I was even more confused about contraception. Despite my Catholic roots, I was blind to any connection between artificial birth control and abortion. If I may have had a vague sense that the church frowned on birth control, I thought it was really more a matter of individual conscience, not a serious problem. In fact, shortly after Marlene and I married, she and I both liked the idea of an intrauterine device (IUD). It seemed like a carefree approach for both of us and yet the responsible way to act. I thought we should avoid children until I was out of medical school when I judged we could better afford being parents. When her request to have the IUD placed was refused by her doctor because of his concerns about such devices in women who hadn't yet had a baby, I was taken aback - even a bit angry. After all, what right did he have to impose his views or beliefs if Marlene and I were both willing to accept the risks? While Marlene and I were perturbed, we didn't persist with our request nor did we seek another opinion or care provider.

I didn't realize it at the time, but this incident was to serve as an important lesson that I now share with students, residents and practicing colleagues. Clearly, physicians have a profound impact on their patients. Their willing-

ness (or unwillingness) to share their values greatly influences decisions made by patients. When the IUD was subsequently taken off the market because of the significant morbidity (and even mortality) to thousands of women, I was thankful that her physician had not simply acted like "a vending machine."

I had no difficulty learning to prescribe the pill and to insert IUDs. In fact, in my second year of residency, I regularly staffed a family planning clinic for the County Health Department. I avoided imposing my judgment and even put IUDs in teens who had never been pregnant—as long as they knew the risks. Prescribing pills, even in older women who smoked, wasn't a problem for me either. Again, I just explained the risks. In fact, I prided myself on my openness to all options. Obviously, at that time in my residency I didn't appreciate the wisdom of my wife's doctor. Instead, I let my patients make some bad choices in a value-neutral climate.

In practice, contraception was a big part of what I did. I was good at procedures and learned to deftly perform vasectomies. I inserted hundreds of IUDs. One of my first questions before discharging a new mother after her delivery was "What kind of contraceptive do you want?" If a tubal ligation was desired, I assisted. If a mother wanted an abortion, I would try to offer other options, even encourage her to adopt or connect her with helping agencies such as Crisis Pregnancy or Birthright. Yet, if she persisted with her desire for termination, I would also help her make the connection with an abortionist. I followed the logic that I had grasped and internalized in that awkward moment in my third year of medical school—"Well, she is going to do it anyway and I may as well help."

Looking back, I was a regular practitioner of situational ethics. I made compromises that, while understandable, were nonetheless wrong. Still, I was

comfortable with myself and my practice. Attitudinal change would not come quickly to me

One morning about ten years ago, I was working in an urgent care facility. A 36-year old narcotic-abusing and alcohol-abusing woman suspected that she was again pregnant. She had previously been pregnant a total of six times. Three of her pregnancies had ended in abortions. The three that she had carried to term had been removed from her

ness to help my patient in any and all ways possible, but this time firmly stated that I was unable to help her obtain an abortion. The nurse's courage in living her beliefs had served as a model in helping me to be more consistent myself. Again, in retrospect, I felt a sense of relief. I had rejected my propensity to compromise my own principles.

Still, my practice continued to include other contraceptives as well as sterilization procedures. In fact, I was

*... I was taught to avoid judgments
and that I had no right to assert my own
moral views on others.*

care because of her neglect and continuing drug addiction. Her pregnancy test confirmed that she indeed was pregnant for a seventh time and she wanted an abortion. I encouraged her to look at other options. I mentioned support systems and agencies. I offered her free care for the pregnancy (and beyond). These options were rejected. She persisted in her desire to terminate her baby and asked for a referral. Reluctantly, I agreed to help and left the room.

In the hallway, I asked one of the nurses to assist her in "connecting" with an abortion facility. Before I could finish the sentence, the nurse responded, "I don't deal with that." I started another sentence, and, again she interrupted "I'm sorry I don't deal with that at all." Her response took me aback, yet I respected her stance. In fact, I agreed with it. As she walked away, I stood there in silence. I wondered why I was involving myself in what I thought was wrong.

I decided to change. I reentered the room and gently restated my willing-

one of the first physicians in our university practice to learn to insert progestin implants. If there were problems with these choices, I didn't let the conflict rise to a conscious level. On a personal level, my wife and I were increasingly aware of problems with birth control pills and had stopped using contraceptives in our own marriage. We also had joined a more orthodox Catholic parish where the norm among most couples with children was to avoid the use of contraceptives. At the same time, I continued to dispense contraceptives in my practice.

... About five years ago an epiphany occurred. Marlene and I attended a three-day conference ... [that] was devoted to an in-depth look at *Humanae vitae* Experts from around the country explained the theological, philosophical, and medical concerns related to all forms of artificial birth control as well as with birth control pills in specific. Within the first half-day of the conference, I understood the need to change. Birth control pills clearly induced a "chemical" abortion in some

conceptions. I could not clearly practice in a way that ignored this reality. Furthermore, I came to understand that the whole practice of artificial birth control was against God's plan for married couples. I knew that I had a decision to make. Having been given these new insights, I knew if I went on prescribing

pills, I would be inconsistent at the least and a hypocrite at worst. Alternatively, I could divest myself of any involvement in artificial contraceptives. But was this really a viable alternative? After all, I taught residents and medical students. What would they think? Dispensing contraceptives and family

planning procedures such as performing vasectomies had become a big part of my practice. On a personal level, would I be able to continue to teach? What would my colleagues think? I had a large family and I worried about the financial implication of such a decision. I was feeling nervous. I wrestled over the next two and one-half days of the conference. I was afraid to discuss my decision with Marlene, fearing that even a discussion of the issue might limit my options. I might be pressured to embrace a new way of practicing that I wouldn't be able to maintain or that I wouldn't be able to sustain us as a family.

Despite my fear and reluctance to even discuss the issue, I finally made a silent decision and commitment to myself. I would stop using the hormonal contraceptives that I recognized were abortifacient. What's more, I made the commitment to myself to not engage in any medical practice that was in conflict with the clear and consistent teachings

of the ... Church. This meant I would stop performing vasectomies, assisting with tubal ligation, and would even refrain from referring for any of these procedures. I had come to the recognition that I could not morally help another to do that which is inconsistent with God's plan for married couples. I

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was still nervous, but I was going to do my best to keep the resolution. To my surprise, the first patient who asked me for birth control pills was actually appreciative of my perspective. She didn't want to be taking anything that had even a remote risk of acting as an abortifacient. Furthermore, she was excited about the concept of NFP and thought her husband would be too. I eagerly responded to her interest and supplied her with information, community resources, and a follow-up appointment. Maybe the new approach wouldn't be as difficult as I thought.

Not so. Over the subsequent months, not all of my patients were as responsive. Some were frankly annoyed. In these cases, after recognizing their frustration, I would ask for their understanding and apologize for the error that they had been scheduled with me for the appointment. I would tell them there would be no charge for the visit. At the same time, having fully explained my personal and religious convictions, I gently but firmly told them I could not help them.

To this day, I've not yet encountered a patient who did not respect my position (just as I respect their option not to conform to my beliefs). While I have lost a few patients, I have gained many

more who seek me out because of the change in my practice. Despite my fears about the financial situation, the income that year (and subsequently) has actually been higher than it had been when I was dispensing artificial birth control! For me personally, a weight that I hadn't even recognized has been completely lifted. I think that I am more effective and certainly more consistent with my patients. I believe many couples in my practice have stronger marriages.

As an academic physician, I've even taken the risk of teaching NFP to residents and students. The title of my talk to them is "Natural Family Planning - The Forgotten Family Planning Option." In general, residents, students and even fellow faculty are astonished to learn that family planning and the spacing of children can be done as reliably with natural means as with hormones without any side effects!

In summary, my journey toward a fully pro-life position and medical practice has been long and a bit bumpy at times, yet I've never looked back. As I reflect on the roads traveled, I clearly see God's fingerprints at each junction. Once it was a resident's provocative question. Another time it was a colleague or a nurse who modeled a different way to practice. Finally, it was the profound witness for the Truth expressed in *Humanae vitae*. At each branch in the road, one of God's laborers helped me to be more consistent in applying my faith to my practice. As a result, I now strive to share my new and life-giving paradigm with all who will listen. I think I have become a brighter light to my patients and I'm grateful to each of the guides who He sent to help point the way for me. ■

This article is reprinted here with the permission of the editor. To order, contact: One More Soul, 616 Five Oaks Ave., Dayton, Ohio 45406, 1-800-307-7685; e-mail: OMSoul@juno.com; web site: www.OMSoul.com.

Looking for a Program for Clergy Education Days?

Sister Renée Mirkes, OSF, Ph.D.

Dr. Thomas W. Hilgers, founder and Director of the Pope Paul VI Institute, had always dreamed of including an in-house ethicist on his staff. He is passionate about the importance of articulating the philosophical and theological foundations that consistently undergird the educational and medical services of the Institute. In December 1995, I had graduated with my doctorate in theological ethics; five years prior to my doctoral program, I was a research fellow for the Pope John Center (now the National Catholic Bioethics Center), Boston. Both my training and my interest suited me for the position of ethicist for the Institute, and in January of 1996 Dr. Hilgers inaugurated the Center for NaProEthics (Natural Procreative Ethics) and hired me as its first director.

After assembling a prestigious board of advisors, we identified the vision, goals and objectives of the Center for NaProEthics. In a sentence, the ethics division of the Pope Paul VI Institute is dedicated to the articulation and dissemination of the moral vision of Catholic procreative and birth ethics through publications, consultations, and education (both course offerings and public speaking). I immediately plugged into the Catholic Leadership Conference (CLC) that had been part of the Institute's educational conferences for almost six years. I rounded out the workshop with lectures on the personalist theology of marriage and sexuality, the pastoral implications of NFP evangelization for diocesan clergy, and the content of pertinent Church documents germane to the mission of building strong family life in the Church. Al-

though the conference originally targeted priests, it was also eventually offered to diocesan and parish leaders in Family, Family Planning, and Respect Life Offices.

We found that priests were often interested in attending the CLC, but frequently their schedules did not permit them to be away from their parish duties for a five-day period of time. We decided that the Center for NaProEthics could facilitate things if I would go on the road and bring condensed versions of the CLC to priests where they were. This new venture had its distinct advantages. I could focus on an all-priest audience and I could custom-fit all of what I said to fit parish priests and the challenges of their ministry in the areas of marriage, family, and family planning. I could also provide a thematically integrated program that worked very well for diocesan clergy education days.

After presenting this day-long workshop for various dioceses, I am pleased to report that it has not only been well-received, but it has also brought with it its own set of graces for those attending. As one of the organizers for the Fargo diocesan clergy education days wrote, "Sr. Renee has laid more groundwork

for further education on procreation and birth ethics in two days, than we could accomplish in 10 years!"

If you or someone you know is in charge of the clergy education days for your diocese and is looking for an engaging and provocative topic, I would invite you to consider this program for your priests. Typically, the conference begins with a light breakfast. An introduction to the day is given by the diocesan bishop followed by the first session, "*Humanae Vitae: Exploring Its Landscape.*" The second session entitled "The Domino Theory Revisited," explores the relationship between the contraceptive mentality and other aspects of moral erosion within society. That is followed by lunch and the afternoon session, "To Be A Priestly NFP-Backer." The day ends around 3:00 p.m. All the sessions include time for questions and discussion. ■

Sr. Renée Mirkes, OSF, Ph.D., is the Director of the Center for NaProEthics at the Pope Paul VI Institute for the Study of Human Reproduction, Omaha, NE. Sr. Mirkes also provides similar day-long programs on the theme of the ethics of reproductive technologies (IVF, AI, ICSI, IUI, GIFT, etc). For further information contact: 402-390- 6600; 402-390- 9851, Fax; and E-mail, rmirkes@creighton.edu.

At the annual meeting in October of the Catholic Medical Association, DDP/NFP Special Assistant, Theresa Notare, was honored with the first Herbert Ratner, MD award for promoting Natural Family Planning. Theresa accepted the award on behalf of the NFP Coordinators and bishops who she serves.

Institut für Ehe und Familie: Austria

Johannes Josef Mandl

Who were our pioneers?

The Sympto-Thermal Method (STM), which consists of the observation of cervical mucus at the vaginal entrance and the observation of Basal Body Temperature was published in 1965 for the first time by Josef Roetzer, M.D. He is widely recognized as one of the world's leading authorities in the field of Natural Family Planning. He is a former public health physician and lecturer in pastoral medicine at the Universities of Innsbruck (Austria) and Regensburg (Germany) and the philosophical-theological Universities of Linz and St. Pölten (Austria).

In 1983 the Institut für Ehe und Familie (IEF) was founded by the Austrian Conference of Catholic Bishops. From the beginning a departmental section for NFP services was established.

From 1990 to 1993 the IEF ran a study about efficacy, acceptance and applicability of the STM. This study was accomplished in cooperation with the Deutsche Arbeitsgruppe NFP, Köln (Germany). Since 1989 the NFP-teachers have been instructed according to

the rules of the Deutsche Arbeitsgruppe NFP at the IEF.

The following is a summary of our rules for the Sympto-Thermal Method:

- Basal Body Temperature - A temperature shift is defined after there has been observed three consecutive daily temperature readings and each of these is higher than the previous 6 low temperature readings. The 3rd higher temperature reading must be at least 2/10° Celsius higher than the highest one of the preceding 6.
- Peak mucus symptom - The peak (day) of the cervical mucus (symptom) is the last day on which mucus of the best quality is observed.
- Assessment of the post ovulatory infertile days - The infertile period after ovulation starts either in the evening of the third day after the peak mucus symptom or in the evening of the third higher temperatures, whichever comes last.

- Exception 1 to the temperature-rule - If the 3rd higher temperature is not 2/10° C. higher, you should wait for a 4th temperature. It does not need to be 2/10° C. higher, but still higher than the former 6 low temperatures.
- Exception 2 to the temperature-rule - Between the 3 necessary higher temperatures one reading can be under or upon the line, this need not be taken into account. If 2 readings are under or upon the line, you should redefine 6 low temperatures.

The exceptions 1 and 2 cannot be combined.

How do we train our NFP-teachers?

The courses of teacher-instruction take twelve days (6x2 days - on week-end) and close with a written and oral examination. The NFP-teachers have to attend further training regularly, at least twelve hours each year.

The NFP-teachers instruct people, who are interested in STM in a 3 hour-course and two follow-ups until the women or the couples have become confident in their use of the method and are able to use it independently.

How do the Church and government support NFP services?

The Austrian Conference of Catholic Bishops ensures room facilities and employment of two NFP-instructors. Additional counselling and instruction activities are financed by subsidies of the ministry for family and youth.

Some of our problems

Medical students get little or no information about the STM. Gynaecologists still believe that NFP is not effective. Health insurances do not pay for the instruction of women in STM.

We have not enough money to start further scientific studies. ■

POSITION AVAILABLE

Seeking to add a gynecologist in a two physician, four certified nurse-midwife collaborative, pro-life OB/Gyn office. NFP strongly promoted and supported. Free-standing birthing center on campus of office located in quiet residential area of west-central Phoenix, AZ. Practice serves substantial numbers of Phoenix's growing Hispanic population, but also draws patients from the entire Valley of the Sun. Office is easily accessible by interstate and located close to primary hospital. Contact: Jim Statt, M.D.; 602-997-1888; E-mail, cstatt1944@aol.com.

Making Church Teachings on Responsible Parenthood and Chastity Relevant for Youth

Brad Klingele

It was a standard youth ministry night at St. Maria Goretti. The teens, mostly freshmen and sophomores, were milling around, talking and laughing. Since this was only the second year of youth ministry at our parish, and my second year as a youth ministry coordinator, I wondered how my kids would receive our guest speakers. A hip and holy young married couple had agreed to give an hour-long presentation on the topic of chastity.

During their presentation, the couple was going to talk about their dating mistakes, and discuss chastity using concrete illustrations, audience participation, Scripture, and a question and answer session. I was especially nervous because they were going to challenge the group to more than just abstaining from intercourse. They proposed limiting physical intimacy to a five-second kiss! After the presentation, I asked my teens for feedback on the advice they had received. What I discovered may shock you, as it did me--most of the kids loved it!

The enthusiastic response given by those teens to the challenge of living chastely is an example of the openness of our youth to the wisdom of the Church, when it is perceived as relevant to the challenges they face in their lives. This applies to all areas of morality, including--but by no means limited to--sexuality. Reaching our teens before they have established a pattern of behavior contrary to the Gospel is the key to good formation. By discussing dating ethics with freshman and sophomores, we offer insight into issues of

real concern to them. They are interested in dating, and are on the brink of, but have not yet crossed into, major sexual temptation. Timing, as they say in comedy, is everything. It is with this in mind that I would like to discuss the importance of taking an integrated approach to education in sexual morality, using the Church's teaching on the nature of sexual intercourse as an integral part of preparing our young people for understanding and living out the vocation of marriage.

If we truly believe that Church teachings are a gift, then we must begin preparing people to receive that gift at an early age. A specific and concerted effort to lay the philosophi-

cal, moral, and theological foundation for the sacrament of marriage (beginning in early childhood and continuing through adulthood) is absolutely necessary if Church teaching is to be accepted as a gift rather than a burden.

In many parishes, the first time people receive a coherent explanation of the Church's teaching on sexuality, along with basic NFP information, is in marriage preparation. By this point, many couples have rigid expectations of the life-style they want--expectations which can all too often conflict with an openness to God's desires for them and their family.

We need to teach young people that marriage is about respect for their partners and respect for life. We need to teach

CHASTITY EVENTS & RESOURCES

Abstinence: Mission Possible — October 21-23, 1999

The National Abstinence Clearinghouse presents its 1999 conference, "Abstinence: Mission Possible" in Raleigh, NC. Co-hosted by the Pregnancy Life Care Center, the conference will focus on helping kids live a chaste life in a sex-saturated society.

National Abstinence Clearinghouse Resource Published

A new Supplement to the Directory of Abstinence Resources has just been published by the National Abstinence Clearinghouse. It includes a listing of videos, books, curricula, speakers, brochures and promotional items.

National Abstinence Clearinghouse
801 East 41st Street
Sioux Falls, SD 57105
(605) 335-3643
website, www.abstinence.net

them that NFP not only works, but that it can help them build a stronger marriage. And we need to give young people these essential values and tools while they are still in their formative years. By the time teens have become adults, it is too late to teach them the importance of marriage and the sanctity of sexual intimacy. It has, by then, become tremendously difficult to convey the essential blessing that children are to a family, and to dispel the many

are good introductions to discussing concepts of personal dignity and respect for others. These issues are key, because kids who learn that it is destructive to tease others in order to bolster their own self-esteem will likely see that it is wrong to use others for their own sexual pleasure, as well. Middle school students can also learn about how to build lasting friendships, and can begin to explore ways of showing respect for the opposite sex.



*Let us not delay in reaching out
to our children at an age when they
are searching for answers to life.*

myths surrounding NFP. If we who teach in the Church fail to convey these values to our children, then we teach by our silence that these values are secondary at best.

So what are we to do? Should we be explicit with elementary or middle-school youth about the methodology of NFP? Certainly not. What we do need is an age-appropriate, long-term plan to build a foundation upon which marriage is understood as a sacramental undertaking. In elementary school, students must have entire class hours devoted to learning how to be good family-members, discussing ways to be faithful Christian kids in their own households. Discussions of the parenthood of God, and the ways in which Jesus loved people, are also necessary starting points.

In middle school, students can explore what Christ calls them to in their individual friendships. Learning to avoid teasing other kids and gossiping

In high school, sexuality, especially the cycles of fertility and infertility, should be studied in order to foster an appreciation for God's amazing design. (*The detail which one gives in class depends, of course, on the readiness and maturity of the audience.*) Gentle and frank discussions about the temptations faced at each age level will empower students to set holy standards, and to keep each other accountable. Explicit encouragement of prayer and chastity by friends or even by teams is a great way to strengthen resolve. The sacraments of Reconciliation and Eucharist should also be emphasized as great sources of grace in fighting temptation.

No program of chastity education will work without a firm foundation of faith. We must consciously act, educate, and plan with the goal of calling both our youth and their parents to a conversion of heart and mind. Students who identify themselves as disciples of

Jesus are much stronger in their resolve to be chaste, and more likely to form respectful, loving relationships with others.

The most important unit for formation in this area is the family. Indeed, the Catechism calls the family a domestic Church, which has an evangelizing and missionary task (#2204 & 2205). The Church must give parents the tools to educate their sons and daughters on chastity and the sacrament of marriage. No matter how good a youth program is, it can only augment—not replace—a faithful family. As much as possible, mothers and fathers should be brought in to discuss these topics with their children, and separately with each other.

In programs, when it comes to choosing catechists and/or guest speakers, I have found that students learn best from people of deep faith and conviction who are one stage ahead of them in life. Middle school students want to hear about the struggles that high school students have faced, high schoolers want to hear from college students, and so on. Lectures and text books are a small part of effective pedagogy. Audience participation, effective use of media, and open discussion are what I have found draw students into conversation and ultimately, conversion. Jesus yearns to give us life: "I have come so that they may have life and have it to the full." (Jn 10:10). Let us not delay in reaching out to our children at an age when they are searching for answers to life. If we wait until they are adults, our silence will be filled by other voices, and the powerful, life-giving message of Jesus will not be a voice they can easily hear. ■

Brad Klingele is a Youth Minister in Madison, Wisconsin.

COORDINATOR'S CORNER

Working Within the System

Despite solid progress in many dioceses in the country, more than half of diocesan NFP programs continue to be "hidden" and/or operate in an embryonic stage. This column regularly features insights as to how to change that picture. An important contribution to this discussion occurred during the NFP meeting after the March '99 Convocation. Donna Dausman, Family Life Director for the Diocese of Springfield, IL and Stella Kitchen, NFP Coordinator for the Diocese of Harrisburg led a discussion on integrating NFP within the diocesan structure. The discussion focused on four categories: overcoming isolation; having a clear vision; being realistic about obstacles; and planning a strategy. The following is a summary of both their presentations and the discussion with participants.

No NFP Program is an Island!

Understanding that diocesan NFP ministry may often operate from a small room tucked away in a lonely corridor in the local Catholic hospital or from the coordinator's kitchen table, Donna and Stella discussed the implications of locale. On the one hand, being in a quiet environment may facilitate work. Although not so quiet, some coordinators say they like to work out of their homes because it keeps the priorities of family and ministry in balance. However, there are a number of negatives to "out of the way" offices and cozy home settings. These environments can easily foster isolation. Isolation takes on many forms. It can simply and effectively keep NFP physically hidden from the staff of other Church or hospital departments. How can the director of education, for example, know who the NFP coordinator is if the coordinator is never around? Isolation can also cause a coordinator to become lazy or even territorial. "I have

only myself to report to." "I don't really need to meet that deadline." And even more problematic, isolation can cause the NFP coordinator to create an emotional distance from the very people whose help is needed to communicate this truth to the faithful. "If I don't join any related diocesan ad-hoc committees, how will the NFP perspective be represented?" Sometimes isolation is not the choice of the NFP coordinator, but a matter of inheritance: "It's always been that way." Or, "We aren't wanted at that meeting anyway." This is one of the most difficult of isolation problems, but it can be overcome.

Part of moving NFP ministry into the mainstream of diocesan life begins with understanding where NFP currently fits into the big ministerial picture. If your understanding needs to be sharpened, begin with a meeting with your immediate supervisor. Ask questions no matter how naive they may seem to you. If not already included, ask to take part in department staff meetings. Without losing sight of your own work, be in-

terested in the work of others—in this way solid relationships of support can be forged. Offer to work on diocesan committees where you can bring your NFP expertise to the table. And don't be shy to request a change in location of your work space—even if you have to get on a waiting list. The point is, make sure your supervisor knows that you want to become part of the team and



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that your ministry is important enough to require a desk! Also, "blow your own horn." Give your ministry some publicity. Do articles for the diocesan newspaper. Design bulletin briefs for parishes. Send an annual report of NFP activity to the bishop and thank him for his support.

It's About Clarity

Despite the fact that few Catholics seem to want NFP information, coordinators need to be clear that it is the Church's teachings on human sexuality, conjugal love and responsible parenthood that they are communicating—not merely their own beliefs. The Church's teachings belong to everyone. Those who serve in NFP carry the responsibility to help bring NFP into the mainstream of Catholic life. In doing so, it is important to avoid projecting a negative tone or style. It is therefore of

the utmost importance for the NFP minister to periodically evaluate the teaching and communication abilities of herself and her teachers.

Keeping in mind the delicate nature of these teachings, the messenger must search for fresh phrases or "sound bites" that draw people in. Consider hiring a communications specialist to evaluate you and your teachers. Sometimes, only through an objective third party can we "hear" how we are speaking.

The Good, Bad and Ugly

Being realistic about the world in which we minister and one's individual situation is critical. We know, for example, that the contraceptive mentality is deeply inbedded in our society and that sex itself has been grossly diminished to little more than a pleasurable activity. As if to add insult to injury we also know that NFP suffers from insufficient funding, too few teachers, and a lack of support from the medical community and even from some of our priests. That said, as difficult as the situation is, it is important not to lose our Christian hope. On the plus side, more than 90% of the dioceses in our country include NFP as part of marriage preparation programs, and 22% allocate up to 45 minutes for an NFP presentation. Outreach education done

in a professional and positive way (without overselling) is one way in which to sweep aside ignorance. It's also a way to identify people who could become teachers or supporters of your work.

Planning a Strategy

When time and resources are limited, planning is everything. Too often, coordinators are so overwhelmed with scheduling classes and managing clients that future growth is completely left to the Holy Spirit. While faith is the foundation of our work, however, keep in mind that God also helps those who help themselves. In trying to capitalize on structures already in place in your diocese, take a look around and list all the appropriate avenues in which you can take to the road. Good old fashion personal contact is the number one way to let people know who you are, what you offer, and how you can be of service.

So, where to begin? Look at the diocesan yearly calendar. Every diocese has meetings for priests (usually grouped in Deaneries), deacons, marriage preparation teams, directors of religious education, etc. Ask for an invitation to such meetings, either to provide an in-service, or just to introduce yourself and answer any questions about NFP.

Identify your best NFP teachers, prepare them to give witness talks and send them to key parishes. Also encourage them to volunteer for marriage preparation teams or other important diocesan activities. Strengthen your outreach education. Offer mother/daughter and father/son programs for middle school children, and chastity programs for youth and young adults. With those in charge of marriage preparation and RCIA, help design enrichment programs for parishes. Provide seminars for health care personnel. Provide education programs for priests and deacons. Meet with diocesan seminararians.

Remember—be seen—be clear—location and appearance do matter. The listener picks up only 7% of the message through words; 36% of the message is communicated through voice tone; 55% is communicated by body posture. Be heard—it ain't what you say, its the way you say it. Without being a pest—be at every diocesan event. Be available, be flexible. And above all, be prayerful (but remember to distinguish between your personal piety and that of others). In these ways you will know that at least you have done all that is humanly possible to move NFP ministry into the mainstream of diocesan life. ■

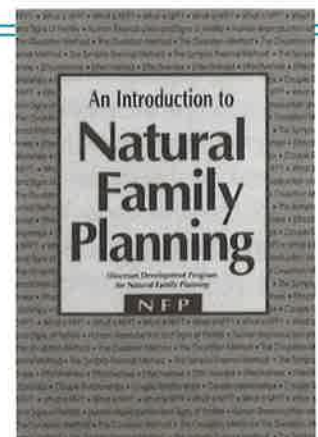
PRACTICAL NEW RESOURCE

An Introduction to Natural Family Planning by Richard Fehring, DNSc, Stella Kitchen, and Mary Shivanandan, STD is available for purchase.

This 20 page booklet provides basic information on NFP, Human Reproduction, the Ovulation Method and the Sympto-Thermal Method. A brief chapter highlights the benefits of NFP to the couple's relationship. A neat feature is a one page reference of all the nationally recognized NFP organizations.

Written for the reader who knows nothing of NFP, this attractive booklet is ideal for basic informational sessions and marriage preparation. Appropriate for display in a church vestibule, it would also be a good resource to place in the lobby of doctors' offices.

Prices: \$1.50 each; 10-49, \$1.25 each; 50-100, \$1.00 each; 100 +, 75 cents each. Item #9921
Orders, contact the Secretariat for Pro-Life Activities: 202-541-3070; Fax 202-541-3054.



NEWS

BRIEFS



ANNOUNCEMENTS

CALIFORNIA NFP On The Air can be heard monthly on KKMC, 880 AM in the Monterey, CA region. The show airs at 10:00 AM on the second Saturday of each month.

20th Anniversary of *Familiaris consortio* will be celebrated in the year 2001. Plans for a Summer Convocation are underway by the NCCB's Secretariats for Pro-Life Activities and Secretariat for Family, Laity, Women, & Youth. Watch this publication for further information.



EVENTS

August 10-12. The Couple to Couple League sponsored a seminar for priests about Catholic teaching on sexuality and how NFP complements God's plan for families. *Contact: CCL, P.O. Box 111184, Cincinnati, Ohio 45211-1184; 513-471-2000; FAX 513-557-2449.*

September 13. The Abundant Life, a talk show on EWTN, will feature a segment entitled: *Saying No to Life: Women and the Culture of Death.* The program will include Bishop Robert Carlson of Sioux Falls and gynecologists, Drs. Paul Hayes and Kathleen Raviell. Also in this show is Fr. Daniel McCaffrey, who will provide a plan to educate parishioners about NFP. The Abundant Life series is typically repeated. *Consult your local TV listing for the date and time.*

September 17-19. La Leche League of Virginia held its 1999 Area Conference in Fairfax, VA. *Contact: Website <http://wizard.net/~carmenkay/act.html>*

October 11-15. The Pope Paul VI Institute is sponsoring a Catholic Leadership Conference in Omaha, NE. Designed for priests, religious, deacons, physicians, family life directors and others interested in the theological, philosophical, and practical aspects of NFP. *Contact: Pope Paul VI Institute, NFP Education Department, 6901 Mercy Road, Omaha, NE, 68106; 402-390-9168.*

November 6. The Diocese of Cleveland will hold its annual Diocesan NFP Seminar at St. John West Shore Hospital in Westlake, OH. Dr. Erik Odeblad, M.D., Ph.D. will present his current research of the biology of the cervix. *Contact: Rose Jacobs, NFP Coordinator, Diocese of Cleveland, 1031 Superior Avenue, Cleveland, OH 44114; 216-696-6525.*

December 3-5. The Archdiocese of Chicago and the Diocese of Joliet are co-sponsoring a Spanish teacher training seminar for teachers of the Billings Ovulation Method in Romeoville, IL.

WOOMB-Mexico will provide the faculty. *Contact: Lupita Sorich at 815-932-9275 or Maria Garcia at 312-751-5298.*

January 7-9, 2000. The Couple to Couple League is sponsoring a physician's seminar in Cincinnati, OH. Designed for professional health care individuals, this seminar will track the development of modern NFP, medical

implications of birth control, treatment of couples with marginal fertility, outreach into the Hispanic community and more. *Contact: Ginny Niehaus or Patrick Homaw, CCL P.O. Box 111184, Cincinnati, Ohio 45211-1184; 513-471-2000; FAX 513-557-2449.*

February 22-26, 2000. Northwest Family Services will sponsor an opportunity for Provider Education and Certification in the Sympto-Thermal Method of NFP at The Providence Medical Center in Portland, OR. Pre-registration is required. *Contact: Rose Fuller, Executive Director, Northwest Family Services, 4805 N.E. Glisan Street, Portland, OR 97213; 503-215-6940.*

March 25, 2000. The Family Life Office of the Archdiocese of Los Angeles is the site host for the Seventh Annual CANFP Conference. *Contact: CANFP, 877-33-CANFP; <http://www.camfp.org>.*

March 25, 2000. A conference on Society, the Family and Woman's Reproductive Health will be sponsored by the Institute for NFP, Marquette University, College of Nursing and the Archdiocese of Milwaukee Covenant Health Systems. It will be held at Marquette University, Alumni Memorial Union. Faculty includes: Theresa Notare, MA, Diocesan Development Program for NFP, NCCB, Washington, D.C.; Rev. Kevin T. Fitzgerald, S.J., PhD, Research Associate, Dept. of Medicine and the Medical Humanities Program, Loyola University Medical Center, Chicago; and John S. Grabowski,

PhD, Associate Professor of Moral Theology, Catholic University, Washington, D.C. Contact: Richard Fehring, DNSc, RN; Institute for NFP, Marquette University, College of Nursing, Milwaukee, WI 53226; 414-288-3838.

March 31-April 2, 2000. Illinois NFP Association Conference will be held at the Bishop Lane Retreat Center in Rockford. Speakers include: Paul Hayes, M.D.; Alice and Jeff Heinzen, NFP Coordinators of the Diocese of LaCrosse, WI; and Mary Pat Van Epps, NFP Coordinator, Diocese of Memphis, TN. Contact: Roger Dausman, President, INFPA, 9230 South Winchester, Chicago, IL 60620; 312-238-6248.

June 28-July 2, 2000. The European Institute of Family Life Education, in cooperation with CAMEN and the University of Milan, is sponsoring a conference focusing on Natural Family Planning: Future Role and Developments. Contact: Mariella Lobefalo, CAMEN Via S. Antonio, 5 20122, Milan, Italy.

June 25-28, 2000. Couple to Couple League will hold its Convention 2000: Lead Us In Truth, in Mitchell, KY (across the Ohio River from Cincinnati). In addition to speakers and workshops, there will be activities for families traveling with children. Registration forms will be in the September-October 1999 issue of CCL Family Foundations. Contact: CCL (address as above) or e-mail, ccli@ccli.org.

Questions or Comments?

Call us at
(202) 541-3240

We look forward to hearing from you!



RESOURCES

The Archdiocese of Boston's Office of NFP has two newly developed resources. One is a 16 minute video entitled "Planning Your Family Together" which could be used with engaged couples as an introduction to NFP. Several couples share their experiences of living NFP, along with a pastoral reflection from a priest. The second resource is a packet containing facts about NFP, bulletin inserts, and other information such as homiletic suggestions. This packet will be available on diskette so that individual dioceses can tailor it to their diocesan requirements, logo, etc. Contact: Nancy Keaveney, Archdiocese of Boston NFP Program, 2121 Commonwealth Ave., Brighton, MA 02135; 617-783-2451.

Statistical Proceedings of the Seminar: Human Fertility Regulation, Demographic and Aspects is available. The proceedings are from a seminar held in Verona in 1997 sponsored by the Italian NFP Centers' Confederation and the University of Verona. The aim of the study was to present an overview of the prevalence of conception regulation methods and to discuss data

and methodologies on use-effectiveness of NFP. Edited by Sandro Giroto & Franco Bressan, this bi-lingual text (Italian and English) is published by Edizioni Libreria Cortina, Verona. Contact: Confederazione Italiana dei Centri per La Regolazione Naturale Della Fertilità, Largo S. Nazaro, 1-37129 Verona; Tel. & FAX 045-8031090.

The Medical Institute for Sexual Health has a website available to explore answers to common STD questions, find out about resources for adults and teens, and link to other health related websites. Contact: www.medinstitute.org.

Women Affirming Life will offer a study guide in the spring of 2000 on the Theology of the Body, written by Mary Shivanandan, STD. This guide will offer a unique opportunity to study and reflect on the meaning of the Holy Father's teaching. Dr. Shivanandan's book, *Crossing the Threshold of Love: A New Vision of Marriage in Light of John Paul II's Anthropology* was published by Catholic University Press in April. Contact: *Women Affirming Life*, PO Box 35532, Brighton, MA 02135; (617) 254-2277.



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Diocesan Development Program for Natural Family Planning.
A program of the NCCB Committee for Pro-Life Activities.

Most Rev. James T. McHugh, Director • Theresa Notare, Editor

The *NFP Forum* is published biannually. Its purpose is to serve the Roman Catholic diocesan NFP programs of the United States through offering: national and international news of NFP activity; articles on significant Church teachings, NFP methodology and related topics; providing a forum for sharing strategies in program development. Contributions are welcomed. All articles may be reproduced unless otherwise noted. For more information contact the editor.

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